



NAMI NEWSLINE

National Alliance on Mental Illness . Cook County North Suburban

DEDICATED TO IMPROVING THE LIVES OF INDIVIDUALS AND FAMILIES AFFECTED BY MENTAL ILLNESS

Making Stigma Disappear



Join NAMI Cook County North Suburban as we come together to **Make Stigma Disappear** on Saturday, April 16, 2016 at the Park Ridge Country Club, Park Ridge. Our keynote speaker will be William Cope Moyers.

As Hazelden Betty Ford Foundation's Vice President of Public Affairs and Community Relations, Moyers leads the organization's

policy and advocacy activities. From "carrying the message" about addiction, treatment and recovery, to public policy and philanthropy, Moyers brings a wealth of professional expertise and an intimate personal understanding to communities across the nation. He uses his own experiences to highlight the power of addiction and the power of recovery.

Funds from the evening will be going to support NAMI CCNS community education programs, advocacy, family education courses, parent support groups and our programs for the individual with a mental illness (all at no charge).

The evening will also include live/silent auction, fund to cause auction, DJ and dancing, program and dinner. Tickets are \$225 each and can be purchased at www.namiccns.org or by calling our office, 847-716-2252.



Making Stigma Disappear

 **NAMI** Cook County North Suburban
National Alliance on Mental Illness

Spring Benefit — April 16, 2016
Park Ridge Country Club
Park Ridge, Illinois

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Ending the Silence Hits a Home Run at East Leyden High School



On February 23, NAMI CCNS was proud to present an extended version of the NAMI National signature high school program, **'Ending the Silence.'** This program was

designed for a 50 minute class period, to be presented by a parent volunteer speaker and a post high school age individual in recovery. The main message: educate students with the different signs and symptoms of mental illness, as well as how to reach out for yourself or a friend; leading into dealing with stigma, coping strategies, and recovery.

When we were approached by East Leyden High School to present a 2-hour program to a group of their 30 chosen Peer Leaders, we put together a special **'Ending the Silence'** program. We recognized the opportunity to have a longer time span to present and put together a terrific group of speakers: Christina Kolski, Chicago Public School Social Worker, and two Northwestern students in recovery, Carlie Cope and Melania Hidalgo. There is no doubt that each one of our outstanding speakers made a difference that day!

Would YOU like to join the **Ending the Silence** team to make a difference? We are always in need of speakers, both parents and those in recovery. The more people who speak out, the broader the message! If you'd like to hear more, please contact Nancy Sussman at the NAMI CCNS office. (847-716-2252).

Strategic Plan



Three years ago NAMI Cook County North Suburban developed a strategic plan to guide us into the future: it spelled out what we needed to do and how to do it. Three years later much has changed – we have achieved many of our goals, after experience found some things need a new approach, and have new requirements. So we are in the process of updating our strategic plan.

Here is how we are doing the update:

- We have asked the Board Committees (Programming, Organization Development, Community Outreach, Finance and Funding) to assess accomplishments, new requirements, recommended strategies, and provide a budget.
- Board and Staff will get together for a retreat April 30 to discuss the Committee recommendations and create a consolidated plan that is reasonable to accomplish given current and near-term resources.
- The new plan will be announced to all those involved with NAMI CCNS.

Some of the areas we need to address:

- **Advocacy:** how best to participate in legislative advocacy, and partner with like-minded organizations involved in serving those dealing with mental illness? We have had a minimum role in this area, but it is important to us that we have parity, the right laws, and that our voice is heard.
- **Youth:** how best to serve young people, such as with programs like NAMI on Campus.
- **Growth:** what strategies will enable NAMI CCNS to continue growing? We have found over the past years that the demand for NAMI services is strong, and that as we have been able to afford to add programs, the demand for them has been there. We need Board members with skills in certain areas, and with the ability to tap into various outside resources. And we would like to expand our office hours to five days per week (now four).
- **Communications:** we want to continue to improve in our communications to our various constituencies. We have had success with social media investments and with an improved website. As we focus on teaming with other NAMI organizations and partners, our communications programs become more complex, and we need to plan for them.

Stay tuned as we embark on this new planning effort, with the goal of getting agreement on what to focus on so that the efforts of all of us have a maximum impact.

John Schladweiler, Co-President, NAMI CCNS

NAMI CCNS 5k Walk Run 2016

#I am Stigma Free

Join NAMI CCNS as we make a public, active display of support for people affected by mental health conditions — one important way we are changing how Americans view individuals with a mental illness! Registration is open at namiccns.org to run or walk the 5K. Be a runner, walker, sponsor, team captain or volunteer!

Mark your calendar for **Sunday, September 18** at Washington School, 1500 Stewart Ave, Park Ridge. **7:00 am check in—8:00 am run—8:15 am walk**

Also please join us as we “Bash Away the Stigma” Kick Off Event at Arlington Toyota Scion, 2095 N. Rand Rd, Palatine, IL on Wednesday July 13, 6–8 p.m. Food, friends and bash-a-car!

NAMI CCNS

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Dr. Patrick Corrigan's "What says the Dodo Bird: Erasing the Stigma of Mental Illness"

By Samarth Mathapathi



At our annual meeting in January, we were pleased to have Dr. Patrick Corrigan come speak to us about his work dealing with stigma and mental illness.

