



NAMI Contra Costa

National Alliance On Mental Illness

Contra Costa's Voice on Mental Illness **OCTOBER, 2008**

The NAMI Contra Costa Newsletter is available on the website: www.namicontracosta.org
E mail: xnamicc@aol.com

General Meeting **OCTOBER**

**Thursday,
October 16
7:00 pm**

Speaker

Tom Wootton

**“An Evening of
Empowerment”**

Author of:
The Bipolar Advantage
The Depression Advantage

Topic

How to face a diagnosis and resist accepting a diminished story of your life.

Come early! (6:30 PM) Or stay after the meeting to talk to and/or sign up with representatives of the following: Peer to Peer, Peers Helping Peers, In Our Own Voice, Family to Family and the Clubhouse.

Voter registration hosted by Crestwood Consumers.

John Muir Medical Center
Concord Campus
(Note: Formerly Mt. Diablo Medical Center)
www.namicontracosta.org
E mail : xnamicc@aol.com

2540 East Street, Concord
925-682 8200

General Meeting **AUTHOR TOM WOOTTON**

STRATAGIES FOR EMPOWERMENT

Tom Wootton, a consumer with a bipolar disorder, will energetically, engagingly, perhaps “outrageously”, present this unique perspective on accessing wellness. The focus of his talks emphasize that wisdom is gained through depression.

Dr. Maureen Duffy of Barry University says, “Tom is helping people . . . face up to their illness and to resist accepting a diminished story of their lives.”

Mr. Wootton’s philosophy and dedication has led him to become a mental health advocate, public speaker, workshop presenter and author of the *Bipolar Advantage* and *The Depression Advantage*.

In addition to Wootton, representatives from the following self empowerment programs will be available.

(Continued on page 7)



PARITY AT LAST LANDMARK LEGISLATION SIGNED INTO LAW

By Gabby Hyman,
NAMI California

In a victory for consumers and families, the House of Representatives today approved landmark mental health parity legislation that will outlaw discrimination by health insurance providers when paying for treatment for Americans suffering from mental illnesses or substance abuse.

(Continued on page 5, column 1)

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NAMI-CC Care and Support Groups

Central Contra Costa County

1st Tuesday of each month, Now In Its 10th year. 7:30-9:00 pm Hillcrest Congregational Church, 404 Gregory Lane, Pleasant Hill. Contact Peggy Luna, Dave Kahler 925- 676-5771 or E mail: xnamicc@aol.com

3rd Monday of each month, 7:15-9:15 pm, John Muir Hospital, 1601 Ygnacio Valley Road, Walnut Creek Campus, downstairs in the Stern Conference Room. The group is facilitated by Dr. Mary Olowin and Gloria Hill.
Call: Gloria Hill 925- 957-5146.

NAMI Tri-Valley

2nd Monday of each Month: 7:15—9:00 pm Livermore Public Library, 1188 S. Livermore Ave., Livermore.
Contact support facilitator Marsha McInnis, marsha@nami-trivalley.org or 925- 980 5331
4th Monday of each month, 7:00—8:30 pm St. Claire's Episcopal Church, 3350 Hopyard Road, Pleasanton
Contact Russell or Donna White. russdonnawhite@comcast.net 925- 455 6901

Family Support Group

For families with a mentally ill loved one, Meets Monthly
Pastor Heather Hammer
San Ramon Valley United Methodist Church
902 Danville Blvd., Alamo
925-837 5243

BIPOLAR CHILL (CLIENT RUN)

Manic Depression Support Group
Wednesday 7:00—8:30 pm
710 Broadway #3G Walnut Creek
Contact Lisa or Scott 925-743 1160

TRI-VALLEY BIPOLAR (Consumer Run)

Bipolar and Depression Support Group
Wednesdays, 7:15 pm to 8:45 pm
St. Claire's Episcopal Church, Pleasanton
Contact: Bob Hogan: 925-462 5481

NEW HOPE BIPOLAR SUPPORT GROUP

For parents of children and adolescents diagnosed with a mood disorder.
Lafayette:
2nd Monday of each month
7:00 pm to 9:00 pm
Lafayette-Orinda Presbyterian Church Room #4
Contact: Annette 510-733 0577 or
Joani 925-962 9952

www.newhopesupportgroup.com

SELF-INJURY SUPPORT GROUP (Consumer Run)

For self-injury sufferers to talk about ways to change these behaviors and resolve feelings brought on by trauma.

