



National Alliance on Mental Illness

nami | **Memphis**

MAY-JUNE 2018

NAMI Memphis NEWSLETTER

NAMI Memphis 30th Annual CIT Awards Banquet

Saturday June 16th, 2018

6-8:00 PM

Bellevue Baptist Church

Tickets for members \$20

Non- members \$25

\$20 Will sponsor a CIT Officer

\$120 Will sponsor a CIT Officer & His/Her Family

**4th Tuesday Speaker Meetings moving to
St. Francis Hospital, 5959 Park Ave.
St. Claire's Room, 7-8:30 PM**

**Teachers trained in With Hope in Mind needed for
upcoming With Hope in Mind Class beginning June 21,
2018 at Christ United Methodist Church**

**Please contact Marcus Boyd at
mboyd.namimemphis@gmail.com**

EDUCATION UPDATE

BRIDGES: (Building Recovery of Individual Dreams and Goals through Education and Support)

For anyone with a mental health diagnosis

WHM: (With Hope In Mind)

For family members, friends and caregivers of individuals who have a mental health diagnosis

WHM Basics:

For families with children diagnosed with a mental illness under the age of 18.

NAMI Homefront

Free 6 week educational program for families, caregivers and friends of veterans and military service members with mental health conditions

UPCOMING CLASSES

WHM: (With Hope In Mind)

Please call to register 901-725-0305

Class starting

WHM:

June 21st, 2018

Christ United Methodist Church

Please call to pre-register (901) 725-0305

BASICS –

Pre-registration required for classes
(901) 725-0305 or email

mboyd.namimemphis@gmail.com

SUPPORT GROUPS

ONGOING SUPPORT GROUPS

BRIDGES

Location: Lakeside Hospital, Room 7, Cresthaven Bldg

Date & Time: 7 – 8:00 pm

2nd Tuesday of the month

Call for information: (901) 725-0305

Please check in March for any possible location changes

S.O.S. Group

Schizophrenia/Schizoaffective Disorder Support Group

NAMI Memphis Office

CALL OFFICE FOR SCHEDULE

901-725-0305

BRIDGES Training June 4th

Contact Lori Rash at TMHCA at 731-499-1308

WHM

Location: Germantown Presbyterian Church

2363 South Germantown Rd, 38138

Date & Time: 6:45 p.m. to 8:45 p.m.

1st & 3rd Tuesdays

(901) 725-0305

Location: Lakeside Hospital, Cresthaven Bldg., Room 1

Date & Time: 7:00 p.m. to 8:30 p.m.

2nd Tuesday of the month

Call for Information: (901) 725-0305

Location: Christ United Methodist Church

4488 Polar Ave, Memphis 38117

Wilson-Ross Bldg RM 401-402

7 – 8:15 PM - 1st Monday of the month

Location: St. John's United Methodist Church

1207 Peabody, Memphis 38104

6 – 7:30 PM

Educational Speaker Meeting

4th Tuesday of the month

St. Francis Hospital, 5959 Park, St. Claire's Room

(Behind ER in Women's Health Bldg at back)

7-8:30 pm

Contact (901) 725-0305



Annual CIT Awards

June 16th, 2018
Banquet - 6:00 p.m.
Awards Ceremony – 6:45 p.m.

Bellevue Baptist Church
2000 Appling Road
Memphis, TN 38016

NAMI Memphis is a grassroots, self-help organization dedicated to improving quality of life for individuals with mental illness, their families and communities. Our mission is accomplished through mutual support, education, and advocacy by providing family and consumer education and support, serving as an information resource and referral center, educating mental health professionals about the lived experience of mental illness from the perspective of family members and consumers, advocating for quality institutional and non-institutional care and recovery oriented individualized treatment for people living with mental illness, promoting community support including appropriate housing linked with social and vocational rehabilitation and employment programs, promoting research (preventative, alternative treatments, rehabilitation, and cure), promoting adequate funding for mental health care facilities and services.

NAMI Memphis is proud to have been instrumental in the development of the CIT program here in Memphis. In the past, NAMI Memphis advocated to local government and law enforcement for the implementation of training among law enforcement officers about mental illness and specialized approaches which might be used in situations involving mentally ill individuals for the purposes of improving outcomes, and ensuring greater safety for law enforcement officers, the mentally ill individual, and the community as a whole. When the time came to develop the CIT program NAMI Memphis was there at the table to assist with the development of the CIT model. NAMI Memphis remains involved in CIT training to this day and is happy to serve the community through its participation in the initial and ongoing training of the officers selected for the CIT program.

Each year NAMI Memphis hosts an awards banquet to recognize those CIT officers who have stood out as being outstanding in some way in the performance of their CIT duties. Many officers have gone above and beyond that which is expected of them in the performance of their job. NAMI Memphis offers this program as a way to express our thanks on behalf of the many mentally ill individuals and their families who have contact with CIT trained officers here in Memphis and Shelby County.

