September 30, 2020

The Honorable Mitch McConnell  
Majority Leader  
U.S. Senate  
S-230, The Capitol  
Washington, D.C. 20510

The Honorable Chuck Schumer  
Minority Leader  
U.S. Senate  
S-221, The Capitol  
Washington, D.C. 20510

The Honorable Lamar Alexander  
Chairman  
Senate Health, Education, Labor, & Pensions Committee  
United States Senate  
428 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Patty Murray  
Ranking Member  
Senate Health, Education, Labor & Pensions Committee  
United States Senate  
428 Dirksen Senate Office Building  
Washington, DC 20510

Dear Leader McConnell, Leader Schumer, Chairman Alexander and Ranking Member Murray,

On behalf of the Mental Health Liaison Group (MHLG), a coalition of national organizations representing consumers, family members, mental health and addiction providers, advocates, payers and other stakeholders committed to strengthening Americans’ access to mental health and addiction care, we ask that you bring forward for Senate floor consideration legislation recently passed through the House of Representatives to help prevent suicide for all ages and intervene early to support youth mental health.

We urge you to bring forth the following pieces of legislation passed this past month by the House of Representatives:

1) **The STANDUP Act (H.R. 7293/S.2492):** The bipartisan, House-passed Rep. Peters (D-CA) and Bilirakis (R-FL) **STANDUP Act of 2020,** and Senate companion led by Sens. Cory Gardner (R-CO) and Doug Jones (D-AL), provides resources and technical assistances to States, Tribes, and schools on student suicide prevention awareness and training, and requires SAMHSA Project AWARE grantees to implement school policies for student suicide prevention awareness and training. 70% of students who die by suicide will tell someone of their plans or give a warning sign.\(^1\) Equipping our schools with evidence-based suicide prevention policies will allow all stakeholders in the school community, including students, to be the eyes and ears and to speak up when they see or hear one of these signs from a peer/student.

2) **The Mental Health Services for Students Act (H.R.1109/S.1122):** The bipartisan, House-passed Rep. Napolitano (D-CA) and Katko (R-PA) **Mental Health Services for Students Act,** and Senate companion led by Sen. Tina Smith (D-MN), provides funding for public schools across the country to partner with local mental health professionals to establish on-site mental health care services for students. This legislation will provide $130,000,000 in competitive grants of up to $2 million each

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through SAMHSA’s Project AWARE to give students licensed mental health professionals they need for support.2

3) **The Effective Suicide Screening and Assessment in the Emergency Department Act (H.R.4861/S.3006):** The bipartisan, House-passed Rep. Bilirakis (R-FL) and Rep. Engel (D-NY), *Effective Suicide Screening and Assessment in the Emergency Department Act* and Senate counterpart led by Sens. Lisa Murkowski (R-AK) and Doug Jones (D-AL), assists emergency departments to develop better suicide risk protocols through the Department of Health and Human Services. Prior to the national pandemic, the number of teens and children visiting emergency rooms for considering or attempting suicide doubled from 2007 to 2015.3 The emergency department is often the place within the health care system that provides care for patients with suicide-risk factors, with approximately 10% of emergency department patients presenting suicidal ideations. 39% of patients visiting an Emergency Department following a suicide attempt will go on to reattempt suicide within a year. This legislation will provide training to emergency health care providers, establish policies to improve identification and treatment of individuals at high risk, employ additional behavioral health professionals, and improve access to care for patients.

4) **The Pursuing Equity in Mental Health Act (H.R.5469/S.4388):** The House-passed Rep. Watson Coleman (D-NJ) *Pursuing Equity in Mental Health Act* and Senate counterpart led by Sen. Bob Menendez (D-NJ), is the first comprehensive federal legislation to address increasing suicide rates and mental health disorders among Black youth. We have seen an alarming trend in Black communities where Black children have the highest rates of suicide, rising from 2.55 per 100,000 in 2007 to 4.82 per 100,000 in 2017.4 If enacted, the bill would: provide grants for culturally appropriate mental health services in schools and community settings; increase funding for research into mental health disparities in youth of color; increase support for efforts to diversify the behavioral health workforce; and establish a commission to examine the effects of Smartphones and social media on adolescent mental health.

5) **The Improving Mental Health Access from the Emergency Department Act (H.R.2519/S.1334):** The bipartisan, House-passed Rep. Raul Ruiz (D-CA) *Improving Mental Health Access from the Emergency Department Act* and Senate counterpart led by Sens. Shelly Moore Capito (R-WV) and Maggie Hassan (D-NH) provides resources for emergency departments to adopt more collaborative and connected care models and deploy new technology to better connect patients with appropriate resources in their communities. With growing demand due to rising rates of substance abuse and suicide and all too often, a shortage of psychiatric beds, patients can remain in emergency departments for hours, sometimes days, as appropriate mental health care is sought. This legislation recognizes that needs vary by patient, provider, and community and allows emergency departments to design the solutions that will best work for them.

