



**nAMIcon**  
ELEVATING MENTAL HEALTH

## **Embracing Advocacy:**

Tools to Help You  
Succeed

NAMI's Government Relations,  
Policy and Advocacy team

# Who We Are

## Speakers



**Hannah  
Wesolowski**  
Chief Advocacy  
Officer



**Steph Pasternak**  
Director, State  
Affairs



**Kathryn Gilley**  
Senior Manager,  
State Affairs

# Why We Advocate

- **More than 1 in 5 (23.1%)** U.S. adults experience mental illness **each year**, but **HALF** will experience a mental health condition at some point in their life
- **1 in 20 (6%)** U.S. adults experience serious mental illness
- **Less than half** of adults with mental illness receive treatment
- The average delay between onset of mental illness symptoms and treatment is **11 years**
- **122 million** people live in a designated Mental Health Professional Shortage Area



# Why We Advocate (cont'd)

- Tripled since pandemic: **3 in 10** report symptoms of anxiety or depression.
- Record suicide deaths: ~**49,500** (3% increase from 2021)
- Record overdose rates: **100,000+**
- Suicide is 2<sup>nd</sup> leading cause of death among individuals between the ages of 10 and 34
- More than 12 million+ people had thoughts of suicide last year

# NAMI National's Role

Advocate with  
Congress

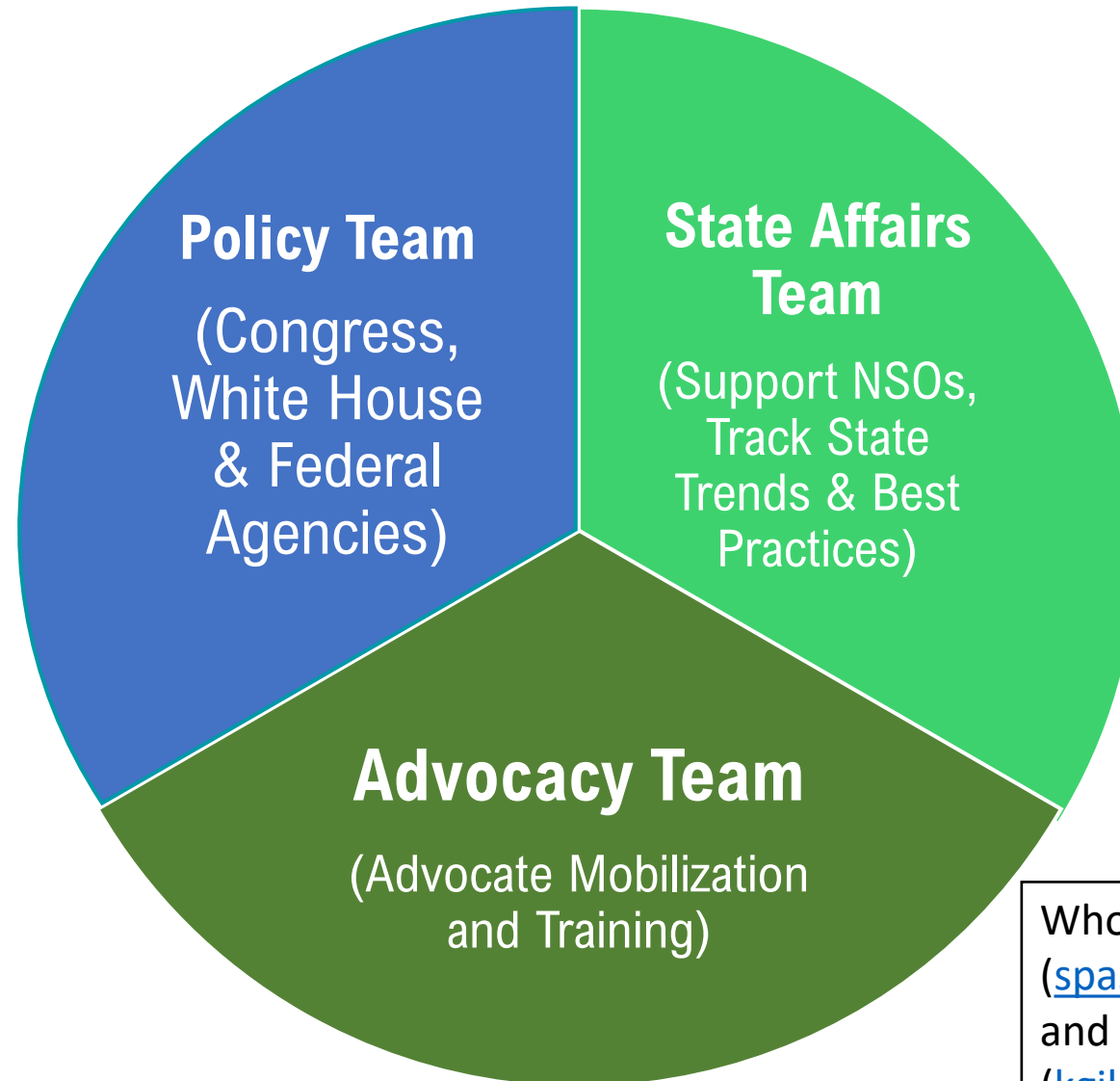
Advocate  
with the  
Administration

Support NAMI  
States' state-  
level policy  
efforts by  
providing  
expertise and  
resources

Train and  
activate  
NAMI's more  
than 120,000  
“grassroots”  
activists

# NAMI Govt. Relations, Policy & Advocacy team

## Team Structure



Who to contact? Steph  
([spasternak@nami.org](mailto:spasternak@nami.org))  
and Kathryn  
([kgilley@nami.org](mailto:kgilley@nami.org))

# Advocacy Across the Alliance

## NAMI National

- Develop public policy positions for the Alliance (with input from the field)
- Lead on all federal advocacy for the Alliance, incl. developing federal policy priorities
- Manage, train and grow advocacy network and mobilize advocates on federal issues
- Support NSONAs in their advocacy efforts

