

July 26, 2023

The Honorable Patty Murray
Chair
Senate Committee on Appropriations
104 Hart Senate Office Building
Washington, DC 20510

The Honorable Susan Collins
Vice Chair
Senate Appropriations Committee
413 Dirksen Senate Office Building
Washington, DC 20510

The Honorable Kay Granger
Chairwoman
House Committee on Appropriations
2308 Rayburn House Office Building
Washington DC, 20515

The Honorable Rosa DeLauro
Ranking Member
House Committee on Appropriations
2413 Rayburn House Office Building
Washington DC, 20515

Dear Chair Murray, Vice Chair Collins Chairwoman Granger, and Ranking Member DeLauro:

The undersigned mental health, public health, youth, and educational organizations write to urge you to better meet the mental health needs of the nation by including a 5% set aside for prevention and early intervention services in the Community Mental Health Services Block Grant (MHBG), as your Committees appropriate funds for the Substance Abuse and Mental Health Services Administration (SAMHSA). As SAMHSA's most significant investment in the expansion and provision of mental health services across the country, the MHBG must be adapted to support services which prevent worsening mental health outcomes for both children and adults.

The critical roles of prevention and early intervention are well established and are recognized by SAMHSA within the Substance Abuse Prevention and Treatment Block Grant (SAPTBG), which already includes an authorized set aside for prevention. We seek the same emphasis on an upstream approach in the MHBG. The pandemic exacerbated a pre-existing mental health crisis, and many states are figuring out how best to serve people experiencing worsening conditions and seeking help for the first time. The crisis is particularly acute for America's youth. According to recent CDC data, in 2021, 29% of teens reported experiencing poor mental health, while 4 in 10 reported feeling persistent sadness or hopelessness - an increase across all racial and ethnic groups.¹ Without a greater national emphasis on prevention and early intervention, the mental health crisis will only continue to grow.

As currently authorized, the MHBG can be used only for adults with serious mental illness (SMI) or children with serious emotional disturbance (SED), which limits its use to individuals with very high needs, and effectively prohibits funds from being used for early intervention and prevention. A block grant set aside for prevention and early intervention would allow states to fund programs that provide help earlier, before a person develops a debilitating mental health condition or enters a state of crisis. Research has demonstrated that early intervention and prevention activities can mitigate, or in some cases prevent, the incidence of mental health conditions. For example, providing evidence-based therapies that are the standard of care for an SMI or SED, before diagnosis occurs, can reduce the severity

or delay the onset of an SMI or SED.ⁱⁱ Additionally, psychotherapy and related supports to reduce stressors have prevented the onset of psychosis among those at high risk.ⁱⁱⁱ

Prevention and early intervention services are particularly critical for children and teens, who often need access to support for mental health challenges, whether or not they have a mental health diagnosis and before their condition worsens to a point of crisis. Unfortunately, as currently structured, the MHBG fails to support the mental health needs of most children and teens, because funds are limited to use only for youth who are experiencing an SED. Early identification and interventions work for kids. A set aside for prevention and early intervention would enable the MHBG to better serve children, by supporting the types of mental and behavioral services more children need.

A set-aside for prevention and early intervention will better enable states to take an upstream approach to mental health, while continuing to give them the flexibility to determine which programs and interventions are most needed in their communities. Examples include mental health literacy programs, outreach programs, and integrated services in primary care and school settings that reach underserved communities. States could also fund outreach and engagement services for individuals who are at risk of going into crisis, such as children and adults experiencing homelessness who have not been diagnosed with SMI and who need connections to services and support.

Last year, Congress recognized the importance of the Community Mental Health Services Block Grant, by providing a funding level of \$1.2 billion and instituting a 5% set-aside for crisis care, another urgent and timely need. Including a prevention and early intervention set aside is a commonsense change, with bipartisan support, that will enable the program to fund a wider array of services across the continuum of care, including for children and adolescents. We ask that you include a 5% set aside for prevention and early intervention in the MHBG program, enabling states to fund upstream approaches to improve mental health in their communities.

Sincerely,

American Academy of Pediatrics
American Association for Psychoanalysis in Clinical Social Work
American Association of Child and Adolescent Psychiatry
American Counseling Association
American Foundation for Suicide Prevention
American Occupational Therapy Association
American Psychiatric Association
American Psychological Association
Anxiety and Depression Association of America
Association for Behavioral Health and Wellness
Center for Law and Social Policy (CLASP)
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Children's Hospital Association
Clinical Social Work Association
Community Catalyst
Depression and Bipolar Support Alliance

First Focus Campaign for Children
Global Alliance for Behavioral Health and Social Justice
Inseparable
International OCD Foundation
The Jed Foundation
The Kennedy Forum
Maternal Mental Health Leadership Alliance
Mental Health America
National Alliance on Mental Illness (NAMI)
The National Alliance to Advance Adolescent Health
National Association for Children's Behavioral Health
National Association of School Psychologists
National Association of Social Workers
National Association of State Mental Health Program Directors
National Council for Mental Wellbeing
National Federation of Families
National Register of Health Service Psychologists
The Policy Center for Maternal Mental Health
Psychotherapy Action Network
REDC Consortium
RI International
Sandy Hook Promise
Schizophrenia & Psychosis Action Alliance
SMART Recovery
Trust for America's Health

CC:

Chair Tammy Baldwin
Ranking Member Shelley Moore Capito
Ranking Member Robert Aderholt

ⁱ "Youth Risk Behavior Survey Data Summary & Trends Report," Centers for Disease Control and Prevention, February 2023.

ⁱⁱ Cuijpers P, Pineda BS, Quero S, Karyotaki E, Struijs SY, Figueroa CA, Llamas JA, Furukawa TA, Muñoz RF. Psychological interventions to prevent the onset of depressive disorders: A meta-analysis of randomized controlled trials. *Clinical psychology review*. 2021 Feb 1;83:101955.

ⁱⁱⁱ Mei C, van der Gaag M, Nelson B, Smit F, Yuen HP, Berger M, Krcmar M, French P, Amminger GP, Bechdolf A, Cuijpers P. Preventive interventions for individuals at ultra high risk for psychosis: An updated and extended meta-analysis. *Clinical psychology review*. 2021 Jun 1;86:102005