

ORGANIZATIONAL DESCRIPTIONS: OBSERVERS

AARP

601 E Street, NW, Washington, DC 20049

PHONE: 202/434-2277; FAX: 202/434-6480;

WEB SITE: www.aarp.org

William D. Novelli, Chief Executive Officer; Marie F. Smith, President

Founding Date: 1958, formerly known as the American Association of Retired Persons. **Membership Size:** 36 million. **Staff Size:** 1,500. **Number of State/Local Chapters:** 53 State Offices; 5 Field Offices. **Annual Convention/Meeting:** Life @ 50+ (AARP's national event and expo), October 26-28 2006 in Anaheim, California; National Legislative Council meets in late January/early February each year in Washington, DC. **Publications:** AARP The Magazine; The AARP Bulletin; AARP Segunda Juventud (Second Youth), a Spanish language newspaper; NRTA Live & Learn; a wide range of reports, brochures and other publications. **Staff Participating in MHLG:** Andrea Price, Senior Legislative Representative-Health Issues.

Organizational Purpose: Through education, advocacy and service, to enhance the quality of life for all by promoting independence, dignity and purpose. **Priority Issues for 2006: Lowering prescription drug costs:** allow for the safe and legal importation of prescription drugs; provide secretarial authority to negotiate lower drugs prices; and eliminate barriers to the Medicare prescription drug benefit – such as low-income asset test. Medicare, prescription drugs, Medicaid, and private health insurance/managed care. **Modernize the Health Care System:** Advance health information technology; promote transparency of drug, physician, diagnostic and hospital costs, rely on evidence-based medicine; and reward quality care through paying for performance; **Long-Term Care:** improve options for long-term care coverage, including expanded home and community-based care.

ASSISTANT SECRETARY FOR PLANNING AND EVALUATION [ASPE/HHS]

U.S. Department of Health and Human Services

200 Independence Avenue, SW, Room 415-F, Washington, DC 20201

PHONE: 202/690-7858; FAX: 202/690-6518

Donald Young, M.D., Acting Assistant Secretary for Planning and Evaluation

Affiliated Organizations: Centers for Medicare and Medicaid Services (CMS); Substance Abuse and Mental Health Services Administration (SAMHSA); National Institutes of Health (NIH and NIMH). **Staff Participating in MHLG:** Cille Kennedy, PhD.

Organizational Purpose: Support staff for the Secretary's office to assist in policy planning and evaluation of HHS programs and activities. **Priority Issues:** HHS programs and activities

CENTER FOR MENTAL HEALTH SERVICES, SAMHSA [CMHS]

1 Choke Cherry Road, Rockville, MD 20852

PHONE: 240/276-1310; FAX: 240/276-1320

WEB SITE: www.samhsa.gov

Kathryn Power, Director

Founding Date: 1992. **Staff Size:** 125. **Publications:** Through its activities and programs, CMHS produces many documents and sponsors a variety of meetings. To provide information about these, CMHS has developed the National Mental Health Services Knowledge Exchange Network (KEN), which maintains a toll-free information line (800/789-2647), an electronic bulletin board (800/790-2647) and an award-winning web site (www.mentalhealth.org). **Staff Participating in MHLG:** Roslyn Holliday Moore, Public Health Analyst; Edward B. Searle, MBA, Director, Office of Policy, Planning & Administration.

Organizational Purpose: CMHS is a component of the Substance Abuse and Mental Health Services Administration, an agency of the US Department of Health and Human Services. Its purpose is to lead federal efforts to promote mental health and prevent mental illness, including fostering independence and protecting the legal rights of persons with mental illness, conducting service-related assessments, providing technical assistance to public and private providers, and administering the programs assigned to it under the Public Health Service Act. **Description:** CMHS helps states and others improve and increase the quality and range of treatment and support services for people with mental illnesses, families and communities. It administers the Community Mental Health Services Block Grant program, the Comprehensive Community Mental Health Services for Children program, Projects for Assistance in Transition from Homelessness, Knowledge Development and Application projects, and other programs to promote and evaluate innovative mental health services for children and adults. **Priority Issues:** Safe Schools/Healthy Students program; School Action Grants; Community Action Grants; and Eliminating Racial and Ethnic Disparities. **Continuing Priorities:** Assist states and others with issues of managed care and state health care reform; support knowledge development programs in the areas of Violence Against Women, Jail Diversion, Elderly Primary Care, Consumer Operated Services, Supported Employment, Homeless Families, HIV/AIDS Cost Effectiveness Studies, HIV/AIDS Education II, American Indian/Alaskan Native Children, and Comprehensive Mental Health Services for Children with Serious Emotional Disturbances and their Families; expand the number and range of mental health and rehabilitative services for adults with serious mental illness; and work with states to develop performance measures and related accountability mechanisms.

