NAMI Buffalo & Erie County
National Alliance on Mental Illness

the challenger

vol. 11 - Number 1 Spring 2018

Mark Your Calendar & Find Support Meeting Location Info

Family Education Meetings *are held 2nd Thursdays of the month at St. Paul's Lutheran Church, 4007 Main St., Amherst (near Eggert Rd.) 14226 on the 2nd floor (main entrance at the back of the church). Two monthly* ***Family Support Group Meetings*** *(1) 3rd Wednesdays:* ***NORTH*** *at St. Paul's Lutheran Church, 1st floor (church entrance at ground level at left rear of the building); and (2)* ***NEW*** *3rd Thursdays:* ***SOUTH****, at the Wesleyan Church of Hamburg, 4999 McKinley Pkwy., Rm. 117B, Hamburg, NY 14075.* ***Board meetings*** *are usually at St. Paul's Lutheran Church (location listed above); members welcome. Call ahead to confirm meeting dates and locations.*

May 2018

1 Tues Board Meeting*, 7 p.m.*

3 Thurs 34th Annual Dinner & Awards w/ Dr. Kafui Dzirasa

11 Thurs NO Education Meeting - Annual dinner replaces this*.*

16 Wed Family Support Group, *NORTH, 7–8:30 p.m. (locations in box above)*

17 Thurs Family Support Group, *SOUTH, 7–8:30 p.m. (locations in box above)*

June

12 Tues Board Meeting, *7 p.m.*

14 Thurs Education Meeting, *7 p.m. Library/coffee hour 7:30 p.m. Program: "When Beliefs Hurt: Cultural Barriers and the Stigma of Mental Illness." Guest: Nicole M. Robinson, Ph.D., author of "*Unstoppable Joy: the Art of Finding Hope, Healing and Happiness".

20 Wed Family Support Group, *NORTH, 7–8:30 p.m. (locations in box above)*

21 Thurs Family Support Group, *SOUTH, 7–8:30 p.m. (locations in box above)*

July

NO Board Meeting - Happy 4th of July!

12 Thurs Education Meeting, *7 p.m. Library/coffee hour 7:30 p.m. Program. Topic: TBA. Guest: Lisa Maria Cruz, MHPC. Outreach Specialist, WNY Independent Living, Inc.*

18 Wed Family Support Group, *NORTH, 7–8:30 p.m. (locations in box above)*

19 Thurs Family Support Group, *SOUTH, 7–8:30 p.m. (locations in box above)*

August

7 Tues Board Meeting*, 7 p.m.*

9 Thurs Education Meeting, *7 p.m. Library/coffee hour 7:30 p.m. Program: "My Story of Recovery from Bipolar Disorder" Guest: Leslie Wexler, Patient-Family Advocate, BryLin Hospitals*

15 Wed Family Support Group, *NORTH, 7–8:30 p.m. (locations in box above)*

16 Thurs Family Support Group, *SOUTH, 7–8:30 p.m. (locations in box above)*

President's Corner

Congratulations to our 2018 Awardees: WBFO-FM 88.7 Radio, Josie Olympia, M.D., Alpha Kappa Alpha Sorority, Inc./Gamma Phi Omega Chapter and NAMI Board Member Mary Lou Bond!

Our Annual Awards & Dinner Celebration was a great success with over 200 tickets sold and a standing ovation for our brilliant speaker Kafui Dzirasa, M.D., Ph.D. who is regarded as one of the most gifted neurophysiologists ever to be part of the Duke Neurobiology Graduate Program.

A very warm and friendly person, as well as a dynamic speaker, Kaf further endeared himself to the audience by sharing that his wife, a child psychiatrist, was born and raised in Buffalo. He discussed his work at his multi-disciplinary Laboratory of Psychiatric Neuroengineering at Duke University Medical Center.

Having a keynote speaker who is a brain scientist reminds us of the critical importance of supporting and advocating for more effective research as our best hope for a better life for those who live with mental health conditions.

The 8th edition of *The Mind Matters: A Practical Guide to Services for People Living with Mental Illness in the Erie-Niagara Region* has been published and over 3000 copies are already in the hands of numerous families and providers' staff at many area agencies. Originally intended for family members, the guide quickly became a prized possession in most mental health and social

President's Corner cont's, pg. 2

President's Corner, from pg.1

services departments as a tool to navigate the mental health system. Thank you to everyone who worked on researching and editing the guide and especially to **Sherry Byrnes**, our Office Coordinator, and our Executive Director, **Michele Brooks**, who made its completion a priority.

