

MENTAL HEALTH WEEKLY

Essential information for decision-makers

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HIGHLIGHTS...

The **U.S. Supreme Court** ruled last week that **parents of children with disabilities do not need to hire lawyers** if they want to sue public school districts over their children's special-education needs. Advocates say they intend to **spread the word** on this **important ruling** in order for parents to understand their rights under the **Individuals with Disabilities Education Act (IDEA)**. See story, top of this page.

Community Mental Health Centers are **partnering with their local Veterans Affairs clinics** in order to provide mental health services for returning veterans. Services in **Montana** and **Washington State** have included **psychotherapy, post-traumatic stress syndrome (PTSD) screening** and **vocational services**. See story, bottom of this page.

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Parents may pursue IDEA cases without attorney, Court rules

Cost, availability of counsel pose barrier in education case

A ruling issued by the U.S. Supreme Court last week resolves a paradox for parents seeking to challenge individualized education programs (IEPs) for their children with disabilities. While adults generally are allowed to represent themselves in federal court cases, parents across the country were discovering that they could not represent their minor children in the courts and were thus being required to hire an attorney to pursue complaints against local school districts.

But ruling in a case involving an Ohio couple whose son has autism (see *Parents in Supreme Court case may proceed with or without attorney*, page 3), the Supreme Court stated that because the Individuals with Disabilities Education Act (IDEA) affords parents important rights in the administration of an IEP, it is consistent to extend those rights to scenarios where a legal dispute is being adjudicated. Therefore, parents may prosecute IDEA claims on behalf of their children, without having to hire an attorney, the Court ruled.

Advocacy organizations for children with disabilities hailed last week's Court decision as a significant victory for families. While they do not expect the ruling to generate a groundswell of legal challenges to school district plans, they feared that a ruling in favor of the Ohio

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CMHCs partner with local VA systems to address MH needs of veterans

Montana, Washington State also provide housing and employment support

The National Council for Community Behavioral Healthcare (NCCBH) members are responding to the mental health needs of veterans by collaborating with local outpatient Veterans Administration (VA) clinics and working with National Guard members and reservists in rural communities who have trouble accessing mental health or addictions treatment.

Meanwhile, Senate lawmakers last week introduced legislation aimed at addressing the mental health needs of veterans who live in areas remote from VA health facilities (see *Legislation introduced to*

expand mental health care access for veterans, page 5).

The high incidence of mental disorders among returning soldiers along with treatment challenges was cited last week during testimony by Linda Rosenberg, NCCBH president and chief executive, before the House Committee on Veterans Affairs as part of a panel for post-traumatic stress disorder (PTSD).

Rosenberg testified about the challenges that returning Iraq and Afghanistan war veterans are confronting in seeking access to care for PTSD and other service-related mental disorders. "According to the latest Department of Defense Data, released earlier this month, fully one-quarter of returning veterans

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school district might have dissuaded many parents from pursuing their concerns in the courts.

"If the case had gone the other way, it would have been yet another hurdle for families toward getting a good outcome for their child," Paul Seifert, director of public policy at CHADD (Children and Adults with Attention-Deficit/Hyperactivity Disorder), told *MHW*.

Seifert said school districts often hold a significant advantage over parents in the process of designing special education services for children with severe emotional disturbances and other disabilities. Parents are often not fully informed of their rights under IDEA ("It's not their fault; parents are busy being parents," Seifert said), and schools are not under any obligation to offer this information to parents.

Moreover, hiring an attorney to represent the child's interests often can change the dynamic in discussions between parents and school districts over appropriate education services for a child.

"When you bring a lawyer in, this can get school officials' back up quickly," Seifert said.

Attorney availability

Often there are some obvious practical barriers to families' hiring an attorney to represent their child

in legal matters under IDEA. The cost of legal representation clearly poses a significant impediment for the typical family.

