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**Thousands Walk At Jones Beach For Mental Health**

People of all ages came to Jones Beach on May 5th to walk for mental health at the 2018 NAMIWalks Long Island/Queens. To date over $150,000.00 has been raised. Fundraising continues until July 5th. Proceeds contribute to NAMI (National Alliance on Mental Illness) Queens/Nassau programs and services.

NAMIWalkers posted personal reflections on the #WhyIWalk banner. “I WALK because NAMI saved my daughter’s life and saved mine. I WALK to help secure my son’s future as we get older. I WALK because I want to be a voice for those who can’t speak for themselves. I WALK because I am glad I have medication to control my depression. I WALK because I demand change.”

Empowering stories of inspiration, resiliency and how NAMI has improved lives were shared. “NAMI Queens/Nassau’s Family to Family class has changed my life. I have...”

*Continued on page 5*
## Classes & Groups

Please visit our website for up-to-date program information. To register please call or email Group & Class Leaders as well as register on our website, www.namiqn.org

### SUPPORT GROUPS

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<tr>
<td>Family Support Group</td>
<td>Carol Ann Viccora, (516) 221-6168 &amp; Dorothy Borgese</td>
<td>3rd Tuesday of each month 7:00—9:00 p.m.</td>
<td>St. Raphael’s Church, East Meadow Please call for details</td>
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<tr>
<td>Whole Family Support Group</td>
<td>Ellen Ritz, RN (516) 330-9778, <a href="mailto:el.ritz@yahoo.com">el.ritz@yahoo.com</a> &amp; Melanie Singh &amp; Jeremy Israel</td>
<td>2nd Wednesday of each month 7:00—9:00 p.m.</td>
<td>Unitarian Universalist Congregation at Shelter Rock 48 Shelter Rock Rd, Room 15, Manhasset</td>
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<tr>
<td>Whole Family Support Group</td>
<td>Ellen Ritz, RN (516) 330-9778, <a href="mailto:el.ritz@yahoo.com">el.ritz@yahoo.com</a> &amp; Amanda Gratta &amp; Jeremy Israel</td>
<td>4th Wednesday of each month 7:00—9:00 p.m.</td>
<td>Unitarian Universalist Congregation at Shelter Rock 48 Shelter Rock Rd, Room 15, Manhasset</td>
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<tr>
<td>Co-Occurring Disorders</td>
<td>Bernie Cohen</td>
<td>Call the office (516) 326-0797 or (718) 347-7284 Registration is required</td>
<td>Unitarian Universalist Congregation at Shelter Rock 48 Shelter Rock Rd, Room 15, Manhasset</td>
</tr>
<tr>
<td>Peer Support Group</td>
<td>Jeremy Israel &amp; Ellen Ritz, RN; <a href="mailto:el.ritz@yahoo.com">el.ritz@yahoo.com</a></td>
<td>Email <a href="mailto:el.ritz@yahoo.com">el.ritz@yahoo.com</a> for more information and dates</td>
<td>NAMI Queens/Nassau office 1981 Marcus Ave, Suite C117 Lake Success</td>
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### CLASSES

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<tr>
<td>Family to Family</td>
<td>Co-Leaders Theresa Stahling 516-285-7546 Jeanette Wells 347-441-0572</td>
<td>Saturdays, June 2, thru August 18, 1:30-4:00PM Registration is required</td>
<td>The Greater Allen AME Cathedral of New York, 110-31 Merrick Boulevard Jamaica, NY 11433</td>
</tr>
<tr>
<td>Family to Family</td>
<td>Co-Leaders Valerie Newman 516-514-5183, Camelle Charles 646-283-9272</td>
<td>Tuesdays, June 5 - August 21, 6:00 - 8:30 PM Registration is required</td>
<td>Queens Hospital Center 82-68 164 Street Pavilion Building Jamaica, NY 11432</td>
</tr>
<tr>
<td>Family to Family</td>
<td>Leader: Ellen Ritz, RN, 516-330-9778 or <a href="mailto:el.ritz@yahoo.com">el.ritz@yahoo.com</a></td>
<td>Tuesdays starting September 25th from 6:30pm-9:00pm</td>
<td>Unitarian Universalist Congregation at Shelter Rock 48 Shelter Rock Road, Manhasset, NY 11030</td>
</tr>
<tr>
<td>Peer to Peer Class</td>
<td>Contact Ellen Ritz at <a href="mailto:el.ritz@yahoo.com">el.ritz@yahoo.com</a> or <a href="mailto:office@namiqn.org">office@namiqn.org</a> for more information</td>
<td>4 sites in Queens &amp; Nassau</td>
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### OTHER