Dr. Corrigan, a distinguished professor of psy-

chology at the Illinois Institute of Technology, has authored many books and professional research papers related to mental health and stigma.

Dr. Corrigan reminded us that people with mental illnesses aren't the only ones who have been stigmatized. Stigma has permeated many groups through their respective histories. From the LGBT community and the Civil Rights Movement, to Americans with disabilities, several groups have faced detrimental stereotypes and prejudice. This makes stigma an issue of social justice.

But what propagates stigma? Dr. Corrigan mentioned that the media plays a significant role in its early perpetuation: from displaying people with mental illnesses as "homicidal maniacs" to a more benevolent "lovable buffoon." Either end of these portrayals can be damaging to a person's sense of self-worth and being, producing a "self-stigma." Media images in the last few decades have used phrases such as "nuts" or "psycho" when referring to mental health patients, feeding some stereotypes. According to a study in 2006 looking at the public's perspective towards individuals with mental illness, nearly 40% of the surveyed population believed that people with mental illnesses are dangerous. This is an increase from the initial survey in 1956 when only 20% of the surveyed population believed so. Hence, even in an increasingly politically correct society, it seems the public's image towards mental health might be regressive.

The effects of stigma on an individual with a mental illness can be detrimental. It can make a person internalize the stigma to say things like "I'm not worthy" or "why even try." Moreover, the negative images of mental health can also prevent someone from seeking care. Dr. Corrigan mentioned another study in which 45% of patients avoided seeking care at a location that mentions mental health in its label, fearing that they would be labeled themselves. In other words, they didn't want to be seen visiting a mental health clinic. This not only prevents the individual from seeking the care they need, but also indirectly reinforces the idea that mental illness is something to be ashamed of.

Dr. Corrigan offers one potential solution to help address this. He stated that it's not enough to protest and educate the

public that stigmatizing mental illness is detrimental, but we have to proactively expose the public through contact. He encouraged individuals with mental illness to "come out" and share their stories. This helps us celebrate one's overcoming of a mental illness and make it inherently part of whom that individual is. In his concluding remarks, he emphasized that if more people contact and get to know a person with mental illness as an individual, it would help dissipate the stereotypes that propagate stigma and ultimately change the status quo.

Who Are Our New Board Members?

NAMI CCNS is fortunate to welcome 5 new members to our board of directors. We look forward to working with them to carry out our mission of reaching those with mental illness and their loved ones with support, education, and advocacy.

Dick DeCleene and his wife Joan, our Volunteer Corps coordinator, have 4 living children and one deceased child who suffered from bipolar and died from suicide. Dick was the Chief Financial Officer of the IL Municipal Retirement Fund and a partner in the audit and business advisory practice of Arthur Anderson. Dick has been past Chairman of the Board and Treasurer of UCAN, whose mission is to build strong youth and families through compassionate healing, education, and empowerment.

Jane Denten graduated from IL State University with a BS in Science and Northern IL University with a Bachelors and Masters in Nursing. She has worked at Advocate Lutheran General Hospital for the past 29 years, starting as an oncology staff nurse and is now the VP Nursing, Chief Nurse Executive, and is a member of the American Org. for Nurse Executives and the IL Org of Nurse Leaders.

Lee Klawans is an artist, photographer and businessman who owns multiple businesses in various industries. His photographs have been published worldwide in print and on the Internet. Lee has degrees in economics and finance from the Univ. of IL Champagne, and also studied at the School of the Art Institute in Chicago.

Frank Saracco grew up in the South suburbs and attended college in Charleston, IL and Chicago. In 2005 he graduated from the Univ. of Illinois Chicago with his Doctor of Pharmacy Degree. For the past 8 years Frank has worked in the Medical Affairs Dept. at Lundbeck Pharmaceuticals.

Tracey Vicari lives in Crystal Lake and is co-owner of Arlington Toyota. She started in the car business in 1983, when she worked summers for her father. When she is not working, Tracey likes to participate in charity runs and travel. She helped raise a lot of money for the Arkin Team for the 2015 NAMI CCNS Walk.

Mental Illness: Families Cut Out of Care

Privacy law leaves loved ones on the sidelines — with tragic results

Chip and Gail Angell would have paid any price to save their son. They weren't given the chance. Their 39-year-old son Chris, who suffered from schizophrenia, refused to allow his doctors to talk to his parents, even though they were his primary caregivers.

So the Angells weren't able to correct their son's medical chart, which incorrectly listed the young man as uninsured. They weren't able to plead with doctors not to base their son's treatment on cost. "Whenever we tried to get Chris into the hospital, we always ran into the fact that doctors wouldn't talk to us," says Chip Angell, of Brooklin, Maine, who says his son's doctor never returned his calls. "Some doctors think they're protecting the privacy rights of the patient. Others simply use privacy as an excuse because they don't want to talk to someone with an idea contrary to their own, or because they can't be bothered to call someone back."