"Many, or I'd say most, families of children with disabilities don't have the resources to hire their own lawyers," Jennifer Mathis, deputy legal director at the Judge David L. Bazelon Center for Mental Health

'If the case had gone the other way, it would have been yet another hurdle for families toward getting a good outcome for their child.'

Paul Seifert

Law, told *MHW*. She said that while there are some attorneys who will take such cases without asking for a large fee up-front, this usually will occur only in cases where there is a clear expectation that the family will prevail over the school district in court.

Also, it is generally true across the country that there are relatively few attorneys who are well-

versed in the intricacies of the IDEA regulations.

"There are not a lot of attorneys who do special education law, mainly because there is no real reimbursement mechanism," Seifert said.

Still, many parents may find it worthwhile to seek assistance from someone who is familiar with the complexities of IDEA, even if that person is not an attorney, Seifert said. Parents may find it daunting to learn what they need to know on their own before a first meeting with school officials to discuss an IEP — especially considering that the school system has at its disposal several experts who have worked on scores of IEPs.

"You can't go flying blind into these meetings," Seifert said. Parents will go in thinking that the school system is committed to doing what's in the best interest of their child, but school officials face resource limitations and other considerations as well, he said. Generally, families of all backgrounds and income levels struggle with this uneven playing field in advocating their children's rights, he added.

"You're often sitting across the table from five people," Seifert said of parents. "The school has an unfair advantage."

Court opinion

Supreme Court Justice Anthony

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Kennedy wrote the majority opinion in last week's ruling, which states that the rights of parents of children with disabilities under IDEA extend to the legal arena. "It is not novel for parents to have a recognized legal interest in their child's education and upbringing," the opinion states.

The Supreme Court rejected arguments that providing independent rights to parents would fly in the face of financial constraints associated with IDEA. It cited other provisions that should counteract concerns about school systems' paying to defend against cases argued by parents; for example, IDEA allows courts to award attorneys' fees to education agencies that prevail when a parent files an action for an improper purpose.

Justices Antonin Scalia and Clarence Thomas concurred in part and dissented in part with the majority opinion, stating that the majority's view of parental rights was too sweeping and that parents'

Parents in Supreme Court case may proceed with or without attorney

The case that generated last week's U.S. Supreme Court ruling, *Winkelman v. Parma City School District*, involves Parma, Ohio parents who challenged the local district's decision that their child with autism could receive appropriate education services in the public system.

Jeff and Sandee Winkelman believe the local school district should pay for their son, now 9, to attend a private school. They challenged the district's decision, but saw their case thrown out at the federal district and appellate court levels on the grounds that they had not hired an attorney to represent their child's interests.

Last week's Supreme Court decision overturns the lower court rulings and allows the family to proceed with their case without an attorney. The New York Times reported that the parents might now decide to work with one of a number of attorneys who have recently offered to represent their son Jacob for free.

"I would prefer to give Jacob the best chance with an attorney. That's the best-case scenario," Sandee Winkelman was quoted as saying. She added in regard to the Supreme Court decision, "It restored a lot of faith I have in the system."

ability to pursue legal action under IDEA should be more limited.

Seifert said CHADD remains very engaged in this case and its

implications for families. "This is one we are spreading the news on, so parents know what their rights are under IDEA," he said. •

Bazelon creates model policy to address student MH issues

The Judge David L. Bazelon Center for Mental Health Law this month released a model policy to help colleges and universities develop a non-discriminatory, non-punitive approach to help students in crisis because of mental health problems.

The new policy offers a response to serious mental health problems among college and university students and schools' lack of consensus on what to do when students are in crisis.

The document, *Supporting Students: A Model Policy for Colleges and Universities* — a collection of best practices that colleges and universities can adopt — was developed by Bazelon Center attorneys after consulting with mental health experts, higher education administrators, counselors and students.

According to the Bazelon Center, the 2006 National College

Health Assessment reported that 43.8 percent of the 94,806 students surveyed reported they "felt so depressed it was difficult to function" during the past year, and 9.3 percent said that they had "seriously considered suicide" during the year. Students also named depression as one of the top 10 impediments to academic performance.

