

2015 Annual NAMI Conference

Friday August 21, 2015

The first session I attended was under the Criminal Justice Track.
CIT and the Community: Partnerships, Responsibility, and "MORE"
(Major Sam Cochran—CIT Coordinator and Trainer)

Key Points:

1. CIT began in Memphis TN.
2. CIT is not just training
3. CIT is not a law enforcement program it is a Community Program
4. The hours of training don't make a CIT officer good...a Change of heart through compassion and making it PERSONAL.

Talked about the development of the male brain, the need for sufficient CIT officers on each shift as first responders, needs to be a type of "promotion" of those officers with a kind heart who WANT to be in the position, and CIT officers must be leaders.

CIT officers also need to help change the cultural image of Mental Illness.

PART 2:

Sac. County Judge Brown
Bridging the Criminal Justice & Treatment Divide
Mental Health Court

Key Points:

1. Duration 12-18 months
2. Rewarded for good behavior/ Sanctions for undesirable behavior
3. New infractions does not mean "kicked out" but could mean longer sentence time.
4. Graduation and all the excitement
5. 23% CA inmates have Mental illness and about 20% of Sacramento inmates
6. MHC began in CA 1990 Sacramento 2007.
7. Can't be in Mental Health Court if crime involves weapons, sex offenders, or

violence, or some criminal threats.

8. Must have severe mental illness and be documented.

9. Must have a case worker in the system.

Talked about co-occurring disorders, new Co-occurring Mental Health Court which Sacramento got a 15 million dollar grant to begin the new system, Voluntary program with a Problem Solving Goal.

Mentioned that it is Multidisciplinary approach with intensive case management. There are rules for the program.

Sacramento has 90 or so MHC participants. Now better screening and the DA can add exceptions into the program.

Part 3:

Honest, Open, and Proud program (HOPp)

Is a program that has a workbook and three 2 hour lesson. It is usually gone in groups for four to eight people.

The three lessons include:

1. Considering the Pros and Cons of Disclosing:

My identity and mental illness.

Secrets are part of life.

Weighing the costs and benefits of disclosing.

2. Different ways to Disclose

Five ways to come out.

Testing a person for disclosure.

How might others respond to my disclosure?

3. Telling your Story:

How to tell a personally meaningful story.

Who are peers that might help me with coming out?

Review how telling my story felt.

Putting it all together to move forward.

I did the first part of lesson one and it was quite amazing to see how much self stigma the other participants had.

The program does not promote or deter anyone from choosing to come out that they struggle with Mental Illness.

Part 4

Mental Health 101: IOOV

Melen Vue and Veronica Delgado

Key Points:

- 1. Nine parents started in 1977 now have 62 Affiliates and about 19,000 members**
- 2. It is a state wide diversity program that hopes to reach out to cultural communities and reduce the stigma of Mental Illness.**
- 3. Similar to In Our Own Voice (IOOV) program using a more culturally diverse video and slightly different topics.**
- 4. Five communities Latino, LGBTQ, Native American, Asian/Pacific Islanders, African American, are the target audience.**
- 5. Plan to translate video into a variety of languages.**
- 6. 2 ½ year project so far.**

Things in common to IOOV:

Struggles, causes, importance of support, challenges to access mental health care, has a variety of ages, Addresses stigma directly.

Mental Health 101 is in the Pilot stage and is complete in English and Spanish.

August 22, 2015

Interesting facts from August 22 opening remarks:

1. 50% of all people will experience a mental health disorder within their lifetime.
2. It takes approximately 11 years from the time of symptoms until a person receives help for their mental illness.
3. 6 out of 10 people do not receive proper health services for their needs.
4. 75% of people who go to a first appointment for help for their mental illness will never return for their 2nd appointment.

Patrick Corrigan

He has written about 15 books on Mental Health and has been a NAMI member for 25 years.

Corrigan was the keynote speaker

Sigmund Freud developed Psychoanalytical therapy but it can be dangerous to those individuals who have Schizophrenia or Schizo-affective disorders. Cognitive therapy works much better and is research proven.

Patrick Corrigan gave example of dignitaries who tried to help but actually did the opposite for keeping people from being open and unashamed.

El. Bill Clinton "Don't ask, Don't tell." promoted shame

Pope "We should focus on the poor and the weak." He includes those of color, mentally ill, etc. as less important.

Also gave cartoon, movie and television show examples that portray the mentally ill as violent. Stigma has INCREASED due to the media coverage.

Corrigan gave examples of stereotypes: (Irish people are drunks who beat their wives)

Prejudice: (agree with stereotypes)

Discrimination: (take action against them)

Erasing stigma is not enough!!

1. Public must accept recovery
2. Mentally ill people should have goals and services to achieve those goals.
3. Need reasonable accommodations in the work place.

Changing the word does not stop Stigma!!

Educating Stigma away only works for those who have a mental diagnosis. Does nothing for those who have not experienced it.

Example:

**D.A.R.E. (Drug Abuse Resistance Program) Actually increased drug use
Psycho Donuts are crazy good! Donuts in straight jackets, or all bloody looking
etc.**

Even educated people who understand it is a Brain Disorder still do not accept it.

**The best way to eliminate stigma is through CONTACT
People respond better in overall attitude and behavior**

Presentations from lived experience is the best. And by using the proper people for the proper audience. Example Credibility: Each branch of the military talks to their own.

COMING OUT REDUCES STIGMA

**coming out when possible to as many people where ever you are.
Which goes back to HONEST, OPEN, and PROUD.**

**Daniel Lamm
Sacramento CHP**

Explained how the CHP is like a visitor in each county and has no special teams

CHP are trained in CIT but not with other law enforcement. They do their own training.

Q and A ask a psychiatrist

Dopamine is too LOW in individuals who experience Parkinson's and gets a lot of exposure for this terrible disability.

Dopamine is too HIGH in individuals they become Schizophrenic and are not treated with the same compassion.

