



NAMI Ohio's
NEWS BRIEFS

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Ohio's Voice on Mental Illness



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On the Cover:

In 1982, Susan Hancock was first diagnosed with major depression while undergoing rehab for alcoholism. Today, Susan is still sober and receiving out-patient mental health



treatment. In 1986, Susan received her Bachelor degree in Fine Arts and began painting. Despite her mental and physical problems (she refuses to call them disabilities), she is able to work part-time and pursue her dream of being an artist. Several years ago, depressed and discouraged, Susan almost gave up on that dream but with the confidence inspired by a project for emerging artists at Fresh A.I.R. Gallery at Southeast, Inc., she took up her paintbrushes again with a new determination and vision. “I know first-hand how art can transform the lives of those of us with mental challenges. I paint primarily impressionistic landscapes, and enjoy painting the local scenery en plein air,” Susan said. You can see more of her work at www.artistsites.org/susanhancock.

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Thank you!

Save the Date

Leadership & Affiliate Development Conference

May 14-15, 2010

The Renaissance Hotel
Downtown Columbus

NAMI News Briefs Contents



Ohio's Voice on Mental Illness with more than 55 affiliates statewide

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State Representative Marian Harris Meets with Franklin County Advocates



In February, the Franklin County Consumer and Family Advocacy Council (CFAC) welcomed from the Ohio House of Representatives Marian Harris (D-Columbus) to a recent meeting. Rep. Harris (ninth from the left) discussed issues and concerns related to behavioral healthcare. CFAC is a group of volunteers, including several NAMI members, who advocate on behalf of consumers and family members with mental illnesses and addictions. The Council is made up of individuals who are either recovering from mental illness or drug and alcohol addiction themselves, or have family members who are. Formed in 1997, the Council provides a network of individuals for advocacy, support to families, and advice to the Alcohol, Drug Addiction and Mental Health Board of Franklin County staff and Board of Trustees.



Letter from the President

By Rory McGuinness

Homework Assignment: Make One Meaningful Contact

By now, you have no doubt heard that the state's budget outlook for Fiscal Year 2012 – 2013 is even more grim than the current budget. According to estimates, there could be 4 billion fewer dollars available in each year of the biennium. Given that the annual budget for Ohio is \$50.5 billion, you can see that this is a significant shortfall. The Ohio Department of Mental Health has already sustained cuts of over \$100 million in just in the past year alone.

As a result, waiting lists are longer than ever, and in many communities, individuals who do not have insurance are simply being turned away from services unless they are at immediate risk of harm to themselves or others. Many of these individuals are winding up in crowded emergency rooms. Those fortunate enough to secure a bed are often released before they are stable or before they have been linked to follow-up services. Others bypass the health care system altogether and go directly to jail, where they may or may not receive treatment, depending on the local jail's policy and budget. At the same time, funding for supportive housing and peer support services has been decimated at the state and local levels. Clearly we are in a serious crisis.

It is more important than ever for us to stand up and fight for our cause. Believe it or not, there are lawmakers who make decisions regarding funding for mental health services who may not be aware of how desperate the situation has become. This is where you come in. We need each person who reads this article to commit to making ONE MEANINGFUL CONTACT with a lawmaker before the end of the summer. Our

"We need each person who reads this article to commit to making ONE MEANINGFUL CONTACT with a lawmaker before the end of the summer. Our goal is for each lawmaker in Ohio to be contacted by several of his or her respective constituents for the sole purpose of sharing their story."

goal is for each lawmaker in Ohio to be contacted by several of his or her respective constituents for the sole purpose of sharing their story.

It is important that our lawmakers hear about the successes that result when treatment and support services are in place, and also what happens when they are not. It is also important to let our lawmakers know that treating mental illness is right decision financially for our state. According to the Ohio Business Roundtable, the estimated indirect costs due to depression alone are \$3 billion here in Ohio, and the annual cost of housing an inmate in Ohio's prisons is \$25,000.00. Compare this to the estimate cost of community based treatment at \$8,000 per person a year, and you start to see where an investment in mental health care is a sound financial decision.

Everyone who reads this has a story to tell. Please take a moment to put your story in writing and send it off to your State Senator and Representative. Or, if you prefer, call and make an appointment to meet with your legislators to share your story in person. Below are some questions to help get you started in describing your experience with mental illness.

