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Save the date!

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As 2010 wraps up and 2011 rolls in, we once again contemplate whether the New Year will be better than the last. Though conditions have improved, we face formidable budget deficits across the country. The recurrent trend is to slash mental health services despite the growing knowledge that one in four of us will be diagnosed with a mental illness in any given year. Of course, we in NAMI are familiar with the severest of mental illnesses, in particular, schizophrenia, major depression, and bipolar disorders, and often in the most personal of ways.

For my family, the struggle with mental illness has been difficult, but it pales in comparison to other families. One learns this in Family to Family and other NAMI educational programs. My brother takes the third generation anti-psychotic medication clozaril that has lifted him from a life sentence of hearing voices he could not shut out, and from paranoid delusions he could not escape. Though medications have come a long, long way, they are still unable to cure. Effective treatment includes the best medications, counseling, case management, and caring support. Unfortunately, Texas has failed miserably in ensuring access to these fundamental components of effective treatment. Loved ones are constantly denied the best medications, a psychiatric bed when needed, and simple case management services, all of which would eliminate the shocking growth in the incarceration of those diagnosed with mental illness. When 40 percent of those incarcerated in El Paso County jails are receiving psychotropic medication, and other counties have equally dismal rates of incarcerating those diagnosed with mental illness, it is unacceptable to even consider making any cut to mental health services in Texas. And yet, our legislators are poised to do this, once again, while most of us in Texas feel powerless to prevent it, in part, because we are focused on our own loved one’s and family’s survival.

As an organization, NAMI Texas can and must be heard in the days and months ahead. We must join with our fellow mental health advocacy organizations in a united effort to halt this continuing slide to transfer the responsibility of mental health care from the community and a functioning mental health system onto the criminal justice system. Jails and prisons are not hospitals. Nor are they safe places for refuge from the thought and mood disorders so many of our loved ones struggle with each and every moment of their lives. Dorthea Dix would turn over in her grave if she knew that her efforts 150 years ago to stop the incarceration of those diagnosed with mental illness had been in vain.

We must all stand up and be heard this legislative session. Our legislators must be as familiar with our White Paper as we are. We must visit each and every one of them and let them know the depth of the pain we have and continue to suffer as lives are lost, destroyed, and denied by the development of mental illness in a society that relegates our loved ones to the back of the line and the terrors of incarceration rather than providing comprehensive mental health services. Our message is clear: “Helping Texas families and saving taxpayer money.” Ray Perryman, the economist often listened to by our Legislature, has made the case for investing in mental health programs... “for every dollar spent on mental health services, Texas saves $23.” This simple but compelling argument will likely be lost on our Legislature if it becomes, once again, enmeshed in partisan politics, personal agendas and pyrrhic budget cuts.

We must raise our voices now, and we must be heard. Our legislators must understand the suffering our loved ones and families are already enduring. Please make an appointment to speak with each and every one of your legislators now. Take a copy of the White Paper with you and give it to each one. Answer their questions and tell them your personal stories demonstrating the harshness of living with mental illness in a society that stigmatizes this illness unlike any other. Make them understand that they can help Texas families and save taxpayer money by investing in and supporting comprehensive mental health services with a fraction of the funds being poured into the unfair and unreasonable incarceration of so many of our loved ones. Join with us in this effort, and let’s not rest until we have won the battle for comprehensive mental health services in Texas.

In NAMI,

Eric Willard
President, NAMI Texas
Making Health Care Reform Work for Consumers and Families in Texas

By Andrew Sperling, Director of Policy, NAMI National

The new health care reform law presents important challenges and opportunities for consumers and families. Despite sharp partisan differences over the merits of the new law (known as the Affordable Care Act), agencies across both federal and state government are moving forward to implement its many complicated provisions. While we are likely to see continued efforts in Congress to repeal the law in 2011 and beyond, major parts of the law are already in effect and outright repeal appears increasingly unlikely. Even if Congress were to pass legislation repealing the law, President Obama is certain to veto any such effort.

