Upcoming Events

Dec. 6th, Pool Tournament—2 PM
Dec. 7th, Coalition Mtg./XMAS Party—11 AM
Dec. 10th, Western CSP—9 AM
Dec. 12th, Sunday Meal—2 PM
Dec. 14th, Proactive Attitude –8:30 AM
Dec. 14th, CSP –12 PM-1:30 PM
Dec. 14th, Grapevine XMAS Party 1:30 PM
Dec. 15th, Pool Tournament 2 PM
Dec. 19th, Sunday Meal –2PM
Dec. 20th, GV Board Mtg. –5:30 PM
Dec. 21st, Pool Tournament-2 PM
Dec. 23rd, Community Mtg. -2 PM
Dec. 23rd, Hartwood Acres –6 PM
Dec. 25th, XMAS –Center open 3-7 PM
Dec. 26th, Sunday Meal –2 PM
Dec. 28th, Birthday Bingo –2PM
Dec. 30th, Pool Tournament –2 PM
Employee News

Nick Valorie is an Intern here at Grapevine from Careertrack. He started working on 11/12/2010, and chiefly performs office work tasks for Bette and Betty. In his spare time Nick likes to cut hair and is planning to become a barber. He also likes to cook and works at Dingbats as a cook. Nick likes to play football as well as watch games on the television. Nick says he likes to hang out with his friends in his off hours, and enjoys listening to Hip Hop music.

David Walowen started working for the Grapevine Center on September 25, 2010. Dave works for C.F.S.T. and AmeriCorps both, splitting his time each week. In his spare time Dave likes to hunt, fish, and play golf. Dave is also an avid football and baseball fan and likes to watch the San Francisco Forty-Niners, the Steelers and the Pirates. Dave is also a collector of sports cards and sports memorabilia. Dave also likes to spend time with his dad and 22 year old son, and likes to get together with friends. Dave has a dog, part Lab and Beagle named Missy.
I'm Sure God Knew  
By Pam Weitzel

I'm sure God knew that we would need  
A reassuring touch  
When He made the friendly handclasp  
That warms our hearts so much.

I'm sure He knew that skies of blue  
Would off time turn to gray;  
He put the sunshine in a smile  
To chase the clouds away.

God knew, I'm sure that you and I  
Would need a helping hand,  
Or a kind word to let us know  
Others care and understand.

God must have known our hearts would  
Need a special kind of cheer;  
I'm sure that is why He sent dear friends  
To journey with us here!

Untitled  
By Phillip Michael David Galli

Van Gogh had dreams of starry night  
Minds of wheels make us see unknowing sight

Turning around in distracting ways  
Many thoughts passing waves

A feeling form us decide  
Expanding circles they might collide

All is calm within  
Pond waves move away  
Pebbles toss we say

Untitled  
By Phillip Michael David Galli

These ones from beyond death and sleep  
Have awakened from the unknown mystery,  
And the ignorance of self illusions history.

Illusions tumbled down while I stood up to hear the sound  
Of the four winds that upon my ship abound;  
Upon the awareness of this new ground.

And on the ship a cargo from every port  
Of new wine grown on green starry hills  
And new grain from ancient mills  
To feed the children of unchanged love  
From kingdoms well that newly springs from above.
Untitled
By
Phillip Michael David Galli

See their power on the run
Hiding their shadows from the sun.

From the light they avert their gaze.
And into dark illusions like a maze.

With doubt they hide from others in the garments of the fox
and they put across doors and windows secret locks.

So when the time comes for them to look from within
they find they have forgotten the way to their own skin.

So from without, to the other one they seem to disappear
if they truly try their illusion is only clear.

Yet– in clarity without self doubt they will suddenly see a
way out.

Through the waters glass of self knowledge
where all does live;
truth can grow greater than self illusions ever did.

Innocent life is thus set free
when self knowledge is firmly established in thee.

Untying knots from an unbroken chain
By
Phillip Michael David Galli

The uncertain times of ancient youth have passed
and so the youngest ancients at last who
have skipped the foolish sleep of certain years and fears,
do remember and teach to awaken drink from dessert wells deep.

These ones from beyond death and sleep
have awakened from the unknown mystery,
and the ignorance of self illusions history.

Illusions tumbled down while I stood up to hear the sound
of the four winds that upon my ship abound;
upon the awareness of this new ground.

