



National Alliance on Mental Illness

The Voice

The Newsletter of NAMI Southwestern Pennsylvania

Volume 14, Issue 2 June 2008

NAMI Addresses Issues of Disparity in Longevity

Those with Serious Mental Illness Now Die 25 Years Earlier than the General Population

Nearly six million people are served by the public mental health system each year, and one in five Americans will be diagnosed with a mental illness at some point in their lifetime. It has been known for several years that those with serious mental illness die younger than the general population, a critical public

health problem that, until very recently, has been poorly recognized and rarely addressed. Recent studies are now documenting how serious this problem is, and authors of those studies are providing recommendations to make system-wide improvements on the national level that will have a positive impact on longevity. In addition, NAMI Southwestern Pennsylvania (SWPA) is taking steps to address this problem at the local level.

death among those who are served through state mental health authorities. It also asserts that stakeholders in the behavioral health system must embrace two key principles: overall health is essential to mental health, and recovery includes wellness.

“When NAMI’s Board of Directors learned of this study and the actions that need to be taken to make improvements, our response was immediate,” says Jon Lloyd, MD, a retired surgeon, family member and member of the NAMI SWPA Board of Directors. “NAMI is always responsive to opportunities that address the different dimensions people with serious mental illness face, from stigma and the lack of coordination between the physical and mental health systems to this identified disparity in longevity. We believe that NAMI has a role in this process, working from the ‘ground up’ to identify and solve issues while others work from the ‘top down’ to correct similar areas needing improvement.”

A working group of the NAMI SWPA Board is in the preliminary stages of analyzing the results of the study and preparing recommendations to bring to the entire Board. Through NAMI, the working group — which includes Lloyd, Jack Cahalane and

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A technical report was published in October 2006 by the National Association of State Mental Health Program Directors (NASMHPD) Medical Directors Council (www.nasmhpd.org). The report, *Morbidity and Mortality in People with Serious Mental Illness*, documents that people with serious mental illness are now dying 25 years earlier than the general population, and that these death rates have actually increased in recent years.

The report reviews the causes of excess illness and death for those with serious mental illness and provides recommendations and solutions on national and state levels, as well as for provider agencies and clinicians, in addition to consumers, families and communities. The report also presents a roadmap for strategic approaches to reduce excess illness and premature



From the Desk of the Executive Director...

In case I am the only one keeping track, I am now on the job a full seven months and counting. The second ninety days were an extremely enriching experience. While I worked really hard at my job, I think I received more in return than I gave. I've written down some examples of what I mean.

From March to May, I attended the Family-to-Family class taught by Bonnie Cardinali and Mary Thomas here at the NAMI Southwestern Pennsylvania (SWPA) office. Not only did I learn new information in the class, I was warmly supported as a family member by my classmates. No one really cared that I was the Executive Director, but they did care about me. I miss Tuesday night with Bonnie and Mary and the class.

Another example is when Joe Greco, the writer and director of the movie *CANVAS* came to town for the movie screening and our NAMI SWPA Annual Conference. I, with my husband doing the driving, was afforded the opportunity to meet Joe at the airport and chauffeur him to and from the pre-conference screening of *CANVAS*. I admit to being a little nervous and star struck about meeting a Hollywood movie director. Interestingly, Joe was young enough to be my son and our conversation was pretty ordinary. We talked about Pittsburgh's Italian community and ethnic neighborhoods. And we talked about his mom who was doing well and living in her community. He also told me he was very hungry and needed to eat dinner. Could I make sure he got a chance to eat? Put me in my maternal element — the gift of being needed! I needed to make sure someone took Joe to dinner while the movie played. Thank you Joni, Ken and Denise.

And my final example is the working group of the NAMI SWPA Board of Directors featured in the front page article of this newsletter on serious mental illness and premature death. The NAMI SWPA Board of Directors took the initiative to form a working group in response to the report that people with serious mental illness are now dying 25 years earlier than the general population.

In an effort, as the new Executive Director, to do a good job in working with the Board, I read books and articles on non-profit boards and governance. One article, *Governing for What Matters* by Hildy Gottlieb, on the Help 4 Non-Profits/Community Driven Institute website really made an impression on me. Gottlieb's premise is that non-profit boards are in a very unique position to create community change. Gottlieb writes, "It is time to stop looking at governance as a problem to be solved, and instead see governance as an opportunity to change the world."

It is vitally important that I recognize that the NAMI SWPA Board of Directors is engaged, has a passion for the cause, and is working to have an impact on the community. Any Executive Director would consider this a gift, an incredible opportunity to do good work, to make a difference. See what I mean about getting more in return!

