NOVEMBER 15, 2017

What Families Can Expect When a Loved One is Caught Up in the Criminal Justice System

Dr. Elizabeth Ford, Chief of Service, Dept. of Psychiatry, Riker’s Island
John Gallagher, Deputy Warden in Command, Mental Health Observation Areas, Riker’s Island
Joseph Rogate, Assistant Clinical Director, Counseling Services of the Eastern District of New York, Hempstead

Dr. Mardoché Sidor, Medical Director of CASES; Assistant Clinical Professor of Psychiatry, Columbia University

Having a loved one in jail or prison can be bewildering and frightening, and families often don’t know where to turn. Learn how to negotiate the criminal justice system and what to expect from entry through release. Also find out about clinical alternatives to sentencing. Professionals currently working in the system will be presenting. There will be ample time for questions.

DECEMBER 20, 2017

Holiday Party!

Join us for refreshments, holiday goodies and an evening of music, laughter and good cheer with your NAMI friends. We’ll also reprise our holiday raffle. No one will walk away empty-handed.
# Support Groups

## Family Support Group
- **Leader/Phone:** Carol Ann Viccora, (516) 221-6168 & Dorothy Borgese
- **Date/Time:** 3rd Tuesday of each month, 7:00—9:00 p.m.
- **Location:** St. Raphael’s Church, East Meadow
- Please call for meeting location detail

## Whole Family Support Group
- **Leader/Phone:** Ellen Ritz, RN (516) 330-9778, el.ritz@yahoo.com & Amanda Gratta & Jennifer Keren
- **Date/Time:** 2nd Wednesday of each month, 7:00—9:00 p.m.
- **Location:** Unitarian Universalist Congregation at Shelter Rock (UUCSR), 48 Shelter Rock Rd, Room 15, Manhasset

## Whole Family Support Group
- **Leader/Phone:** Ellen Ritz, RN (516) 330-9778, el.ritz@yahoo.com & Amanda Gratta & Jeremy Israel
- **Date/Time:** 4th Wednesday of each month, 7:00—9:00 p.m.
- **Location:** Unitarian Universalist Congregation at Shelter Rock (UUCSR), 48 Shelter Rock Rd, Room 15, Manhasset

## Co-Occurring Disorders (Substance Abuse & Mental Health Condition)
- **Leader/Phone:** Bernie Cohen & Lenny Goldstein
- **Date/Time:** Call the office (516) 326-0797 or (718) 347-7284
- **Location:** Unitarian Universalist Congregation at Shelter Rock (UUCSR), 48 Shelter Rock Rd, Manhasset

## Family Support Group
- **Leader/Phone:** Isabelle Mesholam, LMSW, (516) 626-3258 & Ellen Ritz, RN
- **Date/Time:** 11/2, 12/7, 11:00 a.m.
- **Location:** NAMI Queens/Nassau office, 1981 Marcus Ave, Suite C117, Lake Success

## Classes

### Family to Family
- **Group:** 12-week Psycho-education Course
- **Leader/Phone:** Jeannette Wells, LCSW-R, Coordinator (646) 483-3885
- **Date/Time:** Call the office or visit website, namiqn.org, for schedule
- **Location:** Fall 2017 Locations: Manhasset, Glen Oaks, Jamaica

### Peer to Peer
- **Group:** 10-Week Peer Rehab & Recovery Course
- **Leader/Phone:** Ellen Ritz, RN, Coordinator (516) 330-9778
- **Date/Time:** Call for information
- **Location:** Locations: To be announced

## Other

### Spirituality Group
- **Leader/Phone:** Chaplain Van Frankel & Ellen Ritz, RN, Coordinator (516) 330-9778
- **Date/Time:** 11/16, 12/21, 1/25/18, 6:30 p.m.
- **Location:** Unitarian Universalist Congregation at Shelter Rock (UUCSR), 48 Shelter Rock Rd, Room 15, Manhasset

### For Those with Bipolar Disorder, Depression &/or Anxiety
- **Leader/Phone:** Sandra Kalman, LCSW (516) 326-0797
- **Date/Time:** 3rd Wednesday of each month, 5:00 p.m.
- **Location:** The Zucker Hillside Hospital Sloman Auditorium, 266th St & 76th Ave, Glen Oaks

### Caring & Sharing
- **Leader/Phone:** Hillside Hospital Social Worker
- **Date/Time:** 3rd Wednesday of each month, 5:00 p.m.
- **Location:** The Zucker Hillside Hospital Sloman Auditorium, 266th St & 76th Ave, Glen Oaks