Call: Veronica 925-945 7871

H.E.L.P.

Hope, Encouragement, Love and Prayer

Support group for those coping with a mental illness and/or their families and friends.

Time: Last Monday of each month 7:00—9:00 pm

Where: Christ the King Church, Parish Hall
199 Brandon Road, Pleasant Hill

Contact Joe or Pam Appel 925-947 0269

Richmond Support Group

Richmond Health Center 100 38th St. Room 2400
2:00 pm to 3:30 pm
Matthew Luu, LCSW 510- 374 7500

FAMILY ADVOCATE HOURS

Gloria Hill, Contra Costa County
Mental Health Advocate
Monday - Friday 9:30 am - 6:00 pm
925-957 5146

NAMI-Contra Costa
National Alliance on Mental Illness

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Phone: 925- 465 3864

Newsletter Deadline: 20th of Each Month

**PRESIDENT'S
COLUMN**

By Al Farmer

Sue and I always find attending the NAMI State Convention uplifting as we struggle to help our schizoaffective son. We are also reminded that we are not alone in our struggle, and we always meet so many wonderful people. It is a unique opportunity to share our stories and offer each other support.

The convention opened with comedian Brian Wetzel filling the room with peels of laughter as he poked fun at his devastating illness and the havoc it played in his life. He has spent twenty years struggling with clinical depression and he is a wonderful example of someone who has his demons under control and chooses to share his story to help others. This gives us all hope. That is if we can stop laughing. We bought his DVD and look forward to sharing it with NAMI.

However, Brian was only the first hour. We had two days of wonderful lectures from esteemed doctors and psychiatrists from Stanford, UCSF, UCLA and many other top universities and Research Centers giving us the latest advances in medicines and research to help control mental illness. We always leave the convention feeling more educated and able to deal with our personal situation.

We watched parts of the documentary by Katie Cadigan that focuses on erasing stigma in society. It is an insightful documentary that educates the public about the struggles we all face as we deal with our mentally ill loved ones. It is very exciting that this documentary will be viewed on channel 9 in 2009.

**GENERAL
MEETING**

Thursday, November 20, 2008—
Detecting Depression: How it differs from sadness, symptoms in adolescents and adults. What to do. Anne Mabee, Contra Costa Crisis Center, M.A. with focus in mood disorders; PhD candidate, Bay Area Psychotherapy Training Institute, Lafayette.

Thursday, December 18, 2008—
Third Annual Report on Contra Costa County Mental Health: Where We Are & Where We Are Headed. A panel chaired by Dave Kahler, Contra Costa County Mental Health Commission, NAMI-CC Board, past NAMI-CC President

Thursday, January 15, 2009—
Topic: Social Security. Speaker: Daniel Fortuna, President/Director of Benefits, Education Center, San Francisco. NAMI California Conference Presenter

Thursday, February 19, 2009
Anxiety Disorders. Speaker: Dr. Robin Zasio, Director/Clinical Psychologist, Anxiety Treatment Center, Sacramento.
www.YourGreaterGood.com.

Thursday, March 19, 2009, Integrating Relaxation Strategies With Therapy. James Bramson, Psy.D., LCSW, Clinical Psychologist

Thursday, May 21, 2009, Issues in Healthcare Reform: Care of the Mentally Ill Under a Single Payer System. Speaker: Pat Snyder; Chair, Contra Costa chapter of Health Care for All; Legislative Consultant, League of Women Voters.

CLUBHOUSE REPORT

NEW DIRECTOR SELECTED

Molly Hamaker was recently appointed the interim Executive Director of the Contra Costa Clubhouses, Inc.

Molly has been active in the Clubhouse project for more than two years, initially as a work group member and later as vice president of the first board of directors.



She has been involved in starting and developing many non-profit organizations, including The Center for Living Democracy for which she served as Associate Director.

For the last 15 years she has been providing business-development consulting to a

variety of enterprises in the areas of strategic planning, program creation, operations management, marketing and website development.

Molly has a M.A. and an Ed.S in Educational Psychology from Chapman University. She is also a credentialed school psychologist who has worked in the West Contra Costa and Oakley School Districts with students at all grade levels.

She has lived in Walnut Creek since 1985 with her family and husband, Charlie Hamaker, who is a mathematics professor at St. Mary's College.