## NAMI State Orgs

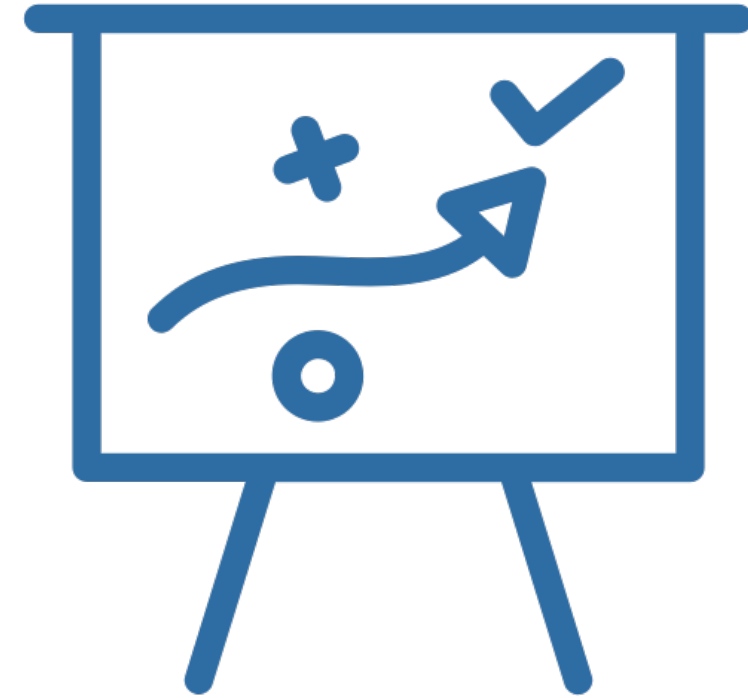
- Lead on all state advocacy efforts, incl. developing state policy priorities
- Train advocates and mobilize advocates on state issues
- Support NAMI National in advancing federal priorities

## NAMI Affiliates

- Lead on all local advocacy efforts (i.e. school board or city council or county commissioner)
- Support NAMI National and NAMI State Organization in advancing federal/state priorities

# Why Advocacy Roles Matter

- For any policy ask to be successful, policymakers need to hear a clear and consistent message
- Avoids duplication of efforts
- Supports NAMI's reputation as a leader
- Input is always welcome and appreciated across levels of NAMI
- Every level contributes to NAMI's success





# NAMI Advocacy Resources



# Policy Positions



# About NAMI's Policy Positions

- NAMI National's Board approves all policy positions
- Positions are informed by feedback from the Alliance
- The positions, once approved, apply to all levels of the Alliance
- The Alliance's actions must align with those positions
- These positions do not dictate any NSO/NAs policy priorities

## Policy Priorities

<b>Advocacy</b>	
Advocate for Change	+
<b>Policy Priorities</b>	—
Improving Health	+
Responding to Crises	+
Supporting Community Inclusion and Non-Discrimination	+
Stopping Harmful Practices	+

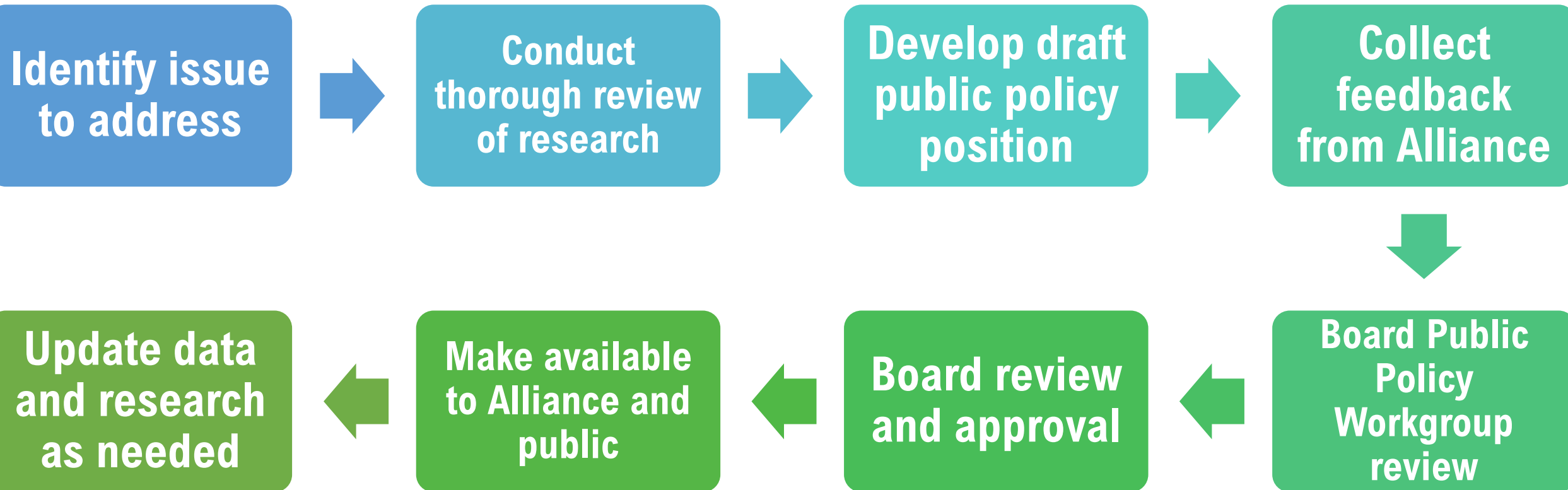
**Jump To:**

[Improving Health](#) | [Responding to Crises](#) | [Community Inclusion and Non-Discrimination](#) | [Stopping Harmful Practices](#)

Public policy impacts people with mental illness in many ways — from health care to housing to criminalization. Changes in policy can result in improved treatments, increased access to services and better outcomes for people with mental health conditions. NAMI believes that:

- All people with mental health conditions deserve accessible, affordable and comprehensive health care.
- All people with mental health conditions deserve access to supports that promote wellness.
- All people with mental health conditions who are incarcerated deserve access to quality mental health treatment.
- Public policies and practices should promote greater awareness and early identification of mental health conditions.

# How are positions developed?





# Key Policy Areas Addressed\*

## Improving Health

- Medicaid Expansion
- Medicaid: IMD Exclusion
- Medications: Step Therapy
- Mental Health Parity
- Mental Health Treatment while Incarcerated

## Responding to Crises

- Crisis Response
- Extreme Risk Protection Orders
- Psychiatric Advanced Directives

## Supporting Community Inclusion & Non-Discrimination

- Community-Based Competency Restoration
- Mental Health Inequities (LBGTI/Racial Discrimination)
- Re-entry Post Incarceration
- Social Determinants of Health: Employment

## Stopping Harmful Practices

- Conversion Therapy
- Police Use of Force
- Solitary Confinement

*\*Note: These are only a sampling of positions in each category.*

# What does it look like?

## Mental Health Parity

### Where We Stand

NAMI believes that health insurance should provide comprehensive mental health and substance use disorder coverage without arbitrary limits on treatment. NAMI supports establishment and enforcement of laws and policies that ensure parity between mental health and physical health services in all forms of insurance coverage.

- Where we stand – board position (evergreen)
- Why we care
- How we talk about it
- What we've done

#### Mental Health Parity NAMI Public Policy Position



##### Where We Stand:

NAMI believes that health insurance should provide comprehensive mental health and substance use disorder coverage without arbitrary limits on treatment. NAMI supports establishment and enforcement of laws and policies that ensure parity between mental health and physical health services in all forms of insurance coverage.

without mental health coverage for health insurance to cover coverage of mental health services. Yet, too often mental health care is excluded from medical services, leaving a stigma around seeking mental health care.

that mental health and physical health are treated at the same level as physical health conditions. State and federal laws should address discriminatory insurance practices by creating parity.

a more level playing field to treat mental and physical health conditions alike.

