

*Perspective***Leadership and Vision Needed for a Decent Mental Health System that Works**

By John H. Gilmore M.D.

Mental health reform in North Carolina is a real mess, and in some ways like the war in Iraq – a reform so ill conceived and implemented, and currently so complicated that reasonable and thoughtful people throw up their hands and don't know where to begin. North Carolina shifted the bulk of funding from the state to the ever tightening federal Medicaid program and care from public, county based providers to privatize companies. This reform has resulted in a system in chaos with no safety net. North Carolina ranks 43rd in the country in per capita spending for mental illness and recently received a grade of D+ from the National Alliance on Mental Illness.

The horror stories are endless, everyone has heard them: counties without care providers, private companies closing over night and leaving thousands without care, people unable to find a psychiatrist or other provider that can or will take care of them, patients seeing different doctors or case managers at every visit, patients seeing providers in several different companies with no communication between them. Well trained professionals - psychiatrists, psychologists and social workers - have often been replaced with low cost, poorly trained workers who can not adequately address the complicated problems patients with mental illness have. North Carolina has lost many community psychiatrists and other mental health professionals; this damage will take years to repair.

The basic features of a reasonable mental health system are not that hard to identify or provide. North Carolinians all deserve to be able to see a

well-trained professional for treatment in a timely, easy to negotiate manner. We deserve treatment that is evidence-based, treatments that are proven to work, not just treatments a company can make money providing. We deserve care that is integrated and continuous, having doctors and other care providers that talk to each other and stay in the job long enough to get to know us and our illness. We know how to do this; North Carolina has a history of doing a pretty good job of this in the past.

It is time to say loud and clear that the current model of mental health reform has failed. More resources are important, but throwing money at a failed system is not the answer. We need a total re-thinking of the model itself. The privatization of public mental health care must be stopped. As Dr. Drew Bridges has pointed out, there is no money to be made in providing mental health care. Many problems in the current system result from private for profit and non-profit companies trying to meet operating expenses or even make money in a system with very little money to start with. The old system may have had its problems, but they pale in comparison to the problems that reform has wrought, the problems we are facing today.

It is time to allow local public mental health centers to once again directly provide treatment and services that are evidence-based, integrated, and easy to access. This is the only approach that can succeed given the limited resources within the mental health system, resources that will not likely increase substantially in the near future. A "stay the course" approach that tinkers with privatization will not work. With a little leadership and vision, North Carolinians can get what they deserve – a decent mental health care system that works.

John Gilmore serves on the NAMI Orange Board of Directors. He can be reached at jhgilmore3@netscape.net

Challenging Opportunities for Advocacy

By Lisa Hamill

Serving as your NAMI-OC President continues to provide challenging opportunities for advocacy, especially those pertaining to mental health reform efforts.

On April 7, 2007 a 33% cut in reimbursement rates to providers of community support services for persons with severe disabilities was announced in a memorandum from the NC Division of Medical Assistance (DMA) and the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS).

This was dismaying news. Cutting the reimbursement rate for an essential service will place our fragile system and consumers in peril.

Mental health advocates were faced with a choice; we could "wring our hands" or "ring the governor". Many of us called the Governor's office to express our concern over the decision. In addition, a letter was sent to DHHS Secretary Carmen Hooker Odom from a law firm on behalf of the NC Providers Council and the NC Children and Family Services Association, regarding pursuit of legal remedies if the prior reimbursement rate was not reinstated.

On April 12, 2007 I was one of many advocates who attended a press conference in Raleigh that drew attention to the Community Support services cuts. Among the North Carolina organizations represented were the Mental Health Association, National Association of Social Workers, Children and Family Services Association, Providers Council, Council for Community Programs, Covenant with North Carolina's Children, and the National Alliance on Mental Illness. We came together to raise awareness of the devastating impact this cut will have on vulnerable children, families and individuals.

As a probable result of these advocacy actions, and as a testament to the impact we can have if we take the time to speak up, DHHS has partially backed off its decision to cut rates and agreed to speed up its review of what the service costs, and tentatively agreed not to apply recent cuts in

reimbursement rates for services provided before April 1, 2007. Secretary Odom said DHHS will be expediting the cost modeling audits they were in the process of doing before issuing the memo that cut rates. They anticipate the cost modeling will be complete by April 20th and a new rate based on that cost model will go into effect.

