Message From Executive Director

Dear Friends,

Thank you all for your contributions to support the mission of SARDA – improving lives affected by schizophrenia-related brain illnesses.

With your support we have accomplished much but
there is so much more to do. Our Schizophrenia App has been a great success and Harvard researchers are collaborating with SARDA to make a difference in lives utilizing the App. We exhibited at the American Psychiatric Association Conference in Atlanta and received many supportive comments from the clinicians who visited our booth. They were in support of the BRAIN Campaign, showed great interest in the Schizophrenia App and the SA and FFS peer support groups. We look forward to exhibiting at the national NAMI conference in Denver next month and always enjoy meeting people at their conference.

We continue to collaborate with many stakeholders in our efforts to advocate for improved access to treatment and the elimination of discrimination. Our BRAIN Campaign video will be aired on Southwest Airlines inflight media during the months of October and November. We are collaborating with thebloc communications to create a video showing the importance of supportive carers in the lives of individuals living with a schizophrenia-related brain illness.

**Congratulations** to the SA leadership, especially Brian Donahue, for the many hours and efforts to support SA – they provided a great workshop in Detroit, MI. where Zach E, Randen O, Sr Lucindia, Nora B and Emmett Biffle were fantastic speakers and trainers.

The SA leaders have worked diligently to distribute and collect surveys to help make the difficult decision to update the name of SA to Schizophrenia Alliance. The new name will help people recognize that they are not their diagnosis as group members work together in their recovery journeys.

Happy Father's Day and best wishes,
Linda Stalters, MSN
Executive Director
Schizophrenia And Related Disorders Alliance of America
The Helping Families in Mental Health Crisis Act Takes a Major Step Forward

WASHINGTON, DC - For families exhausted from battling a broken mental health system, finally there is light at the end of the tunnel.

The House Energy and Commerce Committee, chaired by Representative Fred Upton (R-MI), has scheduled a full committee markup next Wednesday, June 15, to consider HR 2646, the landmark mental health reform legislation introduced last year by Representatives Tim Murphy (R-PA) and Eddie Bernice Johnson (D-TX).

The Treatment Advocacy Center has been closely monitoring the negotiation process and we are pleased that despite the many competing interests, the bill hasn't lost its focus on severe mental illness.

Among the most important reforms we expect to see:

- Reforming SAMHSA: Creates an Assistant Secretary of Mental Health and Substance Use Disorders - who must be a medical doctor - to coordinate efforts and elevate the importance of mental health and severe mental illness in the federal government;

- Funding AOT: Authorizes an additional two years of funding for the Assisted Outpatient Treatment (AOT) federal grant program to catalyze communities to implement this lifesaving, evidence-based treatment program;

- Addressing P&A: Provides important oversight and reporting requirements for federal Protection & Advocacy organizations to ensure that these vital programs are properly focused on their mission;

Other major fixes:
- Codifies the recently released IMD rule allowing for up to 15 days per month of inpatient psychiatric care for many Medicaid beneficiaries and requires the extension of 1115 waivers to provide other avenues to address IMD;

- Takes important steps to begin the reformation of HIPAA, including requiring HHS to pass new regulations detailing when and how mental health information can be shared with families and caregivers;

- Strengthens community crisis response, including grants for the creation of community
bed databases;

- Authorizes grant funding to create new assertive community treatment (ACT) teams.

### Brain Campaign:

**Take the Pledge**

- I will change my language from Behavioral or Mental disorder to Brain disorder.
- I will educate others to change their language from mental illnesses to brain illness.
- I will not use stigmatizing, discriminatory or derogatory language related to brain disorders.
- I will encourage my peers, family members, and colleagues to advocate when they see discriminatory language or practices in the media or in public.
- I will advocate that people with brain disorders have equal and comprehensive health care.
- I will treat all people with brain disorders with respect and compassion.

### Message From SA Administrator

by Brian Donahue

The BIG news is the change for the name of SA to *Schizophrenia Alliance.*
In our survey, it was the overwhelming favorite. Out of 266 responses to our
survey there were 100 votes for **Schizophrenia Alliance**. Thank you all for your participation.

A super SA Workshop was held in Detroit, Michigan on May 21st. Thirty participants enjoyed the training and camaraderie.

I had a chance to meet, in person, two veteran SA group leaders. These 2 were a part of the 4-person team that presented at the Workshop. The day started with the keynote speech by Emmett Biffle. For the next hour our team of veteran SA group leaders presented on every aspect of a SA; from its start in Detroit in 1985; to appropriate skills for the pro support staff and Group leaders; to an actual SA group meeting.

One of the highlights, for me, was to hear a voice in the hall and recognize it as Jim from Michigan, a frequent SA call participant. After the SA presentation, Linda Stalters, Executive Director of SARDAA, spoke about the latest research in the brain illness field.

