



NEWSLETTER

NATIONAL ALLIANCE ON MENTAL ILLNESS

SAN LUIS OBISPO COUNTY (www.namislo.org)

February 2010

Number 2

Volume 26

General Meeting.

What are PA.AT and SOS? Join us for our General Meeting when Transitions-Mental Health will answer those questions and update us on their work. There will be time for discussion after the presentation. You are welcome to bring a snack to share. **Coffee and juice are provided. The meeting is on Tuesday February 23 at 7:00PM.**

The NAMISLOCO General Meetings are held on the 4th Tuesday of the month (except December and July) at St. Stephen's Episcopal Church on the corner of Pismo and Nipomo Sts., SLO.

There is no facilitated Family support group meeting this month. (see below)

SAVE PROP 63 FUNDING

URGENT LEGISLATIVE ALERT

The Governor's proposed CA State budget includes a **threat to Proposition 63 MHSA funding** for community based treatment and services for people of all ages with his proposed INITIATIVE for the June BALLOT that would allow him to raid the bulk of Prop 63 funds.

HOWEVER, LEGISLATIVE APPROVAL IS REQUIRED TO PUT THE GOVERNOR'S INITIATIVE ON THE JUNE 2010 BALLOT.

THERE WAS A PUBLIC HEARING SCHEDULED FOR THURSDAY FEBRUARY 11th, 2010.

PLEASE CONTACT YOUR OWN ASSEMBLY REPRESENTATIVE . **URGE THEM TO OPPOSE THIS INITIATIVE & ASK FAMILY AND FRIENDS TO DO SAME.**

Contact: Sam Blakeslee at: 1104 Palm St. SLO
805-549-3381
805 549-3400 (fax)

Year at a Glance

January thru June: General Mtg, 4th Tuesday of the month

July: Annual Picnic, no **General Meeting**

August: Summer Vacation: no meeting, newsletter or support group

September: General Meeting 4th Tuesday of the month

October : Beautiful Minds Walk

October: Mental Illness Awareness Event: 4th Tuesday of October.

November: General Meeting 4th Tuesday of the month

December: Holiday Party: no Gen. Mtg.

an advocacy organization for individuals in recovery from addictions, said the rules had been released "not a moment too soon."

"Some insurance companies have already put plans in place that fall short of this law's intent, severely restricting patients' access to life-saving care," said Gumbley, who cited United Healthcare and Blue Cross/Blue Shield as examples. "This needs to change, and we encourage individuals and families covered by these plans to ask them to fully implement policies consistent with this new law."

Quantitative and Qualitative Limits Addressed

The Wellstone parity law does not require health plans to cover addiction or mental illness, or any specific types of treatment, but mandates that plans which do include such benefits treat these conditions on par with other illnesses. According to the law, group health insurance plans may not limit benefits or impose higher patient costs for addiction and mental health treatment than those applying to general medical or surgical benefits.

It states that mandate certain addiction or mental-health benefits, the law now requires that they be provided on a parity basis with other health services.

Issued jointly by HHS and the departments of Labor and Treasury, the interim final rule provides an enforcement framework for the Wellstone act. The rules explicitly state that parity applies to both quantitative differences such as higher deductibles or caps on the number of days patients can stay in treatment and qualitative limits such as preauthorization requirements and medical management.

The rule breaks down benefits into six categories: inpatient in-network; inpatient out-of-network; outpatient in-network; outpatient out-of-network; emergency care; and prescription drugs. If a plan provides coverage for addiction and/or mental health services in any of these categories, it must be on par with the medical/surgical benefits provided in that category, according to the interim final rule.

The parity law applies only to public and private employer-based plans from companies with 50 or more employees; it also applies to Medicaid managed-care plans, but the interim final rule doesn't cover Medicaid. Regulations for Medicaid parity will be issued later, according to HHS.

Enforcement of the law will fall primarily on states, which regulate insurance plans, but both HHS and the Department of Labor have established compliance hotlines.....