- How old were you or your loved one when the illness began? What is the diagnosis?
- How has mental illness affected your life or the life of your loved one, including relationships, schoolwork, or job performance? How has your family been impacted?
- What problems have you or your loved one encountered in getting care? How has insurance affected access to care?
- What form of treatment have you or your loved one received?
- Have you or your loved one experienced discrimination by an employer, landlord, health insurance plan, etc.?

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Letter from the Executive Director

By Jim Mauro, Executive Director

Changes in the Ohio Medicaid Prescription Program

As of February 1, 2010, Ohio's Medicaid Managed Care Plans are no longer responsible for covering medications for the mentally ill. That responsibility has been shifted back to the Ohio Department of Job and Family Services' Medicaid program. Ohio's Medicaid Managed Care Plans include: AMERIGROUP Community Care, Paramount Advantage, Buckeye Community Health Plan, Unison Health Plan of Ohio, CareSource, WellCare, and Molina Healthcare of Ohio.

On one hand, this change is good news. It means that there will only be one Medicaid formulary (list of available medications) in Ohio. This will reduce much of the confusion among prescribers and their patients about which medications require a prior authorization and which do not. On the other hand, it means that many people who did not previously have to pay co-pays for their medication, will now be expected to do so. The pharmacy will charge individuals impacted by this change a \$2 co-pay for most brand-name prescription drugs that are on the state's approved list of drugs and a \$3 co-pay for generic or brand-name prescription medications that are not on that list. Medications that are not on the approved list require prior authorization from Medicaid by the doctor before the prescription can be filled at the pharmacy.

It is important to note that the pharmacy cannot refuse to fill prescriptions for those individuals who are unable to pay. However, that individual will still owe the co-pay, and the pharmacy is allowed to bill the customer for the unpaid co-pay. In the future, the pharmacy may refuse to give that same individual a prescription if (1) the amount owed was not paid and (2) it is the pharmacy's established practice to deny services to everyone who owes them an unpaid bill.

Under Ohio law, some people are excluded from having to pay co-pays. These include individuals

who are:

- younger than 21,
- pregnant or who's pregnancy ended recently (up to 90 days after her pregnancy ends),
- receiving hospice care,
- in a nursing home or an intermediate care facility for the mentally retarded,
- given the prescription as a family planning service (such as contraceptives or prenatal vitamins),
- given the drug during emergency care in a hospital, clinic, office or other facility, or
- given the drug in a doctor's office, hospital outpatient department, clinic, dialysis center, infusion center or during some other medical encounter.

There is ample evidence that for most people co-pays often interfere with an individual's ability and/or willingness to get and take their medications as prescribed. Statistically, difficulties with medication adherence are even greater for individuals with serious mental illness. There are a variety of reasons for this, including: the stigma of mental illness and a general lack of acceptance that one has an illness; adverse side effects of many mental health medications; problems related to the illness that interfere with taking the medication such as disorganized thinking or memory difficulties; or a lack of knowledge about the importance of taking the medication as prescribed. Certainly, adding the requirement of a co-pay for many of these individuals results in one more hurdle to overcome. For this reason, NAMI Ohio has been and will continue to advocate for the elimination of the co-pay requirement.

In order for NAMI Ohio to successfully make the case that co-pays should be eliminated, we need to hear about situations in which a co-pay resulted in someone not getting their mental health medication. If you hear about such cases, let us know right away by e-mailing us at amiohio@amiohio.org or calling us at 1-800-686-2646.

Also, you should know that injectable medications, such as Risperdal Consta and Invega Sustenna, will

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Former Senator and Mrs. Bob Spada Partner with NAMI Ohio to End Stigma of Mental Illness

In January, NAMI Ohio announced the establishment of the Bob and Mary Spada Mental Illness Awareness NOW campaign. The campaign is designed to increase understanding about mental illness among Ohioans by building on NAMI Ohio's advocacy, education and support activities at the grassroots level. The campaign involves deploying a cadre of individuals with mental illness to make presentations to civic organizations throughout Ohio. The presentations will focus on:

- providing information about the realities of and myths surrounding mental illness;



Bob and Mary Spada

- increasing the visibility of successful recoveries;
- spreading the word about NAMI as a resource for education, support and advocacy; and
- mobilizing communities to get involved.

"It is difficult enough to watch a loved one struggle with the pain of mental illness. That pain is compounded when you witness the reaction by friends, employers and the community at large who don't understand the illness."

