

# Kitchen table coalition brought mental health changes

by [Patricia Siebert](#) // January 10th, 2011



In 1975, not a nickel of state money was spent on mental health services in the community. In 1976, the state decided to close Hastings State Hospital—with no transfer of funds to community services. At the same time, Pat Solomonson, a mother of five, struggled to find community care and treatment for her young adult son who had developed schizophrenia. Unable to find services for her son or support for herself, she gathered what she called a “kitchen table coalition” of similarly situated families to talk about badly needed changes in mental health care.

Solomonson and her coalition were determined to get beyond the stereotypes keeping people in institutions and to get others to see that mental illnesses were biological disorders.

Calling themselves “FED UP—Families of the Emotionally Disturbed United for Progress”; they decided to pressure the Minnesota Legislature to use savings from the Hastings hospital closure as a starting place to fund community mental health services. The legislation that resulted in large part from their efforts was, somewhat ironically, attached to a bill for a domed stadium—which almost died due to lack of support. Luckily, the bill survived, with allocations paving the way for community mental health services. The legislature ultimately allocated \$300,000 from the Hastings closure to community services, plus \$750,000 for SLIC (Shared Life in the Community) and \$500,000 for Rule 22, which provided state monies for drop-in centers, independent living services and program development.

Robert T. Smith, a columnist for the Minneapolis Tribune, wrote about the coalition’s efforts in a May 16, 1976 column. “Ms. Solomonson has done the near-impossible; she bulldogged a bill through the Minnesota Legislature the first time around. She did it by organizing parents of the mentally ill, mainly mothers, and by a lot of work. She had never given a speech before a group, had never lobbied for a bill, and had never been head of anything. ‘I was told it would take two years just to present such a program,’ said Ms. Solomonson. Working 50 hours a week, she and her mothers did it in nine months. A note to the legislators: Ms. Solomonson and her mothers will probably be back next year. Why don’t you just mail her the money?”

Solomonson’s advocacy group incorporated as the Mental Health Advocacy Coalition (MHAC) in 1977, with, as she noted, “no office, no staff and no funding”. Yet, in a short five years, MHAC and its allies saw community mental health funding increase dramatically. The 1981 legislature appropriated \$4.9 million for Rule 36 residential services, \$5 million for programs such as day treatment and crisis intervention services, and \$2 million for community based support programs such as drop-in centers. All of this was accomplished before the passage of the milestone Comprehensive Mental Health Act of 1987.

*-MHAC is now known as NAMI Minnesota.*

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