



NAMI HelpLine Training For NAMI State Organizations and Affiliates

NAMI Information HelpLine

NAMI

National Alliance on Mental Illness
3803 N. Fairfax Dr., Suite 100
Arlington, VA 22203
703-524-7600
Toll Free HelpLine: 800-950-NAMI (6264)
Monday through Friday; 10 am to 6 pm, ET

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Introduction to NAMI and NAMI HelpLine Services

About NAMI

Who We Are

NAMI, the National Alliance on Mental Illness, is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness.

Started in 1979 as a small group of families, today we are an association of hundreds of local affiliates, state organizations and volunteers who work in to communities to raise awareness and provide support and education to everyone affected by mental health conditions and the people that love and care for them.

You are a part of this effort. As a NAMI HelpLine volunteer you will listen to people reaching out to NAMI for help and be able to provide them with information, referrals and compassion.

What We Do

Educate. NAMI volunteers bring peer-led programs and support groups that provide outstanding free education, skills training and support.

Lead. Public awareness events and activities combat stigma and encourage understanding.

Connect. Social media provides opportunities to bring people together anytime, anywhere. NAMI provides multiple ways for people to use its social media platforms to share, support and encourage others.

Listen. NAMI HelpLines allow us to respond personally to hundreds of thousands of requests each year, providing free information and support—a much-needed lifeline for many.

Advocates. NAMI works to shape national public policy and provides grassroots volunteer leaders with tools, resources and skills necessary to ensure our community's interests and issues are addressed in national, state and local government.

Our Structure

NAMI is the foundation for hundreds of NAMI State Organizations and NAMI Affiliates. NAMI is a 501©3 nonprofit membership organization governed by a board of directors elected by the membership.

NAMI HelpLine

NAMI HelpLines offer free information, referrals and support to people living with mental health conditions, family members and caregivers, mental health providers and the public providing. NAMI HelpLines can be contacted by phone or email and are operated by NAMI and some NAMI State Organizations and NAMI Affiliates. With every call and email, HelpLines strive to help others move closer to recovery or meet the needs of a loved one providing care and support.

What kind of resources do NAMI HelpLines provide?

- Information about mental health conditions, treatment options and recovery strategies.
- Suggestions for coping with mental health symptoms or helping someone else.
- Information about NAMI support groups or education programs.
- Referrals to treatment services, community support services and other useful organizations.

- HelpLines also send materials from the [NAMI Fact Sheet Library](#) and NAMI brochures.

Who responds to HelpLine calls and emails?

NAMI HelpLines are staff by teams of well-trained and knowledgeable volunteers, interns and staff members. Staff members and volunteers will often have experience living with a mental health condition or providing care and support to a family member with the condition, and therefore, better able to understand and empathize. HelpLine interns are often psychology, social work and counseling students and able to apply what they've learned to real life situations when talking to people contacting the HelpLine.

Who provides NAMI HelpLine services?

- NAMI Information HelpLine is available Monday - Friday from 10 am to 6 pm, ET, 1-800-950-6264 or by email at info@nami.org.
- NAMI State Organizations
- NAMI Affiliates

NAMI HelpLine Training

The training goal is to equip you to know what's needed and where to find it.

Training is essential to providing quality help and service to the NAMI community. HelpLine training focuses on NAMI's website, www.nami.org, the HelpLine Resource Directory and your organization's website and resource materials.

While training, you will use these resources to learn information you'll need, resources and referrals you'll use and how to locate everything quickly when helping a HelpLine caller. This will allow you to be as effective as possible.

Four Training Steps

1. *Learning to use your tools.* Use this training guide to help you navigate through www.nami.org and resource directory.
2. *Listening to recorded messages.* Listen to messages left on the voice mail system and record the caller's message. This will allow you to listen to callers and hear common requests.
3. *Listening to live calls.* Spending time listening to an experienced HelpLine staff member or volunteer handling HelpLine calls. If possible, listening to both sides of the conversation is most helpful.
4. *Returning calls.* Returning calls to people that have left voice mail messages allows time for preparation like researching resources or locating information. At this point, many people feel comfortable talking with callers; however, review or repeating training steps is an option.

Getting Started

Understanding www.nami.org

NAMI's homepage is a gateway into NAMI designed to inform, engage and connect.

Inform. Several times each week sections of the homepage—*From The NAMI Blog, NAMI News* and personal stories from *You Are Not Alone* and *OK2Talk*—post new, fresh content.

Engage. Homepage visitors are invited to get involved—Create An Account, Donate or Become A Member.

Connect. [Find Your Local NAMI](#) helps people connect with their NAMI State Organization and NAMI Affiliate. The HelpLine phone number and Got a Question are way for people to connect with the NAMI HelpLine.

In the lower right hand corner of the homepage are options for connecting with NAMI through social media. You will find links to NAMI's social media including:



Bright Idea— Stay connected to NAMI through social media.

- [NAMI Facebook](#)
- [#namicommunicate](#)
- [NAMI Air](#)
- [You Are Not Alone](#)
- [Instagram NAMICommunicate](#)
- [YouTube NAMIVideo](#)



Your NAMI website. NAMI State Organizations and NAMI Affiliates have websites containing information about NAMI in local communities. Practice finding your way around your NAMI's site. Combined with nami.org, your state and local webpages will provide the most complete information.

Behind the Homepage

NAMI's website is organized into three sections which are accessible from the homepage:

[Learn More](#)

[Find Support](#)

[Get Involved](#)

Learn More– Behind the Homepage

[Learn More](#) is the section of www.nami.org that provides information on mental health conditions, treatment, support and coping tips and access to NAMI's online Discussion Group communities.

Learn how to quickly navigate through this section by reviewing each condition and becoming familiar with symptoms, treatment options and supportive suggestions. Focus on–

- [Anxiety Disorders](#)
- [Bipolar Disorder](#)
- [Borderline Personality Disorder](#)
- [Depression](#)
- [Schizoaffective Disorder](#)
- [Schizophrenia](#)

The [Related Conditions](#) section has information that will frequently come up during HelpLine calls. It is important to become familiar with these conditions.

Sometimes people will contact a HelpLine with questions about changes in a person's behavior, thoughts or things they are experiencing. [Know The Warning Signs](#) gives information about common signs of mental illness and the difference between expected behaviors and what might be signs of a mental illness.

[Treatment](#) section includes important information. Information on [Getting Treatment During A Crisis](#) will help equip you to advise people in difficult situations and combined with your knowledge of local resources which will greatly assist callers. Note: NAMI HelpLines do not have the level of training required to help people in crisis situations involving suicide or treats of violence. These callers should be referred to the [National Suicide Prevention Lifeline](#) or 9-1-1.

[Research](#) and [Public Policy](#) information is also available in the Learn More section.

[Fact Sheet Library](#) contains two-page fact sheets on NAMI's most commonly requested material. These are designed to be easily printed and mailed. They are a valuable resource of HelpLines assisting callers without access to the internet.

Learn More Quick Look Reference can be downloaded for printing in the Appendix.

Find Support– Behind the Homepage

[Find Support](#) section of www.nami.org provides helpful information that supports recovery. It is divided into sections that address the specific needs of different groups of people and features NAMI programs.



Use the links for details and learn more!

[Living With A Mental Health Condition](#) includes important information that addresses common issues. By reviewing these topics you'll be better equipped to discuss and offer suggestions to callers.



For each topic below go to the corresponding section of the HelpLine Resource Directory (HRD) to find referral resources.

Most frequently used include:

- [Finding A Mental Health Professional](#) (HRD-Doctors and Treatment Referrals)
- [Securing Stable Housing](#) (HRD-Housing)
- [What To Do In A Crisis](#) (HRD-Suicide and Crisis Lines)

NAMI programs and services supporting the recovery of people living with a mental health condition include:

- [NAMI Peer-to-Peer](#)
- [NAMI Connection Recovery Support Groups](#)
- [Discussion Groups](#)
- [NAMI Air](#)



Bright Idea! Create a user account and visit the Discussion Groups or download NAMI Air.

[Family Members And Caregivers](#) addresses the needs of those caring and supporting a loved one with a mental health condition. To offer help and support to these HelpLine callers, review these sections.

Most frequent include:

- [Supporting Recovery](#)
- [Being Prepared for a Crisis](#)
- [Calling 911 and Talking To Police](#)
- [Preventing Suicide](#)

[NAMI Programs](#) section contains information about all of NAMI's programs. For full descriptions of NAMI support groups and education programs, many with a video, and class locator use the links below.



Use the links for details and learn more!

Education:

- [NAMI Family-to-Family](#)
- [NAMI Basics](#)
- [NAMI Homefront](#)

Support:

- [NAMI Family Support Groups](#)
- [Discussion Groups](#)
- [NAMI Air](#)

Awareness:

- [NAMI Ending The Silence](#)
- [NAMI In Our Own Voice](#)
- [NAMI Parents & Teachers As Allies](#)

Review the other sections for information and concerns affecting people within specific communities.

