NAMI Buffalo & Erie County
National Alliance on Mental Illness

the challenger

vol. 9 - Number 4 Winter 2017

Mark Your Calendar & Find Support Meeting Location Info

Family Education Meetings *are held at St. Paul's Evangelical Lutheran Church, 4007 Main St., Amherst (near Eggert Rd.) on the 2nd floor (main entrance at the back of the church), on the 2nd Thursday of the month.*
Two ***family support meetings*** *are held on the 3rd Wednesday of the month: NORTH at St. Paul's, on the 1st floor (church entrance at ground level at left rear of the building); and SOUTH, at BestSelf Behavioral Health, 3176 Abbott Rd., Orchard Park, 14127.* ***Board meetings*** *are usually held at St. Paul's Evangelical Lutheran Church (location listed above); members are welcome. To attend, call ahead to confirm meeting date and location.*

January 2018

2 Tues Board Meeting*, 7 p.m.*
4 Thurs *Family-to-Family Amherst 12-week class begins*
11 Thurs Education Meeting, *7 p.m. Library/coffee hour 7:30 p.m. Program. CHANGED: "Self-Care for Care-givers". Guest: Sarah Gigante PT, DPT, RYT-200 Yoga Therapist at Baker Victory Services.*
17 Wed Family Support Groups, *NORTH and SOUTH, 7–8:30 p.m. (locations in box above)*
17 Wed *Buffalo Philharmonic Orchestra evening of "Rachmaninoff and His Psychiatrist"*

February

6 Tues Board Meeting, *7 p.m.*
8 Thurs Education Meeting, *7 p.m. Library/coffee hour 7:30 p.m. Program. "Adverse Childhood Experience and Trauma-Informed Care." Guest: Josal Diebold, MSW/PhD student, UB School of Social Work trainer, Institute on Trauma and Trauma-Informed Care*
12 Mon *Family-to-Family Hamburg 12-week class begins*
14 Wed Family Support Groups, *NORTH and SOUTH, 7–8:30 p.m. (locations in box above)*

March

6 Tues Board Meeting, *7 p.m.*
8 Thurs Education Meeting, *7 p.m. Library/coffee hour 7:30 p.m. Guest: Author Dr. Nicole M. Robinson, of* Unstoppable Joy: the Art of Finding Hope, Healing and Happiness *on "Recovery in the Struggle of Depression, Anxiety, and Sadness"*
21 Wed Family Support Groups, *NORTH and SOUTH, 7–8:30 p.m. (locations in box above)*

April

3 Tues Board Meeting*, 7 p.m.*
12 Thurs Education Meeting, *7 p.m. Library/coffee hour 7:30 p.m. Program: "Substance use Disorder Treatment Options for Adolescents and Young Adults Guest: Ellen Breslin, CASAC/CRC; Administrative Director Renaissance Addiction Services, Inc.*
18 Wed Family Support Groups, *NORTH and SOUTH. 7–8:30 p.m. (locations in box above)*

President's Corner

We have exciting news!

Award winning neuroscientist, psychiatrist and chemical engineer, Dr. Kafui Dzirasa will be our speaker at our **Annual Awards & Dinner Celebration on May 3rd**. SAVE the date.

Dr. Dzirasa, assistant professor of psychiatry and behavioral sciences at Duke University, is not only a brilliant researcher, practicing psychiatrist and charismatic speaker but a family member of several relatives with serious mental illness. "Ride the Tiger: A Guide Through the Bipolar Brain," is a PBS documentary, at http://www.pbs.org/ride-the-tiger/home/, that provides an overview of Dr. Dzirasa's research to develop an electrical device that would stabilize a person's mood without medications.

It was by chance that we learned of Dr. Dzirasa at NAMI Buffalo member Kerima Collier's benefit art exhibit in 2016 in Buffalo which succeeded in raising funds for Dr. Dzirasa's research. The articles in this newsletter on the sad state of affairs for the subset of seriously mentally ill people who fall through the cracks of a broken system, make clear just how critical it is to boost funding on brain research.