"It is difficult enough to watch a loved one struggle with the pain of mental illness. That pain is compounded when you witness the reaction by friends,

employers and the community at large who don't understand the illness. Our hope is that through the Mental Illness Awareness NOW campaign, Ohioans will come to view mental illness as no different from any other chronic illness such as diabetes or heart disease," said Senator Spada.

"Because of the stigma surrounding mental illness, thousands of Ohioans refuse to seek help when they experience the symptoms of a mental health disorder. This can lead to tragic outcomes, including suicide," said Jim Mauro, NAMI Ohio Executive Director. "Stigma is also largely responsible for our inability to secure appropriate funding at the state and local level

"NAMI Ohio is grateful for the generosity of Senator and Mrs. Spada in providing a challenge grant which will help get this campaign off the ground. Anyone interested in donating to the Bob and Mary Spada Mental Illness Awareness NOW campaign can contact NAMI Ohio at amiohio@amiohio.org.

to treat mental illness. We hope that this campaign will help call attention to the lack of access to mental health services in communities throughout Ohio."

"NAMI Ohio is grateful for the generosity of Senator and Mrs. Spada in providing a challenge grant which will help get this campaign off the ground. Anyone interested in donating to the Bob and Mary Spada Mental Illness Awareness NOW campaign can contact NAMI Ohio at amiohio@amiohio.org. One hundred percent of the funds donated will be used for this initiative.

Bob and Mary Spada became active in mental health advocacy after their son, James, was diagnosed with bipolar disorder. At that time, Mr. Spada was serving in the Ohio Senate and made the decision, with his son's approval, to be a spokesman on behalf of mental health insurance parity. Because of Senator Spada's leadership, and that of his former colleague in the House of Representatives Jon Peterson, S.B. 116, the Mental Health Insurance Parity Act was passed in 2006.

NAMI Ohio's 2009 Annual Holiday Party



NAMI Ohio extends our heartfelt thanks to Cincinnati home operators, Pat Parker and Marcella Hammer, and the residents of their homes for allowing us to share the "spirit of the season" with them.





NAMI Ohio Board Member Profile Rev. J. Donald Mosley

“Ring Master” Fighting for Rights of Individual’s with Mental Illness

By Paul Quinn

NAMI Ohio Board member Reverend J. Donald Mosley of Hamilton County is widely known as the religious community’s long-time outspoken advocate for the mentally ill. However, as a youngster, he was known as “the Ring Master” for his knowledge and passion for boxing.

“I have always enjoyed the fight game,” Mosley said. “People used to come to me with questions about boxing because they knew I had the answers.” The Reverend even considered entering into a boxing career himself. “I trained for a while. But I decided I didn’t like getting hit,” he said with a laugh.

Rev. Mosley was particularly fond of Cincinnati area boxer Ezzard Charles, who handed Joe Louis his only defeat. In fact, Mosley and his wife of 38 years, Glennie, named their only child Ezzard.

Rev. Mosley first became involved in working with the mentally ill in 1978 when Ohio closed its state hospitals, sending consumers into their respective communities without support. “A lot of ministers gathered to discuss how the church could assist consumers,” he said. Subsequently, I was asked to teach fellow ministers about the resources available for assisting the mentally ill.” Through those efforts, Mosley met NAMI Ohio leader Herb Reisenfeld and quickly became a member of NAMI’s Board of Directors. After serving two terms on NAMI Ohio’s Board and taking a year off (as required by NAMI’s bylaws), Mosley was recently elected to a new three-year term.



Rev. J. Donald Mosley

Mosley is proud he has helped the religious community understand and support parishioners coping with mental health issues. “Traditionally, ministers had very little training in mental health,” he said. “So, when they were approached by parishioners regarding depression and related concerns, the ministers struggled to provide solid answers. But, as a fellow minister, I have been able to get in to them and connect them with mental health information and resources within their communities.”

The Reverend’s efforts have been so successful that he was able to launch “Coping Sunday,” which, according to Mosley, is a spiritual service which “bonds consumers, families, professionals and the spiritual community.” In 2010, the 32nd annual Coping Sunday Service will again be held in Cincinnati. This event helps break down the stigma associated with mental illness and positions the religious community as partners in the healing process, according to Mosley.