Sincerely,

Christine Michaels, MSHSA
Executive Director, NAMI Southwestern Pennsylvania

NAMI Southwestern Pennsylvania MISSION STATEMENT

NAMI Southwestern Pennsylvania is a regional grassroots organization dedicated to helping families and individuals affected by mental illness achieve lives of quality and respect, through education and advocacy that supports recovery.

News Around the Region

Updates on Initiatives, Policy and Legislation Impacting the Mental Health Community

Sharon A. Miller, NAMI Southwestern Pennsylvania, Director of Education and Community Relations

A New Crisis Network Begins July 1st in Allegheny County

The Allegheny County Department of Human Services, Office of Behavioral Health and Community Care Behavioral Health have partnered with Western Psychiatric Institute and Clinic (WPIC) to develop and implement a revamped and coordinated system of behavioral health crisis services. All residents within the county, regardless of their age, insurance coverage (or lack thereof) or whether or not they have ever used behavioral health services in the past are eligible.

To be known as "**re:solve**" **CRISIS NETWORK**, the service options will include: phone, walk-in crisis, mobile crisis response (for children and adults) and residential options (for adults only). Ellie Medved, Vice President of Ambulatory and Crisis Services at WPIC, says this new network was developed from feedback of past crisis service users and review of several national crisis models. She adds that these revamped services provided by a crisis staff of doctors, nurses, therapists and peer counselors will assist all individuals and/or family members who seek support in a self identified crisis. NAMI members know that, all too frequently, past attempts to get support from crisis service providers have had the perception of falling short when situations were deemed not to fall into the provider's definition of crisis.

This new network will be implemented in two phases: telephone and mobile crisis beginning on July 1, followed by the option for walk-in and overnight stay services slated for this fall. The two-phase implementation is based in part upon tasks necessary to site preparation. Once fully implemented, the complete array of service options will be available 24 hours a day on a 365 day basis. Expect to see a county-wide promotional campaign to begin in June announcing the "re:solve" CRISIS NETWORK.

Contact NAMI office if you would be interested in having a representative of this new crisis network provide a presentation to your support group or organization.

Senate Passes Cost of Living Adjustment for Community Providers

Senator Edwin Erickson's cost-of-living adjustment (COLA) bill, **The Mental Health and Mental Retardation Maintenance of Community Services Act, SB 1373** passed in early June by a vote of 43-7, with Senators Fumo, Lavallo, Mellow, Costa, O'Pake, Hughes and Folmer voting against the bill. As mental health treatment and supports

are increasingly provided at the community level, it is imperative that community providers be afforded the opportunity to meet basic costs and retain staff and maintain provision of needed services.

Sen. Erickson's bill is a companion to Rep. Barbara McIlvaine-Smith's HB 2241, requiring the Secretary of the Budget to include in the Department of Public Welfare budget, a COLA for MH/MR and drug and alcohol programs.

Six of the votes against SB 1373 came from Senate Democratic leadership, who voted with the governor. When the Senate bill reaches the House it will face a challenge in getting out of committee to the floor. The companion bill in the House is HB 2241. The bill sits in the House Appropriations Committee.

CALL to ACTION on COLA BILLS



NAMI members are urged to contact their respective state representatives and ask for their support of SB 1373 and HB 2241 by urging the House leadership to take the bills to the floor for a vote. If anyone is unsure of the identity of their members within the PA General Assembly, visit www.namiswpa.org and click on to the *Legislative Affairs: Find Your Elected Officials* link.

As we know, when working together we can educate our elected officials on the reality of recovery from mental illnesses. Each of us must inform our elected officials that recovery is only possible when people can access a full range of effective treatment and supports that are sufficiently funded throughout our local communities.

Social Security Announces Improvements to the Ticket to Work Program

The Social Security Administration (SSA) issued final rules designed to improve the **Ticket to Work Program**. The SSA indicates the changes will improve the effectiveness of the Ticket program in assisting beneficiaries with disabilities who want to work. "These rules outline a new and improved Ticket to Work program and are based on learning from our experiences, listening to input from interested parties and responding to their suggestions,"

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News Around the Region continued from page 3

said Michael J. Astrue, Commissioner of Social Security. "Beneficiaries with disabilities will have greater flexibility and expanded choices in obtaining the services they need to attain their employment goals. Thus far, the results of the Ticket to Work program have been less than everyone expected and clearly less than Congress intended," Commissioner Astrue said.