Watch a shocking video on our Facebook page about the helpless woman who was recently discharged confused, clothed only in a patient gown from a Baltimore hospital onto the cold dark, streets of the city and read Pete Earley's report in this newsletter on the all-too-common practice of **patient dumping.** Continuing closure of long-term psychiatric hospital beds across the country is fueling the travesty of throwing those with mental illness onto our streets and into our jails. **Imagine if we did that to cancer patients.**

The system is more interested in reducing costs of

President's Corner cont's, Pg.2

President's Corner cont'd. from pg.1

mental health treatment than delivering the best of care to those with brain disorders. Ironically, it's more expensive to keep patients in the revolving door of the criminal justice system than it would be to provide psychiatric care in a therapeutic environment. Dr. Christine Montross addresses this:

> *As a hospital psychiatrist, I see this every day. Patients with chronic, severe mental illnesses are still in facilities — only now they are in medical hospitals, nursing homes and, increasingly, jails and prisons, places that are less appropriate and more expensive than long-term psychiatric institutions.…The goals of maximizing personal autonomy and* **civil liberties for the mentally ill are admirable.** *But as a result, my patients with chronic psychotic illnesses cycle between emergency hospitalizations and inadequate outpatient care. They are treated by community mental health centers whose overburdened psychiatrists may see even the sickest patients for only 20 minutes every three months. Many patients struggle with homelessness. Many are* **incarcerated.** *(The Modern Asylum, NY Times, Feb 28, 2015)*

The Treatment Advocacy Center reported that **90,000 inmates** with serious mental illnesses are waiting for a psychiatric hospital bed. And across the country the plan is to keep closing beds.

NAMI NYS has declared its top legislative priority to be increased access to **community-based housing with wrap around services.** A recent government document estimated that there were 88,352 homeless in NYS on a given night in January. In 2016 Governor Cuomo introduced a $20 billion, five year plan to address the multi-faceted problem of homelessness. While NAMI credits the governor with his previous positive efforts and recent new proposals, e.g., arranging for ACT teams in shelters, we want this commitment strengthened to provide not only housing but **the best recovery-oriented care possible.**

NAMI NYS advocates for additional measures in Governor Cuomo's State of the State address:

- an increase in police training for Crisis Intervention Teams (CIT);
- **no solitary confinement for prisoners with psychiatric disorders;**
- an increase in mental health courts;
- a re-instatement of Medicaid services for mentally ill prisoners before their release as well as effective discharge planning; and
- preventing insurance companies from switching allowable prescription coverage mid-contract.

There are grave concerns that the federal tax reform bill will make it harder for blue states like NY to achieve some of our most ambitious goals in health care.

On the federal level, Dr. Herbert Pardes, president of the Brain & Behavior Research Foundation's Scientific Council, recently wrote

President's Corner cont's, pg.3

Volunteers are our heart!

A very warm welcome to **Cambria Daniels** to our board of directors. And, we bid a fond au revoir to long-time board member, Judy Capodicasa who we will still see at the office as she has committed to continuing to assist with membership.

Paula Baumer-Wyse has been trained as our newest Family-to-Family teacher, Congratulations, Paula, and welcome aboard!

Thank you to all our **Christmas is for Kids! project helpers--the sorters, shoppers, donation pick-up helpers, and the wrapping crew**--as well as co-chairs **Mary Lou Bond, Mary Kirkland,** and **Tom McNulty**.

Thanks also to the talented, dedicated women of the **Alpha Kappa Alpha, Inc. Gamma Phi Omega Chapter** sorority with whose partnership we held the "Healthy Minds Empowerment Conference" at Medaille College in October. The event featured keynote speaker **Keith O'Neil** and was a promising success! We appreciate, too, the **volunteer panelists and presenters** for the youth and adults who attended.

Welcome also to our new bookkeeper, **Conor Fitzpatrick.** We wish **Meghan Gallagher** the best and extend our appreciation for all she did while working with us.

Our deepest condolences to...

Thomas and Dolores Santa Lucia in the loss of their son Thomas J. Santa Lucia.

