Hello Partners,

As we know, the pandemic has had a significant impact on the mental health of many and as another Wisconsin winter is around the corner, it is crucial we all continue to take steps to safeguard our mental health.

Seasonal affective disorder is a form of depression which typically occurs during the fall and winter months due to a decrease in social interaction, lower levels of sunlight, and increased levels of melatonin. The following are a few practices that can help in developing resilience to the effects of winter on mental health:

- **Stay active** and engage in regular exercise to help reduce and prevent depression.
- **Connect with others**, whether in person or virtually, social connectedness positively impacts physical and mental health.
- **Spend time outside** to improve mood and self-esteem.
- **Prioritize** and engage in **self-care**, this may include getting adequate sleep, eating healthy, and practicing mindfulness.

Below you can find available state and local mental health resources to use or share with others:

**Mental Health America** provides advocacy, education, information, and services to people with mental illness, families, professional organizations, and communities.

Mental Health America provides a [Mental Health Screening Tool](#) and relevant information, resources, and tools to help you understand and improve your current mental health.

**Wisconsin Family Ties** is a parent-run organization providing information and services to parents who have children with social, emotional, or behavioral challenges to help them navigate service and treatment resources.

**Open Counseling** maintains a [Wisconsin Mental Health Services Guide](#) where you can find publicly funded mental health services available in your county.

Explore free or reduced-fee medical services through the [Wisconsin Department of Health Services](#). As a reminder, Medicaid provides healthcare coverage to low income individuals, including those who are unable to work because of a mental health condition.
If you are looking for information on mental health services available in your community, call 2-1-1.

Please be aware of these 24/7 mental health crisis response resources:

- **National Suicide Prevention Lifeline**: 1-800-273-8255
- **Substance Abuse and Mental Health Services Administration** Helpline: 1-800-662-HELP (4357)
- **Crisis Text Line**: Text HOME to 741741 to connect with a Crisis Counselor

See Mental Health America’s [Immediate and Crisis Response](#) for more resources.

Additionally, below is a list of apps which facilitate mindfulness and meditation activities to reduce stress:

- **Calm** – Meditation and relaxation exercises organized by topic (stress, anxiety, sleep, focus, etc.).
- **Healthy Minds** – Podcast-style lessons and meditations to build upon awareness, connection, insight, and purpose.
- **MyLife** – Personalized, guided mindfulness exercises tailored to one's current emotions.
- **Recovery Path** - Personalized evidence-based prevention and intervention strategies for people struggling with or recovering from substance use.

This email will be posted to the BWF Work Programs Help Desk Home Page.
QUICK GUIDE
to Wisconsin Mental Health Resources

NAMI (the National Alliance on Mental Illness) is the nation’s largest grassroots mental health organization providing advocacy, education, support & public awareness. Our mission is to improve the quality of life of people affected by mental illness & to promote recovery. NAMI Wisconsin is the state office, to connect with your local affiliate call us at (608) 268-6000 [or (800) 236-2988] or visit our website at www.NAMIWisconsin.org.

2-1-1
United Way 211 is available 24/7/365 and offers free, confidential assistance. They connect people with local programs and services that can help.
Dial 2-1-1

RESOURCE
Family & Consumer Resource Guide provides an overview of available resources and practical advice for navigating the mental health system. Download the entire guide on our website.

CRISIS CALLS
Crisis Services: dial 9-1-1 & request a CIT officer (mental health officer).
National Suicide Prevention Lifeline: (800) 273-8255
Veterans Press 1
NAMI Wisconsin is not equipped to handle crisis calls.

NEED SOMEONE TO TALK TO?
These resources provide emotional support to those in need.
Hopeline Text NAMI to 741741
Iris Place (920) 815-3217
Monarch House (715) 505-5641
Solstice House (608) 244-5077
Trevor Lifeline (866) 488-7386
Warmline Inc. (414) 777-4729 (limited hours)

(608) 268-6000 nami@namiwisconsin.org www.NAMIWisconsin.org
TREATMENT PROGRAMS
To find a treatment facility in your area, contact SAMHSA’s National Helpline.
(800) 662-HELP (4357)
samhsa.gov/find-treatment

EMPLOYMENT OPTIONS
To find vocational rehabilitation or supported employment, contact the Wisconsin Department of Workforce Development.
(608) 261-0050
dwd.wisconsin.gov/

FIND LOVED ONE IN PRISON
To find a loved one in a Wisconsin prison, contact the Wisconsin Department of Corrections Central Records Office.
(608) 240-5000
offender.doc.state.wi.us/lop/

LEGAL ASSISTANCE
To find a lawyer, contact the Wisconsin State Bar Association’s free Law Referral and Information Service (LRIS).
(800) 362-9082
wisbar.org

YOUTH & FAMILY SERVICES
To find a variety of resources pertaining to families and youth, contact Well Badger.
(800) 642-7837
wellbadger.org

