

# Mental Health Liaison Group

VIA FAX [to Senate Appropriations Committee Members]

May 30, 2002

Dear Senator,

As members of the mental health advocacy community representing millions of adults, children and their families affected by mental illness, as well as many of the providers who serve them, we believe it is critical that Congress, in addressing the threat of bioterrorism in the emergency supplemental appropriations bill for fiscal year 2002, provide substantial funding to respond to the most widespread casualty of terror attacks – the damage to Americans’ mental health, and particularly the mental health of our children. **We urge you, accordingly, to provide additional funding for the Center for Mental Health Services at the Substance Abuse and Mental Health Services Administration to address this alarming, yet largely unmet need.**

As has been widely reported, the psychological trauma of the events on September 11<sup>th</sup> has had a far-reaching impact on people’s mental health, not only in the states in which the terrorist attacks occurred, but across the nation. Extensive reporting has documented the widespread experience among adults and children of disrupted sleep patterns, panic attacks, pervasive anxiety and emotional trauma. For instance, the New York Times reported, “Two to three months after the attacks, surveys found that nearly half of the residents of Lower Manhattan and as many as one in four Americans nationwide had difficulty sleeping, suffered flashbacks and were easily startled -- symptoms usually found among patients with post-traumatic stress disorder (PTSD).”<sup>1</sup>

A recently published study highlights not only the need to initiate mental health programs in response to September 11<sup>th</sup>, but also the critical importance of mounting a national preparedness plan to respond to the devastating impact that terrorist attacks have on people’s mental health. That study, which was conducted by the Columbia University Mailman School of Public Health and Applied Research, in consultation with the Center for Disease Control and Prevention, to gauge the psychological impact of the September 11<sup>th</sup> attacks on New York City schoolchildren, concluded that nearly 75,000 New York City children are suffering from post-traumatic stress disorder and 200,000 children have at least some symptoms of mental health problems stemming from the attacks. As compelling as these New York City findings are, the lessons of the Oklahoma City experience also tell us that children geographically distant from the disaster who did not directly experience an interpersonal loss report PTSD symptoms and functional impairment.

National organizations representing consumers, family members, advocates, professionals and providers  
c/o Lizbet Boroughs, American Psychiatric Association, 1400 K Street, NW, Washington, DC 20005

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<sup>1</sup> Vendantum, S. (2002, March 17). After September 11, Psychic Wounds Slow to Heal. P. A03.

Since September 11<sup>th</sup>, mental health experts and administrators at all levels of government have worked to assess the mental health consequences of terrorist attacks, and consensus has emerged on the following:

- the psychological trauma caused by terrorist attacks will be more severe and felt more widely than any other disasters in American history;
- left unaddressed, the mental health consequences of such attacks will increase and intensify with the passage of time;
- although mental disorders following catastrophic events are readily treatable, our mental health systems, particularly in rural and frontier areas, do not have the resources to meet these needs and face still further strain in light of state budget shortfalls;
- we must prepare for the likelihood that this country will experience terrorist attacks with catastrophic consequences in the near future.

Currently, according to the U.S. Department of Health and Human Services (HHS) Secretary Tommy Thompson testimony before the Senate Appropriations Committee on May 2, 2002, less than one-quarter of one percent of the funds HHS proposed to dedicate in fiscal year 2003 for bioterrorism preparedness are directed to addressing the increased mental health needs arising from terrorism. We call on Congress to make funding for mental health outreach, services and preparedness – through appropriate programs administered by the Center for Mental Health Services at the Substance Abuse and Mental Health Services Administration -- an integral and substantial part of this supplemental appropriation.

Sincerely,

Alliance for Children and Families  
American Association for Marriage and Family Therapy  
American Mental Health Counselors Association  
American Academy of Child and Adolescent Psychiatrists  
American Group Psychotherapy Association  
American Psychiatric Association  
American Psychiatric Nurses Association  
American Psychological Association  
Association for Ambulatory Behavioral Health Care  
Association for the Advancement of Psychology  
Bazelon Center for Mental Health Law  
Child Welfare League of America  
Children and Adults with Attention-Deficit/Hyperactivity Disorder  
Clinical Social Work Federation  
Corporation for the Advancement of Psychiatry  
Employee Assistance Professionals Association  
Federation of Families for Children's Mental Health  
International Association of Psychosocial Rehabilitation Services

National Association of Anorexia Nervosa and Associated Disorders  
National Association for Children's Behavioral Health  
National Association of County Behavioral Health Directors  
National Association for Rural Mental Health  
National Association of School Psychologists  
National Association of State Mental Health Program Directors  
National Association of Social Workers  
National Council for Community Behavioral Healthcare  
National Depressive and Manic-Depressive Association  
National Mental Health Association  
Suicide Prevention Action Network USA