On a related topic...We can "talk the talk" AND "walk the walk", as in NAMIWALKS. Come walk with us on May 6 or sponsor a walker. The article on page five has details.

I'm planning to attend the Coalition 2001 Legislative Rally Tuesday May 15. I hope you'll consider joining me. Registration begins at 8am on the back portico of the Legislative Building. If you want to carpool or want more information phone me 933-8941 or email lisahamill@earthlink.net

Thank you for being a part of NAMI-OC.

Sincerely, *Lisa*

To contact the Governor's office with concerns and suggestions regarding Community Support and the public mental health system, call Governor Michael Easley at 1-800-662-7952 valid in North Carolina only (919)733-4240, or (919)733-5811. Faxes should be sent to ((19)715-3175 or (919)733-2120 to email the Governor's office go to the website <http://www.governor.state.nc.us/contact.asp>

Important Bills Introduced in the NC General Assembly this session

- ✓ **House Bill 934/SB 1236 (Verla Insko). FUNDS TO EXPAND MH/DD/SA SYSTEM. Appropriate 190 million in 2007-8 and 160million in 2008-09.**
- ✓ **House Bill 9739(Alexander, Holliman, Insko, Wainwright), Senate Bill 1434(Bob Atwater)AN ACT TO REQUIRE EQUITY IN HEALTH INSURANCE COVERAGE FOR MENTAL ILLNESS AND CHEMICAL DEPENDENCY (more on p 6)**
- ✓ **Senate Bill 1075/House Bill 553(Kinnaid) AN ACT TO PROHIBIT EXECUTION OF THE MENTALLY ILL (more on p 3)**

Thank the sponsors... track progress... advocate!

Bill introduced in the NC General Assembly

SB 1075 AN ACT TO PROHIBIT THE EXECUTION OF THE MENTALLY ILL

By Senator Ellie Kinnaird

Senate Bill 1075, if passed, would prohibit the execution of a person who commits a crime when they are under a severe mental disability. The bill does not prevent the mentally ill accused person from being charged of the crime, standing trial or being convicted of the crime. However, if the bill passes, they could not be executed for the crime. Leading state and national mental health organizations, and the American Bar Association have all called for the exclusion of the seriously mentally ill from the death penalty. Our state mental health organizations have all voiced support for the bill.

One of the issues in trying such a person is the definition and identification of "severe mental disability." The person, in order to be eligible under this law, would have a significantly impaired capacity to:

- (1) appreciate the nature, consequences, or wrongfulness of the person's conduct
- (2) exercise rational judgment in relation to conduct,
- (3) conform the person's conduct to the requirements of the law.

A mental disability manifested primarily by repeated criminal conduct or attributable solely to the acute effects of alcohol, standing alone, would not constitute a severe mental disability for exclusion of the death penalty.

Under the bill, a person would have a hearing before trial, and if not decided at that time, at sentencing to determine if they suffer a severe mental disability.

The bill needs substantial support to pass, as there will be groups opposed to it. Please contact your legislator to urge them to support and to vote for the bill and the companion House bill (HB553).

Sen Ellie Kinnaird, sponsor of the bill, can be reached at ellick@nc.leg.net or (919) 733-580

A New Book and a New Case:

Mental Illness and the Death Penalty

A 2006 book by best-selling author John Grisham's tells the true story of an Oklahoma man with mental illness who spends 20 years in prison for a rape and murder he did not commit before finally receiving a new trial in 1999 and having his conviction overturned on the basis of DNA evidence. It is Grisham's first work of non-fiction.

The Innocent Man: Murder and Injustice in a Small Town (Doubleday, 2006) tells the tragic story of Ron Williamson, who according to Grisham's research, was wrongfully convicted based on bad police work, bad science, faulty eyewitness identification and an arrogant prosecutor. Williamson's court appointed lawyer who was blind and working alone, was afraid of him, sitting as far away as possible in the courtroom. Grisham notes these are ingredients for countless wrongful convictions.

Under a 1986 Supreme Court opinion, execution of mentally ill persons is constitutionally prohibited as cruel and inhuman punishment—but only under a narrow "awareness test" in which the defendants "understand the punishment" and "why they are to suffer it."

On January 7 2007, a few months after the publication of *The Innocent Man* the US Supreme Court agreed to hear a death penalty case in Texas, in order to set a standard for determining when mental illness is so severe that execution is unconstitutional. NAMI has filed a "friend of the court" brief in the case.