Rules On Addiction and Mental Health Parity Issued By Obama Administration

(From NAMI California Website)
By Bob Curley, Jan 29, 2010

New rules for implementing the addiction and mental-health parity law passed by Congress in 2008 are being hailed by advocates, despite their issuance three months after the law actually went into effect.

The interim final regulations unveiled on Jan. 29 included detailed guidelines and guidance on implementing the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), which took effect in October 2009. "The rules we are issuing today will, for the first time, help assure that those diagnosed with these debilitating and sometimes life-threatening disorders will not suffer needless or arbitrary limits on their care," said U.S. Department of Health and Human Services (HHS) Secretary Kathleen Sebelius.

The final rules will go into effect on April 5, and will be applicable to insurance plan years that begin on or after July 1. Rep. Patrick Kennedy (D-R.I.), who along with former Rep. Jim Ramstad (R-Minn.) was a key advocate for the Wellstone bill in Congress, said the rules "provide the critical guidance necessary to ensure that this landmark legislation is implemented fairly and justly, and will ensure that insurance companies are no longer allowed to discriminate against those suffering from addiction and mental illness."

Stephen Gumbley, vice chairman of Faces and Voices of Recovery,

Facilitator Needed

In order to continue the Family Support group a trained facilitator is needed. Please call Lisa Kelly 788-0869 to volunteer and for more information

Have You Paid Your 2010 Dues?

Check the date on the front of your newsletter.

A big THANK YOU to all of you who renewed your memberships and a big WELCOME to our new members! Your active memberships allow NAMI to continue to advocate for the mentally ill on the local, state and national level. The more active members we have, the more a force we can become!
Pam Zweifel, Membership Chair

Very special thanks go to Barry Johnson, Jessica Vieira and Betty McGraw for their work in preparing the application for a Peer to Peer expansion grant that was awarded to NAMISLOCO. The full amount of the grant (\$1,725.00) will be transferred to Transitions Mental Health Association (TMHA).

We acknowledge TMHA's excellent collaboration with NAMISLOCO on Peer to Peer (P2P), In our Own Voice (IOOV) and Family to Family. (F2F).

Also our appreciation and thanks to Barry, Jessica and Betty for keeping P2P and IOOV reinvigorated with new mentors and presenters.

Exercise Builds Brain Volume In Schizophrenia

The hippocampus, a brain structure involved in memory, is smaller in people with schizophrenia, for reasons that remain unclear.

From MedPage Today by Michael Smith, February 1, 2010

Three months of aerobic exercise significantly increased the volume of the hippocampus in patients with chronic schizophrenia, researchers said.

The increase was accompanied by "modest" increases in short-term memory and markers of neuron production, according to Frank-Gerald Pajonk, MD, of Dr K. Fontheim's Hospital for Mental Health in Liebenburg, Germany, and colleagues.

But it's too early to say whether incorporating aerobic exercise into treatment programs might reduce the disability associated with schizophrenia, the researchers said in the February Archives of General Psychiatry.

Among schizophrenics, the hippocampus, which plays important roles in memory and spatial navigation, is known to be reduced in volume, Pajonk and colleagues noted.

Unlike other forms of psychosis, they added in the journal, schizophrenia is characterized by persistent disability, perhaps because the production of new neurons is impaired.

As well, they noted, in healthy humans it has been shown that exercise stimulates the production of new neurons.

For those reasons, they speculated that aerobic exercise might increase the volume of the hippocampus in people with chronic schizophrenia, perhaps leading to clinical benefits.

To test the idea, they enrolled 24 schizophrenia patients and eight healthy controls.

Thirteen of the patients, selected randomly, were assigned to a three-month program of aerobic exercise -- cycling three times a week for 30 minutes. The controls also took part in the cycling program.

The remaining patients were assigned to play table soccer, again for 30 minutes three times a week.