### Caring & Sharing
- **Leader/Phone:** Rosalie Weiner, LMSW (516) 326-0797
- **Date/Time:** 3rd Saturday of each month, 10:30 a.m.
- **Location:** YIGG, New Hyde Park

### Caring & Sharing (South Asian population)
- **Leader/Phone:** “Raghu” Raghavendran (516) 944-8537
- **Date/Time:** 3rd Saturday of each month, 10:30 a.m.
- **Location:** YIGG, New Hyde Park
From the Acting Co-President

The Power of One—the Power of You

By ELLEN RITZ

Most of us feel powerless in this big world of many millions and billions. But we each have power every day in our actions and choices. A smile and recognizing someone else with a “hello” and “how are you?” and really listening to how someone is feeling helps each of us feel a little less alone. Remembering to thank and appreciate the small things that another does. These seem simple but how many of us forget to notice. We are all caught up in our struggles, and each of us is busy figuring out or planning how to deal with something in the future or upset about what happened in the past.

We all have choices of how we react, what we say and how we behave. We cannot control anyone else but we can control our own behavior. Think before you speak or act — “Would I want this said or done to me?” and let this question guide your words and actions. This is called empathy, which is the strongest relationship connector. Understanding that very little of someone else’s unkind words and angry or mean actions are about us — it is mostly about them and their problems, frustrations, insecurities and hardships. Realizing this will help you react less and enable you to have a more peaceful life. Kindness is my favorite word and very underrated. I value kindness and put it at the top of my list.

NAMI is an organization of volunteers — people just like you and me who want to make things better for so many of us who are struggling and are caught up in the haze of the cruel neurobiological brain disorder which has changed who we are or altered a person we love and care about. When most of us came to NAMI we felt alone, frightened and lost. I have found wonderful people who help each other feel less alone, less frightened and less lost.

What can you do to support NAMI and further NAMI’s mission of educating, supporting, and advocating for you? First, become a member or keep your yearly membership current. Your membership supports all the free programs which many of you have taken advantage of. Although most of us are volunteers there is paid staff in the office, printing and material costs, sometimes rental costs and more. But among the most important on this list is that NAMI represents you when we speak to legislators who make the laws that directly influence the support, research, housing and systems such as the criminal justice continuum of courts, jails and rehab services—changes that need to be addressed and supported by their vote. When we say we represent 400 or 1,000 or whatever the number, we are saying (and sometimes outright clearly saying) that we will let our members know of your support or lack of it. Remember that elected officials stay in elected office by your vote, either for or against them.

So you do have power — in your actions and choices every day, as well as you supporting an organization you believe in. I hope that is NAMI. I believe in NAMI and especially in the power of one — the power of you!

From the NY Campaign for Alternatives to Isolated Confinement

TOGETHER END SOLITARY

Today approximately 4000 people are in solitary in New York’s prisons and jails. Although the “Mandela Rules” adopted by the United Nations prohibit solitary confinement exceeding 15 days, New York regularly holds people in solitary for months, years, and even decades.

We must end this torture now!

- CALL Governor Cuomo at 518-474-8390 and tell him, “I am a New Yorker and I oppose solitary confinement. Colorado now has a limit of 15 consecutive days in solitary confinement, with most serving far less, and has dramatically reduce the overall use of solitary. New York must do the same. You have the power to end this torture and make New York a leader in respecting the human rights of all people.”
- POST Messages on Facebook and Tweet using #HALTsolitary and @NYGovCuomo
- CALL Assembly Speaker Heastie at 518-455-3791, and tell him: “I am a New Yorker and I oppose solitary confinement. We need to end its use in NYS prisons and jails. The Humane Alternatives to Long-Term (HALT) Solitary Confinement Act (A. 3080 / S. 4784) would end the torture of solitary and create more humane and effective alternatives. A majority of Assembly Members support the HALT Act. We need your leadership to move the bill forward.”
- CALL your NYS Assembly and Senate Representatives and tell them: “I live in your district and I oppose solitary confinement. Wee need to end its use in NYS prisons and jails. The Humane Alternatives to Long-Term (HALT) Act (A. 3080 / S. 4784) would end the torture of solitary and create more humane and effective alternatives. Please sign on to co-sponsor the bill.” Find your legislators at http://openstates.org/find_your_legislator/.
A Hempstead student is striving to raise awareness about support for those with mental illness — one T-shirt sale at a time.

Arianna Lekhraj, 14, a freshman at Sacred Heart Academy who formerly attended Elmont Memorial High School, has raised about $600 through the sale of original T-shirts to benefit NAMI Queens/Nassau, a nonprofit group dedicated to building better lives for people affected by mental illness. The group’s name stands for National Alliance on Mental Illness.