SEARCH FOR HOUSING
To find a variety of housing options, contact the Wisconsin Division of Housing.
(608) 266-7531
doa.wi.gov/pages/aboutDOA/DEHCRMainpage.aspx

TREVOR LIFELINE
If you’re a person in crisis, feeling suicidal, or in need of a safe, judgment-free place to talk:
Text START to 678678
Call (866) 488-7386
www.thetrevorproject.org/get-help-now/

LEGAL ASSISTANCE
Provides assistance to SM and families who are adjusting to deployment or life changes.
Central: (608) 504-6027
Eastern: (608) 640-9317
Southern: (608) 640-8344
Northwest: (608) 640-9315
wisconsinmilitary.org/psychological-health-program

STATEWIDE ADVOCACY ORGANIZATIONS
Disability Rights Wisconsin is designated by the state of Wisconsin to ensure the civil rights of all state citizens with disabilities through individual advocacy and system change.
(800) 928-8778 | www.disabilityrightswi.org

Mental Health America Wisconsin provides advocacy, education, information, and services to people with mental illness, families, professional organizations and the community at large.
(866) 948-6483 | www.mhawisconsin.org

Aging & Disability Resource Center (ADRC) helps connect you with valuable resources. Call the number below to obtain your local ADRC’s number.
(608) 266-2536 | http://www.adrc-cw.org

Wisconsin Family Ties is run by and for families that include children with social, emotional, or behavioral challenges to help parents/caregivers navigate service and treatment resources.
(800) 422-7145 | www.wifamilyties.org
Seasonal Affective Disorder (SAD)

Some people suffer from symptoms of depression during the winter months, with symptoms subsiding during the spring and summer months. These symptoms may be a sign of seasonal affective disorder (SAD). SAD is a mood disorder associated with depression and related to seasonal variations of light. SAD affects half a million people every winter between September and April, peaking in December, January, and February. The “Winter Blues,” a milder form of SAD, may affect even more people.

Prevalence

- Three out of four SAD sufferers are women.
- The main age of onset of SAD is between 18 and 30 years of age.
- SAD occurs in both the northern and southern hemispheres, but is extremely rare in those living within 30 degrees latitude of the equator.
- The severity of SAD depends both on a person’s vulnerability to the disorder and his or her geographical location.

Symptoms

A diagnosis of SAD can be made after three consecutive winters of the following symptoms if they are also followed by complete remission of symptoms in the spring and summer months:

- Depression: misery, guilt, loss of self-esteem, hopelessness, despair, and apathy
- Anxiety: tension and inability to tolerate stress
- Mood changes: extremes of mood and, in some, periods of mania in spring and summer
- Sleep problems: desire to oversleep and difficulty staying awake or, sometimes, disturbed sleep and early morning waking
- Lethargy: feeling of fatigue and inability to carry out normal routine
- Overeating: craving for starchy and sweet foods resulting in weight gain
- Social problems: irritability and desire to avoid social contact
- Sexual problems: loss of libido and decreased interest in physical contact

Causes

- As sunlight has affected the seasonal activities of animals (i.e., reproductive cycles and hibernation), SAD may be an effect of this seasonal light variation in humans. As seasons change, there is a shift in our “biological internal clocks” or circadian rhythm, due partly to these changes in sunlight patterns. This can cause our biological clocks to be out of “step” with our daily schedules.
- Melatonin, a sleep-related hormone secreted by the pineal gland in the brain, has been linked to SAD. This hormone, which may cause symptoms of depression, is produced at increased levels in
the dark. Therefore, when the days are shorter and darker the production of this hormone increases.

Treatments for Seasonal Affective Disorder

- Phototherapy or bright light therapy has been shown to suppress the brain’s secretion of melatonin. Although, there have been no research findings to definitely link this therapy with an antidepressant effect, light therapy has been shown to be effective in up to 85 percent of diagnosed cases. Patients remain in light up to ten times the intensity of normal domestic lighting up to four hours a day, but may carry on normal activities such as eating or reading while undergoing treatment. The device most often used today is a bank of white fluorescent lights on a metal reflector and shield with a plastic screen.

- For mild symptoms, spending time outdoors during the day or arranging homes and workplaces to receive more sunlight may be helpful. One study found that an hour’s walk in winter sunlight was as effective as two and a half hours under bright artificial light.

- If phototherapy does not work, an antidepressant drug may prove effective in reducing or eliminating SAD symptoms, but there may be unwanted side effects to consider. Discuss your symptoms thoroughly with your family doctor and/or mental health professional.

Other Resources

Society for Light Treatment and Biological Rhythm
www.websciences.org/sltbr

DISCLAIMER: Mental Health America does not endorse any specific mental health treatments or services. In addition, it is not the intention of Mental Health America to provide specific medical advice but rather to provide readers with information to help them better understand their health and, when necessary, find the treatment that works best for them.

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