While campus students now have access to counseling services that are confidential and free of charge, there is no consensus on how schools should respond when students are in crisis, particularly if they manifest self-injurious thoughts or behavior or appear to pose a potential threat to others, according to the Bazelon Center.

The policy offers guiding principles for how to deal fairly and non-punitively with students in crisis and how to support those whose mental health problems may be interfering

with their academic, extracurricular or social lives. It also lists potential approaches to various situations and examples of accommodations that schools can make to enable such students to continue their education successfully.

The model policy document covers such areas as:

- Guiding principles
- Counseling and mental health services
- Confidentiality
- Accommodations
- Leaves of absence
- Alternative housing while enrolled
- Disciplinary action
- Education and training

"The overall goal of the model policy is to provide a non-discriminatory, non-punitive model for schools to follow to address student mental health issues," Karen Bower,

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senior staff attorney for the Judge David L. Bazelon Center, told *MHW*.

"This is an ongoing issue," she said. The center had been working on the policy even before the tragic events at Virginia Tech last month, she said (see *MHW*, April 23). "The model policy grew out of the [university] cases and our work in this area and understanding about how schools are responding," she said.

Bower cited the settlement of two university lawsuit cases last year. In the Complaint in *Nott v. George Washington University*, the Bazelon Center represented a student who had been excluded from George Washington University for seeking mental health services.

While the terms of the settlement are confidential, George Washington university has agreed to review and revise its policies, noted Bower.

Another settlement occurred on behalf of a Hunter College student in New York who had been barred from her dormitory room because she was hospitalized after a suicide attempt. In that case City University agreed to pay \$165,000 to settle the suit.

For a copy of *Supporting Students: A Model Policy for Colleges and Universities* policy, visit www.bazelon.com.

Screening tool identifies patients who fail to take medications

The results of a new survey released during last week's annual meeting of the American Psychiatric Association (APA) has found that poor insight, failure to take medication and previous discontinuation of medication are the most common reasons for failing to take medication prescribed for schizophrenia in approximately two out of three patients.

schizophrenia prescribed oral antipsychotics take their medication on a regular basis. Researchers say this is of particular concern as relapse rates are four times higher in patients that do not adhere to their medication.

Researchers also note that the financial burden of relapse and re-hospitalization in schizophrenia patients in the U.S. is estimated at approximately \$300 million per year.

surprised that the clinicians reported similar factors associated with non-adherence. "We've known that patients who have poor insight into their illness have difficulty taking the medication," he said. "If a patient tells the doctor they had discontinued taking the medication on their own in the past, that's a pretty good indicator" that would contribute to a patient's non-adherence with the medication, he said.

The surveys had been sent to 3,000 clinicians and about one-half returned the survey back to the sponsor, Janssen L.P., Kane noted. "That's a pretty good return rate," he said.

The aim was to develop a brief tool that could be completed by a member of the treatment team to aid in the identification of non-adherence.

The survey, which involved over 13,000 patients with schizophrenia, used a new screening tool which was developed to help clinicians identify patients with schizophrenia who are at risk of non-adherence with medication.

The Medication Adherence Assessment Tool was developed by an advisory board of healthcare providers, including psychiatrists, and representatives from advocacy groups. The aim was to develop a brief tool that could be completed by a member of the treatment team to aid in the identification of non-adherence.

Previous studies show that less than half of patients with schizo-

The screening tool was assessed in a pilot study involving 134 physician/clinicians and 309 patients. Based on the pilot results, a final screening tool was developed and administered to 1,522 physician/clinicians and 13,538 of their patients.

"The overall goal was two-fold," John M. Kane, M.D., lead investigator and director of the National Institute of Mental Health (NIMH) Intervention Research Center in Schizophrenia, told *MHW*. "We wanted to develop a tool that was relatively easy for clinicians to use and to also gather some data on what predictors of non-adherence were present in the majority of the patients."

