INTRODUCTION
The organization that we know today as NAMI California is the result of the efforts of a few courageous parent leaders, many families and thousands of individuals; friends and professionals that worked hard in the 1970's and 1980’s to give birth to an organization that would completely change the way we view mental illness. During that time families dreamed of the day when a child with schizophrenia would be treated no differently than a child with another chronic illness. They hoped for a time when mental illness could be discussed openly and their ill children and family members could be properly cared for in their own communities. We take this for granted today. Accomplishing these simple goals, however, would not be easy.

It all began at a meeting of 9 Northern California parent groups in Oakland, California on October 22 in 1977. The meeting was organized by three parents: Tony Hoffman, Fran Hoffman and Eve Oliphant. These three founded and led the organization from the late 70s into the 1980’s. They were joined by many other parent-leaders, families, consumers and supporters over the years. C. Allen Braswell, Helen and Hank Teisher, Olga Leifert and Peggy and Don Richardson are just a few of the many parents that provided critical leadership and support in the beginning. Together, they started an organization that turned into a national movement to inform and educate the country about mental illness and advocate for the rights and care of mentally ill family members. It is an organization that has changed the way we think about, treat and care for mental illness forever. The following describes the founding of the organization and the family movement it helped to create.

IN THE BEGINNING
During the 1970’s and before, serious mental illness, particularly schizophrenia, was viewed with considerable ignorance, shame and guilt by the public and even those who suffered quietly from its effects. Parents and family were often viewed as the cause of their child’s illness rather than its solution. Professional psychiatrists and psychologists had
primary responsibility for diagnosis and treatment. Parents and families had little say in the care and treatment of their family member. Individuals with serious mental illness were generally locked away in dilapidated and deteriorating institutions for months and years on end. The advent of new drugs in the 1950’s and 1960’s made it possible for the first time in history for seriously mentally ill individuals to function on their own in the society. These new medications provided an essential ingredient for a new approach to serious mental illness in California that would emphasize community based care.

New Federal and State legislation provided the additional ingredients. In 1963, Congress expanded the Aid to the Disabled act to include mental illness and passed the Mental Retardation Facilities Construction/Community Mental Health Center Act. The first, now called SSI, provided direct financial support to mentally ill individuals in the community. The second provided initial funding for building community based mental health centers. The third and final ingredient was the passage of the Lanterman-Petris-Short (LPS) act in 1967 by the California State legislature. The LPS act ended the inappropriate, indefinite and involuntary commitment of mentally disordered persons to institutions and encouraged the full use of existing agencies, personnel and funds to provide treatment, supervision and placement of gravely disabled persons. The authors of the LPS act envisioned an expanded system of community based mental health centers providing appropriate and timely support to those in need at a reduced cost to the State.

The LPS act was fully implemented into law in 1969. The release of thousands of individuals into the community from the State’s asylums and institutions began in 1970 and continued throughout the decade. One example vividly illustrates what it was like and what would happen in communities, large and small, across the State. Over 3800 mentally ill people were released from Agnews State Hospital on June 30, 1972 into the San Jose area. This resulted in the creation of a “mental health ghetto” overnight as various service providers converted vacant buildings and abandoned fraternity houses into board and care homes. Between 1969 and 1970, California counties would be required to provide mental health services to over 45,000 inpatients and 120,000 outpatients. While the authors of the legislation thought they were improving lives, what they actually did was release thousands of ill, confused and vulnerable individuals into communities that were simply unprepared to provide the services and support envisioned.

While LPS did reduce the cost of caring for the mentally ill to the State, it did not improve lives or lessen the stigma that the public associated with mental illness. Quite the opposite occurred. Communities that previously had little contact with mentally ill individuals were seeing them daily on their streets. Individuals with schizophrenia that were previously locked away in the back rooms of State asylums now found themselves in the back rooms of run down boarding houses. Parents and family that previously had limited contact and responsibility for their mentally ill son, daughter, parent or relative, were now facing difficult choices regarding their care and support on a daily basis. Job and housing discrimination towards mentally ill individuals was widespread.

Opportunities were few. Many would end up living homeless on the street or worse. Even the community mental health professionals that supported LPS legislation would find that they had neither the time and resources or inclination to provide the care originally envisioned. Private insurance was not available or coverage was limited. Parents and families were on their own. They would have to learn to cope with the changing needs of their mentally ill family member without the community support originally planned and promised.