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<tr>
<td>Spirituality Group</td>
<td>Chaplain Van Frankel &amp; Ellen Ritz, RN, Coordinator (516) 330-9778</td>
<td>Please check namiqn.org for date and time</td>
<td>Unitarian Universalist Congregation at Shelter Rock 48 Shelter Rock Road, Manhasset, NY 11030</td>
</tr>
<tr>
<td>Zucker Support Group</td>
<td>Hillside Hospital Social Worker</td>
<td>3rd Wednesday of each month 5:00 p.m.</td>
<td>The Zucker Hillside Hospital Sloman Auditorium 266th St &amp; 76th Ave, Glen Oaks</td>
</tr>
<tr>
<td>Caring &amp; Sharing (South Asian population)</td>
<td>“Raghu” Raghavendran (516) 944-8537</td>
<td>3rd Saturday of each month 10:30 a.m.</td>
<td>YIGG New Hyde Park</td>
</tr>
<tr>
<td>YOGA before our NAMI-QN Monthly Meeting</td>
<td>Email <a href="mailto:el.ritz@yahoo.com">el.ritz@yahoo.com</a> for more info</td>
<td>3rd Wednesday of each month 6:30PM before NAMI-QN Monthly Meeting at 7PM</td>
<td>The Zucker Hillside Hospital Sloman Auditorium 266th St &amp; 76th Ave, Glen Oaks</td>
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NAMI Peer-to-Peer Classes will be given at several sites including Queens and Nassau. Peer to Peer is a mental health, wellness and recovery program open to any adult (18+) with a mental health condition. It provides participants with education, skills and support to enhance their lives. Participants learn how to strengthen relationships, balance changing health care needs and better understand their mental health and recovery.

NAMI Peer-to-Peer is facilitated by a team of trained peers who make mental health and wellness a priority in their daily lives. They share information, facilitate discussions and teach participants new skills that lead to self-awareness and personal growth.

NAMI Basics
This is the national education program for parents and other family caregivers of children and adolescents experiencing mental health conditions. These caregivers face unique challenges, such as overcoming social stigma, managing complex family dynamics and navigating the school system. This program is an adaptation of the evidence-based program NAMI Family-to-Family. These classes will be soon offered.

NAMI Ending the Silence (ETS)
ETS is a 50-minute prevention and early intervention program that engages youth in a discussion about mental health. Teens learn to recognize the early warning signs of mental health conditions and learn what to do if they or someone they know is showing these signs. The chance to hear directly from a young adult with a mental health condition dispels myths, instills a message of hope and recovery and encourages teens to reduce stigma.

Youth have the opportunity to ask questions of family members and individuals experiencing mental health conditions. By engaging teens in a discussion about mental health conditions among their peers, youth dealing with mental health issues realize they’re not alone. A committee is already working on scheduling presentations in schools during the fall.

NAMI In Our Own Voice (IOOV)
IOOV aims to change the attitudes, preconceived notions and stereotypes about how people with mental health conditions look and act. The IOOV presentation includes personal testimony, a video, and discussion between the presenters and the audience. This is a one-time presentation that can range from 60 to 90 minutes, given by two trained presenters.

Continued on next page
The presenters describe their experience of having a mental health condition. Through sharing their story, presenters become advocates in their community, communicating messages that are powerful and heartfelt.

Their testimonies show audiences the individual, human side of mental health conditions and share how people can recover and reclaim their lives. Presenters gain feelings of acceptance and achievement by leading this program. Our IOOV is active and continues successfully.

**NAMI Family-to-Family**

NAMI’s flagship program, NAMI Family-to-Family changes lives. The 12-session course offers insights into the impact mental health conditions have on the entire family. The curriculum helps family members of people with mental health conditions learn a wide range of biomedical information and understand how these conditions affect their loved ones. It combats stigma and promotes healing. Participants improve their self-care and communication skills, learn problem-solving techniques and how to better advocate for their family member. These wonderful life changing classes have been at various sites in both spring and fall seasons and continue very successfully to attract full classes.

**Socialization Program**

A new Socialization Program is currently being formed. This is about connection, making friends and having fun for people who are struggling with a mental health disorder. We are also looking for suggestions on what to name this new socialization group as well as we want your input on activities you are interested in. We welcome families’ participation. There are many new faces. This is about you and for you!

**Spirituality Group**

Spirituality Group is continuing with Chaplain Van Frankel inspiring much thought and reflection.

**NAMI’s message is:**

- Mental health conditions are medical illnesses like any other physical illness
- Mental health conditions are not anyone’s fault or something to be ashamed of
- There are specific, observable early warning signs of mental health conditions
- You are never alone and there are many resources you can turn to for support and information
- Recovery is possible and there is hope

Much thanks to everyone who helped make our walk one of the best ever. Thanks to a wonderful Board of Directors, a new office staff, a great walk manager and all of you who volunteer and support NAMI QN. You all make a difference in giving hope and changing lives. I am honored to be your President. Thank you.

