



NAMI Sacramento Newsletter

National Alliance on Mental Illness

Sacramento's Voice on Mental Illness

June 2009: Issue No 7.6

General Meeting

Monday, June 8

Dr. Robin Zasio, licensed clinical psychologist, will speak about anxiety disorders. An estimated 17 million Americans suffer from anxiety disorders, with these numbers on the rise. Further education and understanding is needed to offer proper treatment, less suffering and more relief. Dr. Zasio will outline the various forms in which anxiety disorders manifest, their symptoms, and treatment options. Dr. Zasio writes the "The Doctor's Corner" featured monthly in this newsletter.

July

PLEASE NOTE: There will be no General Meeting or newsletter in July or December. The Board voted to take off these months in order to give our volunteers a break.

Meeting Location

SMUD Headquarters Auditorium
6201 S Street, Sacramento 95817

Time

General Meetings start at 7:30 p.m.



Contact Us

NAMI Sacramento
3440 Viking Drive, suite 116
Sacramento CA 95827
(916) 364-1642

NAMI Sacramento e-mail address:
office@namisacramento.org

Website: www.namisacramento.org

NAMI Yard Sale Successfully Raises Funds and Friends

Early in the morning of April 25 NAMI Sacramento members assembled and quickly carried many hundreds of donated items to the front yard of Board co-Vice President Belinda Beckett and her husband Norm Hile. This was the culmination of weeks of effort by dedicated NAMI volunteers, who donated, collected, organized, priced, provided advertising, tables and lunches to volunteers, and otherwise generally supported this fundraising effort. The day was bright and beautiful and many people stopped by to look at (and often buy) our wares, purchase homemade baked goods, or just learn about NAMI Sacramento. We are thrilled to report that the Yard Sale netted \$3135.45, all of which will directly support NAMI Sacramento's programs. Great thanks goes to all of the very generous people who donated to the yard sale. We also want to express our special gratitude to those who helped before, during and after the sale, in particular Belinda Beckett, Linda Beilharz, Caroline Caton, Linda Ellis, John Gilbert, Yvonne Herbert, Norm Hile, Corrine Liseno, Larry Liseno, JoAnne Mahaney-Buehler, Kimberly Moen, Patsy Pavan, Pat Pavone, Sherrie Sala-Moore, Bob Silva and Tracy Williams.



Early morning start to the Yard Sale.



Buyers and NAMI volunteers at the Yard Sale.

Most Depressed Teens Don't Get Help

by E.J. Mundell,
Health Day May 24, 2009

Nearly one in 10 American adolescents have experienced at least one bout of major depression in the past year, but only about 39 percent of those cases received treatment, a new government report released Wednesday shows.

Conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA), the report found that health insurance coverage was a major deciding factor in whether or not treatment occurred. For example, 42.9 percent of adolescents suffering from depression

who were covered by Medicaid/CHIP received treatment, as did 40.6 percent of those covered by health insurance. But only 17.2 percent of adolescents without insurance coverage received the depression treatment they needed, the SAMHSA report found.

Among those children who did receive treatment for depression, about 59 percent saw or spoke with a counselor, just under 37 percent saw or spoke with either a psychiatrist or psychotherapist, 26.6 percent used a medication to treat their depression.

➤ continued on page 4



Support Groups

Depression and Bipolar Support Alliance (DBSA)

2nd and 4th Wednesday each month from 7:30 - 9:00 p.m. Sutter Center for Psychiatry, 7700 Folsom Blvd., Sacramento

See: www.dbsasacramento.org

Contact: *Andrea Hillerman* at andrea@mhasc.org or (916) 366-4601; or *Marilyn Hillerman* at marilynhillerman@yahoo.com or (916) 648-1358.

Dual Recovery Anonymous Group

Every Monday from 1:00 - 2:00 p.m. Clean and Sober Building, Loaves and Fishes, 1321 North C Street, Sacramento.

Call *Susan Young* at (916) 236-7679 for more information.

Early Psychosis Family Support Group

For families with a member who has a newly diagnosed brain disease. Imaging and Research Center Conference Room, UCD Med, Center, 4701 X Street, Sacramento. Call for information.