- [Teens & Young Adults](#)
- [Veterans & Active Duty](#)
- [LGBTQ](#)
- [Diverse Communities](#)

NAMI Programs Quick Look Reference can be downloaded for printing in the Appendix.

Get Involved– Behind the Homepage

The [Get Involved](#) section of www.nami.org offers engagement opportunities for people wanting to get involved in the NAMI movement.

- [Donate To NAMI](#)
- [Join NAMI](#)
- [Share Your Story](#)
- [Volunteer At NAMI](#)
- [Take Action On Policy Issues](#)
- [NAMI On Campus](#)
- [NAMI National Convention](#)
- [NAMIWalks](#)
- [Raise Awareness](#)

HelpLine Resources

HelpLine Resource Directory

The HelpLine Resource Directory (HRD) provides referral information to non-profit, government and social service organizations. They are organized two ways: alphabetically and by topic. The directory is checked and revised every year with some resources added, corrected or removed.

Study the directory and become familiar with its contents.



The HRD works best when used on your computer allowing you to use the hyperlinks and directly connect with the resource's webpage.

HelpLine FAQs (Frequently Asked Questions)

Frequently Asked Questions provides you with answers to common HelpLine questions. It is located in the Appendix.

Sections include:

- a. Coping
- b. Treatment
- c. Social Resources
- d. Legal/Advocacy
- e. NAMI/General Resources

Examples:

My friend/family member won't follow recommended treatment. What can I do to make this person follow through?

I need a doctor or mental health care facility that specializes in a specific disorder. Can NAMI help me?

Where can I find housing?

My friend or family member is in jail due to his/her mental illness. How can we help this person?



Bright Idea: Keep the FAQs open on your computer during your shift so you can refer to it during calls.

Frequently Referred Websites

SAMSHA, Substance Abuse and Mental Health Services Administration's website contains information on behavioral health treatment services and state mental health agencies. Their 24/7 National HelpLine, 1-800-662-4357, assists callers by locating treatment options including:

- Public mental health facilities that are funded by state mental health agencies.
- Mental health treatment facilities administered by the Dept. of Veterans Affairs.
- Private for-profit and non-profit mental health facilities that are licensed by the State or accredited by a national accreditation organization.

Contact: Phone – 1-800-662-HELP (4357) English and Spanish

Web - www.findhelp.samhsa.gov



Bright Idea: Use the locator for the caller if they are unable to get the information.

NDRN National Disability Rights Network is the nonprofit membership organization for the federally mandated Protection and Advocacy (P&A) Systems and Client Assistance Programs (CAPS). There is a P&A/CAP agency in every state.

*For people with disabilities NDRN **guards against abuse; advocates for basic rights; and ensures accountability in health care, education, employment, housing, transportation, and within the juvenile and criminal justice systems.***

- Website contains information about these issues as they affect people with disabilities.
- **To file a complaint - caller should call their state's P&A/CAP agency.**

Contact: Phone: Locate correct number by clicking their state on the right side of the page.

Web - www.ndrn.org (links to all P&A/CAP state organizations).



Bright Idea: If caller has a grievance, provide them with their state's organization contact information.

NeedyMeds, patient prescription assistance program information about discount programs.

Contact: Phone: Helpline 1-800-503-6897

Web – www.needymeds.org

I&R Specialist – If caller asks, provide them with information from [www. Needymeds.org](http://www.Needymeds.org) such as pharmaceutical company discount programs for specific medications, etc.

Special Topics

NAMI Legal Resource Service is a service of the NAMI Information HelpLine which can provide information about pro bono representation or names of attorneys. Legal Resource Service volunteers can provide only referrals, not advice or counsel of any kind. For assistance: call 1-800-950-6264.

Financial Assistance - If the caller needs help paying bills, utility bills, credit card debt, mortgage payments, medical, etc., they can locate assistance programs at www.needhelppayingbills.com. There is information about help with copays, deductibles and health insurance premiums at www.theassistancefund.org. Additional resources are located in the HRD.

Callers can call 211 from a local telephone for referrals to other agencies that may offer temporary emergency financial assistance (i.e. churches, synagogues, Catholic Charities and the Salvation Army, Citizens Energy Corporation), food pantries and transportation subsidies. Representatives may also be able to tell you about available government assistance programs food stamps, utility assistance and other cash assistance.

Prescription Assistance - Information on government programs, non-profit organizations and pharmaceutical companies offering free or low-cost medication is located in the HRD.

Housing Assistance – Advise callers that state and national housing resources can be located by using the website <https://www.disability.gov/housing>.

The Department of Housing and Urban Development (HUD) is a resource for more affordable housing. HUD provides information on the Section 811 Program providing supportive housing for persons living with disabilities. Unfortunately there is a large demand and often the wait is over a year. Talk to your local social services agency as soon as possible to get placed on the local housing list. The HRD contains information about housing options for people living with mental illness.

Disability Income – Mental illness sometimes interferes with an individual's ability to maintain employment or earn enough income to provide for their needs. There are two disability programs that provide for this need:

Supplemental Security Income (SSI) - It is designed to help aged, blind, and disabled people, who have little or no income; it provides cash to meet basic needs for food, clothing, and shelter.

Social Security Disability Insurance (SSDI) – Provides income to people with a qualifying disability who have worked and paid into the social security program (payroll taxes) for five of the last 10 years preceding the disability. Information about applying for either SSI or SSDI is located in the HRD.

Part IV: Communication Skills & Call Handling

The HelpLine's callers are most often people living with a mental illness or the family member or friend of a person with mental illness. Callers present a wide variety of situations and problems. While caller's requests range from simple to complex, HelpLine workers should keep in mind the following three points:

- **What we do.**
- **What we don't do.**
- ***"How can I help you today?"***

What we do

Efficient and effective support and assistance in response to a caller's **need** is our primary function. This service is provided initially during the phone conversation, and may be followed up with a packet of information that is mailed to the caller. Callers may need specific information about a disorder, a medication or a referral to a support group in their area. In some cases, the caller may need a referral to someone who can help with a legal matter, help find a doctor or other types of specific assistance.

What we do NOT do

Crisis or suicide calls. If you receive a crisis, or suicide call, **do not**, engage the caller in conversation. Tell the person that you are not a trained, or professional counselor, and that they should call 1-800-273-TALK (8255) to speak to someone who is. If they will not take the number, say, "Just a moment, please. I will let you speak with my colleague on the HelpLine." Then **hand** the phone to a HelpLine staff member. NAMI would be liable if we tried to talk to or counsel the caller in any way. We would all like to be able to help, but this is best achieved by referring them to the people working on the Crisis Line. They have extensive training for these situations.

Provide counseling or therapy. We provide an empathetic, supportive and listening ear, but we are not crisis counselors or therapists. When necessary, it is important to state this and to link callers with professionals and support services in their local area.

Provide direction or advice. We provide information to help callers know their full range of options, but do not advise them on which option to choose. It's important to let callers know that we are not doctors, lawyers or pharmacists (even if you happen to be one of these when you are away from the HelpLine!)

Provide referrals to particular service providers. (i.e., psychiatrists, therapists, attorneys, etc.), although we can provide suggestions on how to find a service provider.

Provide individual casework or advocacy. NAMI advocates at the national, state and local levels for systemic change, but unfortunately we do not have the staff or resources to provide individual advocacy.

“So how can I help you today?”

Many callers need to share their experience. Controlling the conversation will allow you at the appropriate time to ask, “How may I help you?” By asking the question, we avoid presuming to know what the caller’s need is and avoid confusion or misunderstanding, especially since callers will often discuss a number of issues as they speak with us. Because they may not be seeking help for each and every issue, we don’t want to provide answers to questions they’re not asking. By asking this simple, direct question, callers begin to focus on what they really need. Sometimes they realize they’re not sure how we can help them. At this point, you can be helpful by problem-solving with the caller and identifying resources.

Communications Skills

Communication begins with listening–

Quality telephone communication requires skills in active and reflective listening.

Active listening involves actively engaging in what is being said, including the content, meaning and manner of what is being said. It also involves being aware of our response to what we hear.

Reflective listening is responding to the caller initially reflecting back to the caller what he/she has said. This allows the caller to know that they have been heard and understood, provides an opportunity for clarification and establishes a connection between speaker and listener.

Example:

Caller: “My son has just graduated from college and he is worried that he will experience discrimination because of his bipolar disorder when he applies for jobs. Is he required to disclose information about mental illness?”

Suggested response: “I can understand why your son might be concerned about having to answer such questions, especially given the obstacles he’s had to overcome. I’m not a legal expert, but I think this type of discrimination is illegal; he should contact the Equal Employment Opportunity Commission.”