And on the ship a cargo from every port
of new wine grown on green starry hills
and new grain from ancient mills
to feed the children of unchanged love
from kingdoms well that newly springs from above.
Learning About Depression

Depression is a serious biologic disease that affects millions of people each year. The encouraging news is that it may be successfully treated. Learn how you can manage your depression by reaching out to others such as a health care professional or family and friends.

What causes depression?

Although no single cause of depression has been identified, it appears that interaction among genetic, biochemical, environmental, and psychosocial factors may play a role. The fact is, depression is not a personal weakness or a condition that can be willed or wished away, but it can be successfully treated.

Who gets depression?

An estimated 33 to 35 million U.S. adults are likely to experience depression at some point during their lifetime. The disease affects men and women of all ages, races, and economic levels. However, women are at a significantly greater risk than men to develop major depression. Studies show that episodes of depression occur twice as frequently in women as in men. Although anyone can develop depression, some types of depression, including major depression, seem to run in families. Whether or not depression is genetic, the disorder is believed to be associated with changes to levels of chemicals in the brain such as serotonin and nor epinephrine.

What is major depressive disorder?

Major depressive disorder (MDD) is commonly known as depression. MDD can be diagnosed by a health care professional when a patient demonstrates at least 2 weeks of depressed mood or loss of interest accompanied by at least four additional symptoms of depression.

Symptoms of Depression

Although there is no blood test to diagnose depression, there are well-developed guidelines used by health care professionals to diagnose major depressive disorder. One of these guidelines, developed by the American Psychiatric Association, is called the DSM-IV. Your health care professional may ask you questions based on this established diagnostic tool. According to the DSM-IV, major depressive disorder (or “depression”) is diagnosed when five or more of the following symptoms of depression are present for most of the day, nearly every day for at least 2 weeks. At least one of the symptoms must be either persistent sad or “empty” feelings or loss of interest in activities.

- Constant sadness
- Irritability
- Hopelessness
- Trouble sleeping
- Low energy or fatigue
- Feeling worthless or guilty for no reason
- Significant weight change
- Difficulty concentrating
- Loss of interest in favorite activities

Be sure to tell your health care professional if you’re experiencing any of these symptoms as described by the DSM-IV. Also, tell your health care professional if your symptoms are affecting your ability to function at home, at work, or with family, friends, or colleagues.

Call a health care professional right away if you or your family member has any of the following symptoms, especially if they are new, worse, or worry you:

- Thoughts about suicide or dying
- Attempts to commit suicide
- New or worse depression

Cont’d on Page 6-
New or worse anxiety
Feeling very agitated or restless
Panic attacks, trouble sleeping (insomnia)
New or worse irritability
Acting aggressive, being angry or violent
Acting on dangerous impulses
An extreme increase in activity and talking (mania)
Other unusual changes in behavior or mood

Treatments for Depression
Depression is a disease that can be successfully treated. There are a variety of ways to treat depression, including prescription medication and psychotherapy. Some people may use natural remedies such as herbal therapy. Only a health care professional can determine the appropriate option to treat your depression.

Prescription medications
There are several types of prescription antidepressant medications that are divided into different classes.
Each antidepressant class affects the levels of chemicals in the brain called neurotransmitters, which are thought to be involved in regulating mood.
The most commonly prescribed prescription antidepressant classes are SSRIs (selective serotonin reuptake inhibitors) and SNRIs (serotonin-norepinephrine reuptake inhibitors). SSRIs are believed to treat depression by affecting the levels of a neurotransmitter called serotonin. SNRIs are believed to treat depression by affecting the levels of two neurotransmitters called serotonin and norepinephrine.
It's important to know that it could take as many as 6 to 8 weeks for the full therapeutic effect to occur. It is important to give the medication a chance to work and to take it exactly as directed by your health care professional.

Psychotherapy
Psychotherapy is known as "talk therapy," which research has shown can be very helpful for people with some forms of depression. Like all treatment options, psychotherapy can be used alone or in combination with medication or other treatments.
The two main types of psychotherapy that are typically used to treat depression are:
  - Cognitive-behavioral therapy (CBT) - helps to reduce depression symptoms by challenging and reversing negative beliefs and attitudes.
  - Interpersonal therapy (IPT) - helps facilitate the resolution of role disputes and helps to overcome problems with social skills and other interpersonal factors that may impact the development of depression.

