

NAMI Butte County

For more information: (530) 894-8551

www.namibutteco.com

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BUTTE COUNTY BEHAVIORAL HEALTH ADVISORY BOARD

September 16, 2020
3:00pm-5:00pm
***Members of the public
without internet or phone access
may RSVP a seat at the Butte
County Behavioral Health
Department Training Room, 3211
Cohasset Rd., #100, Chico, CA
95973.

Seating is limited to 10 to meet social distancing requirements. RSVPs must be received 24 hours prior to the start of the meeting by calling (530) 891-2986*** Join Zoom Meeting https://zoom.us/j/91807217179?pwd=RzAvMnlQd25WRzFVUWdEWGxjUTFsZz09

Meeting ID: 918 0721 7179 Passcode: 875982

SUICIDE PREVENTION AWARENESS MONTH

If you or someone you know is in an emergency, call The National Suicide Prevention Lifeline at 800-273-TALK (8255) or call 911 immediately.

Suicidal thoughts, much like mental health conditions, can affect anyone regardless of age, gender or background. In fact, suicide is often the result of an untreated mental health condition. Suicidal thoughts, although common, should not be considered normal and often indicate more serious issues.

Every year thousands of individuals die by suicide, leaving behind their friends and family members to navigate the tragedy of loss. In many cases, friends and families affected by a suicide loss (often called "suicide loss survivors") are left in the dark. Too often the feelings of shame and stigma prevent them from talking openly, www.nami.org

Suicide statistics are not out for 2020 yet, but experts said with all the negative side effects of the pandemic lockdowns, suicide rates are on the rise. "Before the pandemic the most recent research showed 800,000 people died by suicide each year and that's globally. That's one person every 40 seconds," said Allison Johnson, a licensed marriage and family therapist. "What we've seen with the pandemic is an increase in the rise in factors that are already associated with suicide - job loss, stress at home, isolation, loss of hobbies and health-related concerns. said Johnson. www.cbs8.com

AB1976 PASSED-SENATE!

Excellent news - AB 1976 passed from the Senate Appropriations Committee with on a 7-0 vote! This is huge news and we are only one step from getting the bill to Governor Newsom for signature

AB 1976, Eggman. Mental health services: assisted outpatient treatment. The Assisted Outpatient Treatment Demonstration Project Act of 2002, known as Laura's Law, until January 1, 2022, authorizes each county to elect offer specified mental health programs either through a resolution adopted by the county board of supervisors or through the county budget process, if the county board of supervisors makes a finding that specified mental health programs will not be reduced as a result of participating. Existing law authorizes participating counties to pay for the services provided from moneys distributed to the counties from various continuously appropriated funds, including the Mental Health Services Fund, when included in a county plan, as specified.

This bill, commencing July 1, 2021, would instead require a county or group of counties to offer those mental health programs, unless a county or group of counties opts out by a resolution passed by the governing body stating the reasons for opting out and any facts or circumstances relied on in making that decision. The bill would also authorize a county to instead offer those mental health programs in combination with one or more counties, subject to specified implementation provisions. The bill would prohibit a county or group of counties implementing these provisions from reducing existing

voluntary mental health programs serving adults, or children's mental health programs, as a result of the implementation. The bill would also repeal the expiration of Laura's Law, thereby extending it indefinitely.

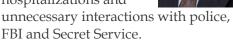
Existing law authorizes various persons to request the county mental health director to file a petition in the superior court for an order for assisted outpatient treatment for a person who meets specified criteria.

This bill, commencing July 1, 2021, would additionally authorize a judge in a superior court to request a petition for that order to be filed for a person who appears before the judge. The bill would make additional conforming changes.

AOT STORY

Personally Speaking: Assisted
Outpatient Treatment Saved My Life
By Eric Smith

I was a teenager when I was diagnosed with bipolar disorder. What happened next was almost 15 years of failed medications, multiple hospitalizations and



My mental illness affected every part of my life. Suffering from paranoia and rapid cycling bipolar disorder symptoms I dropped out of high school. My relationships disintegrated. I was given every kind of medication that could be given to a person with mental illness: antidepressants, SSRIs, anti-psychotics—nothing worked. So, I self-medicated with drugs and alcohol, and eventually decided to enter rehab.

