Simple gestures of financial kindness can end up costing individuals who rely solely on government subsidies for their benefits. There is a solution, but many are unaware of this perk. The Achieving a Better Life Experience Act (ABLE) program is a way for those with a qualifying disability to achieve financial independence without worrying about breaching the $2,000 asset threshold. The program is a tax-free savings account that is not considered part of the assets for those who are on Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), or other qualified disabilities such as blindness or intellectual developmental disabilities.

This national program, which is in 47 states, allows any person (family and friends) or the eligible beneficiary (the disabled individual) to open and contribute to an ABLE account. California has its own version known as CalABLE.

Contributions are capped at $16,000 per year as of 2022. The income grows tax free, and the first $100,000 is not considered part of the individual’s assets. Those who are working and are not part of an employer’s qualified retirement plan can contribute an additional $12,880 as of 2021 to their CalABLE account.

To qualify, the individual must have become disabled before age 26. Proof is required through a social security award letter or qualified physician’s letter. CalABLE Executive Director Dante Allen said a bipartisan bill in Congress wants to change the age from 26 to 46. Amending the age would be of significant help to many whose mental health symptoms don’t manifest until their late twenties, early thirties.

Henry Konopka no longer stresses over the asset requirement. He opened a CalABLE account and moves his income into the savings account as needed and withdraws funds as necessary for expenses. He also contributes to the work portion of the fund. The first time Henry heard about it, he said, “It seemed too good to be true.” Until he researched the program and realized “it’s an amazing resource.”

The list of qualifying withdrawals is numerous including medical, rent, food, education, and basic needs to improve one’s life. Going to the movies, taking a vacation, enjoying a nice meal out all qualify. Ellen Cookman, a lawyer who specializes in estate planning, special needs trusts, and probate law, said, “I tell everyone to do it. I don’t see the drawback,” she said, referring to the CalABLE program.

Cookman emphasizes that it is a great way to train a child to manage their assets and provide financial security. “It is a good combination with a special needs trust.” Barbara N. opened a CalABLE account for her son and has watched him grow more independent as he manages his finances.

Luisa Perez passed away on December 30, 2021. Luisa dedicated over 50 years of her life educating the community, in particular the Latino community, about mental health. In the early 1990s, she took Family-to-Family and attended support groups but realized there was nothing in Spanish. In 1993, Luisa began her activism to have classes in Spanish. Through the years, Luisa received many awards for her hard work, including the Junior League of San Jose Crystal Bowl for outstanding volunteer work for NAMI-SCC; the Jefferson Award from KCBS Radio, TV Channel 5, and the San Francisco Chronicle; and NAMI’s National Multicultural Outreach Award. Luisa made a difference in so many lives and she will be missed by all who knew her.
When Dr. Manpreet Singh, associate professor of Psychiatry and Behavioral Sciences at Stanford University School of Medicine, talks about the future for those with bipolar disorder, she is optimistic that early intervention and prevention can change the outcome for at-risk youth.

Evidence from her clinical studies shows that family-focused psychotherapy can reduce the number of mood-disorder relapses if addressed during early childhood in families with a history of bipolar disorder.

“We do know that medicine and psychotherapy have a lifelong effect. Now we know that early intervention and prevention, as well as timely treatment, can be a major source of hope to episode prevention,” said Dr. Singh.

Bipolar disorder is a complex, serious mental illness—a mood disorder with energy levels that swing between mania and depression. Both can be severe, and depression can lead to suicide ideation.

Factors such as environmental stress, genetics, and brain inflammation all come into play. Through her work, she has discovered that the brain is “very susceptible to the environment.” This includes relationships in families.

In families with bipolar disorder history, where the environment is chaotic and parents are judgmental, hostile or overly involved, the child is likely to be diagnosed with bipolar 1 or 2, the doctor said.

“This clearly seems to have a role in brain function and development,” Dr. Singh said.

She recognized that bipolar disorder can be triggered by family trauma and struggles with resilience. She focused her work on resilience and the ability to adapt successfully to adversity, threats, and trauma.

Her research explored the cultivation of prosocial behaviors, where parents and children live in a more collaborative environment—defined as family-focused therapy.

A four-year clinical study with 150 youth points to neurocircuits that are particularly involved in emotion regulation. The work has shown with early family-focused therapy and prosocial behaviors, those most susceptible can be put on the right path, she said.

“We think that this therapy is very specific, and we have figured out a way to change the brain and the outcome,” said Dr. Singh.

To view Dr. Singh’s full NAMI presentation on YouTube, click here.
To read Dr. Singh’s entire presentation, click here.
On January 11, 2022, the Santa Clara County Board of Supervisors voted unanimously for staff to explore a coordinated response to the mental health and substance use treatment needs of county residents. **Supervisor Susan Ellenberg**, who announced the referral with **Supervisor Otto Lee**, announced at a press conference on Monday, January 10, that they want to do something about the fact that mental illness and substance abuse are contributing to a major public health crisis in Santa Clara County. Ellenberg said she is alarmed by the scope of behavioral health problems in the county, “I am certain that my colleagues will all agree the current fractured system of care is unacceptable,” Ellenberg said.