The T-shirt design has a semicolon and other graphics over a watercolor background on the front, and the inscription “#yourstoryisnotover” on the back. In the context of mental health, the semicolon represents people’s collective efforts to promote suicide prevention.

“I was inspired by the fact that mental illness is such a prevalent epidemic that isn’t talked about enough, especially in my own generation,” Lekhraj said. “Just because it’s not physical and can’t be seen doesn’t mean it’s not real.”

The fundraiser stemmed from a class assignment last spring when Lekhraj was attending Elmont Memorial High. She created the design on an iPad with two friends, Pia Marquez and Chelsea Edouard, and ordered the shirts through the online retail company CustomInk. She sold the shirts for $20 each to classmates, teachers and parents.

At Elmont, Lekhraj played violin and was in the newspaper club and distinguished science research program. She also earned high honors at the 2017 Long Island Science Congress. She dances at Arya Dance Academy in New Hyde Park.

Way to Go, Arianna Lekhraj!

NAMI Queens/Nassau Participates in Fresh Check Day at Hofstra University

For the second year in a row NAMI Queens/Nassau exhibited at Fresh Check Day at Hofstra University on September 14. This is the signature program of The Jordan Porco Foundation (JPF). JPF works closely with colleges to plan and fund Fresh Check Day in an effort to bring awareness of mental health resources and coping strategies to college campuses. It is a celebratory fair-like event that includes:

- Interactive expo booths
- Free food
- Entertainment
- Exciting prizes and giveaways

Fresh Check Day aims to create an approachable atmosphere where students are encouraged to engage in dialogue about mental health. Fresh Check Day helps to build a bridge between students and the mental health resources and programs that exist on campus, in the community and on a national level. Using a peer-to-peer messaging model, Fresh Check Day utilizes student groups in addition to college/university staff to develop and execute interactive booths that deliver mental health and resource information in a fun and engaging way.

The program’s primary goals are to:

- Increase awareness of mental health resources and services available to students
- Reduce stigma and misconceptions around mental health and suicide that often deter individuals from seeking help
- Empower peers to be gatekeepers by understanding warning signs and knowing what to do if a friend is exhibiting signs of suicide or a mental health concern
- Increase willingness to ask for help if experiencing emotional distress

Through this event students are reminded that they are not alone and that their mental health is valued just as much as their physical health or their academic standing.
Nassau County Jail Conditions ‘Inhumane,’ Activists Say

By ROBERT BRODSKY
Newsday, September 13, 2017

Long Island medical, religious, legal and education activists on Wednesday demanded immediate reforms at the Nassau County jail, where they say “inhumane” conditions are responsible for a series of inmate deaths since 2011.

Members of the newly formed Nassau County Jail Advocates Coalition were joined by Nassau Democratic legislators and recently incarcerated inmates and their families at a news conference in Mineola.

The advocates — including members of the New York Civil Liberties Union, the NAACP’s Freeport and Roosevelt chapters and other medical and social justice groups — say conditions at the Nassau County Correctional Center in East Meadow have deteriorated and often violate inmates’ civil rights.

Coalition members later attended a meeting of the Nassau Legislature, repeatedly interrupting proceedings and marching across the hearing room.

“All of us have seen the sick, the injured, the physically and emotionally challenged who have been beaten or isolated, neglected or ignored,” said Susan Gottehrer, the NYCLU’s Nassau chapter director, who criticized County Executive Edward Mangano and Sheriff Michael Sposato’s management of the jail.

Sheriff’s Department spokesman Capt. Michael Golio accused the group of “an unwarranted attack on the integrity and professionalism of all our employees at the Correctional Center.”

The coalition wants the jail’s board of visitors restructured to include members with expertise in mental health, education and addiction. The group also wants the board, whose role is limited to responding to inmate complaints, to have a budget, staff and subpoena power.

Additional demands include improved access to medical and psychiatric services, extended family visitation on weekends and fully funded re-entry and drug rehabilitation programs.

Nassau University Medical Center, also in East Meadow, assumed responsibility for inmate health care on September 1, replacing Armor Correctional Health Services.

My Talk at the Press Conference

By MARIA CERAULO

More than fifty percent of the population in our jails and prisons are people suffering from serious mental illnesses. NAMI, the National Alliance on Mental Illness, advocates for the decriminalization of mental illness. The mentally ill need treatment, not the added torment of incarceration or being hosed or chained to a wheelchair.