Members may request a copy in the mail, or pick one up at a support group or education meeting. *The Mind Matters* is also available online at www.namibuffalony.org in a searchable format.

And finally, long-awaited GOOD NEWS! Governor Cuomo reversed his decision on moving the WNY Children's Psychiatric Center to the Buffalo Psychiatric Center's Strozzi Building. The children will continue to be served on the West Seneca campus. Thank you to everyone who made calls and wrote letters to the Governor.

Warm, sunny weather is finally here! May it lift your spirits!

Ann Venuto

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Please consider naming NAMI Buffalo & Erie County in your will. Your gift ensures that your support for our mission will continue into the future. Thank you.

Violence and Gun Reporting Laws

Editor's note: Gun violence and answers for sensible reform and protection continue to be part of everyday conversation in our communities. We offer here NAMI's position as the question of untreated mental illness continues to be raised as a factor that needs to be taken into account.

Most people with mental illness are not violent. In fact, people with mental illness are more likely to be the victims of violence. Research on the relationship between mental illness and violence shows that there are certain factors that may increase risks of violence among a small number of individuals with mental illness. These factors include:

- Co-occurring abuse of alcohol or illlegal drugs
- Past history of violence
- Being young and male
- Untreated psychosis

The best way to reduce this risk is through treatment. Yet fewer than one-third of adults and half of children with a diagnosed mental illness receive mental health services in a given year.

Where NAMI Stands

We recognize that acts of violence by people with mental illness are usually the result of lack of needed mental health services. Policies and programs must be available and accessible which provide access to:

- Early identification and intervention
- Appropriate treatment and support
- Integrated treatment when there is co-occurring substance abuse
- Family education and support
- Crisis intervention

Creating new federal or state gun laws based on mental illness could

Guns, *continues on pg. 5*

Volunteers create our success!

Thank you to all who served on the 34th Annual Awards & Dinner Celebration committee with co-chairs **Barbara Utter** and **Liz Carone**; and to those who volunteered many hours for the preparations on the days before and of the evening to make everything go smoothly. A special mention goes out to **Pat Seifert** for a greatly expanded and successful basket and silent auction this year!

We have *four* new Family-to-Family trainers as of April: kudos for training completion to **Mary Bird, Virginia Eberle, Allison Leet,** and **Ellie Worley. We are excited to be adding a June Family-to-Family class.** (Thank you, **Jackie Thompson,** for co-teaching this one with Ellie). With these new hands, we hope to expand the number and locations of class offerings in the coming year.

Thank you, too, to NAMI Board Member **Colleen Frey** who has taken on sending thank you notes to members and donors for their gifts and memberships; and to **Rev. Daryl Bennett** chair of NAMI Buffalo & Erie County FaithNet and Board Member Emerita **Judy Capodicasa** for their outreach and events work to share the story of NAMI during Mental Health Awareness Month.

With sadness and care, our thoughts are with...

Jere Lindstrom in the loss of her daughter **Laura Lindstrom.** Laura was a member and volunteer with us for many years.

Jackie and Ray Thompson and the Thompson family in the loss of their son Geoffrey J. Thompson.

Family Support ……just how important is this?

by Anonymous

The importance of family support for a loved one suffering with mental illness cannot be overstated. In fact, it is paramount to your loved one's favorable long term prognosis.

I'll explain here by sharing my lived experience and perspectives. I am a senior man, retired, proud father of six wonderfully unique children, sadly divorced after 30 years of marriage. I provide these details to emphasize the importance of a unified front in supporting your loved one as they run the gauntlet of not only emotional changes, but also all of life --physical, social, economic, and medical changes as they begin to learn to: 1. accept, and 2. best manage their illness over the long haul. Yes, every facet of your loved one's life is dramatically affected by their illness. Their hopes and dreams have been shattered, friends turn away, families can become divided, school mates shun or even ridicule, holding a job may become next to impossible. Their life is in a holding pattern and what teenager can or should be faced with accepting that?

In my family's case, the diagnosis of our teenage daughter, our eldest, was not made right away. However, we were aware that something much greater than normal teenage rebellion/opposition/risky behavior was going on. Her repeated behaviors included foul language, rapidly deteriorating grades,

Family Support *cont.'s on pg. 4*

WBFO Establishes Mental Health Initiative

Funding Provided by Patrick P. Lee Foundation

With funding from the Patrick P. Lee Foundation, WBFO-FM has introduced the Mental Health Initiative, a multi-faceted, two-year media project to share critical information about mental illness.

