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## CALENDAR

### January

Family-to-Family Teacher Training Jan. 15-17

### February

Precinct Caucuses Feb. 2  
Legislative Session Starts Feb. 4  
NAMI Research Dinner Feb. 9  
Get to Know NAMI Feb. 11  
Mental Health Rally at Capitol Feb. 16  
Family Support Group Facilitator Training Feb. 19-20  
Second Chance Day on the Hill Feb. 22

### March

Get to Know NAMI Mar. 22

### April

Get to Know NAMI Apr. 12

### May

NAMI Spring Gala May 22

### June

PPD Conference June 22

## Perilous Legislative Session for Mental Health

The Minnesota Legislature will convene on Feb. 4. It promises to be a short session for several reasons. One, there is no money. Two, it is an election year. Both parties have scheduled their conventions where they will pick their candidate for Governor – April 23 (DFL) and April 29 (IR) – and so many political insiders are suggesting that no one will want to be in

session much past these dates.

The health of the state budget is awful. Legislators will be looking at cutting the budget by \$1.2 billion since the Governor has vowed to veto any efforts to raise revenues through taxes. In addition, the following biennium is facing an even larger deficit - \$5.4 billion.

### NAMI State Conference



Keynote speaker Terrie M. Williams (L) is the founder of a national movement to bring more awareness to African Americans about mental illness and available treatments. She spoke at NAMI's State Conference in Bloomington on Nov. 7. For more on the conference and NAMI's Annual Awards, see p. 4.

## Mental Health Rally Set for Feb. 16

Advocates and friends from across the state will gather for a mental health rally on Feb. 16 at Noon in the State Capitol Rotunda. Speakers will include legislators, advocates, families and persons living with a mental illness. Important issues, including maintaining community mental health services, housing, crisis services, and bridging cuts in General Assistance Medical Care (GAMC) will be discussed.

Prior to the rally, a legislative issues briefing will be held at Christ Lutheran Church, 105 University Ave. W. (across the street, north of the Capitol) at 10:00

See "Mental Health Rally," p.2

**GAMC:** NAMI Minnesota is very concerned about the outlook for maintaining funding for mental health services and health care programs. A top priority is to fund basic services - such as medication and basic health services - to the 35,000 plus people on General Assistance Medical Care (GAMC). Knowing that 70% of the people on this program have a mental illness, chemical dependency or both, NAMI is extremely concerned about what will happen to people when this program isn't there. How many people will end up hospitalized, homeless or in jail with critically worsened physical or mental illnesses?

Additionally, the safety net hospitals – ones that serve high percentages of people on GAMC or people without insurance – will lose millions of dollars threatening their viability to continue services that we all use. NAMI has been holding town meetings around the state and is working with several coalitions to try to address this critical issue.

**Mental Health Funding:** Maintaining funding for the 2007 Mental Health Initiative will be another high priority. This includes the infrastructure grants for school-based mental health services, crisis services, supportive housing, cultural diversity and evidence-based practices. Ensuring funding for mental health providers – already an under-funded group

See "Perilous Legislative Session," p.2

## Perilous Legislative Session... con't. from p. 1

– will be on the agenda as well.

**Policy Issues:** Criminal justice issues, such as CIT training for police, discharge planning, mental health courts, discharge planners for the Red Wing facility, and reforming the insanity defense law will be advocated.

NAMI has been working with a group all summer and fall to introduce a bill that will clarify the relationship between mental health day treatment, residential treatment and schools including decision-making related to placement, transportation and educational programs.

NAMI would also like to see parents on the screening teams when a decision is being made as to whether their child will be placed in residential treatment and would like to keep these records private.

**Protecting Access:** NAMI will continue to advocate for more consumers on the drug formulary committee and to protect access to medications. Knowing the budget problems, protecting funding for the Bridges Housing program and the Extended Employment program will be a priority, along with access to PCA services.

Last year the state submitted a report

## Mental Health Rally...con't. from page 1

a.m. Advocates are urged to make appointments with their legislators after the rally to discuss their concerns.

