Mark Your Calendars:

**Board Meeting** – Wednesday August 12th at 3:00 p.m.

**General Meeting** – No Meeting on Wednesday August 19th

**Annual Potluck at Downey Park** – Wednesday, September 9th

**CSU Stanislaus: Connections (Peer Support)** Every Tuesday, 2:00-3:30 p.m.
Lakeside Conference Room, One University Circle, Turlock
(7/14 - 7/31) met in Student Health Center Conference Room
Call 209-409-6006 or email MHNOC@outlook.com

**Oakdale: Connections (Peer Support)** (1st and 3rd Tuesdays 5:00 p.m.
- 6:30 p.m.) Allison, leader (Allison’s phone is 209-848-2161) at the
Oakdale public library on 151 S. First St.

Enrollment is open for the following Fall Family to Family Classes.
Call the office message phone to sign up (209) 558-4555.

**Family-to-Family** Modesto Evening Class
Begins Monday 8/24th through 11/9th, 6:00-8:30 p.m.
Jana Lynn Plaza (Cypress Room)
500 North 9th Street, Modesto

**Family-to-Family** Turlock Class (Class is full – wait list only)
Begins Monday 8/3rd through 10/26th, 6:30-9:00 p.m.
Cooper House, 1123 Cooper Street, Turlock

Please check our [calendar](#) or call the office at (209) 558-4555.
Themes: Drive Advocacy; Focus on Youth; Embracing the Future; Build a Movement; Leverage Technology; Strengthen the Organization

*With all those verbs ....Drive...Embrace...Build...Strengthen...Leverage....we have our work cut out for us this next year!*

The convention orientation took place in the afternoon on the first day. In that, we heard about all the learning and networking opportunities. So, we learned how to plan our attendance, attend special events and get oriented in the conference.

In the first session on the next day, I went to *Stepping Up: How NAMI is working with counties and states to get people with mental illness out of jails and into treatment.* This initiative aims to bring together local teams in counties across the country to reduce the number of people with mental illness in jails. Peers, law enforcement and State and county leaders are leading the way. This was moderated by the CIT program manager in NAMI, Arlington, VA. I learned that only 15% of law enforcement is CIT trained: But, the trend to get more officers trained is happening.

**The second session I attended was Ask a Cop:**

A senior corporal from the Dallas Police Dept. Herb Cotner, who is also a family member and a FF teacher, led this session. His partner is a M.S., R.N. and president of NAMI Dallas, Sherry Cusumano. Together they gave us practical examples of how to interact with local law enforcement. Keeping a journal of your loved one’s actions, keeping time and distance in a crisis and also how to call 911 were three of the highlights of this session. They gave us a checklist for doing this.

**The highlight of the second day,** was a presentation by a special scientist, who studies the brain. Jill B. Taylor, from Bloomington, Indiana, spoke about how our body, brain and thus our cells dictate the overall well-being of the brain. She was lively, demonstrated clear pictures and presented how our beautiful brain, if we work with it, can get it to do what we want to do in wellness or in illness.

(Lynn Padlo)

Other attendees from NAMI Stanislaus: **Judy Kropp, Joyce Plis, Nicki Allen and Rhonda Allen**
A number of NAMI Stanislaus members, including some not in this photo attended the NAMI Conference at the Hilton in San Francisco. The conference ran from Monday through Thursday beginning July 6th. In the photo from left to right are Melissa Farris, Joyce Plis-Hickman, Denise Dillon, Judy Kropp, Elizabeth Allen, Tim White, Rhonda Allen and Lynn Padlo. Melissa, Denise and Tim are our BHRS Family Advocates.
Joyce’s Report

Speaker: Jacqueline Maus Feldman, Dept. of Psychiatry & Behavioral Neurobiology, U. of Alabama, Birmingham

Dr. Feldman was an interesting speaker and covered several subjects dealing with schizophrenia and mental illness. She stated that medications are not the only treatment that patients need. Medications should be a small part of the treatment, and that patients should be receiving treatment for cognitive deficits. Adults living with serious mental illness die on average 25 years earlier than other Americans, largely due to treatable medical conditions. She emphatically stated “Why aren’t we doing anything!” and “don’t abandon these people!” The early death rate can be caused by weight gain from medications, diabetes, and because of their low socioeconomic status do not receive treatment for physical illnesses. About 22% of the general population smokes while more than 75% with mental illness or over 80% with schizophrenia smoke. Suicides are also a factor. Dr. Feldman talked about the lack of coordinated services or integrated care. Thirty-seven percent of Medicare recipients have severe mental disorders, and Medicare spends 5 times more on beneficiaries with severe mental illness and substance abuse. She commented on the shortage of psychiatrists, and that the American Psychiatric Association estimated that 50% of doctors are paid on a cash basis, and not working with our population.