Insurance Market Reforms Already in Effect

On the six month anniversary of the Affordable Care Act going into effect – September 23, 2010 – a series of provisions designed to reform the current insurance market went into effect. These reforms include:

• A ban on imposition of pre-existing condition exclusions for children under 19,
• A prohibition on coverage rescissions (a health plan summarily cancelling coverage),
• Allowing extended family coverage for dependents up to age 26,
• A ban on lifetime dollar limits on coverage,
• A prohibition on annual dollar limits for “new” plans that fail “grandfathered” status,
• Elimination of beneficiary cost sharing for certain preventive services (including depression screening) for “new” plans that fail “grandfathered” status,
• New authority for state insurance agencies to review proposed premium increases, and
• Interim state-based high risk pools offering coverage to anyone with a health condition that is uninsured for 6 months or more.

Starting in 2014, these insurance market reforms will expand to bar imposition of pre-existing condition exclusions in all policies for both adults. In addition, starting in 2014 new rules requiring “guaranteed issue” and “guaranteed renewability,” meaning that health plans will have to offer coverage and renew all existing policies upon request.

Coverage Expansion Begins in 2014

January 2014 will also see an expansion of coverage for the uninsured and new coverage options for individuals and small businesses. This includes the largest expansion of the Medicaid program since 1965 – requiring states to cover all individuals up to 133% of the federal poverty level (currently about $14,400 in annual income for single individual). Also in 2014, the most controversial part of the new law – the mandate on most Americans to have health insurance – will go into effect. This individual mandate will coincide with the establishment of state-based health insurance “Exchanges” that are designed to create affordable health care options, along with tax credits and cost sharing subsidies to help low and moderate income individuals and families access coverage.

People living with serious mental illness obviously have much to gain from successful implementation of each of these reforms. People with mental illness are more likely to be uninsured and experience bad health outcomes as a result of lack of access to basic primary care services. Not surprisingly, people with mental illness also experience significantly higher rates of medical co-morbidities such as diabetes, cancer, heart disease and asthma. Thus as Congress and the Obama Administration move forward to implement the new law NAMI has enormous stake in making sure the overall health care needs of people with mental illness are kept in the minds of policymakers.

Mental Health Specific Provisions

In addition to expanding coverage, the new law also has a range of specific provisions designed to improve coverage of mental illness treatment in both private health plans and publicly funded coverage. A few of these highlights include:

1. Requirements for all of the new coverage options offered through the new “Exchanges” to BOTH include mental health in the required basic benefits package AND ensure that this coverage complies with the 2008 Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act (ensuring that there are no limitations on coverage for mental illness that do not also apply to medical-surgical coverage),
2. A Medicaid demonstration program to expand coverage for acute inpatient care in private psychiatric hospitals,
3. Establishment of new Centers of Excellence for treatment resistant depression,
4. Improvements to care coordination for mental illness treatment including co-location of primary care in specialty mental health settings and a new state option to more effectively target people with serious mental illness and at least one other chronic medical condition and more effective care coordination of individuals dually eligible for both Medicare and Medicaid, and
5. A federal initiative to address post-partum depression through education, research and training.

December 9, 2010
**TDI launches CHAP program**

The Texas Department of Insurance (TDI) has launched the federally funded Consumer Health Assistance Program (CHAP) to provide information and assistance to Texas consumers.

CHAP will help you:
- Learn about your rights under federal health care reform and state law
- Enroll in a health plan
- Appeal a health plan’s denial of a treatment or service
- Resolve a complaint against your health plan or insurer
- Obtain the health care premium tax credit (for small businesses)

CHAP is part of a nationwide network of state health assistance programs funded by a grant from the U.S. Department of Health and Human Services (HHS). As part of the program, TDI will launch a statewide educational campaign with the assistance of the state’s Office of Public Insurance Counsel and will regularly report data about consumers’ problems and inquiries to the U.S. Department of Health and Human Services.

If you have questions about how the federal health care reform will affect you or have an issue about health insurance, call the CHAP Help Line toll-free at 1-855-TEX-CHAP (1-855-839-2427). Help Line assistance is available Monday through Friday, from 8 a.m. to 5 p.m., Central time. You can also learn more about CHAP by visiting TDI’s Texas Health Options website at www.TexasHealthOptions.com. The website has timely information about health care reform implementation and information to help you find health coverage. You’ll also find a downloadable flier explaining how CHAP can help you. The flier is available in English, Spanish, Chinese, Korean and Vietnamese.

CHAP staff are also available to speak about the program to groups across Texas. Call the CHAP Help Line to schedule a speaker for your next event.