The keys to this effort are identifying approaches to reach different audiences, creating a sustaining effort over time, and building on existing information, expertise and materials.

"The focus of this project is to normalize the conversation about mental illness by bringing this issue from the shadows into everyday light," said John Grant, senior program officer at WNED | WBFO. "To accomplish this, we will focus on educating the general public about mental illness to overcome the lack of understanding that stigmatizes those with the disease and highlighting stories of people who are successfully dealing with mental health issues."

"The Lee Foundation is proud to support WBFO's Mental Health Initiative. This two-year project will provide in-depth coverage of mental health issues and help to build the mental health literacy of our community," said Jane Mogavero, executive director, Patrick P. Lee Foundation.

"News media is a critical source of information for the public and WBFO's commitment to quality, thorough reporting makes them an ideal partner for this important work.: The project will include a variety of media approaches focused on these key areas:

- Reporting about mental health issues on WBFO;
- Producing digital video segments for use online at WNED | WBFO-affiliated and partner websites and social media sites;
- Producing Facebook Live community discussion events on specific mental health issues

Reprinted from The Patrick P. Lee Foundation's Foundation News, Spring 2018

Editor's note: This project received the President's Award at NAMI Buffalo & Erie County's 34th Annual Awards & Dinner Celebration on May 3rd. Picture on pg. 7.

To listen to the podcasts produced thus far, visit http://news.wbfo.org/term/wbfo-mental-health-initiative; includes extended interviews with NAMI Buffalo family members: https://bit.ly/2Fwv5Ws

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Family Support, *from pg. 3*

rampant absenteeism, hanging out with undesirable young men, promiscuity, at times running away, and in general being disruptive to any person of authority. We only learned of her official diagnosis after she had turned 18, by way of a subpoena to a medical facility that had treated her 2-3 years prior! Yes, a tragedy on several fronts. That subpoena was necessary due to my daughter being raped by a counselor while she had been admitted to a detention center for "troubled teens!" So sad! Now we knew the diagnosis, bipolar 1, with major depressive symptoms being the dominant mental anguish.

By this time, my other children and wife began blaming their sister/our daughter for her irrational behavior and wanted her to "snap out of it!" They exhibited little to no empathy, compassion or even love. Looking back now, I understand this reaction likely stemmed from fear of the unknown and not being educated on the illness, but there must be better communication between spouses! Each child deserves unconditional love and support. Without it, turmoil and even chaos exists in the home and everyone suffers, but none more than the loved one suffering with the illness. In retrospect, I see the immense confusion and forgive all persons involved for their poor choices in dealing with this.

Unfortunately, as husband and wife we could not reach anything close to a consensus. My wife wanted our daughter placed into a "home" away from our family. I wanted to have everyone come together in a more rational sense and become more educated, empathetic and compassionate, at least not to blame and ridicule the ill family member.

Sadly, in my case, the only way I could see to provide my daughter a safe haven and afford her a chance to face her illness absent of additional turmoil was by leaving our home and dissolving our marriage. My daughter then resided with me for many months. I became her sole advocate. However I'll caution you here that one advocate--loving, devoted parent or not--is woefully insufficient to meet all of the challenges and ups and downs of the roller coaster ride that is mental illness. Time is a bit of a healer.

Over the years, my eldest daughter has lovingly stepped into the family support circle as well as, very recently, another daughter. Other family members have become slightly more engaged and I thank God every day for this. One person acting alone can almost be broken by taking on so much.

NAMI and the Family-to-Family course I took in 2009

were my catalysts for embracing education, wellness and advocacy. Yes, education is knowledge and there's power in that. So many good people at NAMI Buffalo & Erie County assisted me and my daughter. Sharing and caring, not going it alone, is the path to successes. NAMI provided the foundation that allowed me to become more effective in assisting my daughter along her journey and staying healthier myself as a caregiver. I would certainly have burned out without NAMI intervention. I could never thank NAMI enough. That is why I volunteer, facilitate classes, and participate on the board. Giving back by offering my time is all I can do. My daughter is healthier and actually has a glow about her now. She also has a better knowledge of her illness because of NAMI. The members' library and free education classes have assisted with this awareness.