Grisham's focus is less about standards on what constitutes severely impairing mental illness than on making a case that the criminal justice system is so inherently vulnerable and flawed that the death penalty is inherently wrong. He is passionate in presenting a case that "not in my most creative moment could I have conjured up."

The Innocent Man is available from Amazon.com and NAMI will receive a portion of the sale price. Source: www.nami.org

I am still here!

By Susan Spalt

The Nothing to Hide Coalition on Mental Health of Orange County is planning a special showing of an extraordinary movie, *I am Still Here*, which shows, with insight and compassion, the challenges and triumphs of living with schizophrenia. This event will be held May 10 at the Century Center, Carrboro . Refreshments will be served at 6:30. The movie will be shown at 7pm followed by a panel discussion. The event is open to the public. Donations will be accepted.

Why See This Movie?

If you have never met anyone with schizophrenia, this movie will inspire you with the stories of people who have coped with a very challenging illness.

If you have been diagnosed with schizophrenia or care about someone who has the illness, this movie will give you insight into the illness and inspire hope for the future.

It is important for all of us to learn how treatment and support can allow people with schizophrenia to lead a productive and rewarding life.

Meeting with Staff at UNC Neurosciences Hospital: Standing Room Only *by Susan Spalt*

Susan Spalt and **Barbara Nettles-Carlson** braved a thunderstorm and fierce traffic to meet with nurses at UNC Neurosciences hospital in order to promote closer ties between NAMI and the hospital units. Specific items on our agenda were distributing Family-to-Family information and reinstating the NAMI Orange Award to an excellent nursing assistant.

We anticipated meeting with two or three nursing supervisors. Instead, the room was overflowing! Nurses (one came on her day off), social workers, occupational therapists, a student and several patients were present. The attendance was testimony to a commitment to working together and respect for NAMI.

Lively discussion among the hospital staff, patients and Susan and Barbara revealed a number of common concerns. Everyone present agreed this type of meeting needed to happen regularly.

The hospital group asked NAMI Orange to:

- Compile community resources information to give patients and families upon discharge
- Be available as resources to attend a support group run by hospital staff for families of current patients
- Encourage other NAMI affiliates in the state to work with UNC Neuroscience Hospital when the hospital serves patients who reside in their areas.

The idea of instituting a staff award was enthusiastically accepted. The timing will be worked out by the staff. NAMI brochures were placed in the waiting rooms that same afternoon. NAMI Orange will restock the brochures.

Following the meeting, **Eileen Spahl** RNC, M.Ed. invited us to see an innovative approach when a patient situation calls for a calming period. Instead of the traditional bare "seclusion room", we saw an inviting "retreat" room. Designed to promote relaxation and reduce anxiety, the room has a comfortable easy chair and lovely wall murals depicting a peaceful landscape scene. The murals were hand painted by psychiatric nurse **Ashaf Meymandi** RN.

The meeting was very productive and we look forward to future collaboration between NAMI Orange and staff of UNC Neurosciences Hospital.

Susan Spalt can be reached at swspalt@mindspring.com

NAMIWalks in the Triad Saturday May 5

walk with us or sponsor a walker

Every journey begins with that first step.

In 2007 thousands of concerned citizens in more than 60 communities across the nation will join NAMI's *Campaign for the Mind of America* and walk together to raise money and awareness about our country's need for a world-class treatment and recovery system for people with mental illness. *NAMIWalks in the Triad* is part of this national walkathon program.

NAMIWalks in the Triad will take place May 5 at Triad Regional Park, just off I40, half way between Greensboro and Winston-Salem. The total distance of the walk is 2.5 miles. Participants can choose to walk a shorter distance. Check-in is at 9:00 am, and the walk begins at 10:00 am.

NAMI-Orange County's team is "Courageous Stigma Busters". Team Captain **Lisa Hamill** is listed on the following web site, where you can get information, join the team or donate securely. www.nami.org/namiwalks07/RAL/CourageousStigmaBusters. Or, email LisaHamill@earthlink.net or phone her at 933-8941 if you are interested in walking with NAMI Orange County's team, carpooling on May 5th or additional information, such as sample fundraising letters.

Volunteers are needed on the day of the Walk to help plan the entertainment, food, and be part of the walk day course crew. Please contact sgerson@triad.rr.com or 336.299.9989 ext. 16 for more information on how you can help.

