Register to take the stage!

REGISTER HERE
Watch SARDAA Night Live!
Beginning April 15th
Wednesdays 7:45 pm - 8:45 pm ET
https://www.facebook.com/sardaaorg/

WATCH HERE
Message from SARDA, CEO

Dear Friends,

This is a very challenging time for individuals and families affected by severe neuropsychiatric brain illnesses. Your experiences are uniquely understood by others who have shared struggles. The current situation with the COVID-19 virus impacts you most profoundly as your everyday hardships
are compounded. In the best of times housing can be tenuous and now fears of viral exposure and infection abounds. Anosognosia and other symptoms interfere with understanding the reality of the current situation and the ability to follow protocols.

The SARDAA team continues to provide opportunities to maintain connection and support during these challenging times.

The Schizophrenia Alliance: Psychosis Support & Acceptance (SA) Groups in addition to our regularly scheduled conference call groups, the local groups are NOT meeting in person, but maintaining social distance through connecting with Zoom, Skype or conference call groups. We ask that the group leaders and their members reach out to connect with each other if they are feeling the need for additional time to connect with their SA friends. It is a critical time to connect with each other for support. No one knows better than our unique community how staying at home, sometimes alone is affecting each of you.

Additionally, family members find support on the Tuesday evening Families For Care conference calls.

The SARDAA Night Live! on Wednesday evenings is another opportunity to be connected through sharing of talents and good news. Be sure to register to display your talents (remember you’re among friends). Watch on our Facebook page Wednesday April 15 at 7:45 – 8:45 pm ET.

YOU are NOT alone – SARDAA is available, between your SA and FFC groups and our office at 240-423-9432, we are here for you!

- CDC guidelines for helping yourself and others cope with and manage fear and worry as we move through the stages of COVID-19.

Ways to cope with stress

- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.
- Take care of your body.
  - Take deep breaths, stretch, or meditate
  - Try to eat healthy, well-balanced meals.
  - Exercise regularly, get plenty of sleep.
  - Avoid alcohol and drugs.
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others. Talk with people you trust about your concerns and how you are feeling.
  - If you know people at a higher risk, such as older adults or those with serious chronic medical conditions, including neuropsychiatric brain illnesses help them prepare following this CDC fact sheet.
  - These steps will help you or your loved one navigate best practices if you suspect you or someone close to you may have symptoms of COVID-19.

COVID-19 affects people with severe neuropsychiatric brain illnesses uniquely. Please, let us hear from you about your experiences, challenges, frustrations and successes:

How has staying at home affected you?
Have you had an increase in symptoms?
How have you spent your time?
How have you maintained your contact with your clinicians?
What has been most helpful to you?
What do you want people to know?
What would be helpful to you at this time?

Have a Good Passover in this new Virtual arena.

Sincerely,
Linda Stalters, MSN, APRN (ret)
Chief Executive Officer
Schizophrenia and Related Disorders Alliance of America
Brains on the Beach Virtual Event Replay Now Available for Viewing!

Not able to join us virtually on March 21st for Brains on the Beach? You are invited to learn about solutions to neurological brain disorders that affect over 25 million Americans and over 1 billion people worldwide via virtual replay.

Register [here](#) for the Replay

11 million Americans suffer from schizophrenia or bipolar brain illness with psychosis. These are the most devastating diseases and yet 50% are not treated but left homeless, incarcerated or worse. Still a taboo subject for many – let’s break the silence and talk about what can be done.

**REGISTER HERE**

Judge Steven Leifman - Keynote
Robert Laitman, MD – Keynote
Research & Treatment Panel: Deborah Levy, PhD; Mark Namchuk, PhD; Carlos A. Larrauri, APRN, NP
Policy Panel: Tim Murphy, PhD; Mary Palafox, RN; Linda Mimms, MA
Criminal Justice Panel: William Lawson, MD, PhD; Janet Hays; David Geiger, MEE

**Annual Awards**
Exceptional Media – Richard Gere
Exceptional Clinician – Dr. Michael Mufson
Valiant Researcher – Dr. Robert Freedman
Legislator of The Year - Senator Gayle Harrell
Dr. Frederick Frese Award – Bethany Yeiser
Joanne Verbanic Award - Sue Dutch
Volunteer of The Year – Mary Troy
Message from SARDA, BOD Chair, SARDA Chapter Coordinator

SARDA is opening up applications for $500 maximum grants for caregivers of individuals living with a neuropsychiatric brain illness.

