

NAMI Butte County

For more information:
(530) 894-8551

www.namibuttecounty.org
& on Facebook

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BUTTE COUNTY
BEHAVIORAL
HEALTH ADVISORY BOARD

3rd Wednesday ea. Month
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) 552-4596*** Join Zoom Meeting
<https://zoom.us/j/91807217179?pwd=RzAvMnlQd25WRzFVUWdEWGxjUTFsZz09>

Meeting ID: 955 5005 1818

NAMI – ON CAMPUS

NAMI Butte County is sponsoring “NAMI On Campus” at Chico High.

NAMI on Campus High School (NCHS) Clubs are student-led groups on high school campuses, where students can talk openly about mental health and wellness, learn ways to support friends or family members who have a mental illness, and educate others on campus about mental health and wellness. The goal of NCHS Clubs is to end stigma by raising awareness that mental illness is not rare and should be treated like any other kind of medical condition.

An event “Each Mind Matters” to kick off this program will be held at Chico High Campus.

Each Mind Matters is California’s Mental Health Movement and was created to unite all of us who share a vision of improved mental health and equality.

For more information contact:
JAhmadi@chicousd.org

AMERICAN RESCUE PLAN

American Rescue Plan Act of 2021
Includes Significant Mental Health Investment

Providers of mental health services may be eligible for funding, loans, and grants as detailed below. On March 11, 2021, President Biden signed the American Rescue Plan Act of 2021. One key component of the \$1.9 trillion initiative is an investment of more than \$3.5 billion toward behavioral and mental health services. This funding covers a variety of providers and mental health consumers.
<https://www.gibbonslawalert.com/2021/03/18/american-rescue-plan-act-of-2021-includes-significant-mental-health-investment/>

TELEHEALTH

Mental Health and Substance Use Disorders the Most Common Telehealth Appointment

The Office of Research and Public Affairs continues to monitor the impact of COVID-19 on individuals with severe mental illness. As previously reported in November’s Research Roundup, there are telehealth platforms and services that can work for people with serious mental illness. Nearly a year after the start of the pandemic, research about telehealth during this time is beginning to emerge. A recent study conducted by RAND Corporation, a research organization, has revealed that in the early months of the pandemic (March-May 2020), people with mental health conditions and substance use disorders were more likely to use telehealth than those with other chronic health conditions. More than half (53.6%) of people with a mental health disorder or substance use disorder interacted with a provider via telehealth while only 43% of individuals with chronic physical conditions utilized telehealth services. As the nation considers what life after the COVID-19 pandemic looks like, research evaluating the impact of telehealth and other changes will be important to ensure access to services and quality are maintained. In addition, it is important that people with severe mental illness are included in research about the pandemic to address the pandemic’s effect on quality and availability of mental health services.

Fischer, S. (January 6, 2021). [The Transition to Telehealth during the First Months of the COVID-19 Pandemic: Evidence from a National Sample of Patients](https://www.treatmentadvocacycenter.org). *Journal of General Internal Medicine*.
www.treatmentadvocacycenter.org

CRISIS GUIDE



When mental illness is present, the potential for crisis is never far from mind. Crisis episodes related to mental illness can feel incredibly overwhelming. There's the initial shock, followed by a flood of questions — the most prominent of which is: "What can we do?"

People experiencing mental illness — and the people who care for them — need information. However, that information is not always readily available and the search for answers may require more energy and persistence than possible in times of crisis.

"Navigating a Mental Health Crisis: A NAMI Resource Guide for Those Experiencing a Mental Health Emergency" (Crisis Guide) provides important, potentially life-saving information for people experiencing mental health crises and their loved ones. This guide outlines what can contribute to a crisis, warning signs that a crisis is emerging, strategies to help de-escalate a crisis, available resources and so much more.