Telemedicine has been good in hospital emergency rooms and expand the capacity to serve patients. New medications are needed for cognition to help think in an organized fashion, and long acting injectables are effective. Clozapine is underused, and can be very good treatment for those who are treatment resistant. She stated that “peer specialists are profoundly important.” A number of speakers addressed the need for us to “tell our stories”, fight stigma, and be proactive in supporting legislation like the Murphy bill, and to advocate for more research and better treatment.

Thank You

Memberships

Birdie Archibald
Christopher Brady
John & Lynelle Hains
Grace McCord
Frieda Rector
Annette Steele
Darlene Thomas

Donations

Lewis Burris
Jamie Fabela (monthly donation)
Carl & Jackie Rowe
(in memory of sons, Joseph & David)
Depression Update

by Rhonda Allen

(Summary of the presentation by Ken Duckworth, the medical director for NAMI national at the NAMI National Convention in San Francisco on July 7, 2015.)

I attended the presentation by Ken Duckworth at the NAMI National Convention in San Francisco on July 7, 2015. He shared information regarding some new therapies to treat severe depression, such as transcranial magnetic stimulation, which sends a buzz to the front of the prefrontal cortex to stimulate happy things. This therapy is starting to be covered by insurance companies, if a patient has tried at least four medications and used psychotherapy previously.

This is not for early treatment of the illness. Another treatment is electroconvulsion therapy which is for severe cases, and may adversely affect memory following treatments. Another new treatment from Canada is the social rhythm therapy, which is used to self-regulate.

Two treatments that research has shown to be affective are CBT and DBT. CBT is cognitive behavioral therapy which involves tracking your thinking processes by keeping a diary to check your negative thinking patterns. This treatment is based on the idea that our thoughts drive our emotions, and depression promotes negative thinking. DBT stands for dialectical behavioral therapy and is used to teach skills to combat dysregulation by substituting a series of behaviors. It involves radical acceptance of your life and decisions in order to make changes in your life. Unfortunately, most therapists are not trained in DBT yet.

Dr. Duckworth promotes reducing stressors in our lives that promote vulnerability to illness, such as lack of sleep, media overload, and substance abuse. Two factors that show significant improvement in the symptoms of depression are aerobic exercise and human connection. He stated that any relationship with people in a support system can be helpful when there is a soothing environment associated with it.

We are very pleased to share that SB 11 & SB 29 by Senator Beall passed out of the Assembly Public Safety Committee on Wednesday, with 7 Assembly members voting for the bills and none voting against! These are the bills that would require law enforcement throughout the state to have additional training regarding mental illness, appropriate de-escalation techniques, and community resources.

We are also excited that SB 614 by Senator Beall passed out of the Assembly Health Committee on Wednesday with 18 Assembly members voting for the bill and none voting against! This bill creates a statewide program to certify peers and family members as providers within the mental health care delivery system, and would allow peer and family support programs, such as NAMI’s, to expand.
The convention offered many lectures given by prominent people in a variety of fields: psychology, law enforcement, mental health research. I learned something every hour. Compassion was the theme for the week.

Many of the lectures told about new methods of training police, sheriff’s deputies and correctional officers on how to handle someone experiencing a mental health crisis. The biggest mental health facilities in the USA are our jails and prisons. The US has substituted punishment for treatment. Only 15% of police in the USA have Crisis Intervention Training (CIT). There is a program called Stepping Up Initiative (see www.stepuptogether.org/people). The audience was challenged to visit our county jail administrators to talk about training programs.

Dr. Fred Osher said studies show that the most successful treatment for someone with a mental health condition is providing them with appropriate housing.

Stewart Newman, MD and attorney, explained that the Health Insurance Portability and Accountability Act (HIPAA, 1996) was meant to help communication between patients, family and health care. He feels clinicians are too restrictive and go beyond the law to keep information from family members even though no written permission is needed to share. They can even share against the patient’s written objection IF the person is incapacitated (with psychosis) or a risk to self or others. Read The Checklist Manifesto by Atul Gawande, MD. Remember families can always share with providers.

Dr. Jacqueline Maus Feldman felt that Clozapine is underused. It’s been an effective medication for resistant schizophrenia.

Alan Fruzzetti, PhD, talked about Borderline Personality Disorder (BPD) explaining that ‘emotion dysregulation’ is a central processing problem that causes people with BPD to react with highly negative emotions. They can be trained to diffuse their emotions.

In the lecture Science vs Snakeoil, Megan Jones, PsyD., Stanford, showed how technology can help train people with serious mental illnesses. The brain is elastic and using a digital program, along with medication and talk therapy, and a lot of hard work, thinking processes can be changed and measured on a brain scan.

Hopefully some of these ideas will be presented by NAMI Stanislaus at our bi-monthly educational meetings this coming year. It was a wonderful, interesting, educational convention and we had nine people from Stanislaus County attending.