If you are interested in receiving an application, please contact:

Susan Sheena
Susan.S@SARDA.org
Phone: 240-423-9432

Thank you,
Susan Sheena
SARDA Chapter Coordinator
Message from FFC, Families for Care, Coordinator

At this time when we are very much together with our families and loved ones, or apart through no cause of our own, I would like to share a little prayer, of sorts, which relates to this critical challenge facing us. I read it in a little book which has been with me for decades because of the writings particularly meaningful to me. The book is 'A Common Prayer' by Michael Leunig.

“Dear God,
Give comfort and peace to those who are separated from loved ones. May the ache in their hearts be the strengthening of their hearts. May their longing bring resolve to their lives, conviction and purity to their love. Teach then to embrace their sadness lest it turn to despair. Transform their yearning into wisdom. Let their hearts grow fonder.
Amen”

I am apart from my daughter at this time, able only to deliver 'comfort' supplies and wave to her at the front window, but not have contact. At the last visit I wished that I had learned sign language :) I am grateful that she has a protective place to live, with regular meals and other needs met, as she is willing. It is my hope that this is possible for all loved, and vulnerable, ones in our community.

In Heart,
Mary Ross
Message from SA Staff Supporter

Time to Support Your Fellow SA Members
By Sandy Dimitriechik
SA Staff Supporter

Welcome to April! Spring is here, and it is a good time to take a walk outside! There have been some changes due to Coronavirus in the SA meetings, but there are still opportunities to support each other during this difficult time. We have added three temporary conference calls. Here are all the conference calls currently available to SA members:

Sundays, 7PM Eastern Time
Monday, 4 PM Eastern Time
Wednesday, 1 PM Eastern Time
Thursday, 1 PM Eastern Time
Thursday, 7 PM Eastern Time
Friday, 11 AM Eastern Time
Friday, 7 PM Eastern Time
Saturday, 1 PM Eastern Time

Call 1-855-640-8271 and then enter passcode 88286491#.

Thanks to all the facilitators for helping SARDA provide support to people with schizophrenia or related disorders, especially those who lead more than one group!

SA in-person groups are cancelled until the emergency is over. Have you ever thought about using Skype or video teleconferencing? We don’t provide that service nationally, but you can always reach out to your SA group leader to see if that could be set up.
Families For Care Grant Program Launches

SARDA is opening up applications for $500 maximum grants for caregivers of individuals living with a neuropsychiatric brain illness. Our grant program aims to support caregivers during an exceptionally challenging time through small grants of up to $500 according to their need.

Laura’s story:
Less than 3 years after my son was stricken with schizophrenia, my life’s savings were gone and we were broke. The majority of the money went to self-paid intake and therapy appointments at first, then transportation for him to therapist, labs, doctor appointments, hospital deposits and medical payments. It went to hire “sitters” who checked in on him, or stayed with him, so I could work. It
went to medications--upwards of $1,300 for a single monthly injection over 6 months. It went to court and legal fees, parking, cabs, hotels, flights, a supervised housing group home at $5,500-6K per month for nearly a year.

Please donate now to support programs like the Families for Care grant program and all of SARDAA’s life-saving work so that you can help a family like Laura’s.
Donate HERE: https://sardaa.org/donate2/

Donate Here>>

SARDAA needs volunteers!

Social Media Team
Are you or someone you know a Social Media expert?
Join the SARDAA Social Media Team!
View Requirements HERE

Call Center Team
We are seeking volunteers experienced in working with individuals and their loved ones affected by psychosis brain illnesses to answer phone inquiries.

Communications Team
We are seeking volunteers to assist the Communications Team making calls to build database for resources.

Please contact: Angel 240-423-9432 or angel.white@sardaa.org

Personal Story of SA member

Billy Warsky
I was born in Georgia and went to a religious school growing up. I did not do well in this school; I mostly kept to myself and was not involved in any sports. In 1977 I graduated high school and then briefly attended college. After a few months I decided to drop out and I went to work.

I began to party with the people I work with and got addicted to drugs and alcohol. During this time, I also got married and now have two children. I had some troubles with the law and went to jail for the night. I began to attend AA and NA and became clean and sober in November of 1989.

