

## General Meeting

100 S. San Mateo Drive  
San Mateo  
Hendrickson Aud. / Mills Health Center  
Free evening parking in front

Wednesday, May 22

6:00 Meet with BHRS Director  
7:00 Program

### Spirituality Enhances Mental Health

William Kruse and Jairo Wilches  
*Spirituality Initiative Co-Directors*

Join us to hear about recent research at UM on Buddhists, Muslims, Jews, Catholics and Protestants, which found that **spirituality profoundly enhances mental health.**

Learn also about the Spirituality Initiative which is part of ODE and SMC BHRS. Bill and Jairo have been working with consumers, family members, clergy and clinicians to find ways to integrate spirituality into the treatment of SMC clients. Maureen Sinnott, NAMI board member, Psychologist and Franciscan nun, will show a brief NAMI DVD on Faith Communities Building Bridges of Hope, which shows ways we can encourage our faith communities to be more supportive of those with mental health issues and their families. We will be hearing from consumers about their faith development and spiritual journeys, sharing how spirituality has given them the motivation and courage to confront stigma and believe in a brighter future. Hear how NAMI and BHRS are working together to help all of us: consumers, families, and providers become more aware of how **SPIRITUALITY GENUINELY ENHANCES MENTAL HEALTH!**

*NAMI San Mateo County General Meetings are free and open to the public. We welcome all who support our mission to improve the quality of life for people with mental illnesses and their families.*

## March General Meeting

Our March 27th General Meeting started with refreshments, social time, and gathering of the NAMI community; welcoming those new and those returned. Thank you Moira Kavanaugh and Michele Endrina for the wonderful setup. Thanks to all who made the special effort to join us at the alternate location - it was very well attended!

Bob Cabaj, MD, the medical director from SMC BHRS, was at the meeting for informal conversation and discussion about what is happening with behavioral health in San Mateo County.

NAMI SMC Co-President Steve Robison called the meeting to order at 7:00 p.m. This month was our Annual Meeting during which San Mateo NAMI board officers and members were elected:

- Co-Presidents: Steve Robison & Jerry Thompson, RN
- Co-Vice Presidents: Sharon Roth & Juliana Fuerbringer
- Treasurer: Mike Stimson
- Secretary: Ruan Frenette
- Board members: Carol Goshu; Melinda Henning; Maureen Sinnott, Ph.D; Steve Way; Greg Wild
- Advisory Board: Margaret Taylor, Pat Way

Following the short annual meeting, Steve Robison introduced our guest speaker for the evening: Christopher Zubiate, the CEO of Psynergy Programs, Inc., [www.psynergy.org](http://www.psynergy.org). Chris spoke of the facility located in Morgan Hill, a residential mental health care center that is successfully assisting people to transition out of locked institutions into living in the community. Psynergy Program's approach focuses on total health, respect and recovery. Chris presented a short video emphasizing their unique equine therapy program. Part of their program includes clients gaining self-confidence by riding and caring for horses.

The good news is that starting this month, SMC BHRS initiated a services contract with Psynergy. NAMI San Mateo Board member Melinda Henning was the driving force behind bringing this new resource for our community.

Be a part of all that is going on. Come to the next meeting!



## NAMI Walks • Saturday, June 1

This 5K walk is held in Golden Gate Park and includes 9 Bay Area NAMI affiliates. It is a very inspiring day that helps raise funds and educate the public to eradicate the stigma associated with mental illness.

NAMI Walk SF Bay Area / [www.namiwalkSFbay.org](http://www.namiwalkSFbay.org) / 800-556-2401

- Register Now for the NAMI Walk!
- Sponsors are needed, start at \$250 - call our office if you have questions: 650-638-0800.
- Build your own Team or call our office and join one of the teams related to our affiliate.
- Sign yourself up, the kids, the dog, the neighbors...

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## NAMI Peer-to-Peer Education Class

Starts Wednesdays, April 3

A free 10-week class for people with mental health issues taught by people with mental health issues

"Learning to Live Well with What We've Got"

No cost - just a commitment to attend each class  
Call 650-638-0800 now to register (required)

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## The NAMIWalk Kick-Off Luncheon

Wednesday, April 17  
FAZ Restaurant, Pleasanton

Gather at NAMIWalk's All-Affiliate Consortium to welcome and honor our Sponsors, Team Captains, Community Leaders and all who are interested in learning more about how to be NAMIWalk leaders in our affiliates. The schedule is focused on getting you the information you need for a great NAMIWalk while you enjoy this free lunch. Be the first to see our 2013 brochures, logos, names of our Sponsors and hear inspiring stories. Call our office if you need more information, 650-638-0800.



