2015 Annual Report
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In Memory of David Remington, NAMI Vermont Volunteer, Member, and Facilitator.
NAMI Vermont: Who We Are

Our Mission: NAMI Vermont supports, educates and advocates so that all communities, families, and individuals affected by mental illness can build better lives.

NAMI Vermont’s Goals/Strategic Drivers:

Build a Movement - Increase our visibility and impact
NAMI Vermont will broaden public awareness and inclusion in every part of the state.
1. Strengthen our voice as a unified organization of lived experiences
2. Strengthen affiliates to increase our reach to all parts of the state, helping them to develop and to implement publicity and outreach plans for each region.
3. Maximize our outreach to and engagement with diverse communities and underserved communities.
4. Increase awareness of NAMI Vermont’s resources, starting with the programs we already have.
5. Partner with other organizations to increase the impact of our programs statewide.

Drive Advocacy - NAMI will lead advocacy efforts that drive increased access to and quality of services.
1. Review and update our Advocacy Priorities each year
2. Continue to reflect peer and family interests and concerns
3. Identify legislation of relevance to our mission
4. Continue to partner with other advocacy organizations

Focus on Youth - NAMI Vermont will work to expand our reach across the lifespan.
1. Partner with other youth- and family-focused organizations
2. Provide educational opportunities to youth and families

Strengthen the Organization - NAMI will grow and develop financing, infrastructure and capacity that support a vibrant and bold organization.
1. Improve efficiency of operations - create systems and processes
2. Leverage technology to expand leadership and organizational capacity
   a. Expand access to education programs through technology solutions
   b. Maximize connections and support between individuals and communities through technology
Strengthen financials (budget, growth, revenue sources, investments)
   a. Develop a financial plan
   b. Identify development opportunities (grants, fundraising)
   c. Diversify our support (grow donor base)
Enhance staff and volunteer capacity and capabilities across the organization.
   a. Maximize opportunities for training for staff and volunteers
   b. Increase numbers of involved volunteers
   c. Increase capacity of staffing at NAMI Vermont office

NAMI Vermont is a statewide volunteer organization comprised of family members, friends, and individuals living with a mental health condition. We have a common experience, including victories and struggles, and have joined together in membership to help ourselves and others by providing support, information, education and advocacy about mental health issues.

NAMI Vermont began as a spontaneous, grassroots family movement in 1983 (six years after NAMI National was founded). NAMI Vermont was incorporated as a non-profit 501(c)(3) state organization affiliated with NAMI in 1984.

Our Valuable Programs and Services in the last year: Family-to-Family classes; Provider Education classes; Mental Illness and Recovery workshops; Family Support Group meetings; Connection Recovery Support Group meetings; Information & Referral; Advocacy in the Legislature and at statewide and local events; Outreach and Public Education; Support telephone line; NAMI Smarts on Advocacy; NAMI Resource Guidebook
NAMI VERMONT STAFF

Laurie Emerson, Executive Director
lemerson@namivt.org

Jana Beagley, Development Director
jbeagley@namivt.org

Tavid Bingham, Communications Coordinator
tbingham@namivt.org

Carla Vecchione, Program Director
cvecchione@namivt.org

Adam Davis, Office Manager
adavis@namivt.org
We offer are deepest gratitude to the many volunteers, supporters, members, sponsors, friends, and partners who have helped us to carry out our mission of providing Support, Education, and Advocacy.

VOLUNTEERS

Our Volunteers at NAMI Vermont are essential to the success of our operations. We offer our deepest gratitude to these wonderful individuals who give of their time and expertise to ensure we continue to offer Support, Education, and Advocacy for people living with mental health conditions, their families and their friends. It is with special thanks that we recognize the following people who served in FY2015:

BOARD OF DIRECTORS

| Paul Blake, Waterbury Center                      | Ruth Kennedy Grant, M.D., Waltham                  |
| Katharine Crane, Belmont                          | Clare Munat, Emerita, Londonderry                  |
| Ann Cooper Cummins, President and Chair, Jamaica   | Candace Neary, 2nd Vice President, Belmont         |
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CONNECTION RECOVERY SUPPORT GROUP FACILITATORS

