

# History

Coalitions on mental health and aging are not new. For example, interagency cooperation between the aging network and the public mental health system began in Michigan in 1978, and the state of Michigan established a council on mental health in 1988. AARP's Program Division convened an internal Task Force on Mental Health and Aging in 1989. Dr. Kermit Phelps chaired this effort funded by the Health Care Campaign. In 1990 this group recommended that AARP investigate the possibility of forming an national coalition. We hired a firm, the Communication Consortium to collect this information. They contacted 23 organizations to investigate the interest in forming a coalition.

The National Coalition on Mental Health & Aging was formed by a group of organizational members representing the disciplines that work in aging and mental health as a result of the first meeting held in February of 1991. With leadership from AARP, there was a strong spirit of consumer involvement and empowerment within the Coalition. Through the work of the Social Outreach and Support Section within the Programs Division, AARP agreed to initially sponsor the Coalition of two years. After two years this commitment was investigated and AARP decided to continue providing the staff and financial support to foster the ongoing work of the coalition. AARP continued to provide support until 2001, when in June of that year, the American Psychological Association (APA) became the second organizational host of the NCMHA. Since that time the APA Office on Aging has provided the Coalition with staff and in-kind financial support.

## Selected Examples of Coalition Activities

### 1991

The first meeting hosted by AARP brought together organizational representatives from aging, professional consumer family mental health and government settings. The Coalition model was seen as way to unify professionals, consumers and government representatives so that together they could work towards improving the availability and quality of mental health services to older Americans. The Coalition was organized to address the mental health service needs of older persons, through:

- advocating on behalf of appropriate mental health treatment and care for older persons;
- decreasing the prevailing stigma associated with mental and emotional problems;
- improving access to mental health services;
- drawing attention to the importance of emotional well-being, prevention and self-help programs for elders;
- educating professionals, the general public, decision-makers and older individuals on the mental health issues of our older population; and
- encouraging older persons to use the services of mental health professionals, volunteer programs and self-help programs.

Early Activities included the development of the statement of purpose and bylaws and the creation of core subcommittees: Public Education, Education of Policy Makers, State and Local Coalition Development. Early coalition activities fostered a number of joint ventures between organizations.

### 1992

Over time the potential for collaborative efforts between organizations increased, demonstrated by a number of interdisciplinary efforts between the professional organizations (i.e. social workers planning a presentation with psychiatry).

- The American Psychological Association solicited input from other member organizations in the development of a videotape. Through contacts with the Coalition, the National Mental Health Association (NIMH) was able to have their local MHA affiliates connect with many local AARP chapters linking aging and mental health representatives at the local level
- AARP Linkage project support fosters the development of an Oklahoma Coalition.
- Articles about the Coalition appear in the AARP Bulletin and in NMHA
- March 1992 Coalition cosponsors a one day pre-conference workshop on Aging and the Emerging Spirit at the American Society on Aging Conference
- April 1992 AARP internal review results in a decision to continue support of the Coalition

- May 11, 1992 a public service packet & Press Conference: To Tell the Truth
- Other workshops at NASMHPD October, 1992
- Presentation on the work of the coalition at the GSA meeting in November 1992

### **1993**

July 15, 1993: The Coalition and AARP hosted A Capitol Hill Forum: Efficacy and Effectiveness of Mental Health Services for Older Persons, presenting it to the Senate Aging Committee. Committees continued to develop special projects and cooperative presentations at member organizational conferences continues.

### **1994**

We focused on general promotion efforts and began planning for the 1995 WHCoA.

Series of audio and video public services announcements

- Educational Packet for Members and Others 4/94
- Audio and Video Spas distributed through member affiliates nationwide

### **1995**

A manual "Building State and Community Mental Health and Aging Coalitions -- A How-To Guide"

White House Conference on Aging, mini conference on Emerging Issues in Mental Health & Aging

- Published proceedings from the mini conference
- Hill briefing with release of the book

### **1996**

Convened the Forum on Managed Care, Mental Health & Aging and printed and disseminated its proceedings.

### **1998**

The Coalition Building Project was launched by the National Coalition on Mental Health and Aging, the AARP Foundation and the Center for Mental Health Services. The project trained diverse networks of elderly and mental health service providers and consumers at the state and local levels.

### **1999**

Held a Special Conference devoted to identifying existing and emerging challenges to the delivery of quality mental health care for elder persons, and to formulating recommendations and developing innovative ways to meet these challenges in the new millennium.

### **2002**

A representative of NCMHA provided testimony to the President's New Freedom Commission on Mental Health.

### **2004**

A representative of NCMHA provided testimony to the Public Policy Committee of the 2005 White House Conference on Aging (WHCoA) to encourage that mental health and substance abuse issues be considered in their deliberations and recommendations.

### **2005**

Sponsored a 2005 WHCoA Listening Session on Mental Health and Aging.

Successfully advocated for the inclusion of mental health and health workforce issues in the top 10 resolutions of the 2005 White House Conference on Aging.

### **2006**

Expanded membership to be inclusive of state and local coalitions on mental health, substance abuse and aging.

Conducted workshops on mental health and aging at the SAMHSA/CMS Invitational Conference on Medicaid and Mental Health Services and Substance Abuse Treatment.