The new Ticket to Work program rules:

Include more beneficiaries under the Program —

The population of individuals eligible for a Ticket is expanded to include beneficiaries who are expected to medically improve.

Increase incentive payments for Employment

Networks (ENs) — The new rules modify the EN payment systems to create greater financial incentives for service providers to participate, which will improve beneficiary access to services and expand the pool of quality providers available to serve beneficiaries.

Increase the value of the Ticket — The rules for Ticket assignment are changed to enable beneficiaries with disabilities to take advantage of a more effective combination of services from both State Vocational Rehabilitation agencies and ENs.

Synergize efforts — The new rules promote better alignment of the Ticket to Work Program, the Work Incentives Planning and Assistance Program, the Protection and Advocacy for Beneficiaries of Social Security Program and other Social Security work incentive initiatives.

In preparation for the new Ticket to Work program, Social Security is undertaking a major recruitment effort to increase the number of organizations participating in Employment Networks.

The final rule can be accessed through the Federal Register online at: www.regulations.gov. For general information about the Ticket to Work Program, visit Social Security's website, www.socialsecurity.gov/work.

HB 1448 Update: Support the Bill without Amendments

HB 1448 is Representative Dan Frankel's (D-Allegheny) legislation calling for the safeguarding of funds resulting from the sale or lease of any state operated MH/MR facility. Current law allows that any proceeds from the sale or lease of Mayview would merely be placed into the General Fund and could be utilized for any expenditure within the state budget.

This bill would require that those dollars be placed into a special community services fund stating, "Any funds in the mental health fund shall be used to support a full range of housing options and services that support independent living for individuals with serious mental illness." NAMI members know how crucial safe and affordable housing is to a person's recovery efforts. Community treatment and supports are Medicaid reimbursable; housing however is not.

Since our last edition of *The Voice*, Representatives Rapp and Maher have introduced amendments to HB 1448. Rep. Rapp's several amendments would alter the timeline for closure by calling for a moratorium until various studies would be undertaken. These studies primarily relate to those incarcerated within the state correction system. The amendments would jeopardize the closure date for Mayview and thus may jeopardize some funding timelines as well.

Rep. Maher's amendment adds language providing that the property first be offered to the municipality or municipalities in which the state facility is located for nominal costs. This would eliminate the possibility of safeguarding the proceeds from the sale of Mayview property for use in housing options, thus negating Rep. Frankel's intent of the bill. With five months remaining before the closure date for Mayview state hospital, NAMI members are urged to continue to contact members of the state legislature and ask for their support of legislation that creates a dedicated source of funds for housing in all counties served by Mayview.

Senator Ferlo has introduced a companion bill to HB 1448 numbered SB 1383. It is identical to the favorable version of HB 1448, thus a bill deserving support.

CALL TO ACTION on HB 1448 and SB 1383



Attend the July 17th Mayview Land-Use task force meeting at 7 p.m. at the Mayview State Hospital conference center and:

- Share your support for the proceeds of sale or lease of the property to be placed in a special fund for the creation of housing options and supports for the five counties served by Mayview.
- Voice your approval for the Mayview closure process and timeline, which has been inclusive of stakeholder input and responsive to our concerns.

When contacting your State Senator, urge support for SB 1383 as is — without any amendments. Remember to share that you are a constituent and why safeguarding funds from the sale of Mayview property is important to you. Urge your Representative in the state House to oppose HB 1448 if the bill contains the Rapp and Maher amendments. ●

It's a Wrap:

NAMI Southwestern Pennsylvania 2008 Conference

"Mental Illnesses Affect Everyday People: people you work with, people you're friends with, and people you love."

Lights, Camera, Action!

Inaugural "Night at the Movies Event" held at Pittsburgh Filmmakers Screening Room

The 2008 conference activities coordinated by Sharon Miller, Director of Education and Community Relations, began with a Friday night screening of the motion picture *CANVAS*. The event offered guests the opportunity to meet with Hollywood filmmaker Joe Greco, who also provided the keynote address at the following day's conference. *CANVAS* offers a media depiction of mental illness and its affect on individuals and families that is realistic and hopeful. The movie is based on Joe Greco's own childhood experiences of having a mother diagnosed with a mental illness. Joe shared that he desired to address the subject of schizophrenia in an honest and at times surprisingly upbeat and even humorous tone that illustrates how, from perceived tragedy, hope springs eternal.

Many thanks to Joe Greco for making this heartfelt movie and for the passion he evokes when speaking of the need to combat discrimination against people with mental illnesses. Joe is truly one of us: a member of the NAMI family. For information on the movie or for DVD purchase options go to www.canvasthefilm.org. *CANVAS* actor Joe Pantilione was so moved by his experiences in participating in this film that he developed the website advocacy organization "No Kidding Me Too" (www.nkm2.org) to raise awareness of the prevalence of mental illness and fight stigma.