Today:
My daughter continues to proactively manage her illness with the help of professionals, medicine, a healthy diet, exercise, and staying connected with others. She holds down a steady job and now has a beautiful little baby that she has proven to be a very good mother of.

Our family's case may not be as extreme as many would initially think. There are many stressors and non-traditional dynamics that come into play when a busy, active family is faced with such a big change. The family must deal with these changes proactively to succeed. Yes, stigma still raises its big, ugly head! What I want to say is, husbands and wives, significant others, partners: please educate yourselves; try your best to do this together.

Absent of a unified effort to help your loved one, please at least agree on the tack you will take. Be consistent. Do not undermine each other. Your loved one deserves and needs this consistency, essentially a healthy baseline. Mental illness is not a choice. It is not the result of poor choices or bad behaviors or some bizarre form of punishment. It is an illness, both mental and physical. I implore you to

Family Support *cont.'s on pg. 5*

NEW! NAMI Family-to-Family

12-week Class Will Begin

Monday June 11th

Register now! Call 716-226-6264 (NAMI)

Open to family members, partners and significant others of individuals living with

Major Depression
Bipolar Disorder
Schizophrenia or Schizoaffective Disorder
Borderline Personality Disorder
Panic Disorder or Obsessive Compulsive Disorder
Post-Traumatic Stress Disorder (PTSD)
Co-occurring Brain and Addictive Disorders

This 12- session class helps caregivers understand and support individuals living with serious mental illness while maintaining their own well-being.

Co-taught by trained NAMI Buffalo & Erie County family member volunteers who know what it is like to have a loved one struggling with one of these brain disorders.

There is no fee to participate in the NAMI Family-to-Family class and materials are provided at no cost.

Classes address diagnosis, medication, privacy restrictions, hospitalization, finding/working with providers and treatment professionals, the criminal justice system, communication, coping with family stress, and more.

St. Paul's Lutheran Church
4007 Main St., near Eggert Rd. - Amherst, NY 14226
5:45-8:15 p.m.

Class is for caregivers only.
Pre-registration is required.
Space is limited.
It is important to attend all sessions.

Guns, *from pg. 2*

have the effect of creating more barriers to people being willing to seek treatment and help when they need it most. Solutions to gun violence associated with mental illness lie in improving access to treatment, not in preventing people from seeking treatment in the first place.

Federal and state gun reporting laws should be based on these identified traits, not mental illness. NAMI believes that federal standards about people with mental illness being included in the National Instant Criminal Background Check System (NICS) should be changed.

- Inclusion should be based on current scientific knowledge about what may increase risks of violence among persons with mental illness.
- States should be provided with clear guidance about who should be reported and who should not be reported.
- The highly offensive and outdated wording currently in the NICS reporting law, specifically individuals "adjudicated as being mentally defective," should be eliminated.
- Establishing strong safeguards to protect the privacy of individuals whose names are included in federal and state gun reporting databases to make sure that the identities of such individuals are not shared or used for any other purposes.

What NAMI Is Doing

NAMI advocates for the federal government and states should fund programs focused on early identification, early intervention and evidence-based mental health treatments. Investment in research to better identify traits that predict gun violence is also necessary.

How You Can Help

We are a grassroots organization. We rely on people like you to advocate for these services in your community. Connect with your local NAMI to help advocate for funding and create opportunities for partnerships with other community organizations.

From NAMI national, https://www.nami.org/Learn-More/Public-Policy/Violence-and-Gun-Reporting-Laws

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Family Support*, from pg. 4*

show empathy, compassion, and steadfastness. Insist your loved one receives medical services. Support them with unconditional love, now and over the long haul. Just listen to them, they want and deserve to be heard. Never judge them. Participating in all of the above is difficult, however I have found that prayer is powerful.

■

Overview:

Report Offers Recommendations to Improve Quality of Life and Care

Complete report can be found at:
https://bit.ly/1QeahDHn

In 2016 the National Alliance on Caregiving (NAC) published a report *On Pins and Needles: Caregivers of Adults with Mental Illness*. Sita Diehl, Director of State Policy and Advocacy, National Alliance on Mental Illness, was one of a dozen academics and advocates who participated as an advisory panel member in the research process. This study's findings were derived from online interviews with 1,601 caregivers aged 18 or older who were current caregivers for an adult with a serious-to-moderate mental health condition. Some were NAMI members or recipients of NAMI programs. The research was undertaken for the purpose of understanding the challenges of unpaid caregivers.

