



OUT OF THE FOG

The monthly newsletter of NAMI San Francisco

www.namif.org

April Meeting Notes

Speaker: Barnett Levin, PhD

by Roberta Kaye

Dr. Levin is a psychologist in private practice. His specialization is in crisis intervention consultation as well as individual and family therapy for those diagnosed with a severe mental illness. Dr. Levin is also a founding member of the Mobile Crisis Team in San Francisco's Department of Mental Health. He spoke on ways to set limits without withdrawing love from one experiencing a mental health crisis, and he reviewed the criteria for satisfying the requirements of a "5150" hospitalization.

Mobile crisis intervention in San Francisco is open 7 days a week from 8:30am to 11:00pm M - F, and noon to 8:00pm on weekends and holidays. NAMI has repeatedly asked for mobile crisis hours to be expanded to 24/7 as part of the Mental Health Services Act. A crisis team responds to the need for emergency mental health evaluations performed by persons trained in psychiatry, psychology, nursing and social work, who determine whether the prospective patient's behavior satisfies the criteria for involuntary or voluntary hospitalization. Can he/she be treated on the scene and sent home with out-patient referrals? What can be done before and after the psychiatric emergency? It is the latter question that was explored in the NAMI meeting by Dr. Levin's response to vignettes presented by several family members in attendance.

Our speaker's involvement with mobile crisis started in November 1995...over 14 years ago. In his experience
Continued on page 2



Saturday, May 22, 2010

Speedway Meadow, Golden Gate Park

Check-in: 9:00 a.m. • Start: 11:00
Distance: 5K (3 miles) or 1.5K short route

Go to www.namiwalkSFbay.org or
info@namiwalkSFbay.org or
800-556-2401

Join one of our teams or make your own!

NAMIWalk is a fundraising and awareness-raising 5K walk that will take place in 80 communities across the country in 2010. Thanks to our amazing sponsors, we do not charge a registration fee in order to encourage our entire community to participate.

Seven San Francisco Bay Area NAMI affiliates work together to create this important event to support services for mental illness. They will share the proceeds from the walk which will be used locally to underwrite and support much-needed Bay Area programs of education, support and advocacy.

The 2010 sponsoring affiliates represent Alameda, Contra Costa, Marin, San Francisco, San Mateo, Santa Clara and Solano counties.

Take a step to stomp on stigma...Register today to walk in the 6th annual Bay Area NAMIWalk!

3rd Wednesday of each month
6:30 - 8:00 pm
1010 Gough, San Francisco

The Monthly Meeting

MEETINGS ARE AT 1010 GOUGH

May 19

Robin Buccheri, DNSc.,
MHNP, Professor USF School
of Nursing, and **Louise
Trygstad**. Hearing Voices: a
report from The World
Congress

June 16

Dr Cameron Quanbeck,
SFGH Psych Emergency
Services on LPS Reform in
2011: A new vision of
progressive mental health law
in California.

July 21

Antonio Hardan, MD,
of Stanford University,
specializing in Child &
Adolescent Psychiatry,
will speak about autism.

the San Francisco Mobile Crisis Treatment Team typically gets a call from a family, a friend, a clinic, or a residential hotel manager requesting an evaluation of someone who may be in need of hospitalization and who is ultimately a danger to self (suicidal), a danger to others (hostile or threatening), or who is "gravely disabled" (unable to provide for basic needs such as food, shelter or clothing).

Can family members set limits for one who is in a mental health crisis while, at the same time, providing love and support? The number one stumbling block for families is dealing with someone for whom they want to secure treatment, but who has refused to accept the family's recommendations. The family finds itself "at an impasse, a stalemate and it is very difficult for something to change." Mobile Crisis goes out and evaluates, but if the person is not a danger to self or others, if he/she has a place to stay or can state three sentences about how they have access to food and shelter, then they don't meet the criteria for involuntary hospitalization. Even if they do meet the criteria, their stay at SFGH Psychiatric Emergency Service (PES) or other inpatient unit may be very brief. It is often very difficult to surmount the limited availability of places providing psychiatric inpatient or residential treatment. Services have been cut to the bone.

Given the impediments to care, what can one do? Dr. Levin recommends that families to **find the leverage** to make some kind of change. As an example, a manic family member (a mother, for example) is in the hospital and refuses to allow her family to consult with the doctors providing her treatment. The mother wants the family to come and visit. This provides an opportunity for the family to require the mother to sign a release of information form in exchange for the family coming to visit. Also, at the end of a 72 hour "hold" when the patient is stabilized, he/she may be more amenable to acceptance of longer term therapeutic needs in a private practice setting.

