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## **About NSSC**

The **National Shattering Silence Coalition** brings attention to the silent epidemic of untreated or inadequately treated serious mental illnesses (SMI) in adults and serious emotional disturbances in children (SED). **NSSC** speaks up for the 18.2 million - the 4% who suffer from SMI and the 10% who suffer from SED and their shattered families.

**NSSC** is a nonpartisan alliance of family members, individuals suffering from SMI, professionals in the trenches, and people who care who are uniting to ensure that mental illness, health, and criminal justice systems count those with SMI and their families in all federal, state, and local policy reforms.

#### Our Mission Statement

The **NSSC** speaks out about federal, state and local policies that impact adults living with SMI and children and youth living with SED and advocates for change

### **Our Vision Statement**

**NSSC** envisions a medically-based system of non-discriminatory, comprehensive, and coordinated mental illness care.

# **Points of Unity**

As a coalition of individuals and organizations from diverse political, economic, and cultural backgrounds, we agree to the following shared values and principles of unity:

- **1. SAMHSA Reforms:** Implement evidence-based programs and strong policies that will recognize mental illness as a medical disorder, not a behavioral problem.
- 2. PAIMI Reform: Focus on abuse and neglect, its original mission, instead of lobbying to prevent medically needed inpatient and outpatient treatment and supports.
- **3. HIPAA Reform:** Clarify and improve HIPAA policies to include family rights and prevent harm that occurs when parents who provide care are shut out of the process.
- **4. End Discrimination:** Support the full repeal of the IMD Exclusion and call for parity and a right to treatment under Medicaid/Medicare.
- 5. End the Incarceration of those suffering from SMI and SED:
  - Promote, strengthen and fund Assisted Outpatient Treatment, mental illness courts, crisis intervention teams, FACT and any other evidence-based pre-incarceration alternatives that permit treatment and care for seriously mentally ill people based on treatment standards that focus on the need for treatment and grave disability, not on danger to selves and others.
  - Dramatically increase the number of psychiatric hospital beds, providing a hospital bed instead of a jail cell.
  - Support evidence-based post-incarceration diversion solutions. Invest in re-entry programs for SMI and SED.
  - End the hospital practice of criminalizing the symptomatic behavior of mentally ill patients while under treatment or medical management. Patients must not be prosecuted and punished for the consequences of poor ward management, deficient facility dynamics and infrastructure, poor staff training, and other critical factors. People who work with this patient population, including security staff must be provided comprehensive education to impart knowledge and comprehension of psychotic disorders and the behavioral aspects of the disorders.
  - End solitary confinement for those suffering from SMI and SED.
- 6. Support the funding of programs designed to grow the mental illness workforce.
- 7. Support both long-term to permanent dignified institutional housing for those who are too ill to live in the community and supportive and independent housing for those who are able to safely live in the community.
- 8. Seek to identify other points in federal law that need reform.