NAMI North Carolina's fundraising goal for this event is \$100,000. Proceeds will be divided among local, state and national NAMI.

Never doubt that a small group of thoroughly committed individuals can change the world; indeed it's the only thing that ever has"...Margaret Mead

Spring 2007 Family-to-Family Class Update

By Julia Trimmer

As another group prepares to graduate from a NAMI Orange County Family-to-Family education program, one of the teachers, **Virginia Hill**, reflects on what the class has meant to her. As a student, "the class was so important to me; it gave me so much strength, and was so valuable." Recently, Virginia went through Family-to-Family teacher training and now she's co-teaching her first class with **Gary Gaddy**. Despite being an experienced teacher -- both Virginia and Gary are and have taught at the college level -- Virginia admits that the Family-to-Family class felt different from their previous teaching experiences. "At first it was scary, but now I feel comfortable, especially teaching with Gary."

The spring class has 25 members, who come from Durham, Mebane, and Chapel Hill. A couple of students have siblings with mental illness, while four are spouses, and many are parents of younger and older children with mental illness. The class is ethnically and culturally diverse, and some students have expressed interested in attending a Family-to-Family class taught in Spanish. Guest speakers included two consumers and a UNC researcher who's working on brain disorders. Virginia reports "a lot of good sharing" during the class.

Recent graduates are encouraged to join NAMI Orange County and participate in local events, like the Family-to-Family fall reunion, as well as national events like the NAMI WALKS held in Winston-Salem.

The next class will begin in fall, 2007. Family-to-Family education program is a free, 12-week course for family caregivers of individuals with severe mental illness. NAMI Orange County has been offering Family-to-Family since 1998. For more information, contact Susana Burns (932-4304) or email f2fororangecounty@yahoo.com

Research Opportunity

Help Us Learn More about Schizophrenia

Researchers at UNC-Chapel Hill are trying to better understand the risk-factors of psychotic illnesses using safe, state-of-the art brain imaging techniques. We need people between the ages of 9 and 18 who have a BROTHER, SISTER OR PARENT with schizophrenia or schizoaffective disorder to participate in our study.

If you or someone you know meets these criteria:

- Between 9 and 18 years old
- Has a sibling or parent who has been diagnosed with schizophrenia or schizoaffective disorder.
- Does not themselves have schizophrenia or schizoaffective disorder.

To learn more call 1-877 PRIME-19 or 919-843-3419, visit our website www.prime.unc.edu or email erindouglas@med.unc.edu

ANNOUNCING AN ART GALLERY EVENT

*Original and exciting art created by artists
who are living and coping with mental
illness*

Bull City HQ Art Gallery, 723 N.
Mangum St, Durham

Opening with a reception April 20, the show features 20 pieces from the *Brushes with Life* art program; work by artists in this program has been displayed in many venues including the NC Museum of Art.

*Supported by the Nothing to Hide Mental Health
Coalition of Orange County*

Information 384-5424

Support Mental Health Parity Bill Introduced in NC General Assembly

Bills to ensure that mental illness and chemical dependency are covered on par with physical illnesses in health insurance plans have been introduced in the NC General Assembly. These are House Bill 973 “Mental Health Equitable Coverage”(Alexander, Holliman, Insko, Wainright) and Senate Bill 1434 “Mental Health Parity”(Bob Atwater).

These bills are nearly identical to those introduced in the 2005 session. For group health insurance plans that include mental health coverage, the coverage must be on par with that for physical illnesses. Similarly if substance abuse is covered the coverage must be equitable. The bills use the definition of mental illness outlined in NC general statutes and the DSM-IV Psychiatric Diagnostic Manual. The House bill (HB973) is expected to be heard in the House Health Committee and the House Insurance Committee in upcoming weeks.

The bills, sponsors and cosponsors can be viewed online at the General Assembly website <http://www.ncleg.net>. It’s important to support these bills. Thank the sponsors and cosponsoring legislators. While not mandating that insurance plans cover mental illness, nevertheless the bills are a big incremental step forward in addressing the goal of parity. The first stop is the House Health committee. Committee member and their contact information are listed at the General Assembly website.

