SO NOW YOU HAVE A COALITION
WHAT NEXT?
COMMON OCCURENCES AFTER THE BIG “SPLASH”

- Attendance may decline
- Lack of agenda or list of projects to work on
- No funding for projects and operation
- Agency cutbacks curtail travel and attendance to meetings
SO, WHAT DO WE DO?

• Don’t just meet for the sake of meeting (Social Club Syndrome)
• Establish goals
• Do a quick and easy project so you will have a success under your belt
SO, WHAT DO WE DO?
(Continued)

- Establish Goals (Continued)
  - Develop lists of short term projects (goals) to work on: such as
    - Develop a brochure, a newsletter or web site
    - Develop a member directory (to use for referrals)
    - Develop a speakers bureau
    - Provide presenters on mental health and aging for State Aging conference and other meetings
  - Set Long Term Goals
    - Develop a three year plan
SO, WHAT DO WE DO? (Continued)

• How to Pay the Cost of Operating a Coalition
  – In-Kind Contributions (Printing, mailing, telephone, etc.)
  – Member dues
  – Grants
  – Agency/Member contributions

• How to get “folks” to the meetings
  – Ride Sharing
  – Convenient and Possibly Rotating Meeting Times
  – Buddy List (Everyone calls someone to invite them to the meeting)
WHAT’S THE PURPOSE

• Identifying Available Resources and stakeholders
• Education
  – The General Public (PSAs, Presentations at Church and Civic Organizations, etc.)
  – Legislators (Legislative Hearings, A Day at the Capitol, etc.)
  – Providers (Presentations at meetings, Annual MH and Aging Conference, etc.)
AVAILABLE OPTIONS

• Build Local Coalitions
  – Grass-roots organizations Made up of Stakeholders that **SHARE** Resources and Referrals of Consumers
  – Provides Input to the State Coalition which Provides input to the National Mental Health and Aging Coalition
  – Identifies Local Resources to Improve Service Availability and Accessibility
AVAILABLE OPTIONS (Continued)

- Strong State Coalition with State Level members and members from Local Coalitions
- Expand membership to Include All Interested parties
  - State Mental Health and Substance Abuse Agencies
  - Primary Care Physicians and Organizations
  - Consumers
  - Family Members
  - Area Agencies on Aging
  - Private and Public Mental Health, Substance Abuse and Primary Care Service Providers
  - Advocacy organizations (Mental Health Assn., AARP, State AMIs, Aging MH Consumer Organization, Substance Abuse Assn., etc.)
  - Community, Civic and Church Organizations
  - Legislators and State and Local Government Officials
  - Interested Citizens
RECOMMENDATIONS

• Get Involved
• Stay Involved
• Remember, Only **YOU** can Make it happen
• Never give up looking for the pony!