The Mental Health Rally and Day at the Capitol are sponsored by the Mental Health Legislative Network, an organization composed of more than 20 statewide organizations working together to improve the quality and availability of mental health services in Minnesota. For more information, contact NAMI Minnesota, 651-645-2948 or 1-888-NAMI-HELPS.

to the legislature on the acute mental health care needs of children and adults. Carrying out those recommendations or making sure that nothing is done to worsen the situation will be important. This year DHS was required to submit a report for changing the services at the Anoka-Metro Regional Treatment Center and to reduce funding for State Operated Services by \$14 million. NAMI will be watching and responding to proposals.

With the state's budget situation, NAMI doesn't believe it will be able to advance on efforts to address workforce shortage issues, including increasing the number of diverse mental health professionals.

Rep. Welti has asked NAMI to work with him on two bills. One would clarify that colleges should call a student's parents in the event of either a mental or physical health emergency, and the second would require the MN Dept. of Education to recommend mental health curricula to schools.

**Stay Vigilant and Active:** NAMI members are asked to be especially vigilant and active this session. Sign up now, if you haven't already, for the weekly legislative updates. Join NAMI members every Thursday morning at the Capitol to lobby for mental health services. Attend the Day on the Hill. The gains we have made the last couple of years will be lost if you do not speak up. If not you- who?

## Breakfast with Legislators



NAMI members held a breakfast with Rep. Hornstein (at R) on Dec. 8 to discuss issues faced by mental health advocates in the upcoming legislative session which opens on Feb. 4 this year.

## No Kidding, Me Too!



Actor Joey Pantoliano (L) led an anti-stigma event at the Mall of America on Dec. 2. His new nonprofit organization "No Kidding, Me Too!" is comprised of entertainers seeking to educate the public on mental illness. Joining him (from L) are NAMI members Sue Abderholden, Bill Bond and Shelley White.

## Precinct Caucuses to Meet Feb. 2

Precinct caucuses are meetings organized by Minnesota's political parties to begin the process of selecting candidates for the 2010 election and to adopt policy positions to shape the party platform. Caucuses are held in locations across Minnesota and are open to the public. This year the caucuses will be held on February 2 at 7 p.m. NAMI members are encouraged to attend and to bring forward resolutions related to the mental health system. Sample resolutions will be posted on the NAMI Minnesota website in late January. To find the location of your caucus meeting, visit either your political party's website or the website of the Secretary State's Office.

## NAMI Volunteer Named to State Advisory Council

Heidi Nordin, NAMI Minnesota's 2007 Office Volunteer of the Year, has been appointed to the State Advisory Council on Mental Health. Nordin, an Eagan resident, is a systems consultant with US Bank in St. Paul and serves on NAMI's legislative committee. She replaces Eileen Stack as NAMI Minnesota's representative on the Council to complete a four-year term that expires on January 2, 2012. Gov. Pawlenty made the appointment in December.

to eliminate the pervasive stigma of mental illness.

## Community Meetings Held to Discuss Impact of Losing GAMC

On March 1, an important safety net for Minnesotans will lose its funding. General Assistance Medical Care (GAMC) is a health insurance program that provides access to health care, medications and hospitalization for tens of thousands of low-income people in the state. The program serves about 35,000 people at any given time, most of who are adults without children who make under \$8,123 a year and have less than \$1,000 in assets. Nearly 70 percent have a mental illness, chemical dependency or both.

In June, Gov. Pawlenty eliminated 16 months of funding for GAMC. As a result, the program will have no funding beyond March 1. In November, the Minnesota Dept. of Human Services (DHS) announced that people currently on GAMC will be moved automatically to transitional MinnesotaCare for up to six months.

“This is not a solution,” says Sue Abderholden, executive director of NAMI Minnesota. “It’s only a temporary measure so legislators have time to decide what to do. Many people will still lose their health coverage within months or even weeks of March 1.”

Concerned NAMI members in White Bear Lake, Winona, Hastings and St. Cloud have met with local policy makers, health care providers, law enforcement and faith leaders to discuss the situation and what to do about it. Several issues arose out of these meetings.

One major issue is that all GAMC recipients have to either reapply for MinnesotaCare within one to six months

### NAMI Classes Available

NAMI Minnesota will be offering many educational classes for families throughout the state this winter and spring. Please check our website for class offerings and schedules at [www.namihelps.org](http://www.namihelps.org), or call the NAMI office.



Community meetings on the GAMC crisis were held recently in White Bear Lake, Winona, Hastings and St. Cloud. This one was held in Winona on Dec. 7.

of March 1, or they will lose coverage. However, many people on GAMC face chemical dependency, mental illness and homelessness. Many are unlikely to apply for, qualify for, or stay enrolled in MinnesotaCare after their temporary coverage ends.

