BUILDING AND MAINTAINING MENTAL HEALTH AND AGING COALITIONS AT THE STATE AND LOCAL LEVEL

December 14, 2005
Des Moines, Iowa
BUILDING AND MAINTAINING A SUCCESSFUL MENTAL HEALTH AND AGING COALITION

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THE BUILDING BLOCKS

• Who are your building blocks
  • State, County, Local and Private Mental Health Agencies
  • State, County, Local and Private Substance Abuse Agencies
  • Primary Care Physicians and Their Organizations
  • Consumers
  • Family Members
  • Higher Ed Geriatric Programs
  • State Aging Agency
  • Area Agency on Aging
  • AARP/RSVP/Silver Haired Legislators
  • Retired State Worker/Teachers Assn.
  • Retired Federal Employees Assn.
  • Ministerial Alliance/Religious Organizations
  • State and Local Governmental Officials
  • Community Mental Health Centers/Private Outpatient Providers
  • Public and Private Geriatric Assessment/Inpatient Facilities
  • Long Term Care/Adult Day Care/Assisted Living Centers
  • Professional Associations
  • Veterans Administration
  • Other Interested Individuals and Organizations
**SOME OF THE STUMBLING BLOCKS**

- What are the stumbling blocks
  - The Stigma of mental illness with older adults
  - Aging Mental Health, Substance Abuse and Gambling Addiction is too far down the list of priorities
  - Mental Health problems are considered normal for older adults
  - The Younger Mental Health and Addictive Disorder population is more mobile and visible and consume available staff time and resources
  - Other disability populations do a better job of advocating their needs
WHAT BUILDING BLOCKS CAN YOU IDENTIFIED

• WHO CAN YOU IDENTIFY AS PARTNERS YOU NEED TO ENLIST:
  • 1.
  • 2.
  • 3.
  • 4.
  • 5.
  • 6.
  • 7.
  • 8.
  • 9.
  • 10.
THE SUCCESSFUL COALITION AT WORK

- Advocates Working for a common cause
- Meetings that Feed The Needs of the Members (Professionals, Consumers and Interested Supporters)
- Continually Assessing and Reassessing Needs and Goals
- Knowing your Available Resources
- Developing Short and Long Term Goals
- Providing Education to Members and Community
- Working with State and Local Government
- Promoting Networking and Cross Referral to Maximize Use of Available Resources
- Promoting the use of and taking part in Active/Working Committees
- Promoting The Work of the National Coalition on Mental Health and Aging
MAINTAINING A COALITION

• Feed The Coalition To Make It Grow
  • Never Meet For The Sake of Meeting
  • Coalitions Can Not Be Dormant
  • Projects Keep Up Interest And Will Make Others Want To Become Involved
  • Plan Programs Well In Advance (always have a backup)
  • Provide CEUs And CMEs For Your Professionals
  • Secure Agency/Program Buy-In
  • Keep members informed through a Website, Newsletter and other mailings
PROJECTS OF SUCCESSFUL MENTAL HEALTH AND AGING COALITIONS

• Education of primary caregivers
  • Educational Seminars
  • Develop Brochures on Aging Mental Health Issues
  • Peer Organizations that share successful Treatments Programs

• Public Education
  • Public Service Announcements
  • Speakers Bureau
  • Aging Mental Health Conferences
PROJECTS OF SUCCESSFUL MENTAL HEALTH AND AGING COALITIONS

• Service Accessibility
  • Improving intake methods
    • Assist with the development of cross agency agreements to speed referrals and share basic patient information
    • Develop a Resource Directory
  • Provide Consumer to Consumer Supports
    • Develop consumer volunteers to walk the path with new consumers
    • Develop training for Peer Counseling
    • Support Consumer Involvement in the Coalition
STATES RECENTLY INVOLVED IN BUILDING OR EXPANDING MENTAL HEALTH AND AGING COALITIONS

- ALASKA
- ARKANSAS
- ARIZONA
- CALIFORNIA
- COLORADO
- FLORIDA
- GEORGIA
- ILLINOIS
- INDIANA
- IOWA
- KANSAS
- KENTUCKY
- LOUISIANA
- MARYLAND
- MASSACHUSETTS
- MISSOURI
- NEW JERSEY
- NEW MEXICO
- NORTH CAROLINA
- OHIO
- OKLAHOMA
- PENNSYLVANIA
- RHODE ISLAND
- SOUTH DAKOTA
- TENNESSEE
- TEXAS
- UTAH
- WASHINGTON
- WISCONSIN
HOW MENTAL HEALTH AND AGING COALITIONS WERE FORMED