How you say it–

Because the caller has no visual input during your conversation certain elements of your speech need to provide additional information.

Tone communicates sincerity or disinterest, empathy or distance, apathy or concern.

Inflection causes the voice to rise and fall and avoids boring, monotone speech.

Courtesy communicates respect—don't speak when the caller is speaking, use slang or "off color" language.

Enunciate and speak clearly and distinctly; avoid misunderstanding or the need to repeat.

Result: The caller hears someone who is relaxed, confident, sincere, understanding and knowledgeable and enjoys what they're doing.

Choosing the right words—

Avoid –

"You'll have to wait..." (rude)

"We don't handle that here." (negative)

"That's a bad idea. I think you should..." (directive)

Better—

"I can take care of that..." (confident)

"I will be happy to ..." (sincere, enjoys helping)

"Let me see how I can help you with that." (sincere)

How We Talk Mental Illness--



Bright Idea: *It is IMPORTANT to learn and use the following words and descriptions when speaking with someone about mental illness. They promote stigma-free conversation.*

Mental illness is a medical condition that disrupts a person's thinking, feeling, mood, ability to relate to others and daily functioning. With an accurate diagnosis, effective medicine, attention to health and wellness and peer and family support most people living with mental illness can obtain relief from their symptoms and achieve satisfying and meaningful lives.

Examples of refreshed language usage

Old	New
Mental illness is a brain disorder	Mental health conditions are complex and can be caused by a number of factors usually involving: genetics, environment, trauma, brain structure, etc.
The mentally ill	People living with a mental health condition

Schizophrenics	People living with schizophrenia
Consumer supports	Recovery supports
Suffer with (or from) mental illness	Experience mental health condition
Bipolar disorder requires ongoing treatment	Medication, psychotherapy, support groups and education are recognized as essential components of the treatment.
Normal (behavior)	Usual (behavior)
Disabled	Experience a disability related to the illness.
People who are stable.	People who are living in recovery.

Handling HelpLine Calls

Parts of a Call

Preparation: Be ready to talk to the caller when you log in. Be sure you are ready to answer any questions--make sure you have the HelpLine Resource Directory; your computer homepage is nami.org and paper and pens for taking notes.

Opening: Answering the Telephone: Greeting, identifying oneself and the organization, preparing to listen. Our standard NAMI Information HelpLine greeting is:

"NAMI HelpLine; this is (*your first name only*). How may I help you?"

Body: The largest part of the call, when much information is shared, questions are asked, problems are clarified and solutions and action steps are identified, including referring the caller to the local NAMI Affiliate and NAMI State Organization.

Resolution: Review and identify the steps that you and/or the caller will take (e.g., "So, you can get in touch with your local NAMI Affiliate for information about drop-in centers in your area, and I'll send you our brochure on schizophrenia..."), along with the timeframe involved (written information takes 10 days to two weeks to arrive).

Closing: Most calls come to a natural conclusion after you have handled the main issue, provided information and agreed on any necessary follow up. Calls should end with a summary. Briefly recap what was discussed and the action steps you're going to take:

- "Thanks for calling the NAMI HelpLine"

- “Please feel free to call us back if you need anything else.” Allow the caller to hang up first.



Bright Idea: Listening to Calls

It is helpful to listen to calls being handled by a staff person or experienced volunteer before you attempt receiving calls on your own. Your HelpLine may be equipped with two-way headsets that allow you to listen in on another’s call.

Troubleshooting

Focus the Call –

If the caller rambles at length or doesn’t clearly identify his need, it is necessary to help the caller clarify his main purpose in calling.

Two strategies, inquire and direct, work especially well in these cases. First, acknowledge the caller’s complex or difficult situation (e.g., “I’m sorry you are dealing with such a difficult problem,” or “I understand why you are frustrated by this situation.” Then:

Inquire:

- How can we help you *today*?
- What can I do for you *right now*?
- What information do you need to move forward?

Direct:

- I’m going to give you the number or our NAMI Affiliate in your city. They can help identify...”

Closing a Call When the Caller Won’t Hang Up-

Most calls can be handled within **10 minutes**; a few may take additional five or more minutes. Some callers, however, will stay on the line as long as possible. It is up to you to be assertive in ending the call by making a direct response:

Direct:

- I’m sorry but I have to go now. Another call is coming in.
- We’re very busy now. I have to free up this line for other calls.

Bridging a Communication Gap -

If it seems that the caller is not hearing what you’re saying, ask yourself:

- Am I really saying what I think I'm saying? Am I saying what I mean to say?
- Do I need to change the way I approach this caller? (e.g., my attitude towards this caller)
- How does the caller's state of mind affect the way I communicate?

Dealing with Silence-

Don't be afraid of silence (especially if you're waiting for a response or if someone is having difficulty responding), but also don't be afraid to move the conversation forward.

Establishing Common Ground-

If you don't feel like you're being helpful, focus on the overlap of specific services that we offer and the caller's need (both felt and expressed).

"Helping" vs. "Therapy"-

Remember, NAMI HelpLine is an information and referral line, NOT a crisis line or hotline. We should avoid even the perception of providing therapeutic counsel, advice or direction. We also don't want to sound as though we are endorsing a particular medication or service.

Getting Help for Difficult Calls  **Bright Idea:** Whenever in doubt ask for help.

You can usually handle the vast majority of calls. For those few calls on which you need assistance, please see a HelpLine staff member. Two types of help are available:

Common Topics for HelpLine Calls

Finding a Doctor-

Be sure to make it clear to the caller that:

- NAMI does not endorse or recommend any doctor.
- We can only provide *information* about psychiatrists.
- Such information should not be construed as an endorsement.
- We are not responsible for any doctor's actions.

Resources for finding a doctor include:

- Insurance companies have lists of participating mental health professionals.
- Psychiatry departments at a nearby university may be able to make recommendations.
- Ask your personal NAMI network.
- Online searches:
 - [Psychology Today, Find a Therapist](#)
 - [SAMHSA](#), National Helpline and Treatment Locator (best reduced fee/sliding scale)

Noncompliance with Treatment

- Is the most controversial, common and serious issue we deal with on the HelpLine.
- Is not a crime in the United States to refuse treatment.
- The courts have granted most adults - for better or worse - the "right to be psychotic."
- Opinions tend to divide on the politics of forced treatment.
- Ironically, the person who has the illness must, for the most part, take the first step in finding help.

Risks of Noncompliance

- More likely to experience involuntary hospitalization and arrest.
- Drug addiction.
- Homelessness.
- Victimization.
- Suicidality.
- Violence.
- Criminality.
- Unemployment.
- Bankruptcy.
- Physical deterioration.
- Social problems (like divorce).

Intervention

Intervention, medication or therapy is not enforceable except in the case of:

- Minors.
- Wards.
- Those endangering themselves or others.
- Those grossly unable to care for themselves.

Cases in which intervention is not enforceable:

- Many homeless people do not qualify as grossly unable to care for themselves.
- The family may pursue a guardianship or conservatorship for their loved one under this general qualification. Concerned ones must petition the courts for this very serious, rights-denying procedure. Often the individual merely has to "act normal" for the judge, foiling the family's attempt to get care. The duration of the ruling, the power and responsibilities of the guardian/conservator depend on state statute.

Helping a Noncompliant Person:

When a person is unable to see the need for treatment it is possible they are experiencing [anosognosia](#). It is a symptom of many mental health conditions including schizophrenia, bipolar disorder, Alzheimer's and others. Efforts to help a loved one understand the need for treatment can be frustrating and cause your loved one to become angry and reject your help even more. Some tips for improving communication involve:

- Reassuring the individual that the *appropriate* medicine will allow him to:
 - retain the benefits of creative thought and feelings.
 - moderate the painful symptoms of the disorder.
- However, arguing with someone who is delusional:
 - is usually completely ineffective.
 - denies the person's reality.

The HelpLine frequently recommends the book, *I Am Not Sick, I Don't Need Help*. It can be ordered from the [Leap Institute](#) or Amazon. Learn the LEAP steps below and be able to provide them as suggestions to callers who are dealing with a noncompliant loved one.



Bright Idea: LEARN LEAP! This communication technique is very helpful when speaking to callers.

LEAP-

Listen: Learn to really listen and not react to what your loved one feels, wants and believes. Reflect back what you have heard in your own words – do this without commenting, disagreeing or arguing. Ask about:

- Beliefs about having a mental illness.
- Experience and attitudes about medication.
- Concept of what she can or cannot do.
- Hopes and expectations for the future.

Empathize: Empathize with all the reasons he has not wanted to accept treatment, even those you think are “crazy.” Some are:

- Frustrations.
- Fears.
- Discomfort.

- Desires (to get married, have children, stay out of the hospital).

Agree: Identify facts upon which you can ultimately agree (e.g., “So what happened after you decided to stop taking your medicine?”)

