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Community Engagement: A Model Mental Health Partnership

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I am a member of the Board of Directors for the Wake County North Carolina affiliate of the National Alliance on Mental Illness (NAMI), a volunteer nonprofit organization with the mission of improving the lives of individuals and their families living with severe and persistent mental illness. NAMI Wake is made up of volunteers who are united in that mission. Our board represents a cross-section of the community because mental illness affects all people regardless of race, gender, religion, ethnic origin, and even political party.

In late 2007, Dr. Jessica Jameson of North Carolina State University reached out to our organization to research our board’s communication processes and help us function more efficiently. Although I am a natural born skeptic, I nevertheless joined with all the other board members and agreed to be “studied.” What I initially thought was going to be an enormous waste of the board’s time to fulfill the needs of the N.C. State students and their professor has resulted in an ongoing source of technical assistance, training, and support that has been invaluable to our nonprofit.

The N.C. State team observed and audio recorded all our monthly board meetings from January 2008 through February 2009. They also had private, individual interviews with each board member. My understanding is that they wanted to use methods that were sufficiently robust to capture the primary activities between and among the board members. It should be noted that no one on the board ever complained about being taped or having another visitor or two at the board meeting. I would also add that, in my opinion, their being present did not affect our behavior.

Based on the observations and interviews, the investigative team worked with us to develop skills and ways of operating that helped us become more efficient. For example, they suggested that we needed procedures to identify when it is appropriate and efficient to use email to make board decisions that require timely decisions. Additionally, after noting a lack of full involvement from all board members, they suggested strategies for improving the involvement. They also suggested ways to balance the governance and operations portion of our meeting to ensure that the most important issues were being addressed. The team even suggested that we should consider changing our agendas to reflect an element of excitement and variation from meeting to meeting. It never occurred to me that agendas could be exciting!

Our partnership with Dr. Jameson and her students did not end with their final report or with the legacy of procedures we have developed or changed based on their recommendations. NAMI Wake has developed a continuing relationship with the individuals involved, and we know we have passed on our passion for our mission and vision for those with mental illness.

As we all agree that our partnership is an outstanding example of a successful partnership, I would like to ask the readers to offer their time and talents to nonprofits, especially NAMI affiliates across the nation. Just Google NAMI and you can find links to the affiliates in all states. I have no doubt that you would be welcomed with a big hug. N.C. State’s ability to do field research in a way that is beneficial to all involved and to then take what they have learned beyond just our group to effect change is how a university-community partnership should work.