Employee giving programs like United Way, SEFA, Thrivent, and others --as well as employer gift matching programs--make a big difference to NAMI Buffalo & Erie County. Please consider naming us as your charity of choice. Thank you.

Save the Date!

Thursday, May 3rd, 2018
34th Annual Awards & Dinner Celebration
to feature keynote from

Dr. Kafui Dzirasa

Duke University Research Professor

Kafui Dzirasa was born to Samuel and Abigail Dzirasa, who grew up as neighbors in an area outside of Accra, Ghana. His father came to the US in 1971 when he was accepted into the Civil Engineering Program at MIT, and his mother followed soon after completing a nursing degree in England. After graduation, his father went on to obtain an MBA from the Sloan School of Business, Kafui was born in Boston, MA in 1978, and grew up with his three brothers and a sister in Silver Spring.

Kafui Dzirasa is the first African American to complete a PhD in Neurobiology at Duke University. His research interests focus on understanding how changes in the brain produce neurological and mental illness, and his graduate work has led to several distinctions including: the Somjen Award for Most Outstanding Dissertation Thesis, the Ruth K. Broad Biomedical Research Fellowship, the UNCF-Merck Graduate Science Research Fellowship, and the Wakeman Fellowship. In 2009, Kafui obtained an MD from the Duke University School of Medicine. He was subsequently appointed as an assistant professor and house staff in the Department of Psychiatry and Behavioral Science at the Duke University School of Medicine.

Kafui is a product of the nationally renowned Meyerhoff Scholarship program at the University of Maryland Baltimore County (UMBC), where he was conference champion in the long jump, an Academic All-American, and Student Body president.

Kafui has served on the Board of Directors of the Student National Medical Association: a national organization dedicated to the eradication of health care disparities. Through his service as Chapter President, Region IV Director and National Internal Affairs Committee Chair, Kafui has participated in numerous programs geared toward exposing youth to Science and technology, providing health education for underserved communities, and organizing clinics to screen for chronic diseases. Kafui received the Charles Johnson Leadership Award in 2007, and he was recognized as one of Ebony magazine's 30 Young Leaders of the Future in February 2008. He has also been awarded the International Mental Health Research Organization Rising Star Award, the Sydney Baer Prize for Schizophrenia Research, and his laboratory was featured on *60 Minutes* in 2011. In 2016, he was awarded the inaugural Duke Medical Alumni Emerging Leader Award and the Presidential Early Career Award for Scientists and Engineers.

Kafui's ultimate goal is to combine his research, medical training, and community experience to improve outcomes for diverse communities suffering from Neurological and Psychiatric illness.

This is sure to be an excellent event--mark your calendar!

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President's Corner from pg. 2

an op-ed in *The Hill* urging bi-partisan action to pass the **Excellence in Mental Health and Addiction Treatment Expansion Act** in Congress.

These goals present great challenges and as a society we have to make hard choices of how we spend our tax dollars: expanding our nuclear weapons pile or taking the seriously ill off the streets and out of jails? **Which would you choose?**

Beginning in the 2018-2019 school year, **schools are now mandated to include mental health education** as part of the health curriculum, thanks to the governor's leadership--and NAMI's advocacy. Our chapter has been anticipating this development for the last year and presenting the national NAMI program "SAY IT OUT LOUD" as a free potential resource to the Buffalo City, Depew, and Williamsville districts' schools.

As we welcome 2018, a new year, let us resolve to work harder to renovate and reinvigorate the inadequate bureaucracy that pretends to serve the seriously mentally ill. Let's pressure the federal government to increase funding for brain research. Let's call and write to our state and federal office-holders frequently and keep them on notice that **the way our society treats the seriously mentally ill can no longer be tolerated.**

Ann Venuto

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Another Subway Tragedy by DJ Jaffe

January 4, 2018 City Journal

From: https://www.city-journal.org/html/another-subway-tragedy-15627.html

DJ Jaffe is a member of NAMI Buffalo & Erie County. Also, don't miss the comments from NAMI Buffalo president emerita Marcy Rose at the end of this article.