- Normalize the experience (I would feel the same if I were in your shoes).
- Discuss only perceived problems/symptoms.
- Review perceived advantages and disadvantages of treatment.
- Correct misconceptions.
- Reflect back and highlight the perceived benefits.
- Agree to disagree.

Partner: Make an explicit decision to work together and become teammates striving for the same goal.

What Should Happen Next

- **Treatment** (medication, psychotherapy).

Violent Behavior



Ask about your HelpLine’s Crisis Policy

Violent behavior always creates a dangerous situation. Your ability to assess the level of danger is very limited. Safety is the primary concern:

Advise the caller to remove any potential weapons.

Maintain a clear pathway to a door or exit.

Leave the immediate area, if possible.

Call for help:

- 9-1-1, [Calling 911 And Talking With Police](#)
- 1-800-273-8255, [National Suicide Prevention Lifeline](#)
- County emergency psychiatric services or Mobile Crisis Team

Warm Lines

Sometimes a caller just needs to “talk” and is not interested in receiving information or referrals, or feel the need to continue talking after you have helped them to NAMI’s fullest ability. This type of caller should

be given the phone number of a warm line, Warm lines are operated for this purpose and provide a valuable service to people with this need.

Note: These warm lines are often run by peers who may or may not be living with mental health conditions themselves. They are not counselors!

A listing of warm lines is located in the HRD.

Call Backs: Returning Voice Mail Messages

Congratulations on making it this far in training! **Returning calls from voicemail messages is your last step before “graduating” into taking live calls.** Returning calls is valuable because you’re speaking directly with HelpLine callers for the first time, but you have the advantage of being able to prepare for the call based on information from the voice mail message.

Go over any questions or comments beforehand with your trainer. Seek advice for each call about how to respond to the caller’s questions and which resources the caller may need.

Please remember that you are representing NAMI and showing its public face. Be sure that your interactions with HelpLine callers conform to the highest NAMI standards of friendliness, sincerity, empathy and knowledge.

Responding to HelpLine emails

HelpLine’s maintain an email address for people that prefer to reach us online. You may be asked to answer emails.

When answering emails our goal is to be as helpful as possible in a timely manner. Email responses should be direct and concise. For more comprehensive information hyperlinks need to be included. Standard information about NAMI programs and NAMI State Organizations and Affiliates including hyperlinks needs to be included in every reply. If you are unsure of the writer’s location, please provide them with this link www.nami.org/local. All emails received will be answered within 2 business days.

Addressing the Email Reply

ALL completed email replies should be cc:ed to a staff members email recording the original email and your reply.

Subject

The subject line needs to indicate that the email is from NAMI.

- **Subject:** NAMI Information on Treatment Options.

Greeting

Address the writer by the name provided in the signature. If no name is given, use the generic greeting of "Dear Friend,"

Introduction

Thank you for contacting NAMI, the National Alliance on Mental Illness. We recently received your email requesting information about _____" (add a short description of the email topic) then acknowledge the writer's issue and offer encouragement.

Thank you for contacting NAMI, the National Alliance on Mental Illness. We recently received your email requesting information about NAMI support groups to help deal with depression and anxiety. I'm glad that you're reaching out for support. Many people find peer support a very important part of their recovery.

Other options might include:

- "I'm sorry to hear about the challenges you have faced in finding treatment."
- "It must be difficult to live with such a frustrating situation."
- "Bipolar disorder can be very difficult to live with. Its effects on family members can be devastating."
- "Your daughter is fortunate to have an advocate like you."

Body of Email

How can NAMI help this person? Address each question or concern.

NAMI's programs and support groups are essential resources and should be included in every email reply:

[NAMI support groups and education programs](#) are no-cost programs providing education and support to families, individuals living with a mental health condition, students and providers.

Provide specific dates, times, locations and contact numbers if possible.

For each issue, be clear about how NAMI can help. Inform the person of any programs, products, fact sheets or brochures that may be of interest including hyperlinks if possible.

You can find information about [anxiety disorders](#) and [depression](#) and access NAMI's [Online Discussion Groups](#) Discussion Groups on www.nami.org. I encourage you to join a support group and learn about resources that will contribute to your recovery.

Also, be clear about services that we do not provide.

Example:

NAMI is unable to maintain a national list of mental health care providers, unfortunately. However, we offer a fact sheet called Mental Health Professionals--Who They Are and How to Find One that may help you find a doctor to suit your needs.

Other organizations and agencies may be able to help. Refer the person to at least one and generally no more than three such groups or other resources that COULD help. **Include hyperlinks in the body of your email which will take the reader directly to the resource.**

The [Anxiety and Depression Association of America](#) may have information and support groups.

When referring callers to outside organizations, please use tentative phrases like, "The NIMH *may* be able to assist you further," unless you are **absolutely** sure that the organization has the information requested.

Closing

Please use one of these closings or something similar:

- "We hope this has been helpful."
- "We hope this information will help you resolve your situation."
- "Thank you again for contacting NAMI."

Then:

"Please feel free to contact the NAMI HelpLine with any further questions by calling (provide your phone number and hours)"

And your signature:

"Sincerely,
Your First Name
NAMI Information HelpLine"

Finishing Touch



Bright Idea: Sometimes it's the little things that leave an impression—pay attention to the following details.

- **Spell check** your work.
- **Carefully reread your email** to look for errors the spell check may have missed. Make sure that any original template wording that needs to be changed for your email has been changed.
- Make sure that the **subject line** describes the actual topic of the message and mentions NAMI. A descriptive subject line is useful when retrieving filed messages later on.
- **Check the To: field** to make sure the **right email address** is listed.

REMEMBER:

Accuracy and **tone** are very important when writing to someone seeking our help. Write the reply you would want to receive in the same situation.

EXAMPLE REPLY:

Standard opening-

Use first name or
Dear Friend.

Mention the primary
area of inquiry.
Be encouraging.

Standard paragraph
about programs
including link to
program's page.

Direct them to
nami.org for info..
Don't forget the online
discussion groups.
Other organizations?
Be encouraging.

Standard closing.

Dear Patricia,

Thank you for contacting NAMI, the National Alliance on Mental Illness. We recently received your email requesting information about NAMI support to help with depression and anxiety. I'm glad that you're reaching out for support. Many people find peer support a very important part of their recovery.

[NAMI support groups and education programs](#) are no-cost programs providing education and support to families, individuals living with a mental health condition, students and providers. For information about NAMI programs visit, *link to YOUR calendar or program page or you can contact(insert name and contact info).*

You can find information about [anxiety disorders](#) and [depression](#) and access NAMI's [Online Discussion Groups](#) Discussion Groups on www.nami.org. The [Anxiety and Depression Association of America](#) may have information and support groups. I encourage you to join a support group and learn about resources that will contribute to your recovery.

Thank you again for contacting NAMI. Please feel free to contact the NAMI Information HelpLine at 1 (800) 950-6264 for more information between 10:00 am and 6:00 pm ET, Monday through Friday, or visit our website at www.nami.org.

Sincerely,

Sharon
NAMI HelpLine
1 (800) 950-6264

www.nami.org

How we talk about NAMI

Who is NAMI?: Using a Boilerplate

A boilerplate is an adopted standard language used to describe an organization. It is an "About Us" paragraph that is included on press releases to inform people about what NAMI is if they are unfamiliar.

At NAMI, we use the following language to describe who we are. Feel free to copy this language and adapt it for your NAMI State Organization or NAMI Affiliate.

NAMI, the National Alliance on Mental Illness, is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. NAMI advocates for access to services, treatment, supports and research and is steadfast in its commitment to raising awareness and building a community of hope for all of those in need.

Language: The Importance of How We Say Things

The way in which you say something can often impact how the listener hears it. The words we use can influence audiences in positive and negative ways. At NAMI, we value empowering language that avoids labeling individuals living with mental illness. While your target audience needs to be considered when creating content, being conscious of how we write and talk to the general public is crucial to breaking down stigma barriers and promoting awareness.

Words to Avoid (and Words to Use)!

Don't use these words and phrases:

- Consumer
- Suffer
- Schizophrenic (or any term using an illness as an identifier)
- Brain disorder
- Brain disease
- Patient (unless it absolutely necessary, such as in a study or describing the relationship with a doctor)
- Individual or individuals. When possible use a person or people.

Instead of using these terms we say a person living with a mental health condition or a person or family affected by mental illness. A person is bigger than any illness and should not be defined solely by it. A mental illness is only one aspect of a person's life.

Don't Be Too Technical

Sometimes it is hard to avoid using scientific jargon when discussing mental health topics. However, while some people may understand these terms, many individuals just learning about mental illness, and even individuals who are knowledgeable of the topic, may have a hard time understanding what you are trying to tell them. Be sure to break down technical or medical terms into language that a general audience can understand. Often people who will be reading what you have written are not knowledgeable of the subject.