Although a federal law on patient privacy was written to protect patients' rights, the Angells and a growing number of mental health advocates say the law has harmed the care of adults with serious mental illness, who often depend on their families for care, but don't always recognize that they're sick or that they need help.

The federal law, called the Health Insurance Portability and Accountability Act, or HIPAA, forbids health providers from disclosing a patient's medical information without consent. Unlike patients with physical conditions, people with serious mental illness often need help making decisions and taking care of themselves, because their illness impairs their judgment, says Jeffrey Lieberman, chairman of psychiatry at the Columbia University College of Physicians and Surgeons and director of the New York State Psychiatric Institute. In some cases, patients may not even realize they're sick. Excluding families can have a devastating impact on patients like these, Lieberman says.

Omega 3 Relieves Depression

Mark H. Rapaport, M.D., Emory University; Andrew A Nierenberg, M.D. & David Mischoulon, M.D., Ph.D. Massachusetts Gen'l Hospital Brain & Behavior Research Foundation, 15 Published Research Findings in 2015

Research demonstrated that certain fatty acids, including omega-3, can reduce symptoms of depression in people with high levels of inflammation in their body. The study focused on omega-3 fatty acids. People with major depressive disorder were given one of two types of omega-3's, called EPA and DHA.

People with high inflammation showed a greater reduction in depressive symptoms if taking EPA, relative to people taking placebos. People without elevated inflammation responded less to EPA than either DHA or placebo. The different effects may stem from EPA's stimulation of anti-inflammatory chemicals in the body – chemicals that DHA does not stimulate. *Journal: Molecular Psychiatry, March 24, 2015.*

Many health providers don't understand what HIPAA actually allows them to say. As a result, they often shut families out, even in circumstances in which they're legally allowed to share information, says Ron Manderscheid, executive director of the National Association of County Behavioral Health and Developmental Disability Directors.

Some doctors refuse to even listen to families such as the Angells, although doing so doesn't violate HIPAA. Others exclude families even when patients themselves don't object. While many people in the mental health community agree there's a problem, advocates disagree about how to fix it.

Three members of Congress — Rep. Doris Matsui, D-Calif., Sen. Chris Murphy, D-Conn. and Rep. Tim Murphy, R-Pa. — have introduced legislation to educate health care providers about what HIPAA does and doesn't permit. Tim Murphy also wants to change the law itself, creating a special exception to the privacy rule in cases in which the health of people with serious mental illness would suffer if their families aren't involved in their care.

When families can't care for loved ones with serious mental illness, patients pay the price, sometimes ending up homeless, in jail, or dead, says Tim Murphy, a child psychologist. "The need for this bill," he says, "is measured in lives lost."

Opponents of Tim Murphy's bill charge that it would trample on patient's privacy rights. Without the guarantee of confidentiality, some people with mental illness would avoid seeking treatment, says Jennifer Mathis, director of programs at the Bazelton Center for Mental Health Law.

Some say that the medical profession needs to undergo a cultural change, so that doctors are encouraged to reach out to the caregivers of people with serious mental illness, rather than shun them.

The Angells say HIPAA denied them the chance to prevent a tragedy. When their son was discharged from the hospital, a doctor wrote him a prescription for low-cost pills instead of a more expensive injectable treatment, Chip Angell says. That was in spite of the fact that the young man had a long history of refusing to take pills and was "doing very well" on the injections, medical records show. "If we had been able to talk to the doctor," says Chip Angell, his voice breaking, "we could have told him that no matter how much this drug cost, we'd have paid for it."

Their son, a gifted tennis player with a 7-year-old daughter, sank into a deep depression as the effects of the injectable medication wore off. In April 2012, six weeks after being discharged from the hospital, their son tried to kill himself by attaching a hose to the exhaust pipe of the family Volvo and filling the interior with deadly carbon monoxide gas. The car overheated and caught fire, with their son inside. He didn't survive. *Liz Szabo, USA TODAY*

Teens Who Use Cannabis at Risk of Schizophrenia

Written by Yvette Brazier

Cannabis, widely used among teens, can have serious consequences. Exposure to marijuana in adolescence leads to schizophrenia-like changes in the brain, according to research published in the journal *Cerebral Cortex*. Statistics from the National Institute on Drug Abuse (NIDA) show that 15% of 8th graders have tried marijuana and over 1% use it daily.



Marijuana, also known as cannabis, can induce sensations of relaxation and euphoria, but anxiety, fear, distrust and panic are also common, especially with high doses or if the marijuana is unexpectedly potent. Short-term effects include loss of memory and judgment and distortion of perception, leading to impaired performance in school or at work. It can also be addictive.

In teens, marijuana affects brain systems that are still maturing, potentially leading to a negative and long-lasting effect on cognitive development.

Fast facts about marijuana

- 45% of 12th-grade students in the US have used marijuana at some time
- 15% have used it within the last month
- 6% use it daily.

Use is related to psychosis

Large doses of marijuana may induce acute psychosis, including hallucinations, delusions and a loss of the sense of personal identity. These reactions are usually unpleasant but temporary; however, longer-lasting psychotic disorders, such as schizophrenia, have been associated with the use of marijuana.