Call *Jane Du Bet* at (916) 734-2964 for more information.

Emotions Anonymous

For people working toward recovery from emotional difficulties. Tuesdays from 6:30 p.m. - 7:30 p.m. Wellness Center, 3815 Marconi Ave., Sacramento, or Thursdays from 7:00 - 8:30 p.m. Lutheran Church of the Good Shepherd, 1615 Morse Ave., Sacramento. Meet in the choir room.

Contact (916) 366-0699 or see : allone.com/12/ea/

NAMI Connections Recovery Support Group

A recovery support group for adults with mental illness regardless of diagnosis. Held every Sunday from 7:00 p.m. - 8:30 pm at Sutter Center for Psychiatry, 7700 Folsom Blvd., Sacramento.

NAMI Family Support Groups:

Natomas

Held on the second Thursday of each month from 6:30 - 8:30 p.m. Natomas Service Center, 3291 Truxel Road #26 (corner of Truxel and San Juan), Sacra-

mento 95833.

Call facilitator *Pat Pavone* at (916) 397-7831 for more information.

Elk Grove

Held on the fourth Wednesday of each month from 7:00 - 8:30 p.m. Kaiser Permanente Clinic, 9201 Big Horn Blvd., Elk Grove 95758, conference room 3 (upstairs).

Contact (916) 364-1642 or office@namisacramento.org.

Obsessive-Compulsive Support Meeting (OCD)

Every Monday from 7:00 - 9:00 p.m. Sutter Center for Psychiatry, 7700 Folsom Blvd., Sacramento.

Call *Jim* (916) 223-6541 or *Steve* at (916) 456-8239 for more information.

OCD Kids Sacramento

For kids 18 and under and their families. Meetings also attended by a therapist experienced in treating OCD. 1st Sunday of the

month from 2:00 p.m. - 4:00 p.m. at Kaiser Permanente Point West Clinic, 1650 Response Road, Sacramento, 95815.

See: www.ocdkids.com

Recovery, Inc., Self-Help Mental Health Meetings

Promotes a cognitive-behavioral approach to managing symptoms and changing attitudes and behavior. Groups meet weekly.

Contact: www.recovery-inc.com

Call (916) 483-5616 for meeting locations.

Sacramento Borderline Personality Disorder Non-BP Support Group

For people who have a family member or friend who suffers from Borderline Personality Disorder. Held on the second Tuesday of each month from 7:00 - 9:00 p.m. Call *Lee Gassaway* at (916) 421-7354 f

Social Skills Group

For teens and adults who feel socially awkward or shy. Sponsored by Fall Creek Counseling, 5900 Coyle Ave. suite D, Carmichael, CA 95608.

Contact: www.sacramentopsychology.com
Call *Dr. Debra Moore* at (916) 344-0900

Educational Meetings

Family to Family Education Classes

Offered twice a year, spring and fall.

☎ www.namisacramento.org

For the current class schedule see the Sacramento NAMI web site or call (916) 364-1642.

Peer to Peer Education Classes

☎ www.namisacramento.org

The NAMI Peer-to Peer education course is a nine-week experiential recovery course for any person with serious mental illness.

General Interest Meetings

Sacramento Mental Health Board Meeting

Held the 1st Wednesday of each month at 7:00 p.m. Sacramento Mental Health Treatment Center (Media Room), 2150 Stockton Blvd., Sacramento.

NAMI Sacramento Board of Director's Meeting

3rd Monday of each month at 6:30 p.m. conference Room 1B, 3331 Power Inn Road, suite 140, Sacramento, CA 95826.

NAMI Sacramento does not necessarily endorse the organizations and groups listed above. This information is offered as a convenience to our newsletter readers.

Go to NAMI Sacramento's web site at www.namisacramento.org for an extensive list of resources and crisis help available in the Sacramento area.

Important Notice

NAMI programs should not be used to replace the specialized training and professional judgment of mental health professionals. We cannot, and will not, assume the role of a physician or therapist.

NAMI cannot be held responsible for the use of the information we provide. Please always consult a trained mental health professional before making any decision regarding treatment of yourself or others.