NAMI is here for you and is blessed because you are part of NAMI.
NAMIWalks Long Island/Queens

Thousands Walk At Jones Beach For Mental Health

learned new strategies that help me better relate to my son. For the first time in years I have hope, and a caring community. I never thought things could improve but I see first-hand that when one-person changes, the entire family dynamics change,” shared Laura Affa, NAMIWalks LI/Queens volunteer and mother of a son with mental illness.

Individuals, business owners, corporations, schools, hospitals, organizations and agencies partnered with NAMIWalks showing a commitment to helping those impacted by mental illness. Students from Port Washington, Team Port Voices, led by NAMI Queens/Nassau board member and Weber MS teacher Linda Manzo exceeded their goal, raising $13,223.00.

“I am excited about all the new programs and outreach we are doing for so many who are struggling and their families,” explains Ellen Ritz NAMI Queens/Nassau President and support group leader. Team Ritz raised $12,323.00.

Photos continue onto the next page.
Visit our website www.namqn.org and our Facebook page for a slide show of many photos!
A childhood immersed with mental illness especially one with two parents affected with schizophrenia was far from a desired childhood. Definitely not a childhood I would voluntarily wanted to endure. This was a predetermined fate, one that I was destined to sustain. A fate that not only left me feeling in isolation to my counterparts, it left me with feelings of melancholy, neglect, and agonizing perplexity. Why did my childhood have to be en-wrapped with such an abundance of emotional upheaval and dysfunction? Why couldn’t I have normalcy? Normalcy was what I craved, what I so desperately wanted to attain. As a child I was left feeling like a complete aberration, living with the unspoken clandestine truth and stigmatization of schizophrenia, my family secret.

What does schizophrenia look like? Schizophrenia has no look, its boundless in its outward manifestation. My parents looked like any other person you would see. Mental illness has no face, no tangible identifying quality; it walks among us surreptitiously in daily life unnoticeable till aberrant behavioral manifestations unveil. Schizophrenia is a mental illness, a neurological disorder not the entity of an individual.

I grew up with two parents with schizophrenia. My father skillfully combated his mental illness with medication intervention. Life always displays some form of dichotomy light coupled with darkness. There were grave experiences in my childhood dealing with my fathers emotional deficiencies, his hording fixation of his enshrined artwork which border lined on obsession, his frequent erratic behavior and his penetrable volatile mood swings. My father’s illogical thinking patterns were hard to endure at times. His inability to sustain consistent work, hygienic issues or inability to emotionally nurture or guide me in the proper way all-aiding in arduous childhood. Despite the shortcomings of my father’s mental illness there was great-embedded character, fortitude and personal tenacity, which has help shape and cultivate the person I am today. My father is a man with a very gentle, compassionate, loving side, impassioned about his appreciation for art and his family. I have a profound admiration of my father for his mental fortitude in combating a disease like schizophrenia is formidable.

I was unfortunate to have lost my mother at 15 to schizophrenia. My mother’s paranoia became all encompassing, to the point where she completely abandoned and estranged herself from my sister and me. My European born and raised mother fleeled back to Europe her origin to be with family later to estrange from them as well. Although there were prior behavioral manifestations the sudden onset of what would begin the loss of my mother commenced with her in fear her food was being poisoned. Her paranoia deepened to the point where she entered a manic state leaving our home and becoming homeless, aimlessly walking the streets of long island, unhygienic, washing her undergarments in public bathrooms, stealing food from local grocery stores. These experiences left grave imprints on my childhood. There were numerous attempts to stabilize my mother’s mental illness with medication but she refuted and thus her mental illness exacerbating to the point we lost her. I was forced to take on a maternal role to care for my younger sister. A woman I knew as my mother was able to completely mentally detach from my sister and myself. Twenty-two years later I have not received a letter nor heard from my mother. Somber to say but I don’t even know if she is still in existence.

Life takes us on a labyrinth path without clear understanding of the purpose of our journey, which subtly reveals itself over time. As a child of two parents with schizophrenia this seemed like a cruel fate why me? As I reflect as an adult my arduous enigmatic childhood has been my greatest gift. When given any hellacious circumstance to endure you always have two options sink or swim, self-victimization or the choice to self cultivate. I chose the latter. Today I live shameless of my parent’s mental illness; today I speak with candor as a child of two parents with schizophrenia. My childhood inadequacies and incertitude surrounding schizophrenia has been the catalyst in igniting my passion to garner awareness to this disorder. I choose to execute my voice and share my personal story in hopes to enable change and permeate awareness to this clandestine disease. It’s time to amass attention to this ubiquitous neurological disease so those living with schizophrenia and those family members affected by schizophrenia no longer have to live with the stigmatization inflicted by it. It’s time! You are not alone.
**A Life Well Lived**

By Robert Laitman, MD.

It is with deep regret that we announce the untimely passing of Dr. Lew Opler, MD, PhD. For years he served as Medical Director for the New York State Office of Mental Health and many of us knew him from hearing him respond year after year with patience and wisdom at the at the Ask the Doctor session at the NAMI-NYS Education Conference. Below is a remembrance from his friend and collaborator, Robert Laitman.

