National Alliance of Mental Illness

Challenge:
On August 11, 2009 hundreds of people crowded into a high school gymnasium in Portsmouth, NH for one of President Obama’s national town hall meetings on health care. During the question and answer period, the president took a question from high school teacher Linda Becher. Becher softly asked what the president believed the impact on society would be if everyone had access to good mental health care.

The president answered, "Mental health has always been undervalued in the health insurance market. And what we now know is…that somebody who has severe depression has a more debilitating and dangerous illness than somebody who's got a broken leg. But a broken leg, nobody argues that's covered. Severe depression, unfortunately, oftentimes isn't even under existing insurance policies…I've been a strong believer in mental health parity, recognizing that those are serious illnesses…and I would like to see a mental health component as part of a package that people are covered under our plan.”

Although the president clarified his commitment to providing mental health coverage, several important questions arose regarding how this component of the national health care plan would be administered, if adopted. How do citizens engage in a productive discussion that will shape the infrastructure of a new mental health care system regarding this extremely broad topic that presents many tough moral questions?

Solution:
The Institute for Civic Discourse and Democracy (ICDD) and Rick Cagan, executive director for the National Alliance of Mental Illness (NAMI), collaborated to address that very question. In the fall of 2007, Cagan approached ICDD and asked for their help to create a deliberation and discussion guidebook. The ICDD team of graduate and undergraduate researchers, the project coordinator Erika Mason-Imbody, and Cagan, worked to create this guidebook that would lead a moderator to facilitate non-partisan discussions on mental health care. In addition, to gain a deeper understanding of the participant’s perspectives, the team held a framing session for mental health consumers, family members, an attorney, and a physician.

After conducting research and holding the framing session, The ICDD research team chose three approaches to frame a public discussion on mental health care: 1) "consumers come first", 2) "public responsibility", and 3) "treatment over criminalization". Each approach details specific issues to address and critique. The first approach covers the issue of mental health consumers and the right to make their own choices regarding health care. The second approach asks participants to discuss whether the public is responsible for making decisions regarding administering mental health care when a consumer is unable to or refuses to acquire treatment. The third approach requires participants to consider the tough issue of treating and/or incarcerating criminals with mental illness.

Results:
The guidebook facilitated a forum held in Manhattan, KS in January 2008 where the public was invited to contribute their ideas, share their concerns, and pose their questions. The participants of this forum included the director and several staff members of Pawnee Mental Health Services in Manhattan, advocates and supporters for mental health care, consumers of mental health care and family members.

Since its creation, the guidebook has created new avenues for public participation by facilitating public discussion on mental health care in both a local forum and NAMI conference. According to Rick Cagan, Executive Director of the National Alliance on Mental Illness in Kansas, “…we had a very healthy and engaged discussion, and I believe that people left the event with greater sensitivity to the complexity of the issues…” ICDD’s creation of the guidebook has widened the community of facilitators thereby creating more constructive dialogue in the participating communities and strengthening community networks. These factors all contribute to a more informed and inclusive decision-making process to affect real change.