Dr. Levin emphasized the need to immediately get **consents or releases of information** signed by the

County Mental Health

ACCESS Line: 415-255-3737

Substance Abuse Treatment Access

1380 Howard, First Floor

415-503-4730 or 1-800-750-2727

The Mobile Crisis Unit

415-355-8300

patient for all the treatment providers immediately because six weeks or six months later patients may not be conforming to their medical needs and, without the signed consent, there is nothing to allow families to confer with therapists. The release must name the person(s) the provider is allowed to talk to, a specified length of time, and recognize the legal right to withdraw that consent at any moment.

Medication compliance is another issue. If the family member is living in the family home or financially dependant, that person must agree to take their medications as prescribed and allow someone to watch them take it. It is helpful to know that certain medications can be ordered as liquids or quick-dissolve tablets. The monitor is then supporting the person and can verify to the Rx'ing MD that the meds were taken consistently and as prescribed. This facilitates the patient working with his/her doctor to find a way to adjust the doses so that they are effective and not overwhelming.

A mentally ill person must have **assurance of his/her family's love while**, at the same time, the family **no longer supports or colludes with unhealthy behavior**. Dr. Levin helps families strategize, problem-solve and fine tune their specific situation depending on the individual's and family's particular needs. For example, money and what it provides can be used as leverage when there is a strong desire or need for it. Sometimes, a person may refuse to take medications and be willing to give up what money provides thus becoming homeless if the family were to withdraw financial support. Many families are unwilling to force their loved one into homelessness. There is no one right or wrong answer.

Finally, a family must **act cautiously to retain trust**. Requiring conditions can be a "slippery slope." It is important to explore what each family member's thoughts and feelings are about an issue. The goal should allow the ability to think a situation through, consider all sides and come up with a decision and a plan of action.

Additional clinical/legal considerations:

People experiencing auditory hallucinations may also require treatment in an inpatient psychiatric facility. Often accompanied by paranoid delusions, their decision making process is no longer grounded in reality and they may become agitated, hostile and/or threatening. Dr. Levin pointed out that command hallucinations are auditory hallucinations that "command" the person to do something and are among the most dangerous conditions. They are very hard for the person to resist. The "voices" may be telling the person to hurt or kill themselves or someone else. The person feels compelled to

Continued on page 7

CA Mental Health Law Reform

By Jeong Shin

"California Mental Health Law Reform: What may be in store for the future ..." was the topic presented at the April 22 Grand Rounds at San Francisco General Hospital by Dr. Cameron Quanbeck, Forensic Psychiatrist and Carla Jacobs, Mental Health Activist

Before the California Lanterman-Petris-Short (LPS) Act of 1967, civil commitment of an individual required only the signatures of two medical doctors. The legislative intent of LPS was to end the inappropriate, indefinite, and involuntary confinement of mentally disordered persons. It also sought to safeguard individual rights through judicial review. LPS only provides for involuntary inpatient hospitalization. The criteria for an involuntary hospitalization under LPS include danger to self, danger to others, and/or gravely disabled (unable to care for self outside the hospital and no one else is willing to assume the responsibility).

Kendra's Law in New York is a law concerning assisted outpatient treatment (AOT). It grants judges the authority to issue orders that require people who meet certain criteria to take psychiatric drugs, regularly undergo psychiatric treatment, or both. Proponents of AOT considered it improvement over current LPS legislation because it allows for intervention before an individual with severe mental illness engages in behavior that results in inpatient hospitalization or incarceration, using the following criteria: Two hospitalizations in the previous thirty-six months, one or more serious threats or acts of violence in the previous 48 months, and being likely to refuse treatment due to mental illness.

Dr. Quanbeck reported that in a Duke University study of Kendra's Law, arrest rates dropped in half, hospitalizations decreased, duration of hospitalization decreased, and there was less substance misuse and better medication adherence. The concern with LPS is that the system is set up to wait until an individual is exhibiting dangerous behaviors rather than intervening when the person needs treatment. The timeline for commitment under a 5150 and 5250 hold is up to 17 days, and the current system fails to recognize the clinical reality that it often takes 30 days to respond fully to medication and appreciate benefits of treatment.

