



# THE BELL

The newsletter of the National Mental Health Association

April/May 2005

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## Advocates Celebrate Supreme Court Decision To Ban Juvenile Death Penalty *Seventy-Three to Come Off Death Row*

Advocates for young people across the nation won a huge victory with the U.S. Supreme Court's March 1 ruling that declared the juvenile death penalty unconstitutional.

"The Supreme Court's decision confirms what we've known for some time: executing juveniles is unjust and inhumane," said Michael Faenza, president and CEO of NMHA. "Youth are different from adults. . . . Most juvenile offenders on death row have suffered extreme abuse and neglect. They cannot—and now will not—be held to the same standards of culpability."

The Court ruled 5-4 in favor of Christopher Simmons, which upheld the Missouri Supreme Court ruling that imposing the death penalty on Simmons, a 17-year-old at the time of his crime, violated the Eighth Constitutional Amendment prohibiting "cruel and unusual punishment."

In 12 states across the nation, 73 people will be taken off death row as a result of the court's decision. NMHA has worked tirelessly for years with the American Bar

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## Teens and Parents Say ADHD Treatment Works *Survey Shows ADHD Therapies Improve Life for Teens*

Teenagers who have attention deficit-hyperactivity disorder (ADHD) and their parents strongly believe that treating the disorder can lead to significant improvements in school and at home, an NMHA survey conducted last year shows.

Both parents and teen credit the teens' treatment—in the form of medication, counseling and/or behavior therapy—with contributing to better grades in school, higher self-esteem, improved social relationships and enhanced participation in extracurricular activities.

In particular, after receiving help, 56 percent of teens report that they improved their school grades. A large majority of both groups (81 percent of parents and 73 percent of teens) reported "some to a great deal of improvement" in their ability to feel good and happy. In addition, 70 percent of parents and 61 percent of teens reported some to a great deal of improvement in making new friends.

"ADHD exacerbates the problems all teens grapple with, such as heavy demands at school, more complicated social situations, and a growing desire for independence," said

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**NMHA's 2005 Annual Conference featuring actor/producer Mark Wahlberg and journalist Jane Pauley**



Turn to page 5 for details.

## Advocates Celebrate Supreme Court Decision to Ban Juvenile Death Penalty

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Association's Juvenile Law Center and a long list of other advocates to fight against the juvenile death penalty, a practice that NMHA believes has only served to demean our justice system. Over the past five years, NMHA has fought vigorously alongside state advocates to help win stays of executions for juvenile offenders.

NMHA also joined the nation's leading medical institutions last year, including the American Medical Association, in a friend-of-the-court brief submitted to the Supreme Court calling to ban the execution of juvenile offenders who commit capital crimes.

“Once juveniles' diminished culpability is recognized, it is evident that neither . . . justifications for the death penalty — retribution and deterrence of capital crimes by prospective offenders — provides adequate justification for imposing that penalty on juveniles.”

—*Roper, Supt., Potosi v. Simmons, Christopher, 1 Mar 2005*

In the past decade, the United States has executed more offenders of juvenile crime than the rest of the world's nations combined. NMHA lauds the Supreme Court decision to ban this archaic practice.

For more information or perspective on the juvenile death penalty, please visit <http://www.nmha.org/position/deathpenalty>. 

## Teens and Parents Say ADHD Treatment Works


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NMHA President and CEO Michael Faenza. “Therefore, it is critical that they receive the support and treatment needed to succeed during these critical years.”

As with all mental health disorders, parents who suspect that their child may have ADHD should seek a proper diagnosis from their child's pediatrician, who can determine if treatment is necessary and recommend the best type of care for your child.

For more survey results and information about how the survey was conducted, visit <http://www.nmha.org/newsroom/NMHA-ADHDsurveyrelease.pdf>.

### About the Survey

The survey was conducted online in the United States by Harris Interactive from July-August 2004, for NMHA through a grant from McNeil Consumer & Specialty Pharmaceuticals. The survey evaluated the responses of a nationwide sample of 268 parents of teenagers, ages 14 to 18, who have been diagnosed with ADHD and 265 teenagers, ages 14 to 18, who have been diagnosed with ADHD. Parents and teenagers were recruited independently and were not matched pairs (i.e., parents and teenagers from the same family were not matched together). 

## Consumer-Run Mental Health Organizations Receive Boost

### NMHA's Consumer Supporter T.A. Center Awards Grants

NMHA's National Consumer Supporter Technical Assistance Center (NCSTAC) has awarded three-year grants to eight consumer-run organizations to help them either establish new nonprofit organizations or to help their existing group engage in recovery-oriented systems transformation. Fifty consumer organizations competed for the awards.