Most of the intoxicating effects that recreational users seek are caused by the main psychoactive - or mind-altering - chemical in the drug, delta-9-tetrahydrocannabinol (THC). THC is found in resin mainly produced by the leaves and buds of the female cannabis plant. The plant contains over 500 other chemicals, of which more than 100 are chemically related to THC. Newer strains of cannabis contain higher concentrations of THC.

Researchers from Western University in Ontario, Canada, have shed light on the significant, long-term impacts of THC on the adolescent brain, after exposing adolescent rodents to THC. The team carried out tests in areas of behavior that are commonly observed in schizophrenia and other neuropsychiatric disorders, such as social interaction, motivation and cognition, exploratory behaviors, levels of anxiety, cognitive disorganization – which is the inability to filter out unnecessary information – and various neuronal and molecular changes.

Using a combination of behavioral and molecular analyses with in vivo neuronal electrophysiology, the team compared

the long-term effects of THC exposure in adolescents and adults.

Changes in brain resemble features of schizophrenia

Results showed substantial and persistent behavioral, neuronal and molecular changes that are identical to neuropsychiatric conditions, such as schizophrenia.

Adolescent rodents with THC exposure were socially withdrawn and demonstrated increased anxiety, cognitive disorganization and abnormal levels of dopamine, all of which are features of schizophrenia. These changes continued into early adulthood, well past the initial exposure.

No evidence of harmful, long-term effects was seen in adult rodents, although both adolescents and adults exposed to THC experienced deficits in social cognition and memory. The behavioral abnormalities seen in adolescents resembled positive and negative schizophrenia-related endophenotypes. A state of neuronal hyperactivity was observed in the mesocorticolimbic dopamine (DA) pathway. Several prefrontal cortical molecular pathways were also profoundly altered. This is consistent with sub-cortical DAergic dysregulation, a key characteristic of schizophrenia.

The risk profiles for adolescents and adults were different in terms of neuronal, behavioral and molecular markers resembling neuropsychiatric pathology. With marijuana use widespread among teenagers and the federal government moving toward legalizing it, Steven Laviolette, PhD, who led the research, sees clear implications for the findings.

Laviolette says: “Adolescence is a critical period of brain development, and the adolescent brain is particularly vulnerable. Health policy makers need to ensure that marijuana, especially marijuana strains with high THC levels, stays out of the hands of teenagers. In contrast, our findings suggest that adult use of marijuana does not pose substantial risk.”

First author Justine Renard, PhD, adds that the findings help to explain how adolescent exposure to THC may lead to the onset of schizophrenia in adulthood. He says: “With the current rise in adolescent cannabis use and the increase in THC content, it is critically important to highlight the risk factors associated with exposure to marijuana, particularly during adolescence.”

Medical News Today recently reported that cannabis with high levels of THC can damage brain structures, specifically in the part of the brain that aids communication between the right and left hemispheres.

medicalnewstoday.com/articles/305151.php?tw

Published: Sunday 17 January 2016

CLASSES: Family to Family & Basics for Parents – Spring 2016

Family to Family is a twelve week program designed to help family members and friends understand and support their adult loved ones living with mental illness. Learn about symptoms, medications, side effects, communication techniques, problem-solving, and community resources.

- **Wednesday evenings, May 4 – July 20**, 6:30–9:00 p.m., Chicago Behavioral Hospital, Des Plaines. Teachers are Roberta Chernawsky and Mary McCormick.

Basics for Parents is a six week program for parents and caregivers of school age children, age 18 and under, with mental health issues. Learn about the biology of mental illness, getting an accurate diagnosis, treatment options, handling challenging behaviors, crisis preparation, dealing with schools and juvenile justice. Gain support from other parents.

- **Saturday mornings, April 2 – May 14**, 9–11:30 a.m., at Chicago Behavioral Hospital, Des Plaines. Teachers are Georgene and Michael O’Connell

WRAP-Wellness Recovery Action Plan

- **March 31 – May 19**, 6:30–8:30 p.m., Lutheran General Hospital campus. Call for info and to register.

CALL 847-716-2252 TO REGISTER FOR ALL CLASSES

Commitment to attend the entire course is required..

Support Groups and Meetings: April, May and June 2016

Parent Support Groups for parents of children and adolescents (preschool through high school) with mental health issues. Free, no registration.

- **Every 2nd Thursday**, 7:00–8:30 p.m. at Highland Park Hospital, (main entrance) Room 1B, 777 Park Avenue West. Free parking in front of the hospital.
April 14 • May 12 • June 9

For Support Group in SPANISH, see next page

Balance for Success Support Group

To balance recovery from mental illness with life at college or work. For college age up to any age individual seeking to get back into school or career.

- **First and 3rd Tuesday** from 7:00–8:30 p.m. at the Winnetka Congregational Church, 725 Pine St. Park in church lot on Prospect and use that building entrance.
April 5 & 19 • May 3 & 17 • June 7 & 21

Connection Recovery Support Groups

Weekly recovery support group for adults with mental illnesses, all diagnoses. Share experiences, coping strategies, encouragement, and support with one another. Free, confidential, no registration.

