

HISTORY OF THE MENTAL HEALTH LIAISON GROUP

A forerunner of the Mental Health Liaison Group, the Liaison Group on Mental Health, was formed in May 1969 by the American Medical Association, American Psychiatric Association, National Association for Retarded Citizens, National Association of State Mental Health Program Directors and the National Mental Health Association. Shortly after its formation, the American Psychological Association joined the group and others soon followed.

From the beginning, the Liaison Group provided its members with the opportunity to exchange political intelligence, form cooperative advocacy efforts, coordinate strategies and discuss public policy issues related to mental health. Staff of the National Institute of Mental Health attended its meetings as unofficial observers, but they frequently participated in the information exchange wherever they could be helpful.

In 1973, the National Association for Retarded Citizens (now known as "The Arc") led the effort to create a broader, cross-disability coalition. This coalition eventually became the Consortium for Citizens with Disabilities (CCD), a group which retains a close working relationship with the MHLG.

Over the years, the Liaison Group has continued to grow, in both numbers and sophistication. The press of business surrounding health care reform led to a MHLG reorganization in January 1994 that strengthened committees, where most business is conducted.

MHLG is structured around an elected Steering Committee, an elected Secretary and Treasurer and two standing committees, Budget & Appropriations and Health Policy. The standing committees meet at the call of their chairs, but typically monthly. MHLG holds one plenary meeting annually and others as necessary, subject to the call of the Steering Committee. Each committee elects its chair or co-chairs at its first meeting each year.

The Budget and Appropriations (B&A) Committee annually produces a set of recommended appropriation levels for programs of the Substance Abuse and Mental Health Services Administration's three centers (the Center for Mental Health Services, the Center for Substance Abuse Prevention and the Center for Substance Abuse Treatment), and research programs at the National Institute of Mental Health, the National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism at the National Institutes of Health. The consensus document is widely distributed on Capitol Hill and used in the advocacy activities of participating MHLG organizations. Since 1993, MHLG witnesses have periodically appeared before the relevant health, human services and education committees of the U.S. House and Senate. The B&A Committee also invites guest speakers, including federal officials, to address the MHLG membership on fiscal and policy matters. This committee also has jurisdiction over reauthorization of the NIMH, NIDA, NIAAA and SAMHSA. Committee documents are posted on the web site at www.mhlg.org. The committee is co-chaired by Lizbet Boroughs of the American Psychiatric Association, Julio Abreu of the National Mental Health Association, and Andrea Fiero of the National Association of State Mental Health Directors.

The Health Policy Committee monitors federal developments in mental health on such issues as health care reform, Medicare, Medicaid, managed care, parity and medical records privacy. The Committee prepares letters to policymakers, testimony, and position statements on federal policy issues under consideration by Congress and federal agencies, working to develop positions that best reflect consensus within the mental health community. Committee documents are posted on the web site at www.mhlg.org. The committee is co-chaired by Chris Koyanagi of the Bazelon Center for Mental Health Law and Peter Newbould of the American Psychological Association.