This Pittsburgh premiere was hosted by NAMI through the generous support of the Staunton Farm Foundation and the hospitality of Pittsburgh Filmmakers. Special thanks to Gary Kaboly at Filmmakers. Bravo to Chef Todd Nelson and the staff of Kaufman House Restaurant and Catering of Zelenople for the fine cuisine served with style and flair.

The *CANVAS* screening was designed as an opportunity for members of our NAMI family and the larger mental health community to take a break from the arduous work of advocacy and the necessary tasks of providing support and education. It proved to be a night of celebration! A heartfelt thank you to Jack Cahalane, Kim Hall, Denise Macerelli, Joni Schwager and Dr. Ken Thompson for their assistance in planning for this special screening.



Director, Joe Greco, pictured with Cindy McHolme at the screening of *CANVAS*

We have already received suggestions for future "night at the movies" events — surely a sign that a good time was had by all.

Over 300 people participated in the 8th Annual NAMI Southwestern PA Conference

The Marriott Hotel conference area was at maximum capacity with NAMI members who were eager to meet Joe Greco and hear, in his own words, his personal "mental illness: the family's story." Joe introduced a partial screening of his film *CANVAS* and spoke eloquently and passionately about his childhood and the impact of mental illness. Joe graciously signed hundreds of *CANVAS* DVD copies for conference attendees.

The conference commenced with an informative federal update provided by U.S. Rep. Tim Murphy, a longtime friend of NAMI and past conference presenter. Congressman Murphy urged each of us to continually ensure our voice is heard by contacting our respective members of Congress and letting them know that mental health matters and that mental illnesses are treatable. Murphy's presence enabled Christine Michaels, Executive Director of NAMI SWPA, and Edna McCutcheon, President of the Board, to present him with a certificate of appreciation for his congressional efforts on behalf of individuals and families affected by mental illnesses.

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Throughout the afternoon, workshop presentations provided updates on new research, evidence based treatments, and expanded community services and supports, which provided participants with the necessary advocacy tools. Annual attendees also know the day provides an opportunity to reacquaint with long-time friends and to meet new members of our ever growing NAMI family.

Said one long-time NAMI member of the two-day event, “Best ever! Education and celebration together — what a combination!”

NAMI Southwestern Pennsylvania conveys much appreciation to our sponsors, and all of our funders, exhibitors and advertisers who make this event possible through their financial support. We are indebted to our many workshop presenters. These individuals donate their time and expertise to provide quality presentations on timely topics. Through the combined efforts of many, NAMI strives



Christine Michaels, Executive Director of NAMI SWPA, and Edna McCutcheon, President of the Board, present U.S. Rep. Tim Murphy with certificate of appreciation.

to offer education events that can be of equal importance to individuals themselves in recovery from mental illnesses, family members of children and adults impacted by these illnesses, and mental health professionals. ●

Conference Acknowledgments

NAMI Southwestern Pennsylvania's
Conference Co-Sponsors
Allegheny County Department
of Human Services
Western Psychiatric Institute & Clinic

Conference Planning
and Development
Kimberly Hall, Education and
Training Consultants
Sharon A. Miller, NAMI Director of Education
and Community Relations
Susan Harrington, NAMI Administrative
Coordinator

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Program

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Coalition for the Responsible Closure of
Mayview State Hospital
Consumer Action and Response Team
Community Care Behavioral Health
Disabilities Rights Network
Howard Levin Clubhouse
Janssen

NHS Human Services, INC
Mental Health America, Westmoreland
County
Mercy Behavioral Health
Our Own Home
Peer Support and Advocacy Network
Pennsylvania Mental Health
Consumer's Association
Pittsburgh Area Recovery International Inc.
Secure Telehealth
Westmoreland Casemanagement
and Supports, Inc.
Western Psychiatric Institute and Clinic
WPIC BiPolar Studies Research Project
WPIC-PREP (Pittsburgh Risk Evaluation
Program)
Value Behavioral Health - PA Inc.