CIT is not always the exciting, adrenalin pumping action that officers may encounter in other aspects of their daily routine as law enforcement officers. Often the officer selected may have done something of which his supervisor is unaware. It may be the officer who takes time out of his schedule to stop in and check on “Jane and John Doe” at the end of each month to see how they are doing, knowing they are usually out of money the last few days of the month and bringing a sack of groceries to tide them over until check day. It may be the officer who knows that “Mary Smith” recently got out of the hospital and stops in to check to see if she kept her appointment to get her prescription refilled. It may be the officer who stopped when he saw a naked man on the wrong side of the bridge railing and talked to him, slowly gaining his trust and engaging him in conversation until he could safely invite him to go somewhere with him to get some help.

We would like to encourage you to seek input from your CIT officers regarding who they think is doing an outstanding job or who has performed an amazing act as a CIT officer of which you might not be aware. Nominations should be for some action/behavior performed specifically in their role as a CIT officer and involving a mentally ill consumer and/or their family. We encourage you to participate in this year’s program and take this opportunity to recognize from among your own CIT officers the men and women whose service means so much to so many.

One in four Americans has a diagnosable mental illness. Someone you love has a mental illness. That’s why there is NAMI. That’s why there is CIT.



Annual CIT Awards

June 16th, 2018
Banquet - 6:00 p.m.
Awards Ceremony – 6:45 p.m.

Bellevue Baptist Church
2000 Appling Road
Memphis, TN 38016

Additional Ticket Cost: \$25.00 general public/\$20.00 NAMI-Memphis members
(all tickets will be on "Will Call" at the reception desk when you enter the church)

- Verbal acknowledgement of Gold Level Sponsors during evening opening remarks

Sponsors:

- Gold Level Sponsor \$2,600.00
 - ✓ Reserved Table Seating for 20
 - ✓ 20 tickets at will call desk
 - ✓ Sponsorship Listing on Program and NAMI Memphis website for 1 year
 - ✓ Logo included on website for event sponsorship
 - ✓ NAMI Memphis tote bag for each guest at reserved table seating
- Silver Level Sponsor \$1,600.00
 - ✓ Reserved Table Seating for 10
 - ✓ 10 tickets at will call desk
 - ✓ Sponsorship Listing on Program and NAMI Memphis website for 1 year
 - ✓ Logo included on website for event sponsorship
 - ✓ NAMI Memphis tote bag for each guest at reserved table seating
- Bronze Level Sponsor \$900.00
 - ✓ Reserved Table Seating for 10
 - ✓ 10 tickets at will call desk
 - ✓ Sponsorship Listing on Program and website for event sponsorship for 1 year

Individuals Sponsoring a CIT Officer:(sponsor is responsible for notifying the Officer)

- \$25.00 will sponsor a CIT Officer
- \$120.00 will sponsor a CIT Officer and his/her family

Deadline for Names and Ticket Numbers: May 1st for Law Enforcement Award Recipients and Command Staff
May 15th for Sponsors

Photos: Officers receiving awards should be present at 5:00 p.m. for photos to be taken

NAMI Memphis will provide free tickets for:

- Each Officer receiving an award and their immediate family members (head count will be needed)
- 3 tickets for Command Staff for each Law Enforcement Agency/MPD Precinct (excluding the Chief/Sheriff)
- The Chief of Police/Sheriff for each Law Enforcement Agency
- County and City Mayors