Message From The President



NAMI Sacramento Board President, Pat Pavone

This month there is a little bit of good news and some more bad news.

The good news is that NAMI Sacramento's current financial picture is somewhat better than it was in January. We have had a series of small, but successful fundraisers, including our Yard Sale in April which was a big success by Yard Sale standards. These fundraisers combined have definitely helped to offset the disappointing revenues that we received from last year's Walk for Mental Health. In addition, we have been approved again this year as a United Way Certified Partner Agency. While our partner status did not yield as much revenue as we hoped in 2008, we know the agency solicitation process a little better this year and look forward to a more successful community campaign this fall. Also, we have been approved by NAMI National to hold an official "NAMIWALK" event in the Spring of 2010. This is very good news indeed, and we will begin our planning for this major fundraiser immediately, even though it is a year away.

The bad news is that the overall picture for mental health funding in Sacramento County continues to deteriorate. While the defeat of Proposition 1E in May has put a hold on efforts to redirect the Mental Health Services Act funds, the State's fiscal situation continues to be dire and that has a direct impact on mental health services at the county level. In spite of rallies and marches and other activities intended to shed light on the plight of mental health consumers, there is just not enough money to go around for all of the health and social services that are needed in this community and at this point there is no doubt that programs will be cut. During the month of June, the Sacramento

County Division of Mental Health will be hosting some community forums to discuss revisions that will be made to mental health service delivery in the county. While these forums will provide a high level review of how the system of care has changed for adults and children, I suspect that it will be late July or August before we really begin to see the fallout of these cuts.

So, for the time being, we will keep moving forward to do the best we can to keep our programs funded and continue to advocate for publicly funded programs that are so critical to our members. As always, we could use more help in this effort, so if you are able to volunteer some time to help with our fund raising efforts or are willing to attend community forums and represent NAMI, please contact us at office@namisacramento.com

New Family to Family Class

Family to Family will be starting a fall class beginning the first week of September. At this time we have an evening class planned for during the week. We will begin the registration period the first week of August.

The best way to register for the class is to contact us via email. The email address is: office@namisacramento.org

If you do not have access to the internet, please call the NAMI Sacramento office at 364-1642. Be sure to give us the best time of day to call you back if you leave a message. Also, please let us know if it is okay to leave a message on your answering machine should you not be there when we call.

Upcoming Events

NAMI National Conference in San Francisco

July 5 - 9. Learn more at www.nami.org/convention/

NAMI California State Conference in Torrance, California

August 20 - 22. Learn more at www.namicalifornia.org

Renew Your Membership Now - NAMI Sacramento Dues to Increase on July 1

Membership dues for NAMI Sacramento will increase for the first time in many years from \$35 to \$40 a year for a General Membership and from \$15 to \$17 a year for a Consumer Membership. The NAMI Board decided to make this change because of the drop in funding we have experienced from many other sources and our ongoing efforts to continue to be able to support our programs. NAMI Sacramento does not receive regular funding from NAMI California or NAMI National, although we are required to \$20 from each General Membership and \$11 from each Consumer Membership to the state and national NAMI organizations.

General Meetings - Are They Still Meeting a Need?

During the past year, the attendance at our monthly general meetings has been disappointing at best and embarrassing at worst. We have had some excellent speakers on topics that have been requested by members, but it seems that the interest level is just not there.

Several folks have indicated that they do not like the location, or the auditorium seating arrangement, and would prefer to return to a more informal setting like we had when the meetings were at the Sutter Center for Psychiatry. Unfortunately, the hospital setting presented some other significant limitations and we received many complaints when we had the meetings there. We want to have programs that will be useful to our members, but we need your support and input. In August, the General Meeting will be an "Open Mike" night for the members to come and discuss any issues of concern. We will also be soliciting your input on future general meeting speakers and topics so that we can be responsive to your needs. Please come and give us your input.



Voice-Identification System May Be Absent in Schizophrenia

by Mark Moran, *Psychiatric News*,
April 3, 2009

Patients with schizophrenia appear to lack the normal neurophysiological function of “corollary discharge” by which animals are able to distinguish between external auditory sounds and their own internally generated thoughts and speech.