Failing to treat episodes of severe mental illness damages important brain regions. Psychotropic medications prevent this loss of brain tissue. Individuals with severe mental illness often lose the ability to recognize their illness that results in a loss of decision-making capacity. Dr. Quanbeck made the argument that sustained medication is what works and that objective measures of competency are necessary for individuals to give informed consent.

Carla Jacobs, Mental Health Advocate, co-founder of Treatment Advocacy Center, focused her presentation on how to get AOT implemented at the local level arguing

that the decision to close down state hospitals and the subsequent failure of those funds to be invested in community based treatment facilities resulted in de-institutionalized people who were then trans-institutionalized out of the hospitals and onto the streets or prisons.

She pointed out that the behavioral standards established under LPS criminalize people with mental illness; there is a fine line between danger for hospitalization and prison. People who are very ill but not dangerous may engage in behaviors such as disturbing the peace, vagrancy, trespassing, taking them out of treatment and putting them in jails and prisons.

Laura's Law, similar to Kendra's Law in New York, is a California state law. However, each county Board of Supervisors must pass a resolution to enact it. San Francisco has not enacted this law. The obstacles identified include lack of funding and lack of political will. There will never be a time when there will be plenty of money and there is not enough money to continue on the current path.

Ms. Jacobs asserted that individuals who have the capacity to recognize their illness, are able to weigh benefits and detriments, and see consequences...then they have the right to their decision and the responsibility of the consequences. However, the system must work not only for people well enough to ask for help, but also the people who we need help and protection.

NAMI CA State Convention

**August 27 - 28, 2010
Marriott in Burlingame**

The new registration process is available at <http://www.namicalifornia.org/> - early bird rates end July 3.

Hotel reservations can be made by calling 888-228-9290 - ask for the specially negotiated rate of \$112, good thru August 18. Consumer scholarships awarded on a first come, first served basis. More info at 916-567-0163 or catheryn.mercado@namicalifornia.org, including an application and exhibitor information.



NAMI National Convention

June 30 - July 3, Washington DC

We've planned our 2010 National Convention program to end on the evening of July 3rd (our annual banquet). The Hilton's discounted NAMI convention hotel rates of \$155/single and \$165 double are good through July 6. Visit <http://www.nami.org/template.cfm?section=convention>.

HealthyPlace MH Newsletter

<http://www.healthyplace.com>

Negative Self-Talk - A blog posted by our own Aimee White, author of the Nitty Gritty of Anxiety blog, is generating email comments today. It's titled: "Overcoming Negative Self-Talk with a Writing Exercise." Most of the emails center on how negative self-talk eventually destroys your self-esteem.

Trauma psychologist, Dr. Kathleen Young, describes negative self-talk as a "sense that one is innately bad. It often shows up as a sort of running inner monologue detailing your shortcomings." Unfortunately, negative self-talk tends to be a self-fulfilling prophecy. You talk badly about yourself, others act badly towards you, you lose faith in your abilities and yourself, and your life begins to spiral downhill.

If this sounds familiar to you, it's important to spot negative self-talk and figure out where that's coming from and then engage in positive self-talk. Among other things, cognitive therapy focuses on helping people talk to themselves more positively.

More Information on Negative and Positive Self-Talk

- Building Self-Esteem: A Self-Help Guide
- Talking to Yourself
- Overeating Self-Talk in Action
- Cognitive Therapy for Depression and How It Improves Pessimistic Thinking
- For Anxiety and Panic: Self-Talk - Replace the Negative with the Positive
- Challenging Negative Thoughts
- Helping Your Child Build Self-Esteem
- Positive Thinking Keeps Your Bipolar at Bay
- Self-Esteem: Be Your Own Kind of Beautiful
- How to Love Yourself

Self-Help for Negative and Optimistic Thinking

(short and to the point)

- Immediate Relief of Negative Feelings
- Positive Thinking: The Next Generation
- Make Your Own Labels
- Thinking Positively
- How Thinking Negatively Can Make You Feel Better
- Why Optimism Is a Self-Fulfilling Prophecy

Share Your Mental Health Experiences

Share your thoughts on "negative self-talk" (how it's affected you, what's helped), or any mental health subject, or respond to other people's audio posts, by

calling our toll-free number (1-888-883-8045). You can listen to what other people are saying by clicking on the gray title bars inside the widgets located on the "Sharing Your Mental Health Experiences" homepage, the HealthyPlace homepage, and the HealthyPlace Support Network homepage. If you have any questions, write us at: info@healthyplace.com.

Check out UK information!