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## Family Program Trainings

If you've attended one of our programs, please consider training to present it yourself! Training costs you nothing and requires you present at least 2 times...and is a highly rewarding experience (and the weekend of training is a productive retreat!). Trainings for NAMI programs are being held throughout California; the following are most local to our area. Please contact our office if you're interested in being trained for one of these programs - glad you're considering it! Call 650-628-0800.

**Family to Family Teacher Training**  
Elk Grove, CA (Sacramento County) May 31 - June 2

**Peer To Peer Trainings Spring 2013**  
Chico - May 17 - 19  
Campbell - June 22 - 23

**IOOV (In Our Own Voice) Spring 2013**  
Campbell - May 4 - 5  
Redding - May 18 - 19



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## Volunteer With NAMI!



Wednesday, April 10 • 6:30pm

Meetings alternate Wednesday and Thursday evenings, (almost) monthly

1650 Borel Place, Ste 130, San Mateo  
(use entrance on Borel Ave.)



**New Website Research and Writing** Join the website team creating a new website for NAMI SMC. We need people who can work on developing content. 1-2 people to research and update our community resources lists; 1-2 people to write and edit content describing our services and information. This is a project you can put on your resume.



**General Meetings** We need people to take care of small duties at our Wednesday night general meetings - a popular community builder and great way to connect with others struggling with mental health issues. Help with contacting speakers, meeting registration, food set up...all needed to create engaging, meaningful meetings, which are held every other month.



**NAMI Walk** on June 1 - join our NAMI Walk Committee. We are a team working on publicizing the event and seeking sponsors and walkers. We want to hold a dinner at a local restaurant as a special event! Help us do it. Contact the NAMI office at 650-638-0800 or call Juliana at 650-342-5849.

*Questions? Interested? Get on the mailing list!*  
Call Juliana at 650-342-5849 / julianafuer@gmail.com, or the NAMI office at 650-638-0800/namismc@sbcglobal.net.

**Show up and be a part of it all.  
No one need do any of this work alone!**

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## Donate To NAMI San Mateo

For many of us, NAMI is our favorite non-profit...nearest and dearest to our hearts...whether it's our classes, support groups, general meetings...or our growing community. Our members and donors are the financial lifeblood of NAMI SMC. Financial generosity from individuals like you is what enables us to offer our programs free of charge.

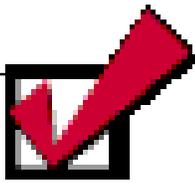
Go to our website at [www.namisanmateo.org](http://www.namisanmateo.org) and click on **DonateNow!**

**San Mateo County Crisis Center**  
650-579-0350

**1-800 Suicide (1-800-784-2433)**

**Chat Room for Teens**  
Open Monday-Thursday, 4:30pm to 9:30pm  
[www.onyourmind.net](http://www.onyourmind.net)

## Save The Date



- **Saturday May 18**  
**Car Wash/Raffle** for Annie's Sparkler's NAMIWalks Team, 11:00-3:00, 3218 Alpine Rd., Portola Valley
- **Saturday, June 1**  
**NAMI Walk 2013** - Lindley Meadow, Golden Gate Park.  
Information: 800-556-2401 or visit [namiwalkSFbay.org](http://namiwalkSFbay.org).
- **June 27-30**  
**NAMI National Convention** in San Antonio, TX  
[convention@nami.org](mailto:convention@nami.org)
- **August 16-17**  
**NAMI California Annual Conference** at the Airport Marriott Waterfront, 1800 Old Bayshore Highway, Burlingame. <http://www.namicalifornia.org/>

## MHSARC Meetings

**Wednesday, April 3 • 3:00 - 5:00pm**  
*(first Wednesday of every month)*

Time/locations vary, please check with 650-573-2544  
or [www.smchealth.org/MHSARC](http://www.smchealth.org/MHSARC)  
Health Services Building Room 100  
225 W. 37th Ave., San Mateo