ENSURING SOLUTIONS FOR ALCOHOL PROBLEMS

2021 K Street, NW, Suite 800, Washington, DC 20006

PHONE: 202-530-2302; FAX: 202-296-0025

WEB SITE: www.ensuringsolutions.org

Eric Goplerud, PhD, Director

Founding Date: 2001. **Publications:** Monthly newsletter, primer series, monthly issue briefs. **Staff Participating in MHLG:** Eric Goplerud, PhD, Director; Delia Olufokunbi, PhD, Chief Operating Officer.

Organizational Purpose: Ensuring Solutions to Alcohol Problems seeks to increase access to treatment for individuals with alcohol problems. Working with policymakers, employers and concerned citizens, Ensuring Solutions provides research-based information and tools to help curb the avoidable health care and other costs associated with alcohol use and improve access to treatment for Americans who need it. **Description:** The project conducts research and develops publications to educate policymakers and purchasers on the extent and costs of untreated alcohol problems, policies and practices that hinder access to treatment services and ways to increase access to alcohol treatment, including in-depth reports, educational primers, issue briefs, and online tools. **Priority Issues:** Substance abuse parity, improved Medicaid, SCHIP and Medicare coverage for substance abuse treatment, accountability and performance measurement.

GRANTMAKERS IN HEALTH [GIH]

1100 Connecticut Avenue, NW, Suite 1200, Washington, DC 20046

PHONE: 202/452-8331; FAX: 202/452-8340;

WEB SITE: www.gih.org

Lauren LeRoy, President and CEO

Founding Date: 1982. **Membership Size:** Approximately 200 funding partners. **Staff Size:** 12. **Affiliated Organizations:** Foundations and corporate giving partners. **Publications:** GIH Bulletin; Issue Briefs. **Staff Participating in MHLG:** Elise Desjardins.

Organizational Purpose: GIH is a non-profit, educational organization dedicated to helping foundations and corporate giving programs improve the nation's health. **Description:** GIH serves the entire field of health philanthropy, i.e., foundations and corporate giving programs that make grants for health and health care. Funding partners are foundations and corporate giving programs that annually contribute general or program grants.

NATIONAL ASSOCIATION OF COUNCILS ON DEVELOPMENTAL DISABILITIES

[NACDD]

225 Reinekers Lane, Suite 650, Alexandria, VA 22314

PHONE: 703/739-4400; FAX: 703/739-6030

WEB SITE: www.nacdd.org

Karen F. Flippo, Executive Director

Founding Date: 2002. **Membership Size:** 55. **Staff Size:** 6. **Annual Convention/ Meetings:** Alliance for Full Participation, September 22-23, 2006 in Washington, DC. **Staff Participating in MHLG:** Karen F. Flippo, Executive Director.

Organizational Purpose: To represent the Developmental Disabilities (DD) Planning Councils of the states and territories in policy development at the federal level; advocate Council interests with Congress and the executive branch; provide support and technical assistance to Councils; work with other advocacy organizations on behalf of people with developmental disabilities. **Description:** State Councils on Developmental Disabilities are authorized by the Developmental Disabilities Assistance and Bill of Rights Act (PL 106-402) and receive federal funds to advocate on behalf of people with developmental disabilities and their families. As defined in the DD Act, developmental disabilities are severe, chronic disabilities which are attributable to a mental or physical impairment or combination of those; begin before age 22; are likely to continue indefinitely; result in substantial function limitations in 3 or more areas of major life activity; reflect a need for a combination and sequence of specialized, interdisciplinary or generic services, individualized supports, or other forms of assistance that are of a lifelong or extended duration and are individually planned and coordinated. Councils engage in advocacy, capacity building, and systemic change activities which contribute to a coordinated, consumer- and family-directed comprehensive system of community services and individualized supports. Council members are appointed by their Governors, and individuals with developmental disabilities and family members comprise at least 60% of the Council's membership. **Priority Issues:** Increased appropriations for State Councils; Reauthorization of the Developmental Disabilities Act; Medicaid and Social Security; education; lifespan respite; housing; transportation.