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**NAMI Texas 2011 Legislative Agenda**

**Overview:** Save taxpayers dollars by preventing the criminalization of mental illness through minor modifications to existing statutes involving:
- Inpatient and outpatient commitment
- Emergency detention
- Competency restoration
- Adapting insanity defense for severe mental illness
- State and locally funded community care
- Parole reform to pay for it

**Commitment Law:** Make it possible for judges to ensure that Texans with severe mental illness receive necessary medications and case management services through temporary outpatient commitment.

**Emergency Detention:** Ensure that Texans with severe mental illness are not turned away from psychiatric hospitals when they are suicidal or dangerous to others or too unstable to protect themselves from the results of untreated mental illness and facilitate peace officers taking such Texans to a hospital rather than jail.

**Competency Restoration:** Ensure that if a Texan with serious mental illness is arrested that there is a quick and reliable method to determine whether the individual is competent to stand trial and that if the person is found to be incompetent that he or she doesn’t further decompensate in jail waiting for a hospital bed to open up.

**Adapting Insanity Defense for Severe Mental Illness:** Allow Texans who cannot appreciate their conduct is wrong or are unable to control their behavior because of their mental illness to be hospitalized rather than imprisoned.

**State and Locally Funded Community Care:** Clarify that state and local government authorities are responsible for persons with serious mental illness, including providing medication and case management services and a minimum standard of mental health care.

**Parole Reform:** Save state taxpayer dollars by allowing parole officials to consider parole at an earlier time for non-violent offenses, including for state jail felons, who have no right to good-time credit or parole. Prison costs $50 per day per inmate versus $3.51 per day for parole. Inmates with mental illness cost $100 to $137 per day.

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**Saving Minds, Saving Money**

**Mental Health Day at the Texas Capitol**

Thursday, February 17, 2011
10:00 am - 4:00pm
Schmidt-Jones Family Life Center
Great Hall, 2nd Floor
1300 Lavaca, Austin, Texas
Registration - $6.00
Registration Information will be coming soon!

Contact Theresa Terlik for more information:
tterlik@namitexas.org or 512-296-6886
It is a known fact that Texas is one of few states that leads the nation with the largest population of military service members. Texas has the third largest population of veterans and contributes a significant number of the military service members deployed as part of Operation Enduring Freedom and Operation Iraqi Freedom (OEF/OIF). According to the Texas Veterans Commission and the 2008 U.S. Census Bureau, more than 1.7 million veterans live in Texas.

What does that mean?
It means that Texas veterans have a higher likeliness to suffer with both the visible and invisible wounds of combat. Our veterans may present with a higher incidence of traumatic brain injuries (TBI), post-traumatic stress disorder (PTSD), major depression, increased risk for suicide, multiple tours of service, and family and marital separation for extended periods of time.

What else does that mean?
It means that not only our country, but the State of Texas has a duty to meet and serve the needs of this affected group. With nearly 400,000 veterans identified with disabilities in the state, there is reason to believe there are more suffering silently with less visible wounds which directly impact the life of the veteran and their family members.

To address many of the issues Texas service members face when returning to life after combat, Governor Rick Perry, along with the Health and Human Services Commission, the Department of State Health Services (DSHS) and the State Legislature, secured an additional $5 million last year to expand mental health services for veterans and their families.

One of the veteran’s initiatives included in this funding was designed to expand peer to peer projects that help veterans and their family members, and train both the veteran and family member to provide peer support.

Operation Resilient Families (ORF)
Operation Resilient Families (ORF) is one such state-funded peer education and support program designed for veterans and family members. ORF addresses the common post-deployment challenges faced by families in a way that attempts to normalize these difficult family issues and discover a family’s strengths. By utilizing a peer group that keeps the focus on building strengths and resources, the stigma associated with mental illness is avoided. In addition, participants are engaged in a community with similar experiences.

First class of ORF Peer Facilitators at the completion of the June ORF 2010 Training. Since June, a second group of peer facilitators in August were trained to deliver ORF in their community. To date, a total of 53 individuals have been trained.

