

2009 Maryland Annual Education Conference

The 2009 NAMI Maryland Annual Education Conference is scheduled for Tuesday, October 27, 2009 at the Conference Center at Sheppard Pratt. Our theme this year is **Healthy Bodies, Healthy Minds** to focus on the integration of physical and mental health. Hopefully we will be able to live up to and possibly surpass the success of last year's conference.

The 2008 annual conference's theme was the Spotlight on the Underserved: Building and Inclusive Mental Health Environment. For those of you fortunate enough to attend you were able to see the keynote speaker, Dr. Michelle Sherman who is the Director of Family Mental Health Programs at the Veterans Affairs Medical Center. NAMI Maryland also was host to numerous riveting workshops. Presenters such as Patricia Harvey LSCW-C, Connie Walker, CAPT, USN (Ret) and Bette Stewart are vital and very involved members of NAMI who gave enlightening and interesting workshops during the conference.

Because this year's theme is Healthy bodies, Healthy Minds we will have a panel of presenters moderated by Lisa Dixon, MD, MPH. Those of you involved in the NAMI may already know or heard of Lisa because of her research on the Family-to-Family

program and her participation at past education conferences. This year's panel will include Dr. Donald Steinwachs, PhD, the director of Health Services Research and Development Center at Johns Hopkins School of Public Health, Gail Daumit, MD,



*Healthy Bodies
Healthy Minds,*

MHS, an associate professor at Johns Hopkins School of Public Health and Richard Goldberg, PhD, the Associate Professor and Director of the Clinical Core for the VA Capitol Health Care Network Mental Illness Research, Education and Clinical Center. Each panelist has done extensive and innovative research on physical health of persons with mental illnesses. The expertise and knowledge that these four renowned professionals will bring to the table alone is enough to have an exciting and eventful conference.



We hope to see all of last year's attendees and a lot new faces. This will be a great experience to learn about cutting edge issues in mental health and meet a lot of new people who share NAMI Maryland's mission and goal of working as a community to improve the quality of life for individuals with severe mental illnesses and their families. Continuing education credits (CEU's), registration and more details on the conference will soon be made available on our website <http://md.nami.org>.

Healthy Hearts and Minds

NAMI Maryland Healthy Hearts and Minds is a program that educates consumers, their families, and the community on the connection between mental and physical health. Research has demonstrated that people living with severe psychiatric conditions may have an increased risk of heart disease, diabetes, and related conditions. The program intends to provide effective strategies for living a healthy lifestyle and education for those interested in the health and wellness for their loved one.

The project will involve a four session education course taught by two trained workshop facilitators who will teach students about making healthy lifestyle choices. Two of the workshops include a guest speaker who will each conduct a short presentation. Each speaker is an accredited professional with expertise in health and wellness.

Each workshop focuses on a specific aspect of wellness, healthy habits and improving the overall quality of life. The topics include exercise, diet, smoking and maintaining a healthy relationship with one's physician. Local resources are distributed at the end of the sessions so that students can find local support to successfully make positive lifestyle changes.

Students will become more aware of the connection between mental health and physical wellbeing. Students will be surveyed after the class and then later to complete to see what lifestyle changes have been made. The program will be implemented in NAMI Howard County, NAMI Metro Baltimore and NAMI Southern Maryland.

For more information on this course please contact Erica Sullivan at esullivan@nami.org or by calling the NAMI Maryland office at (410) 863-0470. You may also contact one of the participating affiliates.

From the Director's Desk

Lynn H. Albizo



This summer NAMI Maryland is working on starting up our new programs and planning for the education conference. The focus of both of these will be on adequately meeting individual's physical and mental health needs. These initiatives have been developed in part as a response to recent studies published in the Journal of the American Medical Association (JAMA), showing that

patients with severe mental illnesses such as schizophrenia, bipolar disorder and depression lose an average of 25 years or more of life expectancy due largely to cardiovascular disease and disparity in care. Families, individuals and health care providers are beginning to recognize the importance treating the whole person. Those focused on severe mental illness have often ignored the serious issues impacting an individual's physical health including side effects of medication, diet, exercise and smoking.