**All meetings are open to the public**

**AGED-FOCUSED COMMITTEES:**  
225 37th Ave., Diamond Room, San Mateo

**Older Adult Services Committee • 10:30am - 12:00**

**Adult Services Committee • 1:30pm - 3:00**

**Children and Youth Services Committee • 4pm - 5:00**  
(2000 Alameda De Las Pulgas., Room 209)

## Tony Hoffman Awards Ceremony

**Wednesday May 1, 2013 • 4:00-5:00 p.m.**  
**Health Services Building**  
**225 37th Avenue Room 100, San Mateo**

The event will follow the Mental Health & Substance Abuse Recovery Commission Meeting from 3:00-4:00 p.m. We look forward to seeing you there. Applications for this prestigious award are taken until April 10; contact Chantae Rochester at (650) 573-2544 for more information.

## Fund "Laura's Law"

*Editorial On Mental Health, SF Chronicle 3/26/13*



Californians with seriously mentally ill family members rejoiced when voters passed the Mental Health Services Act, which created a robust stream of tax revenues for their loved ones' treatment. Eight years later, the funding is a huge success, but the spending has proved a bait-and-switch. The 1 percent tax on a millionaire's income is generating about \$1 billion a year, but instead of spending it on the seriously mentally ill, county agencies are spending it on the not seriously mentally ill.

To address this, California legislators have introduced four bills to clearly establish what voters were told in 2004 when they approved Proposition 63: that the revenues would fund existing mental health programs for the seriously ill. State Senate President Pro Tem Darrell Steinberg, D-Sacramento, Prop. 63's author, acknowledged the switch when he spoke with the Chronicle's editorial board last month about his bill to deal with the ambiguity between the act's intent and its implementation.

Instead of directing funds for treatment to keep individuals with mental illness from becoming more severely ill, the regulations directed the money to services to calm the anxious and to general wellness programs like yoga. In some cases, Prop. 63 funds actually were used to threaten lawsuits against counties that tried to use the funds for programs for the seriously mentally ill.

The rules also forbid spending funds on Laura's Law, which authorizes a court to order outpatient treatment for individuals with a history of mental illness. To date, only Nevada County (where Laura Wilcox and two others were killed by a seriously mentally ill man who had resisted his family's attempt to get him treatment) and Los Angeles County, which has a small program, have adopted Laura's Law.

The impediment is the requirement for each county board of supervisors to adopt the law. Sen. Leland Yee, D-San Francisco, has introduced a bill to drop the need for that vote.

Factions of the mental health community oppose Laura's Law as an incursion on civil rights, arguing that Prop. 63 money should be devoted to the many waiting for mental health treatment. "Is there a reason to put people who do not want services ahead of people who do?" said Eduardo Vega, the executive director of the Mental Health Association of San Francisco.

The mentally ill who seek treatment are not less worthy but, in the battle for resources, their needs may be less acute. The law should prioritize the interests of the seriously mentally ill and the public safety.

### Legislation

Four new bills for the seriously mentally ill:

- SB585 (Steinberg/Correa) clarifies that Mental Health Services Act (Prop. 63) funds may be used to implement Laura's Law.
- SB664 (Yee/Wolk) states that counties may implement Laura's Law without a special vote by supervisors.
- AB1265 (Conway) allows individuals under Laura's Law to receive treatment for up to one year (instead of the previous six-month maximum).
- AB1367 (Mansoor) Similar to SB585.



*In Condolence*

**Tish Showen**

It is with much sadness that we acknowledge the passing of Tish Showen. Tish was very active with NAMI-SMC, always a cheerful, gentle, giving lady, who will be missed by all who knew her.

Tish Showen died on March 7, two days after her 64th birthday. She suffered with cancer for several years. Being a consumer of mental health services, Tish was empathetic to the population served. Tish taught the NAMI Peer to Peer class and went on several NAMI Walks.