Previous research by NAC estimates that at least 8.4 million Americans are caregivers to an adult with a mental health condition and that the burden of care results in enormous stress. "They typically care for a relative (88%), most often an adult son or daughter (45%), parent (14%), or spouse (11%)." Sixty-two percent of parent caregivers report that their caregiving role has compromised their own health.

Half of the people surveyed reported that stigma about mental illness has increased their isolation and 74% described feeling a high level of emotional stress. These caregivers play a critical role for their family member and often are the only source of unpaid help for them.

Family members frequently report obstacles in navigating the care system and communicating with providers. About half (54%) state that a healthcare provider said they were unable to discuss their loved one's condition with them. More than half (55%) recount they were involved in health care conversations less than they desired.

The following are only a few of the recommendations of this report:

- "Provide assistance for both caregivers and patients in navigating the mental health system, with active outreach to caregivers to offer information and care coordination. County or state behavioral health entities, as well as health insurers, can play a key role in providing navigation assistance to patients and their families."
- "Include caregivers as part of the health care team, in ways that allow them to understand their loved one's diagnosis without limiting the patient's independence."
- "Educate and provide resources for caregivers of those with mental illness, especially around issues of stress and caregiver health. Education should include information about services and supports, such as short-term respite, one-to-one support, day programs, and residential services. In addition, peer support for caregivers can alleviate the isolation and stigma that many family caregivers have expressed in caring for a loved one with mental illness." ■

Compassion and love are not mere luxuries; as the source of both inner and outer peace, they are fundamental to the continued survival of our species.

~ Dalai Lama

Annual Awards & Dinner Celebration Finishes on a Bright Note

The 34th Annual Awards & Dinner Celebration on May 3rd at Salvatore's Italian Gardens was the best-attended event we've ever held. The keynote address from Duke University psychiatrist and neuro-researcher Dr. Kafui ("Kaf") Dzirasa was genuinely inspiring and upbeat. Many in the audience noted that he did an exceptional job of bringing heady research ideas about mental illness to a level that everyone can understand—and be hopeful about.

We very much appreciate Dr. Kaf fitting us into his busy work and travel schedule to come to Western New York and speak at this year's dinner. We also thank NAMI member **Kerima Collier**, at whose art show for awareness and research we first learned of his work. His visit with us concluded the following morning when he presented to students, providers, clinicians, and other observers at Grand Rounds at Buffalo Psychiatric Center. A whirlwind week, for sure!

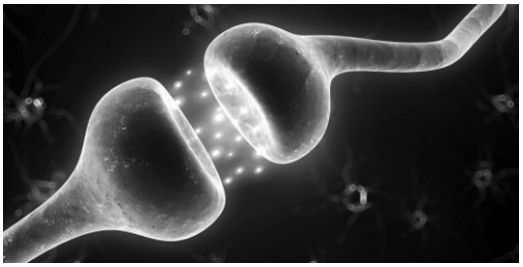
We are grateful for this year's event sponsors who also made this year's dinner a success. Our Platinum Sponsors were: ECMC, BestSelf Behavioral Health, J&L Premier Landscape, and Spectrum Human Services. The University Psychiatric Practice at SUNYAB School of Medicine was a Silver Sponsor.

Photos, clockwise from upper left: **Dr. Josie L. Olympia**, Associate Professor of Clinical Psychiatry, Department of Psychiatry, Jacobs School of Medicine & Biomedical Sciences (center) receiving the Peter L. Heggs Memorial Award; with NAMI Buffalo and Erie County's Office Coordinator **Sherry Byrnes** (L) and President **Ann Venuto** (R). Keynote speaker **Dr. Kafui Dzirasa. Josephine Cross** (L) received the Nancy D. Smith Memorial Award on behalf of Alpha Kappa Alpha Sorority/Gamma Phi Omega Chapter. from NAMI Buffalo Vice President **Liz Carone.** Guests included **Dr. Tonja Williams** of the Buffalo Public Schools (center) for Superintendent Dr. Kriner Cash. NAMI President **Ann Venuto** (L) with **Dave Rosenthal** of WBFO's Mental Health Initiative which received the President's Award. NAMI Buffalo Board Member **Mary Lou Bond** (L) was presented the Volunteer of the Year Award by NAMI Buffalo and NAMI NYS Board Member **Lynda Regan** (R). Attendees **Tammie Paradis,** NAMI NYS Affiliate Development Coordinator (L) and NAMI member and NYS Board Member Emerita **Deb Gabriel** (R).