Kane said researchers were not

Survey results

The most common reasons clinicians gave for non-adherence to medication in their patients were poor insight into their illness (74 percent), previous discontinuation of medication on their own (67 percent) and forgetting to take medication (67 percent). The survey also noted significant regional differences identified in all risk factors except 'stigma about taking medication'.

The survey also found that poor insight into illness was rated high in contributing to non-adherence throughout all regions varying from 67 percent to 70 percent.

The American Psychiatric Annual Meeting was held May 19-24 in San Diego, Calif. For more information, visit www.psych.org.

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are reporting symptoms consistent with PTSD," she said.

Rosenberg added, "The prevalence rates for closely related mental health problems — including major clinical depression and anxiety disorders — are also strikingly high."

The VA system in Montana is working with member health centers and agencies to provide care for returning soldiers, said Rosenberg. During her testimony, Rosenerge said that National Council members are making every effort to ensure that all mental health services delivered to veterans are culturally competent. In many instances, peer counseling is key part of a key part of any comprehensive service plan developed for an Iraq war veteran.

Multiple services for vets

The South Central Montana Regional Mental Health Center in Billings currently has three different contracts with the VA Montana Healthcare System, noted Robert Ross, executive director of the center.

The contracts involve readjustment counseling to veterans who have served in combat and psychiatric care and mental health therapy to veterans referred by the state VA. Another contract enables the center to provide intensive case management services for veterans, Ross told *MHW*.

The local VA initiated the referrals, Ross noted. "The Montana VA came to us with the idea," he said. "That was great. We can provide services to veterans anywhere in the state," said Ross. Services include case management, psychiatric services, and group and individual mental health therapy, he added.

The center also provides mental health services to veterans from other "theaters of war" including World War II, Vietnam, and Grenada, said Ross. "Our top priority is to the [soldiers] from Iraq. There is a current shortage of psychiatrists in Montana and occasionally there are

Legislation introduced to expand mental health care access for veterans

Community mental health leaders and providers are excited about legislation introduced last week to improve access to services for veterans returning from Iraq and Afghanistan who are struggling with combat-related mental health disorders.

The Veterans' Mental Health Outreach and Access Act (S. 38) is co-sponsored by Senators Pete Domenici (R-N.M.) and Barack Obama (D-Ill.). The bipartisan measure will authorize the Secretary of Veterans Affairs (VA) to develop and implement a comprehensive national program to increase the availability of mental health support so that veterans affected by combat-related mental health problems do not go without the care they need.

The bill would place particular emphasis on National Guards and Reserve veterans serving in Operation Iraqi Freedom and Operation Enduring Freedom. The legislation would include provisions to extend counseling services to veterans' families who may also experience issues with readjustment after their loved ones have returned from deployment.

The bill directs the Secretary of the VA to contract with community mental health centers to provide treatment and support services and readjustment counseling. Additionally, the legislation would require any contract-provider to hire a qualified peer specialist, as well as has have its clinicians participate in a training program to ensure services are tailored to meet the specialized needs of combat-affected veterans.

"As many of our bravest men and women return from Iraq and Afghanistan with combat-related psychological injuries, our top priority should be providing them with the mental health care they deserve," said Obama. "This legislation will strengthen mental health and peer counseling support for our veterans, as well as launch a national effort to ensure our Guardsmen and Reservists living in rural communities receive the same quality and access to mental health care as every other veteran served by the Veterans Administration."

"Community mental health organizations across the country are ready and willing to support the VA in addressing the critical mental health needs of veterans and their families through quality and culturally competent services," said Charles Ingoglia, vice president of public policy and technical assistance at the National Council for Community Behavioral Healthcare (NCCBH).

Ingoglia added, "Community providers' 40-year track record of providing mental health services to nearly six million Americans annually, combined with their more comprehensive geographic coverage and deep roots in our communities, makes them an attractive potential partner in meeting the needs of our veterans."

waiting lists," he said.