The primary endpoint was the change in hippocampal vol-

(Continued on page 3)

www.nami.org is a great source of information on the Internet

SLO County / T-MHA FAMILY ADVOCACY PROGRAMS

The County Family Advocates for Adult Mental Health Services offer CONFIDENTIAL ASSISTANCE, INFORMATION, AND SUPPORT to help improve the quality of life for families and caregivers, to help families and caregivers navigate the Mental Health system, and to help families and caregivers cope with the many challenges they face. Family Advocates also provide referrals and resources for further support and education.

San Luis Obispo County

Contact: Janice Holmes, Lead Family Advocate, Adult Services: 805-541-5144 x.171 or jholmes@t-mha.org. Office: 277 South St. Suite Y, San Luis Obispo, CA or Henry Herrera, Family Advocate, Adult Services (Se habla espanol), 805-541-5144 X 129 or hherrera@t-mha.org.

NAMI-SLOCO Library:

We now have an on-line catalog of the books, tapes, CDs and DVDs in our extensive library.

Go to <http://www.namislo.org> and click on "Library"



NAMI PEER-TO-PEER

PEER TO PEER NEWS: Peer-to-Peer Classes are led by mentors who have achieved recovery from mental illness and are now able to teach recovery coping strategies to others.

CALL FOR DETAILS AND RESERVATIONS (Required).

Peer-to-Peer Coordinator - Betty McGraw (541-5144 X 113)

Email BMcgraw@t-mha.org

NEW-Peer to Peer is now offering "WRAP" Group-Wellness and Recovery Action Plan: an educational course in the journey to recovery.

NAMI-SLOCO Presents

"FAMILY-TO-FAMILY"

A Class offering:

Education and Support for Family Members

Whose Relative or Loved One Suffers from:

- MAJOR DEPRESSION
- BIPOLAR DISORDER (MANIC DEPRESSION)
- SCHIZOPHRENIA
- SCHIZOAFFECTIVE DISORDER
- PANIC DISORDER, or
- OBSESSIVE-COMPULSIVE DISORDER
- OTHER RELATED DISORDERS

"Family-to-Family" provides up-to-date information & education on the diseases, their causes, & treatments available, as well as help & coping tools for you as the caregiver or loved one. The class is presented in 12 weekly meetings of 2.5 hours per evening. Over 550 San Luis Obispo County families have been helped by the support and knowledge offered by this class.

THE CLASS IS FREE BUT PRE-REGISTRATION IS REQUIRED! CALL FOR DETAILS & RESERVATIONS for 2010 Family-to-Family Coordinator – John Lamas at 461-1635 for the North County, South county and SLO classes. (John Klimala is ill and John Lamas is filling in for now.)

Family to Family Classes

- Atascadero — Begins in early March
- Arroyo Grande — Begins in February
- San Luis Obispo — Begins in February



(Continued from page 2)

ume, assessed by magnetic resonance imaging, but the researchers also looked at changes in schizophrenia symptom scores, memory, and the ratio of N-acetylaspartate to creatine in the hippocampus. The latter is regarded as a marker of neuron production.

They found:

- Compared to baseline, hippocampal volume increased 12% in the exercise group and 16% in the controls, changes that were significant at $P < 0.001$.
- On the other hand, there was a nonsignificant 1% drop in volume among patients who did not take exercise.
- The changes in hippocampal volume in the exercise group were significantly correlated (at $r = 0.71$ and $P = 0.003$) with better aerobic fitness, as measured by change in maximum oxygen consumption.
- Among patients in the exercise group, change in hippocampal volume was associated with a 35% increase in the N-acetylaspartate to creatine ratio, which was significant (in a post-hoc analysis) at $P = 0.04$. There was no significant change in the healthy controls.
- And short-term memory improvements among the patients were correlated (at $r = 0.51$ and $P < 0.05$) with changes in hippocampal volume.

The change in hippocampal volume was the "most robust" of the findings, Pajonk and colleagues said, and is roughly comparable with what is seen in other subcortical structures when schizophrenia patients switch from typical to atypical medications.

The study was limited by its small size, they said, and the volunteers were selected for their willingness to take part in three months of an exercise program.