New Research Study to Explore Possible Auto-Immune Condition that Mimics Schizophrenia and Bipolar Disorder Symptoms

Editor's note: The onset of serious mental illness often strikes young people, and the need for research for better, more accurate testing to properly assess for—or rule out--mental illness is a pressing one. This article outlines the start of a new avenue of research to help avoid misdiagnosis, especially where there is a history of auto-immune conditions. Diagnosis should always be made under the careful supervision of qualified professionals.

Treatable Condition Could Be Mistaken for Schizophrenia or Bipolar Disorder



Article originally posted by Houston Methodist, December 13, 2017 and was featured by bpHope Magazine on January 15, 2018; at https://www.bphope.com/treatable-condition-could-be-mistaken-for-schizophrenia-or-bipolar-disorder/

HOUSTON—December 13, 2017—Researchers at Houston Methodist believe that a significant number of people diagnosed with schizophrenia or bipolar disorder may actually have **a treatable immune system condition.** A new research study could have a significant impact on the millions diagnosed with schizophrenia or bipolar disorder, including many homeless.

The study was inspired by the 2007 discovery of anti-NMDA receptor encephalitis, a disease that causes symptoms similar to schizophrenia or bipolar disorder but can be treated with existing immunotherapy medications.

"We suspect that a significant number of people believed to have schizophrenia or bipolar disorder actually have an immune system disorder that affects the brain's receptors," said Joseph Masdeu, M.D., Ph.D., the study's principal investigator and a neurologist with the Houston Methodist Neurological Institute. "If true, those people have diseases that are completely reversible – they just need a proper diagnosis and treatment to help them return to normal lives."

The immune system normally produces antibodies to attack foreign substances in the body, such as bacteria. When this process goes wrong, antibodies are produced that attack receptors in the brain, causing the receptor to stop listening to the signals being sent to it. In cases of anti-NMDA receptor encephalitis, antibodies attack N-methyl-D-aspartate (NMDA) receptors in the brain.

Conditions that cause the brain's receptors to stop functioning properly are often mistaken for schizophrenia or bipolar disorder because these diseases are associated with a decrease in activity of the NMDA receptors, which control how someone thinks, makes decisions, and perceives the world around them. Classic schizophrenia and bipolar disorder symptoms seen in anti-NMDA receptor encephalitis and similar conditions include hearing voices and paranoia.

"We know that nearly 1 percent of the U.S. population – or more than 3.5 million people – have schizophrenia," Masdeu said. "Another 2.6 percent of American adults have bipolar disorder. What we don't know is how many of these patients actually have one of these treatable immune system disorders."

The study will enroll 150 patients diagnosed with schizophrenia or bipolar disorder and 50 healthy people between the ages of 18 and 35 who are willing to undergo a spinal tap to collect a small amount of their cerebral spinal fluid, which will be screened for the presence of antibodies attacking NMDA and other receptors. If abnormal antibodies are discovered, researchers will notify the patient or caregiver, so that they may consider asking their health care provider about treatment options, such as using existing drugs that could suppress the production of the attacking antibodies.

Masdeu plans to use study results to develop more sensitive tests to aid in the detection of attacking antibodies. He first began researching possible autoimmune causes of schizophrenia in the early 2010s while working at the National Institutes of Health and published early papers on the subject. Masdeu is now collaborating with Josep Dalmau, M.D., Ph.D., who first described how antibodies can attack NMDA receptors.

Houston Methodist is leading this study, which includes Ben Taub Hospital, the Michael E. DeBakey VA Medical Center, Texas Children's Hospital,

***Study** cont.'s, pg. 9, column 3*

"10 Things Everyone Should Know About Schizophrenia"

This information is not a substitute for medical care. If you have questions or concerns, please talk with a health care provider.

1) Schizophrenia is a brain disorder.
- ✔ Certain chemicals are out of balance in the brains of people with schizophrenia.
- ✔ Left untreated, a person's ability to function in daily life becomes difficult.
- ✔ Schizophrenia is not a split personality.

2) Schizophrenia affects men and women of every ethnic group.
- ✔ Scientists still do not know fir sure why some people develop schizophrenia.
- ✔ Schizophrenia has a genetic basis, but environmental factors may play a role too.
- ✔ Symptoms often begin in the late teens or twenties. Schizophrenia rarely begins after age 45.