There are a number of critical issues involved: a record increase in suicides and drug overdoses; a statewide shortage in behavioral health workers, along with an inadequate number of beds in treatment facilities and the overuse of prisons as a “place of last resort” for those in need of treatment.

**Legislative Update**

By Frank Alioto

[Credit to the Steinberg Institute]

Time flies when discussing California state budgets. It seems like the last budget was just signed… and here we are, in January, already discussing Governor Newsom’s opening plans for next year and beyond. California’s economy continues to be strong, and the good news is that our California state government is forecasting another huge budget surplus. This time the surplus is forecast to be thirty-one billion dollars!

The second piece of good news is that Governor Newsom is once again proposing that generous amounts of the surplus be spent on improving and fundamentally rebuilding California’s behavioral health systems and institutions. He is especially prioritizing the needs of California’s youth, the homeless, those who identify as LGBTQ, and many disadvantaged groups in our state.

Thus far, some of his newly proposed budget highlights for next year include proposing that California become the first state to provide universal health care.

Among his many mental health initiatives, the Governor is proposing 7.5 million dollars in startup investments to get our 988 mental health crisis system up and running and six million dollars for ongoing maintenance costs for the system, followed by a 1.4 billion-dollar investment in mobile crisis systems and personnel to serve those who have called for help.

Newsom also proposes 1.5 billion dollars for “Tiny Community” temporary housing for those in need. Such communities would offer behavioral health care as well as shelter.

He is also proposing 1.7 billion dollars to bolster the State’s mental health care workforce, including social workers, psychiatric nurses, and psychiatrists.

Those are just some of the initial proposals. We will provide more information as it becomes available.

As in past years, the California budget is subject to a lot of negotiation before it is finalized, and this year will probably be no exception.

**Volunteer Spotlight: Eileen Becker**

**Eileen Becker** found NAMI when her 29-year-old son was hospitalized following a psychotic break. Eileen and her husband Paul were searching for support after learning about their son’s diagnosis. They liked the supportive setting of the Family-to-Family course where they learned about mental illness and shared experiences with other families like themselves. They found comfort knowing they were not alone.

Eileen is a retired community college and high school computer teacher and administrator. She taught MS Office classes and coordinated Career-Technical (formerly Vocational) Education in public school districts. Six months after her husband lost his battle with cancer, her son too passed away due to cancer. Even though aggressive melanoma was the cause of her son’s death, she believes paranoia caused his death, as he was afraid to seek medical attention until it was too late. Though she misses them both every day, she takes comfort in the thought that they are together and Paul is still looking out for their son.

When Eileen thought of utilizing her computer skills to volunteer for a cause close to her heart, NAMI came to mind. Eileen learned that NAMI was looking for help with their website and she reached out. She likes the challenge of learning new skills and keeping busy.

During her free time, Eileen likes to spend time with friends and her daughter who lives in New York City.
MEMBERSHIP/DONATION FORM

I would like to join:

☐ Individual ($40) ☐ Household ($60) ☐ Open Door ($5) ☐ New Membership ☐ Renewal Membership

I would like to donate:

☐ $50 ☐ $75 ☐ $100 ☐ $250 ☐ Other ________________

☐ In Honor of: ☐ In Memory of ________________

Amount Enclosed: $______________

Name: ____________________________
Address: ____________________________
City/ State__________________________ Zip Code ___________
Phone: (____)_______________ Email: __________________________

To pay online, go to www.namisantaclara.org and click on “Join NAMI.” Learn how to include NAMI-SCC in your estate plan by going to “Get Involved/ Planned Giving” on our website.

NAMI-SCC welcomes your membership. Memberships are valid for one year. Part of the membership dues enrolls you at NAMI State and NAMI National, which in turn automatically registers you as a member at all levels. Your additional donation helps ensure that we are able to maintain our office, as well as our educational programs. Your membership and donations are tax deductible. Tax ID #94-2430956

Thank You!

NAMI-Santa Clara County is proud to announce that we are a recipient of the 2021-2022 Community Grant generously provided to us by Korean American Community Foundation of San Francisco in the amount of $50,000. This grant was awarded to us to help fund our FaithNet program, a program dedicated to creating mental health friendly, stigma-free congregations in Santa Clara County.

Adult Mental Health First Aid

This 8-hour free course teaches adults how to help someone who is developing a mental health problem or experiencing a mental health crisis.

WHEN: Tue/Thu, Feb. 15/17 ~ 12:30 P.M.–4:30 P.M.
WHERE: 1075 E Santa Clara St., 2nd Floor, SJ

Mental Health First Aid for Adults Who Work w/Youth

This free training is for individuals who live or work in SCC. Contact Peggy Cho at 408-792-3916, Peggy.Cho@hhs.sccgov.org for registration (email preferred).

WHEN: Wed/Thu, Feb. 22/23 ~ 12:30 P.M.–4:30 P.M.
WHERE: (See above)