Caroline Fitzgerald was one of our wonderful leaders in the In Our Own Voice program, and she left us for a position in London, England. We miss her, but she sent us this note: I came across this website from a MH Charity in London while researching the MH Legislation for my new job in the UK and found it to have well written consumer friendly info on many topics. Here is the link: http://www.mind.org.uk/help/information_and_advice. Thanks Caroline!

NAMI Founder Harriet Shetler's Legacy

Statement by Michael J. Fitzpatrick, National Exec Dir., 4/6/10

Harriet Shetler, whose wit and tenacious advocacy endeared her to NAMI members across the nation, died March 30 in Madison, Wisconsin. She was 92.

She has often been considered NAMI's founder-although in fact, she was part of a larger movement.

With Beverly Young, also of Wisconsin, and more than 250 other grassroots leaders from around the country, Harriet convened a meeting in Madison in 1979 that resulted in the founding of the National Alliance for the Mentally Ill.

She went on to serve on the national board of directors, edit NAMI's first national newsletter and wrote unpublished histories of the first 10 years of the organization and some of its affiliates.

From the Madison meeting, individuals and families affected by mental illness have risen out of isolation, anxiety and anger to become a force to be reckoned with at local, state and national levels-challenging medical assumptions and the mental health care system.

The story of the historic Madison meeting is included in the documentary *When Medicine Got It Wrong*, which will be aired on many PBS stations in May 2010, during Mental Health Month.

Stressed Out?

New Social Networking Site for College-Age Adults: Mental Health, Music and More

Arlington, Va., April 12 /PRNewswire-USNewswire/ --

Freshman year. Final exams. Life after graduation. The pressures of college transitions involve many competing demands, including in some cases, mental health concerns.

The National Alliance on Mental Illness (NAMI) has launched StrengthofUs.org, a new online community where young adults, ages 18-25, can provide mutual support in navigating challenges and opportunities before, during and after the college years.

"Young adulthood is an exciting challenge, but also a confusing and stressful time for anyone," said Michael Fitzpatrick, NAMI executive director. "Life can throw things at you fast."

Developed by college students and other young adults, StrengthofUs.org is a user-driven social networking community where a person can connect with peers, share personal stories, creativity and helpful resources by writing and responding to blog entries, engaging in discussion groups and sharing videos, photos and other news. It offers resources on:

- Mental health issues
- Healthy relationships
- Family and friends
- Campus life
- Independent living
- Finances
- Employment
- Housing

"StrengthofUs.org is about helping and inspiring each other," said Alex White, age 23, a member of the advisory group who helped develop the site. "I would not be alive today if it had not been for the love, care and support I received from family, friends and loved ones."

A Montana State University graduate, White was diagnosed with bipolar disorder at age 13. He attempted suicide before gaining control of the illness, but now leads a happy, productive life in New York City. He has made an award-winning short film, *Une Vignette de Melancolie*, about depression that has played internationally.

On April 21, the site will host a "launch party" featuring a remix of the song "Goodmorning" from the upcoming *Derivatives* album by William Fitzsimmons, who worked helping people with mental illness before turning a passion for music into his profession. He was named an iTunes Best Singer-Songwriter for his album *The Sparrow and the Crow* and his music has been featured on the television show *Grey's Anatomy*.

The launch coincides with the recent deaths of three students from suicides at Cornell University and reports of increasing cases of depression and anxiety on college campuses nationwide. "I think that depression and

suicide are the largest health issues facing college students at this time," said Alan Glass, director of St. Louis 's Washington University student health services and American College Health Association board member, in an interview with the school's independent student newspaper.

NAMI created the StrengthofUs community through the support of the Rodwell Dart Memorial Foundation, established by Hailey Dart, in loving memory of her son, Roddy, who lost his life at age 22.

Low Cost/Sliding Scale Programs at UC Berkeley

The Mood Clinic at UC Berkeley provides two low cost/sliding scale programs: one for adults with bipolar disorder, and another for their relatives and loved ones. Our aim in both groups is to provide information, as well as tools to enhance coping with the disorder. Both programs are led by doctoral students in clinical psychology who are supervised by Ph.D.level psychologists. Additional information about either program can be learned by calling the Psychology Clinic at: 510-642-2055.

PLAN of California

Two master **Special Needs Trust Plans** are offered to families in California. The plans would designate a minimum of \$150,000 or \$300,000 to contract with PLAN to give oversight of both fiduciary and personal support services without endangering public entitlements.