3) A person with schizophrenia may or may not realize he or she is ill.
- ✔ This is not "denial". It is a symptom of the illness.

4) The signs and symptoms are different for everyone.
- ✔ Symptoms may develop slowly or they may show up all of a sudden, Symptoms may come and go.
- ✔ Early signs may include:
  - Seeing or hearing things that other people do not (hallucinations.
  - Having false beliefs (delusions).
  - Speaking or moving in a confused way.
  - Feelings of paranoia.

5) Treatment aims to control symptoms.
- ✔ Treatment involves a combination of medication a supportive therapy.
- ✔ Medications can help control symptoms.
- ✔ People respond differently to different medications. It can take time to find the right one.

6) Support helps people with recovery.
- ✔ Once a person's symptoms are stable, he or she may need help regaining certain social skills and other aspects of self-care.
- ✔ He or she may need help finding a job or training program, returning to school, or finding housing.
- ✔ Recovery programs and other support services can help people with these steps.

7) Managing schizophrenia is possible.
- ✔ Like diabetes or high blood pressure, schizophrenia needs constant management.
- ✔ Working closely with health care professionals can help a person track the illness and find the most affective treatments.

8) Relapses can occur.
- ✔ With time, an individual can learn to identify early warning signs and seek help.
- ✔ There is a higher risk of relapse if a person stops taking medication.

Information *cont.'s on pg. 11*

NAMI offers information on many mental illnesses and conditions

Visit https://www.nami.org/Learn-More/Mental-Health-Conditions to learn more about:

ADHD
Anxiety Disorders
Bipolar Disorder
Borderline Personality Disorder
Depression
Dissociative Disorders
Early Psychosis and Psychosis
Eating Disorders
Obsessive-compulsive Disorder
Posttraumatic Stress Disorder
Schizoaffective Disorder
Schizophrenia

NAMI Buffalo & Erie County also offers free information at education and support group meetings monthly.

Study*, from pg. 8*

Harris County Psychiatric Center, and The University of Texas Health Science Center at Houston.

Schizophrenia is more likely to affect children and young adults between the ages of 5 and 30. A 2016 report from the U.S. Department of Housing and Urban Development estimated that 10.7 percent of the homeless population at that time were 24 and younger.

For more information on this study, call 346.238.0083. For more information about Houston Methodist, visit houstonmethodist.org. Follow us on Twitter and Facebook.

Read more (at https://www.bphope.com):

- Research: After Searching 12 Years for Bipolar Disorder's Cause, Team Concludes It Has Many
- Bringing Bipolar into Focus
- Three Bipolar Disorder Symptoms No One Wants to Talk About
- Everything You Ever Wanted to Know About Bipolar Depression

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Providers Advised to Be Aware of--and Respond Proactively to--Suicide Theme of Popular Television Program Targeting Youth

The second season of 13 Reasons Why will be released Friday, May 18. In preparation, the Suicide Prevention Office would like to provide support in addressing13RW: Season 2 to clinical providers who work with adolescents, parents, and families. We also want to inform providers of available clinical resources in suicide risk assessment, treatment, and prevention. Attached is a memo, similar to the one we distributed last year, that summarizes talking points and other resources about 13RW, and also lists online training modules and resources that clinicians working for OMH or OMH-licensed programs can access.

Here is the official synopsis from Netflix: "Season two picks up in the aftermath of Hannah's death and the start of our characters' complicated journeys toward healing and recovery. Liberty High prepares to go on trial, but someone will stop at nothing to keep the truth surrounding Hannah's death concealed. A series of ominous polaroid's lead Clay and his classmates to uncover a sickening secret and a conspiracy to cover it up.

Addressing Netflix's "13 Reasons Why: Season 2" in Therapeutic Encounters

Last year, Netflix released Thirteen Reasons Why (13RW), a series about a 17-year-old high school student, who takes her own life and leaves behind audio recordings for 13 people who she says in some way were part of why she killed herself. The series prompted concern among suicide prevention experts for its graphic depiction of suicide, reinforcement of myths about the causes of suicide, and portrayal of adults as incapable of helping or understanding youth. The second season of this show, which will be released on May 18 accompanied by a major social media and advertising campaign, may continue to explore Season 1's storylines, as well as themes of bullying, violence, depression, and suicide.

