Let’s Walk…for Recovery, for Health, to Fight Stigma
Saturday, May 11, 11 am

Join the throngs for the fun and easy three-mile walk along the Charles River in Boston at the 10th Annual NAMI Walk Saturday, May 11. The top affiliate team three years in a row, Cambridge Middlesex aims to beat its record $26,000 raised last year with a 2013 goal of $30,000. Cambridge Middlesex will have four teams this year—Cambridge, Family-to-Family, Katelyn’s Klan, and the Cambridge Health Alliance. Cambridge Middlesex will hold another of its epic picnics for all walkers immediately following the Walk.

The Walk is the primary fundraiser for NAMIMass. Our affiliate and NAMIMass each receive 45 percent of what we raise to cover annual expenses, while 10 percent goes to NAMI national. In 2012, the state exceeded its goal of $500,000.

You can join to walk with us or donate to our NAMI Walk Team at http://namiwalks.nami.org/cambridge. Contact our team captain, John Sharp, at john.d.sharp@verizon.net OR 781-646-6371 to register or ask questions.
**Education and Support**

---Support Groups For Family and Friends---

NAMI Cambridge-Middlesex offers bi-monthly support group meetings for family members and friends of people with mental illness. The groups are facilitated by trained NAMI volunteers. Conducted in a confidential atmosphere, the purpose of the support groups is to help provide mutual support and coping strategies. Many families find NAMI support groups helpful.

Please contact Elizabeth if you would like more information or to attend. Elizabeth can be reached at elizabeth@nami-cambridgemiddlesex.org or 781-646-0397.

The support groups are drop-in, FREE and conveniently located at Cambridge Hospital. On-site and street parking are available, and the location is T accessible. • First Monday of the Month: 7:30-9:30 pm (Facilitated by Lisa and Larry) • Third Monday of the Month: 7:30-9:30 pm (Facilitated by Karen and Doris)

**Area Family Support Groups**

**Support/West—NAMI Central Middlesex**

**Acton/Littleton** Contact Susan McDougall at mcdougalletal@aol.com or 978-263-8830; Marilyn at mlg1230@verizon.net or cell 978-502-0128.

**Bedford** Call the NAMI of Central Middlesex affiliate helpline 781-982-3318.

**Dorchester** Contact Monica, 857-342-2796 or Mpomare28@gmail.com; Mark, 617-522-7439 or mzanger@comcast.net.

**Stow** Call Trish Woods at 978-897-2962.

**Wakefield** Contact Kay at 781-438-1851, or Diane at 978-658-3567 or email: Dianeh23@yahoo.com

**Caring for the Soul-Cambridge**

Information: laura.garcia604@gmail.com

---For Consumers---

**Cambridge-Somerville** Contact Janel Tan (tanj@vinfen.org) or 617-863-5388, or Karen Reedy at the NAMI Mass office, 781-938-4048.

**DBSA-McLean Hospital** Visit www.dbsaboston.org or call the DBSA office 617-855-2795 (email office@dbsaboston.org).

**The Cole Resource Center, Belmont**


---Steering Committee---

**President, Programs**

Jane Martin
jane@nami-cambridgemiddlesex.org

**Treasurer**

Tom Martin
tom@nami-cambridgemiddlesex.org

**Vice President, Newsletter**

Mary Pat Prado
marypat@nami-cambridgemiddlesex.org

**NAMIWalks, Programs, Website**

John Sharp
john@nami-cambridgemiddlesex.org

**Refreshments, NAMIWalks**

Sara Sharp
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**Website**

Larry Ouellette
larry@nami-cambridgemiddlesex.org

**Support Groups**

Karen Safford
karen@nami-cambridgemiddlesex.org

Lisa Fownes
lisa@nami-cambridgemiddlesex.org

---Family to Family---

**Carolyn White**
carolyn@nami-cambridgemiddlesex.org

**Sharon Devos**
sharon@nami-cambridgemiddlesex.org

**Areti Yergatian**
areti@nami-cambridgemiddlesex.org

**Joyce Calogero**
joyce@nami-cambridgemiddlesex.org

---Programs, Greeters---

**June Mendelson**
June@nami-cambridgemiddlesex.org

**Sandra Knight**
sandra@nami-cambridgemiddlesex.org

**Cathy Treco**
cathy@nami-cambridgemiddlesex.org

**Rae Simpson**
rae@nami-cambridgemiddlesex.org

**Elizabeth Halnes**
elizabeth@nami-cambridgemiddlesex.org

---Important Phone Numbers---

**Information on NAMI Cambridge-Middlesex Affiliate Programs**

For up-to-date recorded information about educational meetings, support groups, or membership. You can leave a message. ..........................617-984-0527