Both police officers and GAMC recipients at the meetings expressed concern that, without health coverage, many former GAMC enrollees will lack access to preventive care and will end up using emergency rooms, detox centers, jails and other crisis services more heavily.

“GAMC has helped me stay clean and sober for 8 months straight,” said one White Bear Lake man who receives GAMC. “It helps me keep my mental health in check, which is what I need to do to stay out of trouble and in my apartment.”

Another problem is that transitional MinnesotaCare provides fewer benefits than GAMC. It has a \$10,000 yearly cap on coverage for inpatient hospital stays, while GAMC has no cap. MinnesotaCare requires copays of 10 percent, up to \$1,000 per year, for inpatient hospital stays; GAMC charges nothing. MinnesotaCare also has higher copayments for non-preventative doctor visits and prescription drugs.

Abderholden adds, “MinnesotaCare requires people to pay monthly premi-

**Many People on GAMC face chemical dependency, mental illness and homelessness.**

ums. Many people on GAMC don’t have the money to do this, let alone a checking account so they can send in payments every month.” People who miss a monthly premium payment lose their coverage and must wait four months to enroll again.

One county commissioner also pointed out that someone has to prove that they are a Minnesota resident in order to enroll in MinnesotaCare. This is a difficult task for people who do not have a permanent address due to homelessness – and many GAMC enrollees are homeless.

Hospitals are worried, too. Hennepin County Medical Center reported at the White Bear Lake meeting that it could lose more than \$40 million, or about 10 percent of its budget, as a result of losing GAMC. This is because GAMC covers people immediately from the day they apply, so hospitals are not left to pay for their care while they wait for coverage to begin. With MinnesotaCare, hospitals must absorb the costs for any care they provide before the person is enrolled in MinnesotaCare.

Hospital emergency rooms cannot turn people away even if they are uninsured, so HCMC and other hospitals are already discussing cuts in other areas to make up for these anticipated losses. For example, Regions Hospital in St. Paul has decided not to build a new psychiatric unit in large part because it expects to absorb \$24 million in costs after GAMC funding disappears. The plans for the unit had already been drawn up.

For more information, contact Sue Abderholden at (651) 645-2948, ext. 105 or [sabderholden@nami.org](mailto:sabderholden@nami.org).

## NAMI State Conference - Making Strides Together

Over 280 people attended NAMI's State Conference, held Nov. 7 in Bloomington. Titled "Making Strides Together," the conference featured keynoter Terrie M. Williams, author of *Black Pain: It Just Looks Like We're Not Hurting*. Williams is also the founder of the "Healing Starts with Us" movement, an effort to open up discussion among African Americans about mental illness. Her

keynote speech about the cost of silence was incredibly moving, and she also did a workshop on getting faith communities to act more effectively in directing people with mental illnesses to get professional treatment.

The conference featured a dozen workshops. Topics included Illness Management and Recovery, Helping Returning Veterans, Borderline Personality Disorder, Treatment for Co-Occurring Disorders, Jail Release Planning, Working and Not Losing Services, Children and Medications, and When Crisis Occurs. NAMI's Annual Awards were also presented. The winners appear on this page.



Award winners: Cindy Colson, and Pat and Shirley McCarthy.



Award winners: Ruben Rosario, Jayne Tiedemann, Edward Posey, M.D., and Steve Lepinski accepting for the Wasburn Center for Children.



Award winners: Renee Frauendienst, accepting for the Stearns Co. RAP team, and legislators Sen. Kathy Sheran and Rep. Joe Mullery.



Award winners: Perry Schwartz, Karri Eckman, Lisa Fischer, and Dee Lindblom, accepting for Trinity Presbyterian Church in Woodbury.



Terrie Williams (R) talked with workshop participants and signed books after her presentation on "Connecting Faith Communities and Health Care Providers for African Americans".



NAMI Minnesota's board president Karen Lloyd applauds NAMI's 2009 award winners.