“Tish showed a special graciousness and courage - always a smile, hello and a hug.” —*Calvin S.*

“Tish was in the first NAMI SMC Peer to Peer training at the old Client Network. She introduced me and my son Douglas into the Golden Gate Clowns. Doug and I walked in the 4th of July parade in RWC for three years and the NAMI walk as clowns. We couldn't have found this wonderful place without Tish who was Tishie the Clown. She was one in a million. Her boyfriend Bob has been a Hospice volunteer for 13 years. Now I want to volunteer there as well. I'll do it in memory of Tish. Her light will guide me.”—*Diane W.*

“Through the many years I worked with Tish, she never lost her compassion or generosity for others, despite the many challenges she faced.”—*Kim N.*

The Celebration of Life for Tish is scheduled for April 20 at 2:00 pm at Congregational Church of San Mateo, 225 Tilton Avenue, San Mateo. Donations to NAMI San Mateo Ccounty in honor of Tish can be sent to 1650 Borel Place, Ste 130, San Mateo, CA 94402 (650-638-0800)

**Warning for Kaiser Therapy Services**

*[Many NAMI families as well as others in our community are Kaiser members and expect to receive timely services. Kaiser addresses the long wait for members seeking mental health care after State regulators issue warning. Excerpt here, see source for full article information.]*

State regulators reprimanded Kaiser Permanente for mismanaging its mental health services, making patients wait excessively long periods between appointments and offering members inaccurate information that may have dissuaded them from receiving long-term individual therapy...

She said department investigators will do a follow-up survey within six months, and could eventually impose a range of penalties and order specific changes.

The report...was part of a routine survey of mental and physical health services conducted every three years, confirmed many of the concerns made in an official complaint to the department by the National Union of Healthcare Workers in November 2011.

"We feel very validated by what the regulators have found," said Clem Papazian, a licensed clinical social worker at Kaiser Oakland, who also serves as a chapter officer with the union. Papazian blamed inadequate staffing and other systemic problems for making patients wait for appointments beyond the period allowable by state law, which varies but is 10 business days for nonurgent appointments. "They need to improve their wait times, and they need to staff appropriately to deliver the services they're mandated to deliver," he said.

Kaiser acknowledged in a letter to its members...that some members have had to wait longer than 14 days for their first nonurgent appointment and that wait times and data tracking must improve. Since the beginning of 2012, Kaiser has increased the number of new appointments in many locations, the letter said. Kaiser officials also said the HMO has updated its educational materials, improved the way it tracks appointments and is working with the National Union of Healthcare Workers on ways to shorten wait times for patients.

—*Victoria Colliver is a San Francisco Chronicle staff writer. E-mail: vcolliver@sfchronicle.com*

**2013 NAMI CA Conference**

**August 16th & 17th  
San Francisco Marriott**

**1800 Old Bayshore Highway, Burlingame**



Register by June 24th for the Early Bird Discount. Come join us for an inspiring, educational and enlightening conference! See registration info and details at [www.namicalifornia.org](http://www.namicalifornia.org).

**NAMI National Convention 2013**

**June 27-30**

**Grand Hyatt Hotel in San Antonio, Texas**

The convention theme, “Together We Can Make a Difference,” highlights this year’s focus on developing effective programs and resources to increase resiliency and advance recovery. May 31 is the deadline for early bird registration. For more information about the convention and registration, go to [www.nami.org/convention](http://www.nami.org/convention).

**Jail Chaplain**

Spiritual counseling for incarcerated persons - Marty at St. Vincent de Paul Society - 650-366-9847.

**Need help with SSI issues?**  
Call Joe Hennen at 650 802-6578

## **NAMI-SMC Support Group Meetings (call 650-638-0800 for more information)**

**Cordilleras MHR Center Family Support Meeting**, 200 Edmonds Road, Redwood City, 367-1890

1ST MONDAYS, 6:30-8pm (2ND Monday if 1st Monday of the month is a holiday).

Penney Mitchell, NAMI SMC facilitator; Crystal Hutchinson, MFT; Leah Ladouceur, BSW.

**Parents of Youth Support Meeting**, NAMI SMC, 1650 Borel Pl, Ste 130, San Mateo, 638-0800.

2ND MONDAYS, 7-8:30pm. Kristy Manuel and Ginny Traub, facilitators.

**San Mateo Medical Center** for family members.

1ST & 3RD TUESDAYS, 6:30-8pm. 222 W. 39th Ave. & Edison, Board Room (main entrance elevator to 2nd floor, left to the end of the hall). Terry & Polly Flinn, Juliana Fuerbringer and Rosemary Field, NAMI SMC facilitators.