NATIONAL ASSOCIATION OF COUNTIES [NACo]

440 First Street, NW, Washington, DC 20001-2080

PHONE: 202/393-6226; FAX: 202/942-4281;

WEB SITE: www.naco.org

Larry E. Naake, Executive Director

Founding Date: 1935. **Membership Size:** 2,000+ counties. **Staff Size:** 80. **Affiliated Organization:** National Association of County Behavioral Health and Developmental Disability Directors. **Annual Convention/ Meetings:** NACo 2006 Legislative Conference – March 4-8, 2006 – Hilton Washington and Towers – Washington DC and 2006 Annual Conference & Exposition Lakeside Center at McCormick Place August 4-8, 2006 Cook County Illinois. **Staff Participating in MHLG:** Jennifer Wilson, Associate Legislative Director.

Organizational Purpose: To represent the interests of county governments on Capitol Hill and provide technical assistance to elected and appointed officials. **Description:** NACo members consist of elected and appointed county officials, including county directors of mental health. Primary activities include lobbying and technical assistance.

NATIONAL BUSINESS GROUP ON HEALTH [NBGH]

50 F Street, NW, Suite 600, Washington, DC 20001

PHONE: 202/628-9320; FAX: 202/628-9244

Helen Darling, President

Founding Date: 1974. **Membership Size:** 200. **Staff Size:** 20. **Publications:** In Focus: Policy and Marketplace Trends; reports on prevention, health services, benefit design, treatment directories and transcripts. **Staff Participating in MHLG:** Ronald A. Finch, EdD.

Organizational Purpose: Promote corporate competitiveness, productivity, and well-being of American workers and their families through development of a health care system that provides high quality care to all Americans at an affordable societal cost. **Description:** NBGH is a non-profit association representing Fortune 500 and public sector employers from all segments of US industry, in promoting performance driven health care systems and competitive markets that improve the health and productivity of companies and communities. Primary activities include serving as a conduit for the flow of information between members and health policymakers; conducting research; identifying trends; collecting and disseminating information; and providing long-range planning and analysis on economic and social issues confronting employers. **Priority Issues:** Emerging trends in employer-sponsored health, e-health, workplace initiatives for mental health and substance abuse.

NATIONAL INSTITUTE OF MENTAL HEALTH [NIMH]

6001 Executive Boulevard, Room 8235, Rockville, MD 20852

(Mailing Address: Bethesda, MD 20892-9669)

PUBLIC INQUIRIES PHONE: 866/615-6464; FAX: 301/443-4279

WEB SITE: www.nimh.nih.gov

Thomas R. Insel, MD, Director

Founding Date: 1946. **Staff Size:** 716. **Publications new this year:** Two revised booklets: Autism Spectrum Disorders (Pervasive Developmental Disorders) and Attention Deficit Hyperactivity Disorder, including details on symptoms, causes and treatments, with information on getting help and coping.

NIMH pamphlets and printable materials are available on the diagnosis and treatment of mental disorders, such as anxiety disorders (including obsessive-compulsive disorder, panic disorder, social phobia, and post-traumatic stress disorder), depression, bipolar disorder, ADHD, autism, eating disorders, schizophrenia, child and adolescent mental health, the Real Men Real Depression campaign, NIMH-sponsored clinical trials, workshops, meetings, complete text of program announcements and requests for applications, and other items of interest, at www.nimh.nih.gov. Publications are free and can be ordered on line. To receive more information on NIMH activities, subscribe to NIMH-E-NEWS on the NIMH home page or contact the NIMH Information Center toll free at 866/615-6464. **Staff Participating in MHLG:** Gemma Weiblinger, Special Assistant to the Director and Director, Office of Constituency Relations and Public Liaison.

