



National Alliance on Mental Illness

NAMI Pennsylvania

Wilkes-Barre Office Quarterly Newsletter

The Official Newsletter of NAMI-PA Wilkes-Barre

January, 2013

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A Letter From Our President

Dear NAMI Supporters,

Happy New Year!

Thank you for your support this past year. Pennsylvania, like many states, has struggled to address a decrease in revenues and a large state deficit. This has resulted in a 10% cut in mental health and other human services. At the same time, counties are having to do more with less. This is why NAMI needs your continued support so that we may be a voice for individuals and families who desperately need services. If you have not joined or renewed your membership, please do so. Remember, there is strength in numbers!

Sincerely,

Paul J. Radzavicz, President
NAMI-PA Wilkes-Barre Chapter

P.S. Please find a listing of this past year's activities on the last page of this newsletter.

General Assistance Elimination

This year's state budget eliminated a \$205.00 general assistance stipend to many individuals with mental disabilities. Some of them used this stipend to purchase their basic hygienic needs, such as soap, shampoo, deodorant, razors, shaving cream, toilet paper, etc. Many also used it to purchase food for their pets. Unfortunately, many had to give up their pets; in some instances, their only source of comfort and companionship.

The National Alliance on Mental Illness, Luzerne/Wyoming counties, and the Certified Peer Specialists of Community Counseling and Northeast Counseling are spear-heading an effort to help these individuals obtain some of their basic needs. If you are able to donate any of these items, it would be greatly appreciated. Please contact our office at (570) 371-3844 or (570) 371-3845.

CONTACT US!

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Final Phase of Medicaid Managed Care Expansion Begins Soon

From 'Health Law PA News'

Beginning in January 2013, DPW will begin the final phase of its statewide expansion of HealthChoices (what DPW calls mandatory managed care for most Medicaid consumers). HealthChoices now exists in 45 counties and 4 zones: Southeast, Southwest, Lehigh/Capital, and New West. The remaining 22 counties in the state will make up the HealthChoices New East Zone that DPW is planning to go into effect on March 1, 2013.

In January, DPW will mail out managed care plan enrollment information to over 205,000 Medicaid consumers in Bradford, Carbon, Centre, Clinton, Columbia, Juniata, Lackawanna, Luzerne, Lycoming, Mifflin, Monroe, Montour, Northumberland, Pike, Schuylkill, Snyder, Sullivan, Susquehanna, Tioga, Union, Wayne, and Wyoming counties. Consumers will have until February 7th to enroll into one of the three available plans. Those who do not enroll in a plan by February 7th will be auto-assigned to a plan effective March 1st. The three plans available to consumers in the New East Zone are: Amerihealth Northeast, CoventryCares, and Geisinger Health Plan Family (GHP Family). Those currently enrolled in a Voluntary Plan with Amerihealth Mercy can either stay in the plan they are in (in which care they will move into HealthChoices with Amerihealth Northeast effective March 1st), or they can switch to a new plan (by enrolling no later than February 7th)

that will go into effect March 1st. Those currently enrolled in a Voluntary Plan with United Healthcare Community Plan will not be able to stay in this plan since it is no longer doing business as a Medicaid plan in the Zone as of the end of February. As a result, all those in United Healthcare will need to enroll in one of the three available plans by February 7th or else they will be auto-assigned to a plan.

As a reminder, certain Medicaid consumers in the New East Zone will not be affected by the expansion of HealthChoices because they are exempt from Medicaid managed care. To be exempt, consumers must fit into one of these groups:

- Full Dual Eligibles: those on Medicare who also have full Medicaid through their ACCESS card.
- Aging (PDA) Waiver participants
- LIFE Program participants
- HIPP participants: consumers who are also enrolled in employer-sponsored health insurance for which Medicaid is paying the premium.
- Women eligible for Medicaid under the Breast & Cervical Cancer Prevention and Treatment Program (BCCPT)

Consumers should received their informational packets around January 10, 2013.

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An Open Letter From NAMI Regarding Sandy Hook Elementary

Along with the rest of America, NAMI is devastated by the Sandy Hook Elementary School tragedy. Our thoughts are with the community and families.

As you can imagine, NAMI has been speaking with the media. Here are some of our key messages and talking points:

As Americans, we must embrace a sustained effort to ensure solutions to our mental health crisis.

- This is a horrific tragedy. Along with other Americans, our hearts go out to all of the families who have lost loved ones.
- It's hard now to think of any good that might come from this situation. However, if there is a silver lining, it could be that it forces us as Americans to face this crisis we have in our country, to confront the stereotypes we embrace, to take steps to learn more about mental illness, and what we can do to ensure that people have the care and treatment they need.
- Violent Tragedies should not have to occur before the country realizes that mental health care must be a priority.

We must prioritize the promotion and availability of early intervention, treatment services, and supports for individuals and families.

We must intervene earlier and ensure that essential mental health services

and treatment are available at the earliest stages. We must demand:

- Ease of access to mental health professionals;
- Earlier and more assessable treatment; and
- Access to effective treatments and strategies.

Family education and support must be available to those in need.

- Families affected by mental illness need our help.
- Millions of Americans face the day-to-day reality of caring for a family member living with mental illness. It can be overwhelming.
- The reality is that when families get support—from many directions and programs—outcomes in all areas are improved.
- Families don't always know where to go to get help or how to cope.
- Education and support programs for families affected by mental illness have the power to change lives for the better.