**South County Support Meeting** for family members, Mental Health Clinic, 802 Brewster St., Redwood City, 363-4111.

2ND TUESDAYS, 6-7:30pm. Pat Way, NAMI SMC facilitator; Liz Downard RN, MSN.

**Coastside Support Meeting** for family members, Coastside MH Cntr, 225 S. Cabrillo Hwy, #200A, Half Moon Bay, 726-6369.

7-8:30pm. Marie Koerper, NAMI SMC facilitator; Mary Em Wallace, RN, NP, MFT, Ph.D.

**Jewish Family & Children's Services**, family and friends are welcome. 200 Channing Ave., Palo Alto, 688-3097.

4TH TUESDAYS, 7:00pm. Sharon & Ron Roth, NAMI SMC facilitators; Laurel Woodard, LMFT.

**Spanish-Speaking Support Group** for family members. South County BHRS, 802 Brewster Ave, Redwood City.

2ND TUESDAYS, 6-7:30pm. Contact Claudia Saggese at 573-2189.

### **Other Meetings**

**Asian-Language Family Support Groups**

THURSDAYS, 6-7:30 pm, Cantonese/Mandarin. 1950 Alameda de las Pulgas (650) 261-3701 or (650) 573-3686.

**Burlingame Support Group** for family members and people living with a mental illness. Info: Maureen 415-420-5097

THURSDAYS through May 9, 7-9pm, Peninsula Temple Shalom, 1655 Sebastian Drive, Room 11, Burlingame

**Coastside Dual Diagnosis Group**, development for clients in all stages of recovery.

THURSDAYS, 4-5pm. 225 S. Cabrillo Hwy #200A, Half Moon Bay. 726-6369 for information.

**Consumer Support Groups**, Heart and Soul, San Mateo. Call 650-343-8760.

**DBSA Mood Disorder Support Group** for persons with uni- and bi-polar, depression, or anxiety.

- WEDNESDAYS, promptly 6:30-8:30 pm. Contact: DBSAPaloAlto@gmail.com. Supporters may attend with their consumer. VA Hospital, 3801 Miranda Ave, Hosp Bldg 101, Room A2-200, Palo Alto.

- TUESDAYS, 7-9pm College Heights Church, San Mateo 1150 W. Hillsdale Blvd. Families welcome. Fred Wright, 299-8880.

**Dual Diagnosis Group for Consumers**, no charge.

MONDAYS, 2:30 pm. The Source, 500 A Second Ave., San Mateo. Call 650-343-8760 for more information.

**Eating Disorders Support Group** for parents and loved ones. Contact: 408-559-5593 or info@edrcsv.org

2ND and 4TH SATURDAYS, 9:30-11am. El Camino Hospital, 2500 Grant Rd, Mountain View, New building, Conf. Rm A

**Eating Disorders Support Group** for family & friends of loved ones. Visit [www.edrcsv.org](http://www.edrcsv.org) or call Kira Olson at 408-356-1212.

1ST and 3RD SATURDAYS, 9:30-11am Mills-Peninsula Hosp., Rm 4104, 100 S. San Mateo Drive

**Hoarding Education Group** for significant distress with clutter. Contact hoarderdoctor@gmail.com or 650-799-3172

1ST and 3RD THURSDAYS, 5:30 - 6:15pm. Mills Health Center, Room 4104, 100 S. San Mateo Dr. \$5 donation requested.

**Hoarders' Support Group** for persons with a history of extreme hoarding and chronic disorganization.

2 THURSDAYS a month. To register or to get more information call (650) 343-4380.

**H.E.L.P. for those coping with a mental illness and/or those in a supporting role**, Menlo Park Pres., 950 Santa Cruz Ave.

THURSDAYS, 6:00pm optional dinner; 6:30-7:30 program, 7:30-8:30 prayer. Garden Court. Contact Jane at 650-464-9033.

**HOPE (Hope, Offering, Prayer and Education)**, for those with mental illness and/or in supporting roles.

1ST and 3RD TUESDAYS, 6:30pm, First Pres Church, 1500 Easton Dr., Burlingame. Call 355-5352 or 347-9268 for info.

**Japanese Education & Support Group**, call (415) 474-7310 for information.

**Jewish Support Group**, for those with mental illness and families and friends, Beit Kehillah, 26790 Arastradero Rd., Los Altos

2ND WEDNESDAYS, 6:15-8:30pm. For info, contact Carol Irwin (408)858-1372.