As well, patients had to have chronic disease and be on stable medication programs, they said.

They also noted that while the main finding was robust, the statistical significance of the secondary results would not have survived a correction for multiple testing.

Source: *MedPage Today*

Fish Oil Can Head Off First Psychotic Episodes

Hospital research finds that patients taking fish oil supplements for two weeks showed fewer signs of disorganized or delusional thinking.

From The Los Angeles Times by Melissa Healy, February 1, 2010

In the lives of young people at high risk for developing serious mental illness, heading off that first psychotic episode can mean a world of difference. A new study has found that for a year after it was completed, 12 weeks of dietary supplementation with Omega-3 fish oil reduced progression to full-blown psychosis in a large group of adolescents and young adults.

The study subjects were young people who did not yet meet the criteria for full-blown mental illness, but whose grip on reality had begun to come loose, prompting them to seek psychiatric care.

At the same time, Omega-3 long-chain fatty acids--found in a range of ocean-going fish and edible sea life--improved many of the symptoms that identified these young patients as likely schizophrenics and bipo-

lar disorder sufferers. Among the 81 young patients under observation for psychosis in an Austrian hospital, those taking fish oil supplements for two weeks showed fewer signs of disorganized or delusional thinking, more motivation, and better overall functioning than those in a comparison group, who got psychotherapy alone.

(From the NAMI California Website)

The **San Luis County Mental Health Board** meets at 3:00 PM on the 3rd Wednesday of the month at the Behavioral Health Campus (old General Hospital). Contact the MHD office (Phone: 781-4719) to confirm date and room location.

The **NAMI SLOCO executive board** meets from 11:30 - 1:30 on the second Friday of the month at The Boysdon Room, Saint Stephen's Episcopal Church, SLO .

**DONATIONS GREATLY APPRECIATED.
PLEASE MAKE DONATIONS TO: NAMI SLOCO,
P.O. BOX 3158, SAN LUIS OBISPO, CA 93403.**

NAMI SLOCO (IRS ID# 77-0099671, CA non-profit # C1535087) is a 501(c)(3), charitable, non-profit, tax-exempt organization. Donations and contributions are tax-deductible as provided by law.



REQUEST FOR A SPANISH-SPEAKING MEMBER INTERESTED IN TAKING TEACHER TRAINING FOR THE SPANISH FAMILY - TO - FAMILY CLASS.

Please contact John Lamas at 461-1635 if you are interested or know someone who is interested in training to become a Family-to-Family teacher in the Spanish-speaking community.

T-MHA YOUTH FAMILY PARTNER, FAMILY SUPPORT GROUP. For parents, guardians, and caregivers of minor children who experience emotional or behavioral problems

For more information please contact either Jackie Garza, Ph: 805-458-6388, email: jgarza@t-mha.org or Patty Ramirez, Ph: 805-541-5144 x129, email: pramirez@t-mha.org.

Consider inviting "IN OUR OWN VOICE" TO MAKE A PRESENTATION TO YOUR GROUP.



This program is a 1.5 hour presentation on stages of mental illness recovery by 2 people that have achieved recovery. For information, contact Betty McGraw, 541-5144 ext. 113 or BMcGraw@t-mha.org .

Our Librarian, Carole Wallace requests that we return library books at the monthly meetings. Please help Carole by returning your books so they can be shared with other members.

NAMI 2010 Membership (membership in NAMI SLO CO also includes membership in NAMI Cal. & NAMI Nat'l.)

NATIONAL ALLIANCE ON MENTAL ILLNESS
SAN LUIS OBISPO COUNTY

PLEASE PRINT

NAME(S) _____

DATE _____

ADDRESS _____

CITY/ZIP _____

PHONE (DAY) _____

PHONE (NIGHT) _____ EMAIL _____

DONATION _____

NAMI SLO CO is a charitable, nonprofit, tax-exempt organization affiliated with the NAMI California and NAMI.