The country is now focused on health care reform and making sure that everyone has access to health care. As these issues are debated on the national scene, we all recognize that health care costs need to be controlled. Teaching people skills to live healthy lifestyles is one way to begin to address these costs. NAMI Hearts and Minds educational program will begin to do this. Additionally, NAMI's transformation project of delivering local mental health resources to primary care doctor's offices encourages individuals to seek mental health services early on, rather than waiting for a crisis. It is important that primary care doctors have resources on mental health care and the mental health practitioners recognize and convey to their patient's the importance of overall health care. We also recognize that there is disparity in access to health care and mental health care in particular for minority populations. I attended a policy summit with a delegation from Maryland in New Orleans in order to begin to address these issues. If we are to see improvements, health care and mental health care needs to be both accessible and culturally competent. All of these important issues will be highlighted in our education conference in October and will be priorities for NAMI Maryland in the coming year.

If your affiliate is making great strides in development, or you have a special event that you want to share, please let us know so we can recognize your efforts in the state newsletter! Please e-mail your news to Monica Anderson, manderson1@nami.org.

From the President's Desk

Janet Edelman



Happy 30th Birthday to NAMI!

I attended the NAMI convention in San Francisco to join in the celebration of our "remarkable journey". There were approximately 2,000 people at the convention in San Francisco, and as usual for NAMI conventions, the energy was palpable.

In addition to the very informative plenary sessions, symposia and workshops, there was special entertainment for the attendees. Joyce Cooling, the internationally known cool jazz recording artist entertained one night. NAMI had a special screening of the movie "The Soloist", and the author, Steve Lopez, was present to give a NAMI award to Nathaniel Ayers, the subject of the book and movie. Mr. Ayers played the cello and violin for the audience and signed autographs.

The awards presented at the banquet included the Outstanding NAMI Member award which was given posthumously to Roscoe Swann from Prince Georges' County and was accepted by his wife, Raynina.

Thirty years have brought many changes to our advocacy movement. While there has been progress in some areas, many of the problems for which we advocate are still with us. One very positive change is the participation and major presence of people living with a mental illness in all aspects of the conference. Another positive change is the success of NAMI in reaching out to and involving people of many cultures. Our programs for education and support are so much stronger than when our movement was starting. While many of the medications have changed over 30 years, many concerns about side effects, access to treatment as well as compliance with treatment remain. The issues of housing, criminalization are still with us, despite many promising programs scattered throughout the state and country. There has been progress on insurance parity and the next few years will show if and how the changes make a difference. We have made some tremendous strides, yet so much remains to be done.

Please note that the 2010 NAMI National Convention will be in Washington, DC on June 30 through July 4. I hope to see lots of you there since it is so close to home. Even if you cannot attend the conference, please plan to join us on Capitol Hill (usually the first day of the conference) to visit with the Maryland delegation and/or their aides.

Evidence-based practices: Assertive Community Treatment

What are Evidence Based Practices?

Evidence-based practices are established clinical interventions that, through rigorous research, have been shown to improve the quality of life of individuals with mental illness.

What Evidence Based Practices are available in Maryland?

In Maryland, the Evidence-Based Practices of Assertive Community Treatment (ACT), Supported Employment (SE) and Family Psychoeducation (FPE) are available to consumers and family members. Maryland currently has nine high-fidelity ACT Teams, fourteen high-fidelity Supported Employment Programs and four agencies offering Family Psychoeducation. Referrals for ACT services come from hospital inpatient units, clinics, family members and consumer self-referrals.

What is Assertive Community Treatment?