Contact Baron Miller (415) 522-0500 or
PLAN of California (888) 574-1258

Special Needs Planning

May 22, 1-3 p.m, San Rafael

June 10, 5:30-7:30 p.m., Los Altos

Kevin Urbatsch with guest Dan Cutter invites you to a FREE seminar. Topics to be covered will include: Setting up Lifetime Plans for Loved Ones with Special Needs, Maximizing Government Benefits, Using Special Needs Trusts and Memorandums of Intent, and Limited Conservatorships. RSVP now—seating is limited. For more information call Ryan Garwin at 415-593-9944.

Support Groups



Family Members' Groups

Healing Circle African American Family Support

1st Thursdays, 6 - 7:45 pm at 1099 Sunnydale Ave (The Village). Call La Vaughn at 415-832-9616

Sibling & Adult Children Network meets twice a year in June and December.

Call Mary Gullekson at 474-7010 for information

Bilingual & Monolingual Support Groups

Asian Mental Health Resources

The Culture to Culture Foundation's directory of Asian-American mental health services in the Bay Area can be accessed at www.asianmentalhealth.info or call 925-938-9988

Chinese Families Mental Health Alliance. Ed Koo 352-2047

Spanish Language Support Group for family members and caregivers. 1st Tuesdays 5:30-7:30 pm at Mission Mental Health, 2712 Mission Street. Call Anita Madrigal at 415-867-8172.

Consumer Self-Help Groups

Depression & Bipolar Support All. (formerly DMDA)

Saturday afternoons at 1:30-3:00 and

1st Mondays at 6:45-8:00 pm in the Saint Francis Hospital, 900 Hyde St., Lower Level meeting room. Call 519-0171

OASIS (Office of Self Help)

1095 Market Street at 7th, Suite 202 (415) 575-1400

RECOVERY, Inc. for nervous ailments

(415) 333-6454 Community Miracles Center, 2269 Market Street (between Noe and Sanchez)

Consumers with Schizophrenia

3rd Wednesday of each month, 5:30-6:45pm
1010 Gough. Info: Susanne at 558-5900

Hoarding & Cluttering Support

2nd Monday and 4th Wednesday of each month.
Antonio (415) 421-2926 x306

Health and Wellness Action Advocacy

1st Thursday of each month, 1-3pm. Antonio at (415) 421-2926, x306

Alcoholics Anonymous: San Fran: (415) 621-1326

Marin: (415) 499-0400 San Mateo: (650) 573-6811

Narcotics Anonymous SF Helpline: (415) 621-8600

Harm Reduction Therapy (415)-863-4282



NAMI-SF Support Groups

For Family Members, Caregivers & Friends Only

- 1) 1010 Gough
2nd Wednesday at 6:30
Contact Vicki Evans at 661-5208
- 2) SF General Hospital
7th Floor, Room 7 M 30
Tuesdays, 5:15 – 6:45 p.m.
Call Susanne Killing at 558-5900
- 3) Kaiser Hospital, French Campus at
4141 Geary, Room 2 (free parking!)
2nd Saturdays, 10:30-Noon
Contact Pam Polos at 650-862-2886 or
pamelapolos@comcast.net



DBSA

**Depression and Bipolar Support
Alliance of San Francisco**

Regular Support Group:

every Monday at 6:45-8:15pm and
every Saturday at 1:30-3:00pm.

Young Adults Support Group:

for 18 to 25+ year old people

1st and 3rd Mondays, 6:45-8:15pm

Contact Harry at 650-430-2909 for information.

Friends And Family Support Group:

1st and 3rd Mondays, 6:45-8:15pm.

2nd Floor Conf. Room

Info: Jane Norbeck at 415-519-0171
or Harry Walters at 650-430-2909.

Location:

900 Hyde St., St. Francis Hospital

between Pine and Bush in San Francisco

At Outpatient Registration desk, take elevator down to
lower level. Meeting rooms are next to the elevator.

Meetings are on a drop in basis and are open to
peers, please note we do not allow observers. You
do not need to be a member to attend, however
memberships are \$20.00 a year and you are
encouraged to join and support the organization.

NAMI-San Francisco is a self-help organization of
family members, mental health consumers, friends,
professionals and other interested citizens, united to
provide support, education and advocacy for persons
with severe mental illness. NAMI-San Francisco is a
private, non-profit organization.

comply. Psychiatric hospitalization is helpful in maintaining safety and provides a range of treatment options.