When I was about 29 years old, I was diagnosed with schizophrenia and was hospitalized several times. While I was at one of the hospitals I was introduced to SA and began calling into the conference calls that are held five days a week. I also learned about CHAPS and the Journey Center and began attending regularly and, with help of staff started a SA meeting at CHAPS. I am the most happy, joyous and free than I have ever been in my life. Thank you, SA, CHAPS and the Journey Center.

Book Review Submission Rules

By Sandy Dimiterchik
I enjoy my job as a book reviewer for SARDAA, and thank all the people who have submitted their works for doing so. However, I need to specify some rules about whether I will read and/or review your book.

As a SA Staff Supporter, the audience I have in mind are people who currently attend SA groups, or anyone diagnosed with schizophrenia or related disorders, including bipolar disorder, schizoaffective disorder, depression with psychosis, or experience with psychosis. These people might also want to share the books with friends and family, clinicians, case workers, and other advocates so that they might gain insight into these brain disorders. Also, with our SA groups, we do not specify an age limit, so books needed to be readable by all ages.

In the Blue Book, we include personal stories of how SA has helped a person in recovery. Short in length, it should be long enough to let people know how their life was changed by SA groups. I model the submission rules after how we handle SA personal recovery stories.

Thus, submission rules need to include the following:
1. No expletives or profanity.
2. Not so graphic that it could trigger a person who has had similar experiences.
3. Should be an inspirational story.
4. Appropriate for all age groups.

Contact addendum for Blue Book: Schizophrenia Alliance, Psychosis Support and Acceptance

Effective immediately, we have modified two protocols to better serve our community, including:

1. How to handle people who are suicidal and/or homicidal on conference calls, and
2. Protecting private information on conference calls.

The most recent Blue Book, on pages 9, and 12-13, encourages conference call group leaders to get personal information from people who were in crisis, either suicidal or homicidal, in addition to providing callers the Suicide HotLine, the Crisis Text HotLine and encouraging the callers to call 911. Now, we will only provide the Suicide HotLine, 1-800-273-8255, the Crisis Text Line by texting HOME to 741741, or 911. Any additional contact numbers like these will be added in the future, like 988 when it has become official.

Additionally, to protect confidentiality, people will no longer share private information with other members on the conference calls, such as phone numbers. Instead, if they would like for their number to be available to specific people, they can tell others they will make their number available to the office, and then call the office during office hours at 1-240-423-9432.

The next version of the Blue Book will be updated to reflect this information. If you have any questions, please contact Sandy Dimiterchik, the SA Staff Supporter, at 832-439-1586 or sandy.dimiterchik@sardaa.org.

Become a SARDAA State Chapter Lead, State Chapter Member, or Families for Care Group Leader

SARDAA is the only advocacy organization focused on psychosis, the most debilitating symptom of brain illness.

Are you interested in starting a SARDAA State chapter, being a chapter lead, or member? Leading a local Families For Care support group? Helping other families in their journey through brain illness?

Please contact Laura Pogliano, laura.pogliano@sardaa.org or call 240-423-9432.

We will send you all the info you need to get help for your family & find resources on brain illness, and also information on starting a State chapter, becoming a member and forming a local support group.

We need you! Join us in making a difference.
Our mission: improving the lives of people living with psychosis!
Thank you, Laura Pogliano

We welcome all forms of art to be considered for inclusion in our newsletters and Instagram. To submit your art please email angel.white@sardaa.org or mail to 2308 Mount Vernon Ave., Suite 207, Alexandria, VA 22301-1328.

Phone Support Groups
SA Conference Call Groups
Only for individuals diagnosed
Sundays - 7 pm Eastern Time
Mondays - 4 pm Eastern Time
Thursdays - 7 pm Eastern Time
Fridays - 7 pm Eastern Time
Saturdays - 1 pm Eastern Time

Temporary Additional SA Conference Call Groups
during COVID-19 emergency
Only for individuals diagnosed
Wednesday - 1 pm Eastern Time
Thursday - 1 pm Eastern Time
Friday - 11 am Eastern Time

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

Families For Care Conference Call
Not for individuals diagnosed
Every Tuesday - 7 pm Eastern Time

Toll-free Calls
Call-in information (855) 640-8271
Entry Code 88286491#
International Number (720) 362-6499