Functional magnetic resonance imaging (fMRI) appears to confirm that the auditory mechanism of patients with schizophrenia is “tuned in” to their own internal speech and thoughts, causing patients to mistake them for real voices.

This attention to internal acoustic patterns occurs at the expense of attention to external voices and sounds, according to a study appearing in the January *Schizophrenia Bulletin*.

The left side primary auditory cortex - where voices are processed in the brain - was found to be less responsive to external auditory probes among patients with schizophrenia who experience auditory hallucinations than among patients who do not hear voices and individuals without schizophrenia, according to the study.

The same effect was not found in the right side auditory cortex, underscoring the likelihood that the resources for processing external sounds of patients who hear voices are compromised on the left relative to the right because of the linguistic content of their internal voices.

“Researchers have long tried to understand where the voices patients hear are coming from,” said lead author Judith Ford, M.D., in an interview with *Psychiatric News*. “This kind of study provides some really hard evidence that something is going on in the auditory cortex of patients that is making these voices seem very real.”

She is a professor of psychiatry at the University of California, San Francisco.

In the study, whole brain images from 106 patients - including 66 hallucinators and 40 nonhallucinators - and 111 healthy comparison subjects were collected while subjects performed a task requiring them to identify external

sounds. Specifically, subjects heard a sequence of standard and target - or “oddball” - tones at periodic intervals and were instructed to press a button when they heard the oddball tone. The data were gathered at nine sites of the Functioning Imaging Biomedical Informatics Research Network.

Response to the auditory probes was analyzed at several “regions of interest”: the primary and secondary auditory cortex, the auditory association cortex, and the middle temporal gyrus.

Researchers found that healthy controls had greater activation in all of the regions of interest than did the patients, and that nonhallucinating patients had greater activation than did patients who were classified as “hallucinators.”

Ford, in her research, has focused on what is known as “corollary discharge,” the neurophysiological process by which all animals are able to distinguish between externally and internally produced sounds. This process is faulty in people with schizophrenia, Ford said, and she likens the resulting functional disability to the “line being busy” when the external auditory world tries to “connect” to the patient.

“Every animal has this corollary discharge function, and it is what allows us to know that what we are sensing is coming from us and not from somewhere else,” Ford said. “It affects not just inner speech but memories and thoughts that pop up into your consciousness, and it allows us to know that these thoughts are yours. Patients with schizophrenia will often not be able to identify [their own internal voices and thoughts as distinct from the external world] because they are missing this system.

“So in fact they are hearing their own inner musings and obsessions as auditory sounds, and are hearing them louder than they should be. When they do hear sounds from the outside, they are in competition [with the internal sounds.]”

Ford added that one implication of the study for clinicians is to underscore the difficulty patients can have in paying atten-

tion to and processing what they are told.

“The whole auditory apparatus [of people with schizophrenia who hear voices] is ready to experience internally generated sound and does not have energy to attend to the external auditory world,” she said.

Depressed Teens, from page 1

A major depressive episode was defined as a period of two weeks or more in which the person experienced depressed mood or loss of interest, plus at least four other symptoms such as a change in functioning, trouble sleeping or eating and/or problems with concentration or self-image.

The report draws on data from SAMHSA’s 2007 National Survey on Drug Use and Health, which included information on a representative sampling of about 22,000 12- to 17- year-olds throughout the United States.

There is more information on spotting and preventing depression among young people at the National Institutes of Health web site : www.nih.gov.

Host An “In Our Own Voice” Presentation

In Our Own Voice is an anti-stigma presentation given by consumers to all types of community audiences, large and small. The focus is on living well with mental illness. If your group is interested in hosting a presentation, if you would like to become a presenter, or if you would just like more information on the program, please contact Kathleen Derby at (916) 425-6261 or the NAMI Sacramento office: (916) 364-1642; fice@namisacramento.org



Resilience is Key to Mental Health: A tale of how Prop. 63 funds have helped lives

by Ken Carlson, from the Modesto Bee, May 12, 2009

Advocates of resilience or “positive psychology” like to debunk the common theories about people with risk factors for mental disorders or behavioral problems.