**Korean Support Group**, a family/consumer group. Info: Kyo, 408-253-9733

4TH TUESDAYS, 6:30-8:30pm. Full Gospel Mission Church, 20920 McClellan Rd. (opp. De Anza College), Cupertino

**North County Support Group** for clients, family and friends.

2ND and 4TH THURSDAYS, 5:45-7pm, 375 89th Street, Community Room, Daly City. More info: 650-301-8650.

**Obsessive-Compulsive Foundation of SF Bay Area**, information: 415-273-7273; [www.ocd-bayarea.com](http://www.ocd-bayarea.com).

3RD SATURDAY, 1:30-3:30pm, Seton Medical Center, 1900 Sullivan Ave., 2nd Fl. Conf room near cafeteria, Daly City.

**Telecare**, for family and friends of residents. 855 Veterans Blvd, Redwood City, 817-9070.

2ND WEDNESDAYS, 5:30-7pm.

**Women Living With Their Own Mental Illness**, Redwood City - *sliding scale fees apply for this meeting.*

MONDAYS, 6:30-8 pm. Contact Deborah at 363-0249, x111.

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## What Kind Of Worrier Are You?

*Anxiety comes in many forms. It may be constant or fleeting, uncomfortably acute or very broad. Here, we break down the major variations, courtesy of the experts at the National Institute of Mental Health.*

- If you're one of 6.8 MILLION AMERICANS who is currently dealing with generalized anxiety disorder,  
You're feeling: Worried about everything and nothing, all the time; fatigued; and frustrated.
- If you're one of 15 MILLION AMERICANS who have social phobia,  
You're feeling: Extremely self-conscious in social situations, always worried that others are watching and judging you.
- If you're one of 2.2 MILLION AMERICANS who is plagued by obsessive-compulsive disorder,  
You're feeling: Compelled to complete certain rituals and check up on circumstances, like a locked door; intensely afraid of germs and dirt; the need to wash your hands over and over.
- If you're one of 7.7 MILLION AMERICANS who suffers from post-traumatic stress disorder (PTSD),  
You're feeling: On edge and hypervigilant for no reason; irritable; isolated or emotionally numb; unable to concentrate due to pervasive and frightening flashbacks and memories.
- If you're one of 6 MILLION AMERICANS who have panic disorder,  
You're feeling: Terrified about when your next panic attack will occur and afraid to return to the spot of your last one. Twice as many women as men are affected by this disorder; about one-third develop agoraphobia, or a fear of being in a place where escape might be difficult.

### Non-Med Coping Tips

10 tips to minimize your stress naturally, from the Anxiety Disorders Association of America

1. Step back from the problem. Find another activity that helps you relax.
2. Don't skip meals. Have snacks on hand to make sure your blood sugar is stable. The brain uses more sugar than any other organ, and fluctuating blood-sugar levels translate to an unbalanced mental state.
3. Sleep as much as you can. Your body needs more rest when it's stressed, as reacting to anxious feelings eats up energy, and sleep is the body's natural means of restoring that energy.
4. Count to 10 slowly. Repeat.
5. Accept that you can't control everything.
6. Be OK with your best, even if it's not perfect.
7. Seek out humor, and let yourself laugh.
8. Get involved in your community. Find a support network.
9. Write in a journal when you're feeling anxious, and look for patterns.
10. Talk with your family and friends. Don't keep it inside.

—Source: <http://www.naturalsolutionsmag.com/anxiety/no-worries>

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## Entry on Mental Illness Added to AP Stylebook

By Bob Carolla, NAMI Director of Media Relations

For years, NAMI has worked to have the news media abandon inaccurate, careless, or stigmatizing language or practices in reporting on mental illness. Finally, the Associated Press has included rules on mental illness in the new edition of the AP Stylebook, the bible used throughout the industry.

In other words, the mental health community has won a huge victory—a seismic shift in the terrain of popular culture. If necessary, mental health advocates, looking forward, can cite the AP Stylebook as an authority in getting wayward editors and reporters to change their way in how they report about mental illness.