1. At the very least the Nassau County jail should follow standards for Mental Health and all health care that are set by the National Commission on Correctional Health Care. They should pursue accreditation by this body.

2. People with severe mental illness need to be treated, not punished. Their care should not be shifted to the criminal justice system.

3. People with serious mental illness charged with nonviolent crimes should be diverted from jail to treatment. Those convicted of serious crimes should receive humane and appropriate treatment while incarcerated. It is their constitutional right.

4. Inmates with mental illness are more likely to be sexually victimized. We call for the enforcement of the Prison Rape Elimination Act of 2003.
Remembering
NAMI Queens/Nassau in Your Will

NAMI Queens/Nassau gratefully acknowledges the following Donations

Rhoda & Ron Nadell in memory of John Hall
Dorothea Braun in memory of James Tully (Birthday)
Carol Ann Viccora in memory of Eli Kaplan
Rosalie Weiner wishing Gina Kelly a speedy recovery
Annette Alaggia in memory of Sherry Fingerhut
Margot Razziano in memory of her son, Anthony
In Memory of Rebecca Passero: Marilyn Rosenfelder; Kathy & Paul Kane; Deborah Passero
General Donations: Edward & Christina Stack; Fran & David Kalish; Sandra Cohen; Ann & Stephen Cannizzaro; Harrier Mediate; Ron & Anne Staheli; Mary & Larry Kenny; Eileen & Irving Leshkowitz; Judy & Bruce Magen; Elizabeth Reilly; Kathryn A. Hager; Esther DeMoya

Friendship Network gratefully acknowledges the following Donations

Bernice & Don Bienenfeld in memory of Midge Pappas’s father
Barbara Garner in memory of Jerry Butkow
Alice Cohen in memory of Seymour Goldberg
Barbara Garner in memory of Stu Kaufman
Judy Rackmil & family in memory of Bernard Lippe
Esther Cohen in memory of Mark Geller’s wife
Bernice & Don Bienenfeld in memory of James Monero
Barbara Garner in memory of Ruth Berman

Thank you!

Thanks to wit&whim for their generous donation of $489 to NAMI Queens/Nassau. The check represents the profits from sales during the month of August.

Sample Language

Once you’ve determined that you would like to make a bequest to NAMI, the following sample charitable bequest language can be used in your will or revocable living trust. However, it is important to consult an attorney when drafting your will.

An Unrestricted Bequest:

"I give, devise and bequeath to NAMI Queens/Nassau, a charitable organization which qualifies as a charitable recipient under Internal Revenue Code section 2055 as amended from time to time, located at 1981 Marcus Avenue, C-117 Lake Success, NY 11042, the sum of $_____ to be used for the general purpose of the organization, at the discretion of its Board of Directors."

A Restricted Bequest: (to support a particular program or area of interest to you)

"I give, devise and bequeath to NAMI Queens/Nassau, a charitable organization which qualifies as a charitable recipient under Internal Revenue Code section 2055 as amended from time to time, located at 1981 Marcus Avenue, C-117 Lake Success, NY 11042, the sum of $_____ to be used for the purpose of____________."

A Residuary Bequest: (which leaves any remaining assets from your estate after all other obligations have been met)

"I give, devise and bequeath to NAMI Queens/Nassau, a charitable organization which qualifies as a charitable recipient under Internal Revenue Code section 2055 as amended from time to time, located at 1981 Marcus Avenue, C-117 Lake Success, NY 11042, all the rest, residue and remainder of my estate.

Thank you!
Sun & Surf Fashion Show—A Fundraiser for NAMI Queens/Nassau Raised $8,700!

Kudos to NAMI Queens/Nassau member Elaine August, who is also a member of the Sun & Surf Beach Club. She campaigned to have NAMI Queens/Nassau receive the funds raised through the club’s raffle, held at their annual Ladies Luncheon and Fashion Show in August. We are so grateful! Thanks also to Ellen Victor for her excellent presentation on the wonderful programs NAMI Queens/Nassau has to offer.

Special Thanks to Friendship Network Premier Donors

Janet & Mike Susin—$10,000

Anonymous—$10,000

Friendship Network is deeply appreciative of all donations made to our program. Our objective is to assist adults with mental illness with reclaiming their lives by addressing the loneliness and isolation resulting from having a mental illness. By providing adults in recovery with group activities and one-on-one introductions, we create opportunities for our members to be more independent, confident and socially connected within their community.

Psychiatric disorders are life-altering and can be chronic. While many improve with medication, medication does not deal with the social isolation that often accompanies mental illness.

