

National Alliance on Mental Illness

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The National Alliance on Mental Illness (also known as NAMI) was founded in 1979 as the National Alliance for the Mentally Ill. NAMI is a nation-wide American advocacy group, representing families and people affected by mental illness as a non-profit grass roots organization and has affiliates in every American state and in thousands of local communities in the country. NAMI's mission is to provide support, education, advocacy, and research for people and their families living with mental illness through various public education and awareness activities.

Any family can find themselves dealing with a mentally ill family member. This was the reason for the start of NAMI. Needing support in dealing with their mentally ill family members parents turned to each other for answers. The federal government started Community Support Programs (CSP) to deinstitutionalization the mental health program. During the Learning Community Conferences (LCCs) NAMI was encouraged to help with the CSP's goals to educate and support in the rehabilitation process. NAMI member not only advocated for their own children but for others. Constance Walker served 22 years in the Navy and her son Mike joined the army but became mentally ill. Walker being a member of NAMI submitted a statement to the Committee on Veterans' Affairs United States Senate about veteran mental health accessibility

Programs

NAMI provides support to those affected by mental illness and their family members by providing public education and information activities peer education and support groups, raising awareness and fighting stigma, and gaining state and federal support.

Public education and Information

NAMI Educational Programs - like Family-to-Family and Peer-to-Peer provide education to help consumers and family members attain knowledge and skills for living with.

Support Groups - are provided through many of NAMI's state and local affiliates and offer connections with peers living with mental illness.

Awareness and Stigma

NAMIWalks - is an annual event where thousands walk together in over sixty communities across the nation to raise money and awareness about mental illness.

StigmaBusters - responds to inaccurate and hurtful language and portrayals of mental illness in the media as well as promotes understanding and respect for those who live with mental illness.

In Our Own Voice - presents personal journeys of recovery by people living with mental illness.

Clearly reducing stigma will make it easier for mentally disabled individuals to seek help without fear. Researching needs to be done on how to reduce stigma.

State and Federal Support

Advocacy - provides a key voice for state and federal public and private-sector policies that facilitate research, end discrimination, reduce barriers to successful life in the community and promote comprehensive and effective mental health services.

Action Centers - advocate for unique populations and develop and disseminate information to meet specific needs. Some include the Children & Adolescent Action Center, and the Multicultural Action Center.

Assertive Community Treatment (ACT)

NAMI has advocated for the routine availability of evidence-based practices and promotes ACT. A program that assists severely mentally disabled individuals with treatment, rehabilitation and support services.

PACT: Program of Assertive Community Treatment on the other hand is a team of medical experts that are available 24 hours a day for medication and other needs of the mentally disabled individuals.

Structure

NAMI staff work on many issues involving serious mental illness, including insurance parity, affordable housing, increases in research appropriations, improved work incentives and income assistance, and access to medications. While NAMI operates at the local, state, and national level, each level of the organizations provides quality education, information, support, and advocacy for those with mental illness and their support system. Local and state affiliates work in issues that are central to their community and state while the national office provides direction for the entire organization. Individual membership and the work of volunteers are what characterize the essence of this grassroots.

Local Affiliates

NAMI has more than 1,200 affiliates in all 50 states and the District of Columbia, Puerto Rico, the Virgin Islands, and Canada. Associates begin as a small group providing support and sharing information. Individual membership is typically gained at the local level. In addition to providing support, affiliates also provide local information and referral services, conduct community education and work with local media to reduce stigma, interact with local professionals, report on local issues and needs to state representatives, and provide support, encouragement, and participation to community members.

State Organizations

NAMI has state organizations in all 50 states as well as the District of Columbia, and Puerto Rico. State organizations operate on a larger scale than local affiliates, deciding on goals and objectives within their respective states, encouraging outreach, education and membership for those with mental illness and their support system. Additionally, state organizations publish newsletters not only to educate members, professionals and the public but to foster networks. State organizations also monitor budgets of state agencies, advocate at the state level for mental health rights, and support affiliate growth and development by working with local affiliates.

National Level

The national office is led by a board of directors, and performs many roles. At the national level NAMI provides strategic direction to the entire organization, provides resources and support to NAMI's state and affiliate members, governs the NAMI corporation, and engages in advocacy, education and leadership development nationally. NAMI's advocacy efforts also extend to federal agencies and the White House.

Funding and US Senate Investigation of NAMI

The funding of NAMI by multiple pharmaceutical companies was exposed by the investigative magazine Mother Jones in 1999, including that an Eli Lilly & Company executive was then "on loan" to NAMI working out of NAMI headquarters.

NAMI receives more than half its budget from pharmaceutical companies, and because of this was accused of a conflict of interest by a prominent NAMI member, E. Fuller Torrey (in 2008), and of failing to disclose that funding when promoting the medications sold by its funders.

NAMI came under scrutiny by U.S. Senator Charles E. Grassley in April 2009. Senator Grassley's investigation of NAMI confirmed that a majority of their funding was coming from the pharmaceutical companies.

In a story written by New York Times Journalist Gardiner Harris in 2009, NAMI received over 66 percent of their funding from Pharma. Gardiner, reporting off the findings of a Senate Investigation conducted by Senator Grassley (R) of Iowa. (Harris, Gardiner. New York Times, October 21, 2009)