MAMI

The Nation's Voice on Mental Illness

b y Jim McNulty

High school students participating in the National Forensic League's Policy Debate in 2002-2003 will have a chance to help shape debate over the nation's mental healthcare system—even as Congress confronts the challenge. The stakes are whether another generation of Americans will be abandoned—or whether your

generation can succeed where that of the politi-

terms the fine line that exists for any person with mental illness—between recovery, stability, and dignity on the one hand, and falling through cracks on the other.

The disability that people who suffer from schizophrenia, bipolar disorder, major depression, anxiety disorders and other severe mental illnesses experience is only partly the result of illness. In many

cases, disability is exacerbated by external circumstances: extreme poverty, lack of treatment and support services, or prejudice and discrimination. Just as the federal government traditionally has led the way to protect civil rights, federal power is required to build an effective mental healthcare system that will truly uphold individual dignity.

Such a system does not now exist. The current system is greatly fragmented and lacks coordination. States and local governments his-

torically have been the major payers for services in the public sector. In the 1960s, however, the federal role increased.

Study carefully the U.S. Surgeon General's 1999 Report on Mental Health; also articles on the "Status of Mental Health Services at the Millennium" compiled by the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Studies (CMHS): www.surgeongeneral.gov and www.samhsa.gov. They offer important information and statistics. The National Institute of Mental Health (NIMH) also plays a critical role in leading the scientific research on which any system must be built. www.nimh.nih.gov. NAMI's Website at www.nami.org similarly offers much information, commentary on current events, and links to other important sites.

In 2002, states have experienced severe budget shortfalls, resulting in deep cuts in services, including Medicaid and other programs on which people with mental illnesses (among others) depend. In 2003, even sharper cuts are expected, but

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cal leaders who came of age in the 1970's tragically failed.

Do not underestimate your power to influence the public debate. As a person with bipolar disorder (manic depression), I am proud to serve as president of the National Alliance for the Mentally Ill (NAMI), with 220,000 members and 1200 state and local affiliates nationwide, and NAMI is proud to sponsor this year's national debate tournament.

I also am one of the people lucky enough to have access to the services necessary to achieve stability and recovery. This was not always the case. In 1987, when I was first diagnosed, my health insurance provided virtually no coverage for mental illness. I was forced to seek treatment from my primary doctor, who knew nothing about manic depression.

The negative consequences on my life were traumatic and extreme. I lost my job, my home and my family. But for the kindness of friends, I would have become homeless.

I mention this only to emphasize in personal

candidates for local, state and federal office have rarely talked about it.

Because of the gravity of such issues, President Bush on April 29, 2002 established a "New Freedom" Commission on Mental Health. It is scheduled to release a preliminary report soon—which is expected to acknowledge that problems with the current system are worse than imagined. Final policy recommendations won't be reported until mid-2003. They are not supposed to include proposals requiring new revenue—but they can include reforms reaching even into the private sector. They may be sweeping in their implications or only a modest start. About the same time that the commission's final report is due, the NFL's tournament finals will be held in Atlanta. For more information about the commission, see www.mentalhealthcommission.gov.

President Bush declared: "Millions of Americans are impaired at work, at school, or at home by episodes of mental illness...These illnesses affect individuals, they affect their families, and they affect our country. Our country must make a commitment...They deserve a health care system that treats their illness with the same urgency as physical illness."

In the 1970s, reform movements succeeded in deinstitutionalizing most people with severe mental illnesses, but the federal and state governments broke their promises to provide community treatment and support. The result has been a legacy of shame. Today, approximately 200,000 people with serious mental illnesses live on the streets and more than 250,000 end up in jail or prison. Every year, untreated mental illness costs our society more than \$100 billion, through lost productivity and other expenses. Even worse is the immense pain experienced by individuals and families. More than 30,000 suicides occur annually in the United States—more than the number of homicides. Almost all are the result of mental illness.

Among teenagers and young adults, suicide is the *third-leading cause of death* today. Review the U.S. Surgeon General's 1999 Call to Action to Prevent Suicide for information on that aspect of the debate topic. Consider increasing mental health services in terms of both costs and benefits, but also risks.

Lack of access to treatment or inadequate treatment can mean a ruined life, loss of individual potential, or literally death. Morally or economically, should the United States set "acceptable" levels of such risks? If so, then at what levels do they become intolerable?

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Look at your friends, your family, and everyone else in your community. No one is immune. Ignorance, stigma and lack of adequate systems for screening, evaluation and treatment mean that all their futures are at risk. Both the U.S. Surgeon General and World Health Organization (WHO) have warned that by 2020, major depression will

become the leading cause of disability globally—for both children and adults.

Ironically, we have the knowledge and tools to help people recover from mental illnesses. What we lack is the will and resources to use them.

In testifying before the New Freedom commission, NAMI outlined proposals in nine broad areas:

- · Consolidation and coordination of services at federal, state and local levels, including single providers for core services locally and set-asides for housing.
- · Assertive community treatment (ACT) to reduce psychiatric emergencies, hospitalizations, and criminalization.
- · Recovery-oriented services, with an emphasis on housing and employment.
- Empowering consumers and family members to drive education, treatment, and recovery programs.
- · Inpatient and long-term care options for persons who require them, including elimination of the discriminatory Institutes for Mental Diseases (IMD) exclusion under Medicaid.
- · Steps to engage hard-to-serve individuals in treatment and services, including involuntary treatment as a last resort, subject to due process.
- · Greater investment in the education of healthcare, criminal justice and other professionals about mental illnesses.
- · Building a professional mental health workforce committed to public service through scholarships, loan forgiveness programs, and integration of consumer and family peer counselors.
- · Development of antistigma guidelines for the news, entertainment, and advertising industries, as well as public-private partnerships to eliminate stigma, prejudice and discrimination.

We must invest now in America's future by creating comprehensive, efficient systems for treatment and support of people with mental illnesses: a system that affirms individual dignity and freedom. These values are as old as the nation's Declaration of Independence. They reflect both federal and state purposes under the U.S. Constitution and our federal system.

We are living in a time of scientific revolutions, but a political revolution is needed as well. We must fight for the mind of America and demand that elected officials at all levels build a modern mental healthcare system that will never again abandon a generation of Americans.

(Jim McNulty is President of the National Alliance for the Mentally Ill (NAMI). This year, NAMI is NFL's co-sponsor of Policy Debate.)