NAMI supports establishment and enforcement of laws and policies that ensure parity between mental health and physical health services in all forms of insurance coverage.

Still, disparities in mental health coverage remain. Some forms of insurance are allowed to place limitations on mental health coverage (for example MHPAEA does not apply to Medicare, certain state Medicaid programs, Veterans Administration or short-term limited duration health plans). The federal laws do not require parity in reimbursement rates and consequently, results in barriers to access as people cannot find in-network mental health care providers. Enforcing mental health parity is complex partly because a patchwork of federal and state entities are responsible for enforcement and the onus is largely on consumers to file individual claims of discrimination. NAMI strongly supports efforts to address these issues and achieve mental health parity in all forms of health coverage.

In 1996, the Mental Health Parity Act (MHPA) was the first federal law to create parity standards, but only for annual and lifetime dollar limits. In 2008, Congress passed the Mental Health Parity and Addiction Equity Act (MHPAEA) requiring comprehensive standards for equitable coverage of mental health and substance use disorder treatment and coverage of medical/surgical treatment. The 2010 Affordable Care Act (ACA) further expanded the reach of the parity laws by requiring most health plans cover mental health and substance use disorder care and expanding the scope of MHPAEA to reach most small group and individual markets. Additionally, states have enacted parity legislation to expand protections and/or improve compliance and enforcement of the federal laws. These efforts have helped create

To learn more about NAMI's work on this issue, visit [www.nami.org/Advocacy/Policy-Priorities](http://www.nami.org/Advocacy/Policy-Priorities)

# Action Alerts





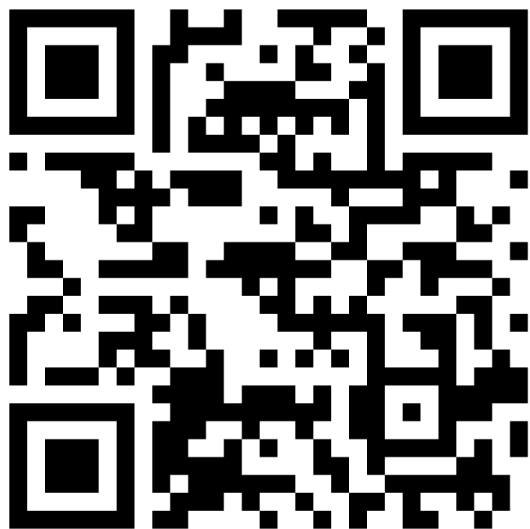
NAMI's Action Center, found at:  
[nami.org/takeaction](https://nami.org/takeaction)

NAMI champions mental  
health for all

Act Now



# Sign Up for NAMI's Action Alerts



Sign Up For NAMI Advocacy Alerts

Help people with mental illness  
**access the care they need.**



## Urge Congress to Help Grow the Mental Health Workforce

Across the country, more people than ever are seeking mental health care, yet there is an extreme shortage of mental health providers to meet the demand. Far too many people can't find the support they need or have to travel great distances to do so.

Over 160 million Americans, nearly half of the country, live somewhere with a shortage of mental health professionals. Experts estimate that by 2025, there will be a shortage of over 250,000 mental health professionals, including psychiatrists, mental health and social workers, clinical and school psychologists, and school counselors.

That's why our policymakers need to hear from you.

There's legislation in Congress right now that can help us reverse this trend. The Mental Health Professionals Workforce Shortage Loan Repayment Act would:

- Repay up to \$250,000 in eligible student loan repayment for mental health professionals who work in mental health professional shortage areas; and
- Repay one-sixth of the individual's eligible loans for each year of service.

Urge your members of Congress to support this legislation so people seeking mental health care can more easily find the help they need in their communities.

## Act Now!

NAMI champions better care and better lives for the millions of Americans affected by mental health conditions. Join our movement!

Please choose your street address from the drop-down as it auto-populates in the Google-generated toolbar. Only include apartment, condo, or building numbers in the section below your street address.

First Name \*

Last Name \*

Email \*

Address \*

Apartment, condo, or building numbers (optional)

Phone Number

By providing your mobile phone number you consent to receive recurring text messages from our organization. Message & Data Rates May Apply. Text HELP for Info. Text STOP to opt out. No purchase necessary.

 Sign-up

# Your Voice Makes a Difference

There is no health care  
without **mental health care.**



## Mental Health Services Deserve Equitable Coverage

In July, the Biden Administration proposed new rules to advance parity — the basic idea that mental health condition and substance use disorder care are covered at the same level of care for physical health conditions. Now, the public has a chance to comment on the proposal. The number of comments matters, so we need your help.

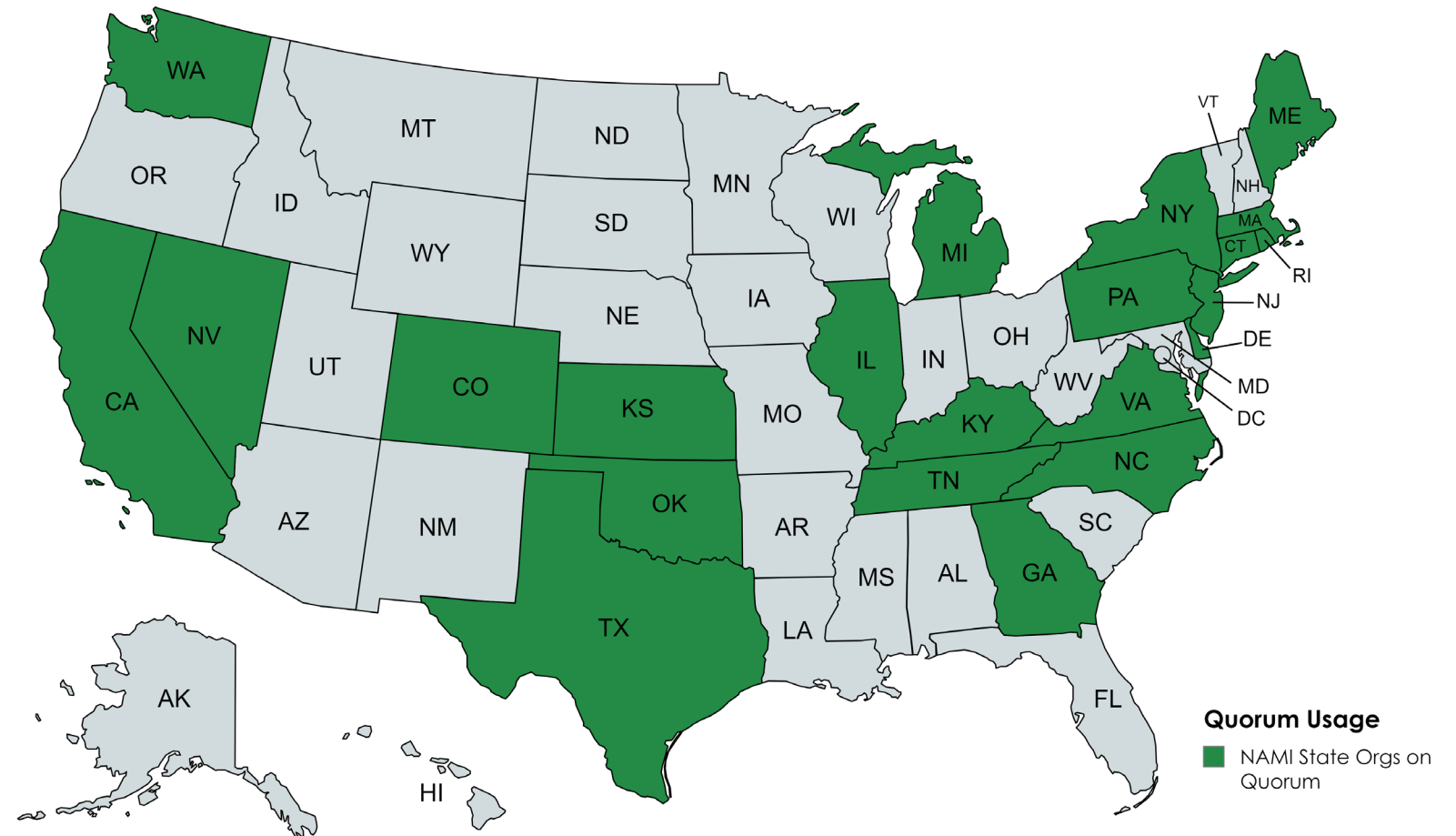
Please help us tell the federal government how important it is to ensure equal treatment of mental health and substance use disorder (MH/SUD) care by insurance plans by submitting a comment on proposed updates to the enforcement rules.