With tremendous sadness and a sense of loss I have to report the passing of my friend, colleague, collaborator, and overall Mensch Lewis A. Opler, M.D., Ph.D. Over the last several years, mostly through our collaboration with my family in writing: Meaningful Recovery from Schizophrenia and Serious Mental Illness with Clozapine, I have gotten to know Lew very well. His loss to his family, friends and the entire psychiatric community is devastating. He was such a warm, giving quirky guy that just brought so much joy and hope to so many. You cannot replace such a man. Though I feel so cheated by his untimely death and personally feel enervated, he really had so much more to do, I know that the best way to honor him is to continue his mission. So as Lew would put it, he was one of the few people that could our hyperbolize me. We shall all rise from the ashes and continue our quest to make the world not only a better place for our NAMI community, but the world in general. This is what Lew really wanted. So, one last hyperbole, join me as we continue to march into hell for a heavenly cause. Lew Opler, NAMI’s Ask the Doctor, would then be made complete and honored as he should. We will miss him, but even thinking about him still brings a smile to my face. The world is a better place that Lew Opler sallied forth. Onward.

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**Join us June 20th, 7PM. Our monthly meeting will focus on how to ADVOCATE, ADVOCATE, ADVOCATE!**

David Sills, NAMI-QN Advocacy Chair

In recent years, most of the progressive federal and state legislation related to mental illness has been actively supported by groups such as NAMI. However, as politicians get more sophisticated and funds more scarce, and as countless other groups advocate for health related causes, it has become imperative that individuals become more active in advocating for legislation that will positively impact our loved ones and friends.

We can’t do it alone. We strongly encourage you to become more active by contacting our U.S. Senators, Congressional Representatives, State Senators and Assembly members. Phone calls, letters, e-mails, and visits to their local offices have an impact.

NAMI Queens/Nassau sends advocacy alerts which make it simple to voice your concerns. NAMI New York State does this as well. If you do not receive the NAMI-NY State alerts and/or weekly emails, please contact Matthew Shapiro at matthew@namyny.org. Simple send him your email address and a request and you will be added to the state alerts as well.

**To assist you as you take on more advocacy responsibilities, we have planned a monthly membership meeting devoted to advocacy on June 20th at 7:00PM in the Sloman Auditorium of Zucker Hillside Hospital.**

At that time we will have information on the NAMI-NYS legislative agenda. We will also have information on how to locate your New York State and federal legislators. A speaker from the Long Island Progressive Coalition will explain the best way to approach legislators. We encourage you to join us on June 20th.

As you are surely aware, legislators are inundated by lobbyists, special interest groups and non-profit organizations. Now more than ever, the average citizens MUST be heard. Available government funds are decreasing and programs are being closed or downsized. Sadly, tragic events are being blamed on people with mental illnesses despite the fact that overwhelming the majority of people with mental health issues are the victims of violence and not the cause.

Among other issues, we must advocate for:

- Appropriate, dignified housing with wrap around services
- An improvement in the criminal justice/mental illness interface
- Mental health education for all school children, teachers, and support staff
- Continued reinvestments in community services
- A plan to encourage more psychiatrists to practice in NYS
- Access to appropriate services and medication
- Mental health parity- insurance providers must be forced to treat mental illness as they would any other illness (cancer, diabetes, heart diseases, etc.)

Please join us on June 20th. But don’t wait. Begin contacting your legislators now. Remember, the squeaky wheel gets the grease.
Want a quick way to kill the buzz, turn off a cute date, or completely murder any conversation in a social setting? Just say, “I’m a social worker.”

“Oh, so you like take people’s kids and shit?”
“Man, that’s so crazy. Wow. So crazy.”
“Are you analyzing me right now?”

For nearly a decade, I have repeatedly faced these and a million other questions (whoever said there are “no stupid questions” was...well, probably stupid). Granted, over the years I have learned that I cannot expect people to understand what social work is, what social workers do, or why I am so deeply committed to such a demanding profession.

The profession of social work is grossly misrepresented and poorly portrayed in mainstream media. It is not surprising that most people are completely clueless. Though most days I still feel pretty clueless myself, here is my attempt to put into words what being a social worker means to me.

It means having an honest dialogue with people. It means talking openly about trauma, addiction, suicide, homicide, rape, abuse, homelessness, mental illness, poverty, sexual deviance, criminal activity, racism, sexism, aging, illness, abortion, marriage equality, religious freedom, euthanasia, finances, issues related to military combat, and gender identity—among other topics. It means discussing these matters in the complete absence of judgment.

It means early mornings, late nights, and hours spent sitting next to someone who mostly cannot stand you in an emergency room, a food bank, or at the Department of Human Services. It means finding a bed bug crawling on your pants, having your car tire slashed in a dangerous neighborhood, and finding a needle in an unconscious person’s arm. It means watching two years of sobriety get washed down with cheap vodka or go up in smoke.