| Barbara Austin, Bridgewater (Trainer)               | Sara Neller, Rutland                               |
| Greg DeCell, Bridgewater (Trainer)                  | Keith Rickerby, Middlebury                         |
| Jude Demers, Burlington (Trainer)                   | Jacqueline Robertson, Burlington                  |
| Maria Grindle, Burlington (Trainer)                 | Diana Slade, Springfield                           |
| Barbara Baker, Bennington                           | Thelma Stoudt, Rutland                             |
| Crystal Bluto, Grand Isle                           | Sheila Tracy, Pittsford                            |
| Karen Burns, Rutland                                | David Turner, Burlington                           |
| Gary Farrow, St. Johnsbury                          | Linda Walsh, St. Johnsbury                         |
| Katie Gauthier, Burlington                          | Sue West, Colchester                               |
| Sarah Gordon, Poultney                              | Jeremy York, Concord                               |
| Andrea Kolbe, Bennington                            | Certified to Facilitate: Mitzi Wilson, Robert      |
| Clare Munat, Londonderry                            | Weggler, Carolyn Brusetti                         |
### FAMILY SUPPORT GROUP FACILITATORS

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<tr>
<td>Ann Cooper Cummins, Jamaica</td>
<td>Donna Laferriere, Lyndonville</td>
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<td>Janice Sabett, South Burlington</td>
<td>Fran Levine, Montpelier</td>
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<td>Marcia Bassett, North Chittenden</td>
<td>Louise Lynch, Essex Junction</td>
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<td>Roberta Downey, Montpelier</td>
<td>Clare Munat, Londonderry</td>
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<td>Virginia Heger, Jamaica</td>
<td>Carolyn Salminen, Milton</td>
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<td>Rose Hewes, S. Royalton</td>
<td>Karlo Salminen, Milton</td>
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<td>Jim Johnson, Essex Junction</td>
<td>Chip Siler, Brattleboro</td>
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<td>Pat Johnson, Essex Junction</td>
<td>Judy Siler, Brattleboro</td>
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<td>Betty Keller, M.D., St. Johnsbury</td>
<td>Kathleen Turnbaugh, Moretown</td>
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### FAMILY-TO-FAMILY TEACHERS

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<tr>
<td>Sarah Chamberlain, Shelburne</td>
<td>Sharon Haas, Burlington</td>
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<td>Connie Stabler, South Burlington</td>
<td>Rose Hewes, S. Royalton</td>
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<td>Judy Siler, Brattleboro</td>
<td>Elinor Katz, Jamaica</td>
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<td>Marcia Bassett, North Chittenden</td>
<td>Jeanne Kennedy, South Burlington</td>
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<td>Michelle BosLun, Bellows Falls</td>
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<td>Ron BosLun, Bellows Falls</td>
<td>Clare Munat, Londonderry</td>
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<td>Mary Cliver, Brandon</td>
<td>Candace Neary, Belmont</td>
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<td>Erika Couture, Colchester</td>
<td>Victoria Senni, Brattleboro</td>
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<td>Ann Cooper Cummins, Jamaica</td>
<td>Chip Siler, Brattleboro (mentee/resource)</td>
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<td>Karen Festa, Rutland</td>
<td>Ellen Vaut, South Burlington</td>
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<td>Ruth Kennedy Grant, M.D., Waltham</td>
<td>Goldie Watson, Northfield</td>
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### MENTAL ILLNESS AND RECOVERY TEACHERS

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<tr>
<td>Sarah Chamberlain</td>
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<td>Ron BosLun, Bellows Falls</td>
<td>Janice Sabett, S. Burlington</td>
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<td>Kelly Chabot, Colchester</td>
<td>Doris Sage, Shelburne</td>
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<td>Mary Cliver, Brandon</td>
<td>Mary Kay Sigda, Brattleboro</td>
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<td>Paige Corologos, Burlington</td>
<td>Chip Siler, Brattleboro</td>
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<td>Jude Demers, Burlington</td>
<td>Judy Siler, Brattleboro</td>
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<td>Ruth Kennedy Grant, M.D., Waltham</td>
<td>Connie Stabler, S. Burlington</td>
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<td>Georgia Hadley, Bradford</td>
<td>Certified to Teach: Laurie Emerson, Tanya Towndrow, Kendall West, Kelli Cheney</td>
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<td>Rose Hewes, S. Royalton</td>
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<td>Donna Laferriere, St. Johnsbury</td>
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### PROVIDER EDUCATION TEACHERS