Mental Health Conditions–Quick Reference

Mental Health Conditions are medical conditions that disrupt a person’s thinking, feeling, mood, ability to relate to others and daily functioning.

SCHIZOPHRENIA	Symptoms	Diagnosis	Treatment
<p>Schizophrenia interferes with the ability to think clearly, manage emotions, make decisions and relate to others.</p> <p>Research has linked the illness to changes in brain chemistry and structure.</p> <p>Schizophrenia is a chronic, complex mental illness that affects everyone differently and outcomes vary significantly.</p>	<p>Three classifications:</p> <p>Positive – (also known as psychotic)</p> <ul style="list-style-type: none"> -Delusions. -Hallucinations. -Disorganized thoughts or speech. -Movement disorders. <p>Negative –</p> <ul style="list-style-type: none"> -Emotional flatness/lack of expression. -Inability to begin or sustain activities. -Lack of pleasure or interest with life. <p>Cognitive –</p> <ul style="list-style-type: none"> -Trouble with memory, organization & prioritizing. -Anosognosia, being unaware of having an illness. 	<p>There is no single laboratory or brain imaging test for schizophrenia. Doctors must rule out multiple factors such as brain tumors, possible medical conditions and other psychiatric diagnoses.</p> <p>Two or more of the symptoms listed must be persistently present. However, delusions or hallucinations alone often lead to a diagnosis of schizophrenia.</p>	<p>Successful treatment includes:</p> <ul style="list-style-type: none"> -Medications to relieve hallucinations, delusions and some cognitive issues. -Therapy is useful for developing proactive coping strategies and life skills. -Psychosocial rehabilitation helps with achieving social relationships, employment, education, independent living. <p>Research demonstrates that, over time, people living with schizophrenia become better at coping with symptoms and maximizing function with minimal relapses.</p>
BIPOLAR DISORDER	Symptoms	Diagnosis	Treatment
<p>Bipolar disorder is a chronic illness characterized by episodes of mania and depression.</p> <p>The illness can occur at any age; however, more than one-half of all cases begin between ages 15 to 25.</p>	<p>Mania –</p> <ul style="list-style-type: none"> -Overly happy. -Abnormal irritability. -Overconfidence or inflated self-esteem. -Talkativeness. -Needing less sleep. -Engaging in high risk behavior. -Racing thoughts. -Distractibility. -Feeling agitated or “jumpy”. <p>Depression –</p> <ul style="list-style-type: none"> -Feelings of hopelessness, helplessness or low self-esteem. -Lack of energy. -Inability to concentrate. -Changes in eating or sleeping habits. -Thoughts of death or suicide attempts. 	<p>Medical conditions such as hyperthyroidism need to be ruled prior to a diagnosis of bipolar disorder.</p> <p>A psychiatrist makes a diagnosis based on observing a spectrum of symptoms. The states of mania and depression can occur in distinct episodes or can rapidly cycle, even multiple times in one week.</p> <p>Severe bipolar episodes of mania or depression can produce psychotic symptoms such as hallucinations or delusions.</p>	<p>Early diagnosis is important so effective treatment can begin.</p> <p>Treatment includes:</p> <ul style="list-style-type: none"> -Medication is important to stabilization and treatment. Finding the right medication or combination of medications is critical and often includes mood-stabilizers, antipsychotics and antidepressants. -Psychotherapy focuses on understanding the illness, learning to cope and changing ineffective patterns of thinking. -Family-focused therapy involves engaging family members or friends in supportive roles.

DEPRESSION	Symptoms	Diagnosis	Treatment
<p>Depression is a serious emotional and biological disease affecting thoughts, feelings, behavior, mood and physical health.</p> <p>Depression affects all types of individuals and could be limited to one episode, but more often episodes recur and can last from months to years if untreated.</p> <p>An estimated 25 million American adults are affected each year, but only one-half ever receive treatment.</p>	<p>Key Areas:</p> <ul style="list-style-type: none"> -Changes in sleep. -Changes in appetite. -Poor concentration -Loss of energy. -Lack of interest. -Low self-esteem. -Hopelessness or guilt. -Movement changes. 	<p>Symptoms lasting longer than two weeks.</p> <ul style="list-style-type: none"> -Depressed mood. -Reduced interest in activities. -Changes in appetite. -Sleep disturbance. -Feeling agitated or slowed down. -Feeling worthless or excessive guilt. -Difficulty thinking, concentrating or troubles making decisions. -Suicidal thoughts or intentions. 	<p>-Medications control serious symptoms. Takes two to four weeks to receive full effect.</p> <p>-Psychotherapy-cognitive behavior therapy (CBT) and interpersonal therapy (IPT). Support groups offer opportunities to share referrals to specialists and community resources.</p> <p>-Electroconvulsive Therapy (ECT) is effective treatment for severe depression episodes.</p>

BORDERLINE PERSONALITY DISORDER (BPD)	Symptoms	Diagnosis	Treatment
<p>BPD is a serious mental illness that can be challenging for everyone involved including friends and family of the person with the illness.</p> <p>BPD is characterized by impulsivity and instability in mood, self-image, and personal relationships.</p> <p>The treatments and longer-term studies of BPD offer hope for good outcomes for most individuals who live with BPD.</p>	<p>Individuals with BPD have several of the following symptoms:</p> <ul style="list-style-type: none"> -Significant mood swings with periods of depressed mood, irritability and/or anxiety lasting hours to days. -Impulsive behaviors. -Recurring suicidal threats or self-injurious behavior. -Unstable, intense personal relationships. -Persistent uncertainty. -Chronic boredom or feelings of emptiness. 	<p>BPD is diagnosed by a mental health professional based on sustained patterns of thinking and behavior in an individual.</p> <p>Some people may have "borderline personality traits" which means that they do not meet criteria for diagnosis with BPD but have some of the symptoms associated with this illness.</p> <p>One in 20 or 25 individuals live with BPD making it relatively common.</p>	<p>Psychotherapy is the cornerstone of treatment. Dialectical behavioral therapy (DBT) is an effective treatment for BPD. It focuses on teaching coping skills to combat destructive urges and practicing mindfulness.</p> <p>Other psychodynamic psychotherapy is frequently used.</p> <p>Medications can be an important component, yet there is no single medication specifically for BPD.</p>

Treatment & Support–Quick Reference

There is effective treatment for mental health conditions. Usually a combination of medication, psychotherapy, education, self-management strategies community support services and support from family, friends and/or support groups.

Treatments include—

Medication	Types: antipsychotics, antidepressants, anti-anxiety medication, mood stabilizers and others
Psychotherapy	<p>Psychotherapies (understanding illness):</p> <ul style="list-style-type: none"> -Cognitive Behavioral Therapy (CBT) focuses on coping and changing ineffective patterns of thinking. -Cognitive Enhancement Therapy (CET) builds learning pathways and teaches social interaction. -Dialectical Behavior Therapy (DBT) behavior changes and coping skills.
Treatment Interventions	<ul style="list-style-type: none"> -Electroconvulsive Therapy (ECT) use of short electrical impulses transmitted into the brain. -Transcranial Magnetic Stimulation (TMS) alternative intervention for some with treatment resistant depression.
Education	<p>NAMI education programs offered in communities by NAMI Affiliates-</p> <p>Family-to-Family – Twelve week educational program for family members and friends of individuals living with mental illness. No cost/12 weeks.</p> <p>Peer-to-Peer – Nine week education course provides a comprehensive approach to recovery for individuals with a mental illness. No cost/9 weeks.</p>
Support Groups	<p>Family Support Groups for family and friends.</p> <p>NAMI Connection for people living with mental illness.</p> <p>Online Discussion Groups</p> <p>NAMI Air</p>

NAMI Programs–Quick Reference

HelpLines serve callers by matching need and appropriate resources. NAMI offers excellent, free education and support programs for people living with mental illness and those that love them. NAMI programs are delivered nationwide through NAMI State Organizations and NAMI Affiliates.

Your role is to listen and assess how best to help the caller, describe appropriate resources and provide information about program dates/times/location with contact information.

EDUCATION PROGRAMS –

NAMI Family-to-Family – The NAMI Family-to-Family Education Program is a free, 12-session course for family, caregivers and friends of individuals with mental illnesses.

NAMI Peer-to-Peer – NAMI Peer-to-Peer is a free, 10-session education course that provides a full approach to recovery for people with mental illness who are interested in achieving and maintaining wellness.

NAMI Basics - NAMI Basics is a free, 6-session education course for parents and other family caregivers of children and adolescents living with mental health challenges.

NAMI Provider Education – NAMI Provider is a free, 5-session course for providers and other staff of mental health services.