Assertive Community Treatment (ACT) and Programs of Assertive Community Treatment (PACT) are names you may have heard to describe a full range of services to persons diagnosed with schizophrenia, bipolar disorder, schizoaffective disorder or depression. The intensity of these services is flexible to meet the individual needs of the consumer. Assertive community treatment refocuses intervention energies on helping the consumer reach his or her own recovery goals without focusing solely on the illness. These services are for individuals for whom traditional mental health services have been unsuccessful, as defined by multiple hospitalizations, homelessness and unemployment.

How do ACT services differ from traditional services?

1) Team Approach

- a) A transdisciplinary team of practitioners (psychiatrist, nurses, social workers, substance abuse and employment specialists, peer counselors and case managers) work together to create the interventions needed to support the consumer's goals.
- b) Each consumer works with multiple team staff members.
- c) The team is responsible for providing all services the consumer needs

2) Low Staff to Consumer Ratio

- a) The usual ratio of staff to consumers is 1:10.
- b) This allows for very personalized services.
- c) Staff gets to know the consumer very well and to monitor changes closely.

3) Services are Provided Where they are Needed

- a) Most services are provided in the community, which can help staff better access the living environment and to help eliminate missed appointments.
- b) The consumer is seen in the home, on the street, at work or any place problems occur and support is needed. All staff, including the psychiatrist, go into the community to see consumers.

4) Services are Provided When they are Needed

- a) Staff is available 24/7, 365 days a year. After hour calls are received by an ACT staff member and can be addressed immediately by a team member who knows what is going on with the consumer.
- b) Staff can visit as often as necessary, daily, and even multiple times a day if needed.
- c) ACT staff is the first line of intervention in a crisis and because they know the consumer well, may prevent unnecessary hospitalizations.
- d) Because services are intense and flexible, many crisis situations can be avoided.

5) Uninterrupted Care

- a) Because multiple staff members work with each consumer, services are not interrupted when a staff member goes on vacation or changes jobs.
- b) There is always a team member who has a working relationship with the consumer and that the consumer feels connected to.

6) Time Unlimited Support

- a) Services are provided as long as needed by the consumer.
- b) Staff contact continues wherever the consumer is, if they are incarcerated or hospitalized.

Where are the ACT Teams Located?

The ACT teams are located in Baltimore City, Anne Arundel, Frederick, Montgomery, Prince George's, and Washington Counties.

What are the Criteria for being served by an ACT Team?

- Have a diagnosis of serious mental illness.
- Have multiple hospitalizations (two or more in the past 12 months).
- Have difficulty managing daily activities, such as being safe, caring for basic physical needs, maintaining safe and adequate housing, unemployment, substance abuse, homelessness and involvement in the criminal justice system.

What is the Evidence that ACT Works?

Compared to case management programs or therapy alone, ACT is superior to reducing psychiatric hospitalizations and increasing housing stability and improving consumers' quality of life.

Maryland will offer its first ACT Conference November 12, 2009. For more information call Bette Stewart, 410-646-5181

For more information about Assertive Community Treatment go to:

<http://mentalhealth.samhsa.gov/cmhs/CommunitySupport/toolkits/community>

or go to <http://www.nami.org>

Self Management Health Curriculum for persons with serious mental illness

Persons with serious mental illness (SMI) have increased rates of co-morbid obesity, heart disease, diabetes and respiratory illness compared to the general population. Further, multiple studies have demonstrated significant deficiencies in the quality of medical care for seriously mental ill adults resulting in more serious disability, increased health care cost, reduced quality of life, and early mortality. Co-occurring medical illness in a person who has a serious mental illness has also been shown to negatively affect psychiatric functioning and contribute to additional functional impairments. Given the seriousness and extent of these issues, there is a growing imperative for mental health systems to pay increased attention to medical as well as psychiatric wellness.