- **Every Monday**, 4:00–5:30 p. m. at Beth Emet Synagogue, 1224 Dempster, Evanston, just west of Ridge at Asbury. Enter the Education Building, next to the parking lot. Please ring the bell outside for entry. Meeting is in Room 103, first floor, second room on the right.
April 4, 11, 18, 25
May 2, 9, 16, 23, off May 30 – Memorial Day
June 6, 13, 20, 27
- **Every Saturday**, 4:00–5:30 p. m. at Lutheran General Hospital, 1775 Dempster St., Park Ridge, 10th Floor, Room 1055, Special Functions Dining Room. Take the “B” elevators.
April 2, 9, 16, 30, off April 23 for Passover
May 7, 14, 21, off May 28–Memorial Day Weekend
June 4, 11, 18, 25
- **First and third Wednesdays** at Trilogy, 10:00–11:30 a.m., Beacon Drop-In Center, 1400 W. Greenleaf, Chicago.
April 6 & 20
May 4 & 18
June 1 & 15

Support Groups and Meetings, continued

Family Support Groups for family members and friends of adults coping with mental illness. Share problems you are facing and hear ideas that may help you take care of yourself and your family. Free, confidential, no registration.

- **Skokie Hospital, NEW ROOM — Abamson Conference Room** in Skokie Hospital, 9600 Gross Pt. Rd., East parking lot, main entrance, behind the Info Desk, **2nd and 4th Monday of each month, 7-8:30 p.m.**
April 11 & 25 • May 9 & 23 • June 13 & 27
- **New Building — Lutheran General Hospital, 1775 Dempster, Park Ridge, Sasser Conference Room, 10th floor, east side of cafeteria.** Use either A or C elevators. Free parking in garage in front of hospital. **1st and 3rd Tuesday of each month, 7:00-8:30 pm**
April 5 & 19 • May 3 & 17 • June 7 & 21
- **Highland Park Hospital, (main entrance) 777 Park Avenue West, Meeting Room 1A, Free parking in front of hospital. 2nd Thursday of each month, 7:00-8:30 p.m.**
April 14 • May 12 • June 9
- **St. Francis Hospital, 355 Ridge Ave., Glass House room in the Cafeteria, Evanston, 2nd and 4th Saturday mornings of each month, 9:00-10:30 a.m.** Cafeteria doors are locked from 10-11 a.m. If you're late, find a security guard to let you in.
April 9 & 23 • May 14 & 28 • June 11 & 25
- **IN SPANISH — both Family & Parent Support, 7020 Lawndale Ave, Lincolnwood, 1st & 3rd Tuesday evenings of each month, 7-8:30 p.m.**
April 5 & 19 • May 3 & 17 • June 7 & 21

Sundays at One is a social group for young adults and adults who are young at heart, who live with mental illness—to mingle in a safe and positive environment. Basic expenses covered.

- April 3 – Chris Jordan's Birthday Party
- April 24 – Bocce Ball at Pin Stripes & Lunch
- May 22 – to be announced
- June 26 – House Party/Picnic

Call our office, 847-716-2252 for information and to RSVP.

NAMI CCNS Associate Board

If you're a young professional (or not), be part of the movement! Join the NAMI CCNS Associate Board today!

Call 847-716-2252 or email susanockerlund.namiccns@gmail.com or Matt Defano matt@defano.com

NAMI CCNS Gala 2016

Nami CCNS is pleased to announce our gala, **Making Stigma Disappear, Saturday, April 16, 2016** at the Park Ridge Country Club, Park Ridge, IL, featuring our keynote speaker, William Cope Moyers, VP of Public Affairs & Community Relations, Hazelden Betty Ford Foundation.

The evening will also include live and silent auctions, fund to cause auction, program and dinner. Tickets are \$225 each and can be purchased at <http://www.namiccns.org> or by calling our office, 847-716-2252.



MEETINGS & EVENTS:

Public Education Meetings

■ Speaker and Topic To Be Announced

Monday, May 9, 7:00 – 9:00 p.m., at Journey Care (formerly Midwest Care Center), Administration Building, 2050 Claire Ct, Glenview 60025. Please check our website for details as they are available — www.namiccns.org.

NAMI CCNS Board Meetings

Members and visitors are welcome.

NAMI CCNS office, 8324 Skokie Blvd, Skokie

- **April 6** – Wednesday at 7:00 p.m., NAMI office
- **May 4** – Wednesday at 7:00 p.m., NAMI office
- **June 1** – Wednesday at 7:00 p.m., NAMI office

NAMI CCNS Tag Day 2016

Our annual tag days are coming on Friday May 13 (7a.m.-5 p.m.) and Saturday May 14 (9 a.m.-noon)



This is a great opportunity for volunteering! Locations this year will be in Skokie, Evanston, Park Ridge, Hubbard Woods, Glenview, Des Plaines and Highland Park. Email joandecleene1@gmail.com or the office at susanockerlund.namiccns@gmail.com or call 847-716-2252 to sign up for a shift.

Volunteer in one of our locations and help to end the stigma of mental illness!

