

The purpose of the NAMI Vermont Advocacy Platform is to articulate where NAMI Vermont stands on issues related to its goal: “Youth and adults living with mental illness or a mental health condition receive the right care at the right time and in the right place, and experience lives of resiliency, recovery and inclusion”.

2026 NAMI Vermont Advocacy Platform (*numbered for reference only*)

1. Build community awareness and eliminate stigma and discrimination.
2. Increase mental health funding.
3. Strengthen community mental health.
4. Ensure treatment for hospital level of care.
5. Ensure health related social needs are met.
6. Ensure safe and respectful crisis intervention.
7. Promote appropriate outcomes where the criminal justice system and mental health issues intersect.
8. Promote safety, training, and quality standards.
9. Promote and collaborate on suicide prevention initiatives.
10. Ensure the integration and parity of mental health, substance use, and primary care services.

2026 NAMI Vermont Expanded Advocacy Platform

1. Build community awareness and eliminate stigma and discrimination.

- a. Build awareness of NAMI Vermont’s programs and services.
 - i. Initiate and participate in community events throughout the state.
 - ii. Educate organizations and the community about mental health through presentations, classes, workshops, and other events.
 1. Expand mental health education for all students, staff, and parents.
 2. Educate the press and general public about mental health including situations where violent acts attract attention.
 - iii. Exhibit at conferences and other events to promote our mission.
- b. Create a culture of acceptance so that individuals are safe to self-disclose mental health challenges.

2. Increase mental health funding.

- a. Advocate for stable and adequate funding for:
 - i. Public mental health programs and facilities to meet community needs for mental health services, including NAMI Vermont.
 - ii. Medicaid, Medicare, and private insurance parity that ensures access to a full array of effective services and continuity of care.
- b. Advocate for competitive compensation and increased funding to attract, retain, and support mental health professionals and providers across the workforce and to eliminate open positions.

3. Strengthen community mental health.

- a. Ensure Coordinated Specialty Care Programs to address First Episode Psychosis are available in Vermont so individuals receive help early.
- b. Ensure prompt access to outpatient care and treatment, including drop-in outpatient crisis services to alleviate emergency room visits.
- c. Increase peer-run and peer-staffed support services and funding.

- d. Promote choice of treatment options which includes (but is not limited to):
 - i. family education, medication, counseling/therapy, support groups, Soteria-Pathways Vermont, Collaborative Network Approach, therapeutic residences/crisis beds, coaching, peer support, alternative holistic treatments, etc.
- e. Promote hospital diversion by an adequate number of respite (short term stabilization) beds or other alternatives are available throughout the state.
- f. Ensure support and treatment for those most at risk of developing mental illness or mental health conditions (e.g., veterans, LGBTQ, BIPOC, immigrants, refugees) by addressing systemic barriers and promoting equity through an intersectionality perspective (refer to NAMI Vermont’s Diversity Policy). (*Intersectionality is the interconnected nature of social categorizations such as race, class, and gender regarded as creating overlapping interdependent systems of discrimination or disadvantage.*)
- g. Ensure timely and appropriate transitions to community housing from emergency rooms, in-patient hospitalizations, step-down residential facilities, and correctional facilities.

4. Ensure treatment for hospital-level care.

- a. Ensure an adequate number of geographically distributed level 1 acute care and level 2 inpatient beds are available for adults, children, and youth (voluntary and involuntary).
- b. Eliminate emergency room boarding (limit of 4 hours) to receive the appropriate care.
 - i. Promote data driven root cause analysis for ED wait times as well as voluntary and involuntary hospitalizations.
- c. Ensure step down care from the hospital.

5. Ensure health related social needs are met (includes factors like socioeconomic status, education, neighborhood and physical environment, employment, and social support networks, as well as access to health care.)