We have provided a template for you to submit. If you have a story to share, consider adding a few sentences that describe challenges you experienced accessing MH/SUD treatment. Examples might include:

- You called the list of providers in your health insurance plan's network and none were accepting new patients.
- You had to wait a long time for an appointment or travel a long distance to receive care.
- You had to seek care out-of-network and experienced financial hardship.
- Your provider shared they can't afford to take insurance because reimbursement (the amount your insurance pays) is too low.

## NAMI Leads Grassroots Effort to Strengthen Mental Health Parity (Oct 2023 Example)

- Of the approximately 9,400 public comments submitted to the federal govt., **over 5,000 — nearly 60 percent of the total — were submitted by NAMI advocates** in support of the proposal.



22 NAMI State Organizations utilize Quorum

# Quorum

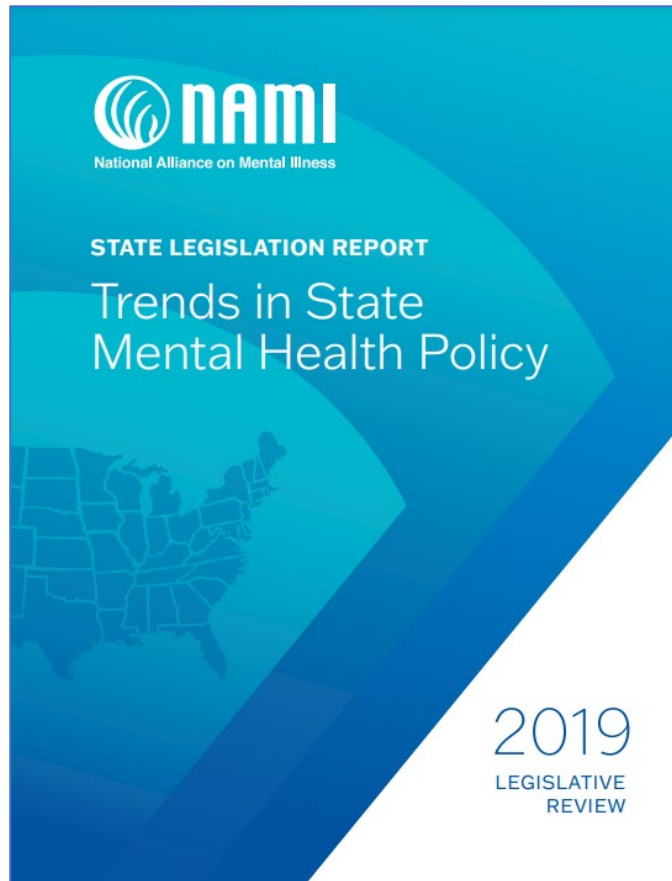


# Publications, Toolkits & Technical Assistance

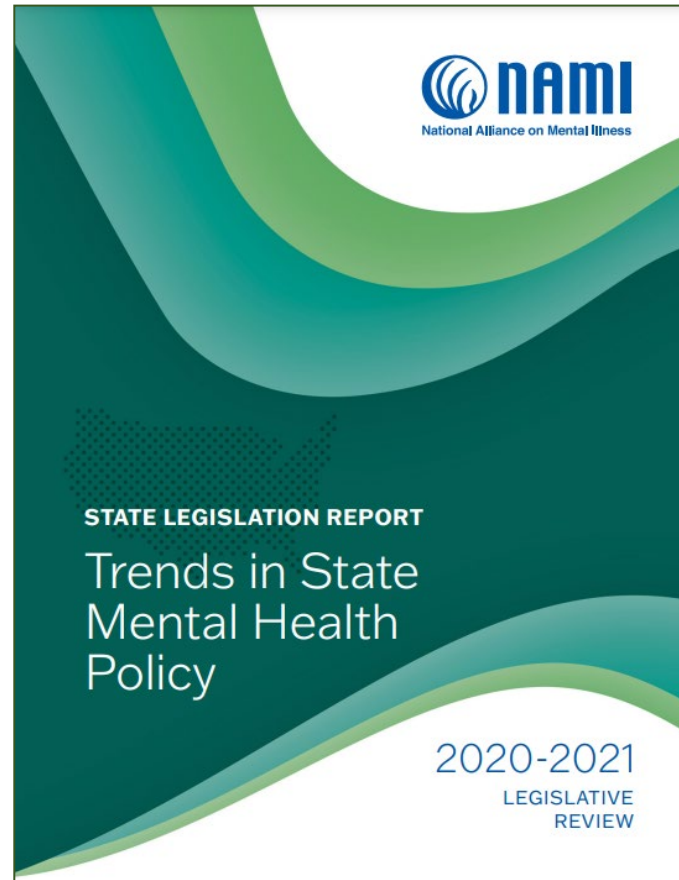




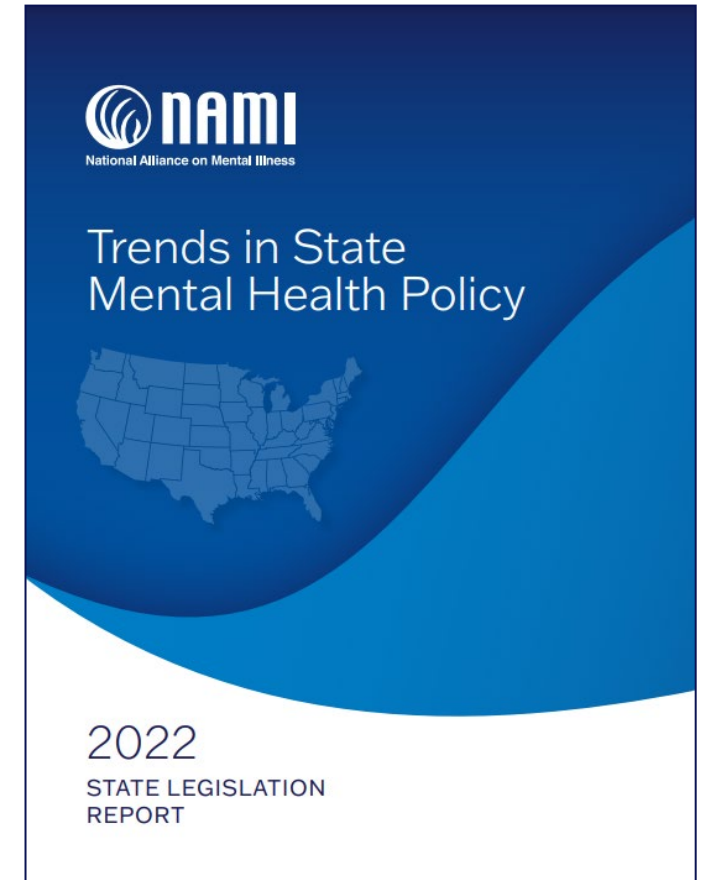
# NAMI State Legislation Reports



• [View](#)



• [View](#)



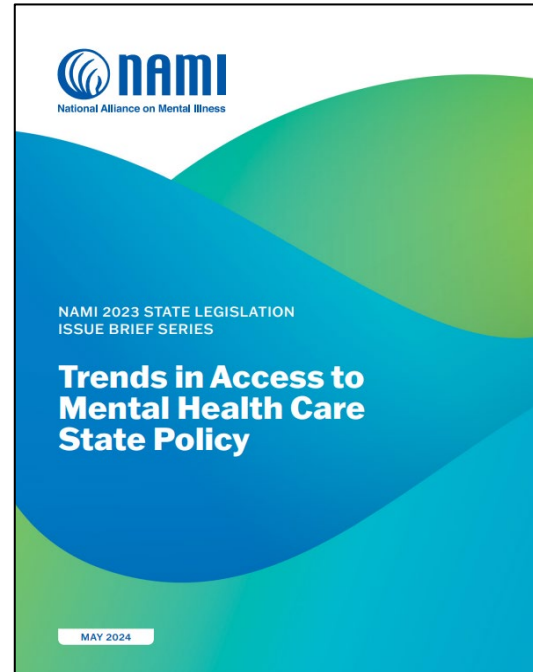
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# NAMI State Legislation Issue Brief Series

March – Criminal Justice



May 23 – Access to Care



July – 988 and Crisis Care

Coming soon!

September – Youth

Coming soon!

# Top State Policy Trends

- Focusing on youth mental health
- Improving access to care (including medication)
- Implementing 988 and crisis response
- Addressing the workforce

# Other State Policy Resources

## Toolkits

[988 State Advocacy](#)

[LGBTQ+ Mental Health](#)

## Additional Reports

[NAMI/HARP report on Medicaid Reentry Policies](#)

 **ISSUE BRIEF**  
**Paving the Path to Healthier Reentry:**  
How New Medicaid Policies Can Improve Mental Health and Substance Use Support as People Return to Communities