“Establishing consumer- and family-driven mental health services was a key recommendation of the New Freedom Commission on Mental Health,” said Sara Thompson, NCSTAC director. “NCSTAC ensures that consumer groups are an integral part of the mental health service planning and delivery process.”

NCSTAC selected the following outstanding organizations to receive the grants:

- **Brevard Drop-In Center**—To plan, develop and sustain a consumer-run drop-in center in Brevard County, Fla.
- **Meaningful Minds of Louisiana**—To establish and build a statewide consumer organization that provides mental health education and advocacy.
- **New Partnerships for Women**—To further develop a grassroots organization in Dane County, Wis., designed to promote healing and recovery for women who have histories of trauma and mental health or substance abuse problems.
- **The Phoenix Place**—To implement “phase two” organizational establishment activities of a drop-in clubhouse in Amelia, Ohio.
- **The Recovery Group**—To establish a consumer-run drop-in center for under-served Washington, D.C., residents.

## The Dignity of Risk

by Dianne Dorlester, NMHA's director of Consumer Advocacy

I suppose I've always been somewhat of a risk-taker. No, I'm not an extreme sport enthusiast, nor would I place my physical or financial well-being in peril. But when it comes to weighing the pursuit of high achievement against the consequence of failure, I'll generally opt for the former.

Perhaps the most rewarding risk I have ever taken was deciding in 1999 to speak publicly and openly about my mental illness. My depression, for which I received intermittent treatment since childhood, had spiraled to an all-time low without apparent cause. I began losing my ability to concentrate, to communicate effectively and to see that I would get better. The therapy and medications were not working. It so affected my daily functioning that I took a 10-week leave of absence from a relatively high profile job working for a long-term care association.

After eventually finding the right balance of medications, I started to come out of the darkness. Upon my return to work, I chose to share my story with my colleagues and peers. I expected mixed reactions. I knew some would understand, some would be shocked, and a few might be dismissive or even insensitive. I was sure that I would be judged, treated differently and viewed as less competent than before.

What I found instead was that every person I told had a story of a loved one who'd been affected by mental illness or shared with me

how mental illness has affected their own lives. Many of them commented that they didn't understand why there is so much stigma surrounding mental illness, given how common it is. Nonetheless, they spoke in hushed tones during our conversations, not wanting anyone else in the office to overhear. I was struck by the irony, and it made me want to speak out even more.

I decided to redirect my career by combining my profession as a nonprofit manager and advocate with my experience as a mental health consumer. After several years of exploring opportunities and determining how to have the widest impact, I found a home last December as NMHA's director of consumer advocacy.

Since joining the NMHA staff a few months ago, I have been fortunate to get to know some of the pioneers of the consumer movement. I have heard them and countless other consumers share their stories of trials and triumphs throughout their recovery. Although each advocate's story is somewhat unique, one common element exists among all of them: the dignity they gained from speaking out.

Speaking out is a critical component of my recovery. Had I not taken that initial risk, which at the time felt great, I would not be where I am today. 📌

- **Albuquerque Drop-In Center**—To conduct a community assessment of mental health services in Bernalillo County, N.M., and to create a comprehensive, holistic, recovery-focused system of services and supports.
- **Virginia Organization of Consumers Asserting Leadership**—To collaborate with the Consumer Empowerment Leadership Training (an academy of the MHA of Virginia) to develop a mental health system recovery assessment in the state using consumers to examine the system, and to work with stakeholders to create a recovery-oriented system.
- **West Virginia Mental Health Consumers' Association**—To conduct a mental health services assessment using consumer-provider assessment teams and to develop materials designed to educate stakeholders about the steps needed to transform the state's mental health system.

Developed in 1998 to support and strengthen consumer-run organizations, NCSTAC is funded by a grant from the federal Center for Mental Health Services. NCSTAC ensures that consumer groups have the necessary resources to fully participate in the design, implementation and evaluation of recovery-oriented, consumer-driven mental health services.

Visit us at [www.ncstac.org](http://www.ncstac.org) for more information and for free publications and resources specifically designed for new and expanding consumer groups.