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<tr>
<td>Cathy Rickerby, Middlebury</td>
<td>Joy Prior, Springfield</td>
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<td>Clare Munat, Londonderry</td>
<td>Bernie Profili, Milton</td>
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<td>Jason Coplan, Guilford</td>
<td>Keith Rickerby, Middlebury</td>
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<td>Carole Furr, Richmond</td>
<td>Janice Sabett, South Burlington</td>
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<td>Ruth Kennedy Grant, M.D., Waltham</td>
<td>Diana Slade, Springfield</td>
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<tr>
<td>Jean Henderson, Bennington</td>
<td>Certified to Teach: Goldie Watson, Sue West, Barbara Austin, Crystal Bluto, Laurie Emerson</td>
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<td>Claudette Hollenbeck, Wilmington</td>
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<td>Candace Neary, Belmont</td>
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OTHER VOLUNTEERS AND INTERNS

Lyra Anderson
Carolyn Brusetti
Richard Brusetti
Kelly Chabot

Jude Demers
Ann Moore
Keith Rickerby

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Bailey Robert, (Previous Chair)

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Jay Furr
Kendall West

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Laurie Emerson, Staff
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Carla Vecchione, Staff

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Ellen Vaut, Co-Chair
Adam Davis, Staff
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Andrea Kolbe

Lyndelle LeBruin
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Candace Neary
Bernie Profili
Cathy Rickerby
Connie Stabler
Sandra Steingard, M.D.

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Mary Kirkpatrick
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Andrea Kolbe, First Vice Chair
Carolyn Brusetti
Jude Demers
Mark Hanson

Jill McGann
Sara Neller, Board Representative
Keith Rickerby, Secretary
Diana Slade
Scott Thompson

EVENTS

ANNUAL CONFERENCE

NAMI Vermont’s Annual Conference is an opportunity for individuals living with mental illness, their family and friends, and providers to network with one another and learn about relevant and inspiring keynotes and workshops.

- Our Annual Conference, “Pathways to Wellness” was held May 19, 2015 at Lake Morey Resort in Fairlee, Vermont.
- Approximately 150 individuals attended the conference.
- Special thanks to our sponsors: Vermont Department of Mental Health, Brattleboro Retreat, Washington County Mental Health Services, the University of Vermont Medical Center, and the Queen City Police Foundation.
- There were 17 exhibitors.

Keynote Presentation:
- Dr. James Hudziak, MD, Director of the Vermont Center for Children, Youth, and Families at the University of Vermont Medical Center and Professor of Psychiatry, Medicine and Pediatrics at University of Vermont College of Medicine: “The Vermont Family Based Approach to Health Promotion and Illness Prevention in Child Psychiatry.”
- Dr. Mary Ellen Copeland, PhD, founder of the Copeland Center for Wellness and Recovery and co-owner of WRAP and Recovery Books: “Wellness Recovery Action Plan - First”
Local Workshop Presenters:

- Hillary Melton and Amos Meacham, Pathways Vermont: “Pathways Vermont: Soteria Up Close and Programs Overview”
- Debby Haskins, Center for Health and Learning: “Suicide Awareness Training”
- Sarah Squirrel, Vermont Cooperative for Practice Improvement & Innovation: “The Power of Partnership: Inspiring Value Driven Practice”
- Ed Paquin and AJ Ruben, Disability Rights Vermont: “Advanced Directives – A Legal Complement to your WRAP Plan!”
- Cindy Tabor and Matt Wolf, Vermont Federation of Families for Children’s Mental Health: “Navigating Vermont’s Children’s Mental Health and Youth in Transition Systems”
- Abby Levinsohn, Wellness Co-op; Jared Haage, Another Way; and John Morrow, Howard Center: “Personal Connections Built Through A Peer Approach to Supported Employment”

NAMIWALKS VERMONT

NAMIWalks is the largest mental health education and fundraising effort in America. NAMIWalks brings together thousands of individuals and supporters nation-wide to celebrate mental illness recovery, to honor those who have lost their lives to mental illness and to help raise funds, combat stigma and promote awareness.

- In 2014, we celebrated our 8th Anniversary of NAMIWalks Vermont.
- NAMIWalks Vermont was held on Saturday, September 27th, 2014 for the first time at Battery Park in Burlington with a new downtown Walk route.
- Nearly 300 people registered to Walk.
- NAMI Vermont raised $49,904 from 650 individual and corporate donors in support of NAMI Vermont’s programs and services.
- Four Walkers raised over $1,000 each: Kelly Deforge raised $2,961, Christine Fraioli raised $1,285, Dee & Peter Dion raised $1,125, and Erika Couture raised $1,000 even.
- Four Teams raised over $2,000 each: Families Together, Captained by Ellen Vaut, raised $5,500. Big Brother, Captained by Kelly Deforge, raised $3,873. UVM Swim and Dive, Captained by Jennifer Cournoyer, raised $3,810. And Miles to go, Captained by Ruth Kennedy Grant, raised $2,415.
- The FY2016 Walk had 210 registered Walkers, 32 Teams and over $35K in revenue as of this writing.