While in recovery and reclaiming their lives, many of our members are not working. They are on fixed incomes, disability or work only part-time. While it impacts our “bottom line,” our goal is to serve all who need us . . . and that is where these donations make all the difference!
Liberty Basketball Game & Dinner

By STEPHEN C.

On Sunday, August 27, I boarded a train and headed to Penn Station to see a basketball game at Madison Square Garden, an outing arranged by the Friendship Network.

The game was NY Liberty versus the Chicago Sky. Alice sat at the right side of me and offered me some jellybeans and Hershey’s Kisses. Harry and Robert sat at my left side. The teams were easy to follow since there were four massive screens overhead. The players were very flexible and all possessed good coordination. The dribbling was well done and they sank many baskets.

The NY Liberty and the Chicago Sky had 12 players on each team. Once the game started the Liberty’s Tina Charles sank two baskets. Epiphany Prince was next to score several baskets. Stephanie Dolson was first to sink a basket for the Chicago Sky. Jessica Breland is a forward for the Chicago Sky and played quite well. For The NY Liberty, Tina Charles is a star for the team and played center. The team had many good players and they played well together.

During halftime The Torches danced and entertained the crowd. They performed well and danced with letters that spelled Liberty and other signs. The U.S. Tournament of Dance also performed. A MSG drone flew past us at halftime and was quite an amusing balloon.

Back to the game...In total there were four fouls on either team. Tina Charles and Epiphany Prince took the foul shots for NY Liberty. The game had four quarters, and the final score was NY Liberty—92 and Chicago Sky—62.

We left MSG and walked as a group the two blocks to Stout Restaurant. Alice ordered appetizers for the group. The waiter took our orders and brought us our drinks and food. Alice told some jokes which the group enjoyed.

After a good dinner we left the restaurant to go home. I had a great time and would attend the New York Liberty basketball game again if it’s offered.

Miniature Golf & Dinner

By LINDA D.

On Sunday, June 11, I attended the miniature golf and dinner outing. The golf was held at the Spring Rock Golf Center in New Hyde Park. It was a very hot, sunny day. The golf event was called for 3 p.m., but I arrived at 1:30 to meet up with Mark R. and John S. to watch the Yankees game on TV at the Spring Rock restaurant.

At 3:00 it was time to leave the restaurant and head for the golf course. There we were met by Barbara, who was running the event. She was joined by Ruth W., a fun addition to our group! We got our golf clubs and golf balls and formed teams of four players each. John S. did not play but was nice enough to keep score for our team. From the outset, Mark R. took the lead as he is a very good putter. He gave us pointers along the way. I wasn’t very good at putting, but I did hit a hole-in-one. I also knocked my golf ball off the course into the water, so Sarah G. shared her ball with me for the rest of the game.

When all the teams were finished, we drove a short distance to our dinner venue, the Hibachi Sushi Ya Chinese Restaurant. We sat at several large tables as the restaurant staff scurried around serving us drinks. It was good to meet up with old friends who I hadn’t seen for awhile.

Everyone had worked up an appetite playing miniature golf. To begin with, we had a choice of clear soup or miso soup. Then we were surprised when the waiters served each of us with a small Chinese dumpling—it was delicious, and more food soon arrived and kept coming. There were green vegetable dumplings, an assortment of chicken, pork and beef dishes, tempura, and at the end some fried rice and lo mein. Although we started out hungry, most of us were stuffed by the end of the meal. Some people found room for an ice cream dessert. Overall, it was another wonderful Friendship Network outing, and we went home feeling quite satisfied.

Special thanks to Barbara, who kept things running smoothly throughout the day even though she had a cold. She is a trooper, and her efforts were much appreciated.

BB King’s

by the Blues Brother (aka JOE F.)

On Sunday, July 23, the Friendship Network went to B.B. King’s in Times Square for an afternoon of R&B music. The event was held in Lucille's Bar and Grill, named after B.B. King’s famous guitar. The group that performed featured a singer who sang many of the famous songs of the 60's, 70's and 80's, including favorites from Ike and Tina Turner and the Beatles.

I arrived early and waited on a long line outside the club where I met another Friendship Network member, Jo B. We were then whisked inside by Barbara G. because we already had tickets and reservations. Once we were there, other Friendship Network members were inside, either sitting in the downstairs lobby or at the bar. We had a large group and were seated at tables throughout the club. Once the lights dimmed and the band began to play, alternating between slow ballads and rousing R&B, many of our group began dancing in the aisles. They were serving drinks and small plates of food, but the drinks were a little expensive so I passed on my usual favorites. The Friendship Network was well represented with members from the past along with new members.

