**About the Project**

*Bedlam* is a full-length feature documentary produced and directed by Dr. Kenneth Paul Rosenberg. It premiered at the 2019 Sundance Film Festival and will be released for wide distribution in April of 2020. A book from which the documentary was based was released on October 1st of this year. NAMI is highlighted in the film, is referenced on the [film’s website](http://www.bedlamfilm.com), and is quoted on the book cover jacket.

Set in Los Angeles, the film chronicles the heart-wrenching stories of people caught in a vicious circle of ineffective care, exposing the anatomy of a broken mental healthcare system. Combining candid and raw personal accounts with sweeping historical context, Bedlam shows how deep-seated shame, discrimination, and decades-long political negligence have led to what Rosenberg describes as “the single largest social catastrophe of the twentieth and twenty-first centuries.”

The film casts a bright spotlight on how psychiatric care has devolved into a “horror show” for thousands of people with mental illness who are detained, medicated, and released onto the streets with no means of recovery. There, petty crime and drug addiction land many in prison, where they are detained and medicated again, creating a tragic loop that one psychiatrist in the film points out “is the actual definition of insanity.”

Dr Rosenberg got informed consent from the individuals and their families as well as the staff portrayed in the film. While the content can be upsetting, it is accurate and done with the full permission of the people in the film. It provides viewers a glimpse into the lived experience of people with mental illness who are unable to access appropriate treatment and support services.

**About the Filmmaker**

Dr. Rosenberg is a practicing psychiatrist and a Peabody Award–winning filmmaker who has over 30 years of experience making documentaries. He is also an author of books about psychiatry and mental health, and he is also a faculty member of both Weill Cornell Medical College and New York Presbyterian Hospital. Rosenberg is also a family member of a sister who had schizophrenia.

For more information about the film, visit [http://www.bedlamfilm.com](http://www.bedlamfilm.com). An accompanying “Impact Summary” from the makers of the film is also attached.
Guidance to Field Leaders
Through first-person accounts, the film exposes the real-life struggles and injustices we have faced with candor and authenticity that reinforces the importance of the work we do each day to improve the lives of people affected by mental illness.

Like with all intense films, making a choice to watch — or not — should be done with an awareness and consideration of one’s own trauma history and for specific triggers that are likely to be in the film. These potential triggers include but are not limited to

- prison cell extractions
- people in restraints
- threatening and abusive language
- subjects in hyper mania/psychotic states
- a candid description of the filmmaker’s sister’s struggles with her illness and its harrowing impact.

Please exercise self-care and caution when reading the book, watching the film or recommending these to friends and colleagues. Watching it with the support of other NAMI or family members may help reduce the stress that can arise and offer opportunities to discuss personal experiences.

Many people have also found these depictions leave them feeling validated and less isolated in their own experiences. The system is broken, and this film can be an advocacy rallying cry to activate the need for change. NAMI’s vision of the need for earlier intervention, better quality care and avoiding criminal justice outcomes are well illustrated in the film.

As with most film and literary works, the opinions expressed by the writer/producer do not always reflect official NAMI positions.

Advocacy Opportunities Related to BEDLAM Subject Matter
Bedlam provides opportunities to highlight key issues with key stakeholders in your community and to advocate where NAMI is working to make an impact in communities across the country:

- Crisis Services: Crisis care is an essential component of an effective overall mental health service system. Crisis services offer a continuum of care and support to people experiencing a psychiatric emergency with the goal of stabilizing and engaging people in appropriate treatment. Core crisis services include: 24/7 crisis hotlines/warm lines; mobile crisis services; crisis stabilization programs; and peer support services. For example, mobile crisis teams can help people avoid the complexity of Emergency Rooms depicted in the film.
Crisis services should be augmented with psychiatric advance directives, which allow a person to state their preferences for treatment in advance of a crisis. Simply put, a well-designed crisis response system can be the difference between life and death for people experiencing a psychiatric emergency. At the federal level, the **Mental Health Block Grant** is one vehicle for funding crisis services within your community and NAMI supports increased investment in the MHBG. At the state and local level, there are also opportunities to advocate for increased funding for crisis services.

- **Housing:** The lack of safe and affordable housing is one of the most powerful barriers to recovery. When this basic need isn’t met, people cycle in and out of homelessness, jails, shelters and hospitals. At the federal level, the US Department of Housing and Urban Development (HUD) provides several housing assistance and counseling programs. NAMI encourages advocacy for funding for various HUD programs such as the **Section 811 Rental Assistance** vouchers. Additionally, at the state and local levels, there are often housing assistance programs that you can advocate for.

- **Early Intervention:** Based on the evidence-based research, early intervention and treatment for psychosis is critical. NAMI is working to ensure that more people get the help they need early. At the federal level, NAMI advocates for the continued investment in expanding early psychosis programs through the **10% set-aside of the Mental Health Block Grant program**. These funds provide important funding to states to develop and expand these programs.

- **Justice System Diversion for People with Mental Illness:** In a mental health crisis, people are more likely to encounter police than get medical help. As a result, 2 million people with mental illness are booked into jails each year. Nearly 15% of men and 30% of women booked into jails have a serious mental health condition. NAMI is a partner in **The Stepping Up Initiative**, an exciting national campaign to challenge counties to reduce the number of people with mental illness in jails. NAMI joins other national organizations calling on counties and communities nationwide to address this problem. [Click here to learn more.](#)

- **Mental Health Research and Innovation:** There is an urgent need for new medications and other treatments and services to treat the wide array of mental health conditions. Existing medications can be helpful, but they often have significant limitations; in some cases, requiring weeks to take effect, failing to relieve symptoms in a significant proportion of people or resulting in debilitating side effects. Congress must advance medical discoveries and create a regulatory framework that ensures that patients can get access to innovative therapies. At the federal level, NAMI supports increased investment in the National Institutes of Health (NIH) and actively works with NIMH to get our messages heard.