Ross said he hopes the next step would be to develop or expand services to include family members of war veterans as well, he said. Presently, that component "is out of scope of the contract," Ross said.

"We're getting busier and busier all the time," Ross noted. The center has just renewed its contracts with

the VA for another five years, he added.

Employment services

The Western Montana Mental Health Center, which contracted with the local VA administration about five years ago to provide mental health services for veterans,

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has also managed to fill another void for returning veterans by helping them find employment, said Paul Meyer, MSSA, the center's executive director.

"Most recently we've added vocational services for people to get back to work," Meyer told *MHW*. The center addresses care for the all veterans in Western Montana, including soldiers returning from Iraq, he said.

"Having care close to home was important [for the veterans]" said Meyer. The center offers outpatient therapy, individual and group therapy, crisis services, and case management to high-need veterans who may be suffering from schizophrenia or bipolar disorder, he said.

Before the program, veterans would typically have to wait six, maybe eight months for services on an outpatient basis, noted Meyer. The turnaround time now is 10 days or less, he said. If urgent care is needed, the time may be even less, he said. "They appreciate having us on board," said Meyer.

A recent report released by the Western Montana Health Center indicated that from January 2006 to December 2006, approximately 715 veterans were provided with outpatient care, nine received intensive case management, and 16 required vocational services, said Meyer.

Addressing homelessness, mental health needs

In addition to providing mental health services for veterans, the Valley Cities Counseling and Consultation agency in Auburn, Washington, is also working to provide vets with permanent-supported housing, said Scott R. Swaim, senior director of the agency.

"About one-third of adults homeless in this country are veterans," Swaim told *MHW*. A variety of barriers affect them including mental health issues and chemical dependency, he said.

The Washington State Department of Veterans Affairs partnered

with the Auburn agency to provide PTSD screening and community-based services to National Guard members and Reservists in Auburn, Kent and the Seattle metropolitan area.

The program started eight months ago, said Swaim. Counselors and therapists are available to help provide the services, which extend to families and children as well, he noted.

Swaim said it important for them to develop culturally competent services for military members and their families. "The center is also working on building a partnership with a local American Indian tribe, the Muckleshoot, who have asked the center to assist with men-

tal health services, he said.

While the National Guard and Reservists have been responsive to the services available to them, they are in some ways faced with stigma, he noted. "They are very fearful of information getting back to the military" if they proceed with receiving mental health services, he said. However, the experiences, thus far, have been positive, said Swaim. "It helps that I'm a veteran myself," he noted.

The center is currently the first in the state to partner with the state Department of VA to provide these services, Faith Richie, chief executive of the Valley Cities Counseling and Consultation, told *MHW*. •

Mental Health America releases inaugural podcast, 'Chiming In'

Mental Health America (MHA) last week released its inaugural podcast, "Chiming In," to reach even more Americans with messages that promote mental health and encourage wellness and recovery from mental illness.

Each month, "Chiming In" will deliver regular features on mental health issues, including information for improving personal wellness, reports on research and policy trends and profiles of communities and everyday Americans living with mental health problems.

"Chiming In is our first foray into the world of podcasts," said David Shern, president and chief executive of Mental Health America. "We hope to promote mental health and wellness among a whole new audience of Americans, as well as to grow the movement of individuals, family members and advocates who strive to improve mental health in our nation."

For the inaugural May podcast, "Chiming In" focuses on Mental Health Month and the vital connection between mental health and overall health. This month's features include:

- Welcome to Chiming In
- President's perspective
- What's happening this Mental Health Month
- Morbidity and mortality in people with serious mental illness
- The relationship between mental and overall health
- Mental health insurance parity
- A look to next month

Interested individuals can either listen to "Chiming In" online (in its entirety or by topic) or subscribe to this and all new episodes automatically at www.mentalhealthamerica.net/go/chimingin. By subscribing, individuals can choose to listen on their computer, iPod or MP3 player of choice. A podcasting tool, such as iTunes, is required to subscribe; it is available for free at www.apple.com/itunes/download.