OUR NAMIWALKS SPONSORS

We are proud to recognize our sponsors of the NAMIWalk this year. Their contribution helps to build better lives for families and individuals in Vermont affected by mental illness.

Burlington Labs
Brattleboro Retreat
Fletcher Allen Health Care
Lamoille County Mental Health Services
NorthCountry Federal Credit Union
Northeast Kingdom Human Services, Inc
General Dynamics Employees Community Action Committee
New England Federal Credit Union
HowardCenter
Northfield Savings Bank
Fanny Allen Corporation
Kinney Drugs Foundation
Northwestern Counseling & Support Services
Rutland Mental Health Services
Vermont State Employees Credit Union
BioTek Instruments
Queen City Police Foundation
Rutland Regional Medical Center
BlueCross BlueShield of Vermont
Clara Martin Center
Counseling Service of Addison County
Dartmouth-Hitchcock Medical Center
Heritage Automotive Group
Vermont Co-operative Insurance Companies
Northeastern Vermont Regional Hospital, Inc.
### THANKS TO THOSE WALKERS WHO RAISED $500 OR MORE:

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<tr>
<th>Chip Siler</th>
<th>Ruth Kennedy Grant</th>
<th>Karlo &amp; Carolyn Salminen</th>
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<td>Janice Sabett</td>
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<td>Sandy Steingard</td>
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### DONORS

#### SPECIAL THANKS TO OUR INDIVIDUAL AND FAMILY DONORS

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<tr>
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<td>Paul Blake</td>
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<td>Miss Holly Benoit</td>
<td>Sarah Chamberlain</td>
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<td>Ms. Jackie Batala</td>
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<td>Alton Britch &amp; Shirley Britch</td>
<td>Eileen Curtis</td>
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<td>Ms. Suzanne &amp; Mr. Gordon Brown</td>
<td>Ms. Dianna Dion &amp; Mr. Peter Dion</td>
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<td>Carolyn Brusetti</td>
<td>Ms. Mary English</td>
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<td>Mr. Richard Brusetti</td>
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<td>Karen Burns</td>
<td>Dr. Jennifer M. Fauntleroy</td>
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<td>Ms. Susan Doak</td>
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<td>Ms. Pamela A. Dundon</td>
<td>Ruth Kennedy Grant</td>
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<td>John Hand</td>
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<td>Jacques Demers</td>
<td>Ms. Jane Harding Gurney</td>
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<td>Nancy Couch</td>
<td>Mr. Larry Herlacher</td>
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<td>Ms. Suzanne &amp; Mr. Gordon Brown</td>
<td>Claudette Hollenbeck</td>
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<td>Blaine Ferris</td>
<td>James Johnson &amp; Pat Johnson</td>
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<td>Beverly Frost</td>
<td>Bill Kelly</td>
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<td>Mr. Peter Furtado</td>
<td>Werner Kohnke &amp; Heidi Kohnke</td>
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<td>Jerry Goessel</td>
<td>Mr. Harry Mazer</td>
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<td>Sue Golden</td>
<td>Sandra O’Brien &amp; Daniel O’Brien</td>
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<td>Brian Goodwin &amp; Gayle Goodwin</td>
<td>Mrs. Janet Ray &amp; Mr. William Ray</td>
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<td>Mr. Stephen W. Gould</td>
<td>Janice Sabetty</td>
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<td>Ms. Barbara Hammerlind</td>
<td>Charles Siegchrist &amp; Jean Siegchrist</td>
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<td>Mrs. Joanna Lynn Harper &amp; Mr. Warren E. Harper</td>
<td>Anna Taylor Caleb</td>
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<td>Ms. Libby Harris</td>
<td>Ms. Meghan Williamson</td>
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<td>Ms. Patricia A Heather-Lea &amp; Mr. John Lea</td>
<td>Ms. Meghan Williamson</td>
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<td>Airell Jenks &amp; Ginny Jenks</td>
<td>Ms. Meghan Williamson</td>
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<td>Crystal Bluto</td>
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<td>Karen Kelley &amp; Paul Kelley</td>
<td>Sara Neller</td>
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<td>Ms. Lisa Kurchena</td>
<td>Sandra Waller</td>
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<td>Deborah LaRosa</td>
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THE FOLLOWING WERE HONORED BY MEMORIAL DONATIONS IN THEIR NAME