Roster of the 2008
NAMI Conference Presenters:

Jack Cahalane, PhD
LaVerne M. Cichon
Stephen Christian-Michaels
Audra Dudek
Joan Erney, JD
Mary Fleming
Karen Florence
Rohan Ganguli, M.D.
Roger Haskett, M.D.
Eileen Hayner
Shirley Hopper-Scherch
Diane Johnson
Lauren Jones
Amy Kroll
Dwight Lenzer
Kathy Luciano
Denise Macerelli
Kenneth Nash, M.D.
Kim Owens
Michael Reber
Charlene Saner
Roger P. Smith
Wesley Sowers, M.D.
Ken Thompson, MD
Pat Valentine
Deborah Wasilchak
Robert Weber

Disparity in Longevity *continued from page one*

Mim Schwartz — hopes to provide education and advocacy to consumers and family members, education for providers, and a mechanism for consumer feedback. In the coming months, the working group anticipates a call-to-action for members to voluntarily share with the Board their personal experiences regarding the coordination of physical and mental health care, as well as available, helpful resources to improve overall health.

These are some of the findings documented in the report:

- Excess illness and death in those with serious mental illness are largely due to conditions that can be modified (changed) – smoking, obesity/poor nutrition, substance abuse, lack of exercise. Inadequate access to medical care is another significant factor.
- Rates of mortality from natural causes, such as cardiovascular disease, diabetes and respiratory and infectious disease, are several times higher for those with serious mental illness compared to the general population.
- This population is at significantly higher risk due to higher rates of homelessness, trauma, unemployment, poverty, incarceration and social isolation.
- Symptoms of serious mental illness often have a negative impact on people seeking care or following prescribed treatments, while symptoms of mental illness may also mask the symptoms of physical illnesses.
- Medication prescribed to treat serious mental illness may contribute to physical illnesses, and the prescribed treatment for many mental illnesses requires a variety of different medications.

“As a family member and advocate, I believe the disparities between

treatments for mental illnesses and physical disease are very alarming,” says Schwartz, who is a NAMI SWPA Board member and Family-to-Family instructor. “We may think we have found evidence-based, quality care for complicated brain dysfunction, coupled with state-of-the-art psychiatric care, but our loved ones still struggle to have their medical issues adequately addressed.

“Many times physicians are not comfortable considering the negative impact of psychiatric implications on physical health,” Schwartz’s continues. “In turn, psychiatrists may not consider the whole person when evaluating their patients to recognize and be able to recommend appropriate medical interventions. Now is the time for NAMI to address this issue, to give those with mental illness and their families many years of better mental and physical health.”

The report focuses recommendations and solutions on the following major

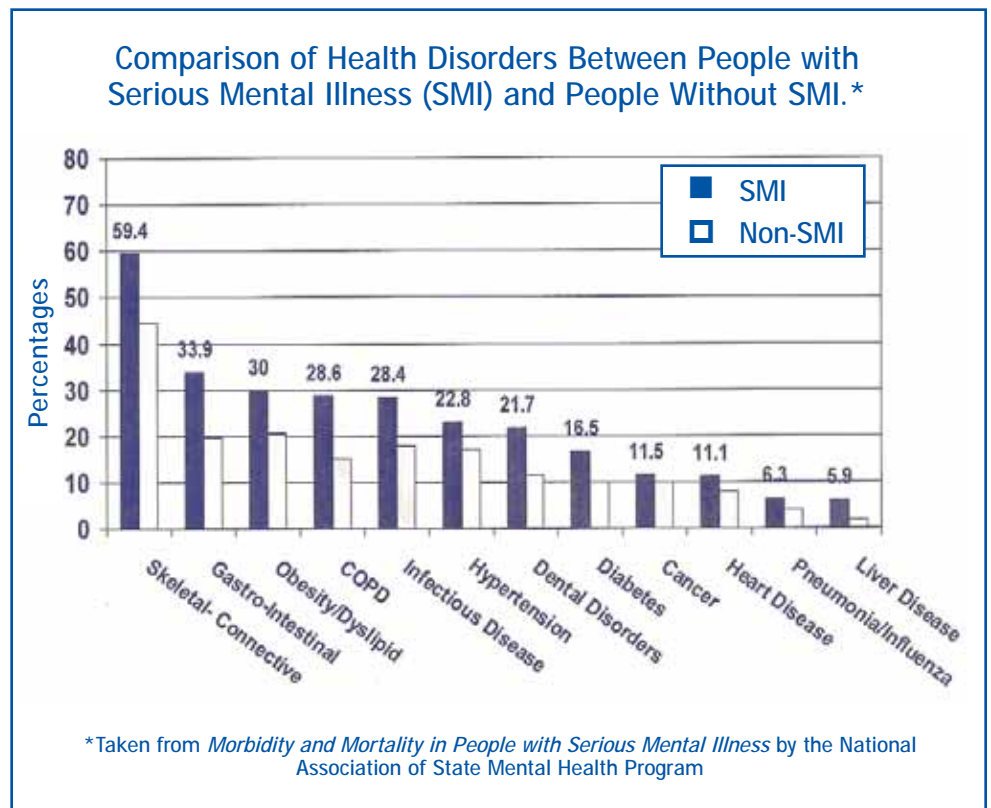
actions to effectively address the identified findings:

1. Prioritize the public health problem of morbidity and mortality, and designate those with serious mental illness as a priority health disparities population.
2. Track and monitor morbidity and mortality in populations served by the public mental health system.
3. Implement established standards of care for prevention, screening, assessment and treatment.
4. Improve access and integration with physical health care services.

“My impression is that southwestern Pennsylvania has a significant amount of resources available to mental health consumers and their family members,” Lloyd continues. “NAMI is one excellent example of a source that provides invaluable information, advocacy, education and support.”

Another source is The Governor’s Chronic Care Commission, which is actively working to create a better way

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to meet the needs of the chronically ill and to coordinate physical and mental healthcare. Southwestern Pennsylvania is generously represented on the commission by professionals who have been actively involved in improving the healthcare system. Their work is adding to the regional resources that are available for providing better ways of coordinating care for individuals with serious mental health problems.

“Unfortunately, many of the wonderful resources that exist in our area go underutilized because the awareness just isn’t there,” Lloyd continues. “The vision of the working group is to create a community atmosphere where our rich local resources are more broadly appreciated and used, replacing the perception of scarcity with the reality of abundance. We need to find a way to inventory all of the high quality resources in our region, and then develop a coordinated system of care where those resources can be accessed more readily.”

As the report explicitly states, overall health is essential to mental health,

and recovery must include wellness. In adopting these principles, local stakeholders, including NAMI, are working to champion the development of a more integrated physical and behavioral health system to better encourage individualized care that is focused on wellness and recovery.

“Providers are just beginning to become aware of the increased medical burden that accompanies mental illness, and they are moving in the direction of providing care for the whole person rather than segmenting behavioral and physical health,” reports Jack Cahalane, PhD, MPH, Chief of Adult Mood and Anxiety Disorders at Western Psychiatric Institute and Clinic of UPMC and a NAMI SWPA Board member. “Behavioral health providers have to challenge themselves to develop a new paradigm that views their role more broadly – not just narrowly focusing on the mental health component and assuming it is someone else’s responsibility to provide for physical health needs.”

“This integration is beginning to take place,” Cahalane continues, “as behavioral health providers track weight, blood pressure, thyroid levels,

lipid profile and glucose levels, among others, as a component of treatment. Consumers should ask for this monitoring as part of their recovery plan. Tracking such things as Body Mass Index (BMI) and the potential to develop metabolic syndrome, in addition to proving education about nutrition, exercise and smoking cessation – among other lifestyle changes that encourage wellness – will be second nature in the treatment relationship in the near future.”

By researching available data and reporting the results with accompanying recommendations and solutions, national, state and local advocates throughout the system are working diligently to correct the problem of excess illness and premature death. Their efforts will help to improve the physical and behavioral health systems in communities in southwestern Pennsylvania and across the nation.

More information on the initiative being undertaken by NAMI SWPA’s Board of Directors, including how you may participate, will be featured in upcoming issues of the newsletter. For a copy of the report, visit www.namiswpa.org.

NAMI Walks **2008**

October 5, 2008 * South Side, Heritage Trail

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In the Spotlight.....

David King, Interviewer

Consumer/Family Satisfaction Team (C/FST), Armstrong County



Why are you good at your job as an Interviewer?

I feel comfortable talking to people, and I am always willing to share my personal story of recovery with those who ask. I know where the people I am interviewing are coming from, and the challenges they are facing. I want to help them the way others have helped me. I am motivated by the fact that the feedback I am collecting will help to improve the behavioral health system in my community.

Do you enjoy working for a NAMI C/FST?

Before I started working here part time in August 2007, it had been more than 10 years since I had been able to hold any type of job. It's great to be working again. I really enjoy the work I do, and I have found another support system in my boss and co-workers, who continually encourage me. Work gives me a productive way to spend my time, and it keeps me healthier because I know I need to take my medications, eat well and get enough sleep at night to be productive on the job.

What is your advice for others who are recovering from mental illness?

Find a strong support system. Look to your family and to others who will have your best interests at heart. Be willing to take your medications, and listen to the professionals and loved ones who are working to help you. Look for helpful resources like support groups and education through NAMI. And just never give up trying to feel better. I went from being an inpatient in a psychiatric hospital to someone who is a vital and connected member of society. There is always hope.