Just because someone is hearing voices doesn't mean s/he needs to be in the hospital. Part of the Mobile Crisis Team's assessment focuses on how the person responds to authority. If the patient can "pull it together" and is not threatening to hurt themselves or others then they can go, for example, during the day, to Westside Crisis Clinic or to the outpatient mental health clinic where they already receive services. Over the years, mental health services in San Francisco have been decimated and the current budget deficit will certainly lead to even more cuts.

Dr. Levin is available to address any group interested in learning more about the Mobile Crisis Team in San Francisco, the "5150" criteria for involuntary hospitalization and the work he does in private practice including crisis intervention consultation as well as individual and family therapy for those diagnosed with a severe mental illness such as bi-polar disorder, schizophrenia, major depression, etc.

He can be reached at:
Barnett Levin, PhD
2964 Fillmore Street, Suite 5
San Francisco, CA 94123
Office phone: 415-440-5505
Crisis line: 888-744-2747
drlevin@barnettlevin.com / www.barnettlevin.com

NAMI Family to Family Program

This is a 12-week course for family members of individuals with severe mental illnesses taught by trained family members, and all instruction and course material are free to class participants. Our next class is going to start on **Saturday, May 29th, 9:30 am to noon**. To enroll please leave your name and contact information either by calling the NAMI San Francisco office at 415-474-7310, ext 437 or by email to namisf@fsasf.org. You can also leave your information for a waiting list for the next class if these dates are not convenient for you. We form classes at various locations around San Francisco at times that are convenient for teachers and attendees. There will be other classes forming toward the end of the summer and next fall.



**Remember to donate to the
Community Thrift Store**

This is one of our *best sources* of income for the
NAMI SF Chapter!!

**625 Valencia Street at 17th Street
415-861-4910**

www.communitythriftsf.org

(check with us about acceptable items to donate)

Out of the Fog is published 10 times a year by NAMI-San Francisco, a non-profit organization affiliated with the National Alliance on Mental Illness, which goes by the acronym NAMI, and NAMI-California, the statewide affiliate.

www.namisf.org

NAMI San Francisco

77 Geary, 5th Floor
San Francisco, CA 94108
415-474-7310 ext 437
namisf@fsasf.org

NAMI-SF Hotline 415-905-NAMI / 415-905-6264

Answering Team

Carla Villalba (Chair)
Susan Bronstein
LaVaughn Kellum-King
Eileen Lemus
Wanda Materre
Dale Milfay
Mary Vogt

NAMI- San Francisco Executive Board

President: Gifford Boyce-Smith, MD
President Emeritus: Pamela Fischer
Vice President: Dale Milfay
Secretary: Belinda Sifford, Esq.
Treasurer: Shima Harada, CPA

Board Members at Large

Vicki Evans
Wanda Materre
Tom Purvis
Karin Tamerius, MD

Out of the Fog: Barbara Redfield and Ruan Frenette
PLAN of California: Baron Miller, Esq.

NAMI SAN FRANCISCO

77 Geary Blvd., 5th Floor
San Francisco, CA 94108

PRSR-STD
U.S. Postage
PAID
San Francisco, CA
Permit No. 11751

Return Service Requested



Please Join NAMI SF

When you join NAMI **San Francisco**, \$10 pays your dues for NAMI National and \$10 for NAMI California. (\$45 is three memberships in one!) NAMI San Francisco needs your membership support. Please let us count you. There is power in numbers, and we need the support of families, friends, consumers, professionals and others who share our goals. Your dues help us pay for the printing of the newsletter, educational materials and mailings for the Family- to-Family Education Course, an invaluable resource for people who love someone with a mental illness, and for In Our Own Voice and Peer to Peer empowering programs for consumers.

Write your check to "NAMI San Francisco"
Please mail to:
NAMI-San Francisco Treasurer
77 Geary Blvd., 5th Floor
San Francisco, CA 94108

NAME _____

(Please Print)

ADDRESS _____

CITY _____ ZIP _____

PHONE _____

EMAIL _____

This is a: •New Membership •Renewal •Address change

What is your relationship to a person with a mental illness?
•self • parent • sibling • spouse • health care/professional
Other _____

Please Check One:

- \$10 Consumer
- \$45 Individual or Family Membership
- \$100 Organization or Benefactor Membership
- \$250 or more for Patron Membership
- \$500 or more for Sustaining Membership

• I cannot join NAMI-San Francisco at this time but I would like to receive ***Out of the Fog*** or I am enclosing a donation of \$ _____ to help cover the cost of ***Out of the Fog***.