

May 31, 2024

The Honorable Cathy McMorris Rodgers
Chair
House Energy & Commerce Committee
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Frank Pallone
Ranking Member
House Energy & Commerce Committee
2322 Rayburn House Office Building
Washington, DC 20515

The Honorable Brett Guthrie
Chair
Health Subcommittee
House Energy & Commerce Committee
2434 Rayburn House Office Building
Washington, DC 20515

The Honorable Anna Eshoo
Ranking Member
Health Subcommittee
House Energy & Commerce Committee
272 Cannon House Office Building
Washington, DC 20515

Dear Chair McMorris Rodgers, Ranking Member Pallone, Chair Guthrie and Ranking Member Eshoo,

The Mental Health Liaison Group ([MHLG](#)) writes to share our support for **H.R. 7808**, the *Early Action and Responsiveness Lifts Youth (EARLY) Minds Act*, which will improve the Community Mental Health Services Block Grant (MHBG), by allowing 5% of funds to be used prevention and early intervention services. The MHBG is the Substance Abuse and Mental Health Services Administration's (SAMHSA) most significant investment in the expansion and provision of mental health services across the country and it must be enabled to adapt to support services which prevent worsening mental health outcomes for both children and adults.

We continue to face a national crisis in mental health, with more than 50 million Americans experiencing a mental illness and more than half of those individuals going without treatment.ⁱ 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.ⁱⁱ 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. Allowing states to use a portion of the MHBG funds for upstream interventions would facilitate funding for programs that provide help 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 SEDⁱⁱⁱ. Additionally, psychotherapy and related supports to reduce stressors have prevented the onset of psychosis among those at high risk.^{iv}

Prevention and early intervention services are particularly critical for children teens and young adults, 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. The EARLY Minds Act recognizes that early identification and intervention works for kids. If enacted, it would help states to better meet children's mental health needs.

Further, we applaud the inclusion of a report to Congress from SAMHSA on which states take up this option, how they use the dollars to support access to prevention and early intervention, and the age and demographics of those served. Since the EARLY Minds Act takes the approach of allowing states to use a portion of their funds for prevention and early intervention services, rather than requiring states to make this investment, the required report to Congress by SAMHSA is absolutely critical. The report will provide Congress with vital information needed to inform future action to support access to prevention and early intervention across the country.

The EARLY Minds Act will support states in taking a proactive, 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 may not have been diagnosed with an SED or SMI and yet would greatly benefit from connections to mental health services and support.

The EARLY Minds Act is bipartisan legislation to enact a commonsense change to an existing federal program, that will enable states to use that investment to fund a wider array of services across the continuum of care, for both adults and children. The undersigned member organizations of the Mental Health Liaison Group strongly encourage the Energy and Commerce Committee to take up this legislation this year.

Sincerely,

American Academy of Pediatrics
American Association for Psychoanalysis in Clinical Social Work
American Association of Child and Adolescent Psychiatry
American Association of Child and Adolescent Psychiatry
American Counseling Association
American Foundation for Suicide Prevention

American Mental Health Counselors Association
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)
Centerstone
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Children's Hospital Association
Clinical Social Work Association
Crisis Text Line
Depression and Bipolar Support Alliance (DBSA)
First Focus Campaign for Children
Global Alliance for Behavioral Health & Social Justice
Inseparable
International OCD Foundation
International Society of Psychiatric-Mental Health Nurses
Mental Health America
National Alliance on Mental Illness
National Association of Pediatric Nurse Practitioners
National Association of School Psychologists
National Association of Social Workers (NASW)
National Association of State Mental Health Program Directors
National Council for Mental Wellbeing
National Federation of Families
National League for Nursing
National Register of Health Service Psychologists
Nemours Children's Health
Postpartum Support International
Psychotherapy Action Network
REDC Consortium
Sandy Hook Promise
SMART Recovery
The Carter Center
The Kennedy Forum
The National Alliance to Advance Adolescent Health
Trust for America's Health
Youth Villages

CC:

Rep. August Pfluger
Rep. Kathy Castor
Rep. John Joyce
Rep. John Sarbanes

ⁱ Reinert, M, Fritze, D. & Nguyen, T. (October 2021). “The State of Mental Health in America 2022” Mental Health America, Alexandria VA.

ⁱⁱ “Youth Risk Behavior Survey Data Summary & Trends Report,” Centers for Disease Control and Prevention, February 2023.

ⁱⁱⁱ 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.

^{iv} 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.