### NAMI Minnesota 2009 Awards

#### Provider of the Year

Washburn Center for Children

#### Consumer Advocate of the Year

Lisa Fischer

#### Educator of the Year Award

Jayne Tiedemann

#### Legislator of the Year

Representative Joe Mullery

Senator Kathy Sheran

#### Program Volunteer of the Year

Karri Eckman

#### Office Volunteer of the Year

JulieAnne Bjerke

#### Special Events Volunteer of the Year

Perry Schwartz

#### Media Award

Ruben Rosario, St. Paul Pioneer Press

#### Professional of the Year

Edward Posey, M.D.

#### Benefactor of the Year

Cindy Colson

#### Volunteer Couple of the Year

Pat and Shirley McCarthy

#### Criminal Justice Program

Stearns County RAP Team

#### Faith Community of the Year

Trinity Presbyterian Church



Sharon Autio of MN Dept. of Human Services gave a presentation on acute care mental health needs.



Char Myklebust's workshop was on minimizing problem behaviors in schools.

## Legislative Hearing on Mental Illness and the Criminal Justice System

As many NAMI families know all too well, the Minnesota criminal justice system has become the state's safety net for people with untreated mental illnesses and co-occurring substance use disorders. About 64 percent of people in jail report a recent history of mental health treatment or symptoms, and three-quarters of those individuals have co-occurring substance use disorders.

On Oct. 14, the MN House of Representatives examined these issues closely in an all-day Civil Justice Committee hearing. Testifiers talked about ways to prevent arrests and move people with mental illnesses out of the criminal justice system and into the mental health system. Speakers emphasized that doing this would improve both treatment outcomes and public safety.

The hearing brought out many important messages:

Criminal justice involvement due to untreated mental illness is preventable. Carla Hamand, a forensic social worker in the Olmsted County jail, testified, "Waiting to provide mental health services until a person is in jail ensures that the services are provided in the least appropriate setting at the highest cost."

Accessible and quality mental health services, mobile crisis teams and law enforcement officers with Crisis Intervention Team (CIT) training all play important roles in preventing people



NAMI executive director Sue Abderholden (at left) and other NAMI members testified at the hearing on the criminal justice system on Oct. 14.



Judge Hopper and Judge Leary spoke to legislators about the need for, and effectiveness of, the mental health courts they preside over in Hennepin and Ramsey counties respectively.

from ending up in the criminal justice system due to untreated or under-treated mental illnesses.

Recidivism is preventable. Certain criminal justice practices can reduce arrests and recidivism. Some examples include mental health courts, mental health treatment in jails and prisons and release planning in the jails and prisons.

Brock Hunter, a criminal defense attorney, testified about his successes in working with prosecutors and judges to divert veterans with post-traumatic stress disorder (PTSD) into treatment instead of jail when appropriate.

Barb Schiltz, the Steele County jail release coordinator, testified that her clients are far less likely to end up back in jail than other offenders. Stearns County has a similar release planning team, which has reduced recidivism by about 80 percent among participating offenders.

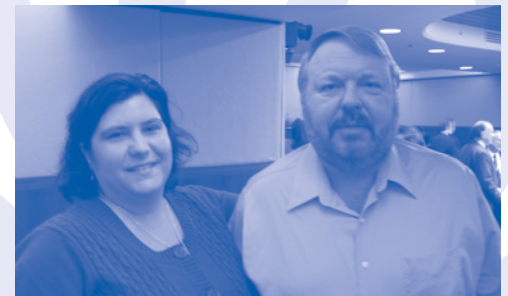
Collaboration is the key. Every testifier confirmed that the problem is complex, and that the solution lies in collaboration across traditional boundaries. People with untreated or under-treated mental illnesses often lack access to adequate treatment. They also have higher rates of drug use and homelessness. And Minnesota's criminal laws, especially drug laws, have doubled in the last 30 years. These factors lead

to disproportionate rates of arrest, convictions, sentencing and recidivism for people with mental illnesses. No single agency, committee or organization can truly address these complex problems alone.

NAMI Minnesota supports several legislative changes in this area, including:

- Support law enforcement training. Create funding for the 40-hour Crisis Intervention Team (CIT) training and for a shorter awareness course about mental illnesses.
- Allow MinnesotaCare to be obtained in jail. People being released to jobs and who lack health insurance should be able to apply for MinnesotaCare while in jail.
- Increase funding for public defenders, mental health courts and jail release planning teams. Each of these plays an important role in reducing the number of people with mental illnesses in the criminal justice system.
- Update the insanity defense. Minnesota's current insanity defense standard is based on a standard established in 1843; we have learned a lot about mental illnesses since then.