After the show we walked a couple of doors down to Dallas BBQ. We had tables all to ourselves in the mezzanine overlooking about a thousand people eating. The food was hearty Texas fare served barbeque style.

As the Marc Cohn song goes, (no relation to Alice): "Put on my blue suede shoes and boarded the plane, touched down in the land of the delta blues, in the middle of the pouring rain." Actually it was a little rainy that Sunday afternoon and the atmosphere was similar to Walking in Memphis, but it was an enjoyable time spent listening to the music and the company of the Friendship Network.

For information on the Friendship Network, visit www.friendshipnetwork.org or call (516) 326-6111.
Cannabis is No Ordinary Commodity

By Dr. Lloyd Sederer
The Huffington Post, Sept. 5, 2017

Pot is different from growing, distributing and selling potatoes, beef, salmon or cars, common commodities with of course complex forces at work. But cannabis takes complexity to a whole new level, comparable to tobacco and alcohol — which have been among the principal killers of Americans.

Yet the US is ablaze with cannabis: It is our number one illicit drug and medical marijuana (MJ) is legalized in 29 states and recreational marijuana legal in eight states (DC permits both). Sixty-three percent of Americans live in states with medical or recreational MJ or both. The flame is everywhere and picking up intensity. Over 22 million Americans (12 and older) reported using MJ in the past month.

While some die-hards may imagine prohibiting the use of (especially) recreational marijuana and using law enforcement to make that happen that seems an extremely unlikely, not to mention a futile, path for this country. Informed and candid cops know that arrest and incarceration cannot solve problems of drug use and dependence.

So we face questions like: Should cannabis be fully decriminalized? Should medical and recreational MJ be legalized in all states? Should production and sales be limited? Should the market be allowed its sway? If you as a state feel the heat and it is not if but when, what design logic would be a useful guide? Will it be individual freedom (for adults), free or regulated markets, or the health of the collective, as shaped by public health goals? Who will benefit therapeutically and financially? Who will suffer? What are the ‘least worst’ options, given the well-known public health principle that increased access results in greater use?

These questions are for your consideration as a citizen (and taxpayer), consumer, parent, co-worker, business owner or state or federal official. We need to shine some light on a poorly lit set of data (mostly from when MJ was 1/60th as potent as it is today) and experience (which is not at all uniform or robust from the states having gone ahead) to make decisions now. The cannabis fire will rapidly outpace what science and practice may reveal in the years to come.

To examine what we know and what we can do in a clear and sensible way a 3-day, National Cannabis Summit was held in Denver, CO, in late August, convened by three organizations. It was the brainchild of Neal Shifman, CEO of Advocates for Human Potential, a human services re-

search, consulting and training organization. He joined forces with The National Council for Behavioral Health, constituted of 2900 member mental health and addiction treatment organizations, and the Addiction Technology Transfer Center Network, which promotes adoption and implementation of what works for people with Substance Use Disorders.

The conference smartly assembled a diverse group of government and private stakeholders. In practical ways, it crisply reported and discussed state implementation efforts to date, therapeutic effects and health risks of cannabis, legal and clinical knowledge, and the neuroscience of cannabinoids (the term for the class of diverse chemical compounds that act on our brain and body nerve receptors).

Here are my take-away messages.

Start small, as a state or county. Build slowly. There is no going back from full recreational legalization, especially when for-profit companies are financing its implementation. Imagine when Anheiser-Busch and RJ Reynolds Tobacco Company start promoting and distributing can-


nabis. Remember “This Bud’s For You”, “The Marlboro Man” and “Joe Camel”? Hence, also ban advertising.

Separate out the growers from the distributors and those two from the retail sellers. Do not permit what is called ‘vertical integration’, where one entity controls the supply chain, which can foster monopoly.

Pursue a harm reduction strategy, as Canada is doing nationally under its progressive Prime Minister, Justin Trudeau. Identify and work to prevent or delay use by pregnant mothers or teenagers, where brains are under development. Add other highly vulnerable populations to that strategy, including those with known predispositions to or with family histories of a substance use or mental health disorder. Don’t smoke cannabis. Vape or eat it: Smoking is really bad for the lungs.

Decriminalize cannabis.

Limit access. Make the minimal age 21, set limits of quantities for legal possession and number of home grown plants (which can become a black/gray market cottage industry), set limits on dosages because potency counts (e.g., 10 mg for edibles), require minimum prices so MJ does not become cheap (as it has in Washington State), and contain production quotas and retail outlets.

Enforce the laws about Driving Under the Influence (DUI) and underage sales.

Don’t permit public consumption.