Other legislation passed during the Johnson administration and afterward would give parents and families of seriously mentally ill individuals the tools to start a second movement on behalf of their mentally ill family members. In 1964, Congress passed the Civil Rights Act outlawing racial discrimination in public places. This act was expanded in 1968 to include housing protections for people with disabilities and families with children. At this time, thousands of disabled soldiers were returning home from the Vietnam War. They were demanding an end to the war and access to government services and support. Parents of handicapped children began to demand access as well. In 1975, Congress passed the Education for All Handicapped Children Act, mandating free and appropriate public education for children with disabilities including mainstreaming where possible. The new support for physically disabled individuals did not go unnoticed by the parents with seriously mentally ill children. While public support and funding for the care of physically handicapped individuals grew during the 1970’s, support and funding for those that were disabled as a result of serious mental illness declined.
This year, NAMI California celebrates 40 years of statewide work in California. 40 years ago, a group of local NAMI groups assembled in Fresno, California to unite under the same banner for larger change. By holding that meeting, we started a promise to each other, our communities, and all those living with mental illness and their families.

A promise we tuck into the whispers for our children as we put them in bed at night. Our commitment that we will protect them no matter what comes. Our commitment to protect our neighbors’ children and their children after them. It is our resolve that we will do everything we can to intervene early when mental illness shows up.

It’s a promise that we will stand up for each other when all our strength is spent, and we are up against unimaginable odds. A promise we tell our own weary hearts as we head into another meeting to share our often-painful stories to give others hope. A promise that tells us to keep standing up, to keep believing and one day we will reach the goal of lives lived with dignity and respect for those with mental illness and their families.

NAMI California is a promise to those who don’t even know they need NAMI California yet, that the door will be open, and they will be welcomed in, free of judgment. That families will find comfort and support in NAMI California, that they will have friends and champions, they might not even know exist yet, but whom are waiting to help them.

We are an understanding that learning never ends, that we will take our collective wisdom from these many years and use it to make someone else’s journey a little bit easier. That we will use our life-knowledge as our expertise to help providers, educators and other decision-makers understand the voice of lived experience to shape how systems serve those in need.

NAMI California is a promise we’ve kept for the last 40 years, that has carried our dreams to unimaginable heights and will carry us even higher. A promise that has brought us the mental health services act, federal parity laws, a promise that tells us, NAMI California will be here tomorrow, and every tomorrow to come until we live in a world where we can all live the lives we deserve with all the potential within us.

Jessica Cruz, MP/HS
NAMI California, CEO
NAMI California is a grassroots organization fighting to erase the stigma associated with mental illness while also providing a helping hand to improve the lives of Californians and families living with serious mental illness. We are also committed to supporting our affiliates and the hundreds of volunteers. We currently have 62 affiliates across the state that support their local areas by holding regular meetings, offering a variety of education and support programs for families and consumers, and providing various types of community education regarding mental illness. NAMI California offers a range of programs and services that every affiliate may elect to provide at the local level. Our organization is also very active in seeking funding to make all programs available to every affiliate.

2018 - 2019 NAMI California Board of Directors

(L to R) Standing: Guy Qvistgaard, Patrick Courneya, Armando Sandoval, Paul Lu, Andrew Bertagnolli, Joseph Farrow, Jei Africa, Steven Kite. Seated: Gustavo Loera, Cindy Beck, Christina Valdez-Roup, Harold Turner, Jessica Cruz, James Randall

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NAMI California is, above all else, a team. A forceful, passionate team made of families, members, affiliates, and partners throughout the state who are leading the change on mental illness. Now, why should you join team NAMI California? Because you believe in equality, diversity, changing the stigma of mental illness and creating a more united California. In a time of fractured public discourse and information bubbles, we have the power to educate, empower and advocate when we come together as one collective voice, one unwavering team.
With the support of Senator Holly Mitchell and Senator Jim Beall a resolution was passed to honor BeBe Moore Campbell Mental Health Minority Month. Harold Turner and Nancy Carter from NAMI Urban Los Angeles were on the floor to accept the resolution.

MENTAL HEALTH SERVICES ACT (MHSA) REPORT

In August 2019, we completed the MHSA Report for 2019 and which documents information for all local Mental Health agencies. The report serves as a great resource both for navigating services and advocating for increased funding.
We are so proud of the way our 2019 Conference turned out. Thank you all for your leadership in helping us to make it our best yet. We were able to not only celebrate 40 impactful years in California, but also continue to make strides as the leading state voice for individuals living with mental illness and their families.

This year, we were proud to be joined (in what we believe is the first ever nationwide) by the Governor of California, Gavin Newsom, who addressed us to help open the conference. This was a huge moment for NAMI in California and indeed the Nation.

Governor Newsom reinforced his commitment to issues around Mental Illness for Californians and congratulated NAMI on 40 wonderful years serving the families of this state. A huge moment for NAMI indeed.