NAMI will be working on these critical issues during the 2010 legislative session and beyond. For information or to get involved, please contact Anna Meyer, NAMI Minnesota's criminal justice project director, at (651) 645-2948, ext. 111 or ameyer@nami.org.



Sara Sprenger-Otto and Jerry Webb, were among the NAMI members who gave testimony at the hearing.

## Redesign of State Operated Services Questioned

The 2009 Omnibus Human Services bill required the Dept. of Human Services (DHS), in consultation with stakeholders, to transform the current Anoka-Metro Regional Treatment Center (AMRTC) into an array of community-based programs that have 16 or fewer beds. In early summer, the Governor unallotted over \$5 million dollars from the State Operated Services budget and at this time they are looking at a budget shortfall closer to \$15 million. Thus, DHS is looking to reorganize all of State Operated Services.

Currently, the state operated Community Behavioral Health Hospitals (CBHHs) are operating with about 50% of the 160 beds filled. Of these, assessments indicate that about 50% of the patients meet the criteria for inpatient acute level of care. Of the 10 CBHHs, 5 are certified to accept Medicaid or Medicare payments. The revenue from creating the 16-bed CBHH facilities is far below forecasts, even without the unallotments and cuts following the 2009 session.

The NAMI board sent a letter to Commissioner Ludeman and Asst. Commissioner Sulik on Oct. 15 expressing its concerns that the redesign of State Operated Services has not been consumer focused and that people living with mental illnesses, their families and community mental health providers have not been invited to participate in the process. Any changes to the mental health system must be made – not only in consultation with – but in collaboration with people with mental illnesses and their families.

### Updated Criminal Justice Booklet Published

NAMI Minnesota has updated its booklet “Advocating for People with Mental Illnesses in the Minnesota Criminal Justice System.” The 60-page booklet can be downloaded at [www.namihelps.org](http://www.namihelps.org), or obtained through the NAMI office.

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**Currently, the state operated Community Behavioral Health Hospitals are operating at about 50% of capacity.**

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The process to date has been inadequate in collaborating with those whose lives would be most impacted. NAMI received an invitation on Sept. 30 for a meeting to be held Oct. 8 where it was to be informed about the department’s plan and asked for input. However, decisions had already been made, but not disclosed at the meeting, to close the Cold Spring CBHH and to make it a specialized residential service as we learned in an e-mail less than a week later.

NAMI Minnesota called upon DHS to postpone the restructuring deadline until an inclusive and effective process was established. In this more transparent and inclusive process, State Operated Services would serve as a participant and as one provider of safety net services but not the planner and architect.

A hearing was held in the House Health Care and Human Services Policy and Oversight Committee in October. DHS was to present an update on their redesign plans for AMRTC and all of State Operated Services, however, nothing new was revealed. Sue Hanson, chair of NAMI’s legislative committee, and Sue Abderholden, NAMI’s executive director both testified about the need to include individuals with mental illnesses and their family members in developing the redesign.

Sue Hanson stated in her testimony, “Please include us in a decision that directly affects us. We, consumers and family members, need to be part of this process of restructuring. This whole process needs to be more transparent.”

NAMI and other advocacy and mental health groups did then meet with DHS.

Plans are underway to obtain input from the different regions of the state and to formally engage all stakeholders, including mental health advocates. As of the end of December no plans have been released other than closing the Cold Spring CBHH. Advocates strongly believe that a consensus needs to be developed on the role of State Operated Services, the identified needs in each region and how State Operated Services can work with community providers to meet them, and how the needs can be met most efficiently and cost effectively.

Meetings will be held during January and February in each of the Adult Mental Health Initiative regions and NAMI members need to attend. Go to [www.namihelps.org](http://www.namihelps.org) for details.

### Advocacy Awards Celebrated



NAMI Minnesota’s advocacy work was honored on Nov. 6 with the Council of Nonprofits and MAP for Nonprofits 2009 Award for Excellence. NAMI board and staff attending the event are pictured.



Cliff Poetz and Jean Bender of the ARC of Minnesota presented NAMI executive director Sue Abderholden (center) with an award for system’s advocacy.

# Talk to someone who understands...



**NAMI Connection** is a recovery support group for adults with mental illnesses regardless of their diagnosis. The groups are free of charge and meet weekly for 90 minutes. All are led by trained individuals who are also in recovery – people who understand the challenges firsthand.