Facebook Support Groups
Only for individuals diagnosed
SARDAA SA Support
JOIN The Facebook Group Here

Only for Caregivers
SARDAA Families for Care
JOIN The Facebook Group Here

For Caregivers and Diagnosed individuals
SARDAA Support
JOIN The Facebook Group Here

Diagnosed, Caregivers, Professionals
LOBBY CCAC - Circle of Comfort and Assistance Community
JOIN The Facebook Group Here
These are Closed groups, ask to be added

SARDAA has chosen eBay for Charity so you can directly support SARDAA when you sell and buy items on eBay
Auction Items to Benefit SARDAA

EBAY FOR CHARITY

1. In the listing flow, select the option to "Donate a portion to charity".

2. Select SARDAA.

3. Select the percentage you would like to donate. You can verify the charity and donation percentage on your item by checking the information included in the item description.

4. SARDAA will be notified of your listing according to its account preferences and has the right to request an item cancellation if it prefers not to benefit from your listing.

5. Sell and ship.

PayPal

PayPal Giving Fund

After the item sells and the buyer pays, ship the item. The donation is not collected immediately to ensure the transaction is complete. In approximately 21 days, PayPal Giving Fund automatically collects the donation from the seller and sends a confirmation email.

At the end of each month, PayPal Giving Fund combines the donations from individual sellers and sends 100% to the selected charity.

For more information visit: eBay for Charity
Who is Most at Risk?
Linda Stalters, MSN, APRN (ret), SARDA CEO
We hear warnings for people most at risk for COVID-19, which includes people over 60, and people with underlying health conditions. But we do not hear about people with an underlying condition of a serious brain illness (SBI, or serious mental illness), such as schizophrenia, schizoaffective or bipolar brain illnesses.

A Pandemic Lesson on Treating the Mentally Ill
New York Daily News
Steve Leifman
Norm Ornstein
March 30, 2020
A floridly psychotic person with no insight into his mental illness, homeless on the streets of Miami without soap or sanitizer, contracts COVID-19. Is that grounds for involuntary commitment — and if so, where, for how long, and can it include forced medication?

This was an issue one of us, Miami-Dade County Judge Steve Leifman, just faced in a call from a local official. It brought home a stark reality: Of all the population groups in the United States vulnerable to the coronavirus pandemic, those with serious mental illness (SMI) are especially at risk, and we have a system utterly unprepared to deal with it.

Tardive Dyskinesia Awareness Week is May 3-9, 2020
Neurocrine Biosciences
Tardive dyskinesia (TD) is a movement disorder characterized by uncontrollable, abnormal and repetitive movements of the face, torso and other body parts.1,2 TD is associated with prolonged use of antipsychotics, commonly prescribed to treat schizophrenia, bipolar disorder, depression, and certain anti-nausea medications.

Chronic Pain Among Individuals with Serious Mental Illness
Treatment Advocacy Center
Molly Vencel, Research Intern
Individuals with serious mental illness are prescribed opioids at rates very different from the general population, even though they are at more risk to have issues with these highly addictive drugs.

The prescription of opioids for chronic pain across major depressive disorder, bipolar disorder and schizophrenia differ greatly, according to new research published earlier this year. While major depressive disorder and bipolar disorder lead to higher rates of chronic pain and opioid prescriptions, people with schizophrenia are less likely to receive a chronic pain diagnosis and opioid prescription. This has important implications for opioid use disorders as well as pain management.

Consensus Statement Clozapine C19
J Psychiatry Neurosci
April 3, 2020
Consensus statement on the use of clozapine during the COVID-19 pandemic

Don't Neglect Your Mental Health During this Pandemic
The Washington Post
Kenneth Paul Rosenberg
Chirlane McCray
March 23, 2020
Kenneth Paul Rosenberg is a psychiatrist and filmmaker. Chirlane McCray is the first lady of New York City.
Half of Americans will, at some point in their lifetimes, experience mental health challenges. As the novel coronavirus spreads across the world, both the fallout from the covid-19 pandemic and the best safeguards we have against it, could make that number a lot bigger. Just as we are moving rapidly to safeguard our physical health, we must act with equal urgency to preserve our mental health and make psychiatric care accessible.

We have the technology we need to allow doctors to stay in touch with patients they can’t see in person. Now, we must act quickly to remove the obstacles posed by regulations and insurance bureaucracies, so doctors can provide critical mental health care.