It means going to sleep on cold night thinking about the people not lucky enough to have found shelter in time. It means waking up to learn about the man that died of hypothermia while you slept peacefully in a warm bed. It means someone jumped in front of a train, or hung himself in a forest, or shot himself in a parking lot.

It means no longer finding it strange when people talk to themselves, or talk to people you cannot see, or style their hair in front of a mirror that does not exist with an invisible curling iron. It means that a woman engaged in sex work will think you are competition and chase you out of an apartment complex.

It means that you will spend your day surrounded by the profound suffering, deep sorrow, and unbearable pain of others. It means acknowledging that many problems have absolutely no solution. It means accepting that not all people want, nor need, the help of a social worker.

It means accompanying a human that you never would have met had you chosen a different profession on their powerful life journey. It means building meaningful connection with resilient and fascinating individuals. It means the precious opportunity to learn from people very different than you. It means experiencing the struggle with someone who so generously trusts you. It means sitting quietly next to someone in a moment of hardship and realizing that you do not need words to feel someone’s intense gratitude for your presence.

It means watching someone unlock the front door of her new apartment after twenty years on the streets. It means being present for someone’s first step toward recovery. And all the missteps along the way. It means being lucky enough to show up for someone in need when no one else would. It means being a voice for those who cannot speak for themselves.

It means learning to treasure success, however small. It means constantly seeking to uncover the inherent strengths of others. It means triumph and transformation. It means always keeping the faith and never giving up hope.

It means asking yourself, “who am I not to change the world?” It means believing that you can, and do, make a difference every single day.

Social work means getting to fully experience the vast richness and the strange, exquisite beauty found in the rawest parts of our human condition.

http://confessionsofabanshee.com/author/confessionsofabanshee/
Seizing the Darkness:
An essay on Johann Wolfgang von Goethe’s Bipolar Disorder
The International Bipolar Foundation 2017 High School Essay Contest Winner

As Friedrich Nietzsche once said, “One must have chaos in one, to give birth to a dancing star.”

Considered to be Germany’s greatest literary mind of the modern era, Johann Wolfgang von Goethe certainly was a whirlwind of chaotic creativity. With such profound influence that he is known as the Shakespeare of Germany, critics and readers around the world have wondered about where his genius stemmed from. Although difficult to pinpoint the exact formula for his scale of success, one of the great factors that contributed to his ability to convey such raw emotion and capture his audience was in fact his bipolar disorder.

It is an unfortunate reality that many of the millions around the world with bipolar disorder are relegated to the shadows, as the stigma around their illness sweeps away their faith in themselves. When they are often labelled as weak, incapable or fragile by damaging societal stereotypes, it can be agonizing for those affected to reconcile with their disorder. While the disorder may severely affect one’s ability to lead a healthy and fulfilling life, an incontrovertible and universal truth is that it certainly does not put a limit on their capacity for success. It is best shown by Johann Wolfgang von Goethe’s literary genius, whose emotional turmoil caused by his bipolar disorder stirred up an invaluable source of inspiration and motivation to explore artistic endeavors.

Goethe was not only a German poet, playwright, novelist and theatre director but also a scientist, statesman and artist who has been revered for his brilliant comprehension of human nature, optimistic faith in the human spirit and his writing about universal truths and agonies. Many of his works have been the face of the Romantic movement such as his play Faust, Europe’s greatest long poem since John Milton’s Paradise Lost. Yet it was not always a smooth path to success for Goethe, who had spent much of his life in the dark. Since the age of fourteen, he suffered from severe depressive and manic episodes, characteristic of bipolar II disorder. Because he lived during the 18th century, mental illnesses were poorly understood and there were few treatments, thus making his struggles with bipolar disorder even more difficult.

As a result, he often isolated himself and was dragged down by waves of suicidal thoughts and was forced to expel many of his darkest delusions which became instantly successful and was even lauded by Napoleon Bonaparte. In writing these pieces he was not only able to reach out to many individuals in similar situations but was also able to expel many of his darkest suicidal thoughts and cope with his agonizing episodes. After one of his most severe depressive episodes, he spent months crafting his monumentally tragic play Faust, which would later play an essential role in the creation of depth psychology.

In the face of such immense suffering, Goethe's triumph in the battle against his own mind is remarkable but he is not alone. Author Kay Redfield Jamison, PhD, psychiatry professor at Johns Hopkins University has shown that artists and writers are disproportionately more likely to be depressed, suicidal or manic and that there is a correlation between bipolar disorders and artistic temperaments, hence, the term “poet’s melancholy.” During the initial stages of hypomania, individuals tend to have increased energy and productivity and having personally been affected by the disorder, they have greater insight on human suffering that allows them to express themselves in ways others simply cannot.