Founded in 1846, AP is a global news network whose reporting is seen or heard by more than half the world's population. The new rules include:

- Mental illness is a general condition. Specific disorders are types of mental illness and should be used whenever possible
- Do not use derogatory terms, such as insane, crazy/crazed, nuts or deranged, unless they are part of a quotation that is essential to the story.
- Wherever possible, rely on people with mental illness to talk about their own diagnoses.
- Avoid using mental health terms to describe non-health issues. Don't say that an awards show, for example, was schizophrenic.
- Do not assume that mental illness is a factor in a violent crime, and verify statements to that effect. A past history of mental illness is not necessarily a reliable indicator. Studies have shown that the vast majority of people with mental illness are not violent, and experts say most people who are violent do not suffer from mental illness.

Please send a message of thanks to AP at [info@ap.org](mailto:info@ap.org). Please share the new rules with editors and reporters in your community. Please also review the rules carefully and apply them in anything you write!

—Source: [http://www.nami.org/Template.cfm?Section=Top\\_Story&template=/contentmanagement/contentdisplay.cfm&ContentID=151757](http://www.nami.org/Template.cfm?Section=Top_Story&template=/contentmanagement/contentdisplay.cfm&ContentID=151757)

Visit <http://www.namicalifornia.org/> to get the latest on legislative activity.  
*We appreciate your interest in advocacy!*

**BHRS contacts:** Claudia Saggese, Family Liaison (habla Español) 573-2189 & Suzanne Aubry, Dir. Family Service and Support, 573-2673

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## Same Genetic Basis Found in 5 Types of Mental Disorders

By Gina Kolata, *New York Times*, February 28, 2013

### SF Chronicle

*Mental illness link: The largest genetic study of mental illnesses to date finds five major disorders may not look much alike but they share some gene-based risks. The disorders - autism, attention deficit-hyperactivity disorder or ADHD, bipolar disorder, major depressive disorder and schizophrenia - are considered distinct problems. But findings published in The Lancet on Wednesday suggest they're related, said Dr. Jordan Smoller of Massachusetts General Hospital, a lead researchers for the international study.*

The psychiatric illnesses seem very different - schizophrenia, bipolar disorder, autism, major depression and attention deficit hyperactivity disorder. Yet they share several genetic glitches that can nudge the brain along a path to mental illness, researchers report. Which disease, if any, develops is thought to depend on other genetic or environmental factors.

Their study, published online Wednesday in the *Lancet*, was based on an examination of genetic data from more than 60,000 people worldwide. Its authors say it is the largest genetic study yet of psychiatric disorders. The findings strengthen an emerging view of mental illness that aims to make diagnoses based on the genetic aberrations underlying diseases instead of on the disease symptoms.

Two of the aberrations discovered in the new study were in genes used in a major signaling system in the brain, giving clues to processes that might go awry and suggestions of how to treat the diseases.

"What we identified here is probably just the tip of an iceberg," said Dr. Jordan Smoller, lead author of the paper and a professor of psychiatry at Harvard Medical School and Massachusetts General Hospital. "As these studies grow we expect to find additional genes that might overlap."

The new study does not mean that the genetics of psychiatric disorders are simple. Researchers say there seem to be hundreds of genes involved and the gene variations discovered in the new study confer only a small risk of psychiatric disease.

Steven McCarroll, director of genetics for the Stanley Center for Psychiatric Research at the Broad Institute of Harvard and M.I.T., said it was significant that the researchers had found common genetic factors that pointed to a specific signaling system.

"It is very important that these were not just random hits on the dartboard of the genome," said Dr. McCarroll, who was not involved in the new study.

The work began in 2007 when a large group of researchers began investigating genetic data generated by studies in 19 countries and including 33,332 people with psychiatric illnesses and 27,888 people free of the illnesses for comparison. The

researchers studied scans of people's DNA, looking for variations in any of several million places along the long stretch of genetic material containing three billion DNA letters. The question: Did people with psychiatric illnesses tend to have a distinctive DNA pattern in any of those locations?

Researchers had already seen some clues of overlapping genetic effects in identical twins. One twin might have schizophrenia while the other had bipolar disorder. About six years ago, around the time the new study began, researchers had examined the genes of a few rare families in which psychiatric disorders seemed especially prevalent. They found a few unusual disruptions of chromosomes that were linked to psychiatric illnesses. But what surprised them was that while one person with the aberration might get one disorder, a relative with the same mutation got a different one.

