

The Key Update

The free monthly e-newsletter of the National Mental Health Consumers' Self-Help Clearinghouse

Volume 1 No. 12 May 2005

<http://www.mhselfhelp.org>

The Key Update Volume 1 No. 12 – May 23, 2005

Special Announcements. . .

Joseph Rogers Receives Heinz Award

Joseph A. Rogers, President and CEO of the Mental Health Association of Southeastern Pennsylvania and Executive Director of the National Mental Health Consumers' Self-Help Clearinghouse, has been chosen to receive the 11th annual Heinz Award for the Human Condition, one of the largest individual achievement prizes in the world. Rogers, who has experienced homelessness and repeated hospitalizations, "is among five distinguished Americans selected to receive the \$250,000 awards, presented in five categories by the Heinz Family Foundation," according to a press release distributed by the Foundation.

"For close to a quarter-century, Joseph Rogers has been a front-line crusader in the struggle to reform the delivery of mental health services, first as a consumer and later as a visionary and voluble leader," said Teresa Heinz Kerry, who chairs the Heinz Family Foundation. "He has not only shattered stereotypes about our attitudes toward those who require mental health care, but he has advanced a sea change in thinking about the role consumers can and should play in seeking such care. His life's work is one of courage and inspiration, which has brought hope to countless Americans, and we are most pleased to honor him with the Heinz Award for the Human Condition."

The awards will be presented at a private ceremony in Washington on May 24. More information is available at the following link:

<<http://www.heinzawards.net/articleDetail.asp?articleID=181>>

Source: Heinz Family Foundation press release

The National Mental Health Consumers' Self-Help Clearinghouse Launches Directory of Consumer-Driven Services.

The National Mental Health Consumers' Self-Help Clearinghouse is proud to announce the launch of the new Directory of Consumer-Driven Services (CDS) at <<http://www.cdsdirectory.org>>. The purpose of the Directory is to provide consumers, researchers, administrators and service-providers with a central resource for information on national and local consumer-driven programs. The current version of the CDS Directory features organizations by program type and name that have been identified by

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the Clearinghouse as leaders in the field. Phase II of the site will include a larger, searchable database of programs, by location, size and other descriptive characteristics. Alongside the CDS Directory site, the newly redesigned Clearinghouse website features intuitive visual navigation, easier-to-read text, updated resources and a newly designed Self-Advocacy Training curriculum. Bookmark <<http://www.mhselfhelp.org>> for regular visits.

Oregon Advocate Honored for Establishing SAFE Haven for People with Mental Illnesses

R Drake Ewbank has been honored by an independent panel of national mental health leaders with the 2005 Welcome Back Award for community service for his work with SAFE, Inc., a Springfield, Oregon, program where people with depression and other mental illnesses rediscover the strengths and the self-esteem needed to achieve recovery. Ewbank is one of six individuals who will be honored at the seventh annual Welcome Back Awards ceremony on May 21, in Atlanta. Eli Lilly and Company sponsors the national awards program, now in its seventh year; it recognizes outstanding individuals who make a difference in "the depression community." In addition to the award, a \$10,000 contribution from Lilly will be donated to SAFE, Inc., on Ewbank's behalf.

Source: PRNewswire

Mental Health Treatment and Services...

CONSUMER ALERT! U.S. Warns of Injuries from Implanted Stimulators

U.S. regulators have warned that people with implanted neurological stimulators may risk comas, serious injury or death if they undergo Magnetic Resonance Imaging (MRI) scans. The Food and Drug Administration has received several reports of comas and permanent neurological impairment in people with stimulators who underwent MRIs. The problems occur when electrodes attached to wires are heated, which causes damage to nearby tissue.

Vagus Nerve Stimulation (VNS), in which a small device implanted in the chest sends an electrical signal to the vagus nerve in the brain, is considered an experimental

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therapy for depression that is resistant to standard treatment methods; it is most commonly used in individuals with severe seizure disorders. Patients with implanted stimulators should consult their physician if an MRI has been prescribed. If you have EVER had a VNS device implanted it may not be safe to have an MRI, and your radiologist should be informed immediately.

Sources: <<http://www.alertnet.org/thenews/newsdesk/N10623803.htm>> &

<<http://www.fda.gov/cdrh/safety/neurostim.html>>

<http://aolsvc.health.webmd.aol.com/content/article/9/1663_51219.htm>

SELF-ADVOCACY AND SELF-CARE RESOURCES...

Medicare Modernization Act May Disrupt Consumer Prescription Drug Benefits

As the federal government seeks to reduce costs and redirect funding, Medicaid and Medicare benefits are facing major overhaul. In January 2006, all individuals who are eligible for benefits under both Medicaid and Medicare will have their prescription drug benefits immediately switched to Medicare. According to some, this group includes over half of all mental health consumers currently receiving services in the public mental health system nationally, and almost all of those who have the most serious disabilities.

Beginning January 1, 2006, Medicaid will no longer pay for prescription drugs for people who are also eligible for Medicare. When the new law goes into effect, all so-called dual-eligibles will have to choose among available Medicare prescription packages or have one randomly selected for them by the U.S. Department of Health and Human Services.

The potential for problems, as identified by the National Council for Community Behavioral Healthcare and others, is huge. People may be confused about which program best suits them and lack resources to make the best choice, and providers may be overwhelmed by the task of re-enrolling consumers and redirecting billing for medicines. In the worst case, consumers may be enrolled in programs that do not cover the drugs they most need.

