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May 12, 2008

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Robert W. Glover, Ph.D.
Executive Director
NASMHPD

The Honorable David Obey
Chair, House Appropriations Committee
Room H-218 Capitol
Washington, DC 20515-6015

Dear Chairman Obey:

The National Association of State Mental Health Program Directors (NASMHPD) represents the \$29.5 billion public mental health service delivery systems serving 6.1 million people annually in all 50 states, four territories, and the District of Columbia. NASMHPD is the only national association to represent state mental health commissioners/directors and their agencies. In addition, NASMHPD has an affiliation with the approximately 220 state psychiatric hospitals. Our members administer and manage community-based systems of care for the millions of individuals with serious mental illness who at times require immediate access to a variety of inpatient facilities and psychiatric units in general hospitals but are often cared for successfully in the community.

An October 2006 report by NASMHPD illustrates how dire the need is for people with mental illness. This report states that persons with serious mental illness die, on average, 25 years earlier than the general population. In addition, according to the Substance Abuse and Mental Health Services Administration (SAMHSA), an estimated 17 million adults ages 18 and older (8 percent of the adult population) reported experiencing at least one major depressive episode during the past year. Finally, in the RAND Corporation's 2008 report, "Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery," researchers concluded that there needs to be a nationwide effort to expand and improve the capacity of the mental health system to provide adequate care to members of the military and veterans. RAND further reported that this effort must involve the public mental health system, as well as the military and veteran health care systems.

The Community Mental Health Services Block Grant (Block Grant)

NASMHPD recommends providing \$482.9 million for the Block Grant, which represents a \$61.9 million increase over both the FY 2008 budget and the President's FY 2009 request. The Block Grant is the principal federal discretionary program supporting community-based mental health services for adults and children. States use the flexibility of the Block Grant funding to provide a range of critical services for adults with serious mental illnesses and children with serious emotional disturbances, including employment and housing assistance, case management, school-based support services, family and parenting education, and peer support.

Programs of Regional and National Significance (PRNS)

NASMHPD recommends providing \$343.3 million for PRNS, which represents a \$44 million increase over FY 2008 and a \$188 million increase over the President's FY 2009 request. The Center for Mental Health Services (CMHS) addresses priority mental health care needs of regional and national significance by developing and applying best practices, providing training and technical assistance, building targeted capacity expansion, and changing the service delivery system through family, client-oriented and consumer-run activities.

Several important programs that will be positively affected by an increase in PRNS funding include, but are not limited to: Suicide Prevention for Children and Adolescents, Mental Health Transformation State Incentive Grants, Alternatives to Seclusion and Restraint State Infrastructure Grants, and the National Center for Trauma-Informed Care.

Programs Affecting those with Co-occurring Serious Mental Illness and Substance Abuse Disorders

The 1999 Surgeon General's Report on Mental Health reported that 10 million Americans have co-occurring disorders. There are a number of programs that help individuals with both mental health and substance abuse disorders that NASMHPD recommends funding for FY 2009. NASMHPD recommends funding for the most targeted SAMHSA co-occurring program, the Integrated Treatment for Co-Occurring Serious Mental Illness and Substance Abuse Disorders, at a level of \$4.14 million. Other NASMHPD recommendations for substance abuse programs include, but are not limited to: the Substance Abuse Prevention and Treatment Block Grant for \$1,858.7 million; the Center for Substance Abuse Prevention Programs of Regional and National Significance for \$215.06 million; and the Center for Substance Abuse Treatment Programs of Regional and National Significance for \$420 million.

Projects for Assistance in Transition from Homelessness (PATH)

NASMHPD recommends providing \$61.1 million for PATH, which represents a \$7.8 million increase over FY 2008 and a \$1.4 million increase over the President's FY 2009 request.

The PATH formula grant program provides funding to states, localities and non-profit organizations to support individuals who are homeless (or are at risk of homelessness) and have a serious mental illness and/or a co-occurring substance abuse disorder. PATH is designed to encourage the development of local solutions to the problem of homelessness and mental illness through strategies such as aggressive community outreach, case management and housing assistance. Other important core services include referral for primary care, job training and education.

National Institute of Mental Health (NIMH)

NASMHPD recommends providing \$1,498.6 million for NIMH, which represents a \$94.1 million increase over FY 2008 and a \$91.6 million increase over the President's FY 2009 request.

The mission of NIMH is to reduce the burden of mental and behavioral disorders through research on mind, brain, and behavior. NIMH is currently developing a Strategic Plan to: promote discovery in the brain and behavioral sciences to fuel research on the causes of mental disorders; determine when, where and how to intervene; develop new and better interventions that incorporate the diverse needs of people with mental disorders; and strengthen the public health impact of NIMH-supported research. NIMH must achieve the fundamental understanding of how mental disorders begin and progress, to discover new treatments, and eventually prevent and cure them.

NASMHPD also strongly supports funding of the National Institute on Alcohol Abuse and Alcoholism (NIAAA) for \$465.5 million, and the National Institute on Drug Abuse (NIDA) for \$1,067.7 million.

Thank you for your continued support for mental health initiatives. If you have any questions, please do not hesitate to contact Elizabeth Prewitt, NASMHPD's Director of Government Relations, 66 Canal Center Plaza, Suite 302, Alexandria, VA, Fax: 703-548-9517, Phone: 703-682-5196, elizabeth.prewitt@nasmhpd.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert W. Glover". The signature is fluid and cursive, with a long horizontal stroke at the end.

Robert W. Glover, Ph.D.
Executive Director