For example, a long-term study of crack babies found that, as they grew older, they didn’t have anticipated problems with brain damage and language development. Other studies have found that risk factors such as poverty or family violence predict outcomes about 15 percent of the time.

The secret, according to this school of thought, is that people are resilient. They may suffer traumatic experiences or grow up in lousy environments, but they have innate abilities that help them work through adversity.

Often, these “at-risk” individuals find a teacher, friend or minister who helps them develop their personal strengths.

“We absolutely need to know in our hearts that people have the capacity for change,” said Bonnie Benard, an author and senior program associate for the WestEd Health and Human Development Program in Oakland. “We really need to partner with (organizations) that have this belief.”

Benard was a keynote speaker at the Prevention and Early Intervention Summit held by Stanislaus County Behavioral Health and Recovery Services at the Modesto Centre Plaza.

The representatives of schools, social service agencies and other groups who attended the conference got more than a pep talk from the keynote speakers.

Resilience thinking is a cornerstone of the county’s Mental Health Services Act plan, which calls for schools, family centers and community groups to be involved with early intervention and prevention programs.

The plan, which awaits approval from the state, includes \$8.2 million in funding requests over three years for programs to

assist children living in adverse conditions, support adults who have suffered a traumatic experience or make social connections with at-risk seniors. The money comes from Proposition 63, the 2004 measure that taxed wealthy Californian to fund new mental health programs.

The statewide measure was a step forward for mental health, but the overall funding situation has gotten worse for county mental health systems.

Next week Stanislaus County supervisors will consider another round of cuts to bridge a \$6.9 million deficit in the 2009-10 mental health and recovery services budget. Services in outlying communities could be shut down and the remaining services focused on the patients with the most severe disorders. The county is serving about 27 percent of the 35,000 residents with mental illness or emotional disturbances. But the new prevention efforts will focus on those who aren’t being served.

Given the budget shortfalls, counties need to have a mind-set for building community assets for improving mental health, said John Ott, a consultant who advises counties with budget shortfalls.

Ott said he slept in cars and couch surfed as a child, but went on to become a community organizer and a lawyer. As a young person, he said, he stayed away from counselors and social workers out of fear of being tagged with the labels of risk-focused prevention.

He and other conference speakers said it’s more effective to tap into the resilient nature of people and find ways to encourage social competence, problem solving and a sense of purpose.

Jodi Latronica of Modesto said that early intervention programs are good, but existing county services for people with mental disorders need to be preserved.

Latronica, who has Medicare coverage for treating her depression, was turned away from county offices when she needed a change in medication. She found that private mental health providers were not accepting Medicare be-

cause of payment issues; a member of the National Alliance on Mental Illness referred her to a psychiatrist in Merced.

“I think the county should be doing more,” she said.

Helpful Social Security Advice from a NAMI Parent

Something came up recently that I thought I would like to share with our NAMI Sacramento members.

When our son was first hospitalized in 2001, he was only 17 years old. Since he was covered under his father’s health insurance until he was age 23 (as long as he was attending school) we didn’t file for Social Security benefits until September 2005. We found that the Social Security office recorded the date he filed as the same day he was first diagnosed. We recently learned that if we had filed while our son was still a minor, he would have collected my husband’s Social Security upon his father’s death because of his disability. Since we didn’t file until after he became an adult, our son only qualifies for the regular Social Security benefit that he gets now as a disabled person. His father’s Social Security would have been a larger amount.

I wanted to share this information with you in case you find yourselves in the same situation we were.

Lynn Cathy





Small Percentage Bequest Has Big Impact

NAMI Sacramento was fortunate to be remembered recently in a very meaningful way. A friend of NAMI included us in his estate plan, designating our organization to receive one percent of the remainder of his estate. He died recently, and we were notified that because of his bequest, NAMI Sacramento will receive a gift of \$2,664.69! We are grateful for this generous recognition of the importance of NAMI's work. This gift is a wonderful example of how you can leave a permanent legacy without having to make a huge gift. Even a small percentage of an estate can have a major impact on our programs to help those whose lives are affected by mental illness.