“In 2010, the 32nd annual Coping Sunday Service will again be held in Cincinnati. This event helps break down the stigma associated with mental illness and positions the religious community as partners in the healing process, according to Mosley.”

Donald appreciates his involvement with NAMI Ohio and its affiliates. “I feel like a father raising a child,” he said. “It’s been rewarding to see the growth of NAMI and the people within the organization. Knowing I have a small hand in it makes me proud.”

Mosley said he has continually put off plans for retirement. “Every time I start to go out, someone pulls me back in,” he said, chuckling. “But I enjoy it so much, it doesn’t feel like work.” Lucky for NAMI Ohio, there is still plenty of fight left in the former “Ring Master”!



Ask the Child Psychiatrist

By Dr. Steven W. Jewell

Dear Dr. Jewell, We just learned that our 16-year-old son has schizophrenia. He has a psychiatrist and has been prescribed medication. We are

wondering what our family can do to support him and each other? What Else

Dear What Else,

It is good that you are asking this question so early in your son's course of his illness, because research suggests that comprehensive and intensive intervention implemented as soon as possible following a first episode of a psychotic illness has the potential to lead to a faster, more complete recovery, a better prognosis, and reduced likelihood of relapse.

While medication management is a very important part of the treatment of schizophrenia, there are other interventions that also have proven effectiveness in reducing its symptoms and disability. These include:

- Psychosocial interventions (such as the Wellness Management and Recovery program) designed to give individuals with schizophrenia information and skills about the management of their illness, and set

personal goals; and

- Family interventions (such as Family Psychoeducation) that aim to support the individual's progress towards goals and recovery by educating their family about the management of psychiatric illness, the prevention of relapses and hospitalizations, and improving their functioning; and
- Supported employment/education interventions, to help people with mental illnesses find and keep competitive employment within their communities, or return to school.

Seeking out such services for your son within your community, and advocating for the providers of such services to work together in an integrated manner, would both maximize his chances for recovery, and support you as well. You can learn more about the above interventions on the web at SAMHSA's National Mental Health Information Center (<http://mentalhealth.samhsa.gov/>), under the heading "Evidence-Based Practices".

Thanks for Asking,

Steven W. Jewell, M.D.

Medical Director; Child Guidance and Family Solutions



Ask the Doctor

By Dr. Mike Unger

Dear Dr. Unger, My daughter, who is in her mid 40's, has been involuntarily committed to a psychiatric hospital on many occasions over the past several years, yet she

still refuses to accept that she is ill. How can I help her to see the value of treatment, or is advocacy for an Assisted Outpatient Treatment law my only hope at this point? Desperate Dad

Dear Dad,

You ask a challenging question. Trying to convince her that she has mental illness usually doesn't work and can often make things more difficult. Enlist help from her psychiatrist and other treatment providers if she is willing to sign a release of information. I also

suggest attending NAMI meetings and speaking with other parents that share this dilemma. Wellness Management and Recovery (WMR) is a great program offered in some clinics that would be of help to your daughter. Perhaps your daughter would want a family member or trusted friend to be part of her recovery plan which is often very helpful.

The therapeutic alliance with the outpatient psychiatrist and providers is very important. Her psychiatrist/therapist/case manager can help by 1) asking her about her personal goals in life and where she wants to be in 6 months to 2 years. I'm assuming her goals don't involve repeat hospitalizations. Motivational interviewing can help you and the treatment professionals align with her point-of-view and personal goals.

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Ten Ways to Find Hope While Living with a Mental Illness

By Pat Quinn

I facilitate groups at the local psychiatric ward and I tend to get the same questions again and again. One of those questions is, "How can I find hope while living with a mental illness?" I answer this with the experience of having schizophrenia myself and an Associate's degree in Social Work.

1. **Have a dream.** For me, having a dream sometimes determines whether I can get out of bed in the morning. Many of the dreams I had before I was diagnosed with a major mental illness are gone, but I don't let this get me down. I have new dreams now. One of my dreams is to write an article about mental illness. Now that I have written this article, one of my dreams has been fulfilled. What are your dreams?
2. **Believe in God.** Some days I do not have the willpower to function. God helps me through these days. He also brings meaning to my life. He has assigned me a purpose in life that he has not assigned to any other person. Knowing God brings meaning to my suffering.
3. **Volunteer.** Sometimes volunteering gives me a reason to take a shower and put on nice clothes. When I have nowhere to go, I don't shower or get dressed, and this can lead to depression. Contact your local hospital, nursing home, etc. about volunteering.
4. **Have a mentor.** When I first became ill, I told myself that if I could find just one person who had recovered from mental illness that I could recover, too. I have many mentors now, including Dr. Fred Frese. He was very ill, and was confined in a psychiatric hospital. He recovered, and, can you believe it? He became the director of the psychology department of that same hospital! He is a real inspiration to me.
5. **Enjoy simple pleasures.** In the past, I had a lot of free time on my hands because I was too ill to work. Instead of letting this get me down, I made an effort to enjoy things such as eating a bowl of ice cream, watching TV, reading a good book, watching the sunrise, and visiting with a

