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NAMI: Nearly 75 Percent of Donations from Pharma

By **John M. Grohol, Psy.D.**

Founder & Editor-in-Chief

As [we noted in April](#), NAMI gets a

[significant portion of its funding from pharmaceutical companies](#). We had to guess at what that percentage was, however, because the National Alliance for Mental Illness (NAMI) refused to detail their pharmaceutical grants and donations in their annual reports and IRS filings.

Last updated: 8 Jul 2018

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At the time, I was generous and said that it's likely that 30 to 50 percent of NAMI's funding came from pharmaceutical companies. I was off. Way off.

The New York Times reported yesterday that nearly **75 percent** of NAMI's donations come from pharmaceutical companies — \$23 million over 3 years' time:

The mental health alliance, which is hugely influential in many state capitols, has refused for years to disclose specifics of its fund-raising, saying the details were private.

But according to investigators in Mr. Grassley's office and documents obtained by The New York Times, drug makers from 2006 to 2008 contributed nearly \$23 million to the alliance, about three-quarters of its donations.

Even the group's executive director, Michael Fitzpatrick, said in an interview that the drug companies' donations were excessive and that things would change.

How much can they change? NAMI is not some brand new organization that just happened upon pharmaceutical funding. They've been around for decades, and I wouldn't be surprised to learn that the percentage of pharma funding has been similar for most of that time.

If you cut that funding substantially, NAMI will have to cut their advocacy efforts, services and staff. And that would be a shame, because despite the controversy, NAMI is one of only a handful of national organizations that advocates relentlessly on behalf of people with mental illness. Their peer, family and patient programs are unmatched throughout the country.

Their balance sheet is not encouraging. If you lopped off even just 25 percent of pharma funding (to bring it under half of their total revenues), you'd have to cut significant services and support programs. This kind of money can not just be "made up" by individual member contributions or other fundraising efforts. Dues from 2007 to 2008, for example, actually declined (while grant funding went up). Perhaps they could start with meetings and travel, which makes up nearly 13 percent of their annual budget.

The primary objection to this kind of significant funding from any single industry is that it has undue influence on the organization's advocacy efforts:

For years, the alliance has fought states' legislative efforts to limit doctors' freedom to prescribe drugs, no matter how expensive, to treat mental illness in patients who rely on government health care programs like Medicaid. Some of these medicines routinely top the list of the most expensive drugs that states buy for their poorest patients.

Mr. Fitzpatrick defended these lobbying efforts, saying they were just one of many the organization routinely undertook. [...]

Documents obtained by The New York Times show that drug makers have over the years given the mental health alliance — along with millions of dollars in donations — direct advice about how to advocate forcefully for issues that affect industry profits. The documents show, for example, that the alliance's leaders, including Mr. Fitzpatrick, met with AstraZeneca sales executives on Dec. 16, 2003.

Slides from a presentation delivered by the salesmen show that the company urged the alliance to resist state efforts to limit access to mental health drugs.

And that's really the core of the problem.

The organization has seemingly allowed its relationship with pharmaceutical companies to guide (some might say "dictate") some of their advocacy efforts. There's no problem in taking pharmaceutical company money ([we do here](#), after all). The problem comes when you're secretive about such funding, and let it influence how you choose to deliver your services. NAMI has used such funding for great support and patient care programs, by and large, and it would be a shame if any of these are adversely impacted by this revelation.

We applaud NAMI's forthcoming response to Senator Charles E. Grassley's request for transparency, but we wish it hadn't taken a U.S. Senator's inquiry for them to make this information public. As a nonprofit advocacy organization, we expect such organizations to be transparent, especially about something that's so clearly been an issue in the public spotlight.

Read the full article: [Drug Makers Are Advocacy Group's Biggest Donors](#)

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Dr. John Grohol is the founder and Editor-in-Chief of Psych Central. He is an author, researcher, and expert in mental health online, and has been writing about online behavior, mental health and psychology issues since 1995. Dr. Grohol has a Master's degree and doctorate in clinical psychology from Nova Southeastern University. Dr. Grohol sits on the editorial board of the journal *Computers in Human Behavior* and is a founding board member of the Society for Participatory Medicine. You can learn more about [Dr. John Grohol here](#).

7 comments:

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