BRIEFLY NOTED

NCD partnership addresses crimes against persons with disabilities

In an effort to raise public awareness about the prevalence of violent crime against people with disabilities, the National Council on Disability (NCD) last week announced a partnership with the Association of University Centers on Disabilities and the National Center for Victims of Crime. Although there is little reliable national data on this phenomenon, NCD cited one study finding that more than one-fourth of people with severe mental illness had been a victim of violent crime — a rate more than 11 times that of the general population. A joint statement from the three partners calls for expanded research, greater public education, public policy changes, greater access to programs and services, and a national leadership forum. Visit www.ncvc.org to see the full statement.

Study suggests little cognitive advance in adolescence

Early behavioral data from the National Institute of Health Magnetic Resonance Imaging (MRI) Study of Normal Brain Development was recently reported online in the *Journal of the International Neuropsychological Society*. This groundbreaking study will ultimately “provide researchers with a reference point for how the normal brain develops,” said lead author Deborah Waber, Ph.D., with Children’s Hospital Boston and Harvard Medical School. In a May 18 NIH press release, Waber explained that joining the behavioral data with MRI scans of the brain will ultimately provide insight into what goes wrong in cases of genetically-linked mental illness or prenatal exposure to alcohol/drugs. In their early results, the researchers were surprised to find that the most dramatic cognitive growth occurs between the ages of 6 and 10. It

NCCBH elects R.I. council president as Board of Directors chair

The National Council for Community Behavioral Healthcare (NCCBH) this month announced the election of Elizabeth Earls as the new Chair of its Board of Directors, effective July 2007.

Earls, who has extensive federal and state legislative experience, is president and chief executive of the Rhode Island Council of Community Mental Health Organizations.

“This is an exciting time for the National Council and with the leadership of our outstanding board we will continue to raise the profile of mental health and addiction services in national healthcare policy and practice arenas,” said Linda Rosenberg, NCCBH president and chief executive.

“NCCBH brings an important perspective to the national health care agenda,” Earls told *MHW*. “As chair, first and foremost, I want to work with Linda and the staff to continue to make the National Council the premier voice in the development of public policy as it pertains to behavioral health care.”

Earls added, “We have an ever increasing presence on the Hill, and in those public forums where behavioral health care is debated. Very practically, we just held our third annual Hill Day, bringing hundreds of providers and board members to Washington to meet and discuss with their congressional delegations issues of importance to the community mental health system.”

appears in most youth, adolescence is primarily a period of “integrating what ones knows.”

Early success for first online autism registry

The Interactive Autism Network (IAN), the first online registry of its kind (See *MHW* April 16), is off to an impressive start, having registered more than 13,000 families in its first month, according to Dr. Paul Law, who co-founded IAN with his wife and now serves as the project’s director. In a May 14 press release issued by the Kennedy Krieger Institute, Law writes that IAN houses the country’s largest pool of autism data and has already become “a vital resource for researchers”—boding well for the future of IAN and of autism research. At this time, researchers are using IAN data to enhance current research studies, compare and validate existing studies, and explore new hypotheses for future research. IAN is spearheaded by the Kennedy Krieger Institute in

Baltimore, Maryland and funded by a grant from Autism Speaks. www.IANproject.org.

STATE WATCH

Georgia seeks new director for state mental health

In light of growing criticism of the condition of mental health services in state hospitals, Georgia officials have announced a national search for a new medical director for the Department of Human Resources’ Division of Mental Health, Developmental Disabilities and Addictive Diseases. The Associated Press reported on May 22 that the former medical director Andrea Bradford, M.D., submitted her resignation on May 10, one day following an Atlanta Journal-Constitution article describing poor patient conditions at the Georgia Regional Hospital in Atlanta. Bradford declined to say if her res-

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ignation was related. In January, the Atlanta-Constitution reported on the rampant staff abuse and mysterious deaths of many mental patients.