In recognition of the benefits of peer support services, the Waco Texas Affiliate of NAMI pursued and received a grant from the Texas Resources for Iraq-Afghanistan Deployment (TRIAD) Fund to develop ORF. NAMI Texas further supported this effort through a donation by the Family Support Foundation for Mental Illness. To realize this program on a statewide level, NAMI Waco gifted the program to NAMI Texas for rollout and management.

ORF is now a collaboration between NAMI Texas, and the Department of State Health Services (DSHS). ORF training and implementation is funded by DSHS as part of the state wide veteran’s initiative and support and technical assistance is provided by NAMI Texas to aid competitive grant recipients in implementation of ORF in their community-based setting.

Training and Education
Priority areas for training were identified through DSHS, who awarded competitive grants to 10 local mental health authorities (LMHA) to implement ORF and other veteran’s projects in their communities.
A Peer Program Designed to Address Re-Integration Challenges for Veterans & their Families

ORF Volunteer Sue Naylor and ORF Program Coordinator Sandra Thomas distribute information for veterans and family members at a free legal clinic held 11/12/2010 by the Austin Bar Association and Texas Lawyers for Texas Veterans. *Photo courtesy of the State Bar of Texas*

region. These identified LMHAs are strategically located in areas of the state where an increased military population exists. NAMI Texas hopes to be able to offer additional trainings in 2011 through this funding.

Currently, there are 53 peer facilitators trained in the ORF curriculum across the state (29 veterans and 24 family members). Peer facilitator training was held in June and August of this year and many LMHAs are currently working to establish their initial ORF groups collaboratively with their now trained peer facilitators. An ORF group in Tyler, Texas has already completed an 8-week session this Fall and reported personal and familial growth from a number of participants.

Peer Support for Veterans and Family Members

Peer support programs have become increasingly recognized for their value in engaging individuals and supporting recovery associated with a full array of physical and mental health conditions. The power of peer-to-peer communication holds just as true for those in the military community. Research supports that service members, veterans, and their family members of all ages tend to respond better to peers who truly understand what they have experienced in their particular war.

Provided in non-stigmatizing, community-based settings, ORF is designed to offer a natural environment for the development of a social network of support for peers who may often feel somewhat alienated from both the general civilian and military communities. It affords opportunity for participants to practice life skills of effective communication, goal-setting, and problem-solving and emphasizes the importance of intentional living to maximize personal and family appreciation.

Several activities in the ORF curriculum encourage breaking up into smaller facilitated groups of veterans or family members prior to reconvening and sharing as a whole group. While ORF is not meant to replace therapy groups or counseling, these peer-led subgroups are designed to maximize open sharing, self-discovery, and support among specific peer groups. In fact, these groups encourage open discussion to facilitate ideas and discuss where to access other pertinent resources.

Operation Resilient Families In The Future

As ORF continues to expand to communities across the state, the program hopes to build capacity for peer trainers and develop strong community partnerships that can support the continual expansion of community-based ORF groups and a collaboration of all veterans programs. Currently, the program also aims to become more closely involved with the Texas Military Forces and offer the availability of this program within the military infrastructure. More facilitator trainings are anticipated to become available as the visibility and response to participation for the program increases. We hope to work closely with other veteran’s service organizations throughout Texas to increase our capacity as a community that can transform mental health services for veterans across our state.

For more information on Operation Resilient Families, please contact Sandra Thomas, Program Coordinator at s.thomas@resilientfamilies.org.
On December 3, 2010 Inman White, Executive Director of Community HealthCore, and Robin Peyson, Executive Director of NAMI Texas, led a group of approximately 100 people through a day of educational presentations and discussions at LeTourneau University in Longview, Texas. The objective was to connect the faith-based and mental health communities and the event was a success.

The day began with two of NAMI Longview’s In Our Own Voice consumer speakers, Peggy Johnson and Prudence Thrasher. In Our Own Voice (IOOV) is a program presented by persons living with mental illness to any community group that is interested in learning about mental illness. The program includes a brief video and questions and answers from the real experts. Prudence and Peggy were captivating, and their stories started off the day with an overall sense of hope and a standing ovation. Their honesty and courage clearly touched the hearts of the audience.

Their presentation was followed by important information about Mental Health First Aid, an evidence-based mental health crisis management training program that can be provided to anyone who is interested in learning more about how to assist in responding to a mental health crisis. Dr. James Harold, a Community HealthCore psychiatrist, provided the group with a local perspective, illuminating common mental health issues and barriers to accessing mental health services and supports in the East Texas community.