SUPPORT PROGRAMS

NAMI Connection Recovery Support Group – a weekly recovery support group for people living with mental illness in which people learn from others' experiences, share coping strategies, and offer each other encouragement and understanding

NAMI Family Support Group – meets monthly or weekly for the family members/loved ones of someone living with a mental illness in which people share coping strategies, community resources and offer encouragement and understanding.

NAMI Information HelpLine – provides general information about mental illnesses, treatments and recovery strategies, referrals to NAMI State Organizations and NAMI Affiliates support groups and programs. Trained volunteers and staff are available by phone and email, Monday through Friday from 10 am to 6 pm.

Delivered online at nami.org –

Discussion Groups – Nami.org host a variety of online forums: Living with (an illness), Spouses of Consumers, Parents of Adult Consumers, Adult Care Homes, Criminal Justice Forum, etc.

Strengthofus.org – An online community designed to support young adults is designed to inspire young adults impacted by mental health issues to think positive, stay strong and achieve their goals through peer support and sharing. Refer young adult callers to this site for online interest groups and discussions.

NAMI AWARENESS

NAMI In Our Own Voice – One time presentation for the general public delivered by individuals living with mental illness.

NAMI Parents and Teachers as Allies – One time in-service program for school professionals to help identify the early warning signs of early-onset mental illnesses in children and adolescents.

NAMI Ending the Silence – In-school presentation designed for middle and high school students. Students learn about mental illness directly from family members and individuals living with mental illness. It is usually presented in freshman and sophomore health classes.

HelpLine FAQs (Frequently Asked Questions)

1. I am in a crisis. I am thinking about suicide. What should I do?

Crisis or suicide calls are not handled by NAMI HelpLines and must be transferred. The National Suicide Prevention Lifeline has trained counselors available 24 hours a day, seven days a week. Don't wait. Call 1-800-273-TALK (8255) now!

For a teen crisis line, contact the [Covenant House Nineline](#) at 1-800-999-9999, which is operational from 4:00 to 8:00 p.m., ET, seven days a week.

For more facts and resources on suicide, please [click here](#).

You can also call 911, a mobile crisis team, your physician or visit your local hospital's emergency room if you believe you are a danger to yourself or others.

2. Where can I find a support group in my area? What are NAMI Connection Recovery Support Groups or NAMI Family Support Groups? How much do they cost?

Support groups and education programs assist persons living with mental illness and family members through the recovery process. Your NAMI State and NAMI Affiliate website has information about times/dates/locations.

3. My friend/family member won't follow recommended treatment. What can I do to make this person follow through?

In the United States, noncompliance to treatment is not a crime. Medication or therapy is not enforceable, except in the case of minors and those who are a danger to themselves or others.

If you feel like your family member or friend meets the criteria as a danger to themselves or others, you may contact 911, [Calling 911 and Talking with Police](#). Tell the operator that this is a psychiatric emergency and ask for a crisis intervention trained (CIT) officer to be sent to the location. Many communities don't have CIT trained police officers. *Check your community's emergency mental health resources, so you can advise appropriately.*

NAMI State Organizations and NAMI Affiliates offer education courses and support groups to assist family, friends and caregivers of those living with the mental illness. [NAMI Family-to-Family](#), NAMI's 12-week free education course, is particularly helpful and will address many of your concerns. You will find that you are not alone, and the instructors and other families in the course have been through similar experiences. You will learn from their personal strategies to help you cope.

In extreme cases, when a person has a long history of noncompliance, assisted outpatient treatment (AOT) may be an option. (AOT) is court-ordered treatment (including medication) for individuals with severe mental illness who meet strict legal criteria. Generally, a violation of the court order can result in a hospitalization for further treatment. Your State NAMI Organization or local NAMI Affiliate will have more information particular to your state laws concerning these procedures.

A book that many family members and friends have found helpful is *I Am Not Sick, I Don't Need Help* by Xavier Amador, Ph.D., available www.amazon.com. [LEAP Institute](#) has additional resources.

NAMI offers a fact sheet on [anosognosia](#) (impaired awareness of illness), which explains why it is believed that some individuals diagnosed with major mental illness do not believe that they are ill.

4. I don't know how to cope with my friend/family member who has a mental illness. Can NAMI help me?

NAMI's [Family-to-Family](#) education course is ideal for family members, friends and other caregivers seeking answers. Ongoing support groups provide a safe place to talk to other people going through similar situations. Because many NAMI State Organizations and NAMI Affiliates comprised of those who have mental illness and family members, they may know of additional community resources to help you cope.

5. I am/ or my friend/family member is newly diagnosed with a mental illness. What do I do now?

We encourage you to start by informing yourself about mental illness. This can be done by attending an education or support program or by requesting general information, fact sheets, and brochures about your illness.

Many people find that, at the beginning of their recovery process, they just need someone to talk to who can understand and provide emotional support. The NAMI HelpLine volunteers and staff are caring, compassionate, and knowledgeable. They can provide general information about mental illness and provide referrals to appropriate resources. Many have had first-hand experiences with mental illness, either as a family member or as a person living with mental illness.

NAMI offers an [array of education programs and services](#) for people living with mental illness, family members, and the general public. These programs draw on the experiences of those who are affected directly by mental illness. They also offer information about mental illness, coping strategies and local services that could help you with a specific problem.

6. My family member is missing and may be homeless. What can I do to find my relative?

People with mental illness cannot always communicate their thoughts clearly or understand what others are saying to them. In confusion, some will retreat. Others have grandiose ideas and cannot make sound judgments. Sometimes they leave home or other secure surroundings, and they become homeless or missing leaving family members distraught and desperate to locate their loved ones.

If you have a missing loved one with serious mental illness, our [online Missing Persons Support](#) website section lists several steps and resources that could aid you in your search. The website includes NAMI's [Persons with Mental Illness Who Are Homeless and Missing: A Guide for Families](#), a link to the [National Missing Persons Database](#) and other online resources.

7. I have a teen struggling with a mental illness at home and at school. Does NAMI have resources for families or caregivers of children and adolescents?

[Teens & Young Adults](#) section provides information about recognizing and managing mental health conditions.

You may also be interested in [NAMI Basics](#), our new national signature education program for parents and caregivers of children and adolescents living with mental health conditions. This six-session course is taught by trained teachers who are also parents/caregivers of individuals who developed the symptoms of mental health conditions in childhood. It provides the fundamentals of caring for yourself, your family, and your child with a mental health condition.

8. I am a veteran and recently received a mental health diagnosis. Do you have resources for veterans and their families?

[Veterans & Active Duty](#) section provides information and resources. [NAMI Homefront](#) is an education program for families, caregivers and friends of military service members and vets with mental health conditions.

Frequently Asked Questions: Treatments

1. I need a doctor or mental health care facility that specializes in a specific disorder. Can NAMI help me?

While NAMI does not provide a list of mental health care professionals or treatment facilities, we do offer a fact sheet called [Mental Health Professionals: Who they are and How to find one](#).

Sometimes, the best word-of-mouth recommendations come from others ask others involved in NAMI.

[SAMHSA](#) Helpline, 1-800-662-4357, provides referrals to local treatment facilities, support groups and community-based organizations.

Often times, one may find specialists in a certain field by contacting the psychiatry department at local teaching hospitals, where they are often on the cutting edge of research. Your American Psychiatric Association (APA) local branch may have a list of doctors listed by specialties as well.

2. I cannot afford my medication fees or medical insurance. Where can I go for financial assistance?

Some pharmaceutical companies offer prescription assistance programs for low-income or uninsured individuals and families. [Click here](#) to view the list of pharmaceutical companies and their contact information.

There are also non-profit organizations, such as [Partnership for Prescription Assistance, TogetherRX.com](#) or [www.NeedyMeds.com](#), which help people needing financial assistance with medication. These programs typically require a doctor's consent and proof of financial status. They may also require that you have no health insurance or no prescription drug benefit.

Your community mental health care center may offer medication and mental health care services on a sliding scale basis. The following resources can also help you locate insurance options in your state:

<http://coverageforall.org>

www.healthcare.gov

http://www.healthinsurance.org/risk_pools/

3. What are the side effects and recommended dosage of a specific medication? Is the combination of medications my doctor prescribed right? Is my dosage too high?

Click [here](#) to view NAMI fact sheets about medication and treatment.

Please contact your pharmacist, doctor or mental health care professional for guidance on the correct treatment of your specific situation. NAMI's work focuses on support, education, advocacy and research. We are not a medical facility nor are we qualified to give medical advice about treatment or medication.

4. Does NAMI have information on substance abuse or dual diagnosis treatment?

It is estimated that roughly 50 percent of individuals with mental illness are affected by substance abuse. Dual diagnosis services are treatments for people who suffer from co-occurring disorders – mental illness and substance abuse.

For more information, [Dual Diagnosis](#) has information on symptoms, treatment and self-help and support groups.

Or, you may contact the [Substance Abuse and Mental Health Services Administration](#) online, or by calling SAMHSA's Health Information Network 1-800-662-4357.

