Anniversary Membership Meeting, whose theme was "Voice for Choice", the membership voted overwhelmingly to make the passage of the Mental Health Services Act our top, top public policy priority. According to the resolution that the membership passed that day, the major reasons why the Network supports the Initiative are the following:

On December 7, 2003, at the California Network of Mental Health Clients 20th

- The Act expressly promotes Recovery, consumer-operated services, and programs that reflect the cultural and ethnic diversity of mental health clients.
- 2) The Act promotes clients working in the mental health system, as well as inclusion of clients and their experiences in workforce, training and educational programs.
- 3) The Act promotes innovative programs by setting aside special funds for innovation. These programs, with our strong advocacy, will include consumer-operated programs, self-directed care and WRAP (Wellness Recovery Action Plan), housing first, based on harm reduction principles, and innovative employment programs.
- 4) The Act will expand community services to most people who want them. These "services include outreach, medical care, short and long-term housing, prescription drugs, vocational training, self-help and social rehabilitation" – an array of services that address the real life needs of people with mental disabilities.
- 5) The Act supports only voluntary community services.

For me the greatest satisfaction, the greatest recognition that our voice for choice is being heard is the Mental Health Services Act states that only voluntary services will be funded. I am proud that the California Network of Mental Health Clients was the leader in the state for stopping forced outpatient treatment. For

three years, we persevered to educate the mental health community including our elected officials, that we need a public mental health system that is based on choice, empowerment, self-responsibility and recovery, not a non-system based on force, fear and failure. Our hard work paid off, not only in the defeat of outpatient commitment, but equally important, our friends in the mental health community and in the legislature, heard our message, came to understand it, and most importantly, came to believe in it. Our friend and champion of the Initiative, Darrel Steinberg, came to believe our message, and that is why the Initiative is based on the vision that people with major mental health issues can recover if they get the right voluntary services and supports.

To emphasize Darrell's support, and that our hard work paid off, I want to read to you from Darrell's weekly letter to the mental health community that was posted on the Campaign for Mental Health website on June 6, 2004. Here's what Darrell has to say:

I just wanted to share with you that I am particularly grateful and honored to have the support of consumer/survivor organizations in the state. Many of the members of these organizations were patients in the state hospitals and suffered through experiences in those hospitals such as forced treatment, forced medication, forced electroshock therapy and far worse. And many of these folks are now leaders of the mental health community in this state. They are partners with us in this campaign for mental health.

Treatment under the Initiative model or the AB34 model is not forced or involuntary in any way. The AB 34 model is based upon mutual respect and trust, and it is through years of providing services, and building trust, through that program that we have gained the support of consumer/survivors. And we are not moving backwards. The services funded by the AB34 programs are not forced or involuntary, and the services funded by the Initiative will not be forced or involuntary.

I am very honored to have the support of the California Network of Mental Health Clients. In fact, I wouldn't have done this without their support.

Over the next four and a half months, we need to put the same dedication, the same hard work into passing the Initiative as we did in defeating outpatient commitment bills. I hope each of us will make the necessary sacrifices of our time and money, with the heartfelt conviction and understanding that the quality of our lives and the lives of the people we love, will greatly improve if the Initiative passes.

The successful passage of this Initiative depends on each of us doing our part. I hope each of you will do some soul searching today and over the next few days, to decide what contribution you will make based on your strengths, and willingness, and courage to step out of your comfort zone. I am proposing that the Network Public Policy Committee develop a list of tasks that can be accomplished in our home community and mail the task list to each member. I believe that time is money. There is so much we can do as we give of our volunteer time: voter registration, talk to family and friends, talk and pass out material to people where we naturally go (churches, libraries, movie theatres, laundromats, buses...). What an opportunity we have over the next four months to combat discrimination and stigma! We can organize speakers' bureaus; we can write to the media; we can get personal interest stories in the newspapers; we can lobby elected officials to pass resolutions in support of the Mental Health Services Act. Personally, I work for Contra Costa County's Mental Health Division in the Office for Consumer Empowerment. As a County employee, I can't work on the Initiative. In recognizing that the Initiative presents a once in a lifetime opportunity, starting July 1st, I will be taking four months off to devote my time and energy to the Initiative. Again, each of us need to soul-search on what sacrifices we are willing to make at this critical time.

Yes, time is money, but the cold, hard reality is that to be successful in passing the Initiative, the campaign needs to raise four million dollars. I have a second proposal for the Network that will help raise money for the Initiative. First, some background information: When the Initiative passes, each Californian who

earns over a million dollars a year will be taxed one percent of their income. starting with the second million. In its first full year of funding, over 600 million dollars will be raised. It is being called the Robin Hood Initiative. My idea to raise money is that the Network join with NAMI (National Alliance for the Mentally III) and United Advocates for Children of California (UACC) to promote that every mental health provider gives 10% of one weeks salary to the Initiative over the life of the Campaign. For example, a mental health provider who earns \$52,000 per year would donate \$100. In developing this idea, I did some homework. Over 3 billion dollars are spent on local mental health programs annually. 80% goes to salary and benefits. If each provider gave 10% of one week's salary, that would raise \$4,615,395. We, as members of the California Network of Mental Health Clients, need to do our part to raise money. Many of us work in mental health and could give 10% of one week's salary. I want to re-emphasize that we all need to make sacrifices of time and money, as we are able. We will be passing the hat around. For those who want to write checks, you can make them out to the California Network of Mental Health Clients. It is important to demonstrate to the mental health community that the California Network is doing its part in supporting the Campaign financially.

Starting with Governor Reagan, we have had 36 years of broken promises: broken promises to provide quality mental health services and supports in the community, but then inadequate resources to fulfill the promises. As I watched the TV reports on Reagan's life, I kept remembering how he wasn't a friend to those of us who had mental health issues and lived in poverty. However, I was impressed with his demand "Mr. Gorbachev, tear down this Wall!" Our society has built, around those of us with mental health issues, walls that need to be torn down. The most devastating is the wall of discrimination that keeps landlords from renting to us, employers from hiring us, and public elected officials from funding us.

Our movement's major message is "Nothing about us without us!" The next four and a half months, we will be working our butts off, and when the Mental

Health Initiative passes, our next step is to remind the persons responsible for implementing the Act of our value "nothing about us without us." Our demand is simple: Invite us to the table. Governor Schwarzenegger, "Invite us to the table when you select the state oversight committee." Dr. Mayberg, Director of the State Department of Mental Health, "Invite us to the table when you develop regulations and plans for the distribution of funds." Local Mental Health Directors, "Invite us to the table when you are developing your local program plans." Over the years, we have developed positive relationships with Department of Mental Health and Local Mental Health Directors. I am confident that they will invite us to the table. But what happens in those exceptions, when an entity that has a role in implementing the Act doesn't invite us? What happens if we run into someone who operates under the wrong golden rule: Those who have the gold, rule! And the power-monger doesn't want to invite or involve us? Those of us that have mental health issues have the most to gain by the successful implementation of this Act. It is critical that we are involved. So if we don't get an invitation, we invite ourselves! Nothing about us without us!

In closing, we have a once in a lifetime opportunity to correct the injustices of inadequate resources that have been our plight for the last 36 years. Just as hope is a key for a person's recovery, we need to have hope for our ailing mental health system, and hope for the passage of the Mental Health Services Act. With God's blessing, and our hard work, through the generous giving of our time and money. November 2nd, the day the Initiative passes, will be a great day.