Bev and Herb Putnam Founders of the Clubhouse

The Clubhouse will have its first annual fundraiser Wednesday, October 15, 2008 at 5:30 pm. It will be at the Clubhouse which is at 3024 Willow Pass Road in Concord. For more information call: 925 691-4276.

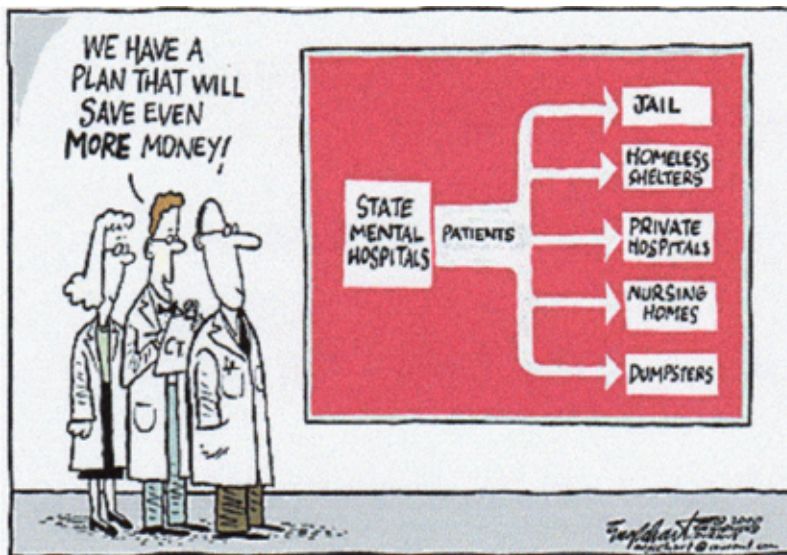
MHCC SELECTS BRENDA CRAWFORD

Brenda Crawford has been chosen to be Executive Director of Mental Health Consumer Concerns.

Ms. Crawford has over thirty years of experience in the field of non-profit management.. She currently holds memberships in several local and national networks of consulting organizations including the Bay Area Organizational Development for Consultants (PDC) and past member of the Bay Area Chapter of the American Society for training and Development (ASTD). She served as chair on the City of Oakland's, Commission on Aging, for two terms and was honored in 2007 by being chosen as one of 81 Californians who were selected as Senior Leaders by UC Berkeley, School of Public Health and Wellness Foundation.



Brenda Crawford



Reprinted from the Treatment Advocacy Center's website September 19, 2008. Artist: Bob Englehart, Hartford Courant

REFRIGERATOR WANTED

The Behavioral Health Court can use a good refrigerator to serve the clients. They would be happy to pick it up.

Call 925-207 6321

PARITY AT LAST

(Continued from page 1)

The 263-171 vote, approving the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, was part of the financial bailout package signed by President George Bush.

In its inclusion of the Wellstone Act, the House ended a 20-year battle that was led by Senator Paul Wellstone. Following his death, his son David carried on the effort.

It is estimated that roughly 67 percent of adults and 80 percent of children requiring mental health services do not receive help, in large part because of discriminatory insurance practices.

In sum, the bill represents a triumph for those who have struggled for decades to receive equal health insurance coverage from their employers or from self-paid health plans, without artificial limits on inpatient/outpatient visits or for emergency care to treat mental illness, dual diagnosis, or substance abuse. The legislation applies to group health plans of 51 or more employees.

According to bill proponents, many of the 35 million Americans who suffer from mental illness or substance abuse diseases each year will finally receive assistance as a result of what is being termed the Civil Rights Act of the new millennium.

The main Republican sponsor, representative Jim Ramstad of Minnesota, a recovering alcoholic, said, "I am living proof that treatment works and recovery is real."

Proposition 63 MHSA UPDATE

In November 2004, California passed Proposition 63. It placed a 1% tax on adjusted gross annual incomes of over \$1 million and earmarked the tax monies to transform the state's 58 county and city operated mental health authorities into more consumer and family driven, culturally competent, recovery-oriented systems.

Addressing the needs of previously unserved or underserved populations is also a clear priority of the legislation. The MHSA was projected to generate nearly \$700. million by fiscal year (FY) 2007, increasing thereafter. But actual funding levels have exceeded projections by more than 30%.