Another highlight was the presentation of the Joanne Verbanic Award to Sister Lucindia. There is not a more deserving person to receive this award. Sister continues to work tirelessly for SA and for those with brain disorders in her home state of Alabama.

We ended the day by holding a SA group meeting with the 4 presenters and Nora B. It went so well without us rehearsing first. The way it went each of us spoke on a different one of the 6 steps of SA.

If you did not attend this Workshop there is another scheduled for Houston, Texas, in November.

*We are now accepting messages from SA Members to include in the newsletter. Please submit your message to: info@sardaa.org or mail to SARDAA PO Box 941222, Houston, TX 77094-8222 for consideration for next month’s newsletter.*

*Your story might be included in a SARDAA newsletter and might be published in a future edition of the SA Blue Book.*
Sad...an emotion I'm all too familiar with regarding my family member's life. But then I'm reminded that it is hers to live, and I mine. We each have our own individual journey in life, with its challenges and potential for making the best of it, that I must give primary focus to my own journey and, importantly, that it allows sufficient time for self care. As life has it we who stand by a loved one with a chronic illness, our lot in life takes a different path than those families and friends who see their loved one out of the nest and onto independence. They then have years remaining to enjoy, with fewer concerns and responsibilities. I can, and am, there to support, as needed...guide if there is an openness by her to want or need such. I find I must continually reign in my parental instincts to protect, even to 'hope' for improved quality of life for her, rather to be content with just trying to do things which may add some comfort and quality to her life, to the extent that she wants. In struggling with this, I am reminded, and comforted, in the words of the poet Kahlil Gibran...

"Your children are not your children,
They are the sons and daughters of Life's longing for itself.
They come through you but not from you.
And though they are with you, yet they belong not to you.
You may give them your love but not your thoughts.
For they have their own thoughts.
You may house their bodies but not their souls....
You may seek to be like them,
but seek not to make them like you".

This lightens to an extent, my role as 'care partner', a term I learned and appreciate from one who shares the road with us. Our loved ones differ in their potential for what is commonly thought of in our society as success, but maybe there is the possibility of discovering a higher value in life, one which is only attainable by 'select people'.

With heart,
Mary Ross, FFS Coordinator
NIMH Request for Brief Perspectives on the State of Mental Illness Research-Published

Dear NIMH Alliance for Research Progress Member:
This is to alert you to the fact that NIMH has released a Request for Information (RFI) entitled “NIMH Request for Brief Perspectives on the State of Mental Illness Research” in order to invite external viewpoints on the state of mental illness research and NIMH's role in the development of this research. This is for use in developing briefing materials that will represent the full diversity of perspectives on mental illness research for the incoming NIMH Director. NIMH welcomes feedback from investigators, investigator-sponsors, clinicians, advocates, and any other stakeholders who participate in or are otherwise invested in mental illness research. Additional information can be found at http://grants.nih.gov/grants/guide/notice-files/NOT-MH-16-015.html.

Gemma Weiblinger
Director
NIMH Office of Constituency Relations and Public Liaison
LAUGHING MAN!

No, “Beg yer pardon, sir?” No, “Howdy, ma’am?”
No ordinary outlaw; I am who I am!
C’mon: laugh with me!

Y’know I’m past perfect; I’m the laughing man!
Walkin’ tall on Life’s highway; bit hard by the frost;
Run hard through the darkness; I suffer no loss.

No commonplace rebel; no union jack. Oh, yeah: I laugh!
I’m the laughing man; I laugh, my friend!
C’mon ’n laugh!

I bite the old bullet; I chew the old bone.
I walk the line slowly; I’m an army of one: yeah! I laugh!
I cut the line even; I live the life hard.
I fight the good battle; I cut the last card.

So say yer last message; send yer last bill.
I’m the laughing man; I go where I will: and I’m laughin’!
I’m the laughing man; I do what I do: I’m the laughing man!
I go where the wind blow; I forgive with my heart.

Fight against evil, pray without end: Oh yeah! I pray!
I laugh when I’m angry; I laugh when I pray: laugh ’n pray!
The Lord knows my moodiness; kicks back just to say,
“You are my Laughing Man! Have it your way!”
I’m the laughing man. Oh, yeah! I’m the laughing man!

Written by Larry A. of Lansing, Michigan
Sung by Sparrow in the Blues band: Sparrow Sang Blues

Federal Grant Funds Now Available to Launch New AOT Programs!
They said it couldn't happen! As a result of our dedicated advocacy and your support, the federal government has - for the first time ever - allocated $15 million for assisted
outpatient treatment (AOT).