5. Can people recover from mental illness? Is there a cure?

NAMI believes that recovery is a process, beginning with diagnosis and eventually moving into successful management of your illness. Successful recovery involves learning about your illness and treatments available, empowering yourself through the support of peers and family members and, finally, taking action to manage your own illness by helping others.

While there is currently no known cure for mental illness, such as bipolar disorder or schizophrenia, the good news is that recovery is possible. Most people diagnosed with a mental illness can experience relief from their symptoms by actively participating in an individual treatment plan. NAMI advocates for research into the causes, treatments, and eventually, a cure for mental illness. We are steadfast in our commitment to advocacy in support of research.

Individuals' treatment plans may include medication, psychotherapy and peer support groups, in addition to balanced diet, exercise and sleep. Meaningful social opportunities, such as local drop in centers or clubhouses, and volunteer activities also often contribute to overall wellness and mental health recovery.

Frequently Asked Questions: Social Resources

1. Where can I find a list of group homes, residential facilities or mental health care units that offer specialized care in a specific mental illness?

NAMI is not able to maintain a list of residential facilities or group homes; however, your NAMI Affiliate may be able to offer some suggestions.

NAMI has information on supported housing,

You may visit the [Substance Abuse and Mental Health Services Administration's Treatment Locator](#) to search a state by state database of mental health care facilities. You can also call their Treatment Locator at 1 (800) 662-4357, 24 hours a day, seven days a week. The [American Residential Treatment Association](#) (ARTA) also maintains a list of specialized programs. The Member organizations of ARTA offer a variety of services and are able to respond to a wide range of needs.

2. Where can I find housing?

NAMI does not maintain listings of individual treatment facilities or other housing providers. Your State NAMI Organization or local NAMI Affiliate may be able to offer some suggestions.

Many county or community mental health centers place clients in group homes and supported housing situation. If you receive your mental health care from the county or community ask your social worker or someone affiliated with the center.

You can search state and national housing resources [here](#).

For more on housing, you may wish to contact the [Department of Housing and Urban Development \(HUD\)](#). They can provide you with information on the Section 811 Program providing supportive housing for persons living with disabilities. Unfortunately there is a large demand and often the wait is over a year. Talk to your local social services agency as soon as possible to get placed on the local housing list.

Home Mortgage: Referral Resources

The Home Ownership Preservation Foundation offers home mortgage information through their Homeowner's HOPE Hotline at 1 (888) 995-HOPE (4673) or on their website at www.995HOPE.org.

The Homeownership Preservation Foundation (HPF) is a private, nonprofit organization, approved by HUD, with a mission to help preserve homeownership and prevent foreclosures. The foundation stresses that it is very important to call for help sooner than later so homeowners have more options. One may find help by calling the Hotline or by going to their [website](#) to initiate online counseling.

If you would like to meet with a housing counselor in person, you can search for local counseling agencies through the [NeighborWorks®](#) website.

Also inquire of your community mental health center, clubhouse (drop-in center) or call 211 for lists of other agencies that assist with housing. Assistance from a librarian or social worker might yield further leads.

3. Where can I find information about what my insurance/Medicaid/Medicare benefits will cover? How do I file for Social Security (What is SSI vs. SSDI)?

Questions about insurance coverage can and should be directed to your insurance provider or to your [State Insurance Department](#).

NAMI's [fact sheet](#) on Social Security and Disability Benefits details the different programs, the criteria, how to apply and appeal if one receives an unfavorable decision.

Organizations that represent people applying for social security disability insurance (SSDI) include:

Allsup, a nationwide provider of specialized services for those with disabilities, including Social Security Disability Insurance representation and Medicare plan selection services. Allsup experts have helped more than 120,000 people receive SSDI and Medicare benefits. The company is headquartered in Belleville, Ill., and has approximately 600 employees located around the country. For more information, please call 1 (888) 841-2126 or visit www.expert.Allsup.com.

Two other national groups have referral lists of representatives who can help you with Social Security claims or appeals: [The National Association of Disability Representatives \(NADR\)](#) at 1 (800) 747-6131, or the [National Organization of Social Security Claimants' Representatives \(NOSSCR\)](#) at 1 (800) 431-2804.

For these and other Medicaid and Medicare concerns, you may also contact the [Centers for Medicaid and Medicare Services \(CMS\)](#) online, or by calling 1 (800) MEDICARE (1 (800) 633-4227).

Many families and individuals have found additional Medicare and Social Security assistance through the [Medicare Rights Center](#), which provides their MRC Consumer Hotline at 1 (800) 333-4114 (Monday-Friday, 9 a.m. – 1 p.m., EST).

4. I am recovering from mental illness. And, I would like to learn more about social activities, volunteer opportunities and getting back to work.

Your [NAMI State Organization or NAMI Affiliate](#) may also have some suggestions about social activities where one may meet others in recover, either through the NAMI affiliate or possibly a local drop in center or clubhouse. Many NAMI Affiliates have volunteer and leadership opportunities, in NAMI Connection, NAMI Peer- to- Peer and other programs and activities.

[The International Center for Clubhouse Development](#) has an online database of clubhouses. These are places where people who have had mental illness can go to rebuild their lives. Your local NAMI Affiliate may also know of similar centers known as drop in centers.

Your local NAMI Affiliate may also know of vocational rehabilitation centers that could help you find volunteer or work opportunities to suit your needs. Oftentimes, these centers will also have job training, skill-building workshops and counseling for individual with disabilities to gain and maintain employment.

Frequently Asked Questions: Legal/Advocacy

1. I have a legal problem, but I can't afford a lawyer. Does NAMI offer legal advice, or have a listing of lawyers that specialize in mental health law?

Our NAMI Legal Center receives daily calls from our members and the public requesting legal assistance. Unfortunately, NAMI does not have the resources to advocate on behalf of individuals on a case-by-case basis. To help address this need, we created a lawyer referral panel.

We require attorneys on our Lawyer Referral Panel to complete questionnaires regarding their specialties, fees, education and liability insurance. Communications to the Center remain confidential, as does our attorney information. We do not verify qualifications or credentials of attorneys on our panel. We supplement our listings with the Disability Law Directory of the American Bar Association, the Directory of the American College of Trust and Estate Counsel, the National Legal Aid and Defender Association Directory and the Directory of Local Pro Bono Programs.

You may contact the [NAMI Legal Center](#) by [email](#) or by calling the NAMI HelpLine at 1 (800) 950-6264. Please furnish your full name, address with zip code and telephone number to help us find legal aid in your area.

[NAMI State Organizations and NAMI Affiliates](#) may also keep lists of attorneys familiar with mental illness issues, or they may be willing to share informal, personal experiences with local lawyers.

The [American Bar Association](#) has an [online database of pro-bono attorneys](#). They also offer [guidelines for finding free legal assistance](#).

The United States Congress established the [Legal Services Corporation](#) to provide low-income Americans access to civil legal aid.

Legal Aid/local legal service agencies may assist those unable to pay for legal assistance (limitations often apply, such as no criminal cases). Check your local phone directory under "legal aid" for services.

2. How do I file a complaint against a mental health care facility/professional?

Complaints about an individual physician/psychiatrist: If the physician/psychiatrist works for a hospital or agency, you may contact the doctor's supervisor. You can also file a complaint with the state medical

board or the [American Psychiatric Association \(APA\)](#) (some psychiatrists are members, some are not). The APA might also refer you to its APA District Branch or state psychiatric society.

Complaints about other mental health professionals: If employed by a hospital or agency, you may file complaints with the therapist's supervisor, the hospital ombudsman or the administrator. Therapists are regulated by their licensing boards (e.g. the state board of health and mental hygiene, counseling or other licensing board). They may also be members of their professional associations (such as the [National Association of Social Workers](#), the [American Psychological Association](#), etc.). Your NAMI [State Organization](#) may have the appropriate number and listing.

Abuse or neglect in an institutional setting: [Protection and Advocacy Agencies](#) advocate on behalf of individuals with mental illness who are in institutional settings (such as jails, correctional facilities or state psychiatric hospitals); allegations of abuse or neglect are one of their top priorities.

Complaints of abuse, neglect or mistreatment in the hospital setting: As mentioned above, you may file a complaint directly to the hospital ombudsman or administrator.

Or, you may contact [The Joint Commission](#) (formerly known as JCAHO, the Joint Commission on Accreditation of Healthcare Organizations) online or call their toll-free Compliant Hotline at (800) 994-6610 to share concerns regarding quality of care. The Joint Commission accredits hospitals, home health agencies, nursing homes, outpatient clinics, behavioral health care programs and managed care plans among others. Complaints should be related to patient rights, quality of care, safety, infection control, medication use and/or security. They are unable to assist with billing, insurance or payment disputes.