Having bipolar disorder can be described as having dark, wispy clouds looming over one’s head. It can linger with you and be agonizing; it can be frustrating and isolating. However, many such as Goethe are able to seize the darkness and channel it into creative endeavors that become the silver lining of it all. As awareness around bipolar disorder increases and the stigma surrounding it is shattered, it is hoped that light will be shed on the vast potential and creativity that resides within those with bipolar disorder. After all, it is within that darkness that Friedrich Nietzsche’s described “dancing stars” are born.
NAMI Queens/Nassau Outreach!

NAMI’s first Queens Hospital Center Family-to-Family class graduation lead by Valerie Newman & Jonathan Agar

DA Madeline Singas & Jasia Mirza (Domestic Harmony House)

NAMIQN on panel for women’s empowerment at Locust Valley Reform Church

Great Neck Library speaking about Mental Health disorders

Ellen Ritz and Senator Elaine Phillips

Queens JCC facilitating discussion after each of 3 mental health films

Nassau Community College Day of Service talking with students
“How many of you think that anyone who wants to should be allowed to purchase an AR-15 assault rifle?”

Recently I had the opportunity to pose that question when I spoke to the Meadowbrook Women’s Initiative about gun control and mental illness at their monthly meeting. I’m guessing that it will come as no surprise to you to learn that not one hand went up. If I’d been in the audience, that’s how I would have responded too.

But the reality is that in the real world gun ownership is a very complex issue, one that individuals with mental illness and their families, as well as professionals, can be confronted with, sometimes with tragic consequences.

I recall vividly a disturbing phone call I received a few years ago from one of our members. Distraught, she told me that during a visit with his psychiatrist her son revealed that he had a gun and intended to go home and shoot himself. Unfortunately, the psychiatrist failed to share that information with the family and tragically, that’s exactly what he did. He used the gun to end his troubled life.

The mother was considering a lawsuit and in the course of the call we talked about the responsibility psychiatrists have to break confidentiality when a life-threatening situation like this one arises. We all know about the dreaded HIPAA law that restricts communication between the psychiatrist and families unless a release from confidentiality has been signed by the patient. But, of course, when someone’s life is in danger, it is understood that confidentiality can and should be broken.

We do not know why the psychiatrist failed to call the family. Perhaps he didn’t take the threat seriously or maybe he just forgot to call. We’ll never know for sure, but the fact is that suicides attempted with guns are generally successful and are responsible for 2/3 of gun deaths; and 80% of suicide victims are men. It’s a quick and easy way to end one’s life. By contrast, women, are between two and four times more likely to attempt suicide, generally with pills, but are less likely to complete suicide with this method.

As NAMI members we repeat over and over again that most people with mental illness are not violent. It is generally believed that the people who commit violent acts have this in common:

• Co-occurring abuse of alcohol or illegal drugs
• Past history of violence
• Being young and male
• Untreated psychosis

According to statistics mass shootings by people with serious mental illness represent less than 1% of all yearly gun-related homicides. The vast majorities (70%) occurs in a place of business or an educational environment and are motivated by resentment or revenge. Nicholas Cruz, the perpetrator of the shooting in Parkland had regularly been in trouble at school and was a social

Continued on next page.
Mental Illness & Gun Control continued

outcast. Moreover, he was suspended from school permanently in 2017.

Another large category of shootings is domestic violence, spousal or ex-spouse abuse and abuse within the family. Although as a percent of the total, domestic violence only accounts for about 10% of all violence, it does account for a disproportionate number of mass shootings.

A small percentage, however, – less than 1% - do involve serious mental illness. James Holmes is an example of this. A neuroscientist with a diagnosis of schizophrenia, Holmes entered a movie theatre playing Dark Knight Rises, and indiscriminately shot 22 victims, 12 of whom died.

NAMI, our national organization, has opted to avoid locking horns with the gun lobby. Instead they are using the Parkland shootings as an opportunity to push for treatment, including early identification and intervention; appropriate treatment and support; and integration of treatment for mental illness with substance abuse. They are also pushing NAMI’s own family education and support programs as well as advocating for the need for crisis intervention. Finally, they are asking for research to predict gun violence.

And so it goes. Once again the NRA has succeeded in turning the talk away from regulating guns and assault weapons to the need for mental health care and support. But maybe, just maybe, this time it will be different, thanks to the incredible advocacy of the Marjory Stoneman Douglas High School students like David Hogg and Emma Gonzalez. While acknowledging the importance of mental health care, support, and education, they, along with the many other student advocates and leaders who have been energized by the Parkland massacre, have kept their focus squarely where it belongs - on preventing the manufacture and sale of assault style weapons to anyone.


THANK YOU FOR A SPECIAL EVENT

Co-Sponsored by the UUCSR Mental Health Sub-Committee and NAMI (National Alliance on Mental Illness) Queens/Nassau

Rave Reviews for “A Bit Too Much About Me”

By Janet Susin

As the final notes of this ground breaking musical rang out, the audience leapt to their feet, applauding and cheering wildly until the lights finally came up. Rushing over to the composer, Zak Sandler, also a singer and pianist in the show, they showered him with praise, not only for the glorious music and performances, but also for the extraordinary insight into what it feels like to have bipolar disorder.