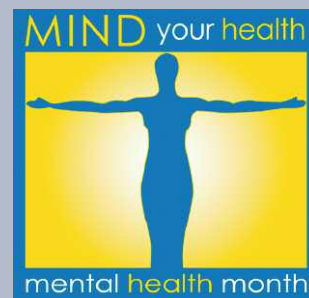
[www.ncstac.org](http://www.ncstac.org)

## What Are You Doing This May for Mental Health Month?

Get a jumpstart on your Mental Health Month plans this May with new resources from NMHA. This year's theme, "MIND Your Health," focuses on the mind/body connection and mental health in the workplace, and features brand new materials packed with cutting-edge research.

Here's a quick preview of what some NMHA affiliates are organizing this year:

- The MHA of Middle Tennessee will host a huge "Kid's Day" at a local zoo for 3,000 local children, to educate them about mental health and related issues.
- Among other activities, the MHA of the District of Columbia has joined with the Older Women's League to conduct depression screenings for older adults as a part of Older Americans' Mental Health Week (May 22-28).
- The MHA of Northern Kentucky will hold a series of luncheons with local businesses to educate workers about the importance of mental health.



Be sure to take advantage of free Mental Health Month materials you can use in your campaign by visiting <http://www.nmha.org/may>. To order our new Mind Your Health Workplace Organizer Kit—which contains a PowerPoint presentation and everything you need to launch a workplace campaign—visit NMHA's Online Bookstore at <https://secured.nmha.org/secure/store>.

## Federal Policy Update: Medicaid and Medicare Issues Take Center Stage

Although it's still early in the year, Congress has already moved on many issues related to mental health—some of their actions will benefit people who have mental health disorders and others would jeopardize access to care. NMHA encourages advocates to contact their members of Congress regularly to voice their opinions on local and federal policies that will affect mental health care and Americans' access to it.

### Senate Restores Medicaid, Raises Spending Cap

Thanks to grassroots pressure from mental health advocates and the leadership of Sens. Gordon Smith, R-Ore., and Jeff Bingaman, D-N.M., the Senate approved an amendment in March that restored \$14 billion in federal Medicaid funding that had been cut from the Senate budget resolution. All Senate Democrats and seven Republicans voted for the amendment. The Senate also closely passed an amendment sponsored by Sen. Edward Kennedy, D-Mass., to raise the federal government's cap on discretionary spending by \$6 million to nearly \$849 billion. By raising the cap, this amendment represents the best opportunity to allow Congress to make additional investments in federal health agencies, including the Substance Abuse and Mental Health Services Administration, the U.S. Centers for Disease Control and Prevention, the National Institutes of Health, and the Health Resources and Services Administration. The House of Representatives' adoption of Medicaid cuts continues to pose a threat, compelling advocates to sustain the pressure on Congress to drop these cuts.

### Hearings Held on Medicare's Dual Eligibles

The Senate Special Committee on Aging, chaired by Sen. Gordon Smith, R-Ore., held a hearing in early March to call attention to the impact of the new Medicare drug benefit program on people who are dually eligible for both Medicare and Medicaid. The prescription drugs that people who are dually eligible take are currently paid for by Medicaid. After Jan. 1, 2006, however, the drugs will be paid for by Medicare. Among other reasons, Sen.


Smith called the hearing, which featured U.S. Centers for Medicare & Medicaid Services Administrator Mark McClellan, to ensure that there's no risk of gaps in coverage during the transition between Medicaid and Medicare, a concern of NMHA's.

### Senate Agrees to Include Family Opportunity Act in Budget

Sens. Kennedy and Charles Grassley, R-Iowa, were successful in including the Family Opportunity Act (FOA) as an amendment to the Senate's budget resolution. This legislation would allow families with incomes of up to 300 percent of the federal poverty level and whose children have significant psychiatric and other disabilities to buy into the Medicaid program, even though their incomes would otherwise disqualify them from the program. Such an opportunity will allow these families to afford care for their children in community- or home-based settings, instead of institutional care. FOA will also establish a demonstration project that will give children and teens in certain states who receive services in psychiatric residential treatment centers to qualify instead for community- or home-based care.

### Bill May Undermine State Parity Laws

The House Education and Workforce Committee approved the Small Business Health Fairness Act in mid-March. This bill would allow small businesses to form association health plans so that they can jointly purchase insurance coverage for their employees free of state regulation. Research has shown, however, that these plans are largely ineffective in helping workers obtain insurance coverage. By exempting such plans from state regulation, Congress would put them beyond the reach of a state's parity law. A similar Senate committee is now considering a version of the bill.

To find out more information about these and other subjects, go to [www.nmha.org](http://www.nmha.org) and click on "Policy Alerts." You can also have NMHA's policy alerts delivered directly to you by visiting [www.nmha.org](http://www.nmha.org) and clicking on "Get the latest news from the field." 