I was arrested for a nonviolent offense in 2009 and was sent to jail. I was held there for 30 days while in the worst state of mind I have ever experienced.

The few medications they had in the jail were medicines that I had already tried without any lasting success.

I was making the guards and inmates nervous, so they moved me to a sparse cell with one bed, one sink and one toilet. I was only allowed to see my parents once during that entire ordeal, through a thick glass window.

Eventually, I was transferred from the jail to a hospital and then I got to go into an Assisted Outpatient Treatment (AOT) program. The AOT program offered an innovative solution to the problems born from my mental illness. It gave me a team—a judge, a social worker, a psychiatrist, a nurse and others—to support me.

It was the first time in my struggle with my mental illness that I was able to look towards the future. I lived in a group home that, while it wasn't perfect, ensured that someone was holding me accountable 24/7.

I was able to stabilize and went home to live with my parents, but in 2011 my psych meds stopped working and I had to be hospitalized again. This would be my third and final hospitalization. A psychiatrist looked at the long list of medications that I had tried and that had failed. Doctors had prescribed me everything – except clozapine. So, she put me on a low dose of clozapine and two weeks later, my delusions and hallucinations went away. I went from taking five to eight medications per day, to just needing one psychiatric medication. Clozapine is still working for me, almost a decade later. I went through another 12-month AOT program after that hospitalization and was able to turn my life around. I graduated *magna cum laude* with a degree in psychology from the University of Texas at San Antonio and I am now a graduate student training to become a professional advocate and mental health expert.

I want to pinch myself when I think about how far I have come. I was a high school dropout who is now in graduate school.

Looking back, I know that I wouldn't be where I am today without the help of AOT and my treatment team. AOT saved me from the criminal justice system and from insanity.

AOT saved my life.

It's been a long journey since my initial diagnoses when I was a teenager. My life is so different from what my parents feared it would be in those early years. I've received glowing letters from my professors and graduated in the top 10% of my class. I've been able to go to Washington, D.C. to meet with a member of the congressional mental health caucus to champion additional support for AOT. I've spoken to Senator Kamala Harris' deputy chief of staff and have communicated with Senator Cory Booker and his policy team about AOT and SMI. I've also worked closely with the Treatment Advocacy Center as a consultant on a white paper about AOT and traveled with the organization to national conferences to tell my story. AOT allowed me to find my calling in policy advocacy. Being an advocate is a lot of work, but it doesn't feel like work—it feels like home. I'm doing what I was meant to do. I want to make sure the story I lived and the horrible things my family had to go through because of my mental illness weren't all for nothing.

If you take anything away from my journey, it should be that serious mental illness is not something that can be solved by the criminal justice system. Civil court proceedings and programs like AOT are the best ways to help people.

Eric Smith is a mental health advocate, public speaker on matters of mental illness, and graduate student.

CHAT

CHAT and County of Butte Announce Partnership to Create Shelter for Behavioral Health Clients

We're very pleased to announce a new partnership with the Butte County Department of Employment and Social Services and the Dept of Behavioral Health to develop an emergency shelter that we're calling Everhart Village for Behavioral Health clients with round the clock supervision and intensive case management. The press release from the county is included in full below. It's our goal that Everhart Village will create a healthy environment for vulnerable people with mental health challenges who need a safe, secure shelter as well as saving the county and city money by reducing the need for emergency services.

Shown here are CHAT Executive
Director Leslie Johnson and board
members Robert Trausch and
Charles Withuhn, receiving keys for
access to the property from county
real property agent Margaret Bestor.
We're excited about being able to
help provide shelter for Behavioral
Health clients who lack housing and
we'll be working hard to raise the
necessary funds to make this project

reality.



www.chicohousingactionteam.org

PROXY PARENT

Proxy Parent Foundation is a unique entity. Our founders were members of NAMI-California and the Los Angeles Mental Health Association who sought to provide family-like Personal Support Services and trust administration services for their family members and others with mental illness, by acting as the "trust protector for family generated "stand-alone" third-party special needs trusts.