NAMI
(The National Alliance on
Mental Illness)

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First CIT (Crisis Intervention Team) Class

The first CIT training class in Luzerne/Wyoming Counties will be held at the Public Safety Center at Luzerne County Community College the week of March 18—22 inclusive. CIT is an innovative program that improves the way first responders engage individuals ex-

periencing a mental health crisis. CIT programs are built on partnerships between local first responders, mental health agencies, mental health providers, and mental health advocates. NAMI-PA Wilkes-Barre Chapter is proud to be a part of this innovative program.

Bullying In Childhood Most Often Perpetrated by Children with Mental Health Disorders

(From Medicalnewstoday.com)

Children diagnosed with mental health disorders were three times more likely to be identified as bullies, according to new research presented at the American Academy of Pediatrics (AAP) National Conference and Exhibition in New Orleans.

Bullying is a form of youth violence defined as repetitive, intentional aggression that involves a disparity of power between the victim and perpetrator. A 2011 nationwide survey found 20% of U.S. high school students were bullied during the preceding 12 months. And while it is well-established that victims of bullying are at increased risk for mental health illness and suicide, few studies have investigated the mental health status of those who do the bullying.

In the study, “Association Between Mental Health Disorders and Bullying in the United States Among Children Aged 6 to 17 Years,” researchers reviewed data provided by parents and guardians on mental health and bullying in the 2007 National Survey of Children’s

Health, which included nearly 64,000 children.

In 2007, 15.2% of U.S. children were identified as bullies by a parent or guardian. Overall, children with mental health disorders were three times more likely to bully other children. A sub-analysis by type of mental health disorder found that children with a diagnosis of depression were three times more likely to bully, while a diagnosis of Oppositional Defiant Disorder (ODD) was associated with a six-fold increase in the odds of being identified as a bully.

“These findings highlight the importance of providing psychological support not only to victims of bullying, but to bullies as well,” said study author Frances G. Turcotte-Benedict, MD, a Brown University master’s of public health student and a fellow at Hasbro Children’s Hospital in Providence, RI.

“In order to create successful anti-bullying prevention and intervention programs, there certainly is a need for more research to understand the relationship more thoroughly, and especially, the risk profile of childhood bullies.”

Effective Strategies to Prevent Teen Depression and Suicide

(From medicalnewstoday.com)

Untreated depression is one of the leading causes of teen suicide, and signs of depression can also be a warning that a teen is contemplating suicide. In an article published in the quarterly journal, *The Prevention Researcher*, University of Cincinnati researchers are describing how positive connections can help offset these tragedies.

In the current issue titled, “Teen Depression,” UC researchers Keith King, a professor of health promotion, and Rebecca Vidourek, an assistant professor of health promotion, report that depression and suicide are “intricately intertwined among teens” in their article, “Teen Depression and Suicide: Effective Prevention and Intervention Strategies.”

The authors reveal that teen suicidal warning signs encompass three specific categories:

1. Behavioral warning signs—traits that teens may display when contemplating suicide include difficulty sleeping or excessive sleeping, changes in school performance, loss of interest in once pleasurable activities, giving away cherished possessions, and expressing thoughts of death or suicide.
2. Verbal warning signs—verbal statements include, “I want to die,” “I don’t want to be a burden anymore,” and “my family would be better off without

me.”

3. Stressful life events—a traumatic event for the teen, such as a breakup, parental divorce, or loss of a loved one.

King and Vidourek also highlight national research that finds that gay, lesbian, bisexual, or transgendered teenagers are at an elevated risk for depression and suicide, possibly because of lack of support systems and social acceptance, as well as greater isolation among peers.

The UC researchers say building strong connections with family, schools, and the community are key to protection against depression and teen suicide. “Research clearly indicates family connectedness helps to prevent teen suicide, even if teens are socially isolated from peers,” write the authors. They add that because teens spend such a large amount of time in school, the authors recommend that schools adopt prevention and intervention programs that include education, early detection, and follow-up programs to address teen depression and suicide.

“As research indicates, the key component to effective depression/suicide prevention is the development of positive social and emotional connections among teens and supportive adults,” the authors conclude in the article. “Thus, getting teens positively connected to positive people and positive situations should remain the goal. “

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NAMI-PA Wilkes-Barre Chapter Activity Report 2012

Meetings Held:

- NAMI Connections.....32
- Family Support.....22
- NAMI Wilkes-Barre Board.....12
- Parents Support.....3

Meetings Attended:

- Mental Health Planning.....8
- Recovery Walk.....6
- CJAB Advisory.....8
- CIT.....3
- NAMI-PA Finance.....4
- United Way.....1
- Name Change.....1
- Block Grant.....1

Event Participation:

- Recovery Walk 2012
- NAMI-PA Wilkes-Barre Open House
- Poetry Readings at the Osterhout Library
- NAACP Diversity Picnic
- Partners in Juvenile Justice
- NAMI-Pennsylvania State Conference
- Family Conference (at the Woodlands in Wilkes-Barre)
- NAMI-PA Wilkes-Barre Candlelight Vigil
- Mental Health Month Proclamation
- Pittston High School
- Mental Health Gets My Vote
- Doctorial Caregiver Survey — Widener University

Trainings Attended:

- Forensic Mental Health
- Dual Diagnosis
- Non-Profit Learning
- CIT Training
- Family to Family
- HIPPA Training Part II
- PHLP
- Community First Conference
- SSDI Seminar
- DASH Grant Writing

Presentations:

- NAMI.....2
- In Our Own Voice (IOOV).....8

Advocacy Calls Received.....63