Seated at the piano as the storyteller and accompanist, Zak narrated his life as a cast of four singers performed and sang the roles of various people who impacted his life. These included two lovers, one who he reluctantly abandoned and the other who he married and later divorced. But perhaps what moved audiences the most was the operatic bombardment of the voices in his head when he was twice hospitalized. Speaking to Zak at the end of the show and afterwards to one another at the post show reception, people couldn’t stop raving about how grateful they were to feel what it is like to be inside the head of someone struggling with the bombardment of voices.

Comparing it with the award winning Broadway musical, “Next to Normal”, which also dealt with a character living with bipolar disorder, several said this was much, much better. There’s no doubt that we are all now “A Bit Too Much About Me” groupies. Zak tells me that a new version of the show, “Inside My Head”, will be premiering on Tuesday, September 4 at The Cell in Chelsea. Can’t wait to get my ticket!

Many thanks to the following Unitarian Universalist Congregation at Shelter Rock (UUCSR) committees for co-sponsoring and funding the performance: Adult Programs, Caring Committee, Shelter Rock Forum, Social Justice Committee and Mental Health Subcommittees. Special thanks to Maria Ceraulo, Liz Hildebrandt and Maxine Dangler for all they did to help promote the show.
Good to Know!
Emergency Psychiatric Assistance

By Jeannette Wells & Linda Manzo
Please visit our website for additional resources.
www.namiqn.org

At some point in our lives many of us have had to take our loved ones to an emergency room or call 911 for assistance. It can be a frightening experience but knowing that a medical team will soon offer care is comforting when we simply cannot help ourselves. In the last few years, however, many hospitals have closed their psychiatric units, so it helps to know exactly what our options are in a crisis situation.

Mobile crisis units are available to visit the home and evaluate whether or not a hospitalization is required. These units, however, are not available on weekends and can take 3 days to get an appointment.

If possible, you might be able to persuade your family member or friend to go to the emergency room with you. Then you have a choice of hospitals and services. But in the event you’re concerned about safety, a call to 911 will bring help. You will not, however, be able to choose the hospital you desire.

For example, depending upon where you live:

In Queens, your loved one will be taken to Zucker Hillside Hospital in New Hyde Park, Jamaica Hospital in Jamaica, Flushing Hospital or NYC Health+Hospital / Elmhurst in Forest Hills.

In Nassau County, ambulances go directly to Nassau County Medical Center in East Meadow, regardless of your address.

In Suffolk County, ambulances usually go directly to Stonybrook Medical Center.

If there are no beds available, then another hospital will be chosen. After being evaluated by a team in the ER, a decision will be made about admission. Don’t be afraid to stress to the psychiatrists the severity of the symptoms and the need for hospitalization. It is extremely helpful to create a crisis file with information on medication, the names of doctors, and therapists to give to EMS and emergency room physicians. Advocating for health of our loved ones is the best way to ensure recovery.

For more information about what to do in a crisis call our office and sign up for our free 12-week Family to Family course designed for caregivers.

Mobile Crisis Hotlines
1. Queens County: (888-692-9355) or (718) 883-4070
2. Nassau County: (516)- 227-TALK (8255)
3. Suffolk County: (631)761-3303

List of Hospitals with Psychiatric Units by County:
Queens
Jamaica Hospital
Flushing Hospital
NYC Health+Hospital/Elmhurst (formerly Elmhurst Hospital)
Zucker Hillside Hospital
NYC Health + Hospitals/Queens- (formerly Queens Hospital) offers CPEP (Comprehensive Psychiatric Emergency Room)

Nassau County
Nassau University Medical Center
Mercy Medical Center
St. John’s Episcopal Hospital- South Shore
South Nassau Communities Hospital

Suffolk
Stonybrook University Medical Center
Brookhaven Hospital
Huntington Hospital
Syosset Hospital
John T. Mather- Psychiatric Emergency Room
South Oaks Hospital
Eastern Long Island Hospital

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Nassau County
Nassau University Medical Center
Mercy Medical Center
St. John’s Episcopal Hospital- South Shore
South Nassau Communities Hospital

Suffolk
Stonybrook University Medical Center
Brookhaven Hospital
Huntington Hospital
Syosset Hospital
John T. Mather- Psychiatric Emergency Room
South Oaks Hospital
Eastern Long Island Hospital
Good to Know!

Assertive Community Treatment (ACT)

By Jeannette Wells & Linda Manzo
Please visit our website for additional resources.
www.namiqn.org

Assertive Community Treatment (ACT) is a team-based treatment model that provides 24/7 multidisciplinary, flexible treatment and support to people with severe mental illness.