friend (preferably a romantic friend!). I also enjoyed the fact that I wasn't overwhelmed or overstressed at work.

6. **Join a support group or go to a drop in center.** If you are lonely, this is an excellent way to meet people. I work at a Drop In Center and I promise, if you came here you would be unconditionally accepted. I imagine other drop in centers operate the same. I have also participated in several support groups including Alcoholics Anonymous and our Partial Hospitalization group. There are other less known support groups that you may want to consider such as Overeaters Anonymous, Battered Spouses Support Group, and Man to Man Support Group (for those with prostate cancer). If you look hard enough, you can find the support group that is right for you.
7. **Go to the library.** I love the library. In addition to books and magazines, you can use the internet; get CDs, DVDs, etc. And it's all free!
8. **Begin journaling.** This is a good way to help you sort out your feelings, and to see your problems from a different perspective. This is also a great way to remember good experiences.
9. **Participate in pet therapy.** At the drop in center where I work, we bring in dogs for the members to play with and call it "pet therapy." Pets can be a wonderful source of unconditional love. If you can't have a pet of your own, you may consider volunteering at an animal shelter.
10. **Participate in a Prayer group.** The people I have met in my prayer group are some of the nicest people I know. These people live by the golden rule, "to love others as you want to be loved." Also, going to prayer group gives me a feeling of belonging, and teaches me about God.

Life with a serious mental illness can still be full of hope. I experience hope on a daily basis - and you can too!

For information on programs in your area, go to:
<http://oacbha.org/about-oacbha/county-board-directory/>

FREE Mental Health Medication Hotline Helps Doctors Serve Patients

NAMI Ohio and Northeastern Ohio Universities of Medicine and Pharmacy (NEOUCOM) Best Practices in Schizophrenia Treatment (BeST) Center announced the creation of the Mental Health Medication Hotline. The purpose of the hotline is to improve care for patients with mental health disorders who are receiving care for the disorder by a primary care physician.

“Experts in psychiatric pharmaceuticals will be available to answer questions from primary care physicians during regular business hours Monday – Friday.”

NAMI Ohio has entered into an agreement with pharmacy practice faculty members from NEOUCOM and the BeST Center for a period of six months to provide primary care physicians with expertise about all psychiatric medications for their patients. Experts in psychiatric pharmaceuticals will be available to answer questions from primary care physicians during regular business hours Monday – Friday.

“NAMI Ohio appreciates and is grateful for the critical role that primary care physicians play in recognizing the signs of mental health disorders in their patients. With fewer and fewer resources available in our communities to meet the mental health needs of Ohioans, more and more patients are relying on their primary

“This is a wonderful opportunity for us to pilot a program that has the potential for improving the lives of hundreds, if not thousands, of Ohioans”

Jim Mauro, NAMI Ohio Executive Director.

“This is a wonderful opportunity for us to pilot a program that has the potential for improving the lives of hundreds, if not thousands, of Ohioans,” said Lon Herman, Director of the BeST Center. “It is also a practical first step toward realizing the benefits of integrating Ohio’s mental health and physical health systems.”

care physicians for their mental health care. We are excited to be able to offer these doctors a tool that will help improve the quality of care that they are able to provide to patients with mental health disorders,” said



Northeastern Ohio Universities
COLLEGES OF MEDICINE & PHARMACY
Best Practices in Schizophrenia
Treatment (BeST) Center

Mental Health Medication Hotline
1-800-216-3125

NAMI Ohio 614-224-2700
namiohio@namiohio.org

Feel free to cut this out and give it to your primary care physician.