• Alaska
  • CMHS Grant with State and Local Interest (DMH, Aging and AAA Driven)

• Arkansas
  • State and Local Interest (DMH and AAA Driven)

• Arizona
  • CMHS Grant (DMH and AAA Driven)

• California
  • CMHS Grant with Higher Ed, State and Local Interest (Higher Ed Driven) in San Francisco
  • California Mental Health Institute funding in Sacramento
  • San Diego County MH in San Diego

• Colorado
  • CMHS Grant with State and Local Interest (DMH, Aging and AAA Driven)

• Florida
  • Identified Needs through the Aging Mental Health Institute at USF

• Georgia
  • Georgia DMH funding of multi-agency partnerships in Albany, Georgia

• Illinois
  • CMHS Grant (Higher Education Driven)

• Indiana
  • State and Local Interest (DMH and AAA Driven)

• Iowa
  • Higher Education, State and Regional Interest (Added in April of 2005)

• Kansas
  • State and Local Interest (DMH and AAA Driven)

• Kentucky
  • CMHS Grant with State and Local Interest (DMH, Aging and AAA Driven)
HOW AND WHY DID THEY FORM A MENTAL HEALTH AND AGING COALITION

- Louisiana
  - CMHS GRANT State and Local Interest (DMH, Aging, Law Enforcement and AARP Driven)
- Maryland
  - CMHS Grant - Attended Training in Philadelphia in June 99, working on first meeting
- Massachusetts
  - CMHS Grant - (Higher Ed, Aging, DMH and AARP Driven)
- Missouri
  - CMHS Grant - State and Local Interest (DMH, Aging and AAA Driven)
- New Jersey
  - Attended Training in Philadelphia in June 99, first meeting set October 99
- New Mexico
  - CMHS Grant (DMH, Aging, AARP and AAA Driven)
- North Carolina
  - State and Local Interest (MH Association, Higher Ed and DMH Driven)
- OHIO
  - CMHS Grant (DMH and AAA Driven)
- Oklahoma
  - 1990 AARP Health Advocacy Services Grant (DMH, DHS Aging Services, AAA, Consumer, Private Providers and Family Driven)
- Pennsylvania
  - CMHS Grant - (Higher Ed, MH Association, Aging, DMH and AARP Driven)
HOW AND WHY DID THEY FORM A MENTAL HEALTH AND AGING COALITION

- **Rhode Island**
  - CMHS Grant (DMH Driven)
- **South Dakota**
  - CMHS Grant (DMH and DHS Aging Services Driven)
- **Tennessee**
  - Grant from the Tennessee Department of MH and DD, Mental Health Division through Centerstone CMHC in Nashville
- **Texas**
  - CMHS Grant (DMH and AARP Driven)
- **Utah**
  - CMHS Grant (DMH, Aging, AARP and AAA Driven)
- **Washington**
  - CMHS Grant (DMH, Aging, AAA and Higher Education (GEC) Driven)
- **Wisconsin**
  - CMHS Grant (DMH and Higher Education Driven (GEC))

(With nine local and/or regional coalitions this brings the total number of 39 Mental Health and Aging Coalitions.)
HOW DO WE GET THERE FROM HERE

- We must have a Shared Vision
- We must Expand Our Knowledge of Needs, Resources and Gaps
- We have to CARE about those we serve and represent
- We have to GET INVOLVED in policy making decisions
- We have to BELIEVE in what we say and do
- We have to SELL our belief to others
- We must remember that coalitions are made up of busy people
The Iowa Coalition Activity in 2006 and Beyond

- Iowa has a unique set of problems and resources
- Iowa has great leadership and talent
- Iowa has many good things in aging going on
- Aging Mental Health in Iowa will either grow or fall short of the task in this new century.

WILL YOU BE PART OF WHAT MAKES YOUR COALITION ON MENTAL HEALTH AND AGING SUCCESSFUL IN 2006 AND BEYOND?