

and agencies—varying in their orientations and missions—are frequent. An individual's behavior is inextricably intertwined with that of the setting and activity in which he finds himself—at home, school, work, or leisure time activities—and his behavior has widespread and significant social repercussions. This is most apparent in the manifestation of mental disorders, which overwhelmingly involve disturbances of the individual's overall behavior and his interpersonal relations. The phenomena of mental illness make themselves known—as do no other pathological states—primarily through behavior.

The Institute, as the Federal Government's major agency and instrument in enhancing the mental health and alleviating the mental ills of the population, develops and maintains a variety of relationships—both formal and informal, ad hoc and continuing—with other Federal agencies having programs bearing upon the field of mental health. Numerous Federal agencies have a stake in the field of mental health and mental illness, particularly in view of some of the more recent developments in areas such as comprehensive community mental health centers, mental retardation, and aging. Each of these fields, as examples, has expanded or will expand the Institute's contacts with other Federal operations.

In addition, the Institute works with States, professional societies, academic institutions, hospitals, voluntary associations, and international organizations. Legislation such as that for the comprehensive community mental health centers also, of course, widens the working relationship of the NIMH with State and local agencies.

The relevance of social considerations to the study of illness and health has become increasingly apparent to all. The Institute has taken cognizance of, and necessarily must become more intensively involved with, the psychosocial implications and ramifications of such major national problems as desegregation and more effective civil rights, broader educational opportunities, the effects of automation, the population explosion, and the elimination of pockets of poverty. As congressional and executive action becomes increasingly aggressive in coming to grips with these wide-ranging problems which touch so crucially on mental health, the Institute's area of coordination with other agencies may be expected to expand.

8. *Laws and regulations.* (See general answer to this question for all NIH programs.)

PART II. DATA BEARING ON ECONOMIC ASPECTS AND IMPACTS OF THE PROGRAM

9. *Economic effects*

President Lyndon B. Johnson, in his 1965 health message to Congress, indicated that mental health programs are a continuing concern. In illustrating the extent of the problem, he said:

Mental illness afflicts one out of 10 Americans, fills nearly one-half of all the hospital beds in the Nation, and costs \$3 billion annually.

To cite a few statistics:

The number of outpatient psychiatric clinics increased from about 1,200 in 1954 to about 1,800 in 1963; the number of patients under care in those clinics increased in that same period from 379,000 to 862,000.