**Upcoming NAMI Orange Program
May 12, Church of Reconciliation, 110 Elliot
Rd. Chapel Hill
9:30am Confidential sharing time
10:30 Speaker:Thava Mahadevan, MS
Director, Cross Disability Services of Orange
County**

“Our mission is to empower and assist people with multiple disabilities to live in the community of their choice, achieve personal responsibility, and gain an enhanced quality of life by providing an array of clinically appropriate, person-centered and flexible treatment, rehabilitation and support services”

New Resource for Psychiatric Advance Directives

Introduced in the 1990s, psychiatric advance directives, commonly called PADs, offer a way for people with mental illnesses to plan ahead for a mental health crisis, such as those that can occur in schizophrenia or bipolar disorder. PADs are legal documents that typically specify treatment instructions and appoint a designated health care agent, among other actions.

A newly launched online national resource center is now providing comprehensive information on PADs.

The National Resource Center for Psychiatric Advance Directives (NRC-PAD) developed by psychiatric and legal experts at Duke University Medical Center and the Bazelon Center for Mental Health Law went on line in January, 2007. Its web address is <http://www.nrc-pad.org>

According to its developers, the center represents the largest compilation in the United States of information regarding PADs.

Most mental health consumers and clinicians favor PADs, but their actual rate of use has remained fairly low the center developers say. They hope the website will improve usage rates by serving as an online gathering place for people with mental illness and their families, as well as for clinicians, to learn about PADs and how to complete the documents. They say the website will also be useful for government policy makers involved in discussions about PADs.

“Advance directives for mental health treatment raise a number of complex questions” said Marvin Swartz, MD, head of social and community psychiatry at Duke and co-director of NRC-PAD. “In general, there has been confusion about what the law allows, as statutes vary from state to state. There also has been confusion about how to complete the forms; when the directives go into effect; and who is supposed to read and comply with them. Patients have long needed a place like this new center that can serve as a comprehensive source of information”.

The website provides a state-by-state breakdown of PADs related statutes and listings of local resources for patients and families, discussion forums, answers to frequently asked questions, testimonials from people who have used PADs, and information on the latest research findings concerning mental health issues.

The website also includes an audio visual presentation, organized by topic, to explain the process of creating an advance directive.

“As a society, we value the rights of individuals to make their own choices about medical treatment, including mental health care”, said Jeffrey Swanson, Ph.D, an associate professor of psychiatry and behavioral sciences at Duke who will serve as lead researcher for the NRC-PAD. “But we also believe in taking care of people who are very ill, especially during times when it may be difficult for them to ask for help or say what type of treatment they would want.”...

“Sometimes the desire to care for the severely ill collides with valuing the patient’s right to choose their course of medical treatment. Ideally, both values could be met in the use of psychiatric advance directives” Swanson said.

Source: <http://www.nami.org>

Request for Volunteers

We still really need a couple of volunteers to help monitor Orange County Board of Commissioner meetings and other meetings that address mental health related housing, funding, or other issues. This is not a time intensive responsibility; it should only require attending a few meetings over the course of the next year. Please call Lisa Hamill at 933-8941 if you are interested in helping out with this.

Community Resources

Battling depression?

The Blue Sky Depression Support Group is now forming. Wednesday 7-9pm, Rm one of the Carrboro Century Center, 100 S. Greensboro St. Call 929-6278 for information.

Recovery Inc Wednesday at 7pm and Friday at 10:30am at Caramore Community, 550 Smith Level Rd. Chapel Hill. Structured peer support meetings cover methods for managing anger, reducing stress, controlling depression and anxieties. Call 918-3677 for more information.

Call Center Consumer-run call center. Monday-Friday 8am-6pm. Focus on providing accurate information to consumers, families, professionals, and providers regarding access and other issues surrounding mental health reform as well as general mental health information and referrals. 1-800-897-7494. callctr@mha-nc.org

Family-to-Family NAMI educational program for families of persons with serious mental illness. Helps family members to better understand and support their ill relative while maintaining their own well being. Free. 12 weekly classes. In Orange County contact Susana Burns (932-4304), in Durham Selde (225-0808) or Cheryl (531-7683).

Family Advocacy Network (FAN). Individual and group support for parents and caregivers of children with emotional, behavioral or mental health challenges. Call 942-8083, Cindy Wilkins or Linda Boldin.

Peer Parent Program. Confidential support network for families of children with emotional, behavioral or mental health challenges. 942-8083, Cindy Wilkins.

Confidential Sharing Group second Saturday 9:30-10:30am at Church of Reconciliation, before the NAMI Orange program. Family members and consumers welcome. Information: 929-7822.