Require childproof packaging.

Ensure that cannabidiol (CBD) — the second most common cannabinoid in MJ after THC, and without psychoactive properties — is present in MJ products in significant amounts (we still don’t know what that is but it is not near zero) because it appears protective against psychosis.

Direct state (or federal, if that ever happens) cannabis taxes to fund health insurance, as well as prevention (especially for youth) and public information campaigns. Allocate a percentage of taxes to fund de-identified (i.e., privacy protected) state registries and use them to evaluate the impact of legalization on health and public safety - both for its therapeutic value and its harm to the brain and body (including diseases and traffic accidents).

(Continued on page 10)
The Musings of Ido Michael Horan

The mentally ill.
Who are we?
A people disenfranchised?
Wherein does lie for us the prize?
We now have NAMI on our side.
(They help us glide. They’re on our side.)
They advocate for us when we feel we cannot.
They help keep our spirits cool and levelheaded
rather than angry hot.
They protest our cause to anyone who cares to listen.
On the proverbial predators of the ill they help
blow the proverbial whistle.
They speak out on our behalf.
Cut our worry load in half.
However without them (and other like-minded insti-
tutions who bring our expectations to fruition),
we are left to our own device.
You know if we look hard enough we might find
virtue rather than a vice.
NAMI is to us VERY nice…
The mentally ill—those of us living with a woe.
When we feel persecuted can we just let it slide and
let it go?
The disabled and the sick.
We sometimes in our behavior are not so slick,
because we are in fact sick.
Our mental health woes oftentimes seem heavy and
thick.
Who are we?

We don't' need no medication.
No psychotropics in our brains.
What we need is real elation.
Because we can all POTENTIALLY breakthrough
our sedation medication, and go once again
insane.
What we REALLY need is love and understanding
and impulse control.
We all need to think before we act and speak;
We need contentment in our souls.
We don't' need more medication to prevent us all
from crossing the proverbial boundary line.
What we really need is “the real relation” and to be
left to our own sense of elation and feel about
it just fine.

(With credit given to the brilliant artistry of Pink Floyd and Rush, as well
as my counselor Rob at PSCH.)

Ellen Ritz Honored by NYS Assembly as a “Woman of Distinction”

On October 7, 2017 New York State
Assemblyman Ed Ra presented Ellen Ritz,
Acting President of NAMI Queens/Nassau,
with an award proclaiming her to be a
“Woman of Distinction.” The award
recognizes individuals who give exemplary
service and help their communities grow and flourish through their vision,
dedication and drive.

In presenting the award, Assemblyman Ra noted Ellen’s service as
Acting President of NAMI Queens/Nassau, her role as a member of
NAMI New York State’s Board of Directors, her teaching of Family to
Family courses throughout the year, and her creating and leading the
Whole Family Support Group. In addition, the presentation cited Ellen’s
career as a Registered Nurse, her leadership role in Temple Beth
Sholom’s Sisterhood, serving as treasurer of Roslyn Hadassah, her six
years on the East Williston Board of Education and service on the East
Williston Beautification Committee.

Cannabis No Ordinary Commodity...

(Continued from page 9)

Get the FDA to declare cannabis a Schedule 2 drug, not its current
hugely deterring Schedule 1 status, so our country can actually study this
drug.

Expect over 40% of current MJ users to ingest 20 or more days/month.
Recognize that the predominance of regular users appears to stop on their
own or not use abusively, without services (unassisted recovery — see Dr.
need assistance, because cannabis is addictive, can access and continue in
treatments known to work.

Sustain or increase federal funding to study the effects and therapeutic
potential of cannabinoids, including plant-based THC and CBD as well as
the brain’s own cannabinoid system (driven by endocannabinoids).

As citizens and policymakers we need to “lean in” to the dilemma of
what to do about cannabis. Silence only lets a vocal minority rule. Like
climate change, it is everyone’s issue, deniers notwithstanding. As a
friend of mine recently wrote, “A fool can throw a stone into the water
that ten wise men cannot recover.” (From Jay Neugeboren, March 2017).

In other words, there is no single or simple solution to the cannabis
Rubic cube. We will have to act now, and sensibly, and let science catch
up. To paraphrase what Churchill said of we Americans, we do the right
thing after we have exhausted everything else. What’s ahead is surely
difficult but it is not impossible.

Dr. Lloyd Sederer is a psychiatrist and public health doctor. The opinions of-
fered here are entirely his own.