In preparation for the release of Season 2, The NYS Suicide Prevention Office (SPO) would like to encourage providers who work with teens to ask their clients if they have seen Season 1 and/or plan to watch Season 2, and to explore their thoughts about it to start a healthy conversation about suicide and its prevention. In addition, please take this opportunity to familiarize yourselves with available clinical resources in suicide risk assessment, treatment, and prevention. Be aware that some fans are going back to watch episodes from the first season in preparation for the release of the new season.

1) Resources to facilitate discussion:

- 13 Reasons Why: Discussion Guide - the focus of this guide is providing guidance on mental health and suicide prevention for viewers of the 13RY series, related to Season 1. The AFSP contributed to the guide, along with experts from other leading organizations. There are links to the AFSP Talk Saves Lives video, mAFSP.org and AFSP.org/find-support for loss survivors and those who are struggling. *http://13reasonswhy.info/wp-content/uploads/2018/03/13-Reasons-Why-Season-1-Discussion-Guide.compressed.pdf*

- 13 Reasons Why: Talking Points for Viewing and Discussing the Netflix Series *https://www.jedfoundation.org/13-reasons-why-talking-points/*

- Considerations for Educators: *https://www.nasponline.org/resources-and-publications/resources/school-safety-and-crisis/preventing-youth-suicide/13-reasons-why-netflix-series-considerations-for-educators.*

2) Training Modules:

For clinical providers, several training modules are available through CPI's Suicide Prevention - Training, Implementation and Evaluation program (SP-TIE) at: *http://practiceinnovations.org/I-want-to-learn-about/Suicide-Prevention/Trainings*. There are also archived webinars on a variety topics.

Clinical modules include:

1) Assessment of Suicidal Risk using the C-SSRS
2) Comprehensive Suicide Risk Assessment
3) Safety Planning Intervention
4) Structured Follow-up and Monitoring

TO ACCESS TRAININGS: Each clinic has an individualized self-registration link - clinicians who do not have accounts in clinics that are part of the Learning Management System (LMS) should contact IT or their supervisor to get a link to self-register.

- Registrants will be asked to submit their name and job related information. Once all questions are answered, they will be prompted to pick a Username and Password.

- Upon completion of self-registration, an email will be sent acknowledging request to register for training. Once approved, a second email with login credentials and a link to the Learning Community will be sent within 24 hours.

- Contact *cpihelp@nyspi.columbia.edu* with additional questions.

For additional information, please contact Sigrid Pechenik, PsyD, Associate Director, Suicide Prevention Office, *Sigrid.pechenik@omh.ny.gov*

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***Information**, from pg. 9*

- Certain medicines, alcohol and illegal drugs can interfere with the medications and may make symptoms worse.

9) Friends and family members can help.
- Learning about schizophrenia is an important first step.
- A calm and supportive approach is the best way to help. Be patient. Healing takes time.

10) For more information,
- Talk with your health care provider or contact your local mental health services
- Visit these websites:
  - National Institute of Mental Health www.nimh.nih.gov
  - National Alliance on Mental Illness www.nami.org
  - Mental Health America www.mentalhealthamerica.net
- If you are in crisis or afraid you may hurt yourself call 1-800-TALK (1-800-273-8255)

From NAMI-New York State, by Nancy Calhoun, 2007

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NAMI Buffalo & Erie County
National Alliance on Mental Illness

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We invite you to join NAMl Buffalo & Erie County

in helping us make a difference for people living with mental illness and their families.

Mail to:

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P.O. Box 146, Buffalo, NY 14223

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(for those in financial need)

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NOTE: must include all household member names when joining in order for benefits to apply. Attach separate sheet if needed.

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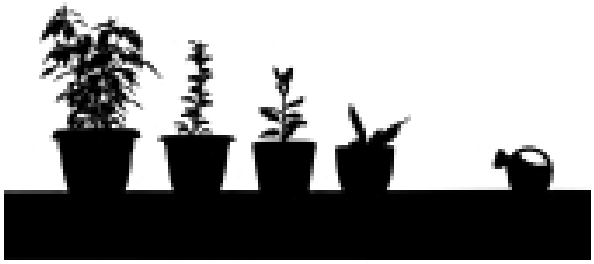
"When one's expectations are reduced to zero, one really appreciates everything one does have.
~ Stephen Hawking



Family-to-Family Class forming now to start June 11 in Amherst.

Reserve your space soon!
716-226-6264