6) **The Suicide Prevention Act (H.R.5619/S.3198):** The bipartisan, House-passed Reps. Stewart (R-UT) and Matsui (D-CA) *Suicide Prevention Act* and Senate counterpart led by Sens. John Kennedy (R-LA) and Jack Reed (D-RI) would enhance data collection and sharing and provide funding for suicide prevention programs to train and equip emergency department personnel in suicide prevention strategies. This legislation would enable real-time surveillance of self-harm to inform

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2 Note the September 9, 2020 Energy & Commerce Committee markup lowered this amount from $200M to $130M.


public health strategies and support emergency departments to screen at-risk patients, refer appropriate follow-up care, and develop and deploy best practices for health care providers.

7) **The Helping Emergency Responders Overcome (HERO) Act (H.R.1646/S.3244):** The bipartisan, House-passed Rep. Bera (D-CA) HERO Act and Senate counterpart led by Sens. Jacky Rosen (D-NV) and Deb Fischer (R-NE) would improve the detection, prevention, and treatment of mental health issues among public safety officers. This legislation would better identify first responder suicide rates, risk factors, and interventions, and develop best practices on the prevention and treatment of posttraumatic stress among first responders.

8) **The Suicide Prevention Lifeline Improvement Act (H.R.4564):** The bipartisan, House-passed Reps. Katko (R-NY) and Beyer (D-VA) Suicide Prevention Lifeline Improvement Act would authorize $50 million for the National Suicide Prevention Lifeline to ensure high-quality crisis service delivery. The Lifeline’s network of over 170 local call centers answer millions of callers every year, but do not receive the necessary support to respond to crisis demand. This legislation would require increased coordination and data sharing and provide more funding for to support community-based crisis service delivery.

9) **The Campaign to Prevent Suicide Act (H.R.4585):** The bipartisan, House-passed Reps. Beyer (D-VA) and Gianforte (R-MT) Campaign to Prevent Suicide Act would establish a national educational campaign to raise awareness for a three-digit suicide lifeline phone number (988), suicide prevention resources, and more effective discourse on how to prevent suicide. Too often individuals in need of help do not know where to turn, or fear seeking help due to social stigma. This legislation will elevate the national dialogue on suicide prevention, promote life-saving resources, and encourage help-seeking for those in need.

As Congress works to continue to respond to the outbreak, it is essential to prioritize the public’s mental health and mitigate suicidal risks stressed by the social, economic, and health consequences of the COVID-19 pandemic. Recent reporting from the Centers for Disease Control and Prevention found worsening mental health and increasing thoughts of suicide. The CDC reported elevated levels of anxiety, depressive disorders, and substance use, and suicidal ideation had nearly doubled among Americans.5

Youth in particular are experiencing increasing mental health effects, with recent data from Mental Health America showing that youth between the ages of 11-17 are now at higher risk of moderate to severe anxiety and depression, with a 14% increase in screening for anxiety and 10% increase in screening for depression.6 These stressors are particularly evident for Latino, African American, Asian American & Pacific Islander, and American Indian & Alaskan Native youth who experience depression and suicidal ideation at higher rates.7 Given that prior to the national pandemic, suicide was the 10th leading cause of death for all Americans and the second leading cause of death for youth, we urge Congress to immediately consider taking action.

Despite suggestions that the mental health crises and suicide rates will worsen, this is not inevitable and can be prevented. By making our nation’s mental health an urgent consideration, we can address previous and present concerns and look ahead to effectively mitigate future needs beyond the crisis. Thank you for

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considering the COVID-19 crisis’ impact on the public’s mental health needs. We appreciate your leadership during these challenging times and are ready to assist in responding to this major public health threat.

Sincerely,

2020 Mom
American Art Therapy Association
American Association for Psychoanalysis in Clinical Social Work
American Association of Suicidology
American Counseling Association
American Dance Therapy Association
American Foundation for Suicide Prevention
American Psychiatric Association
American Psychoanalytic Association
American Psychological Association
Anxiety and Depression Association of America
Association for Ambulatory Behavioral Healthcare (AABH)
Association for Behavioral Health and Wellness
Centerstone
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Clinical Social Work Association
College of Psychiatric and Neurologic Pharmacists (CPNP)
Depression and Bipolar Support Alliance
Eating Disorders Coalition for Research, Policy & Action
Education Development Center
Emergency Nurses Association
Girls Inc.
Global Alliance for Behavioral Health and Social Justice
International OCD Foundation
Maternal Mental Health Leadership Alliance
Mental Health America

NAADAC, the Association for Addiction Professionals
National Association of County Behavioral Health & Developmental Disability Directors
National Association for Rural Mental Health
National Association of Social Workers
National Association of School Psychologists
National Association of State Mental Health Program Directors (NASMHPD)
National Association for Children's Behavioral Health
National Council for Behavioral Health
National Eating Disorders Association
National Federation of Families for Children's Mental Health (NFFCMH)
National League for Nursing
Postpartum Support International
Residential Eating Disorders Consortium
Sandy Hook Promise
Schizophrenia and Related Disorders Alliance of America (SARDAA)
School Social Work Association of America
SMART Recovery
The Kennedy Forum
The National Alliance to Advance Adolescent Health
The Trevor Project
Trust for America's Health
Well Being Trust