In 2006, Proxy Parent Foundation opened the PLAN of California Master Pooled Trust to any disability type, accommodating both first part self-settled or third-party family-generated" special needs trusts. Today, thanks to the involvement of legal, medical, social sector and financial professionals we have further expanded Proxy Parent Foundation's capabilities to include Personal Support Services for our beneficiaries with mental illness and other brain disorders throughout California.

Proxy Parent Foundation does not accept any government funds. The operational costs of our foundation and for our services rely solely on revenues generated from trust fees and the generosity of our friends. If you'd like to make taxdeductible donation please contact us at

info@proxyparentfoundation.org

www.proxyparentfoundation.org

RESEARCH WEEKLY

Importance of Long-Acting Injectable Antipsychotics in Early Stage Schizophrenia By Elizabeth Hancq

Preventing a subsequent psychotic episode and resulting hospitalization in people in early phase schizophrenia is a key public health problem with substantial consequences to the individual suffering. Previous research has shown that second episodes of psychosis in the same individual respond less well to the same treatment. Meanwhile, longer durations of untreated psychosis lead to a host of consequences, such as physical brain damage and cognitive challenges.

Preventing psychotic episodes in individuals with schizophrenia with proper medications and therapies is crucial for their prospects toward longer-term recovery. However, adherence to antipsychotic medication is low. Previous research has shown that after an individual's first hospitalization for schizophrenia, 1/3 of patients discontinue their antipsychotic medications within 30 days of discharge, while more than half of patients have discontinued their medications after 60 days.

Results from a randomized clinical trial published earlier this month in *JAMA*

Psychiatry suggest that longacting injectable antipsychotic medications can prevent relapse and re-hospitalization in patients with early phase schizophrenia. The results of the study provide further evidence to support the more widespread use of longacting formulations in individuals with severe mental illness.

IN MEMORY

Treatment Advocacy Center Mourns the Death of Former Board Member DJ Jaffe



The Treatment Advocacy Center mourns the passing of cherished friend and former board member, DJ Jaffe. Jaffe, a longtime, relentless pioneer in efforts to prioritize the care of those with severe mental illness, passed away at his home in New York City.

DJ's bold and often provocative voice brought unprecedented attention to how our mental health system fails those most in need and their families. His clear and direct manner "afflicted the comfortable," and forced us to confront the consequences of our failure to prioritize those with the most serious mental illness, warts and all.

He never shied from important battles, whether it was leading the charge for passage of Kendra's Law in New York, demanding accountability for the failures of California's Prop. 63 funding program or calling out cynical federal policymakers as they played politics with the mental health reforms of the 21st Century Cures Act.

IN MEMORY



One of our NAMI members, Mary Katherine Snoberger, 61, of Chico, California, passed away on 5/31/2020 at home. She was born 7/8/1958, in Fairbanks Alaska.

She did volunteer work for the Iverson Center and held many positions that enabled her to advocate for others. She graduated from Trinity Life Bible College in 2005 with a Bachelor's in Arts & biblical studies. She fought for others with love and grace until the very last day. Mary Katherine Snoberger 7/8/1958 - 5/31/2020

RESOURCES

BUTTE COUNTY BEHAVIORAL HEALTH

Behavioral Health Crisis Situation? Call 800.334.6622 or 530.891.2810 Non-Crisis: Call our office at 530.891.2810.

CCAT

Crisis Care Advocacy & Triage: Need help? CCAT hotline at (510) 396-5109

DBSA

Depression & Bipolar Support Ken Snyder at 530-566- 4380 or email: kensnyder1999@gmail.com

ENLOE BEHAVIORAL HEALTH

Voluntary patient-centered inpatient psychiatric care 530-332-5250

SHALOM FREE CLINIC

Mental healthcare every Sunday from 1:00 PM – 4:00 PM www.shalomfreeclinic.org

NAMI SUPPORT GROUPS

NAMI BUTTE COUNTY'S Family and Friends Support Group Meeting

This is an opportunity for families with loved ones who struggle with mental illness to share, listen and learn through a mutually supportive audience in a safe and supportive environment.

