

Position Statement 61: Affiliate and National Office Participation in Policy Development and Legislative Activity

POLICY

Mental Health America (MHA) develops policy priorities and positions through its Public Policy Committee and Board of Directors, with the goal of benefiting children and adults with mental health and substance use conditions by (1) influencing federal and state legislation, regulations, and agency policies and (2) securing funding of appropriate services and research. Responsibility for achieving federal policy goals is shared by Mental Health America's National Office and the MHA affiliates. Grassroots support is an essential part of our work to ensure that Congress and the executive branch support and implement MHA's policy and advocacy positions. MHA affiliates also develop policy initiatives at the state and local levels, with the national office providing inspiration and technical assistance upon request.

Mental Health America's national office is responsible for –

- Initiating legislation and other national policy proposals;
- Presenting Mental Health America's positions to the White House, members of Congress, federal agency officials, congressional staff and committees, and federal agency staff;
- Coordinating broad efforts to influence policy proposals consistent with MHA's purposes and policies; and
- Monitoring the adoption and implementation of legislation and other national policy proposals.

Mental Health America affiliates are responsible for –

- Alerting the national office to policy needs and concerns that are not adequately addressed by MHA's existing policies and legislative positions;
- Participating in the various processes for setting national legislative priorities and lobbying at the grassroots level for MHA influence on proposed national legislation;
- Proposing development of new MHA policies and the refinement of existing policies; and
- Developing affiliate policies.

MHA is committed to harmonizing national and affiliate policy positions through collaboration, dialogue, and compromise. To ensure that Mental Health America speaks with one voice, affiliates with differing or opposing policy priorities will yield to the national office in managing national office and grassroots interactions with federal legislators and officials, with the exception of asking for federal assistance on matters of purely state or local concern.

BACKGROUND

As a national organization, Mental Health America will consider affiliate policy concerns thoroughly and carefully, particularly when they challenge an existing MHA policy position. As part of its national role and responsibilities, Mental Health America will weigh affiliate positions while also promoting policy dialogue with the broader mental health movement. MHA will make thoughtful and reasoned recommendations, informed by the affiliates and by solid research.

A relevant example is MHA's recent policy position on electro-convulsive therapy (ECT), which includes a comprehensive analysis of the current knowledge about ECT. The policy that it replaced was a cautious warning about the unknowns of ECT. The replacement policy seeks to integrate consumer concerns with a comprehensive review of the scientific literature to answer the questions that we can about this very controversial subject. Similarly, MHA's new policy against use of seclusion and restraint integrated pioneering efforts to limit their use with professional and consumer perspectives about other ways to manage behavioral care facilities.

CALL TO ACTION

Collaborate: Mental Health America will promote dialogue and collaboration with affiliates in developing policy statements and positions.

When a policy position is proposed for adoption and/or revision to the Public Policy Committee or one of its subcommittees, the first step for most policies will be, as now, to develop a draft, vetted by a subcommittee of the Public Policy Committee. Affiliates will be encouraged to send in suggestions for consideration by the committee by publication of the drafting process and the policies under review on the MHA web site. This draft will then, as now, be debated and amended by the Public Policy Committee and the Board of Directors and adopted as MHA policy.

Lobby and Educate Policymakers: Mental Health America and its affiliates will partner to effectively support or oppose relevant federal legislative and/or regulatory proposals.

It cannot be emphasized too strongly that effective lobbying by affiliates at the grassroots level all across the United States is tremendously powerful. When MHA endorses or opposes specific federal legislative or regulatory proposals, affiliates are expected to assist in lobbying members of the U.S. Congress in support of or opposition to the proposal. MHA will provide affiliates with the information they need to effectively advocate on specific federal issues. In addition to direct lobbying, MHA encourages indirect lobbying by using media outlets and other tools to educate and influence policymakers.

Communicate: Mental Health America and its affiliates will promptly exchange and report on communications with members of Congress and federal officials.

Mental Health America's effectiveness as an advocacy organization depends on communication to and from its affiliates. MHA will continue to utilize and enhance its communication tools and reports to affiliates regarding its legislative and agency contacts. Affiliate staff and volunteers will communicate in a timely manner with MHA's national office regarding their contacts and communications with members of Congress, congressional staff, congressional committees, and

federal agency officials. Affiliates will also inform the national office if they want to initiate, or have already initiated, federal legislative proposals on their own. Prompt communication is essential if we are to coordinate and strengthen our advocacy network, and effectively influence national mental health policy.

Network: Mental Health America and its affiliates will work together to build a strong legislative advocacy network.

In addition to lobbying under their own name, MHA affiliates will assist the national office by recruiting and identifying key legislative advocacy network volunteers – individuals who are not formally affiliated with MHA but who have relationships or access to members of Congress and are willing to contact them when requested. Once the advocacy "networkers" are recruited, MHA's national office coordinates further contacts and information. This national legislative advocacy network supplements the lobbying and policymaker education activities conducted by affiliates under their own name.

Respect Conflicting Positions: Mental Health America and its affiliates will respect differences of opinion on policy positions.

Mental Health America and its affiliates will respect differences of opinion on policy positions. When an affiliate does not agree with a position on a federal legislative or regulatory proposal, it will notify Mental Health America's national office and request reconsideration of MHA's position. If the national office does not subsequently alter its position and the affiliate still feels that it cannot in good conscience support the position, it can withhold its support. However, affiliates will not actively work to oppose Mental Health America's position on federal legislation or federal regulatory changes or support federal legislation that contradicts Mental Health America's national legislative agenda.

Mental Health America continues to encourage affiliates to seek assistance from federal officials, including members of the U.S. Congress, in matters of purely state or local concern and nothing in this policy is intended to discourage such activity.

Effective Period:

The Mental Health America Board of Directors approved this statement on December 7, 2008. It is reviewed as required by the Mental Health America Public Policy Committee.

Expiration: December 31, 2013