It is an Evidence-Based Practice Model for individuals whose needs have not been well met by more traditional mental health settings. ACT is rooted in the belief that people receive better care when their mental health care providers work together as a team. Services are offered to individuals in their homes, in the community, or wherever they would like to meet. The goal of ACT is to help clients establish stability, work toward recovery goals and eventually connect them to services in the community so they can be stepped down to more traditional mental health services such as a clinic or PROS program. It has been one of the most successful and profitable strategies for assisting individuals with mental illness for approximately 40 years.

ACT TEAMS – Nassau County
Angelo J. Melillo Center for Mental Health
113 Glen Cove Avenue, Glen Cove, NY 11542
www.melillo.org (516) 676-2388

Central Nassau Guidance and Counseling Services
950 South Oyster Bay Road, Hicksville, NY 11801
www.nassaualliance.org (516) 822-4060

South Shore Association for Independent Living (SAIL)
1976 Grand Avenue, Baldwin, NY 11510
www.sailservices.org/ACTteam, malvino@sail-inc.org
(516)295-8714

ACT TEAMS – Queens County
WellLife Network
142-02 20th Avenue, 3rd floor, Flushing, NY 11351
www.welllifenetwork.org, queensACT@WellLifeNetwork.org
(718) 297-1718

Federation of Organizations
www.Fedoforg.org/sh_projects/clinical-services
(718) 850-7099

My Thanks to You

By Amy Martino

Having an Illness known as bipolar, I fell into a deep depression. All I wanted was to wrap myself up in a blanket and sleep. The tears poured down my pale blank face. Life had no meaning to me anymore. There was nothing I could do or say to myself to stop the cringing pain in my heart. I was very confused, not even knowing why I hurt so severely. You came into my life AGAIN.

FOR THAT I AM THANKFUL.

You opened a world for me I thought I could never return to. Your friendship is dear to me.

AND FOR THAT I AM THANKFUL.

You reached out to me when times were tough We shared our pain. We shared our hearts. We walked through life’s fears and never looked back We fought the terror within us. We did it.

FOR THAT I AM THANKFUL.

I am grateful to have your friendship. I am grateful you are in my life. You have given me hope. You have given me courage.

We share our hearts. We shared our minds. Together we saw the sun rise. We reached for the stars and I can proudly say we made it through every day. We are in a better place, now not alone anymore, But alive to ourselves and others.

So there’s only one thing I can say to you. You let it be, you let it be. We opened our eyes, now we can see a brighter day in every way.

THANK YOU, FOR I AM GRATEFUL.
DEDICATED TO A RARE GEM,
MY FRIEND LINDA
NAMI QUEENS/NASSAU

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Janet Susin & Linda Manzo
Editors
Liz Hildebrandt
Graphic Design

NAMI Queens/Nassau
1981 Marcus Ave., Suite C117, Lake Success, NY 11042
516-326-0797 or 718-347-7284
Fax: 516-437-5785
Email: office@namiqn.org
Website: www.namiqn.org

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Opinions expressed in PATHways do not necessarily reflect the views of NAMI Queens/Nassau or any affiliated organization, and we cannot attest to their accuracy.

If you would like to contribute to PATHways with an article or artwork please send to webmaster@namiqn.org and we will do our best to include your work.

MONTHLY MEETINGS
NAMI-QN hosts a meeting on the third Wednesday of every month at 7:00 PM. We invite guest speakers to talk about all aspects of mental illness. Our June 20th meeting will discuss advocacy.

These meetings are free, please join us at:
Zucker Hillside Hospital, Sloman Auditorium
266th Street & 76th Avenue, Glen Oaks, NY
Visit www.namiqn.org for details.

NAMI-QN MEMBERSHIP
One of the benefits of your paid membership with NAMI Queens/Nassau is to receive this PATHways Newsletter, published every two months.

Please let us know if you would rather receive this publication via Email or in the mail. Contact us at office@namiqn.org or call 516-326-0797 or 718-347-7284.

If you are not a paid member we will no longer mail this PATHways Newsletter to you. Join today at www.namiqn.org

Membership Application

When you join, NAMI Queens/Nassau, you become a member of our local NAMI Affiliate, NAMI New York State and NAMI National.

NAMI membership benefits include:
• NAMI’s Advocate magazine, mailed twice per year
• PATHways the NAMI Queens/Nassau Newsletter
• Discounted rate at the National Convention
• Discounts to attend NAMI Queens/Nassau events

Primary Member First Name
Primary Member Last Name
Address
City State Zip
Phone
Email

How did you learn about NAMI?

Membership Dues
☐ $5 Open Door (for low income)
☐ $40 Individual
☐ $60 Household (for individuals at same address)

Names of individuals covered under household membership:

Make checks payable to NAMI Queens/Nassau and mail to:
NAMI Queens/Nassau
1981 Marcus Avenue, Suite C117
Lake Success, NY 11042

VISIT WWW.NAMIQN.ORG TO JOIN ONLINE