**NAMI State Office (9am-5pm, M-F) ...... 781-938-4048**

**Psychiatric Emergencies - Cambridge Hospital**

On-site (PES) Psychiatric Emergency Services, Cambridge Hospital, on the main campus of Cambridge Health Alliance, 1493 Cambridge St, Cambridge. Staffed with psychiatrists and nurses 24/7. ..........................617-665-1560

**BEST Team (Boston Emergency Service Team)**

This is the primary emergency service team in the Boston area. Serves Boston, Cambridge, and Somerville) ....800-981-4357

**For other communities, call .............. 877-382-1609 and enter your zip code.**

In-person behavioral health crisis assessment, intervention, and stabilization services 24 hours a day for individuals of all ages covered by MassHealth (Medicaid) plans, Medicare, and the uninsured. Clients can be seen in the community or at their two centers. They provide assessment, treatment planning, and hospitalization, if necessary. There is also respite care at their two centers in Boston and Cambridge.

Or call 911.

---Additional Hotlines---

**Suicide Prevention**

National Suicide Prevention Lifeline 1-800-273-TALK
Free, confidential 24-hr. emotional distress line

**Samaritans of Massachusetts 1-877-870-HOPE**
24 hour Crisis Intervention/Hotline

**Samaritans of Massachusetts 1-800-252-8336**

**Teen Line (statewide)**

Samaritans of Massachusetts 1-617-247-0220 24 hour Helpline

**Substance Abuse Help**

Mass Substance Abuse HELPLINE 1-800-327-5050
Free, confidential information and referrals
CET: Treadmill for the Brain A Promising Treatment for the Compromised Mind

By Sandra Knight

In schizophrenia, as well as other mental illnesses, some cognitive functioning is often lost. Although appropriate medications can relieve symptoms such as hallucinations and stabilize an individual in a psychotic state, they do not help repair brain function and can even worsen it. In such cases, employment prospects are diminished, social interactions are more difficult, and day-to-day functioning is impaired.

At our March meeting, Matcheri S. Keshavan, M.D., the Stanley Cobb Professor and Vice-Chair for Public Psychiatry at Harvard Medical School, brought us a hopeful message regarding an effective tool in the treatment arsenal.

Dr. Keshavan, who has spent the last 20 years investigating the causes and treatments of psychotic disorders, his colleagues, and others have been researching and testing the benefits of cognitive remediation or cognitive enhancement therapy (CET) to rebuild the brain. He reported positive and encouraging results.

What is CET?

CET is a treatment that integrates computer-based exercises in attention, memory, and problem-solving with a small group-based training curriculum. The training lasts for a period of weeks and follows key principles of effective exercise:

- Repetition, practice
- Progressively increasing complexity
- Tailored to individual’s cognitive style, ability, and progress
- Motivation as a mediating factor (In regular exercise, for instance, one might choose to run on streets with nice views.)
- Multi-modal: combined approach works best; for example, designed computer practice, social interaction groups, therapy/counseling, family therapy.

Results

Follow-up studies after CET training show significant improvements in brain functioning. In addition to durable effects on global cognition, Til Wykes et al, in a 2011 study of 2,104 participants, found that 58 percent were now employed compared to 19 percent before the training—a practical benefit. Neuroscience emphasizes that “neurons that fire together wire together.” The map of the brain grows the more the brain is used, gray matter increases, and new pathways develop. Also, the more complex and enriched the environment one is exposed to, the more connections are made. Parts of the brain are always talking to each other—right to left, front to back, says Dr. Keshavan. Different functions—thinking, memory, emotion—are governed by different parts of the brain. Exercises for social enhancement are included in comprehensive cognitive remediation programs.

Availability?

Dr. Keshavan reports that there are six dissemination sites in development across the U.S.—New York, New Jersey, Pennsylvania, Ohio, Texas, and Oregon. Some are now using CET as standard treatment, and it is reimbursed by insurance. In Massachusetts, however, it is currently only available as part of research studies. One can call Ray Gonzalez at 216-504-6428 for more information on how to set up a CET Cleveland™ Program in your community.