There are several ways to make a planned gift to NAMI Sacramento, and each method can provide tax benefits for you and/or your heirs.

Will or Trust: Through a simple provision in your Will or Trust, you can provide that a specific dollar amount or a percentage of the remainder of your estate, after all obligations have been met, be given to NAMI Sacramento.

Insurance Policy: You can name NAMI Sacramento as a partial or sole beneficiary, or, under certain circumstances, you may be able to gift the policy itself.

Retirement Plan: Naming NAMI Sacramento as a sole or partial beneficiary of your retirement plan (401K, IRA, 457, 403(b) etc.) can be a powerful tax reduction strategy.

Planned gifts can either be designated to support a specific NAMI Sacramento program or can be given without restrictions on their use. Gifts can also be made in memory or in honor of a loved one.

When planning your estate, it is wise to consult professional tax and legal advisors so that you can be sure of accomplishing your goals in the way that is best for you and your family.

We are prepared to accept your gifts and to steward them wisely. If you would like to meet with us to discuss a planned gift, please contact our office at (916) 364-1642 or office@namisacramento.

NAMI Sacramento "Infomercial" Ready To Be Aired

As we reported a few months ago, NAMI Sacramento is fortunate to have the services of a young man, Kaz Koyama, a recent graduate of Natomas Charter High School, who, as his senior project, has produced a video we can use in our outreach activities. Kaz was a pleasure to work with as he filmed and edited interviews, meetings and support groups that show who we are and what NAMI Sacramento does. We look forward to showing the film at an upcoming General Meeting.



Kaz Koyama films NAMI Sacramento member Harry Nicholas as Harry explains what NAMI Sacramento has meant in his life.



Infomercial producer, Kazuo (Kaz) Koyama.



NAMI in the Community



NAMI Board President Pat Pavone visited with NAMI Sacramento Executive Director Sontine Kalba, her husband John Howell and their daughter Madeline at the NAMI Yard Sale. Sontine will return from maternity leave on June 1.

Shop Online and Support NAMI Sacramento

NAMI Sacramento participates in a program that allows you to give financial support to NAMI while you shop online - at no cost to you!

Goodshop.com is a completely easy and painless way to help NAMI while shopping online. Go to www.goodshop.com. Type "NAMI Sacramento" in the box asking for the name of the charity you wish to support. Choose the store from the dropdown box - there are over 700 of them including Amazon, Macy's, Nordstrom, Sears, Eddie Bauer, Home Depot, and Flowers.com to name a few. You will be immediately connected with that store's website - where you shop and order just as usual. That's all there is to it. You don't need to register or give any information. Goodshop will automatically donate a small percentage of what you spend to NAMI Sacramento.

August Newsletter

We welcome submissions to the newsletter. The due date for the June newsletter will be July 12. Submit to Belinda Beckett at nimabima@aol.com. Submissions may be edited. *Please note, there will be no newsletter in July.*



Healthy Minds, Healthy Lives - Some Facts from the American Psychiatric Association

In the past, the subject of mental illness was surrounded with mystery and fear. Today, we have made tremendous progress in our understanding and, especially in our ability to offer effective treatments. However, questions about mental illness often go unanswered and stand in the way of people receiving help.

How Common Is Mental Illness and What Are Its Impacts on Society?

Mental illness is common, and the milder conditions are very common. One fifth of Americans suffer from a diagnosable mental disorder during any given year. One fifth of school-age children are also affected by these conditions. Severe and persistent mental illness is less common, but still afflicts three percent of the population. The vast majority of individuals with mental disorders continue to function in the daily lives, although with varying impairments. Overall medical care costs are driven up enormously by costs associated with unrecognized psychiatric syndromes.

What Are the Causes of Mental Illness?

The exact causes of mental disorders are unknown, but an explosive growth of research has brought us to closer to the answers. We can say that certain inherited dispositions interact with triggering environmental factors. Poverty and stress are well-known to be bad for your health - this is true for mental health and physical health. In fact, the distinction between "mental" illness and "physical" illness can be misleading. Like physical illnesses, mental disorders can have a biological nature. Many physical illnesses can also have a strong emotional content.