As mental health consumers and providers struggle with the implications of the Act, the Center for Medicaid and Medicare Services (CMS) is preparing a broad public information campaign. Many unknowns still exist, however, and consumers should be prepared to self-advocate in order to ensure that their benefits are not disrupted.

<<http://www.kff.org/medicaid/duals.cfm>>

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<<http://www.cms.hhs.gov/medicarerereform/>>

Sources:

Public Policy Report, Vol. 17, No. 8; National Council on Community Behavioral Healthcare

Mental Health Weekly, Vol 15, No. 12

<<http://www.kff.org/medicaid/duals.cfm>>

STIGMA AND DISCRIMINATION...

New Findings in Mental Illness Self-Stigma

A recent study conducted in Taiwan, published in the May 2005 issue of Psychiatric Services, found that people who had more severe depression and less education had higher levels of self-stigma than those with less severe depression and more education. Self-stigma occurs when people internalize the stereotypes that society ascribes to people with mental illnesses; it can lead to isolation and feelings of low self-esteem and hopelessness. The report, "Self-Stigma and Its Correlates Among Outpatients With Depressive Disorders," concludes by advising clinicians to consider the impact of self-stigma when administering care.

On the other hand, a 2002 study of self-stigma indicates that although some individuals experience significant loss of self-esteem and self-efficacy as a result of negative external beliefs about mental illness, others actually feel increased self-esteem as a by-product of righteous anger in response to these false belief systems; and a third group seems to ignore the effects of public prejudice altogether. This study, "The Paradox of Self-Stigma and Mental Illness," by Patrick W. Corrigan and Amy C. Watson, published in Clinical Psychology, identified these three distinct reactions to stigma.

For more information:

<<http://www.mentalhealthcommission.gov/reports/FinalReport/downloads/FinalReport.pdf>>

<<http://ps.psychiatryonline.org/cgi/content/abstract/56/5/599>>

<<http://clipsy.oupjournals.org/cgi/content/abstract/9/1/35>>

COMMUNITY INTEGRATION. . .

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Mentally Ill Offender Treatment and Crime Reduction Act an Unfunded Mandate?

Millions of mental health consumers face mistreatment, lack of services and injustice in the judicial and corrections systems. Up to 70 percent of people with mental illnesses in prisons and jails are incarcerated for non-violent offenses and many for incidents directly related to their illness. Yet although mental health advocates have developed diversion, treatment and transition services in many localities, the problem has only recently been identified nationally.

Last year, the Mentally Ill Offender Treatment and Crime Reduction Act (P.L. 108-414), sponsored by Senator Mike DeWine and Representative Ted Strickland of Ohio, was signed by President Bush. This law authorizes \$50 million in federal grants to states to support pre- and post-booking interventions, law enforcement training, mental health courts and other programs to address the needs of people with mental illnesses who come into contact with the criminal justice system.

But as budget appropriations decisions are being made on Capitol Hill, the Act is seen as a low priority that may be funded at a significantly reduced level or not at all. A recent PBS Frontline special entitled "The New Asylums" highlights the need for services and funds to help get the country's vulnerable people with mental illnesses out of correctional systems that can't meet their needs and into service programs that can.

Find out more at:

<<http://www.bazelon.org/issues/criminalization/index.htm>>

<<http://www.nmha.org/federal/criminalJustice.cfm>>

UPenn Collaborative Announces Community Integration Training and Technical Assistance Opportunities

Expertise of the UPenn Collaborative on Community Integration is available through training and technical assistance in a broad range of community integration practices for consumers, advocates and program staff. Topics include Advancing Social Roles for People with Psychiatric Disabilities; Custody Rights and Child Welfare Advocacy; Utilizing Mainstream Housing and Employment Resources; Defining, Measuring, and Learning from Employment Outcomes; Writing Proposals to Support Community Integration; Supported Education, Disclosure and Accommodation Decisions for People with Psychiatric Disabilities; and many more. For more information on training and technical assistance availability, send e-mail to <<mailto:pennrrtc@mail.med.upenn.edu>>.

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HUMAN RIGHTS...

Reno Police Adopt a Different Way of Dealing with People with Mental Illnesses

The Reno Police Department has seen a great improvement in the way they deal with people who have mental disorders as a result of their adoption of Critical Incident Training nine months ago. Critical Incident Training is a jail-diversion program that facilitates the provision of mental health treatment and social services to people who might otherwise end up enmeshed in the criminal justice system. In Reno, according to the Reno Gazette-Journal ("Reno police see progress in handling mentally ill," 5/11/05), the objective is to have at least one officer with the training in every special police unit and one on every shift.

The goal of the program, adapted from the Memphis Crisis Intervention Team model, is to foster better communication between police and people with mental disabilities, and to reduce the number of injuries and deaths that occur when such communication is lacking. "The mentally ill were such a problem that law enforcement dealt with them on a daily basis and oftentimes had to use force," says Officer Patrick O'Bryan, a facilitator of the program, "The mentally ill became a victim of force and the officers got hurt, too. We hope this will help to intercept a person before they reach that critical point."

Source: <<http://www.rgj.com/news/stories/html/2005/05/11/99208.php>>

PARC Corner. . .

Caregivers need care, too!

For those of you who dedicate your time and energy to caring for loved ones, you know how trying constant caring can be. Caregiving takes both physical and emotional energy and it takes a toll on your mental health. Whether you are caring for a spouse, a relative, or a good friend, it is important to remember that you deserve to take a break. Giving yourself the chance to take some time to clear your mind will make you a better caregiver and improve your mental outlook. For some ideas for quick breaks, visit: <http://www.positiveaging.org/consumer/c_caregiving2.html>.

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