We were also thrilled to be joined by Dr. Tom Insel, California’s new “Mental Health Czar” and a special advisor to Governor Newsom. Dr. Insel has been a champion of Mental Health since before his time as the Director of the National Institute of Mental Health continuing up to now where he is leading the charge here in California. We are glad that he prioritized NAMI as one of the first voices he wanted to share with and hear from. He came and spoke at our president’s reception and was the last to leave. Every person who wanted to speak with him as able to, and our members really felt heard by him.

We also received video congratulations from some of our incredible partners such as Senator Holly Mitchell, our former Board President Dr. Sergio Aguilar-Gaxiola; Stephanie Welch, Director of the Council of Criminal Justice and Behavioral Health; Assembly Member Buffy Wicks; Janet Liang, President, Kaiser Foundation Health Plan, Inc. and Hospitals, Kaiser Permanente Northern California; Senator Ben Hueso; Senator Bill Monning; Carmela Coyle, President & CEO, California Hospital Association; Senator Robert Hertzberg; Assembly member Anthony Rendon, speaker of the California Assembly; Senator Anthony Portantino; Senator John Moorlach and many more!
We continue to bridge the gaps created by mental health stigma by bringing together community leaders, providers and peers from diverse communities to foster open dialogues about the successes and challenges we have experienced and sharing innovative approaches to improving the mental health of diverse populations. Our Multicultural Symposium continued to gain steam this year. Hosted by our outstanding MC and Board Member Dr. Jei Africa, the symposium explored some of the key issues facing diverse communities within the state. We were thrilled to be joined by an amazing group of speakers and panelists. Including Percy Howard, LCSW, President and CEO, California Institute of Behavioral Health Solutions; and James Garcia, PhD, Assistant Professor of Psychology, University of La Verne. Both morning and afternoon keynotes spoke about their experiences as men of color and highlighted the critical importance of understanding and respecting historical and intergenerational trauma in creating the types of healing strategies that are culturally appropriate and responsive to communities of color and other underserved communities. Bijan Amirshahi discussed the important role of storytelling in stigma reduction and helping people understand what it is like to live with mental illness. Participants also had the opportunity to attend two workshops throughout the day: Mental Health Care for Refugee and Asylum Seekers facilitated by Program for Torture Victims; Reaching Underserved People Before Stage 4 (Mental Health America); Gun Violence and Trauma: The Nexus of Mental Health Services, Policy, and Community Empowerment (Advance Peace - Stockton); and Mental Health Advocacy for Ethnic Communities and Coordination with Other Advocacy Efforts (Children’s Cause Orange County and Multi-ethnic Collaborative of Community Agencies).
2018-19
FINANCIALS

REVENUE
$2.2M

34.4%
GRANTS & CONTRACTS

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EXPENSES
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78.5%
PROGRAMS

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INCREASE IN UNRESTRICTED NET ASSETS ................................................................. $32,418
TEMPORARILY RESTRICTED ASSETS
Contributions ........................................................................................................ $3,932
Net Assets Released from Restrictions ................................................................. $0

INCREASE IN NET ASSETS ......................................................................................... $32,418
NET ASSETS, Beg of Year .......................................................... $1,802,517
NET ASSETS, End of Year ..................................................................................... $1,834,935
DONORS

Jei Africa
AFSCME Local 3299. HED
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Duncan Agnew
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Randle Akerson
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Zahir Alam
O’Albert
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Beverly Church
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Conservation Management Group
LLC
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Jessica Cruz
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Ralph Cummings
Neal Current
Jennifer Cutting
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John Dampman
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Laura Danilov
Thomas D’Asto
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Rajesh Davda
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David Davis, M.D.
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Burris DeBenning
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Chester Fitzell
Anita Fitzgerald
Winifred Fleming
Robert Foran
Dorothy Ford
Glenn Forrest
Alice Foster
The organization that we know as NAMI California is the result of the efforts of a few courageous parent leaders, many families, and thousands of individuals, friends, and professionals during the 1970s and 1980s to create an organization that would completely change the way we view mental illness. Back then, it was common to hear of parents being blamed for their child’s mental illness. There was a severe lack of services and treatment available. Families dreamed of a day when individuals with mental illness were treated no differently than people living with other chronic illnesses. NAMI California was founded out of the need for families to be able to discuss mental illness openly and have access to proper care within their communities. It started back in 1977 when nine parents came together to begin a conversation about the stigma related to mental illness. This Oakland, California group quickly started an organization that turned into a national movement to inform and educate the country about mental illness and advocate for the rights and care of family members with mental illness. NAMI California is an organization that has changed the way we think, treat, and care for mental illness forever.

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