Governor Andrew Cuomo began his 2018 State of the State address 19 years to the day—and hour—that Kendra Webdale was pushed to her death in front of a subway train by Andrew Goldstein, a man with untreated serious mental illness. Before Cuomo finished his speech, mentally ill Andrew Cordero pushed Jacinto Suarez onto the subway tracks in Brooklyn. Suarez, too, died. Kendra's death led to the adoption of Kendra's Law, which empowers judges to mandate treatment for the mentally ill who are a danger to themselves or to the community. The death of Jacinto Suarez should lead to further reforms.

While Cuomo didn't mention Kendra's Law, he did talk about mental illness and the homeless. "Homelessness is on the rise in our cities and worse than ever before," the governor said. "It pains me personally to acknowledge this reality." As well it should: Cuomo's unapologetic embrace of the long-standing bipartisan policy of closing state psychiatric hospitals is increasing both homelessness and incarceration.

The governor recounted his own history on the issue, recalling that he headed Mayor Dinkins's homeless commission in 1992. I (DJ Jaffe) arranged for parents of the seriously mentally ill to testify before that commission. The parents wanted New York to adopt policies that would allow them to get care for their seriously mentally ill children before they became a danger to themselves or others. Cuomo rejected their pleas, siding with the mental health establishment, which has never been willing to take responsibility for the most seriously ill. As Cuomo wrote in the commission's report, "The Commission considered and rejected a lowering of the standard for involuntary institutionalization as "inappropriate and unnecessary." He noted that sick people could be sent to state hospitals "for months" to be stabilized. But during his tenure as governor, he has closed state psychiatric hospitals, effectively taking that option off the table.

The governor spoke eloquently about the plight of people incapable of taking care of themselves. "While we aggressively protect an individual's civil liberties, we believe in helping people in need." Leaving the sick to "fend for themselves is not progressive, charitable or ethical or legal." Cuomo emphasized the need for more outreach, proclaiming that "some jurisdictions say case law prevents them from helping mentally ill street homeless. If that is their excuse, they should tell us what law stops them from helping sick homeless people and we will change the law this session." But the governor is being disingenuous: the changes needed are the same ones that Democrats have refused to support in the past, and that he blocked when he headed the mayor's homeless commission. These proposals have been made multiple times in recent years by State Senator Catharine Young, and more recently were included in the campaign platform of Assembly Member Nicole Malliotakis when she ran for mayor of New York City.

From a practical standpoint, New York law requires someone to become a "danger to self or others" before he or she can be involuntarily committed. But laws should prevent violence, not require it. New York is one of the few states without an adequate "need for treatment" or "grave disability" standard. A second problem is that in New York, even after someone is found to be a "danger to self or others" and involuntarily committed, he or she can still refuse treatment; a second hearing is required to overcome that objection. New York must pass a law requiring the involuntary-treatment hearing to be held at the same time as the involuntary-commitment hearing.

Kendra's Law lets courts order the most seriously mentally ill who have already accumulated multiple incidents of violence, arrest, hospitalization, or homelessness to stay, for up to one year, in mandated and monitored treatment while they continue to live in the community. This arrangement is less restrictive and more humane than inpatient commitment or incarceration. It has been proven to reduce homelessness, arrest, and incarceration, and it is more cost-efficient. But it is impossible for community providers to ramp up their programs when the governor keeps putting a five-year sunset on the bill. He should insist that it be made permanent this year. Cuomo called for more agency outreach, but he didn't mention outreach to mentally ill prisoners, who are being discharged from jails and prisons, and involuntarily committed patients, who are being discharged from hospitals. These are the most likely people to become homeless or incarcerated. Mentally ill Andrew Cordero had been arrested

three times since September, and police had been called to his home multiple times as a result of his bipolar disorder.