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*The Bell* is published by the National Mental Health Association, which works with more than 340 affiliates nationwide to promote mental health, prevent mental disorders and achieve victory over mental illnesses through advocacy, education, research and service.

To join NMHA and receive *The Bell*, visit NMHA's Web site at <http://www.nmha.org> or call 800-969-NMHA (6642).

Cited reproductions, comments and suggestions are encouraged.

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## Research Notes . . .

### Laughter May Prevent Heart Disease, Depression Increases Risk in Patients

Laughter increases a person's blood flow much in the same way as exercise does, which may reduce the likelihood of developing heart disease, indicates a new study presented at the American College of Cardiology's annual meeting in February. In another study presented at the conference, Duke University researchers found a strong link between mild depression and a higher risk of death among heart failure patients.

### Psychological Problems Affect Many Veterans of Iraq and Afghanistan

More than one in four veterans of active duty in Iraq and Afghanistan who have sought medical treatment in Veteran's Affairs hospitals between Oct. 2003 and Feb. 2005 have symptoms of psychological problems, indicates a study released last week in the *New England Journal of Medicine*. PTSD was the most common single diagnosis among these veterans (10 percent), followed by substance abuse (9 percent), depression (7 percent), and anxiety disorders (6 percent). Most veterans had multiple diagnoses.

### Care Management Methods Can Help Improve Older Adults' Overall Care

Using a collaborative care management approach in treating depression in older adults can significantly improve their physical functions, a study in the *Journal of the American Geriatric Society* indicates. Through such management offered in the study, older adults had access to depression specialists who helped coordinate care with the patients' primary care physicians.

### Rural Residents More Likely to Commit Suicide Than Urban Counterparts

People who live in rural counties are just as likely to die by gunshot as people who live in more urban areas but are twice as likely as their urban counterparts to have been the person pulling the trigger, a recent study in the *American Journal of Public Health* shows.

## NMHA Tools You Can Use

### NMHA Launches New Online Workplace Mental Health Initiative

Visit NMHA's newest site dedicated to workplace mental health issues. The "MIND Your Health: In the Workplace" section includes resources such as fact sheets, and links to important tools and information organizations can use to improve workplace mental health. Visit <http://www.nmha.org/workplace> today!

### What's Hot!

- *Medicare Part D: Frequently Ask Questions* and related tools. Available at <http://www.nmha.org/federal/MedicarePrescriptionDrugBenefit.cfm>.
- *May Is Mental Health* educational materials. Available at <http://www.nmha.org/may>.
- The latest issue of *State Advocacy Update*: Winter 2005. Available at <http://www.nmha.org/sau>.
- *Talking to Kids About School Safety* fact sheet. Available at <http://www.nmha.org/infoctr/factsheets/talkingtoKidsaboutSchoolSafety.cfm>.
- *Bullying and What to Do About It* fact sheet. Available at <http://www.nmha.org/pbedu/backtoschool/bullying.cfm>.
- *Antidepressant Medications and Children: Tips for Parents* fact sheet. Available at <http://www.nmha.org/infoctr/factsheets/antidepressantsChildrenTips.cfm>.
- **Affiliates Only!** *Federal Grant Writing tips* and resources on the Affiliate-Only section of NMHA's Web site at <http://www.nmha.org/marketing>.

## NMHA's June Annual Conference Offers Advocates the Latest Tools and Strategies

Don't miss NMHA's 2005 Annual Conference June 9-11, "Justice for All," for an ideal opportunity to exchange effective practices with your colleagues and further the fight for meaningful change in our communities and across the nation. Join hundreds of advocates, consumers, government and corporate officials, and other stakeholders to get the tools and tactics you need to improve local programs and policies. We'll examine innovative and effective programs, education campaigns, consumer empowerment, advocacy and business strategies and much more.

This year's program includes exciting speakers and new features:

- **Journalist Jane Pauley** and actor/producer **Mark Wahlberg** will share their incredible stories of struggle, recovery and advocacy.
- Our new **Consumer and Parent Issues workshop track** will offer a series of workshops focusing on self-empowerment, involvement and best practices.
- **National experts and researchers** will unveil the latest findings and show us how to use them to improve the health of our communities.

To register today, visit our Annual Conference Registration Guide now online at <http://www.nmha.org/annualconference>, which will be mailed to all MHAs soon. Take advantage of the significant MHA discount by registering before May 15.