Jonathan Fortier
Harvey J. Golubock
Anna Greguoli
Stephen Ham-Ellis
Elinor Katz on her Bat Mitzvah
Norma Raymond and her son
Jerry Smith

SPECIAL THANKS TO OUR CORPORATE AND ORGANIZATIONAL DONORS

$5,000 DONATIONS
Lester E. Foster & Phyllis M. Foster Foundation

$1,000 DONATIONS
Fountain Fund c/o the Vermont Community Foundation
United Technologies Matching Gift Fund

OTHER DONATIONS
Goodrich Foundation
Walmart
Pathways Vermont
Williston WOTC
Vermont Center for Independent Living
Another Way
Caffry Law, PLLC
Weybridge Congregational Church
SUPPORT GROUPS

FAMILY SUPPORT GROUPS

NAMI Family Support Group meetings are a free, monthly 90-minute support group of family and friends of individuals with a mental illness where they can talk frankly about their challenges and help one another through their learned wisdom and coping strategies. Participants are encouraged to share actively in the work of the group. All meetings are facilitated by trained NAMI family members.

- NAMI Vermont offered family support groups in ten locations: Brattleboro, Burlington (2), Central Vermont, Georgia, Manchester, Rutland, South Burlington, Springfield, St. Johnsbury and White River Junction.
- Support groups are facilitated by trained, volunteer family members and meet once or twice a month for 90 minutes.
- Family Support Group Facilitators collectively contribute over 480 hours of their time.
- Annual attendance at support groups reached 737.
- For an up-to-date listing of our Family Support Group meeting schedules, please visit our website at www.namivt.org or contact the NAMI Vermont office at (800) 639-6480.

NAMI CONNECTION PEER RECOVERY SUPPORT GROUPS

NAMI Connection Peer Recovery Support Groups are a NAMI Signature program designed to offer ongoing peer support to individuals living with a mental health condition. The support groups are facilitated by trained volunteer peers who are living in recovery.

- NAMI Vermont offered support groups in: Bennington, Burlington, Rutland, St. Johnsbury, Springfield, and on the Psychiatric Units of Rutland and Brattleboro Retreat
- A new monthly support group started at Brattleboro Retreat
- Each support group is led by two trained, volunteer facilitators, scheduled to meet on a weekly basis for 90 minutes.
- Connection Peer Recovery Support Group facilitators collectively contributed over 900 hours of their time.
- Annual attendance at support groups reached nearly 1,500.
- For an up-to-date listing of our NAMI Connection Support Group meeting schedules please visit our website at www.namivt.org or contact the NAMI Vermont office at (800) 639-6480.
EDUCATION

FAMILY-TO-FAMILY

Family-to-Family is a 12-week evidence-based NAMI Signature Program that is structured to help families and friends of individuals living with a mental illness gain information, insight, understanding and empowerment. The course teaches the knowledge and skills that family members need to cope more effectively and maintain their own well-being. We offered the Family-to-Family class in:

- **Rutland** where we reached 7 individuals
- **Manchester** where we reached 12 individuals
- **Williston** where we reached 18 individuals
- **Brattleboro** where we reached 12 individuals
- **Total: 49 participants**

Testimonials from class participants:

- “Loved the sharing when we broke into small groups—confirming that we are not alone and our stories are not unique or bizarre.”
- “Communication with my partner has greatly improved—I feel safer within the lexicon and jargon of mental health.”
- “I enjoyed the mix of reading and sharing. The personal experiences of others and hearing their struggles and accomplishments was helpful and encouraging.”

PROVIDER EDUCATION

NAMI Provider Education offers 15 hours of training to professionals and providers who work directly with people experiencing mental illness. The course helps professionals realize the hardships that families and individuals experience and appreciate the courage and persistence it takes to live with and recover from mental illness. The course is taught by a trained five-member team of family members, individuals living with mental illness, and a mental health provider. We offered the Provider Education class at:

- **Bennington** where we reached 11 professionals
- **Williston** where we reached 11 professionals
- **Total: 22 participants**

Testimonials from class participants:

- “NAMI has taught me why individuals with mental illness react the way they do. Because of this I’m more aware and able to understand their reactions.”
- [As a result of participating,] “I plan on trying to be supportive to more people with mental illness. Spreading the word of NAMI for people to get involved.”
- “I anticipate being more understanding when working with my clients when they are having an episode or tough time.”