**Authors:** Margot Cronin-Furman, Vikki Wachino, Kari Pedersen, Silicia Lomax, & John Sawyer

October 2023

**HARP**  
THE HEALTH AND REENTRY PROJECT

 **nami**  
National Alliance on Mental Illness



# Technical Assistance

Our team is always available to help NAMI State Orgs and Affiliates with policy/advocacy questions. Common questions we receive:

1. Where does NAMI stand on [issue]?
2. What are other states doing about [issue]?
3. Can you review this bill or request from partner org and recommend if we should engage or not?
4. Do you have data on [issue]?
5. I'm meeting with my Member of Congress soon. What should I say?

**How do I reach out?** Email Kathryn ([kgilley@nami.org](mailto:kgilley@nami.org)) and Steph ([spasternak@nami.org](mailto:spasternak@nami.org))

# Advocacy Trainings



# NAMI Smarts for Advocacy

NAMI's advocacy skill-building training helps advocates use their lived experience to advocate for policy changes.

NAMI Smarts helps advocates:

Write their  
story for  
advocacy

Understand  
how a bill  
becomes a law

Contact their  
policymakers

Meet with  
policymakers

Reimagine  
crisis response

Advocate for  
accessible  
treatments

File parity  
complaints

Advocate for  
budget  
funding

# Seven Steps for Telling Your Story for Advocacy

**Introduce yourself**

**What happened?**

**What helped/would have helped?**

**How are you different today?**

**What is the need or problem?**

**What will help others?**

**Make your ask!**



# NAMI Smarts for Advocacy

NAMI National hosts several virtual teacher trainings each year to help expand NAMI Smarts capacity. NSOs can nominate leaders to become teachers.

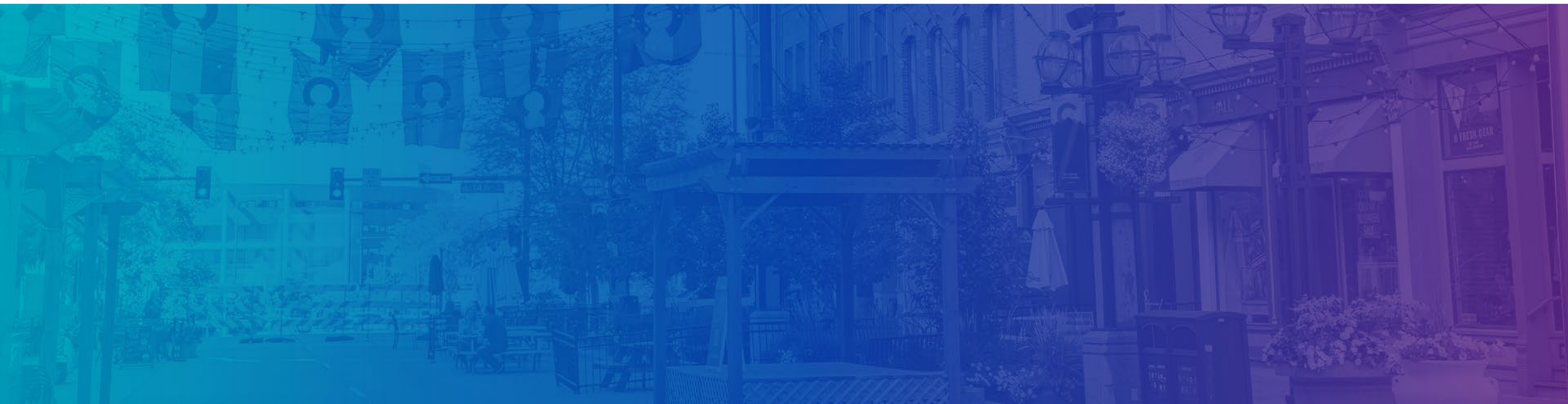
- Teacher trainings are highly recommended for new NAMI State Organization policy/advocacy staff, Public Policy Committee members and Affiliate leaders interested in advocacy.