The New York State Office of Mental Health (OMH) must focus on the seriously mentally ill. While Governor Cuomo identified the homeless seriously mentally ill as a priority, his mental health commissioner recently touted the release of a new OMH-funded coloring book. Andrew Goldstein and Andrew Cordero did not need coloring books—they needed treatment. OMH should stop funding programs that don't reduce homelessness, arrest, incarceration, and needless hospitalization, and transfer funds to the programs that do. OMH should also set up a hotline that families and the public could call to report someone with mental illness who may need Kendra's Law to stay safe. And OMH should end the practice of giving funding and veto power to nonprofit trade associations that lobby to close more hospitals, in contravention of Kendra's Law.

Governor Cuomo knows how to deliver a good speech. But until the governor puts some meat and money behind his proposals for the seriously mentally ill, they are only words.

DJ Jaffe is author of Insane Consequences: How the Mental Health Industry Fails the Mentally Ill *and executive director of Mental Illness Policy Org. (@MentalIllPolicy)*

Selected comments posted on the above blog site:

Harold Maio •
The person who pushed Kendra Webdale to her death had sought treatment at three NYC hospitals. Each discharged him to the streets. "Kendra's Law" remedied that to a degree: When a judge orders treatment, a treatment facility cannot deny it--to that person.

Dj Jaffe •
Executive director at Mental Illness Policy Org
And Andrew had to go to the hospital so many times because each time he left the previous hospital, he went off treatment. Kendra's Law remedies that too. In a jailhouse interview Andrew said he supports Kendra's Law and wish it existed before he pushed her.

Marcy Rose
Added to the inefficiency of needing two orders when involuntarily admitted to a hospital--one for admission, the other for treatment, is also the fact that the order for treatment (medication to stabilize) leaves an unstable patient, sometimes for weeks, in a hospital unit who can attack and harm staff or other patients. When he does show these symptoms of untreated illness, he is usually arrested and taken to jail where he cannot be ordered to take medication. Talk about unfair and cruel!

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Thank you, Christmas is for Kids! Project Volunteers and Donors

About thirty volunteers and dozens of individuals, groups, businesses and agencies again brought a wonderful holiday season to some 600 children and family members who receive services in the mental health system in WNY. Gifts and donations were gathered, collected for wrapping and needed purchases, then sorted and distributed with the season's love and joy. This was a wonderful 27th year for our effort and we are grateful for all the project's support--and the smiles of both the givers and recipients of its heartwarming results. Congrat's to co-chairs Mary Lou, Mary, and Tom!

Partnership Produces Positive Results at Medaille College October Healthy Minds Empowerment Conference

A series of panel and workshop presentations at Medaille College around mental health needs in diverse and urban communities was given high marks by the 75 youth and adults who attended the event. NAMI Buffalo thanks our partners from the Alpha Kappa Alpha, Inc. Gamma Phi Omega sorority chapter for bringing important mental health topics to the community we all care about. Presenters included:

Ellen Breslin, CSC/CASAC
Paul Cameron, BS
Leah Angel Daniel, MA
Cambria Daniels, MA
Julie Gutowski, LMHC
Dr. Michael Hallett
Jessica Horder, MS/LMHC
Dr. Joshua Mirwis
Pastor George Nicholas, LMUMC
Stefanie Sacco, LMSW
Jamy Stammel, LMSW

Baltimore Incident is Simply the Latest in Patient Dumping:

Hospitals and Jails Find Creative Ways to Rid Themselves of Patients

Posted: 15 Jan 2018 04:57 AM PST

(1-15-17) The viral video footage of a woman, clad only in a hospital gown, being literally dumped on a Baltimore street by University of Maryland Medical Center (UMMC) employees last week in freezing temperatures outraged viewers.

In a mea culpa press conference, the hospital's top official, Dr. Mohan Suntha, declared: "We take full responsibility for this failure," and left the impression that patient dumping is rare and a freak occurrence.

Sadly, that's just not true. It has been going on for decades and now hospitals are not the only ones finding creative ways to rid themselves of poor patients with serious mental illnesses rather than treating them.

The Treatment Advocacy Center was quick to report last week that in Maryland alone, 750 individuals with schizophrenia or bipolar disorder were discharged from hospital emergency departments 'against medical advice' in 2014.