**For the Homeless, Coronavirus is a New Menace in a Perilous Life**
The Washington Post
Hanna Dreier
March 21, 2020
In San Antonio and across the country, officials try to contain the spread of covid-19 into one of the most vulnerable populations.

Monica Garcia, the manager of outreach at the San Antonio homeless shelter Haven For Hope, checks on a man living under an overpass in the city.

Monica Garcia smelled the acrid smoke before she saw the blue tarps. Soon, she spotted the cluster of makeshift tents next to a set of railroad tracks and peeked into one of them to find what she had learned to look for as an outreach worker to the homeless: a group of people living disconnected from the world. A small, deeply wrinkled woman who had rings on every finger and seemed especially fragile winced in the light, and Garcia drew closer. “Have you heard about what’s happening in our city and in the world right now?” she asked.

**Intra-Cellular Therapies Announces Availability of CAPLYTA (lumateperone) for Adult Patients with Schizophrenia**
Globe Newswire
March 23, 2020
Intra-Cellular Therapies, Inc. (Nasdaq: ITCI), a biopharmaceutical company focused on the development and commercialization of therapeutics for central nervous system (CNS) disorders, today announced that CAPLYTA (lumateperone) is now available to pharmacies in the U.S. CAPLYTA is an oral, once daily medicine approved for the treatment of schizophrenia in adults.

**Lead-Time Bias Confounds Association Between Duration of Untreated Psychosis and Illness Course in Schizophrenia**
Psychiatry online, American Psychiatric Association
Katherine G. Jonas, Ph.D.,
Laura J. Fochtmann, M.D.,
Greg Perlman, Ph.D.,
Yuan Tian, M.Sc.,
John M. Kane, M.D.,
Evelyn J. Bromet, Ph.D.,
Roman Kotov, Ph.D.
February 12, 2020
At first hospitalization, a long duration of untreated psychosis (DUP) predicts illness severity and worse treatment outcomes. The mechanism of this association, however, remains unclear. It has been hypothesized that lengthy untreated psychosis is toxic or that it reflects a more severe form of schizophrenia. Alternatively, the association may be an artifact of lead-time bias. These hypotheses are tested in a longitudinal study of schizophrenia with 2,137 observations spanning from childhood to 20 years after first admission.

**New Approach to Lessen Negative Symptoms in Schizophrenia is Based on Brain Circuit Discovery**
Dost Ongur, M.D., Ph.D.
Chief, Psychotic Disorders Division, McLean Hospital
Researchers used fMRI to discover a circuit in the brain in which the level of connectivity is causally linked with the severity of schizophrenia patients’ negative symptoms. The team reduced negative symptoms by manipulating this circuit with non-invasive brain stimulation in a small group of patients.

**Progress is Reported on Research Exploring Use of Deep-Brain Stimulation for Psychosis, Schizophrenia**
Brain & Behavior Research Foundation
Investigators are reporting progress in research aiming to determine if deep-brain stimulation (DBS) can be used to help alleviate certain symptoms of psychosis and schizophrenia. Their results appear in the journal Neuromodulation.

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**Help Support Schizophrenia and Related Disorders Alliance of America**

Amazon donates to Schizophrenia & Related Disorders Alliance. Shop for great deals at smile.amazon.com

Easy steps to support Schizophrenia and Related Disorders Alliance of America through Amazon Smile:

1. Sign in to your Amazon account at [amazon.com/smile](https://www.amazon.com/smile).
2. Select Schizophrenia and Related Disorders Alliance of America
3. Shop and checkout as you would on Amazon. No extra cost is passed on to you, but Amazon will automatically donate 0.5% of your purchases to Schizophrenia and Related Disorders Alliance of America.
4. Please share with your friends and family to join you to support Schizophrenia and Related Disorders Alliance of America!

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**Texas and Louisiana Friends:**

Re-Enroll Your Kroger Plus Cards

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.

Please register online at [www.krogercommunityrewards.com](https://www.krogercommunityrewards.com)

Link to: Schizophrenia and Related Disorders–Kroger Plus Card XA142

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I'm a new Text block ready for your content.

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**Help Change Lives -- Donate Now**

Thank you to those who already made a donation.

Every contribution makes a difference.

[Donate to SARDAA>>>]
Sincerely,
Angel White, Editor