You can download the guide at : <https://www.nami.org/Support-Education/Publications-Reports/Guides/Navigating-a-Mental-Health-Crisis>

STAR PROGRAM

Health care workers replaced Denver cops in handling hundreds of mental health and substance abuse cases — and officials say it saved lives

BY LI COHEN

FEBRUARY 6, 2021 / 12:04 AM / CBS NEWS

A program that replaces police officers with health care workers on mental health and substance abuse calls in Denver, Colorado, is showing signs of success, according to a [six-month progress report](#). Despite responding to hundreds of calls, the workers made no arrests, the report said — and the city's police chief told CBS News on Friday that he believes the program "saves lives."

Under the Support Team Assisted Response (STAR) program, health care workers are dispatched in lieu of police when responding to incidents involving issues with mental health, poverty, homelessness or substance abuse. STAR providers only respond to incidents in which there is no evidence of criminal activity, disturbance, weapons, threats, violence, injuries or "serious" medical needs.

During the first six months of the program, from June 1 to November 30, health professionals responded to 748 calls, including trespassing, welfare checks, narcotic incidents, and mental health episodes, according to the [report](#). None of those cases required help from Denver police and no individuals were arrested.

(View complete article at <https://www.cbsnews.com/news/denver-health-professionals-replaced-cops-in-handling-hundreds-of-low-level-incidents-for-6-months-and-successfully-did-so-with-no-arrests/>)

BOOK REVIEW

Gorilla and the Bird: A Memoir of Madness and a Mother's Love

by Zack McDermott (Goodreads Author)

The story of a young man fighting to recover from a devastating psychotic break and the mother who refuses to give up on him

Zack McDermott, a 26-year-old Brooklyn public defender, woke up one morning convinced he was being filmed, *Truman Show*-style, as part of an audition for a TV pilot. Every passerby was an actor; every car would magically stop for him; everything he saw was a cue from "The Producer" to help inspire the performance of a lifetime. After a manic spree around Manhattan, Zack, who is bipolar, was arrested on a subway platform and admitted to Bellevue Hospital.

So begins the story of Zack's freefall into psychosis and his desperate, poignant, often darkly funny struggle to claw his way back to sanity. It's a journey that will take him from New York City back to his Kansas roots and to the one person who might be able to save him, his tough, big-hearted Midwestern mother, nicknamed the Bird, whose fierce and steadfast love is the light in Zack's dark world.

Before his odyssey is over, Zack will be tackled by guards in mental wards, run naked through cornfields, receive secret messages from the TV, befriend a

former Navy Seal and his talking stuffed monkey, and see the Virgin Mary in the whorls of his own back hair. But with the Bird's help, he just might have a shot at pulling through, starting over, and maybe even meeting a woman who can love him back, bipolar and all.

Written with raw emotional power, humor, and tenderness, *GORILLA AND THE BIRD* is a bravely honest account of a young man's unraveling and the relationship that saves him.

<https://www.goodreads.com/book/show/33784294-gorilla-and-the-bird>

DUAL DIAGNOSIS

Treatment Advocacy Center's Office of Research and Public Affairs published a [new evidence brief](#) today that sheds light on the numerous challenges faced by people with serious mental illness and co-occurring substance use disorders.

The report, "[Dual Diagnosis: Serious Mental Illness and Co-occurring Substance Use Disorders](#)," offers an extensive analysis of over 150 separate sources of prominent existing research, including the Substance Abuse and Mental Health Services Administration's Mental Health Surveillance Study, one of the most robust surveys of mental health facilities in the country.

Key insights from the report include:

One in four people with serious mental illness also have a substance use disorder. Only 12.7% of people with co-occurring serious mental illness and substance use disorders received any treatment for both conditions in 2019. People with serious mental illness are more likely to smoke tobacco and misuse alcohol compared to those without mental illness. Cannabis is one of the most common drugs used by people with serious mental illness. Almost 40% of individuals with serious mental illness used marijuana in 2019.

A dual diagnosis can have serious consequences in an individual's life: People with co-occurring disorders are more vulnerable to becoming involved with the criminal justice system. They are also more likely to experience homelessness and it is much more difficult for them to access the necessary treatment that addresses both disorders.

Evidence-based treatments to target concurrent substance use disorder and mental illness do exist. However, most individuals face substantial barriers to accessing quality treatment.