SAMHSA posted a grant announcement earlier this week inviting state and local authorities to apply for up to four years of federal support of NEW AOT PROGRAMS.

Applications are due July 16, 2016.

The Center for Disease Control and Prevention released a new report, Increase in Suicide in the United States, 1999-2014. This profound study tragically shows a 24 percent increase in suicide rates in the U.S. over the past 15 years. The vast majority of people who die as a result of suicide have a brain illness such as schizophrenia, depression, bipolar disorder, and post-traumatic stress.

If there was a study revealing deaths for any other medical condition there would be an immediate declaration of a medical emergency. This study is an urgent call to action for improved access to care, elimination of stigma and improved treatment.

MOROCCAN LENTIL STEW

Enjoy this hearty vegetable stew when the cooler days of yore come again after Labor Days... something to dream about in August! 30 minutes or fewer after the lentils are sorted, simmered until soft and drained, then fresh vegetable broth added with the other ingredients to make this a thick and nourishing stew! This exotically flavored stew can be stretched to feed a crowd when ladled over brown rice or potatoes.

Ingredients:

1 Tbs. olive oil 1 cup chopped onion
3 cloves garlic, minced (1 Tbs.) 1 28-oz. can crushed tomatoes
1 QUART OF prepared lentils 1 15-oz. can chickpeas, rinsed
½ cup raisins or dried currants 2 tsp. ground cinnamon
1 ½ tsp. ground cumin      half tsp. red pepper flakes
Plain nonfat Greek yogurt or Soy yogurt, optional, as a garnish

1. Heat oil in medium frying pan over medium heat. Add onion, and sauté 3 minutes, or until softened and translucent. Add garlic, and cook 1 minute, or until garlic is softened, but not browned, stirring constantly. Transfer to stew pot.
2. Stir in tomatoes, lentils in their veggie broth, chickpeas, raisins/currants and cinnamon, cumin, and red pepper flakes. Season with salt and black pepper, if desired. Bring stew to a simmer over medium heat, stirring occasionally.
3. Reduce heat to medium-low, and simmer, uncovered, 20 minutes, or until mixture is reduced and sauce has thickened, stirring often from bottom to prevent sticking. Garnish each serving with 1 Tbs. yogurt, if using.

From the kitchens of Denise C. Chambellan & Larry Ackerman

The Effects of Deployment
Erika Castle

When it comes to deployment, service members may experience both stress and excitement at the same time. This is also true for family members left behind. Parents, a significant other, and children can feel overwhelmed with a variety of emotions during the duration of deployment for their loved one and excitement upon returning home. But what happens after the service member returns home?

Although there haven’t been enough studies to really explain the experiences and outcomes of service members and their families following a deployment, a book titled Risk and Resilience in Military and Veteran Families briefly discuss this topic in the chapter titled War and Family Life. It is more specifically discussing a sample of 1,046 veterans who were deployed in support of Operation Enduring Freedom (Afghanistan) and Operation Iraqi Freedom. To read more, click here.
An article by the American Academy of Pediatrics titled Mental Health Diagnoses Rise Significantly for Military Children studied approximately 1.6 million children that received care from 2001 – 2015. It concluded over the past 15 years, there has been a 4% increase each year in the number of children being diagnosed with mental health conditions such as anxiety and ADHD. Throughout this period of time, the amount of visits from children regarding mental health conditions doubled. It further explains that the largest increase found includes children who have had thoughts of suicide which increased 22%. To read more of this article, please click here.

It's important to know there are resources for service members and family members post deployment. One of these include Fleet and Family Support Center, to learn more about how they can help, please visit their website by clicking here. For more information after deployment and mental health you can also visit: http://afterdeployment.dcoe.mil. The aftermath of deployment should not be placed on a time table, meaning different stressors or mental health conditions do not always appear right away. If you are having any concerns with a loved one’s mental health or your own, you can also contact your nearest VA health care facility.

*** HOW TO START AND GROW A SA GROUP ***
By Margery Wakefield

Welcome to SA (Schizophrenics Anonymous)! I understand that you want to start an SA group, and that is great! READ MORE

Phone Support Groups

Family and Friends Support Group
Not for Individuals Diagnosed
Every Tuesday - 7 pm Eastern Time
Frequent Guest Speakers

SA Conference Call Groups
Only For Individuals Diagnosed
Every Sunday, Thursday and Friday 7 pm Eastern Time
Monday 4 pm Eastern Time

Spirit of SA Conference Call
For SA Leaders and potential Leaders
First Wednesday of Each Month 7 pm Eastern Time

Toll-free calls
The call in information: (855) 640-8271; Pass code: 88286491#
International Number: (720) 362-6499

NoFearNow.com
SARDA is supporting a photo collage/movement to inspire people to have no fear regarding their mental health issues.