Despite the growing recognition that self-management strategies hold enormous promise for improving quality and outcomes of care for chronic medical illnesses, and the fact that self-management is gaining prominence as a recovery oriented mental health treatment focus, relatively little is known about how to extend use of effective medical self-care programs to help individuals with SMI more actively participate in their health and medical care management. To address this gap, Richard Goldberg, PhD and his colleagues at the Division of Services Research, University of Maryland School of Medicine Department of Psychiatry have developed and are now evaluating the efficacy of a medical illness self-management curriculum for SMI adults. This project is funded by a grant from the National Institute of Mental Health (NIMH). The curriculum makes use of consumer providers to facilitate the intervention and teaches that adapting a healthy lifestyle requires knowledge, attitude and action.

The curriculum was developed by modifying and enhancing the Chronic Disease Self-Management Program developed at

Stanford Patient Education Research Center. It is based on the assumption that (1) people with varying chronic diseases have similar self-management problems; (2) people can learn to take responsibility for the day-to-day self-management of their illness and (3) people who practice self-management will develop improved health behaviors, experience improved health status and utilize fewer health care resources. Included are information sessions on healthy eating, the importance of support from others, symptom management and techniques, understanding medications, communication with medical providers, developing personal health records and setting personal goals and action plans.

A carefully monitored pilot trial for 50 participants is currently underway. As part of the pilot, researchers are measuring how this intervention effects the primary outcomes of health related self-efficacy and recovery orientation and medical illness self-management skills. They are also measuring social and communication skills focusing on interactions with medical health care providers, physical and mental health status, and medical service use patterns. It is anticipated that after participating in the program, consumers will have gained increased knowledge and confidence related to their physical health needs which will lead to improved outcomes in the above areas.

Richard Goldberg, PhD is a tenured Associate Professor with the Division of Services Research, University of Maryland School of Medicine Department of Psychiatry and the Director, of Clinical Core at the VA Capitol Health Care Network (VISN 5) Mental Illness Research, Education and Clinical Center (MIRECC). Dr. Goldberg may be contacted at Rgoldber@psych.umaryland.edu. He and his colleagues, Dr. Gail Daumit and Dr. Don Steinwachs will be the featured speakers at the NAMI educational conference on October 27,

Introducing: Parenting A Child Who Has Intense Emotions

By Pat Harvey & Jeanine Penzo

On November 1, 2009, New Harbinger Publications will release a new title in their parenting series, "Parenting a Child Who Has Intense Emotions: Dialectical Behavior Therapy Skills to Help Your Child Regulate Emotional Outbursts and Aggressive Behaviors". This book, written by two clinical social workers, combines the expertise of a clinician who facilitates DBT Skills Training Groups for Parents of kids (of any age) who have emotion dysregulation or mental illness and the personal experience of the parent of a young adult with mental illness. Together the authors provide practical guidance, skills and strategies to help parents manage life more effectively when their child's intense emotions lead to out of control behaviors. Parents reading this book will find sensitivity and validation for the emotional roller coaster that they experience when their child has intense emotionality. This book provides tips to help parents learn to lead fulfilling lives despite the difficulties experienced by their child.

Based on DBT, a well-researched method for managing emotions, this book provides parents with step-by-step guidance, exercises to practice the suggested skills and examples of how the skills are used effectively to help children. Skills for effective parenting, including validation, mindful awareness, and calming techniques, will help parents respond to the challenges in their home calmly and effectively while teaching their child self-management as well. Finally, parents will learn how to make time for self-care and why it is so important.

This book will be available first at the 2009 NAMI Maryland Education Conference where one of its authors Pat Harvey will sign copies. All proceeds from the sale of the book at the conference will benefit NAMI Maryland. Ms. Harvey is also conducting a workshop on DBT during the morning and afternoon sessions.

PROGRAM UPDATE

Education Programs

Family-to-Family, Familia De Familia, NAMI Basics and Peer-to-Peer Spring courses have wrapped up and most affiliates are gearing up for the fall courses. Don't forget to send all course census data to Erica Sullivan at the NAMI Maryland office at the end of each course. Thanks to all of the affiliates for sending in such promising applicants for the August 2009 Peer-to-Peer state training. It is very exciting to see new faces presenting such valuable material. If you are interested in becoming a Family-to-Family course facilitator please contact your local affiliate on how to attend the weekend training in September 2009 at St. Mary's. For more information on these signature programs in your area contact your local affiliate or check out the NAMI website.