NAMI Connection groups offer a flexible and casual environment without an educational format, and no registration or enrollment is required. Join us at a recovery support group meeting. Call the person listed below for the meeting day, time and place.

## **NAMI Connection recovery support groups meet in the following areas:**

Brainerd: Lori – 218-831-4248

Cambridge: David – 763-691-1825

Crystal: Calynn – 763-560-1394

Duluth: Sharyl – 218-879-4978

Eagan: Cristina – 651-283-4821

Grand Rapids: Al – 218-244-7142

Little Falls: Karrie – 320-632-5622

Mankato: Julie – 507-317-3595

Minneapolis North: Mathea – 651-645-2948

Minneapolis South: Mathea – 651-645-2948

Minneapolis Uptown: Tonda – 952-220-0725

New York Mills: Maureen – 218-385-3689

Pine River: Annett – 218-838-5221

Roseville: Will – 651-578-3364

Winona: Richard – 507-454-5472



**NAMI MINNESOTA AND THE UNIVERSITY OF MINNESOTA'S  
8TH ANNUAL RESEARCH DINNER | February 9, 2010**

5:30 p.m. Seating, 6:00 p.m. Dinner & Program  
Zuhrah Shrine Center, 2500 Park Avenue, Minneapolis, MN 55404



NAMI Minnesota is pleased to bring you the newest information on research. This year four doctors will present their latest findings, introduce new studies that are underway and answer questions. Join us for an evening of information and hope.

**Studies on the Prevention of Drug Abuse and Anti-Social Behavior in Children**

**Gerald August, Ph.D. - Clinical Director of the Clinic for Attention Deficit and Learning Disorders**

Dr. August is from the Fairview-University Medical Center. In recent years he has expanded his scientific inquiry to include the prevention of drug abuse and antisocial behavior, where early childhood behavioral problems, like ADHD and aggressiveness, are conceptualized as potential risk factors. At the present time, Dr. August is principal investigator of two federally funded research initiatives (NIDA, CSAP) in which he is conducting efficacy trials of the EARLY RISERS Drug Abuse and Violence Prevention Program among high-risk children living in rural and urban communities.

**Bipolar Disorder Update**

**Mark A. Frye, M.D. - Professor of Psychiatry Mayo College of Medicine, Rochester MN and Director of the Mayo Mood Clinic and Research Program**

Dr. Frye is the Director of the Mayo Mood Clinic and Research Program. His clinical interests are in bipolar disorder, depression, and alcoholism with a research focus on genomics, brain imaging, and neuroendocrinology of mood disorders and alcoholism.

**Psychosis Update: What's New at the U**

**Stephen Olson, M.D. - Director of the Schizophrenia and Psychosis Program**

A discussion of new findings, interventions, and services related to schizophrenia at the University of Minnesota. Topics to be covered include computer-based brain training and the U's First Episode Program.

**Medication Crossover**

**S. Charles Schulz, M.D. - Head of Psychiatry, University of Minnesota**

Many medications that have been routinely prescribed for one diagnosis are now prescribed for other illnesses. Why is this happening? Is there research behind this practice? Does this tell us something about how the brain works?

To register, go to [www.namihelps.org](http://www.namihelps.org), or use the clip-out below. Find map on our website – Free parking

**RESEARCH DINNER RESERVATIONS**

**The cost is \$35 per person. Please register by Feb. 4.** Call NAMI at 651-645-2948 for more information.

Name (s) \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

**Payment Method:**

You may choose one of the following payment methods to register for the conference:

Check enclosed  VISA  Mastercard  American Express

Cardholder Name \_\_\_\_\_ Card Number \_\_\_\_\_ Expiration date \_\_\_\_\_

Send to: NAMI Minnesota, 800 Transfer Road, Suite 31, St. Paul, MN 55114 or register online at [www.namihelps.org](http://www.namihelps.org)

## NAMI Connection Adds Six New Support Groups

Twenty people earned the distinction of becoming NAMI Connection support group facilitators following a weekend training Nov. 13-15. Through the commitment of these volunteers, six additional NAMI Connection groups have started. The new groups are in Little Falls, Pine River, Crystal, New York Mills, Duluth and Uptown Minneapolis.