Groundbreaking Study Moves Us Closer to Finding Schizophrenia's Cause

By Ken Duckworth, Jan. 29, 2016

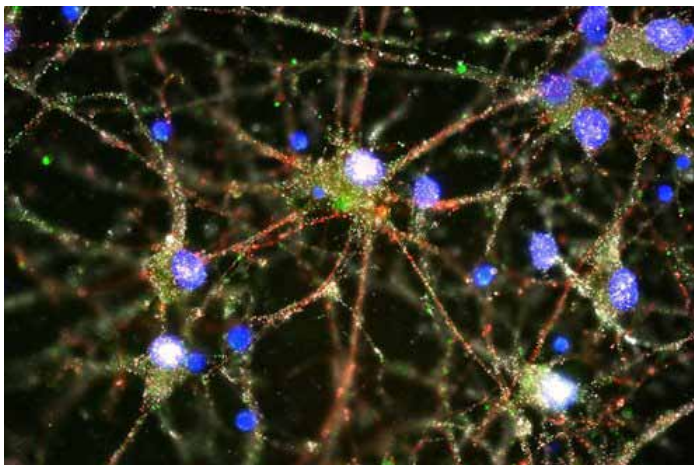
In the scientific journal *Nature*, researchers from the Broad Institute, Harvard Medical School and Boston Children's Hospital, among other sites, found a hypothesis that could be a key cause of schizophrenia. The researchers noted that people who had schizophrenia were more likely to have a certain type of a gene that promotes neural "pruning."

Pruning is the process of the removal of neurons. In 2014, when I attended the Broad Institute's announcement of the \$650 million gift from Ted Stanley and panel discussion on a study that identified 108 genes associated with schizophrenia, I congratulated Dr. Steve McCarroll on this development. He told me that the papers on Broad's work connecting genes and mental illness would only get more interesting as we moved forward. This new paper shows he was right.

First, let's take a look at the hypothesis that the research supports. It has been a point of discussion for years that over or misdirected pruning may be connected with the occurrence of schizophrenia. Pruning is part of normal brain development during childhood, and especially during adolescence. After pruning takes place, new neurons are produced with more efficient functions. In other words, pruning helps the brain develop more superhighways and fewer back roads. Clinically, this hypothesis is also compelling, as the onset of symptoms often occurs in adolescence. However, we haven't had biological facts that back this idea up—that is, until this study.

The need to understand neural networks—how neurons relate and communicate—has also gained traction in informing our thinking about schizophrenia. Pruning also fits the idea that the network of neurons could be impacted by changes in neuronal architecture. This way of thinking about the relationship of neurons in networks is one reason that we don't use the term "chemical imbalance" anymore to explain how schizophrenia develops—that is likely far too simple a model.

At my clinic when patients, or their parents, ask me what caused their schizophrenia, I have to tell them that unfortu-



Imaging studies showed C4 (in green) located at the synapses of primary human neurons. Image courtesy of Heather de Rivera (McCarroll lab).

nately we don't know. I tell them that we think it's a complex interaction of genes and environment that promote risk at critical stages in brain development, and that it's pretty theoretical. This paper will most assuredly help improve my answer to this question. Over time I hope that we can understand the mechanism of the treatments we use, and why certain environmental acts like sleep deprivation or the use of stimulants and marijuana can raise the risk for psychosis in vulnerable people.

As I read it, the study does not prove that the pruning hypothesis is correct, but it does add a very compelling point to support it. Since I am a clinician, not a geneticist, my explanation of what was discovered will be rather simple, but what the researchers found is a spot on chromosome 6, called C4, which is a gene that promotes pruning. Subtypes (called alleles) of this chromosome are found in overabundance in association with schizophrenia.

The researchers in the study drew upon a number of biological ideas and pulled them together to make this observation. For example, they found that alleles of C4 have been found to promote neuronal pruning in mice after they are born, and that they are also involved in the development of neuronal networks. How gene structure connects to brain development will be an ongoing and compelling area of inquiry. This paper also represents a new level of cooperation among many types of researchers, which bodes well for our speed of future understanding.

I recall the fear and anxiety that existed when I was on the first AIDS unit in New England as a medical intern in the 1980s. We didn't know what caused the condition, and that added to our fear, hopelessness and pessimism. It seemed overwhelming and unrealistic to contemplate a biologic solution to this devastating condition. Now, of course, we know the details of the virus and transformative treatments have followed. HIV has gone from a lethal diagnosis to one that can be lived with, and that change started with science on the underlying biological cause.

The brain and our understanding of the causes of schizophrenia will be much more challenging to master than even this complex virus. Making sense of the underlying biological properties that lead to schizophrenia will make a difference in our understanding of the development of the condition. That is the vision that the late Ted Stanley supported when he made a huge donation to the Broad Institute. As our understanding continues to grow, we will find better treatments. This study is another big step in a very long journey.