**Prop 63 has
exceeded projections
by 30%**

The new funds represent about a 10% increase in county mental health budgets.

Driven by the new funding initiative, California has approached a major transformation of its mental health system by creating a synergy between a state-level framework of overarching principles and goals and community-based stakeholder planning for local implementation

There are many obstacles to the successful implementation of these ambitious county plans. Counties may have been waiting for the workforce education and training portion of MHSA fund to become available to strengthen cultural competency, which raises the issue of the appropriate sequencing of implementation of the legislation.

NATION SHORT 100,000 BEDS

Across the country, 40 mental health hospitals have closed in the past decade, according to the U.S. Department of Justice. During the same time, 400 new prisons have opened.

In 1965 Congress excluded most payments to state psychiatric hospital and other "institutions for treatment of mental disease" (IMD's) from Medicaid because the Federal Government did not intend to take over what historically had been a state responsibility and because it intended to implement a system of community mental health centers that would replace the state psychiatric hospital systems.

Largely as a result of the IMD Exclusion, hundreds of thousands of patients have been deinstitutionalized to the streets or trans-institutionalized to nursing homes, general hospitals or other similar institutions where federal funds pay most of the costs.

Hundred of thousands more are incarcerated in prisons and jails. Institutions ill-equipped to handle their special needs. In the past four decades, America has lost effectively 93% of its much needed state psychiatric hospital beds, resulting in increased rates of homelessness, incarceration, suicide, victimization and violence.

Editor's Note: This was excerpted from the Treatment Advocacy Center's report on the Medicaid (Medi-Cal in California) exclusion.

AN OPEN LETTER

FROM: ROSE KING TO: MHSA-PROP 63

Oversight And Accountability Commission

Editor's Note: *Rose King authored an article in the September NAMI-CC newsletter. This is a follow-up to that article. The September newsletter is available on the NAMI-CC website: www.namicontracosta.org. How to contact her is shown at the end of this "Open Letter."*

September 22, 2008

MHSA Oversight and Accountability Commission
Chair Linford Gayle
Vice-Chair Andrew Poat

Dear Commissioners,

More than a year ago, I asked some basic questions of the Oversight and Accountability Commission (OAC), the Department of Mental Health (DMH), and other principles responsible for implementation

The question still before implementers: *"Why are counties directed to seek new clients and create new programs, when clinic waiting rooms are already crowded with individuals denied appropriate and timely mental health services?"*

The central issue was, and still is, the failure to provide a plausible explanation or rationale for spending MHSA funds to create a parallel, dual system of mental health services. This development did not happen by accident, but by design, and with the explicit or implicit approval of responsible parties, including the Commission. DMH status reports

now state that this development is a priority concern for stakeholders.

Of equal concern is the continuing need for an implementation plan, which includes relevant data on current conditions. As a consultant to then-Attorney General and Commission Member Bill Lockyer, I worked with Commissioners, staff, and dedicated community members who reviewed all of the initial CSS plans, and who informed the OAC and DMH of the need for context.

We informed the OAC then that plans could not be properly evaluated without knowledge of a starting and an end point. We asked: *"What does successful implementation look like; what are conditions today in each county; what are the gaps between existing services and the goal of appropriate services?"*

As you know, The Department of Finance recently outlined some of the consequences of operating without an implementation plan. Absent a known plan, the OAC and DMH are not required to make sense of directives that are creating more inequities, wasting precious prevention funds, and leading to chaos at the local level. Absent a plan, strategies for systems of care and prevention/early intervention are not transparent, programs have no overall objective, and decisions are ad-hoc.

The lack of an implementation plan also fosters practices that can undermine efforts of DMH and OAC to promote cost-effectiveness—a key argument for

passage of Prop 63.

Because of the piecemeal implementation and failure to provide state standards, every county is encouraged to hire contractors, conduct the same research, invent programs already developed elsewhere, and generally "reinvent the wheel," according to many stakeholder reports.

I write today to urge the OAC to work to address the above questions raised in early 2006, and to fully participate in preparing a comprehensive implementation plan, which is known, understood, and widely communicated. Counties throughout the state reported to DMH in their Three-Year CSS plans that hundreds of thousands of mental health consumers are denied appropriate and adequate services today. Urban and rural, north, south, and central California counties told us they could not fully serve any of their clients.

This knowledge has had no measurable impact on MHSA strategies.