In 2009 over 400 audience members have been seen the In Our Own Voice (IOOV) presentation in their local area. All of the IOOV presenters have been doing a wonderful job and I want to thank you for educating the public while sharing your personal journey. If you are interested in partaking in this program there will be a training in November 2009. Please contact your local affiliate for information on scheduling a presentation or becoming an IOOV presenter.

NAMI Maryland currently has two programs being implemented under the Transformation Project. These two programs focus on the integration of physical and mental health.

Healthy Hearts and Minds is a program that educates consumers, their families, and the community on the connection between physical and mental health. This workshop based project will be implemented in Southern Maryland, Metro Baltimore and Howard County NAMI affiliates. Please contact these offices or the NAMI Maryland office for more information on participating in this exciting new program.

The engaging consumers and family members is an information dissemination project. Howard, Anne Arundel, Montgomery, Prince George's and Metro Baltimore affiliates are have began implementing this project by disseminating brochures listing mental health resource to local physician's offices. The goal of this project is to

increase the availability of mental health resources to those who may not know where to seek assistance. It also allows affiliates to employ consumers to gain vocational experience while implementing the program.

Support Programs

Connections Recovery Group and the Family Support Group are constantly growing while positively impacting and helping all participants. The August 2009 Family Support Group training will provide a new pool of support group facilitators throughout Maryland. Thank you to all affiliates and all applicants for volunteering your time for such a valuable program. For more information on support groups in your area contact your local affiliate or check out the NAMI website.

Jennifer Lagrotteria joins NAMI team



Jennifer Lagrotteria comes to NAMI Maryland with a wealth of event planning and management experience. Most recently, she served as Associate Promotion Director for Bonnier Corporation working specifically with Parenting and Babytalk Magazines. Jennifer will serve as the Program Assistant, working on a part-time basis, to help with the administration of our programs and special events. She also established and heads a private non-profit that provides clothing and necessary supplies to children living in poverty in developing countries.

Local NAMI Maryland Affiliates	
NAMI Allegany	1-800-467-0075
NAMI Anne Arundel	443-569-3498
NAMI Carroll	410-857-3650
NAMI Cecil	443-326-1485
NAMI Frederick	240-379-6186
NAMI Harford	410-879-0111/410-893-4968
NAMI Howard.....	410-772-9300
NAMI Lower Shore.....	410-641-6809
NAMI Metro Baltimore.....	410-435-2600
NAMI Montgomery.....	301-949-5852
NAMI Prince George's.....	301-429-0970
NAMI Southern MD.....	301-904-9926
NAMI Washington.....	301-824-7725

NAMI Maryland's charity designation numbers:

4186: The Maryland Charity Campaign for State Employees and Retirees (private and state donors) & Central Maryland- Private Sector

80114: Combined Federal Campaign of the National Capital Area

8568: The United Way

Save the Date!



What	Where	When
September 8, 2009, 6pm	NAMI Walk Volunteers Meeting	NAMI Maryland Office
September 25-27, 2009	Family-to-Family state training	St. Mary's Seminary
October 2-4, 2009	Affiliate retreat	St. Mary's Seminary
Tuesday, October 27, 2009	2009 NAMI Maryland Education Conference (Please look for your registration packets by mail and email. Registration will be available on-line at md.nami.org)	Sheppard Pratt Conference Center
November 13-15, 2009	In Our Own Voice state training	St. Mary's Seminary

For more information on the events listed above please call the NAMI Maryland office at 410-863-0470 and ask for the listed contact or feel free to send us an e-mail at namimd@nami.org.