Nevada justices seek to bend minimum sentencing law

Questioning the rationale of Nevada's mandatory minimum sentencing laws, established in 1995, Nevada Supreme Court Justice Jim Hardesty complained that in some cases, state law prevents judges from appropriately sentencing non-violent offenders. The Nevada Appeal reported on May 15 that Hardesty and Chief Justice Bill Maupin are asking lawmakers to consider more flexible sentencing, provided the judge submits written findings to support deviations from the law. The two justices are also asking that more funds be allocated to support drug and mental health court programs to keep non-violent offenders out of prison. Maupin cited growing evidence of the success of mental health courts. While the Supreme Court requested \$5 million in state general funds, a budget subcommittee has approved only \$1 million.

RESOURCES

Netsmart: Connected Care Architecture

On May 18 Netsmart Technologies, Inc. introduced its Connected Care Architecture™ (CCA), featuring software and tools designed to allow the exchange of information among community mental health agencies, private sector and state psychiatric hospitals, and city and county public health departments through Netsmart's enterprise software solutions. Referral and discharge information can be sent electronically between agencies and providers can access information about a patient's medications when they seek emergency mental health services. Also, a Consumer Access Portal will allow

Coming up...

Mental Health America (formerly the National Mental Health Association) will hold its 2007 Annual Meeting, "Bringing Wellness Home," on **June 6-9** in **Washington, D.C.** For more information, visit www.nmha.org/go/annualmeeting.

The **American Mental Health Counselor Association (AMHCA)** will hold its 2007 Annual Conference, "Growth out of Adversity," on **July 26-28** in **New Orleans**. Visit www.amhca.org/pdf/AMHCAFebPNad-flyer.pdf for more information and to register.

The **Depression and Bipolar Support Alliance (DBSA)** will hold its 2007 National Conference, "Making the Recovery Connection," in **Orlando, Fla.** on **August 10-12**. Visit www.DBSAlliance.org/conference for more information or to register online, or call (800) 826-3632.

The **American Psychological Association** will hold its 115th Annual Conference on **August 17-20** in **San Francisco**. For more information and to register, visit www.apa.org/convention07.

consumers to schedule appointments and review their treatment plans online. The technology will be available in the fall.

children about depression, she has been a dedicated advocate for mental health parity in New Jersey.

NAMES IN THE NEWS

Sylvia Axelrod, executive director of the New Jersey chapter of the National Alliance on Mental Illness (NAMI), is the recipient of the 2007 Welcome Back Award for Destigmatization. NAMI wrote on May 18 that Eli Lilly and Company established the program in 1998 to fight the stigma surrounding depression and to promote awareness of effective treatments. Axelrod has served as executive director for 14 years. In addition to focusing on a number of projects including educating young

OBITUARY

Marian Radke-Yarrow, who served as chief of the developmental psychology laboratory at the National Institute of Mental Health from 1974 to 1995, died at her home on May 19 of leukemia. She was 89 years old. The New York Times reported on May 23 that Radke-Yarrow was a researcher in child psychology well-known for a broad range of work including studies of depression in young children and racial prejudice among schoolchildren. Her work was published widely and she authored several books.

In case you haven't heard...

Could going "green" help fight the blues? A mental health charity in the United Kingdom, Mind has launched a "green agenda" for mental health care. Mind is asking that the UK's National Institute for Clinical Evidence (NICE) recognize the importance of "ecotherapy" — exercising outdoors — as adjunctive therapy for treating symptoms of depression. "We're not saying that ecotherapy can replace drugs," said Mind's Chief Executive Paul Farmer, "but that the debate needs to be broadened." Mind cites two studies which found that outdoor exercise was beneficial for mental health, while exercise inside a shopping mall actually exacerbated negative symptoms. Farmer calls ecotherapy a "credible, clinically-valid treatment option" which could be particularly beneficial for those with limited access to antidepressant drugs.