Psychiatrists Can’t Stop Mass Killers

By RICHARD A. FRIEDMAN
The New York Times, Opinion, 10/11/17

In the wake of the Las Vegas massacre, politicians are once again promoting the politically expedient notion that better mental health care could stop such mass killings. Paul D. Ryan, the speaker of the House, said last week that “mental health reform is a critical ingredient to making sure that we can try and prevent some of these things from happening in the past.”

The public appears to share this view. A 2015 poll found that 63 percent of Americans blamed deficient mental health care rather than deficient gun regulations for these shootings.

It’s true that many mass murderers do have a mental disorder, typically a severe personality disorder or a psychotic illness. But this fact has almost no implication for how to stop them.

Why? First, a vast majority of these killers avoid the mental health care system. They are intent on murdering people, not on seeking help, and generally don’t see themselves as psychiatrically ill. Of the 92 documented mass killings from 1982 to 2017, only 15 percent of the perpetrators had any known previous contact with mental health professionals.

Clearly, whatever psychiatric evaluation and treatment this small number of perpetrators had did not stop them from committing mass murder. Even if all of these killers had been seen by mental health professionals, it is still highly unlikely their crimes would have been prevented, because as a general matter it is very difficult, if not impossible, to predict who is likely to turn violent.

Stephen Paddock, the Las Vegas gunman, is an abject lesson in this regard. As an affluent 64-year-old gambling enthusiast with no relevant criminal history, he bore little resemblance to the typical mass murderer, who tends to be an angry young man seething with resentment and with a history of violent outbursts. An exhaustive search of Mr. Paddock’s life for a motive has so far turned up nothing. His brother, Eric, noted that Stephen was “the least violent in the family during my childhood.” I have no doubt that had Stephen Paddock seen a psychiatrist, he would not have raised suspicion of dangerousness.

To put it another way, most mass killers are gun-owning, angry, white, paranoid males, but it is also a fact that nearly all men with these same characteristics will never commit a crime.

In addition, the mentally ill contribute very little to overall violence in this country. Even if you were to eliminate all psychiatric illness from the population, the rate of violence would drop by only about 4 percent. (The contribution from mass killers is far smaller: In 2015, mass killings accounted for only 0.35 percent of gun-related homicides.)

The disturbing reality is that a vast majority of homicides is committed by healthy people in the grip of everyday emotion using guns. That is exactly what many politicians don’t want the country to think about.

Still, if we can’t predict human aggression, there is much that we can do to modify or contain its expression. For example, consider the success of using simple physical barriers to prevent suicide. A 2015 meta-analysis showed that installing large safety nets beneath suicide “hot spots” like San Francisco’s Golden Gate Bridge was highly effective in cutting suicide risk. The death rate from suicide dropped from an average of 5.8 suicides per year before the nets were installed to an average of 2.4 deaths per year after. Intriguingly, in most cases there was no increase of suicide by jumping at other hot spots. In other words, taking away one means of self-harm did not result in the substitution of an alternative one.

The same appears to be true for homicide. Countries that limit access to deadly firearms have a fraction of the gun homicide rate of the United States. Australia, for example, severely restricted access to guns following a 1996 mass killing, and the gun homicide rate dropped by half and stayed there. In 2012, the United States had a homicide-by-firearm rate of 29.7 per million people compared with 1.4 for Australia.

Contrary to what some gun-rights enthusiasts claim, people who are deprived of guns do not simply find a new way to harm themselves or others. Countries that have reasonable gun control, for example, do not have a compensatory epidemic of lethal knife attacks.

So let’s stop pretending we can detect mass killers in advance. But we can deprive them — and everyone else — of the deadly weapons they require to turn their impulses into carnage.

Richard A. Friedman is a professor of clinical psychiatry and the director of the psychopharmacology clinic at the Weill Cornell Medical College, and a contributing opinion writer.

To the Editor:

I respectfully disagree with my distinguished colleague’s article.

While Dr. Paul Appelbaum, a forensic psychiatrist at Columbia University, found that people with mental illness commit less than 5 percent of violent crime in the United States, the criminologist Adam Lankford has reported that they account for over 50 percent of mass violence incidents (predominantly young men with untreated psychotic disorders).

Consequently, if we view mass violence as a possible, albeit rare, consequence of mental illness, as are suicide and addiction, it follows that more accessible, effective mental health care services, and policies that facilitate treatment of people — even if necessary over their objection — would reduce the possibilities of such tragedies occurring.

Psychiatrists can play an important role in enacting and carrying out such policies.

JEFFREY LIEBERMAN, NEW YORK

The writer is chairman of psychiatry at Columbia University and New York-Presbyterian Hospital and a former president of the American Psychiatric Association.
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