NAMI Maryland presents THE 2009 ANNUAL EDUCATION CONFERENCE



Healthy Bodies
Healthy Minds

Tuesday, October 27, 2009
Sheppard Pratt Conference Center

You don't want to miss this opportunity
Visit <http://md.nami.org> for more information

Join Public Policy Committee – Help review bills, formulate positions, or write testimony. This is a chance to make your voice heard in Annapolis. Contact Gerri Gray at gerrigray@gmail.com. To view NAMI Maryland's Public Policy platform, go to <http://md.nami.org>.

CONNECTIONS is published quarterly by NAMI MD – National Alliance on Mental Illness of Maryland. Letters, articles, and responses are welcomed and encouraged. NAMI MD reserves the right to edit all submitted materials. Please submit all materials no later than the dates listed below:

July 15, 2009 (Summer Issue)
September 15, 2009 (Fall Issue)
December 15, 2009 (Winter Issue)

NAMI MD does not accept responsibility for errors, omissions, or opinions expressed or implied by contributors or advertisers. Articles and information in this newsletter may be reproduced unless copyrighted. Citation of source is appreciated. Please send your submissions and comments to:

NAMI Maryland
804 Landmark Drive, Suite 122
Glen Burnie, MD 21061
410-863-0470 or 410-863-0474 (fax)
namimd@nami.org



NOT EVERYONE IS CUT OUT FOR THE SAME TREATMENT.

1 in 4 adults suffer from a diagnosable mental disorder in any given year.¹

Open access is especially important in the treatment of mental disorders because the response to therapy can vary greatly from individual to individual and from one medication to the next. Restrictions in the form of prior authorizations and preferred lists may have the unintended consequences of jeopardizing patient health while failing to reduce costs.

**Open Access.
Because different people
have different needs.**

Bristol-Myers Squibb supports open and unrestricted access to mental health medications. For people with mental illness, having access to newer and potentially more effective medications can be a crucial component of treatment.



Bristol-Myers Squibb

SUPPORT OPEN ACCESS AND GIVE PROVIDERS THE FREEDOM TO FIND THE MOST APPROPRIATE MEDICATION FOR EACH INDIVIDUAL.

1. National Institute of Mental Health. Available at: <http://www.nimh.nih.gov/healthinformation/statisticsmenu.cfm>. Accessed March 24, 2008.

NAMI MARYLAND
804 LANDMARK DRIVE, SUITE 122
GLEN BURNIE, MARYLAND 21061

*NAMI Maryland is an Affiliate of NAMI,
National Alliance on Mental Illness*

NONPROFIT ORG.
U.S. POSTAGE
PAID
GLEN BURNIE, MD
PERMIT NO. 71

NAMI Maryland
**National Alliance on Mental
Illness of Maryland**

804 Landmark Drive, Suite 122

Glen Burnie, MD 21061

(410) 863-0470

FAX: (410) 863-0474

Toll Free Helpline: (800) 467-0075

E-mail: namimd@nami.org

Website: md.nami.org/

Janet Edelman – *President*

Constance Walker – *1st Vice-President*

Darlene Dockins – *2nd Vice-President*

Dr. Orlando Davis – *Treasurer*

Johanna Snyder – *Secretary*

Lynn H. Albizo – *Executive Director*

Monica Anderson – *Director of Fund-
raising and Special Events*

Erica Sullivan – *Coordinator of
Educational Programs*

Margaret Sommerman – *Administrative
Assistant*

Contribute to NAMI Maryland so that we can continue our mission to improve the quality of life for persons diagnosed with serious mental illnesses and their families.

I want to make a difference by:

volunteering

making a contribution (circle one) \$50 \$100 \$250 other \$ _____

in memory of in honor of on the occasion of _____

Name _____

Address _____

City, state, and zip _____

Telephone _____

E-mail _____

To join NAMI or to make online donations, go to our website at md.nami.org or call your local affiliate. See page 8 for affiliate phone numbers.