Next was a panel discussion covering mental health and spiritual issues. Dr. Rahn Bailey, Chairman of Psychiatry and Behavioral Sciences at Meharry Medical College, Joe Lovelace, Associate Director Behavioral Health Texas Council of Community MHMR Centers, Beverly Matthews, a consumer member of NAMI Longview and Joi Bernard from Doves of Peace Ministries in Fort Worth and a member of NAMI Fort Worth were the panelists.

The panelists addressed the following issues:

- Why is it important to connect faith based and mental health communities?
- What have your experiences been with faith-based communities and mental illness?
- What are effective communication skills for clergy to assist helping someone with mental illness and/or their family?
- What is the role of spirituality/religion for an individual in recovery from mental illness?

Panelists also discussed concerns about possible budget cuts to an already under-funded public mental health system in Texas. It was widely agreed that the role of the faith based community in supporting individuals with mental illness will be more important than ever. Participants also had time to network and share information about local resources.

This was also an opportunity to reach out to the African American community, as research shows that African Americans generally seek support from faith communities more often than mental health professionals when they experience mental health problems. Future events are planned to continue connecting the faith based and mental health communities in the Longview area, including a luncheon in early 2011 for clergy.

For more information on NAMI Longview contact Judy Gillentine, Affiliate President of NAMI Longview at judygillentine@att.net. Copies of the NAMI Texas Faith-Based Tool Kit were also provided to clergy and lay leaders who attended this event. To request a copy of the Faith Based Tool Kit, please contact Kelly Jeschke at kieszke@namitexas.org.
Sharing HOPE: The Blind Side of Mental Illness in the African American Community

By Joi Bernard, Sharing Hope Coordinator, NAMI Tarrant County

“The door is now open for services and everyone is welcomed at this church”, that is until you start the dialog of mental illness. The room is somewhat quiet and no one is asking any questions then suddenly it starts with, “my daughter just returned from Afghanistan and cries a lot, is now so quiet, just different, I don’t know her anymore” or “my mother had a problem” or “my Uncle Buddy was a bit off” or “my father use to fly off the handle for little things, get so mad and within just 5 minutes or so later he was just laughing, smiling and wanted me to hug him … I never could understand that”.

That’s when NAMI Sharing Hope starts the dialog. Each and every time I’ve called churches in Fort Worth to talk about the NAMI Sharing Hope initiative on mental illness in the African American communities, pastors and community leaders alike are excited to join in the cause. I have had enormous support and very little resistance. Of course one pastor of a small church did mention that several families with mental illness attended his church, but he did not want to make arrangements for our Sharing Hope presentation for fear that one of them might think that he had told their story.

Via Hope Youth Activites

By Lauren Cohen

Via Hope is the Texas Mental Health Resource and is a collaborative effort between NAMI Texas and Mental Health America of Texas. We exist in order to ensure that adult consumers, family members, and interested youth have tools to create change in the mental health system. You may have heard about the certified peer specialist training that we do, which has been going really well! What you may not know is that we also have a brand new youth program for individuals ages 14 – 24. We have made exciting progress in the last few months! Since September, Via Hope has been holding youth focus groups throughout the state. We have been asking youth questions about their perspectives on mental health, what makes them want to get involved in social causes, and what they want our program to be like. Texas youth are pretty brilliant, if we just listen to them! Overall, the youth stated that it is important for them to come together for a weekend conference so that they can build on their advocacy skills and so that they can learn more about public policy. They would also like to have a public platform in order to break down mental health stigma and to create a supportive society for all of our individual differences. In the coming months, Via Hope will work with the youth in order to make these things happen! If you know a youth who would like to be involved or if you would like more information, you may email our youth coordinator, Lauren Cohen at Lcohen@namitexas.org or call her at (512) 693 – 2000.

Developed by young adults, this user-driven social networking community allows young adults to connect with their peers and share personal stories, creativity and helpful resources by writing and responding to blog entries, engaging in discussion groups, posting status updates on “The Wire” and sharing videos, photos and other news.