More NAMI Connection facilitators were also added to the groups in Grand Rapids, Roseville, Brainerd and Minneapolis. Winona's NAMI CARE support group has also become a NAMI Connection group. For more information, see page 7 of this issue of the Advocate.

## Grants Allow Outreach to Children, Older Adults

Two recent grants will allow NAMI to target needed education and support efforts for two populations. One will help with outreach on the needs of older adults with mental illness. The other will allow more efforts to support and advocate for children with intensive needs.

### NAMI Minnesota Affiliates

NAMI Anoka County: Timothy Janka 612-669-5111  
NAMI Austin Area: 1-888-NAMI-Helps  
NAMI Carver County: Karen Hoernemann 952-955-2244  
NAMI Dakota County: Connie Johnson at 952-432-9278  
NAMI Duluth Area: 1-888-NAMI-Helps  
NAMI Forensic Network/MN: JoAnn Zwack 651-484-8218  
NAMI Goodhue County: 1-888-NAMI-Helps  
NAMI Grand Rapids Area - 1-888-NAMI-Helps  
NAMI Hennepin County - 1-888-NAMI-Helps  
NAMI Iron Range: Dan Kotnik 218-741-3900  
NAMI Mankato: Julie Soper 507-317-3595  
NAMI Meeker County: Marilyn Anderson 320-693-0468  
NAMI North Central Region :1-888-NAMI-Helps  
NAMI Northwoods Beltrami: 1-888-NAMI-Helps  
NAMI Ramsey County: 1-888-NAMI-Helps  
NAMI St. Cloud Area: 1-888-NAMI-Helps  
NAMI Scott County: Janet Williams 952-890-1669  
NAMI Southeast MN: 507-287-1692  
NAMI Southwestern MN: Mary Cook 507-376-3634  
NAMI Tri-County: Pat McCarthy 507-835-7036  
NAMI Washington County: Bob Rafferty 651-439-3800  
NAMI Western MN: George Barr 320-325-4211  
NAMI West Central MN: Maureen King 218-385-3689  
NAMI Winona: Helen Newell 507-494-0905



Twenty new NAMI Connection support group leaders were trained Nov. 13-15, expanding the program to new areas of the state.

## Keeping Families Together Resource Guide & DVD

The newly published Keeping Families Together Resource Guide, an 82-page guide for families to understand intensive treatment options for children with mental illnesses, is available free through the NAMI office.

A 30-minute DVD titled Keeping Families Together - Understanding the Legal and Family Perspectives on Voluntary Placement is also available free. They can be ordered by contacting the NAMI office. Donations for postage will be accepted.

## Did You Know that in 2009 NAMI Minnesota...

- Offered 144 free classes on mental illness, attended by 1,561 people
- Provided over 40 ongoing support groups for families and consumers
- Utilized 275 volunteers who worked over 8,000 hours
- Won a national award for Outstanding State NAMI
- Was featured in 1,500 articles in over 250 publications
- Brought 22 trainings to jail and corrections staff, educating 519 workers
- Won the Council for Nonprofits and MAP for Nonprofits Excellence Award for its Advocacy work

## Give to the Max Day is Huge Success

NAMI Minnesota raised \$20,500 on Give to the Max Day, Nov. 17! The funds were raised during a single day of giving with no transaction fees through the GiveMN website. Over \$14 million was raised for Minnesota nonprofit organizations statewide, and matching funds of \$500,000 were divided among all the organizations. Thank you so much for participating!

## Gift for LGBT Outreach

A recent donation from All God's Children Church to NAMI Minnesota will be used to begin expanding its outreach to the LGBT community. NAMI has a LGBT page on its website that offers links to services and resources, as well as numerous fact sheets. This year NAMIWalks Minnesota also had the first LGBT walk team in the country.