Although a specially designed course of treatment in a clinical setting works best, some online computer programs are available through PositScience.com, Lumosity.com, and BrainBuilders.com. These various programs have their strengths and weaknesses, says Dr. Keshavan.

Early Onset Prevention

“Anyone can benefit from CET,” says Dr. Keshavan, “but early treatment is better.”

Continued on page 5
**Mark Vonnegut and Others to Explore Writing About Mental Illness and Trauma At May 1 Event**

Mark Vonnegut, author of the memoir Just Like Someone Without Mental Illness Only More So, about his experience living with schizophrenia, and The Eden Express: A Memoir of Insanity, about his life as the son of the late Kurt Vonnegut, will join a panel of writers on Wednesday, May 1, 8 pm, at the Cambridge Center for Adult Education, 56 Brattle Street in Harvard Square, as part of the Center’s very popular Writer’s Life Series. This program, entitled “Writing About the Unspeakable,” will be on writing about mental illness and trauma and is co-sponsored by the National Writers Union. Other panelists are Iris Gomez, author of the novel Try to Remember and an award-winning writer on the rights of immigrants in the U.S., and Terry Farish, author of the young adult novel The Good Braider and an activist working with refugees from war-torn countries.

Admission is $6.00, payable in advance online at [http://www.ccae.org/catalog/courses.php?id=8&time=1](http://www.ccae.org/catalog/courses.php?id=8&time=1) or on May 1st at the door.

**NAMI Takes the Fight to the State House**

Several hundred NAMIMass members made their voices heard at the State House April 8 as they asked their legislators to support funding and services for people in recovery. NAMI was welcomed by Representatives Liz Malia and Senator Joan Lovely, co-chairs of the Mental Health and Substance Abuse Committee. Other speakers included Rep. Ruth Balser, Charlie Stefanini, campaign coordinator for FundMentalHealth.org, Dr. Debra Pinals, assistant commissioner, Forensic Services, Department of Mental Health, and June Binney, NAMIMass Criminal Justice Project Director.

After the speeches and a quick lunch, everyone made personal calls on their legislators and/or staff to make a case for increased DMH funding, CIT training for police, and expanded availability of Emergency Services. “Nothing persuades our legislators more than hearing from their constituents and seeing a strong turnout for issues at the State House,” said Jane Martin, president of the Cambridge-Middlesex Affiliate.

**Cambridge to Continue Free Family Class in September**

Cambridge Middlesex will once again offer a free 12-week Family to Family class in the fall, starting on September 12 from 6:30-9 pm. Carolyn White will teach again with Sharon Devos. Family to Family is a free 12-week course designed to educate family members, care givers and friends about all aspects of major mental illnesses.

PREREGRISTRATION IS REQUIRED and classes fill quickly. See [www.namimass.org](http://www.namimass.org) for details and registration or contact:

Carolyn White: Carolyn@nami-cambridgemiddlesex.org

Sharon Devos: Sharon@nami-cambridgemiddlesex.org

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**I Recommend...**

With changes and cuts in mental health services making it confusing and difficult to find help for our loved ones, we thought we would ask our members to recommend programs they have found successful. Our first report comes from Joyce Calogero.

**INTENSIVE OUTPATIENT PROGRAM**

Lawrence Memorial Hospital
Medford, MA

The IOP is designed to be an outpatient group program for clients in need of more support than is provided in the traditional outpatient setting. Clients use the program as a step down from hospitalization or as a means of avoiding hospitalization. On average, clients attend 3-4 days per week for up to 3 hours a day. Clients attend the program for several weeks, decreasing the days of the week as they feel better. Treatment is always individualized to the clients’ needs and goals.

While at the program, clients participate in group psychotherapy. The groups focus on learning ways to manage symptoms, cope with stresses, and develop goals for the future. Clients often do not have experience with group therapy prior to joining the IOP and report the experience as helpful and rewarding.

The Intensive Outpatient Program runs a morning geriatric program Monday, Wednesday, and Friday and an adult program for those 18 and over Monday and Tuesday afternoons. Most insurance is accepted except for Mass Health MBHP. For information or to make a referral, call 781-306-6888.
Mental Health in the News

**Major Health and Research Funding Proposals Ignore Mental Health**

Despite the outcry for better mental health care following the Newtown slaughter last December, two recent developments give rise to grave concern. First, while the President’s new budget seeks a much-needed $471 million increase for the National Institutes of Health (NIH), it includes a proposed $12 million CUT to the National Institute of Mental Health budget.

http://www.nami.org/Template.cfm?Section=WhatsNew43&template=/ContentManagement/ContentDisplay.cfm&ContentID=153570

In addition, when the administration announced its new Brain Initiative on April 2, the president did not mention mental illness research. *The New York Times* reported that scientists saw the project as leading to “technology essential to understanding diseases like Alzheimer’s and Parkinson’s, as well as to find new therapies for a variety of mental illnesses.”