**Save the Date:**

Our next teacher training tentatively scheduled for October 18, 2024

Questions? [smarts@nami.org](mailto:smarts@nami.org)

# Advocacy Campaigns



# #Vote4MentalHealth 2024

Elections matter for people with mental health conditions and their families. Every voter can make an impact by understanding:

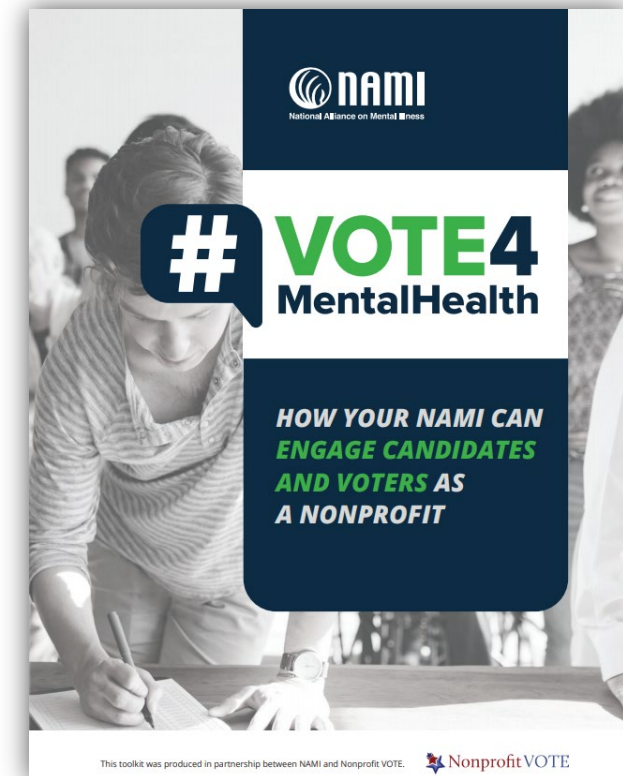
- The influence of policy issues & elected officials
- How to engage with candidates
- The different ways to cast a ballot in their state
- How to get involved

#Vote4MentalHealth is nonpartisan—the NAMI Alliance will never tell people what party or candidate to vote for. Find resources at: [vote4mentalhealth.org](https://vote4mentalhealth.org)



# Elections Rules & Information

- Elections toolkit, developed in partnership with Nonprofit VOTE
- Reminder emails exploring dos & don'ts of engaging as a nonprofit
- Resources for responsibly executing candidate forums or candidate questionnaires
- Regular information on voting options and how to vote safely
- Webinar(s) for field leaders and ongoing technical assistance
- Questions? [elections@nami.org](mailto:elections@nami.org)





# Be a #Vote4MentalHealth All-Star

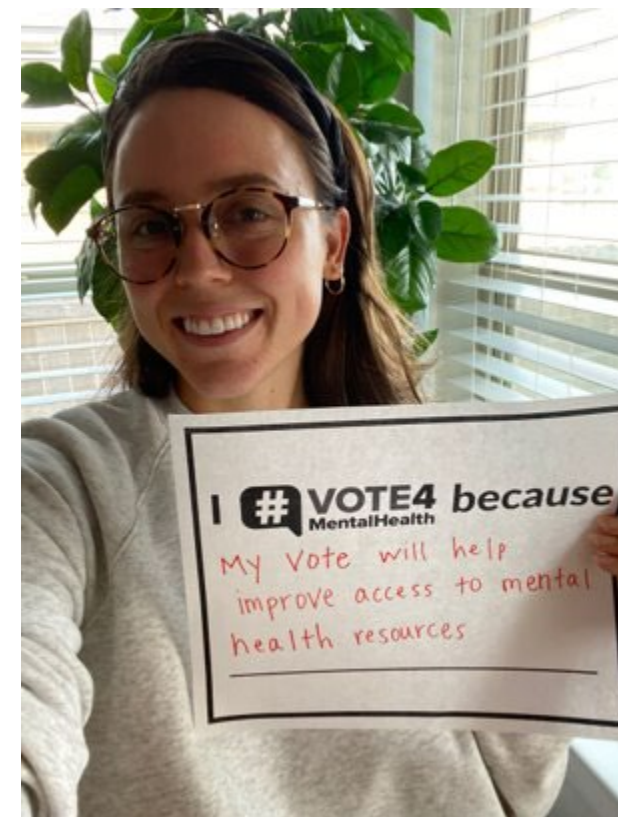
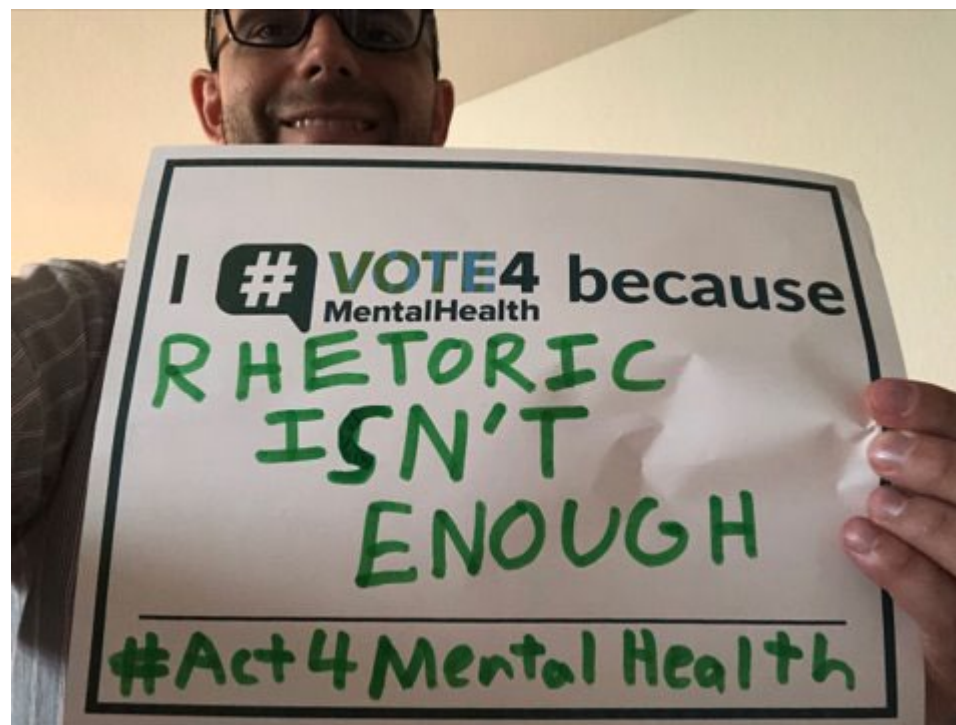
The #Vote4MentalHealth All-Stars program wants to recognize NAMI Organizations for the important work they are doing to make mental health a key issue in the 2024 elections.