Ken Duckworth, M.D., serves as medical director for NAMI. He is double board certified in adult and child and adolescent psychiatry. He has also completed a forensic psychiatry fellowshipship.

www.nami.org/Blogs/NAMI-Blog/January-2016/Groundbreaking-Study-Moves-Us-Closer-to-Finding-Sc?utm

NAMI CCNS Family Crisis Resources List

EMERGENCY911

Ask for CIT (Crisis Intervention trained) officer

Nat'l Suicide Prevention Lifeline 800-273-TALK (8255)

NAMI CCNS. 847-716-2252

NAMI Illinois 800-346-4572

NAMI National 703-524-7600

NAMI Nat'l Helpline 800-950-6264

Illinois Mental Health Collaborative

Referral to a Mental Health Provider 866-359-7953
Press 2 then 2 again

'Warm Line' for Emotional and
Self-advocacy, Support and Recover Education
Mon-Fri, 8-5, except holidays) 866-359-7953
(select Warm Line)

C4 — Community Counseling Centers
of Chicago Crisis Line 773-769-0205

Trilogy – for Rogers Park Residents
Crisis Line 800-322-8400

Lake County Mental Health Services
Crisis Line 847-377-8088

Alexian Brothers Behavioral Health Hospital
Crisis & Intake 800-432-5005
Hoffman Estates – child, adolescent, & adult

Chicago Behavioral Hospital 847-768-5430
Des Plaines – child, adolescent, adult, geriatric, dual dx— in
patient, out patient

Evanston Hospital — adult 847-570-2000,
Mental Health "Crisis Line". 847-570-2500 #2

Highland Park Hospital
Child, adolescent, & young adult 847-480-3709

Lutheran General Hospital
Child, adolescent, adult, & geriatric 847-723-2210
Park Ridge

Northwest Community Hospital
Adolescent & adult 847-618-4100
Arlington Heights

Crisis Line 847-432-5464

Northwestern Memorial
Adolescent & adult, Chicago 312-926-8100

Rush – child, adolescent, & adult, Chicago 312-942-2400

Vista Medical Center West
Adult, child, adolescent, Waukegan 847-360-2000

Alternatives to Emergency Room — crisis respite, appoint-
ment not necessary, but please call first for info:

Turning Point Living Room — 847-933-9202
Tuesdays-Fridays and Sundays, 3pm-8pm.
8324 Skokie Blvd, Skokie

Welcoming Center, Lutheran Social Services — an alter-
native to the Emergency Room for individuals struggling
with mental health symptoms and/or substance use. Staffed
by nurses, counselors, peer specialists. Meds prescriptions

available. Case mgmt. for up to 90 days. Mon-Fri, 8 am-8
pm, 5215 N. California #F101, Chicago, next to AuBonPain,
across from Swedish Covenant Hospital, 773-561-5809.

Note: The Living Room at the Josselyn Center, Deerfield has closed.

**Assessment & Referral Center, Northwest Community
Hospital**, open 7 days a week, 7am-11 pm, for adults and
adolescents in psychiatric crisis, offers free assessments and
referrals. 901 W Kirchoff Rd, first floor, Arlington Hts, on the
hospital campus. Can also schedule free assessments, 847-
432-5464.

Illinois Guardianship & Advocacy Commission
Des Plaines 847-294-4262
Chicago 312-793-5908
Protects rights of disabled persons

Cook County States Attorney 312-603-8600
for Involuntary Commitment and/or Medication Orders

Lake County States Attorney. 847-377-3050
*Civil Division, Mental Health Atty for Involuntary
Commitment or Medication Orders*

Mental Health Court, TASC, 312-573-8317
Cook County, Supervisor Al Pizza
*If non-felony offense, accused can enter MH program
and if finishes, have crime removed from record*

Cook County Jails
Mental Health Dept 773-869-5610
Mental Health Hotline 773-674-2273
*for families of current and ex-detainees.
Staffed by live team members!*

Dept of Human Services 847-745-3200
8020 St. Louis St., Skokie 60076
food stamps, Medicaid, cash assistance

Salvation Army. 847-866-9770

WEBSITES FOR ASSISTANCE RESOURCES

Note 'SNAP' means food stamps.

To find possible Benefits:

www.disability.gov
www.benefits.gov/benefits/benefit-finder
www.dhs.state.il.us
Click on cash, health & medical, SNAP or food, etc.

For Prescriptions:

www.illinoisrxcard.com
www.illinoisdrugcard.org
www.pparx.org
www.goodrx.com – for local
drug price comparisons

For expensive brand-name
drugs, Google the drug
name plus 'assistance.'

Ask your doctor for free
samples



123RF STOCK PHOTO

CUT ON DOTTED LINE FOR EASY ACCESS IN EMERGENCY



People in Crisis Have an Easier Way to Seek Care at New Northwest Community Hospital Assessment and Referral Center

Northwest Community Healthcare
monthly eNewsletter
Wednesday, January 20, 2016

A psychiatric crisis can occur at any time, and be triggered by anything. It is not always something that an individual has control over. Unfortunately, many people in crisis have no access to care and will seek treatment in the nearest emergency department.

Recently, Northwest Community Healthcare (NCH) opened the Assessment and Referral Center, located on the first floor of 901 W. Kirchoff Road on the hospital campus. This location now will offer individuals free assessments and referrals without the wait in the hospital emergency room for a behavior assessment.

"Just as with any other illness, the first step to feeling better is identifying the problem," says Maureen Kunz, R.N., M.S.N, B-C, Administrative Director of Behavioral Health Services at NCH. "Our behavioral health assessment is a free, confidential evaluation of your symptoms conducted by a licensed clinician. It gives us a better understanding of your needs."