INTRODUCTION TO MENTAL ILLNESS AND RECOVERY

NAMI Vermont designed and developed the Mental Illness and Recovery one-day workshop to make it inclusive for any community member who wants to attend. Seventeen NAMI Vermont trained volunteers delivered this workshop in nine separate regions of the state:

1. **Newport** at Northeast Kingdom Human Services with 13 participants
2. **Montpelier** at Washington County Mental Health Services with 14 participants
3. **Brattleboro** at Health Care & Rehabilitation Services with 8 participants
4. Williston at Vermont Family Network with 14 participants
5. Middlebury at Counseling Services of Addison County with 10 participants
6. Manchester at Manchester Fire & Rescue with 4 participants
7. Milton at New Life Christian Fellowship with 6 participants
8. Bradford at River Bend Career & Technical Center with 3 participants
9. Bellows Falls at Chroma Technology Corporation with 4 participants

Total: 76 Participants

Testimonials from class participants:
- “I felt it gave me hope that there is help available to me for my illness.”
- “The teachers’ partnership in presenting information was nicely balanced.”
- “Good group of individuals with various perspectives. The instructors were engaged and attentive.”

NAMI SMARTS FOR ADVOCACY

NAMI Smarts for Advocacy is a hands-on advocacy training program that helps people living with mental illness, friends and family transform their passion and lived experience into skillful grassroots advocacy. Jenna Mehnert from NAMI Maine taught this program on how to tell compelling personal stories of mental health in order to voice opinions for positive mental health policies and reach out to legislators on mental health issues. We offered the NAMI Smarts training in Williston where we reached 15 participants.

Information and Referral

INFORMATION & REFERRAL

- **Resource and Referral Line:** We provide one-on-one support, information, and referral to individuals living with mental health conditions, families, friends, and providers through our toll-free number: (800) 639-6480 and our e-mail: info@namivt.org. In FY15, we responded to over 330 calls, a 32% increase over the previous year.
- **Publications:** We distribute NAMI brochures and fact sheets for peers, family members, significant others and community members about mental illness, recovery, and wellness. These publications are available at the NAMI Vermont office, support groups, classes, and on the NAMI Store website.
- **Lending Library:** We offer a free lending library for members with books, videos, and DVDs pertaining to different aspects of mental illness, recovery, and wellness.
- **Resource Guidebooks:** We distributed 1000 Resource Guidebooks at our programs and events. These guides include information about mental illness and recovery, and available mental health services, treatment options, crisis services and resources throughout Vermont.
Advocacy and Outreach

ADVOCACY

NAMI Vermont advocates for access to services, treatment, supports and research and is steadfast in its commitment to raising awareness and building a community of hope for all of those in need. Grassroots advocacy is vital to NAMI Vermont’s cause.

Our Advocacy

NAMI Vermont engages in state-level advocacy with the Vermont Legislature and state agencies to impact policy and funding for a broad range of mental health issues. Our focus is on Vermont grassroots education and personal engagement, representation at statewide policy discussions, in addition to our formal advocacy at the Statehouse. We work hard to make sure the voices of peers, family members and friends are heard by legislators and other policy-makers who make decisions concerning access to mental health treatment, rights, services and programs by testifying before the Vermont State Legislature and by serving on numerous statewide committees. These efforts are coordinated by our Executive Director, in concert with our volunteer Advocacy Committee. Our advocacy efforts include the following, and more:

- NAMI Vermont and the Advocacy Committee provided leadership to organize Mental Health Advocacy Day at the Statehouse on February 11, 2015.
  o We collaborated with 21 mental health advocacy sponsors for the event.
  o Highlights included:
    ▪ Giving testimony to the Senate Committees on: Economic Development, Housing, and General Affairs; Judiciary; and Health and Welfare.
    ▪ Giving testimony to the House Committees on: Health Care; Human Services; and Corrections and Institutions.
    ▪ Governor Shumlin signing a proclamation naming February 11, 2015 as Mental Health Advocacy Day in Vermont.
    ▪ Guest Speaker: DMH Commissioner Paul Dupre.
    ▪ Sharing Our Stories Presentation activity.
    ▪ NAMI Vermont recognized in the House chamber.