“Diagnostic overshadowing” and mental illness

Many of us or our loved one has likely experienced what is known as diagnostic overshadowing when we have a mental health diagnosis. The term diagnostic overshadowing was first used in 1982 to refer to the tendency for clinicians to attribute symptoms or behaviors of a person with a learning disability to their underlying cognitive deficits and hence to under-diagnose the presence of co-morbid psychopathology. Many of these issues need consideration when trying to understand the phenomenon of diagnostic overshadowing in people with mental illness. It cannot be viewed simply as doctors missing symptoms because they are assumed to relate to their psychiatric disorder or because of a doctor's lack of knowledge about how a psychiatric condition may present. Similarly, it would be too simplistic to suggest that diagnostic overshadowing is only because of bias or discriminatory attitudes. While it is likely that such reasons might be involved in some cases, a range of other factors related to the communication between doctor and patient may also be relevant. There is a need for research to better understand these potential contributing factors and how they may relate to higher mortality and morbidity in people with mental illness. Although the causes of different patterns of care are likely to be complex, there has been little attempt to empirically examine how clinicians' decision making regarding physical diagnosis and treatment may be influenced by the presence of a mental illness in their patients. We are not aware of any studies that specifically investigate possible reasons for missed or incorrect diagnosis of physical illnesses in people with mental illness. However, some research on treatment of physical health problems in those with mental illness show results similar to the results of some of the studies in other minority groups. For example, two studies have shown that people with mental illness and ischemic heart disease requiring hospitalization were less likely to have a revascularization procedure. Similarly, people with co-morbid mental illness and diabetes who presented to an emergency department were less likely to be admitted to hospital for diabetic complications than those with no mental illness. This difference was not found across all mental health conditions: those people with nonpsychotic illnesses were significantly less likely to be admitted to hospital compared with people with no mental illness, while those with psychosis were not less likely to be admitted to hospital. Another study found that people with schizophrenia who were admitted to medical and surgical wards were found to have significantly higher rates of infections, post-operative complications (including intensive care unit admission or death) and increased length of stay. These findings raise further questions about the possibility of disparate treatment for certain types of mental illness. Such research suggests that when considering the issue of less and worse physical care in people with mental illness, both diagnosis and treatment needs to be considered. Treatment overshadowing is a term, which has been proposed to describe possible biases in actual treatment decisions (7). Such a term needs to include all components of a treatment plan that can be overlooked, such as an unwillingness to address possible barriers to appropriate care. A combined term of diagnostic and treatment overshadowing may be more helpful when planning future research, so that a broader range of possible causes for disparate care are considered. Future research into this area needs to investigate how often physical diagnoses are missed in people with mental illness, examine the impact of such errors and explore why this occurs. Explanatory factors may include some clinicians' limited knowledge about mental illness, their discomfort in dealing with people with mental illness and other staff attitudes. From the Disability Rights Commission report, it seems that the risk of diagnostic overshadowing may also be more problematic in certain medical settings. For example, emergency departments were one setting in which service users reported feeling that their physical problems were consistently attributed to mental illness without sufficient assessment. Discrimination can also occur by failing to try to overcome some of the potential barriers to optimal care which may exist. Research into the size of this problem, why it occurs and how it can be addressed is also needed. Consideration of research that has examined such issues in different racial groups may be helpful. For example, several studies have examined patients' perceptions of quality of care in a number of different domains (e.g. information provided, access to care, co-ordination of care, and confidence in the service provider) and have considered ways treatment may be adapted according to different patterns of service use. In conclusion, the concept of diagnostic (and treatment) overshadowing in patients with mental illness seems to be an important under-investigated problem. There is an opportunity to build on a body of research from the learning disability and medical fields, to try to understand its potential role in the poor physical outcomes in people with co-morbid mental illness. Such research should consider reasons for its occurrence and possible preventative measures, so we can minimize this phenomenon in future.

Exerpt from

Acta Psychiatrica Scandinavica

Simon Jones, Louise Howard & Graham Thornicroft

MAY 2018

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1 WHM Support Germantown Presbyterian Church 6:45 PM 901-725-0305	2 WHM Support group St. John's United Methodist Church 1207 Peabody Ave., Memphis 38104 6-7:30 PM	3	4	5
6	7 WHM Support Christ United Methodist Church 4488 Poplar Ave, 38117 Wilson-Ross BLDG Room 401-402 7-8:15 PM	8 BRIDGES Support (Lakeside- Cresthaven Bldg, Room 7) <u>7 pm</u> WHIM Support (Lakeside, Room 5) <u>7 pm</u> 901-725-0305	9	10 Schizophrenia/ Schizoaffective Disorder (SOS) Support Group NAMI Office 5830 Mt. Moriah Rd., Suite #6 6:00 PM 901-725-0305	11	12
13	14	15 WHM Support Germantown Presbyterian Church 6:45 PM 901-725-0305	16	17	18	19
20	21	22 Educational Speaker Meeting St. Francis Hospital 5959 Park St. Claire's Room 7-8:30 PM	23	24 Schizophrenia/ Schizoaffective Disorder (SOS) Support Group NAMI Office 5830 Mt. Moriah Rd., Suite #6 6:00 PM 901-725-0305	25	26
27	28	29	30	31		

JUNE 2018

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2
3	4 WHM Support Christ United Methodist Church 4488 Poplar Ave, 38117 Wilson-Ross Bldg Room 401-402 <u>7-8:15 PM</u> BRIDGES training Call Lori Rash at TMHCA 731-499-1308	5 WHM Support (Germantown Presbyterian Church) 6:45 pm <u>901-725-0305</u>	6 WHM Support group St. John's United Methodist Church 1207 Peabody Ave., Memphis 38104 6-7:30 PM	7	8	9
10	11	12 Lakeside-Cresthaven Bldg, Room 7) <u>7 pm</u> WHIM Support (Lakeside, Room 5) 7 pm 901-725-0305	14	15 SOS group cancelled this month until July	16	17
18	19	20 WHM Support (Germantown Presbyterian Church) 6:45 pm <u>901-725-0305</u>	21 With Hope in Mind class starts Christ United Methodist Church Call 901-725-0305 to register	22	23	23
24	25	26 Educational Speaker Meeting St. Francis Hospital 5959 Park St. Claire's Room 7-8:30 PM	27 NAMI National Convention begins New Orleans	28	29	30