Are People Suffering from Mental Illnesses Violent?

There is a misconception that people with mental illness are violent, which contributes to the stigma of mental illness. The vast majority of people with mental illness are not violent, and the majority of violent acts are conducted by persons who are not mentally ill. They are more likely to be victims of violence than per-

petrators, and are more likely to hurt themselves than hurt other people.

Do Psychiatrists Do More Than Just Write Prescriptions for their Patients?

State of the art treatment for mental illness is very effective - as effective as treatments for high blood pressure, cancer, and arthritis. But good treatment for mental illness (like treatment for ulcers or heart disease) takes a comprehensive approach. Medication is often not the only treatment for a chronic illness, although excellent new psychiatric medications have been developed in recent years.

Psychiatric treatment involves a full mental and physical evaluation and an individualized treatment plan, which may include psychotherapy (talk therapy), medication, or other modalities. Psychiatrists help patients understand illnesses and understand what they can do to resolve life problems that contribute to illnesses. This may involve issues on the job, in school, or within the family and community.

Psychiatrists see the necessity of working within a tailored approach for the treatment of their patients, often taking a hands-on approach to the whole fabric of the patient's needs. Educational, medical, spiritual, and interpersonal as well as basic issues such as adequate housing and nutrition are considered. Sometimes the misuse of drugs or alcohol is present and will require treatment.

Today's model of psychiatric care recognizes the importance of families as part of the treatment team. Enlightened interventions which help families struggling with child abuse and neglect, domestic and community violence, substance abuse, or school failure increasingly integrate psychiatric consultation into their programs. Any or all of these interventions may be used in tailoring a treatment plan for patients.

2009 BOARD OF DIRECTORS

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(916) 875-5644

Andrea Hillerman, Adult Consumer Advocate,
(916) 875-4710

Dave Schroeder, Family and Youth Advocate,
(916) 875-4183

Volunteer Corner

NAMI Sacramento is currently recruiting volunteers for the following positions:

- Webmaster
- Family support group leader
- Family-to-Family class teachers, English and Spanish speakers wanted!
- NAMI Walk planning committee member
- Family-to-Family Class coordinator

Training and guidance will be provided for all of these volunteer positions. If you can help, please contact Pat Pavone at pavone@surewest.net or (916) 359-2366.

NAMI Sacramento Membership Form

Please join us! Join others in your community dedicated to improving the lives of people with mental illness in the Sacramento area. Become part of our grassroots revolution and make a difference! Either detach and mail in the membership form below, or join online at www.namisacramento.org/membership. Collecting this information helps us to serve our members better. Your information is treated confidentially and will never be shared outside of NAMI. Please print clearly.

Name: _____ Address/City/Zip: _____

(circle one)

Home/Work/Cell Phone: _____ Email: _____

(check one)

Your relation to the consumer:

- I'm a consumer
- Family member
- Friend
- None, just interested

Ethnicity:

- Asian
- African/Black
- Hispanic/Latino
- Caucasian/White
- Other
- Decline to state

If you are a consumer, please enter your primary diagnosis:

- ADHD
- PTSD
- Bipolar disorder
- Schizophrenia
- Dual diagnosis
- Unknown
- Major depression
- Other
- OCD
- Decline to state
- Panic disorder

If you are the consumer's family member, please enter your family relation to the consumer:

Membership type:

- Consumer, \$15
- General, \$35

Newsletter preference:

- E-mail
- Postal mail
- Both
- Don't send

You can help! Volunteer with NAMI Sacramento:

- Contact me about volunteer opportunities

Please consider an additional donation of:

- \$100 or more
- \$50-\$99
- up to \$50

Make checks payable to NAMI Sacramento. Mail to NAMI Sacramento Membership Chair, 3440 Viking Drive, suite 116, Sacramento, CA 95827. NAMI Sacramento thanks you for your support. Your donations directly help those with mental illness.

RETURN SERVICE REQUESTED

NAMI Sacramento Chapter
3440 Viking Drive, suite 116
Sacramento, CA 95827-2844



Sacramento, CA

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