Strengthofus.org offers a variety of resources on issues important to young adults, including healthy relationships, family and friends, independent living, campus life, employment, mental health issues and much more.
As your National Consumer Representative and a member of the National Consumer Council, I have to say that 2010 was a very exciting year. The first one actually began in 2009 when our membership passed a bylaws amendment that basically split my job in half and created a second position, known as the State Consumer Representative. In October, NAMI Texas held its first election for this new position and, I am happy to say, Jeanine Hayes from Dallas is the first person ever to serve in this capacity. She will also serve as my alternate to the National Consumer Council. Congratulations Jeanine!

The next item of business was to address the creation of the NAMI Texas Consumer Council. Though this is to be a team project, someone needed to be appointed to lead the soon-to-be-formed State Council. Fortunately, we didn’t have to look far. Rose McCorkle from Austin, who ran for the State Representative, was appointed by the NAMI Texas Board to serve in that position until October 2012.

So what should NAMI Texas be expecting from Jeanine, Rose, and myself in 2011? As we speak, we are forming a steering committee made up of consumer members from all over the state. I have enlisted the help of the State Board of Directors to appoint a consumer from their region to this committee. Therefore, if you are a consumer and interested in serving on this committee, please contact your regional representative. Our Board members are listed on our website; www.namitexas.org.

The goals of this committee are fairly simple. We hope to work on a set of policies and procedures as well as lend a hand to the planning of the 2011 state conference. It is our vision to see around half of the conference break-out sessions directed at consumers, with a special track dedicated to consumer leaders. Other goals for the conference include a consumer council round-table, a consumer keynote speaker, and, the one thing I am most excited about, the 1st annual business meeting of the NAMI Texas Consumer Council. It is my personal goal that it will be at this meeting that we vote on Operating Procedures, seat a formal council (one representative from every affiliate) and vote on a Vice Chair and at-large Executive Committee members.

For more information about the NAMI Texas Consumer Council, please contact me at (806) 773-7368 or via e-mail at andy.gibson@suddenlink.net. To learn more about NAMI Consumer Councils, visit www.nami.org/consumercouncil.

NAMI Metropolitan Houston Wins Yearly Membership Award from NAMI Texas

At the NAMI Texas Annual Conference last October, NAMI Metropolitan Houston was presented with a special award and trophy in honor of the greatest increase in new membership among all the Texas Affiliates.

NMH membership coordinator, Carolyn Hamilton, who could not be at the conference, is shown holding the trophy along with Andrea Hazlitt, NAMI Texas Board of Directors, Region 8, and Susan Denyes Moody, NMH Affiliate President (left to right).

“All of us at NAMI Metropolitan Houston express our gratitude for Carolyn Hamilton’s above and beyond efforts, making this award possible,” said Susan Denyes Moody.
Magellan Employees Donate to NAMI Texas

On November 18, 2010 NAMI Texas was invited to participate in a special event. As part of a two-week outreach campaign, Magellan Health Services Southwest Care Management Center employees came together to participate in a variety of activities to benefit two organizations, NAMI Texas and Salvation Army.

The campaign materialized out of employee interest to continue the site’s longstanding tradition of caring and to commemorate their time together, as they face changes to their team. Magellan is undergoing a reorganization, including employee layoffs, due to a change in their mix of business services. This made the generosity of the CMC employees all the more meaningful, during this season of giving.

At the conclusion of the day on Thursday, November 18th, a reception was held to present the donations, and John Dornheim, Board President, accepted. Approximately $1,642 was collected for NAMI Texas. These funds will be used to support new NAMI Affiliates who are just getting started.

The Board of NAMI Texas wishes to express our deepest thanks to the employees of Magellan Health Services for their generosity. These funds will give a head start to new NAMI Affiliates who are working to establish themselves and offer support, education and advocacy to consumers and their families in Williamson County and East Texas.

NAMI Texas Staff

We’re the people who make certain that NAMI Texas is the best state affiliate it can be. We strive daily in our mission to come closer to making our vision a reality. Our office is open from 8:30 AM to 5:00 PM Monday through Friday. We’re closed on most state holidays. For general inquiries, please contact us at: kjeschke@namitexas.org with any questions.

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To join NAMI as a consumer/family member, please visit the NAMI Texas website at www.namitexas.org or contact your local Affiliate. A listing of our local Affiliates can also be found on our website- please check to see which Affiliate is closest to you. You may also make a donation at www.namitexas.org.