"Policy solutions should include the better integration of the mental health and substance use treatment systems and an increase in the availability of integrated dual-disorder treatment programs," write co-authors Elizabeth Sinclair Hancq, Kelli South and Molly Vencel.

www.treatmentadvocacycenter.org

ANOSOGNOSIA

Anosognosia, also called "lack of insight," is a symptom of severe mental illness experienced by some that impairs a person's ability to understand and perceive his or her illness. It is the single largest reason why people with schizophrenia or bipolar disorder refuse medications or do not seek treatment. Without awareness of the illness, refusing treatment appears rational, no matter how clear the need for treatment might be to others.

Approximately 50% of individuals with schizophrenia and 40% with bipolar disorder have symptoms of anosognosia. Long recognized in stroke, Alzheimer's disease and other neurological conditions, studies of anosognosia in psychiatric disorders is producing a growing body of evidence of anatomical damage in the part of the brain involved with self-reflection. When taking medications, insight improves in some patients.

Improving access to treatment for people too ill to seek help, including involuntary treatment when legal criteria are met, is one of the ways the Treatment Advocacy Center is working to fix the mental health system.

www.treatmentadvocacycenter.org

IN MEMORIAM

RITA & DEAN BURNS



Long time NAMI advocates and supporters Rita and Dean Burns both passed away this past year. Dean was an x-ray technician and Rita was a nurse during their professional years. In their retirement they enjoyed an antique business.

NAMI (National Alliance on Mental Illness) became an all-consuming meaningful goal to fight for those who have brain disorders and need help. They were long time NAMI members and both served on our NAMI Butte County board. Rita passed away on December 15, 2020, just 4 short months after her beloved Dean went to be with the Lord.

NAMI EDUCATION

NAMI Family-to-Family Education Course is an education program for family and friend of people with mental health conditions.

NAMI Peer-to-Peer Education Course is an education program for adults with mental health conditions.

NAMI Basics is a 6-session education program for parents, caregivers and other family who provide care for youth (ages 22 and younger) who are experiencing mental health symptoms.

Visit www.namibuttecounty.org or call 530-894-8551 for more information.

NAMI SUPPORT GROUPS

NAMI BUTTE COUNTY'S Family 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.

1ST TUESDAY EACH MONTH
TIME: 6:30 PM to 8 PM

NAMI BUTTE COUNTY'S Connection Support Group Meeting

NAMI Connections Recovery Support Group is a free, peer-led support group for people, over the age of 18 living with mental illness. The 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

4TH MONDAY EACH MONTH
TIME: 5:30 PM to 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

RESOURCES

*BUTTE COUNTY BEHAVIORAL HEALTH

Behavioral Health Crisis Situation? Call [800.334.6622](tel:800.334.6622) or [530.891.2810](tel:530.891.2810)
Non-Crisis: Call our office at 530.891.2810.

*CCAT

Crisis Care Advocacy & Triage: 24/7 Mobile Street Outreach - 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

1010 Mangrove Avenue, Suite D, Chico, CA 95928 **530-342-2445**
www.shalomfreeclinic.org

*THERAPEUTIC SOLUTIONS

530-899-3150 Our mental health services are designed for adults dealing with a variety of mental health problems

*WWW.NAMI.ORG

The NAMI HelpLine can be reached Monday through Friday, 10 am–8 pm, ET. 1-800-950-NAMI (6264)

National Suicide Prevention Lifeline – Call 800-273-TALK (8255)

If you or someone you know is in crisis—whether they are considering suicide or not—please call the toll-free Lifeline to speak with a trained crisis counselor 24/7.

Crisis Text Line – Text NAMI to 741-741Connect with a trained crisis counselor to receive free, 24/7 crisis support via text message.

National Domestic Violence Hotline – Call 800-799-SAFE (7233)

Trained expert advocates are available 24/7 to provide confidential support.

National Sexual Assault Hotline Call 800-656-HOPE (4673) 24/7

Connect with a trained staff member. Fr