Organizational Purpose: To reduce the burden of mental illness and behavioral disorders through research on mind, brain, and behavior. Although much progress has been made in treating mental illness and in achieving effective preventive interventions, efforts to achieve even further improvements will continue. All the while, NIMH maintains a clear focus on its ultimate goal: to pursue an understanding that will enable us to intervene to prevent mental illness, or to develop rational treatments that will actually cure them once they occur. Implicit in the NIMH mission is the challenge of ensuring that new information finds its way into the hands of the end users of research. These include individuals with mental disorders, health care providers, mental health service delivery systems, and policymakers at all levels of governance. **Description:** To understand the causes and improve the treatment and prevention of mental illness, NIMH research brings a multidisciplinary approach to studying the human brain, integrating findings from the neurosciences, basic behavioral sciences, clinical research, epidemiology, prevention research, and mental health services research to study the causes and treatments for mental disorders such as schizophrenia, mood disorders, anxiety disorders, eating disorders, Alzheimer's disease, and childhood mental illnesses. To reduce possible health disparities, NIMH research also addresses the mental health needs of racial and ethnic minority populations, women, and residents of rural and frontier areas. **Priority Issues for 2006:** Building on the Decade of the Brain, we are poised for a Decade of Translation, with new discoveries from genomics, neuroscience, and behavioral science leading to new, more effective treatments, and ultimately to the possibility of preventing and curing mental illness. One important effort has been to sharpen the focus and impact of the entire portfolio to better serve the mission of the institute. With input from various stakeholders, NIMH has revised priorities and three key factors are being used to evaluate new applications: relevance to the mission, traction for making rapid progress, and innovation. To facilitate translation and integration across the Institute, NIMH extramural research programs were reorganized from three to five divisions. NIMH's priority-setting, new funding strategies and reorganization are designed to optimize the translation of the best science to implementation in the service of those with mental illness, thus having the greatest impact on public health. Other priorities include: Develop biologically-based markers of disease that could transform diagnosis, risk assessment, and treatment for disabling mental disorders, as well as provide information on timing of disease onset, severity or progress. Develop new treatments that will target the cognitive, social, and affective deficits seen in schizophrenia and schizophrenia spectrum disorders in childhood. Develop and test new treatments for infants and children with autism spectrum disorders. Develop tools to understand the impact of hormonal changes during life transitions on mood and cognitive function. Reduce rates of adolescent depression and suicide. Increase effective dissemination and implementation of treatment and services. In addition, NIMH is participating in the NIH Neuroscience Blueprint, a framework to enhance cooperation among 15 NIH Institutes and Centers that support research on the nervous system. By pooling resources and expertise, the Blueprint can take advantage of economies of scale, confront challenges too large for any single Institute, and develop research tools and infrastructure that will serve the entire neuroscience community. For FY 2006, Blueprint participants are developing initiatives focused on tools, resources, and training that can have a quick and substantial impact because each

builds on existing programs, including an inventory of neuroscience tools funded by the NIH and other government agencies, enhancement of training in the neurobiology of disease for basic neuroscientists, and expansion of ongoing gene expression database efforts.

NATIONAL MENTAL HEALTH AWARENESS CAMPAIGN [NMHAC]

PO Box 491608, Los Angeles, CA 90049-1608

HELPLINE: 877/495-0009;

WEB SITE: www.nostigma.org

Gail Kamer Lieberfarb, Chair, Board of Directors

Founding Date: 1999. **Description:** NMHAC is a not-for-profit, non-partisan, nationwide campaign dedicated to combating the stigma association with mental illness among youth, adults and seniors. **Staff Participating in MHLG:** Ross Szabo, Director of Youth Outreach.

Organizational Purpose: To reduce the discrimination that pervades the daily lives of Americans living with mental illness and stimulate help-seeking behavior to substantially increase the number of Americans accessing mental health services.

OLDER WORKERS & DISABILITY TEAM (OWN&Dream)

Division of Adult Services, Employment and Training Administration

U.S. Department of Labor

200 Constitution Avenue, NW, Room S-4203, Washington, DC 20210

PHONE: 202/693-2723; FAX: 202/693-3818

WEB SITE: www.doleta.gov/disability/

Alexandra Kielty, Supervisory Manpower Development Specialist, Older Workers & Disabilities Team,

Organizational Purpose: The Older Workers and Disabilities Team, Disability Program, Adult Services, within the Employment and Training Administration, U.S. Department of Labor, develops and implements disability policy and program initiatives related to the workforce system, including cross-agency collaboration to address structural barriers to employment. **Description:** The OWN&D Team's Disability Program works to improve career and employment outcomes for adults and youth with disabilities through innovative skills training and systems change activities. With the ultimate goal of increasing the number of people with disabilities who work, OWN&D provides policy analysis, technical assistance, development and dissemination of promising practices and strategies, and education and outreach to employers, employees, providers, and the disability community. **Staff Participating in MHLG:** Randee Chafkin.

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION [SAMHSA]

1 Choke Cherry Road, Rockville, MD 20852

PHONE: 240/276-2000; FAX: 240/276-2010;

WEB SITE: www.samhsa.gov

Charles G. Curie, MA, ACSW, Administrator

Founding Date: 1992. **Staff Size:** 550. **Publications:** SAMHSA News; TIPS and PEPS on improved ways of providing prevention and treatment; publications on data related to the various aspects of

service delivery; others. **Staff Participating in MHLG:** Joe Faha, Director, Congressional Affairs; Roslyn Holliday Moore.

Organizational Purpose: To reduce prevalence and incidence of substance abuse and mental health disorders and improve treatment outcomes, to provide national leadership to ensure the best use of knowledge based on science to prevent and treat addictive and mental disorders, and to improve access and reduce barriers to high quality, effective programs. **Description:** Source of federal assistance for substance abuse and mental health services; data collection on substance abuse and mental health; and evaluation of programs and service delivery systems.