Reducing Barriers - Consumer and Family Perspectives
WHO/WHAT IS NAMI?

NAMI, the National Alliance on Mental Illness, is the nation’s largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness.

What started as a small group of families gathered around a kitchen table in 1979 has blossomed into the nation's leading voice on mental health. Today, we are an alliance of more than 600 local Affiliates and 48 State Organizations who work in your community to raise awareness and provide support and education that was not previously available to those in need.
WHAT WE DO

LISTEN
100,000+
PHONECALLS

EDUCATE
1000+
COMMUNITIES

ADVOCATE
POLICY IN ALL
50
STATES

LEAD
5+
PUBLIC
EVENTS
WHY DISCUSS MENTAL ILLNESS?

**Facts About Mental Health Advocacy:**
Mental illness does not discriminate; not by party affiliation, sex/sexual identification, race, religion socioeconomic status or location (urban, suburban or rural), which means mental healthcare is a non-partisan issue.

**60 MILLION PEOPLE**
WHY DISCUSS MENTAL ILLNESS?

1 in 5 Americans are affected by mental illness in a given year.

60 MILLION PEOPLE
WHY DISCUSS MENTAL ILLNESS?

Myths & Facts About Mental Health:

Myth: Mental illnesses are brought on by a weakness of character.

Fact: Mental illnesses are a product of the interaction of biological, psychological, and social factors. Research has shown genetic and biological factors are associated with mental illnesses, substance use disorders and suicide.
WHAT IS STIGMA?

Stigma is a mark of disgrace that sets a person apart. When a person is labelled by their illness they are seen as part of a stereotyped group.

75% of people with mental health conditions have experienced stigma.

STIGMA is the leading barrier to early diagnoses and treatment that leads to better outcomes.
Why Discuss Mental Illness?

Facts About Mental Health Advocacy:
As advocates, we fight for increased mental health resources such as financial, legislative, behavioral healthcare professionals, community resources, etc., but if we don’t eliminate the stigma, the people in need of behavioral health treatment simply will not seek it!
WHY DISCUSS MENTAL ILLNESS?

50% of all lifetime cases of mental illness begin by age 14.

75% of all lifetime cases of mental illness begin by age 24.
of U.S. youth (ages 6-17) experienced a mental health disorder in 2018.

20% of people with anxiety disorder seek treatment.

59% of students report being harassed or bullied online.

74% of students identified as being stressed to the point of being unable to cope.

17% of high school students seriously considered suicide in the last year.
of youth in juvenile justice systems have at least one mental health condition.

of youth in the juvenile justice system live with a serious mental illness.

of state and federal prisoners have a diagnosed mental illness.

of local jail prisoners have a recent history with a mental health condition.

of adults in the U.S. with a mental health condition received mental health services in the past year.
WHY DISCUSS MENTAL ILLNESS?

- 60% of U.S. counties do not have a single practicing psychiatrist
- 19% of U.S. adults with mental illness also experienced a substance use disorder in 2018 (9.2 million individuals)
- 41% of Veteran’s Health Administration patients have a diagnosed mental illness or substance use disorder
- Is the average delay between onset of mental illness symptoms and treatment 11 years
- 90% of people who die by suicide had shown symptoms of a mental health condition
WHY DISCUSS MENTAL ILLNESS?

AFRICAN AMERICANS AND HISPANIC AMERICANS

- Use mental health services at about ONE-HALF the rate of Caucasian Americans in the past year.

- 20% of homeless adults staying in shelters live with serious mental illness.

- Serious mental illness costs America $193.2 billion in lost earnings per year.

- 46% live with severe mental illness and/or substance use disorders.

$193 billion
CRITICAL ISSUES FACING MULTICULTURAL COMMUNITIES

- Less access to treatment
- Less likely to receive treatment
- Lower rates of health insurance
- Poorer quality of care
- Higher levels of stigma
- Racism, bias, homophobia, or discrimination in treatment settings
- Culturally insensitive healthcare system
WHY DISCUSS MENTAL ILLNESS?

Suicide

2nd

Leading cause of death for young people between 10-34.
WHY DISCUSS MENTAL ILLNESS?

Suicide

10th

Leading cause of death overall in the United States.
48,344 people died by suicide in 2018; up from 47,173 in 2017 and up by 35% since 1999. There are more than twice as many suicides in the United States as there were homicides (19,510).
Prior to the COVID-19 pandemic, the U.S. systems addressing mental health services were already in crisis due to demand and insufficient services. Amidst the COVID-19 pandemic, we are now facing a “loneliness epidemic” exaggerated by the isolation required by COVID-19 pandemic. While the restrictions imposed by COVID-19 are preventative and necessary, they have social consequences and have created many subsequent stressors that disproportionately impact underrepresented groups within the U.S. NAMI’s document on the effects of COVID-19 related social isolation on the mental health of underrepresented communities provides insights and recommendations.

“Racism is a public health crisis!”

“While there is much we need to do to address racism in our country, we must not forget the importance of mental health as we do so.”

“The effect of racism and racial trauma on mental health is real and cannot be ignored. The disparity in access to mental health care in communities of color cannot be ignored. The inequality and lack of cultural competency in mental health treatment cannot be ignored.”

Daniel H. Gillison, Jr., CEO NAMI
The National Institute of Health, the largest public funder of biomedical research in the world spent $103 million on suicide and suicide prevention in 2017. It spent $689 million that year studying breast cancer, which killed only a few thousand more people. In 2018 spending on suicide increased to $147 million.
Every year people overcome the challenges of mental illness to do the things they enjoy. Through developing and following a treatment plan, you can dramatically reduce many of your symptoms. People with mental health conditions can and do pursue higher education, succeed in their careers, make friends and have relationships. Mental illness can slow us down, but we don't need to let it stop us.
ADVOCACY ISSUES IN MICHIGAN

REDESIGNING MICHIGAN’S PUBLIC BEHAVIORAL HEALTH SYSTEM

STATEWIDE IMPLEMENTATION OF CRISIS INTERVENTION TEAMS

ENFORCEMENT OF MENTAL HEALTH PARITY ACT (1996)

EXPANDED USE OF MENTAL HEALTH COURTS

EXPANDED USE OF KEVIN’S LAW (AOT)

FIRST EPISODE PSYCHOSIS (FEP)

SUICIDE PREVENTION