Your NAMI can become a #Vote4MentalHealth All-Star by completing at least five listed activities before Election Day.

Get started: [vote4mentalhealth.org/allstars/](https://vote4mentalhealth.org/allstars/)



# #Vote4MentalHealth



**REIMAGINE**

*Crisis Response*



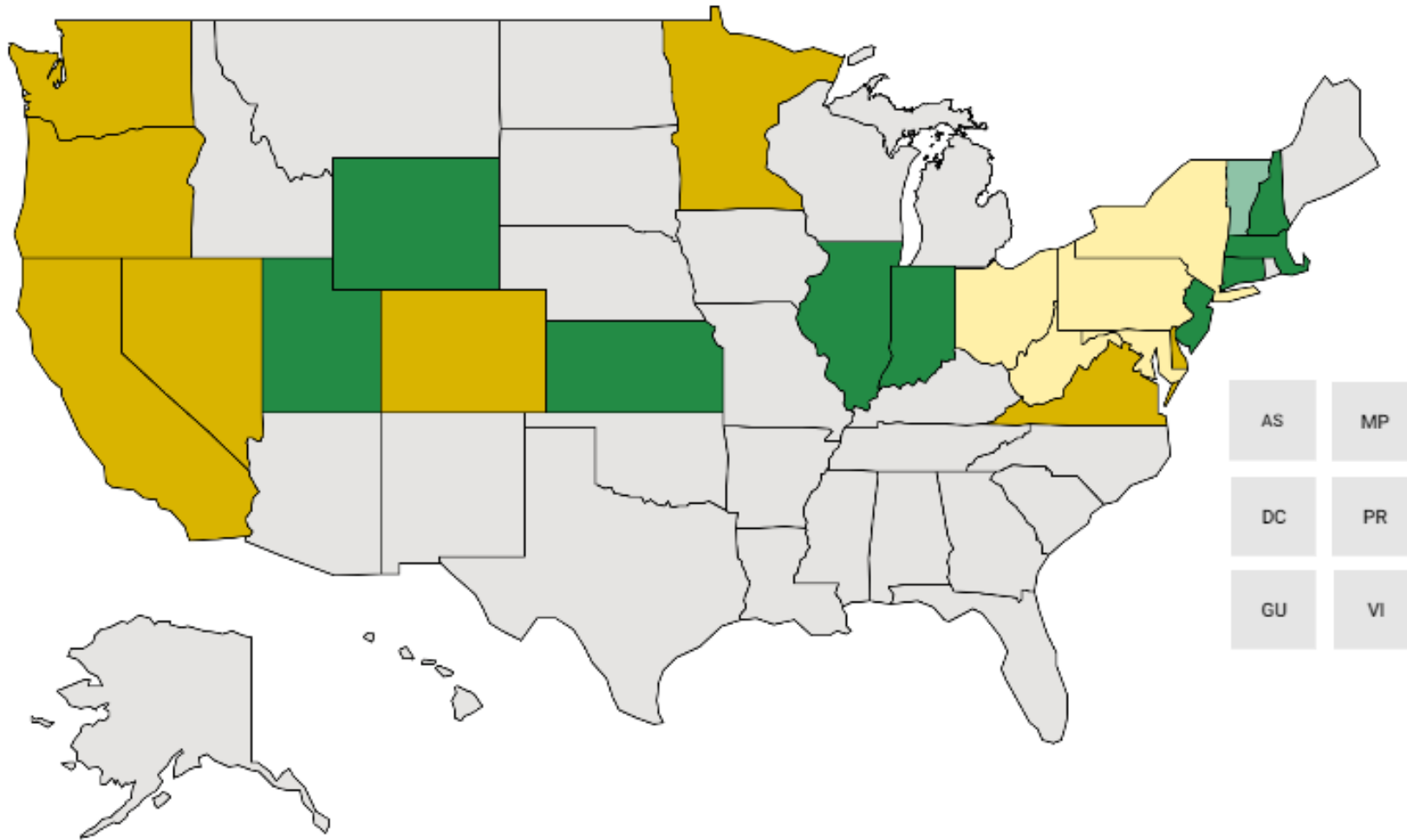
# REIMAGINE Campaign

## *Crisis Response*

- Week of Action (2021), Day of Action (2022), Partner Summit (2023)
- 53 multi-sector partners
- Successful push for **5x** 988 funding in 2023
- Recognized **17** congressional champion awardees
- Congressional briefings on 988
- Convener:
  - Weekly/biweekly federal and state calls, partner calls and **monthly state advocate calls** (*sign up by emailing Steph at [spasternak@nami.org](mailto:spasternak@nami.org)*)



# NAMI 988 State Legislation Tracker



- 8 states have 988 fees on all phone lines, monthly
- States are working to develop full crisis continuums of care

[reimaginecrisis.org/map](https://reimaginecrisis.org/map)

● Comprehensive 988 implementation legislation enacted ● Comprehensive 988 implementation legislation pending

● No 988 legislation pending ● Partial 988 implementation legislation enacted ● Partial 988 implementation legislation pending

# REIMAGINE

*Crisis Response*

# Campaign

**988 has been available nationwide for more than one year.**  
Research shows that we must continue to reimagine mental health crisis response.



*Only 22%*

of Americans are familiar with  
the 988 Suicide & Crisis Lifeline

**1 in 2**

Americans say funding 988 should be a  
high or the highest priority for Congress

This NAMI/Ipsos poll was conducted October 27-29, 2023, by Ipsos using the probability-based KnowledgePanel®. This poll is based on a nationally representative probability sample of 2,048 general population adults age 18 or older. The survey has a margin of error of ± 2.3 percentage points.

# REIMAGINE *Crisis Response* Campaign



Learn more: [nami.org/summer2023poll](https://nami.org/summer2023poll) Most Americans agree that people experiencing a mental health crisis deserve a mental health response, not a police response. Let's [#ReimagineCrisis](#) to ensure everyone in crisis gets help, not handcuffs

**Piedmont Tri-County  
NEW NAMI Poll on 988 & Crisis  
Response Released Today**

Today, NAMI released its latest public opinion poll on 988 and crisis response.