## After Attending a NAMI Class Participants said...

- I have a better understanding of mental illness – 96%
- I learned new skills – 94%
- I feel more hopeful – 90%
- I have a better understanding of the difficulties faced by my loved one – 95%

### NAMI Minnesota Board of Directors

Karen Lloyd, President  
William Bond, 1st V. President  
Kevin Damond Johnson, 2nd V. President  
Scott Craven, Treasurer  
Barb Lindberg, Secretary

Judith Bemis	Steve Larson
Therese Blaine	Claire McLean
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## GRANTS KEEP NAMI GROWING

### **BENEFACTOR (\$500-\$999)**

- Fawcett Family Fund of The St. Paul Foundation – General operating

### **ADVOCATE (\$1,000-\$4,999)**

- CentraCare Health Foundation – Six classes
- Gudorf Family Foundation – General operating
- Open Door Foundation – General operating
- The Simmet Foundation Foundation – Education & support in East Metro
- Terhuly Foundation – General operating
- Thompson Family Foundation – General operating
- Elizabeth & Emma Wexler Fund of the Minneapolis Foundation – General operating

### **VISIONARY (\$5,000-\$9,999)**

- Disabled American Veterans Charitable Service Trust – Vet Connections outreach and support
- Foster Family Foundation – General operating
- PhRMA – NAMI's State Conference
- SW Minnesota Adult Mental Health Consortium – Support and education in SW Minnesota
- Stanley Family Foundation – General operating

### **IRIS CIRCLE (\$10,000+)**

- Extendcare Foundation, Inc. – Mental health education for older adults
- The St. Paul Foundation, Ralph R. Kriesel Foundation – African American outreach program

## **Mark Your Calendar for NAMI's Spring Gala**

The NAMI Spring Gala will be held May 22, at the Metropolitan Ballroom, featuring exciting music, fantastic food and a great silent auction. Watch for more on the Gala in the next issue of the Advocate.

## **Abderholden Honored**

NAMI executive director Sue Abderholden received the Distinguished Service Award from the Minnesota Council of Child Caring Agencies on Nov. 12. The award honored her advocacy for children with mental illnesses.

Abderholden thanked parents of children with serious mental illnesses, "for their willingness to tell of the difficulties they face, their courage to speak up and share their stories, their creativity in developing solutions, their tenacity to be in

## **NAMI Minnesota Meets All Charities Review Standards**

The Charities Review Council has completed its 2009 review and announced that NAMI Minnesota "Meets All Standards" for accountability for charitable giving. The Council reviews nonprofit organizations in the areas of Public Disclosure, Financial Activity, Governance and Fundraising and maintains a Smart Giving Network. To read a copy of the review, go to [www.namihelps.org](http://www.namihelps.org) and click on the Meets Standards logo.

### **In Memory of**

KATHERINE BRACKEY  
From  
Nancy Heidal

JIM HUBERTY  
From  
James & Bonnie Erickson

PAMELA FRITZ  
From  
Cecil Ross

JEANETTE SAUTER  
From  
Carol Chervany  
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JOAN SCHILLING  
From  
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VERN HOGAN  
from  
Anita & John Speltz

DAVID DRAKE  
From  
Jerry & Patricia  
Gelbmann  
Leilani Drake

### **In Honor of**

Kurt Rousseau  
From  
George Jr. & Susan  
Herman  
Jeffrey Rousseau

Bev Chapla  
From  
Duane & Judy  
Dittberner

Alexandra Lape's  
50th Birthday  
From  
Rebecca Maranda



Mary Regan of the Minnesota Council of Child Caring Agencies presents the Distinguished Service Award to NAMI's executive director Sue Abderholden.

this for the long haul but mostly for their compassion and strength which allows them to reach out to others and create real movement for change."

## **NAMI Says Goodbye to Grassroots Organizer**

For the last three years NAMI's grassroots organizer Jerad Morey has assisted local affiliates to create change in their communities by providing leadership training, strengthening their structure, enhancing their financial resources and increasing communication. We greatly appreciate Jerad's contributions to the organization, his ability to work well with people, and his willingness to pitch in wherever needed. Jerad also helped in developing new affiliates and increasing membership. We thank him for helping to strengthen our grassroots affiliates. Funding for the position ran out, and Jerad's last day with NAMI was Dec. 22.

## **Twice the Gift**



NAMI held a Holiday Party at the Twice the Gift Store on Dec. 19, featuring good cheer, festive helpers and a chance to share the gift of NAMI's programs with others.

# to eliminate the pervasive stigma of mental illness.

## NEW & RENEWING MEMBERS

(Contributions: Sept. 30 to Dec. 15, 2009)

### Individual & Family (\$3-\$49)

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Joe or JoAnn: 651-484-8218

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Vicki: 612-529-1144

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5:30-6:30 p.m., 3rd Tuesday,  
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Ruth Ann: 218-326-1847

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