We are looking for people who have or have loved ones who have lived with a brain disorder/mental health issue to share their experience for a new #NoFearNow anti-stigma campaign.

Participating is simple. Simply email to info@lightwoundsmovie.com:
- A photo of you with a person in your life (feel free to hold up a sign saying #NoFearNow)
- A short paragraph of what this person means to you and why you/they have No Fear Now sharing your/their story on experience with a brain disorder/mental health issue.

The photo and paragraph submitted will be featured on NoFearNow.com.

News of Interest

Electroconvulsive Therapy May Help Patients with Treatment-Resistant Schizophrenia- According to an article by the American Psychiatric Association, if a patient with schizophrenia who is not responding fully to medication, they may benefit from a referral for electroconvulsive therapy or ECT. You can learn more information by watching the video and clicking here.
**Marine Corps Commandant Asks APA Members to Join in Care of U.S. Marines** - The Commandant of the Marine Corps, Gen. Robert B. Neller, approached APA's 2016 Annual Meeting in Atlanta the same way he asks his Marines to approach each day - recognize when you need help and ask for it. He said, "We need your help. Come and look at our programs, help us build greater resiliency, learn about our culture". [Read more here](#).

**When the Physical World is Unreliable- Study Finds Visual and Tactile Processing Deficits in Schizophrenia** - A new study in Translational Psychiatry sheds further light on schizophrenia as a sensory disorder and individuals with the condition are impaired in their ability to process stimuli from the outside world. The findings may also point to a new way to identify the disease at an early stage. Because one of the hallmarks of the disease is auditory hallucinations, researchers suspect a link between auditory processing and schizophrenia. [Read more here](#).

**Prenatal Exposure to Nicotine May Increase Risk of Schizophrenia** - Prenatal exposure to nicotine may be associated with an increased risk of schizophrenia, according to a report published today in AJP in Advance. The finding, based on a large population-based case control study of all live births in Finland over a 15-year period, suggests that efforts to decrease smoking during pregnancy may help decrease the incidence of schizophrenia. [Read more here](#).

**Upcoming American Brain Coalition webinar on the Adolescent Brain Cognitive Development (ABCD) Study** - which will be held on Tuesday, June 28 from 2:00-3:00pm EDT. Register here: [https://attendee.gotowebinar.com/register/1383320143258363906](https://attendee.gotowebinar.com/register/1383320143258363906)

Study reported that blood markers indicate high levels of inflammation in people with schizophrenia, bipolar disorder and depression [Read here](#).

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**Editorials**

Name of SA, Schizophrenics Anonymous

By Darrell E. Herrmann

I personally am opposed to changing the name Schizophrenics Anonymous to anything else. I think most people find the term psychosis even more scary and stigma laden than Schizophrenia. As for the schizophrenic as opposed to schizophrenia controversy, I believe it is simply political correctness gone berserk. Some examples of other ic
words that come to mind are alcoholic, diabetic, autistic, quadriplegic, and paraplegic. Schizophrenic is simply one of the vagaries of the English language. I am proud to be a schizophrenic in recovery.

Donate to SARDAA

Help for people with schizophrenia and related disorders.

SARDAA Health Storylines is developed in partnership with the Schizophrenia and Related Disorders Alliance of America, and is powered by the Health Storylines™ platform from Self Care Catalysts Inc.

Now it is easy to record details and specifics about symptoms, medication, moods, and more. Choose what you want to track, and see all the information you need to help you or your loved one who is living with schizophrenia and related disorders.

How to Access SARDAA Health Storylines:
The mobile app is FREE for all users on iOS and Android devices. There is also a web version available, accessible through the browser of any desktop computer or mobile device.

Schizophrenia Health Storylines™

Please take a moment to find out how you can help support SARDAA, not only today but every day - at no extra cost to you!!

When you do your at AmazonSmile, Amazon donates 0.5% of the purchase price to Schizophrenia And Related Disorders Alliance Of America.

IT'S SO SIMPLE: just bookmark this link http://smile.amazon.com/ch/33-1213657, start shopping and support us every time you shop.

Texas and Louisiana Friends:
Re-Enroll Your Kroger Plus Cards Beginning August 1st
You can support SARDAA without spending a penny! Register Schizophrenia and Related Disorders on your Kroger Plus Card and they will donate a percentage to SARDAA each time you use your card.

2015 Re-Enrollment Info in English and Spanish (PDF)
Please register online at www.krogercommunityrewards.com
Link to: Schizophrenia and Related Disorders–Kroger Plus Card 90425

Help Change Lives -- Donate Now

Thank you to those who already made a donation - Every contribution makes a difference.

Sincerely,
Linda Stalters, SARDAA Executive Director
Erika Castle, Newsletter assistant