Ohio’s CIT Video is Now Available



The Criminal Justice Coordinating Center of Excellence and the Northeastern Ohio Universities Colleges of Medicine and Pharmacy (NEOUCOM) have created a video which provides a terrific overview of Crisis Intervention Team (CIT) training and the excellent work that

is being done in communities throughout Ohio. Several statewide supporters of CIT are featured in the 15 minute video including Justice Evelyn Stratton, Department of Mental Health Director Sandra Stephenson, CJ CCoE Director Dr. Mark Munetz, and NAMI Ohio’s Executive Director Jim Mauro. If your community does not provide your law enforcement officers the opportunity to participate in CIT training, and you want to encourage them to do so, you are welcome to borrow a copy of the video to show to the stakeholders in your area who you believe needs to have a better understanding of the program. Just let us know by e-mailing us at amiohio@amiohio.org.

Parent Advocacy Connection Presentation to ODMH



From left to right Pam Harris, Yolanda Allen, Juanita Ray, Angela Schoepflin, Suzanne Robinson, and Bob Bielecki

Representatives from NAMI Ohio's Parent Advocacy Connection (PAC) Program before the Ohio Department of Mental Health's Transformation State Incentive Grant Peer Leads Committee. The underlying message of the presentation was that parents are the foremost experts on their children, and parent advocates can help, when needed, to ensure that the family's voice is heard in treatment team and other important meetings involving their child.

Strickland Administration Issues Draft Olmstead Plan: Feedback Requested

In February, the Strickland Administration circulated a draft document entitled, *Balancing and Beyond: A Vision for Community Services and Supports for Individuals with Disabilities*. The purpose of this document is to describe existing and future initiatives to offer people with disabilities greater choice in living arrangements and services that support independent living.

This document is in response to the 1999 United States Supreme Court decision in which the court held in *Olmstead v. L.C.* that the unnecessary segregation of individuals with disabilities in institutions may constitute discrimination based on disability. The court ruled that the Americans with Disabilities Act may require states to provide community-based services rather than institutional placements. In the 6-3 opinion, the court held that unjustified segregation in institutions is discrimination because: 1) it incorrectly presumes that people with disabilities are incapable or unworthy of participating in community life; and 2) confinement in an institution severely curtails everyday life activities, such as family relations, social contacts, work, educational advancement and cultural enrichment.

States are required to show their compliance by developing a plan to assure that individuals with disabilities are afforded options to live within the community. This document represents that plan. As mental health advocates, we are aware that access to housing options and supports for people with mental illness to live as independently as possible are in short supply. Since the Strickland Administration is currently accepting input on this DRAFT document, advocates have the opportunity to point this out as a part of this process.

Please take a moment to review the document and share with us any concerns or suggestions that you may have by e-mailing us at amiohio@amiohio.org or sending us your concerns in writing to 747 E. Broad Street, Columbus OH 43205. To view the draft: <http://www.odh.ohio.gov/landing/jackson/olmstead.aspx>. If you do not have access to the internet, and would like us to send you a copy of the report, please call us at 1-800-686-2646.

2010 Census: Participation is Critical

Every ten years, the United States conducts a count of the population known as the Census. It is mandated by the U.S. Constitution, it requires that everyone participate, and it protects all personal information shared. The one-page census form takes about 10 minutes to complete. It is mailed and distributed to everyone in March 2010, and must be completed and mailed back by Census Day, April 1, 2010.

The census determines the amount of federal funding states receive for services such as Head Start; Women, Infants and Children program; emergency food and shelter grants, programs for the elderly; Title One education grants, and hundreds of other programs we all depend on.

For every person not counted, Ohio could lose \$12,000 over the 10-year census cycle. With the economic challenges facing Ohio, we need to work toward a full and accurate count. Census numbers are also used by government and businesses in determining where to build schools, plan for public transit, and develop retail outlets. Finally, census data determine the number of members each state has in the U.S. House of Representatives. Ohio is in danger of losing up to two Congressional seats, reducing our representation from 18 to 16 in the U.S. House of Representatives.

For more information on the census, go to: www.census.ohio.gov

NIMH Offers Free Easy-to-Read Publications

The National Institute on Mental Health provides a host of publications that are available to the public for no charge. Many of the booklets are available in English and Spanish. Topics include:

- Anxiety Disorders Attention Deficit Hyperactivity Disorder (ADHD)
- Bipolar Disorder
- Bipolar Disorder in Children and Teens: A Parent's Guide
- Depression
- Eating Disorders

- Helping Children and Adolescents Cope with Violence and Disasters: What Parents Can Do
- Men and Depression
- Mental Health Medications
- Post-Traumatic Stress Disorder (PTSD)
- Schizophrenia
- Women and Depression: Discovering Hope

To view the complete list of booklets and fact sheets, and to order on line go to www.nimh.nih.gov. To order over the phone, call 1-866-615-6464.