What award did you recently receive?

I was recognized with the annual Leadership in Recovery Award for Armstrong County from Value Behavioral Health as a public acknowledgement of my courage, creativity and leadership in the community. It was

presented at Value Health's 8th Annual Consumer Recovery Forum held March 28 at the Radisson Hotel in Monroeville. This is

a significant accomplishment for me. I've come a long way in the 11 years since my suicide attempt and hospitalization, and I'm proud that others have noticed my recovery efforts.

Why do you think you were nominated?

You'll have to ask Debbie Marshall, the Armstrong/Indiana C/FST Supervisor, and my boss. She is the one who nominated me.

Why did you nominate David for this award?

Debbie: In a short period of time, David has become an excellent resource for consumers in Armstrong County. He cares about the issues and needs of the mental health community. David talks to as many consumers as possible each month, interviewing them at provider sites, drop-in centers and by phone. He also does data entry.

Even though all of this leaves little time, he has stepped forward to help train our new Interviewer for Indiana County and the Drug and Alcohol Interviewer for Armstrong/Indiana counties. Before these people were hired, David helped the consumers in these counties by conducting their interviews. He has also worked on a survey for the Mental Health Association (MHA) in Armstrong County and helped with a housing survey for Armstrong/Indiana MH/MR. David regularly attends meetings and trainings to help him be of more service to Armstrong County consumers. I am always impressed with those acknowledged as Leaders in Recovery. I feel that David more than meets the criteria for this award. It is an honor and a privilege to work with him.

The advocacy, education and support services provided by NAMI's staff and dedicated volunteers give hope for recovery and a future filled with promise for the nearly 80,000 people in our region who cope with mental illness. "In the Spotlight" is one way

NAMI recognizes those people who so diligently work to promote improvements in our behavioral health system while championing the needs of our constituents. If you wish to nominate someone to be featured in "In the Spotlight," send an email to: dference@namiswpa.org.

Welcome Aboard!

NAMI Southwestern Pennsylvania extends a hearty welcome to four new members to the Board of Directors. We are thrilled to have these new members with various backgrounds and experiences on our Board.



Jim Bycura, MS – Jim is the Chief Information Officer at Western Psychiatric Institute and Clinic and UPMC Behavioral Health Services. He holds a Bachelor of Science degree in Mathematics from Carnegie Mellon University and a Masters in Computer Science from the University of Pittsburgh.

Marianne LaSalle – Marianne is the Program Director at Beaver County Rehabilitation Services. She has worked in psychiatric rehabilitation for 26 years and was the recipient of “Professional of the Year” at NAMI’s state conference in October 2006.



Eileen Lovell – Eileen is a wife and mother of two young adult children and has various family members with mental illnesses. She holds a Masters of Arts degree in Economics and a Bachelors degree in Political Science.

Mim Schwartz – Mim works as an Administrative Assistant for BPI Inc. She is a family member of a spouse with a serious mental illness and facilitates support groups in her home. Mim currently teaches in NAMI’s Family-to-Family program and was recently trained as a NAMI Provider Educator.



Did You Know?

At some point in their lives, 49 percent of the 37 U.S. Presidents serving between 1776 and 1974 met the criteria for a psychiatric disorder, according to the researchers at Duke University. Depression was cited most often (Madison, J.Q. Adams, Pierce, Lincoln, Hayes, Garfield, Wilson, Hoover, Eisenhower) followed by anxiety (Jefferson, Grant, Wilson Coolidge), bipolar disorder (J. Adams, T. Roosevelt, L.B. Johnson) and alcohol abuse/dependence (Pierce, Grant, Nixon.)*

* *Mental HealthWorks*, Fourth Quarter 2006

NAMI Southwestern Pennsylvania welcomes three new staff members to the NAMI family!



Christine Carvino, our new Executive Assistant, comes to us from Allegheny General Hospital, where she worked as Executive Assistant to the Senior Vice President. She has 15 years of experience supporting senior management in a professional setting.

Darcey Garda joins us as the Manager of Development and Marketing and will coordinate NAMI Walk 2008. Her background includes planning the Memory Walk for the Alzheimer’s Association and doing public relations at Jack Horner Communications.



Nicole Pless is the new Interviewer for the Armstrong/Indiana County C/FST. Previously, she worked as an Assistant Manager and Lead Sales Associate for Dollar General.