Jonathan Sebat, chief of the Beyster Center for Molecular Genomics of Neuropsychiatric Diseases at the University of California, San Diego, and one of the discoverers of this effect, said that work on these rare genetic aberrations had opened his eyes. "Two different diagnoses can have the same genetic risk factor," he said.

In fact, the new paper reports, distinguishing psychiatric diseases by their symptoms has long been difficult. Autism, for example, was once called childhood schizophrenia. It was not until the 1970s that autism was distinguished as a separate disorder.

But Dr. Sebat, who did not work on the new study, said that until now it was not clear whether the rare families he and others had studied were an exception or whether they were pointing to a rule about multiple disorders arising from a single genetic glitch.

"No one had systematically looked at the common variations," in DNA, he said. "We didn't know if this was particularly true for rare mutations or if it would be true for all genetic risk." The new study, he said, "shows all genetic risk is of this nature."

The new study found four DNA regions that conferred a small risk of psychiatric disorders. For two of them, it is not clear what genes are involved or what they do, Dr. Smoller said. The other two, though, involve genes that are part of calcium channels, which are used when neurons send signals in the brain.

"The calcium channel findings suggest that perhaps - and this is a big if - treatments to affect calcium channel functioning might have effects across a range of disorders," Dr. Smoller said.

There are drugs on the market that block calcium channels - they are used to treat high blood pressure - and researchers had already postulated that they might be useful for bipolar disorder even before the current findings.

One investigator, Dr. Roy Perlis of Massachusetts General Hospital, just completed a small study of a calcium channel blocker in 10 people with bipolar disorder and is about to expand it to a large randomized clinical trial. He also wants to study the drug in people with schizophrenia, in light of the new findings. He cautions, though, that people should not rush out to take a calcium channel blocker on their own.

"We need to be sure it is safe and we need to be sure it works," Dr. Perlis said.

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## **My Magic Pill**

*By Sabirah Mustafa March 4, 2013*

*This piece was done in collaboration with the What's Your Story? Project of KQED's California Report, [www.californiareport.org](http://www.californiareport.org)*

I used to wish for a magic pill what would enable me to swallow away my problems so I could successfully navigate my unfulfilled life. But when I found it, it wasn't in any pharmacy.

For many years I suffered from trauma and abuse, but I saw them as symptoms of a soul struggling to find answers in a question-complicated life. I wasn't necessarily searching for easy solutions, just a way to cope with it all.

When my doctor became aware of the overwhelming helplessness and sadness I felt, he prescribed medication he thought would help. But the debilitating side-effects were terrible.

My environment appeared apart and distant from me. My mind and body felt out of synch with how I moved and spoke, which made me feel awkward and self-conscious.

Joy, anger, sympathy and other emotions non-medicated people experience routinely were lost on me. I began to doubt not just the meds' function but also their purpose.

When I complained about the debilitating side-effects, my medication were adjusted, but the adjustments would just transform one problem into another.

Roller coaster treatment finally reached a conclusion one day, when I saw my primary physician for chest pain and difficulty breathing. "Lets talk," he said.

He performed his routine check of my blood pressure and temperature, but he also listened as I described my personal and workplace challenges. My physical symptoms, he determined, were due to not managing my stress well.

I was feeling overwhelmed at work and wasn't communicating well with my boss. My doctor suggested some ideas around communicating better, streamlining my workload, even considering a new job. Most of his suggestions I had already tried unsuccessfully. But he didn't give up. We dug deeper. We spent about an hour going over each obstacle, including my complicated personal life.

His prescription and referral tablet never left his pocket.

Instead he spoke to me as a person who understood human challenges, without judging me.

It was difficult working through my issues without medication as a crutch. I wanted to just let myself off the hook and let my doctor solve all my problems for me, but it didn't work that way this time, I had to come up with my own plan, tackling each problem until I could choose a solution I felt comfortable committing to.

I had to become the boss of my own life, a responsibility I had given to medication.

Confronting problems is not without uncomfortable side-effects, too, I learned, like fear and worry, and like my medication, I had to adjust to the uncomfortable side-effects of confronting my problems, but the benefit of being my own boss had surely outweighed the negative.

I now have a personal prescription for my magic pill that I wrote for myself: "Life is a drama. You write the script."

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