Letter from the President Continued...

- If you could change one thing about how people think about mental illnesses, what would it be?
- What has been most helpful to you, your loved one and your family as you have worked to cope with mental health problems?

To find out who your state senator and state representative is, go to www.legislature.state.oh.us and

enter in your nine digit zip code or call your county board of elections. Each story that is shared gets us one step closer to raising the awareness of our lawmakers. Thank you so much for your efforts and please contact the NAMI Ohio Office at (614) 224-2700 if you need further assistance in your advocacy.

Ask the Doctor Continued...

This reduces contention. 2) Next, the idea of doing whatever is necessary to stay out of the hospital will help her reach her goals (does she want to live independently, work, have a family, live a "normal life", etc.). 3) the suggestion/recommendation of adhering to psychiatric medication and other outpatient treatments is made in the context of preventing relapse and helping her reach her goals.

If she is hospitalized again, some facilities will have clients participate in learning about their symptoms, signs of decompensation, etc; and then the clients write up their own relapse prevention plan before being discharged. You might want to ask about that.

When my clients have a history of many psychiatric hospitalizations but disagree when it comes to the suggestion that a mental illness is involved, they almost

never adhere to oral medications. I often suggest 2-4 week long-acting injectable medications (if indicated) depending on the individual symptoms. Once the medication is working for several weeks, their insight improves to a new baseline and they voluntarily start taking oral medications and begin to move toward their recovery goals. This is the most effective stage of treatment to talk about diagnosis, symptoms, etc. That's why timing and knowledge of treatment stages is essential. When a person develops insight to their condition, their judgment to remain healthy often follows automatically; not the other way around.

Sincerely yours,
Mike Unger MD
Medical Director
Southeast Inc.

Letter from the Executive Director Continued...

continue to be handled by the Medicaid Managed Care Plan. If you or someone you know is having difficulty accessing these medications, please let us know that, too. We may be able to help. You can contact us at amiohio@amiohio.org or 1-800-686-2646.

Also, if you have questions or concerns about your prescription coverage, you can contact the Medicaid Consumer Hotline at 1-800-324-8680 or TTY 1-800-292-3572. The Hotline is open: 7am-8pm Monday-Friday and 8am-5pm Saturday.

Wall of Honor

NAMI Ohio wishes to extend our gratitude to the following for their support during the last quarters. Donations of \$250 or more are recognized on the NAMI Ohio Wall of Honor in our office.

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Al and Heidi Cisan
Eaton Corporation
Jeff & Barb Ellison

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Marilyn Henke
Arlen & Rita Horton
Michael Kennedy

Mark & Ann Mayle
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Malcom & Ruth Ann Peel
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Tom & Anne Walker

Families that desire to remember the life of a loved one through a Memorial Gift to NAMI Ohio can request special cards that can be used by friends and family as a way to memorialize their loved one with a contribution to NAMI Ohio in lieu of flowers. For more information, please call us at 1-800-686-2646.

In Memoriam

In Memory of...

Gary Arnos
Diane Russell
Jane Elsass Barman
David & Mary Jane Elsass
Steve Barry
Barbara Barry
Patricia Brown
Margorie Brown
Glenn Cramer
Vivienne Cramer
Bob Henke
Marylin Henke
Joseph Hutchison
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Nancy Baum
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Nancy Draudt

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Jean Lutz
Gregory & Jayne Robertson
Thomas Sheetz
Sandra Smart
Edwin & Wilma Stafford
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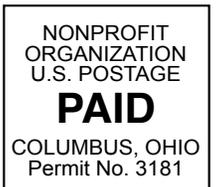
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Columbus, OH 43205



Ohio's Voice on Mental Illness

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Columbus, Ohio 43205

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or 1-800-686-2646

Email: amiohio@amiohio.org

Website: <http://www.namiohio.org>

NAMI Ohio Mission Statement

"To improve the quality of life,
ensure dignity and respect for
persons with serious mental illness,
and to support their families."