Duke Community Bereavement Services. Support for those who have experienced a loss due to suicide. 919-644-6869

Caramore Community, Inc. Rehabilitation program for NC citizens over age 17 with severe mental illnesses. Provides employment and independent living training services. 550 Smith Level Rd. Chapel Hill. Phone 919- 967-3402. www.caramore.org

Club Nova. Psychosocial rehabilitation clubhouse serves Orange county residents over age 18. Its mission: to “promote and provide opportunities for adults with mental illness to lead meaningful productive lives of their choice in the community”. Transitional employment program. Thrift shop. 103D West Main St. Carrboro, 919-968-6682.

XDS-Cross Disability Services. Serves persons aged 17 and older who have multiple disabilities of mental illness, developmental disabilities and/or substance abuse disorders. Multidisciplinary team provides a variety of services. . Phone 919-490-5503. Email thava@xdsinc.org

On the Web

www.ncmentalhope.org Links to many mental health related organizations, NC legislative issues, discussion groups, support

www.dhhs.state.nc.us/mhddsas North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services

www.nrc-pad.org Psychiatric Advance Directives National Resource Center, at Duke

Faith communities and mental health

www.eminnews.org

www.faithnetnami.org

www.mentalhealthministries.net

www.pathways2promise.org

www.pc.usa.org/nationalhealth/ministries

www.mentalhealthrecovery.com

Resources from Mary Ellen Copeland, educator and developer of the WRAP program



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NAMI Orange County is a local affiliate of the National Alliance on Mental Illness, dedicated to support, education and advocacy on behalf of individuals with mental illness and their families. The Board of Directors meets every other second Sunday 3-5pm conference room, 750 Weaver Dairy Rd. Meetings are open to the membership.

Local Helpline: 919-929-7822

North Carolina Helpline: 1-800-451-9682

Local Website: www.namiorange.org

State: www.naminc.org

National: www.nami.org

Calendar

Saturday April 14 NAMI Orange Church of Reconciliation, 110 N. Elliott Rd. 9:30AM, Confidential sharing time. 10:30AM Attorney Sandra Herring, Estate planning trust issues.

Saturday April 28. 14th Annual Schizophrenia Treatment and Evaluation Program(STEP) Symposium. 8am-1pm. Friday Center, Chapel Hill. “Cognitive Remediation: Improving Quality of Life and Illness Outcome”. Breakfast buffet and lunch served. Info and registration: 919-966-8990, Janice Linn.

Saturday May 5 NAMI WALKS IN THE TRIAD. See article page 5. NAMI Orange team “Courageous Stigma busters” www.nami.org/namiwalks2007

Sunday May 6 Board of Directors. 3:00-5:00pm. Carol Woods Conference Room.

Thursday May 10 “I’m Still Here”, film showing and panel discussion 6:30pm. Century Center Carrboro (see article page 4)

Saturday May 12 NAMI Orange meeting Church of Reconciliation, 110 N. Elliott Rd. 9:30am, Confidential sharing time. 10:30am Speakers: Thava Mahadevan, Director Cross Disabilities Services and his team.

Tuesday May 15 Coalition 2001 Advocacy Day at the Legislature. Contact Lisa Hamill for information and carpooling. 933-8941

Saturday June 9 NAMI Orange meeting, Church of Reconciliation, 110 N. Elliott Rd. 9:30am, Confidential sharing time. 10:30am Program “Meet the Doctor” with John Gilmore, MD

June 20-24. NAMI National Convention San Diego CA. Information: www.nami.org

NAMI Orange County MEMBERSHIP/DONATION FORM

Annual dues are \$35.00 for the calendar year(January–December). Open Door membership (\$3.00) is available for those with limited incomes. Dues give you membership at the local state and national levels of NAMI. Your donations over and above annual dues are used to support our local programs. Make check payable to NAMI Orange County. Mail with completed form to NAMI Orange County, PO Box 4201, Chapel Hill, NC 27515

Thank you for your support!

NAME_____ PHONE:_____ EMAIL_____

MAILING ADDRESS_____

___Annual membership (\$35.00 regular or \$3.00 open door)

___Donation (tax deductible)

___ Please remove my name from your mailing list



NAMI Orange County is a 501(c)(3) organization. Your donation is tax deductible.

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www.namiorange.org
Helpline: 919-929-7822



Open Your Mind
Mental illnesses are brain disorders