

State Advocacy

Tough Questions & Answers

Whether a person talks with a reporter, a state legislator or others, it's important to be prepared for "tough questions."

Tough questions should be answered directly-short and simple-and then used as a "bridge" to return to your own key messages.

Don't be defensive. Your tone should be positive and respectful, but firm.

Question: Who are you? Where do you live?

I'm _____. I'm from [town]. I'm here with NAMI, the National Alliance on Mental Illness.

Question: Do you live in my district?* Do you vote?

If you vote: *Yes. I live in [town] and I vote.*

If you're new to voting: *I live in [town] in your district. I haven't voted before, but I am going to vote in the next election because mental health care is important to me.*

If appropriate: *So does my [spouse, parents, son or daughter, cousins, etc.].*

**Note: It's essential in meeting with a legislator that a person or most of a group be from the legislator's district. Legislators want to know if you live in their district because, if you do, you are one of their constituents. If you are a constituent, you represent a potential future vote for them--regardless of whether you voted for them, their opponent or didn't vote at all in the last election.*

Question: Everyone is hurting. We have to be fair. What makes mental health programs so special that they shouldn't be cut?

If mental health programs are cut, then it's going to cost the state money elsewhere. Money won't be saved. That's pennywise and pound foolish.

Costs are going to be shifted to schools, police, emergency rooms, hospitals, jails and prisons. Families, neighbors and co-workers will pay a high price if people don't get the mental health care they need. And businesses will lose productivity because of absenteeism-which costs them money.

The problem isn't going to go away. And the bottom line is that lives are at stake. Children and youth will lose critical developmental years. Many people won't recover. Some people may even die.

Question: Do you understand that we have to make cuts-big cuts? If not mental health, where do you want the legislature to make those cuts? Education? Public safety? Nursing homes for the elderly?

Legislators have to make those choices. We're here to talk about how mental illness affects us and the value of mental health care. Mental health care hasn't been adequately funded in the past--and in these economic times, demand is increasing.

We have to save mental health. Treatment works. Mental health saves lives and promotes recovery. The legislature needs to make wise, careful choices. They shouldn't make choices that are penny-wise and pound foolish.

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Question: If we don't make cuts, the legislature has to raise taxes. Do you really think this is the right time to raise taxes? Are you ready to pay more in taxes?

We're asking that mental health be protected and strengthened in a time of increasing need for treatment. It's up to legislators to figure out how to accomplish that. Mental health services are a wise investment that benefits our families, our businesses and our communities. The legislature shouldn't make cuts in mental health that will only end up costing money elsewhere.

Question: What makes you think cuts will affect you personally?

We all know someone who is affected by mental illness, so cuts to mental health touch us all.

** Note: Tell a brief one to two-minute version of your personal story-or that of a family member or another person in your local group. (It's best if the person is present to tell it themselves). Make sure that the story relates to how community mental health services have contributed to recovery.*

Cuts to the mental health budget will mean that people will go without the help they need. Cuts to mental health programs can result in lost work time, poor school performance, greater family stress and burnout. When crisis services are cut, police are taken off the beat to respond to psychiatric crises when they could be protecting our communities.

Question: Doesn't mental health funding affect only a small number of people who get a lot of other public assistance anyway?

You'd be surprised:

- *One in four adults experiences a mental health problem in any given year, including our returning troops.*
- *One in seventeen adults lives with a serious mental illness like major depression, bipolar disorder, and schizophrenia, and one in ten children has a serious mental disorder.*
- *Community mental health programs provide an important safety net for the thousands with serious mental health needs who either aren't enrolled in or aren't eligible for Medicaid. If you take away mental health programs, then you aren't providing for treatment or recovery.*
- *An estimated 175,000 adults in Maryland have serious mental illnesses.*
- *As estimated 62,000 children are significantly impaired.*
- *An estimated 134,595 people with mental illness depend on state mental health services.*

Question: Let's agree that mental health care is important. Legislators still have to find savings. What are your top priorities to save?

What we want to see in the state are proven, cost-effective mental health services, especially programs that are recognized as "evidence-based practices."

Those are the ones that represent the foundation of the future. We want to protect existing funding and strengthen services by focusing on the best treatment practices.

In Maine, there's been a proposal to freeze mental health funding while looking at prioritizing the most effective and cost-efficient services through a special commission. That's one approach.

Question: Everyone has to be part of the budget solution. So what mental health programs are least needed. Which ones should be cut?

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We want to protect mental health, not weaken it. We already have shortages of mental health professionals and treatment services. Cuts to programs will weaken an already fragile system of mental health care and simply shifts costs to other public services.

Question: NAMI's last national report card said mental health is failing all across the anyway. Why should we continue to ask taxpayers to waste money on it?

A lot of progress has been made in recent years in developing "best practices" for mental health care and proven, cost-effective programs.

The problem is that most states haven't adopted them.

That's why the national average is D.

The report card measured a state's progress toward best practices. But that doesn't mean the state's existing system should be thrown out.

We need to protect mental health while strengthening it. It needs to be transformed, but cuts aren't the solution. You can't move forward if you are moving backward.

Question: A few people are always going to struggle with mental illness. How do you know all this money makes a difference?

It's not just a few.

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- *One in seventeen lives with a serious mental illness like major depression, bipolar disorder or schizophrenia.*
- *For children, one in ten are significantly impaired.*
- *An estimated 175,000 adults in Maryland have serious mental illnesses.*
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People living with mental illness and their families aren't trivial.

We know that treatment works. Different degrees of recovery are possible and as treatment and support are strengthened, the outlook gets better. That's why we want to protect and strengthen programs.

Many manage their illness successfully, but those people with the most severe conditions often end up on Medicaid or, worse, uninsured.

Mental illness doesn't discriminate. It affects men and women, the young and old and Democrats, Republicans and Independents alike. Even the families of our elected officials.