Healthy living
The following are some suggestions for a natural approach to a healthy lifestyle, which may help provide some relief of depression symptoms:
  - Maintain proper sleep hygiene as advised by your health care professional.
  - Eat a well-balanced diet
  - Manage anxiety as advised by your health care professional
  - Participate in a structured and supervised exercise program as advised by your health care professional
  - Set realistic goals for yourself
  - Create small and manageable tasks
  - Let others you can trust such as family and friends help you

Talking About Your Depression
You took an important step toward improving your depression when you reached out to a health care professional and began treatment. Family and friends may also help by supporting you and encouraging you during your treatment.

Continued on Page –8-
Betty will answer questions submitted to her through her mailbox. You may submit any type of question.

**Question:** I want to begin working as a volunteer at Grapevine. What do I have to do?

**Reply:** You must see either me or Bette Peoples first. We will fill out the necessary paperwork with you, and get you on your way.

**Question:**

**Reply:**

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**Mary Lou’s Corner**

**Rolled Ginger Cookies**

**Ingredients:**
- 1 cup Butter-flavored Crisco
- 2 Tbls vinegar
- 5 cups sifted all purpose flour
- 2 to 3 tsp ground ginger
- 1 tsp ground cloves
- 1 egg
- 1 cup sugar
- 1 cup molasses
- 1/2 tsp salt
- 1 tsp ground cinnamon

**Directions:**
Depression Resources

The following are depression resources that we hope you find useful to help further educate yourself and your family and friends about this common and treatable disease.

American Psychiatric Foundation
Committed to operating programs and funding initiatives that promote awareness of mental illnesses, the effectiveness of treatment, and the importance of early intervention.

Depression and Bipolar Support Alliance - www.ndmda.org
A patient-directed organization whose purpose is to educate patients, families, and the public concerning the nature of depressive illness.

HealthyMinds.org - www.healthyminds.org
Created by the American Psychiatric Association, the site provides information on psychiatric disorders such as depression and provides help locating a psychiatrist in your local area.

National Alliance on Mental Illness (formerly the National Alliance for the Mentally Ill) - www.nami.org
A support, educational, and advocacy organization for people with mental illness and their families, with over 1,200 local affiliates. Local affiliates give guidance to finding treatment.

National Institute of Mental Health - www.nimh.nih.gov
The largest scientific organization in the world dedicated to research focused on the understanding, treatment, and prevention of mental disorders and the promotion of mental health.

Mental Health America (formally the National Mental Health Association) - www.nmha.org
An association that works with over 340 affiliates to promote mental health through advocacy, education, research, and services.

Reprinted from Pfizer, Inc., 2009
POOL TOURNAMENT
November 3, 2010

Sean K.

Anita Mc.

Kayla Mc.

Nancy R.

Winner: Rick Thompson

Rick T.

Joe M.
POOL TOURNAMENT

November 9th, 2010

Jimmy R.
——— Jimmy R.
Shirley B.

Bill C.
——— Jerry M.
Jerry M.

Rick T.
——— Rick T.
Anita M.

Winner: Larry G.

Joe M.
——— Ken F.
Ken F.

Becky B.
——— Larry G.
Larry G.

Kayla M.
——— Tammy G.
Tammy G.

Bob N.
——— Bob N.
Wendy M

Jason S.
——— Jason S.
Adam B.
This book is rather controversial in its content, and very powerful in the presentation of its message. I was personally able to hear the author speak in Pittsburgh this summer. He was extremely passionate about his beliefs, and very persuasive in his arguments.

Whitaker asks why the psychopharmacological revolution has not produced great advances in mental health care results. The number of disabled mentally ill has dramatically increased during this time. Since the arrival of Thorazine, the disability rate due to psychotic illness has increased by four times. The incidence of chronic mental problems—bipolar symptoms, recurrent depression, severe anxiety—has become much higher.

The author believes that the history of research shows that the biological causes of mental disorders remain to be discovered. His premise is that psychiatric drugs are fueling the epidemic of disabling mental illness.

The psychopharmacological revolution began with the introduction of Thorazine in 1952 and Miltown in 1955. The public was eager to hear about wonder drugs, and the pharmaceutical industry was happy to oblige.