The Assessment and Referral Center offers comprehensive behavioral health assessments seven days a week, from 7 a.m. to 11 p.m. Patients also can make appointments for assessments by calling 1-847-HEALING (432-5464). Same day appointments are often available.

The center has an observation area for patients and is staffed with clinicians who perform full behavioral health assessments. Staff treats anxiety, depression and substance abuse for adolescents and adults.

"The information we collect helps us create your personalized treatment plan," Kunz says. "We will recommend a level of care and referral that's right for you based on your confidential assessment."

Staff members may recommend inpatient, hospital-based outpatient care, such as a partial hospitalization and intensive outpatient program, residential, medication management and counseling, or support groups, Kunz says. Many of these services are available at the Assessment and Referral Center.

"Your program may include individual, group or family therapy—outlets to talk about your feelings and understand your illness," she says.

Sundays at One



Howard and Roberta Chernawsky

Sundays at One is a social program for adults 18-40 who have mental health issues. The purpose of the group is to foster interactions for a group of people who are often stigmatized. The group meets once a month in a relaxed environment where people can come together to meet old and new friends while enjoying a pleasant afternoon. The group usually

meets from 1-3 and has an activity and lunch. Most fees are covered by NAMI CCNS.

Events done in the past or scheduled for the future include attending an acrobatic show, bowling, bocce ball at Pinstripes, a Cubs game, a Ravinia concert, Long Grove Apple Fest, a pumpkin patch hayride, and Navy Pier/Millennium Park. The year always concludes with a holiday luncheon with gift bags. Sundays at One provides the socialization that people with mental illness need to make their lives more enjoyable and meaningful. A group has been formed that now knows one another and has formed some friendships and connections. Roberta Chernawsky and Maun Dee are the facilitators of this wonderful group.

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NAMI CCNS
8324 Skokie Blvd
Skokie, IL 60077

NAMI CCNS EDUCATION CLASSES, SUPPORT GROUPS AND OTHER SERVICES

NAMI educational classes and programs. All are free.
**Registration required. Call 847-716-2252 for information.*

***Family to Family** A 12-week class for family members/close friends of adults with mental illnesses. Schizophrenia, depression, bipolar disorder are addressed, also borderline personality disorder, panic disorder, obsessive-compulsive disorder, co-occurring addictive disorders, medications, coping skills, and advocacy.

Family Support Group Family members and close friends of adults coping with mental illness. *(See calendar for five locations and dates.)*

***Basics** A 6-week course for parents of children/adolescents with mental disorders. Bipolar disorder, schizophrenia, anxiety disorders, eating disorders, ADHD, as well as brain biology, treatments, medications, communication, and coping skills are addressed.

Parent Support Group for parents of school-age children and adolescents with mental health issues. *(See Calendar for dates.)*

Connection Recovery Support Group A weekly recovery support group for adults with mental illness, all diagnoses. Led by trained individuals also in recovery. Mondays at Beth Emet Synagogue, Evanston. Saturdays at Lutheran General Hospital, Park Ridge. Both 4–5:30 pm. Call Brian at NAMI CCNS 847-716-2252.

Balance for Success Support Group to balance recovery from mental illness with life at college or work. For college age up to any age individual seeking to get back into school or career. 1st and 3rd Tuesday, 7–8:30 pm. *(See Calendar for location and dates.)*

Sundays at One A social meeting group for adults, ages 20 and up, coping with mental disorders. Call Chris at 847-220-0199 for information. *(See Calendar for dates)*

Public Education Program Topical presentations by speakers with expertise in the mental health field. *(See Calendar)*

Response Team A “warm line” (not a crisis hot line) for resources, referrals, or support about dealing with mental disorders. Call the NAMI CCNS office and leave a message at 847-716-2252.

OTHER ORGANIZATIONS

ADHD – Chicago North Shore CHADD, See website for meeting info. www.nsadhd.org. www.nsadhd.org

Balanced Mind Foundation (children with mood disorders) is now part of the Depression & Bipolar Support Alliance. See below.

Beyond OCD For info and to find a support group for obsessive compulsive disorder, go to www.beyondocd.org or 773-661-9530.

Depression & Bipolar Support Alliance of Greater Chicago Meet with groups in Evanston, Kenilworth, northern Chicago, Gurnee, Arlington Hts. Call 773-465-3280 or www.dbsa-gc.org.

Faith, Hope, & Recovery Group, a faith-based support group for adults in recovery, meets the third Tuesday of the month at Kenilworth Union Church, 211 Kenilworth Ave, Kenilworth 60043, 7–8:30 pm in the library. For info call Rev Kathy Dale McNair at 847-989-1989.

New Foundation Center A local provider of psychosocial services: recovery programs, supportive housing, supported employment; www.newfoundationcenter.org or 847-386-3060.

Recovery, Inc. Self-help group for people with mental disorders. Places and times: www.recoveryinternational.org or 312-337-5661.

Turning Point Behavioral Health Care Out-patient mental health center in Skokie, psychosocial services, drop-in center. For info call 847-933-0051 or go to Website www.tpoint.org.