- Prop 63 funds are creating a first-class mental health system by requiring counties to start new programs that offer appropriate services to newly recruited clients.
- Prop 63 funds are supporting "outreach" efforts to seek new clients for the new programs.
- Prop 63 funds are not expanding the array or quality of services in the existing third-class system, identified in countless investigative reports as substandard, inefficient, and inhumane.

These decisions add up to a two-tier system—a "Cadillac" system for selected new clients and a dysfunctional, deteriorating system for those already inappropriately served.

This course of action not only defies a sensible explanation, but also causes indescribable pain and disappointment to many, many consumers and family mem-

bers. Some believe it is immoral, some think it is illegal, and some just despair. Does the Commission have an answer?

- Stakeholders did not ask for a two-tier system;
- The Act did not mandate a two-tier system;
- Voters didn't vote for a two-tier system.

Voters, specifically, were promised expansion of existing systems of care for children and adults, and new programs in wrap-around services, prevention, and innovation. The Legislative Analyst's Analysis spells these out. The ballot arguments promise the same, and add that: "*An oversight panel of independent, unpaid members supervises expenditures.*"

Rose King

187 – 41st Street, Sacramento, CA 95819
 (916) 456-8103 phone/fax •
Rking1@surewest.net

OCTOBER DONATIONS

David L. and Laura L. Meiser
 Heather Quisenberry
 (Through the Chevron Humankind Matching Gift Program)

C. Combs
 Steven and Julia Cramer

The Following through the
 AT & T United Way
 Employee Giving Program:

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 John A Williamson
 George Snow

PG & E Campaign for the Community
 Made an
 Anonymous Donation

Bank of America United Way Campaign

Alison R. Buckles
 Susan M. Henderson
 And an Anonymous Donation

General Meeting

(Continued from page 1)

before (6:30-7:00 PM) and after the meeting to speak with individuals: The NAMI programs: In Our Own Voice, The Clubhouse, Peer to Peer, Peer Pals, and Family to Family will be there to answer your questions.

Mr Wootton's books will be available for purchase that evening.

You may e mail questions in advance to:

xnamicc@aol.com

Wootton's website:
[www. BipolarAdvantage.com](http://www.BipolarAdvantage.com)

DONATION FORM

Make check payable to NAMI-CC
 Mail to: Treasurer, NAMI-CC
P.O. Box 21247, Concord, CA. 94521
 NAMI-CC Tax ID # 68-0209474

Use Donation For:

- Peer to Peer Program
- NAMI-CC General Fund
- Family to Family
- K.I.D.S. Program
- Housing
- IOOV (In Our Own Voice)

 Name

 Street Address

 City State Zip

Phone: _____

E mail address:

NAMI Contra Costa
 P.O. Box 21247
 Concord, CA
 94521

If you need Support, Guidance
 and Information:
**First Tuesday Support
 Group**
 Tuesday, November 4, 2008 7:30 pm
 Hillcrest Church, 404 Gregory Lane
 Pleasant Hill See Page 2



Stamp

“An Autumn Evening in the Garden”
 Contra Costa Clubhouse Annual Fundraiser and Open House
 3024 Willow Pass Road, Concord
 Wednesday, October 15, 2008 5:30 pm

NAMI Contra Costa

The annual membership dues are \$40. This makes you a member of NAMI National, NAMI California and NAMI Contra Costa. You are automatically a member of all three organizations.

If you are solicited for membership or special donations from the State or National organizations, give generously if you can, but all such donations are voluntary and would be over and above your membership in NAMI Contra Costa.

Dues paid in October, November and December provide membership for the following year.

Send your membership application to:

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 This Monthly Newsletter is Published by: NAMI
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APPLICATION FOR NAMI-CC MEMBERSHIP
 Make check payable to NAMI Contra Costa
 Complete this information cut-out and return it to:
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 P.O. Box 21247, Concord, CA., 94521
 E Mail Address: xnamicc@aol.com

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Street _____

City _____ State _____ ZIP _____

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Membership is: New A Renewal

<input type="checkbox"/> Mental Health Client	\$ 20.00
<input type="checkbox"/> Dual Affiliate	20.00
<input type="checkbox"/> General Membership	40.00
<input type="checkbox"/> Professional Membership	50.00
<input type="checkbox"/> Century Club	100.00
<input type="checkbox"/> Lifetime	500.00