We would also like to congratulate two very special volunteers on our Board of Directors

Dick Jevon has been chosen as a 2008 Community Champion by the *Pittsburgh Post-Gazette*, Heinz Endowments and the Pittsburgh Foundation. Dick and NAMI Southwestern Pennsylvania were featured in an ad in the *Post-Gazette*, and Dick will be honored at a reception and ceremony in January.



Edna McCutcheon, our Board President and CEO of Torrance State Hospital, was honored by Indiana University of Pennsylvania with a 2008 Distinguished Alumni Award.

Congratulations, Dick and Edna! 🌟

NAMI Support Groups

Visit www.namiswa.org for additional information regarding support group meetings

Allegheny County

NAMI Pittsburgh South, Mt. Lebanon, Contact: Donna Maher (412) 653-2476

NAMI Pittsburgh North, Ross Twp., Contact: (Day) Dick/Sarah Focke (412) 367-3062 or (Eve) Pete/Candy Venezia (412) 361-8916

NAMI Pittsburgh East-FAMILIAS, Churchill, Contact: Anne Handler (412) 421-3656

NAMI Spouse Support Group, Churchill, Contact: Mim Schwartz (412) 731-4855

NAMI Sewickley Family Connections, Sewickley, Contact: Kathy Monahan (412) 749-7418

NAMI McKeesport, McKeesport, Contact: Cindy McHolme (412) 754-0998

NAMI Western PA Borderline/Personality Disorders Family Support Group, North Hills, Contact: Rose Schmitt (412) 487-2036

Minority Families of the Mentally Ill, Oakland, Contact: Wilma Simons (412) 320-0601

NAMI W.P.I.C. Family Support Group, Oakland, Contact: Merle Morgenstern (412) 246-5851

Beaver County

NAMI Beaver County, Rochester, Contact: Diane Watson (724) 843-1593

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NAMI Southwestern Pennsylvania website:
www.namiswa.org

NAMI Southwestern Pennsylvania Resource Line:
1-888-264-7972

If you have an idea for a future newsletter, please contact Darcey Garda at dgarda@namiswa.org



NAMI Southwestern Pennsylvania, in partnership with NAMI PA, is pleased to offer:

NAMI Connections Support Group Facilitator Training, July 25 -27, 2008

NAMI Connection is a recovery support group for adults with mental illness regardless of their diagnosis. All are led by trained individuals who are also in recovery – people who understand the challenges we face.

If you are interested in completing a facilitator application form, contact Sharon Miller at 1-888-264-7972 or email at smiller@namiswa.org

NAMI-CAN Beaver County, Beaver, Contact: (724) 775-6304

NAMI-C.A.R.E. (Consumers Advocating Recovery through Empowerment), Beaver, Contact: (724) 775-6304

Butler County

NAMI PA Butler County, Butler, Contact: Butler NAMI Office (724) 431-0069 or Sandy Goetze (724) 452-4279

Fayette County

NAMI Fayette County, Uniontown, Contact: Carmella Hardy (724) 277-8173

NAMI-C.A.R.E. Fayette County, Uniontown, Contact: Carol Warman (724) 439-1352

Indiana County

NAMI Indiana County, Indiana, Contact: (724) 349-3939

Lawrence County

NAMI Lawrence County, New Castle, Contact: Sandi Hause (724) 657-0226

Washington County

NAMI Washington County, Washington, Contact: Tom Shade (724) 228-9847

Westmoreland County

NAMI Alle-Kiski, New Kensington, Contact: Mary K. Slater (724) 335-4593

NAMI Mon Valley, Monessen & Irwin, Contact: Harriett Hetrick (724) 872-2186

NAMI Southwestern PA : Join Today – Let Your Voice be Heard!

Annual dues include access to our regional lending library, resource and referral information, newsletters, conference information, and membership in NAMI Pennsylvania and national NAMI.

- Individual/Family/Friend \$35.00 Professional \$50.00
 Consumer (minimum of \$3.00) \$_____ Additional Contribution \$_____
 Restricted Income (minimum of \$3.00) \$_____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

PHONE (H) _____ PHONE (W) _____ FAX _____

E-mail _____ Number of family members in membership _____

- I would like my copy of the Voice electronically. (provide email) _____
 I am interested in receiving Call to Action alerts via email and participating in legislation and policy advocacy.
(provide email) _____

Please make check payable and mail to: NAMI Southwestern Pennsylvania, 105 Braunlich Drive,
McKnight Plaza, Suite 200, Pittsburgh, PA 15237

Official registration and financial information of NAMI Southwestern PA may be obtained from the PA Department of State by calling toll-free within PA: 1-800-732-0999.
Registration does not imply endorsement.

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