Complaints about a CMHC (community mental health center): You may file a complaint with the state mental health agency. Medicaid and Medicare recipients with complaints about CMHCs have the following options: Medicare beneficiaries may contact the [Centers for Medicare and Medicaid Services \(CMS\)](#) regional Medicaid Service and the state Peer Review Organization. Medicaid beneficiaries may contact the state Medicaid official, and perhaps the state medical review board could help.

Your [NAMI State Organization and NAMI Affiliate](#) may be able to assist you as well.

Filing Lawsuits: Should you seek a private attorney, [click here](#) for guidelines on how to find an attorney. State bar listings may be found at www.martindale.com.

3. My friend or family member is in jail due to his/her mental illness. How can we help this person?

For additional details, [click here](#) to view NAMI's *Guide to Mental Illness and the Criminal Justice System* and [here](#) for a new Criminal Justice Self-Advocacy fact sheet.

You will want to determine if your loved one is receiving medication. The Eighth Amendment to the U.S. Constitution requires that jail officials provide adequate medical care. This may mean that a family member or your loved ones psychiatrist, be in touch with jail officials.

If you loved one has been assigned a public defender, try to communicate with that person about the mental health history and how it may be affecting their loved ones behavior. You may want to present them with printed information or fact sheets that address the illness, which can be found on the [NAMI](#) website.

It may be helpful to find out if there are mental health courts or jail diversion programs in the area. These programs aim to reduce the time a person with a mental illness spends in jail by diverting them to community based services, like court supervised treatment or [assertive community treatment](#) programs.

Finally, your [State Organization or NAMI Affiliate](#) may be able to offer additional suggestions and/or support.

4. My employer is not treating me fairly because I have a mental illness. What can I do to fight this?

It is important for individuals living with mental illness to know about the protections in place for individuals living with mental illness in the work place. The [Americans with Disabilities Act \(ADA\)](#) prohibits job discrimination on the basis of a disability. This means it unlawful to refuse to hire or terminate a qualified applicant/employee with a disability because he is disabled or because a reasonable accommodation is required to make it possible for this person to perform essential job functions.

Generally, if you think you have been discriminated against in employment on the basis of disability file a complaint promptly. The [Equal Employment Opportunity Commission \(EEOC\)](#) has a wealth of information on the ADA and how to file complaints against employers.

Litigation is also an option after the EEOC complaint has been filed.

Frequently Asked Questions: NAMI/General Resources

1. What does NAMI stand for and what is your mission?

NAMI, the National Alliance on Mental Illness, is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. NAMI advocates for access to services, treatment, supports and research and is steadfast in its commitment to raising awareness and building a community of hope for all of those in need.

NAMI State Organizations and NAMI Affiliates offer an array of support and education programs for families and individuals living with mental illness. For information about what is available in your community, [contact your local Affiliate directly](#).

NAMI advocates for legal and societal changes, at every level of government, to ensure that all persons affected by mental illness receive the services that they need and deserve. Advocacy issues include money for additional research into mental illness, affordable health care, affordable housing, criminalization, employment discrimination, etc. NAMI recognizes that the key concepts of recovery, resiliency and support are essential to improving the wellness and quality of life of all persons affected by mental illness.

2. How can I become a NAMI member? What are the benefits of membership?

We would be pleased to welcome you to the NAMI member family!

One may now become a full NAMI member with a click of your mouse through our [E-Join Program](#)! The annual dues are \$35/year. You may also join through contacting your [NAMI State Organization or NAMI Affiliate](#). Local NAMI Affiliates occasionally also offer an open-door membership or reduced rate for those with financial need.

The benefits of full membership include our flagship magazine, the [NAMI Advocate](#), discounts on resources in the [NAMI store](#), discounts at [NAMI's Annual Convention](#), full access to all the information and features on the [NAMI website](#), and more.

3. I would like to receive a large quantity of NAMI brochures. How can I get those?

A part of NAMI's mission is to educate the public about mental illnesses. NAMI offers brochures and fact sheets on a variety of topics, including particular mental disorders, treatment approaches and commonly prescribed medications.

Large quantities of brochures should be ordered through our on-line [NAMI store](#).

The NAMI Helpline provides a limited number of brochures and fact sheets at no charge. To keep costs down and to provide materials to the greatest number of people, it is necessary to limit the number of publications we provide. The Helpline can be reached at 1 (800) 950-6264 between the hours of 10 a.m. & 6 p.m., ET, Monday through Friday.

4. Do you have information in Spanish? Do you have other cultural or international mental health resources?

One may speak to a Spanish-speaking staff member at the NAMI Information Helpline, at 1(800) 950-6264, 10 a.m. & 6 p.m., ET, Monday through Friday.

NAMI's Multicultural Action Center (MAC) has a variety of fact sheets in Spanish, along with other foreign language resources. We also have a dedicated Spanish website, NAMI en Español.

For information about Canadian resources, please contact the Canadian Mental Health Association online or call 1 (613) 745-7750. International information may be found through NAMI's MAC Multicultural Coalition Partners or the World Federation for Mental Health (WFMH).

5. I recently moved. How do I go about changing my address? How can I update my contact information or delete my name from NAMI's mailing list?

If you are a member and you know your username and password, you can log in to www.nami.org and make the changes easily on your own.

You may also send an email to memberservices@nami.org.

Finally, you can contact the NAMI Helpline at 1 (800) 950-6264 between 10 a.m. & 6 p.m., ET, Monday through Friday. Helpline representatives will be able to forward your new contact information to the appropriate department.

6. Does NAMI offer any scholarships for college?

As a non-profit organization, NAMI is not able to sponsor academic scholarships or fellowships. However, the following organizations may be able to assist you.

[Heath Resource Center at the George Washington University](#) - The Heath Center is a national clearinghouse for information on post-secondary education for individuals with disabilities. The Center's website has information about financial aid, scholarships, and internships.

[Lilly Reintegration Scholarship](#)

Award Amount: Varies

Number of Awards: Varies

Phone: (800) 809-8202

E-mail: lillyscholarships@reintegration.com

Description: Eli Lilly and Company provides annual awards for young adults diagnosed with schizophrenia or bipolar disorder who are enrolled in high school equivalency studies, a trade or vocational school or a two or four-year college or university. Applicants must be U.S citizens, currently receiving medical treatment for one of the above conditions and be actively involved in rehabilitative or

reintegration efforts. An essay must be included with the application packet.

[ChairScholar Foundation](#)

Award Amount: \$20,000

Number of Awards: Varies

Description: The ChairScholars scholarship is available to high school seniors and college freshmen who are living with a profound physical challenge.

[InCight Education Scholarship](#)

Award Amount: \$500 to \$2500 that is renewable for four years

Number of Awards: Varies

Description: INCIGHT Education Scholarships are offered to students who have a documented disability.

[American Association on Health and Disability Scholarship](#)

Award Amount: \$1000

Number of Awards: Varies

Description: The American Association on Health and Disability Scholarships are available for undergraduate and graduate students who have a documented disability and are pursuing a career in public health, disability studies, health promotion or a field related to disability and health.

Also helpful are databases that allow students create a personalized profile that can be matched against existing scholarships and updates users when new opportunities arise. A few of the many are listed below:

www.fasweb.com

<http://www.gocollege.com/>

<http://www.fastaid.com/>

<http://www.scholarshipexperts.com/>

<https://bigfuture.collegeboard.org/scholarship-search>

It is possible that your [State NAMI Organization or local NAMI Affiliate](#) may sponsor particular scholarships. Contact them directly for further information. Be sure to research local scholarship opportunities through your high school, library and community. Also, find out what scholarships are available at your college. Conduct an exhaustive search in many areas including, the financial aid office, your specific college if you're attending a large university and within your major. Many colleges offer scholarships for those with disabilities. Contact your college and ask if mental illness is included before applying for the scholarship.

7. Does NAMI offer financial grants or have advice as to where to apply for them?

As a non-profit organization, NAMI is unable to sponsor grants; however, the Foundation Center may be of great assistance.

[The Foundation Center](#) is the nation's leading authority on philanthropy, connecting nonprofits and the grant makers supporting them to tools they can use and information they can trust. The Center maintains the most comprehensive database on U.S. grant makers and their grants.

8. What jobs or volunteer opportunities does NAMI have available?

NAMI periodically recruits qualified candidates for various volunteer, intern, and staff positions. [Click here](#) if you wish to view the positions available with the national office of NAMI. Our jobs section also lists career opportunities at various NAMI State Organizations or NAMI Affiliates.

For those interested in volunteer opportunities in our national office, please review the job description for our NAMI HelpLine.

You may also benefit from contacting your [NAMI State Organization or NAMI Affiliate](#) for information about volunteer opportunities outside of the Washington, DC area.

9. Where can I find statistics about the prevalence of mental illness?

[NAMI's Mental Illness: Facts and Numbers](#)

[National Institute of Mental Health](#)