- Advocacy Committee Representation: NAMI Vermont staff, board and committee members continue to advocate and serve on various statewide committees relating to mental health and human services such as:
  o DMH Emergency Involuntary Procedures Advisory Committee;
  o DMH Transformation Council;
  o Mental Health and Substance Abuse Advisory Committee, Blueprint for Health;
  o NAMI Advocacy Committee Meeting;
  o SAMHSA Block Grant - DMH Planning Council;
  o State Program Standing Committee for Adult Mental Health;
  o State Program Standing Committee for Children and Adolescent Mental Health;
  o Team Two Advisory Committee;
  o Vermont Cooperative for Practice Improvement and Innovation (VCPI) Steering Committee and Implementation Team;
  o VCPI - Early Episode Psychosis;
  o VCPI Governance Meeting;
  o Vermont Psychiatric Care Hospital (VPCH) Advisory Committee Meeting;
  o Vermont Suicide Prevention Coalition; and
  o Wellness Workforce Coalition
Advocacy Priorities: NAMI Vermont’s 12 Advocacy Priorities help to drive and guide our Advocacy efforts throughout the year.

NAMI Vermont’s FY2016 Advocacy Priorities:

Goal: Youth and adults living with mental illness receive the right care at the right time and in the right place to experience lives of resiliency, recovery and inclusion.

1. Protect public mental health funding
   Provide stable and adequate funding for public mental health programs to meet community needs for mental health services.
   a. Provide stable and adequate funding for Medicaid and Medicare that ensures access to a full array of effective services, continuity of care and eligibility for youth and adults living with mental illness.
   b. Ensure that grantees who receive DMH grant funding support programs and services in Vermont for Vermonters

2. Ensure access to effective mental health services
   a. We need to invest in proven, cost-effective, community-based treatment and services that promote recovery.
      i. Ensure prompt access to outpatient care at the designated agencies, including drop in outpatient crisis services to alleviate ER visits
      ii. Increase access to case management services.
      iii. Increase peer run and staffed support services, (i.e., peer participation in case management).
      iv. Ensure choice of treatment options for someone experiencing a crisis which includes:
         1. Family Psychoeducation;
         2. Pathways Vermont, Soteria House for first episode psychosis and early awareness of changes in personal mental health;
         3. Open Dialogue teams for onset counseling and care in the person’s home; and
         4. Therapeutic Residences.
   b. Ensure treatment for acute level care
      i. Ensure adequate staffing and funding so that all level 1 acute care beds are available for patients when needed.
      ii. Ensure adequate staffing and funding so that all respite beds are available for hospital diversion.
      iii. Eliminate ER waits of over 24 hours for beds; adequate number of inpatient beds for all seriously mentally ill people, both voluntary and involuntary.
      iv. Continue to monitor and evaluate the wait times for treatment for involuntarily hospitalized psychiatric patients. The VT Department of Mental Health must carefully document changes since the implementation of Act 192, which is designed to shorten these wait times.
   c. Ensure inclusion of caring, supportive family members in the evaluation and treatment of individuals with serious mental illness.
   d. Encourage the creation of Advance Directives for people with brain conditions (including serious mental illnesses) to make medical decisions.

3. Help people with mental illness support themselves through meaningful work
   a. Establish policies and statewide programs that lead to competitive employment and economic self-sufficiency for people living with mental illness. (e.g., IPS supported employment, VocRehab supported employment, Ticket to Work program, Wellness Coop Supported Employment, etc.)
4. Ensure training and adequate pay for mental health professionals and providers
   a. Ensure mental health crisis training (e.g., Team Two and CIT) is provided to police officers, dispatchers, sheriffs, corrections officers, EMTs, and others who may be called to intervene in a crisis.
   b. Continue to fund ACT 80/ACT 79 (Acts relating to training for law enforcement officers interacting with persons experiencing a mental health crisis).
   c. Continue to monitor and evaluate the Six Core Strategy implementation being used in Level 1 facilities to eliminate or reduce the number of seclusion and restraints.
   d. Provide adequate and competitive compensation for mental health professionals and providers.
   e. Continue secure-safe transport and use only soft-covered restraints when necessary.
   f. Meet or exceed CMS standards for certification of each and every mental health care facility.
   g. Implement CMS-accepted corrections, qualify for reimbursement from the Centers for Medicaid & Medicare Services (CMS), reduce reliance on additional taxpayer dollars.
   h. Do no harm, respect the dignity and integrity of providers and patients, advance recovery.
   i. Assure quality and excellence in care in least-restrictive settings at all levels of mental health care.

