A coalition of mental health advocates, parents, authors, and mental health professionals developed a platform entitled “A 5-point Plan to Address Serious Mental Illness (SMI) for All 2020 Presidential Candidates,” which they are distributing to contenders for the Democratic presidential nomination. The text of the statement can be found at http://www.peteearley.com/2019/08/19/advocates-ask-2020-presidential-candidates-to-add-mental-health-reforms-to-their-platforms/

The National Association for Rights Protection and Advocacy (NARPA) strongly opposes the five points proposed in this plan and calls on presidential candidates to reject them. The changes called for in this plan are not based on good science, would seriously infringe on the human and civil rights of people with psychiatric disabilities or psychiatric labels, and would pave the way for a return to the inhumane conditions of snake pit psychiatric institutions of the past.

**Point 1: Reclassify Serious Mental Illness.** The plan falsely claims that so-called “serious mental illness” is a “neurological medical condition,” and demands that “serious mental illness” be reclassified this way. The plan misleadingly states that doing so will “unlock more research funding and help eliminate discrimination,” while offering no arguments supporting this contention. There is in fact no scientific evidence that so-called “mental illness” has a neurological or biological basis.

**Point 2: Reform HIPAA.** The plan calls for dismantling the privacy protections of the Health Insurance Portability and Accountability Act (HIPAA) to allow family members of adults with psychiatric diagnoses access to their records over the individual’s objections. This is not acceptable.

**Point 3: Repeal the IMD Exclusion.** The plan demands the repeal of Medicaid’s Institutes for Mental Disease (IMD) Exclusion clause. Medicaid currently does not pay for inpatient treatment in segregated psychiatric institutions, such as state hospitals. This provision has served to prevent the widespread expansion of unnecessary and harmful long-term institutionalization of people with psychiatric diagnoses. Repeal of the IMD exclusion would pave the way for a return to the harmful institutions of the past.

**Point 4. Provide a Full Continuum of Care.** The plan calls for “providing a full continuum of care,” by which it means involuntary detention and forced treatment, including involuntary drugging, in the community. These interventions have not been scientifically proven effective; they also constitute serious rights violations. NARPA believes that a “full continuum of care” should mean access to a variety of community-based, person-centered voluntary supports and services that enable a person to meet his or her goals.

**Point 5. Decriminalize Serious Mental Illness.** The plan confusingly calls for the “decriminalization of serious mental illness.” In fact, there is nothing illegal about being a person with a psychiatric label. The document misleadingly claims that people with such labels are unable to get services without being arrested, which is simply not true.