The free NAMI Family Support Group will be meeting, this time via the Zoom online meeting platform. If you are interested in joining us, please contact Deborah at dpburfeind@comcast.net to register and get zoom information, and to ask any questions you may have.

NEXT MEETING: October 6, 2020

TIME: 6:30 PM to 8 PM

NAMI BUTTE COUNTY'S Connection Support Group Meeting

NAMI Connections Support Group is a free, peer-led support group for people, over the age of 18 living with mental illness. NAMI Connection Support Groups are led by trained facilitators living in recovery themselves. The group is designed to connect, encourage, and support participants using a structured support group model.

The NAMI Connections Recovery
Support Group will be meeting via the
Zoom online meeting platform
NEXT MEETING: September 28,

2020 5:30 pm-7 pm

If you are interested in joining us, please contact Judy (jelgourds@yahoo.com) to register and get Zoom information, and to ask any questions you may have.

DEPRESSION

How to Help a Loved One through Depression

You can't "fix" someone living with depression. What you can do is find ways to show that you care and encourage them to seek help. It's hard watching someone you care about struggle with depression. The woman you fell in love with because of her adventurous spirit now spends all her free time on the couch, watching Netflix. The guy you bonded with at work frequently calls in sick, and when he's on duty, he's distant and irritable.

But what to do about it? You want to be supportive, of course, but you're unsure exactly how. What if your words of encouragement come across as insensitive or patronizing? How do you offer to help without sounding like you're pushing for a solution?

Being on the sidelines comes with its own struggles, but talk to any mental health professional or advocate and they'll say you have a crucial role to play when you notice someone—a friend, romantic partner, relative, colleague, neighbor—becoming

despondent,

losing sleep, expressing hopelessness, or showing other signs of depression.

And that's to become a coach of sorts, a voice that tells the person who is depressed that he or she is not alone, that someone cares enough to notice the shift in behavior and is willing to risk the awkwardness of mentioning it.

Those professionals and advocates will also say this: Too often, well-intentioned attempts to help fall completely flat, and sometimes make matters worse. Commonly used phrases like "Look on the bright side" or "You'll snap out of it" have no place in a conversation about depression, which has nothing to do with choice.

You see someone struggling with depression, it's important to speak up, even if you don't quite know what to say. Depression can be a very lonely experience, and you can make a difference just by showing you care enough to notice. A few practical tips:

Be a cruise director. Gently encourage people with depression to do things that would normally give them pleasure, even if that pleasure takes a while to show up. Instead of saying, "This will make you feel better," try:

"This may fall completely flat, but try
to keep yourself activated,"
recommends Sally Winston, PsyD.
"Always acknowledge what a huge
effort that is, and that it's not going to
work instantly."

Stay the course. Don't abandon your efforts, especially if you know the person well and are more available to offer your support. "You can be a broken record," says Barbara Van Dahlen, PhD. "Sometimes it takes more than one approach before somebody lets us help."

Listen first, advise later. If you talk too much at first, your plans to help may backfire. When you do talk, ask open-ended questions such as "How are you feeling?" or "What would you like to do?"

THE FULL ARTICLE IS AT:

https://www.hopetocope.com/caregiver s/helping-a-loved-one-with-depression/ For more information about this newsletter and to submit articles please contact: Colleen Phipps, Newsletter Editor 530-894-8551 / cmphipps@csuchico.edu

MAINTE Butte Coun	MEMBERSHIP Application
I want to join NAMI as a new member I want to renew my membership Please check your membership type:	
*Household: \$60.00 (multiple people at one address).	
Individual: \$40.00	
Open door: \$5.00 (open to anyone who is experiencing financial constraints)Donation Amount (optional)Total Enclosed Date:	
Name:	Phone:
Street: City,	Sate, Zip
Email Address:	
*Additional names for Household Membership:	
Name:Email:	
Make check payable to and mail to NAMI Butte County P.O. Box 1364 Chico, CA 95927	

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