The doctrine of “biological psychiatry” came along much later. This consisted of the low-serotonin theory of depression and the high-dopamine hypothesis of schizophrenia.

The author points to research that shows that “psychotropic drugs do not normalize brain chemistry but disturb it.” Psychotropic drugs “perturb the normal functioning of neuronal pathways in the brain”. Another presentation concludes that “the use of narcoleptics is a trap. It is like having a psychosis-inducing agent built into the brain”. Yale psychiatrist Thomas McGlashan concludes that antipsychotic medications make patients “more biologically vulnerable to psychosis... The cure is worse than the disease.”

Robert Whitaker concludes that antipsychotic and antidepressant medications actually worsen long-term outcomes for patients. He accuses the psychiatric establishment of having misled the public. They have “told us that schizophrenia, depression and bipolar illness are known to be brain diseases even though they can’t direct us to any scientific studies that document this claim... We are told that psychotropic medications fix chemical imbalances in the brain, even though dozens of research failed to find this to be so... We are told that “second-generation psychotropics were better and safer than the first-generation drugs, even though the clinical studies had shown no such thing”.

The author states that “we need to talk about what is truly known about the biology of mental disorders, about what the psychotropic drugs actually do, and about how the drugs increase the risk that people will become chronically ill. If we could have that discussion, then change would surely follow. Our society would embrace and promote alternative forms of non-drug care. Physicians would prescribe the medications in a much more limited and cautious manner”.

The author asserts that the chemical imbalance hypothesis was embraced by the psychiatric establishment, for it set the stage for psychiatrists to become “real doctors” who could dispense “anti-disease pills”.

Continuing this, “A powerful quartet of voices came together during the 1980’s eager to inform the public that mental disorders were brain diseases. Pharmaceutical companies provided the financial backing. The American Psychiatric Association conferred intellectual legitimacy. The National Institute of Mental Health put the government’s stamp of approval on the story. NAMI provided the moral authority by stating that mental illness is not a mental health problem but a biological illness.

The author does much more than provide a cynical analysis of how the psychiatric establishment has pushed the chemical imbalance model of mental illness upon the public. He sees evidence of how some completely different approaches to treating mental illness are being effective.

A research study asserts that “as many as 85% of depressed individuals who go without psychotropic medication treatment spontaneously recover within one year.” Short-term research studies have missed this result because “it takes time for unmedicated depression to lift.”

Psychiatrist David Healy advocates a “watch and wait” approach before giving psychotropic medications, to see if a natural recovery can take hold. If drugs are used, it is in reasonably low doses. He claims that “if psychiatrists listened to their patients about how drugs were affecting them, then only a few patients would be on them long-term.

The author states that “once a physician realizes that many
people who experience a bout of psychosis or deep depression can recover naturally, and that long-term use of psychotropics is associated with chronic problems, then it becomes apparent that the drugs need to be used in a selective, limited manner."

Another approach favored is by physicians who give a "prescription for exercise." This approach maintains that "the evidence base for exercise as a treatment for depression is quite good. Exercise reduces anxiety and is good for self-esteem and control of obesity."

Another avenue for treatment is "Open dialogue therapy". This involves a limited use of psychotropic drugs with an emphasis on psychosocial care. "Family and friends are viewed as co-workers with the therapists, and everybody’s thoughts become known."

These alternative therapies seem to provide much better long-term outcomes. The author reminds us that “the mentally ill are now dying 25 years earlier than their peers, and it is clear that atypical antipsychotic drugs, which cause metabolic dysfunction, are contributing to the death problem.”

I was personally very much impressed by the messages promoted in this book. This book provides much food for thought for individuals looking for alternative approaches in place of long-term psychotropic drug models.
Pool Tournament

November 17th, 2010

Jimmy R.

Nancy C.

Len M.

Shirley J.

Tammy G.

Jonica H.

Anita M.

Audrey

Kayla M.

John R.

Jerry M.

Sean K.

Winner – Jerry Mc.
Pool Tournament Results

November 22nd, 2010

Jason S.                     Jim R.
Jim R.

Jonica H.                   Jonica H.
Greg S.

Frank W.                   Nancy R.
Winner

Nancy R.

Adam B.                     Ken F.

Ken F.

Glenn T.                   Rick T.
Rick T.

Kayla M.                   Anita Mc.
Anita M.

Winner: Rick Thompson