- a. Provide resources to strengthen resiliency and empower individuals to achieve their aspirations.
- b. Provide a full array of affordable, safe, and supportive housing options (e.g., permanent, therapeutic, transitional, and community).
- c. Ensure permanent community supported housing that includes mental health providers (peers, coaches, mentors, and/or clinicians).
- d. Promote and support access to safe, affordable transportation for people living with mental illness as well as for family members traveling to visit hospitalized loved ones.
- e. Establish policies and statewide programs that lead to meaningful competitive employment and economic self-sufficiency (e.g., “supported employment” and other employment services through the Designated Agencies, HireAbility, Pathways Vermont, Another Way, Ticket to Work program).
- f. Eliminate discrimination by ensuring employers provide equal pay and opportunity to qualified individuals with a mental health condition.
- g. Provide resources to participate in meaningful supported volunteer opportunities and education programs.
- h. Ensure inclusion of supportive family members and other supportive individuals in the evaluation and treatment of individuals with mental illness or mental health conditions.
- i. Encourage the creation and registration of Psychiatric Advance Directives.
- j. Ensure cultural and linguistic resources are available for individuals and the community.

6. Ensure safe and respectful crisis intervention.

- a. Law enforcement
 - i. Ensure secure and safe transport and use only soft-covered restraints when necessary.
 - ii. Ensure data is collected regarding types of restraints used when transporting individuals.
 - iii. Support “Use of Force” policies, training, and recruitment.
- b. Crisis response services
 - i. Ensure adequate funding for, and 24/7 availability of, 988, crisis center hubs, mobile crisis teams, and crisis stabilization services throughout Vermont.
 - ii. Continue to ensure that crisis response services include professional providers and individuals with lived experience.
 - iii. Ensure expansion of Crisis Intervention Team (CIT) Programs within more communities. CIT programs transform and improve community responses to mental health crises and bring together law enforcement, mental health professionals, mental health advocates (people living with mental illness and their families), and other partners such as EMS and Recovery Partners.

7. Promote appropriate outcomes where the criminal justice system and mental health issues intersect.

- a. Ensure individuals have the right to quality mental health care, substance use treatment, and medical care both while incarcerated and upon release into the community.
- b. Ensure individuals with a serious functional impairment are connected to housing, treatment, supports and enrollment in programs (i.e., SSI/SSDI, Medicaid, Health Insurance Exchange plans) and other benefits preferably before release from custody.
- c. Prioritize treatment over punishment especially for low-level, non-violent offenders with a mental illness or mental health condition, with diversion to an appropriate placement (forensic, non-forensic).
- d. Should segregation be necessary for disciplinary or administrative purposes, its duration should be defined and strictly limited by rule. No individual, particularly one with a serious functional impairment or who is in a mental health crisis, should be held in isolating circumstances that may harm their mental health.
- e. Increase step down housing for inmates being released from custody to avoid unnecessary prolonged custody or release dates.
- f. Eliminate the criminalization of mental illness.

8. Promote safety, training, and quality standards.

- a. Provide training to professionals who work directly with individuals affected by mental illness or a mental health condition (e.g., Trauma Informed training, Crisis training, refresher training, In Our Own Voice, Provider Education, customized presentations, Team Two, Academy, CIT training) to eliminate stigma and discrimination, build empathy and raise awareness about what it means to live with mental illness or a mental health condition.
- b. Eliminate or reduce the number of seclusion and restraints and promote all strategies including the Six Core Strategies for all levels of care including residential and educational facilities.
- c. Ensure quality and excellence in least-restrictive settings at all levels of mental health care.
- d. Support the peer certification program in Vermont.
- e. Ensure professionals receive training to identify people at risk of suicide or an emerging mental health condition.
- f. Ensure protocols are in place to provide for the safety of all professionals during a mental health crisis.

9. Promote and collaborate on suicide prevention initiatives.

- a. Promote early intervention strategies (e.g., 9-8-8, education, support groups, counseling, social media communications) to help prevent suicidal ideation and behaviors.
- b. Ensure restrictions on access to firearms to reduce suicide.
- c. Promote and ensure accessibility to training and programs to prevent suicide.
- d. Collaborate and partner with other organizations.

10. Ensure the integration and parity of mental health, substance use, and primary care services.

- a. Ensure primary health care providers and lawmakers address the critical need for integration of physical and mental health care for better treatment and improved overall health.
- b. Promote parity (insurance coverage/reimbursement and level/quality of care).
- c. Promote affordability and accessibility of health and wellness services.
- d. Promote the expansion of Certified Community Behavioral Health Clinics (CCBHCs) in Vermont.

NOTES

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