A 2011 report by G. Douglas Bevelacqua, then-Inspector General for Behavioral Health and Developmental Services in Virginia, found that 200 persons in the midst of a mental health crisis were refused admittance to hospitals in the Hampton Roads area from April 1, 2010, through March 31, 2011.

A follow-up report noted that between July 15 through Oct. 13, a total of 72 people, who were in need of a "temporary detention order" to allow for a comprehensive evaluation to determine the proper level of care due to clinical risks, were ignored.

Turning away patients was so common in Hampton Roads that hospital officials had a slang term for it: **"streeting."**

The Virginia legislature decided to end the practice after state Sen. Creigh Deeds' son, Gus, attacked him and took his own life in 2013. Father and son had been turned away from a local mental health center after being mistakenly told no hospital beds were available. Legislators passed a **"bed of last resort"** law that said state run mental hospitals were required to accept patients if no hospital psychiatric bed could be found in their communities.

Problem solved, right?

Not according to an advocate who spoke recently at a convening of mental health officials brought together to make recommendations to newly sworn-in Virginia Gov. Ralph Northam. She reported that Virginia hospitals were now "dumping " patients by sending them to state hospitals for problems as minor as urinary tract infections because the state couldn't refuse them and **the local hospital didn't want to foot the bill of treating them.**

Virginia hospitals are not the only public facilities finding ways to dump the seriously mentally ill. During a visit to a local Virginia jail, I was told that seriously mentally ill arrestees were being immediately released on personal recognizance bonds because the sheriff couldn't afford to pay for their medications. (If admitted into jail, an arrestee loses federal health care coverage.)

Even more blatant, it's been alleged that a Reston hospital has been known to call the police when someone ,who has a mental illness but no insurance, arrives seeking help.

After the latest Baltimore incident, Baltimore Sun newspaper reporter Andrea K. McDaniels reminded readers that patient dumping is nothing new. She wrote:

When the term was first coined in the late 1800s, it involved private hospitals sending poor patients to public hospitals, but it's come to mean any hospital that releases someone, usually a homeless and/or mentally ill person, to the streets rather than sending them to a shelter or appropriate services.

The New York Times first began writing about ***patient dumping in the 1870s*** *when private hospitals were sending patients who couldn't afford their services to Bellevue Hospital, the city's public hospital, according to a 2011 report in the American Journal of Public Health.*

Traditionally, poor patients in the United States were largely treated by public or charitable hospitals. Private hospitals were under no obligation to admit patients and could refuse service to anyone.

That changed in 1986 when Congress passed the Emergency Medical Treatment & Labor Act, which was signed by President Ronald Reagan. ***The law prohibited emergency rooms from denying hospital services to anyone even if they can't pay and also from transferring or discharging patients without first stabilizing them.***

The Joint Commission, which accredits hospitals, also requires that hospitals have a discharge plan. But discharge policies can differ widely by hospital.

The issue drew widespread national attention about a decade ago when the city of Los Angeles began a crackdown on patient dumping after several incidents there, particularly along Skid Row, where many of the city's homeless people live. The city has imposed millions of dollars in fines on hospitals for the practice.

In one particularly egregious incident, ***a paraplegic man was found crawling around Skid Row in 2007. Hollywood Presbyterian Medical Center, which was accused of taking him there without a wheelchair, paid $1 million to settle that case.***

Good Samaritan Hospital in Los Angeles had to pay $450,000 to settle allegations that it dumped a homeless patient on the street in 2014 after he was treated for a foot injury.

The Rawson-Neal Psychiatric Hospital in Las Vegas has been accused of shipping hundreds of patients out of Nevada, many of them to California, ***by bus, according to a 2014 report by the U.S. Commission on Civil Rights on patient dumping.*** *Multiple lawsuits alleged the hospital dropped patients off at the bus station with a prepaid ticket and a few days food and medicine.*

In May 2017, two Howard University police officers and their supervisor ***were fired after being recorded dumping a patient from a wheelchair outside the university's hospital*** *in Washington, according to reports in The Washington Post. A video of the incident showed a male officer pushing the barefoot woman to a bus stop. Two other officers watched as she fell onto the sidewalk.*

The Commission on Civil Rights' report found insufficient regulatory oversight as well as a ***lack of funding*** *to adequately treat the population contributed to patient dumping.*

The commission called for reforms to the Emergency Medical Treatment & Labor Act, increased oversight and training, better linking community mental health services to hospitals, and consistent discharge planning.