NAMI SLO CO
P.O. Box 3158
San Luis Obispo, Ca
93403

New
 Renewal

\$30 Individual
 \$35 Family
 \$50 Friend
 \$7 Client

Mental Health Support Groups In SLO County

Facilitated FAMILY SUPPORT Groups

San Luis Obispo

There will be no NAMISLOCO family support group before our monthly meetings until we find a new facilitator (see page 2)

San Luis Obispo

Tuesday Afternoons T-MHA Orientation Class 12:00-1:00
 Tuesday Afternoons T-MHA Family Support Group 1:00-3:00 PM
 Facilitated by Janice Holmes
 Transitions Mental Health Association
 277 South St. Suite Y, SLO.
 Any questions Contact:
 Janice Holmes, Family Advocate
 805 541-5144 X 171

Atascadero

Third Monday of every month
 6:30 -8:00 PM
 5395 El Camino Real "B" (parking behind bldg.)
 Info. Call James or Diane @ 461-1286

Youth Family Support Group

Multiple Groups meet weekly throughout the county.
 T-MHA Youth Family Partners
 Contacts: **Jackie Garza**, Ph: 805-458-6388, email: jgarza@t-mha.org or
Patty Ramirez, Ph: 805-458-2596, email: pramirez@t-mha.org

PEER RUN SUPPORT GROUPS

*Support for individuals with all major mental illnesses or co-occurring disorders are invited to attend.
 (No Charge for attending)*

The times for these meetings change often so please call
Jessica Vieira TMHA's Socialization/Peer Programs Manager
 541-5144 EXT 165 JVieira@tmha.org
 San Luis Obispo
 452 Higuera St

**Peer Support
 Dual Recovery Anonymous**

**SLO Peer—Run support groups are now also offering
 "W.R.A.P." - Group-Wellness and Recovery Action Plan:
 an educational journey to recovery.**

Atascadero
 5395 El Camino, Suite B.
 Peer Support
 (Continued in next column)

Paso Robles

Paso Robles Library Storybook Rm.
 1000 Spring St.
 Peer Support

For info call Betty McGraw, 541-5144 x 113 or
 BMcGraw@t-mha.org.

PATIENTS' RIGHTS ADVOCATE
 Gerald Clare 781-4700

T-MHA Special Projects Coordinator for: "**The Shaken Tree: Families Living with Mental Illness**". John Klimala, Special Projects Coordinator, Transitions-Mental Health Association Phone: 541-5144 ext. 125;
 Email: jklimala@t-mha.org

Family Advocate, Adult Services

Janice Holmes, Lead Family Advocate
 T-MHA Phone 541-5144 X 171
 Henry Herrera, Family Advocate, Adult Services (Se habla espanol)
 T-MHA Phone 805-541-5144 X 129 or hherrera@t-mha.org

For corrections to this section please contact
 Ed Garner - egarner@calpoly.edu

Officers

Lisa Kelley President..... 788-0869
 Ian Fenwick Vice-president 543-9590
 Pam Zweifel Secretary 543-1825
 Nancy Griffin Treasurer..... 543-9399

Standing Committee Chairs

Naoma Wright Publicity.....543-5232
 Roger Gambs Newsletter,Peer to Peer Liaison.....461-6590
 Ed &Kathy Garner Newsletter & Website.....550-3117
 Carole Wallace Librarian..... 771-9063
 Pam Zweifel Membership..... 543-1825
 Norma Hoffman Housing..... 544-2725
 Rae Belle Gambs Forensic.....461-6590

Support Group Facilitator OPEN

Special Committee Chairs

Lillian Bareither - Newsletter Mailing..... 595-2821
 Jerry Howe – Farmers Market..... 543-2261
 John Klimala-
 Family to Family Coordinator 550-3889
 Lisa Kelley—
 Parents and Teachers as Allies Coordinator 788-0869
 Carole Wallace NAMI Basics Coordinator.....771-9063
 Lisa Kelley NAMI Basics Coordinator788-0869

NAMI SLOCO WEBSITE: www.namislo.org

Next Meeting
 Jan 26, 2010
 (www.namislo.org)

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