Although it is not clear what impact this project will have on mental illness research, another article quotes a scientist mentioning the application of the project to mental illness:


**Psychiatric Drug Development: Diagnosing a Crisis, April 02, 2013**


**Defining Mental Illness, New York Times, March 24, 2013**

Several readers discuss criticisms of how conditions are diagnosed for the Diagnostic and Statistical Manual of Mental Disorders (DSM)—often called “psychiatry’s bible.” Controversy surrounding the soon-to-be-released fifth edition, or DSM-5, has cast a harsh light on psychiatric diagnosis. Some of psychiatry’s critics argue that current psychiatric diagnoses often “stigmatize” or “dehumanize” people struggling with ordinary grief, stress or anxiety.

http://www.nytimes.com/2013/03/24/opinion/sunday/sunday-dialogue-defining-mental-illness.html?pagewanted=all&_r=0

**Helping the Mentally Ill Quit Smoking, Boston Globe, March 18, 2013**

http://bostonglobe.com/lifestyle/health-wellness/2013/03/17/those-with-mental-illness-may-have-harder-time-giving-cigarettes/ggiRax0sY2v4jXKMK1dc3K/story.html

**Kaiser Health News Reports “Americans Uncomfortable Around Mentally Ill”**

According to a new poll, the American public has a contradictory view of mental illness. While most believe people with such ailments are the victims of prejudice and discrimination—more so than almost any other group—a substantial portion of respondents said they have qualms about working in the same place or having their children attend a school where someone with a “serious” mental illness is employed.


**E. Fuller Torrey: Fifty Years of Failing America’s Mentally Ill**

JFK’s dream of replacing state mental hospitals with community mental-health centers is now a hugely expense nightmare.


http://online.wsj.com/article/SB10001424127887323539804578260023200841756.html?KEYWORDS=E+Ruller+Torrey%3A+Fifty+Years+of+Failing+America%27s+Mentally+Ill


http://www.nytimes.com/2012/12/26/opinion/our-failed-approach-to-schizophrenia.html?r=0

**Successful and Schizophrenic, New York Times Opinion, by Elyn R. Saks**


**What It’s Like to Have Schizophrenia**

Our friend Lisa Halpern tells her harrowing and courageous story about hiding her illness, hitting rock bottom, getting a correct diagnosis and treatment, and going on to get a degree from Harvard in the *Ladies Home Journal*.

http://www.lhj.com/health/conditions/mental-health/symptoms-treatment-schizophrenia/

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**CET: Treadmill for the Brain**

For more information...

- www.cedarclinic.org (more on CEDAR)
- www.cognitiveenhancementtherapy.com (more on CET)
- CETCleveland.org (more on cognition and recovery)

**Take home points**

- The brain has a remarkable ability to repair itself, a phenomenon known as plasticity. The brain can change throughout life.
- Cognitive deficits are related to altered brain anatomy and function, which may be related to abnormal brain plasticity.
- Cognitive deficits and the accompanying neurobiologic deficits may be reversible with cognitive remediation and this may persist beyond treatment.
- Neuropsychiatry-based treatments may have benefits across diagnoses.
- Deficits in brain plasticity may set in early. Early intervention may have large positive implications for outcome.
Public Transportation

For I-93 North or South and Boston
• Follow signs for the Newton/Arlington. %
• Go under the yellow overhead sign reading "Danger Low Clearance - Cars Only". %
• Go through the Western Avenue traffic light. %
• You will come to a sign saying Florian/Roche. %
• Take the next light, go through Soldiers Field Road. %
• You will see the sign saying Storrow Drive Rear Parking (limited parking). %
• Follow signs to Storrow Drive Rear Parking. %
• Continue on Soldiers Field Road.

For Cars
• Follow signs to Storrow Drive Rear Parking. %
• Take the next light, go through Soldiers Field Road. %
• You will see the sign saying Storrow Drive Rear Parking (limited parking). %
• Follow signs to Storrow Drive Rear Parking. %
• Continue on Soldiers Field Road.

For T Schedules, call the MBTA at 617-222-3200.