The trans-institutionalization (transferring of seriously mentally ill patients from state hospitals to jails and prisons) is another form of dumping. Again, the Treatment Advocacy Center, which has done a superb job focusing on the criminalization of persons with mental illnesses, reports that **90,000 inmates** with serious mental illnesses are waiting for a psychiatric hospital bed.

I wonder how healthcare workers whose calling is to help the sick can be so heartless. I also wonder what those dumping numbers would total if you added patients who get admitted to emergency rooms but receive little more than a shot of Haldol before being shoved out the door within 48 hours?

If you have a personal story about being dumped, please share it on my Facebook page so I can forward it to members of Congress and share it with my fellow members on the federal ISMICC committee.

Pete Earley

■

(CIT) Crisis Intervention Team Trainings Necessary

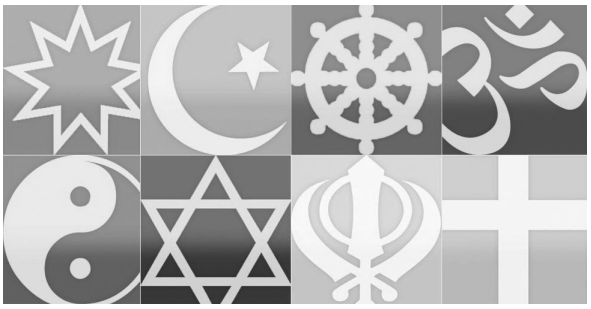
Please Share Your Experience with Us

The Washington Post editorial board reported that police shot and killed 987 people in United States last year. That is an increase of 24 from the year before.

"Particularly striking is how often mental-health issues play a role in police shootings. In 2017, 236 people--nearly 1 in 4 of those killed--were reported to have been experiencing some form of mental distress at the time of their encounter with police."

Those figures make a strong case for expanding CIT Crisis Intervention Team training programs. Because of the efforts of Crisis Services, we are fortunate here in WNY that CIT training is widely accepted by many of our area police departments. NAMI has been a guest presenter at these trainings for the past few years and continues in that role.

Please provide us feedback on your positive or negative interactions with the police, the CIT teams, and/or Crisis Services. We can share stories anonymously to help first responders and CIT trainees to improve the system.



New FaithNet Committee will be chaired by Rev. Daryl Bennett

We have conversations often with faith leaders who have questions about how best to support congregation members or families that are suffering with mental illness. Questions include, "We know that prayer and spirituality can be important in healing but are not, alone, enough help for people coping with serious mental illness. What can we do when they need more help from us?"

NAMI FaithNet is an interfaith resource network of NAMI members, friends, clergy and congregations of all faith traditions who wish to encourage faith communities who are welcoming and supportive of persons and families living with mental illness.

While we are not specifically a faith-based organization, NAMI FaithNet strives to encourage welcoming, caring congregations as well as to promote the vital role of spirituality in the recovery journeys of many who live with mental health conditions, those for whom faith is a key component.

Through this program, and efforts nationally and in local communities, NAMI and NAMI affiliates encourage an exchange of information, tools and other resources which will help educate and inspire faith communities about mental illness and their possible role in recovery for many.

NAMI FaithNet is not a religious network but includes an effort to outreach to all religious organizations. Learn more about awareness events and dates and how to get involved.

For a printable downloadable poster on NAMI FaithNet Awareness, go to http://bit.ly/2GxvdFl

Resources for FaithNet participants include periodic mini-grants, an idea clearing house, presentations, scripts and guides in order to help NAMI Faith Leaders achieve those goals.