Eighty-two percent of Americans are NOT familiar with 988, and most people do not know basic details about what to expect if they were to contact 988. Two in five people report they don't know what to do if someone they love is suicidal or experiencing a mental health crisis – the exact situations that 988 is meant to

familiarity with what 988 offers help seekers remains low.

- **Only 17% of people** say they are very or somewhat familiar with 988 as a resource for people in crisis.
- **About 2 in 5 people** say they don't know what to do if someone they love is experiencing a mental health crisis or thinking about suicide.
- **85% of people** say they want a mental health response to someone experiencing a mental health or suicide crisis, not a police response.
- **Black (56%) and Hispanic (57%) Americans** are more likely than **White (39%) Americans** to agree that they would not feel safe calling 911 for a loved one having a mental health crisis.
- A majority of Americans say mental health care overall (62%) and the 988 Suicide & Crisis Lifeline specifically (50%) should be a high or the highest priority for funding in Congress.
- **84%** support state funding of 988 Suicide & Crisis Lifeline call center operations and crisis response services.

**NAMI MENTAL HEALTH 101:**  
<https://nampiedmont.org>

In this presentation, we explore mental wellness and valuable resources NAMI offers to the community. We discuss strategies for maintaining mental wellness, recognizing warning signs of mental health disorders, and simple coping strategies.

We cover the importance of seeking help when needed, including crisis response teams and crisis numbers/text lines.

The class will also address the topics of maintaining recovery and finding support. While this session sets the foundation for the

This presentation aims to change attitudes, assumptions, and ideas about individuals with mental health conditions. Leaders who have personal experience with mental health diagnoses will share their stories, dispelling stereotypes and misconceptions.

Through this presentation, we hope to convey to our audience that people with mental health conditions have lives enriched by hopes,



**NAMI New Hampshire @NAMI\_NH · Nov 29, 2023**  
NAMI NH's Susan Stearns met with Nick Valenti from the Office of [@SenatorShaheen](#) today to discuss how we can [#ReimagineCrisis](#) so everyone has someone to talk to, someone to respond and somewhere to go when they contact 988. [#Act4MentalHealth](#)





# Upcoming Resources





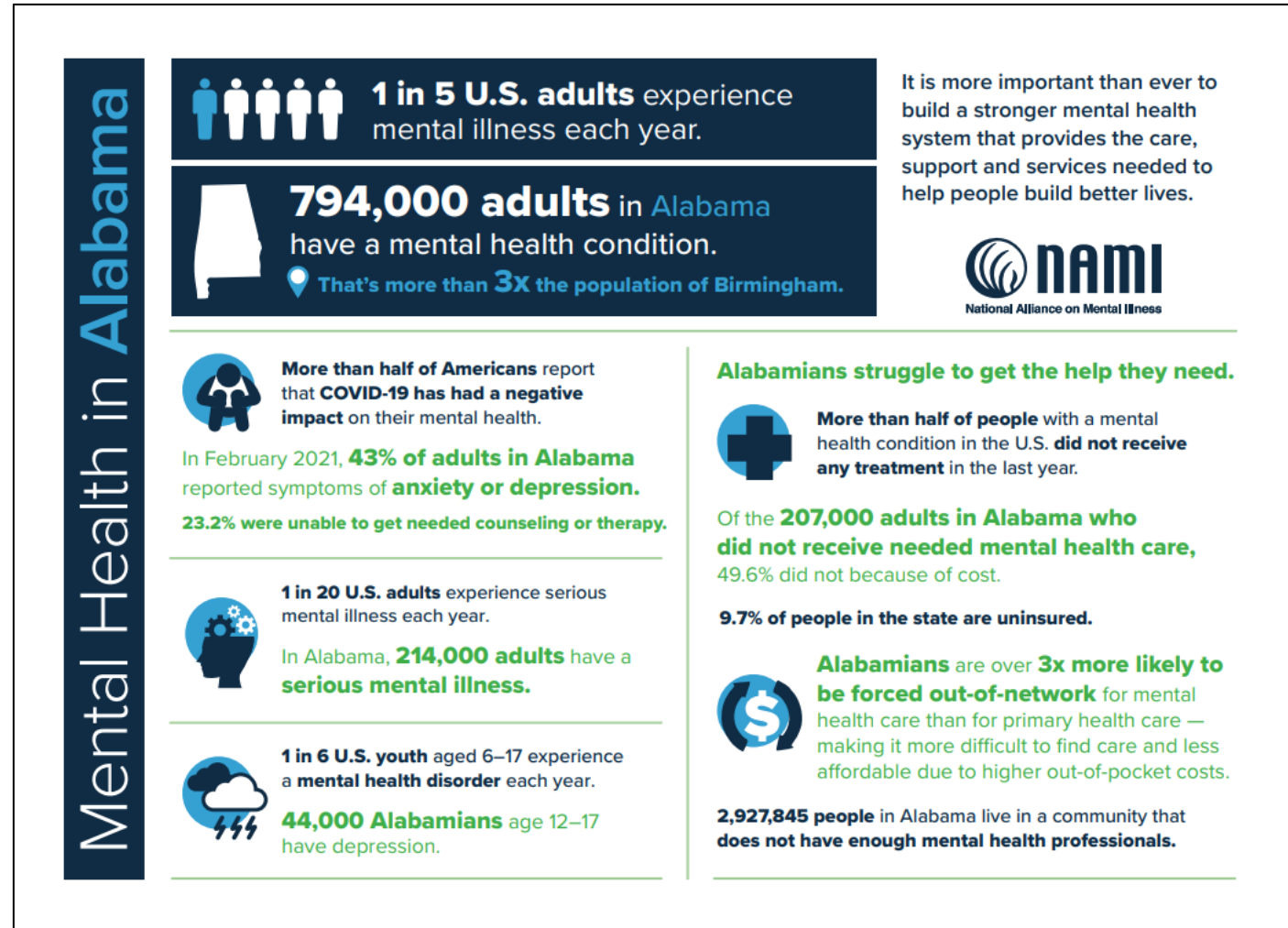
# Upcoming Resources

- **More State Policy Trackers/Maps**
  - Mental Health Education Requirements
  - Workforce Diversity
- **Launch of Policy Update Communication – ETA late Spring/Summer**
  - Email [spasternak@nami.org](mailto:spasternak@nami.org) if you'd like to be in the first group to receive this communication
- **Expanded Overlooked campaign**
- **Updated State Fact Sheets (see next slide)**

# NAMI State Facts Sheets

## Questions for State Orgs and Affiliates:

- Have these Fact Sheets been helpful and how?
- What would you like to see in an updated Fact Sheet?



Found at: <https://www.nami.org/advocacy/state-fact-sheets/>



# THANK YOU!

## Contact Us:

- Steph Pasternak: [spasternak@nami.org](mailto:spasternak@nami.org)
- Kathryn Gilley: [kgilley@nami.org](mailto:kgilley@nami.org)
- Hannah Wesolowski: [hwesolowski@nami.org](mailto:hwesolowski@nami.org)