5. Provide information to Legislators about policies that affect individuals with mental illness.
   a. Encourage lawmakers to study the information about the research demonstrating the link between marijuana use and potential damage to the brain, including development of psychosis, when considering legalization of marijuana for recreational use.
   b. Provide data and analysis at all levels of care in all mental health facilities and increase results-based accountability.

6. Promote integration of mental health, substance use and primary care services
   a. Ensure lawmakers and health care funders address the critical need for integration of physical and mental health care for better treatment, and improved overall health outcomes, for people living with mental illness.

7. Improve the mental health of children, youth and young adults
   a. Implement screening, assessment, early intervention and prevention programs (e.g., suicide prevention, mental health courts, jail diversion programs, early episode psychosis combined treatment) for children, youth, and young adults as an integral part of health care delivery systems.
   b. Provide effective home and community-based services that help children and youth succeed at home, in school, and in their communities.
   c. Identify and divert youth with serious mental health conditions from detention to appropriate community treatment.
   d. Ensure that young adults with serious mental health conditions receive coordinated, developmentally-appropriate services to support successful transitions to adulthood.

8. Meet the mental health needs of service members, veterans and their families
   a. Ensure early identification and access to community-based mental health services and supports for service members, veterans and their families.

9. Expand access to health insurance coverage
a. Promote enrollment of low-income youth, adults and families in Medicaid plans with mental health benefits that meet enrollees’ needs.
b. Engage in outreach to people affected by mental illness to help them enroll in Vermont Health Connect plans. Ensure that all health insurance exchange plans fully comply with federal and state parity requirements for mental health and substance use conditions.

10. Provide appropriate, affordable housing for people with mental illness
   a. Provide an array of affordable permanent supportive housing for people living with serious mental illness.
   b. Offer appropriate, affordable housing for those who need it.

11. Eliminate disparities in mental health care
   a. Incorporate cultural and linguistic competency standards to eliminate disparities.

12. End the inappropriate incarceration of people with mental illness
   a. Eliminate incarceration of individuals whose acts are directly related to their mental illness.
   b. Ensure incarcerated individuals have the right to quality mental health care, both while incarcerated and upon release into the community.
   c. Divert people living with serious mental illness from jail to appropriate community treatment.
   d. Eliminate solitary confinement and ensure continuous and effective mental health care, substance abuse treatment and medical care for inmates with mental illness.
   e. Ensure connection of inmates living with mental illness to housing, treatment, supports and enrollment in federal SSI/SSDI, Medicaid, Health Insurance Exchange plans and other benefits before release from custody.

OUTREACH

Outreach to every community in Vermont is an integral part of what we do. NAMI Vermont engages and informs community members, stakeholders and the general public about mental health and how NAMI Vermont can be a resource. The more Vermonters are aware of the issues facing people living with mental health conditions, the more they are able to support families and individuals. Our outreach efforts include the following, and more:

- Staff and volunteers exhibited at: Project Vision - Rutland; VA Medical Center Community Mental Health Summit; Rutland City’s 13th Annual National Night Out; School Nurse Conference; 2nd Annual Spreading Light Music Festival; Vermonts4Vermonters; A State of Mental Health; ACA American Counseling Association of VT; Wellness in Windham Health Festival; Community Health Fest - Vermont Health Connect; Out of the Darkness Suicide Prevention 5K Walk; Brain Injury Conference; Vermont State School Nurses Association Conference; UMatter Conference; UVM Mental Health Matters: Creating a Culture of Care in Higher Education; Vermonters for Health Care Freedom; Vermont State School of Nursing Association; Strolling of the Heifers; Suicide Prevention Symposium; & Vermont School Counselors Association’s Annual Conference.
- NAMI Vermont met with Designated Agencies to share information about our programs and services.
- NAMI Vermont provided staff orientations for the Vermont Psychiatric Care Hospital.
- Staff and volunteers provided public education at community events including: Community Leader Breakfast; Howard Center Advocacy Network; Advocacy education and updates at the Family-to-Family class; Presentation to the Klifa Club Luncheon; and many more.
FUNDING SOURCES

Vermont Department of Mental Health Grant
- $230,810.00 grant in support of our programs and services.

Walmart Grant
- $1,000.00 unrestricted grant

Annual Walk Income
- $43,559.68

Corporate and Individual Donations
- $19,472.47

Annual Conference Income
- $7,217.35

Membership Dues
- $3,496.01

Misc. Income
- $2,817.49

FINANCIAL SUMMARY

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Expense Summary
July 2014 through June 2015

By Class

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