NAMI Buffalo & Erie County member Rev. Daryl Bennett has agreed to chair a FaithNet committee here in Western New York. Let us know if you wold like more information, or are interested in involving your place of worship in an aspect of FaithNet by calling the office at 716-226-6264 or email namibuffalony@gmail.com.

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Your donations and support make our work possible. We thank you for your gifts.

Dorthea Dix Circle
($5,000 and up)

Asian American Physician's Association
Catherine Sandford-Kopp Foundation
Noble Family Charitable Foundation

Diamond Circle
($2,500-4,999)

ConServe Accounts Receivable Management

President's Circle
($1,000-2,499)

Crisis Services
Robert & Valerie Funk, *in honor of B.F.*
Spectrum Human Services
Friends at United Way of Buffalo & Erie County

Founders Circle
($500-999)

Friends at Bank of America
BryLin Hospital Systems, Inc.
Marie Cieplinski
Kerima Collier
Friends at Independent Health Association
Jewish Family Service
Suburban Psychiatric Associates
Transitional Services, Inc. (TSI)
Friends at Wegmans Food Markets

Builder *($250-499)*

East Aurora American Legion Post 362
Donna Herberger, *in honor of R.G.*
Friends at Network for Good
Friends at SEFA of Niagara Frontier
Friends at United Way Buffalo & Erie County
Friends at WNY Combined Federal Campaign

Benefactor *($100-249)*

Anonymous - R.G.
Daryl Bennett
Elizabeth Birkmayr
Susan Carson
Christyne Chmil
Clarence 1st Presbyterian Church
Clarence Contemporary Club
Robert Cole, Ed.D.
Mary Ann D'Avolio
Kevin & Shar Donovan, *in honor of J.W.N.*
Harry & Marie Guildford
Friends at JC Penney
DJ Jaffe, *in honor of Lynne Shuster & Marcy Rose*
Lorraine A. Lopez
Gary & Deborah Maciolek, *in honor of B.M.*
Quinton & Ingrid Meyer
Tom & Lucy Miller
Lorraine Muehlbauer
Friends at National Grid
Kathleen O'Leary & Michael Collins
Dr. Josie Olympia
Philip & Joyce Orlowski
Joe & Lynda Regan
Carrie Rose
Thomas & Dolores Santa Lucia
Friends at Siemens Caring Hands
Kathleen Thill
Ray & Jackie Thompson, *in honor of our family*

Patrons *($75-99)*

Rudy & Karen Kristich

Sustainers *($50-74)*

Anonymous - M.M.
Andrea Antman
Dr. Brenda Battleson-White
Melissa Bolz
Bill & Cynthia Borton
Stephan Fezer, Jr.
M. Foster
Jo Ann Gallagher
Susan Gunn
DJ Jaffe
Elizabeth Kruger
Gail Michaels
Keith & Jill O'Neil
Pain Rehab of WNY
Walter & Carol Patcyk
Irene Seegars
Simone Shuster-Zimicki
Spina & Donna Tarabania
Elizabeth Taylor & David Stebbins
Jane Urbanski
Rita Alviti

Advocates *($30-49)*

Paula Baumer-Wyse
Thrivent Choice Program
United Way of Central Indiana
United Way of Central NY
Katherine Virag

Friends *(up to $29)*

Anonymous
Anonymous, *in the name of Jesus*
Anonymous - H.S.
Trina Alston
Friends at Amazon Smile
Natasha Corral
Friends at DoTopia
Friends at Facebook
Harold & Arlene Levy
Friends at Network for Good
Mike Perchaluk
Elfriede Schroeder
Jo Schweitzer
Doris Sielski
Marian Summa, *in honor of son, J.S.-D.*
Lauren Taylor
F. Bruce Volante
Walter Wilczak

Christmas is for Kids!

Star Circle *($1,000 and up)*

Katherine Evans

Christmas Angels *($500-999)*

Suburban Psychiatric Associates

Circle of Light *($250-499)*

Alpha Kappa Alpha Sorority, Gamma Phi Omega Chapter
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In Memory of Others *cont's on pg. 11*

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