

Policy At A Glance:

Recent Federal Mental Health Policies

The COVID-19 pandemic highlighted and worsened the national mental health crisis. This brief will cover three federal policies that aim to support and educate individuals and groups experiencing mental health concerns, raise awareness, and reduce the stigma associated with seeking mental health services.

Introduction

The COVID-19 pandemic highlighted and exacerbated the mental health crisis facing Americans. Due to the urgency of this issue, the United States federal government passed essential mental health policies. These new laws aim to enhance and establish policies and programs geared to improve the mental health of vulnerable populations, raise awareness, and educate groups on how to identify and address different mental health issues (e.g., suicide, burnout, and depression). In addition, these federal policies aim to support individuals and groups experiencing mental health concerns and reduce the stigma associated with seeking and using mental health services.

This brief will cover the following federal policies:

1. American Rescue Plan Act of 2021 (H.R. 1319)
2. Dr. Lorna Breen Health Care Provider Protection Act (H.R. 1667)
3. STANDUP Act of 2021 (H.R. 1543)

Recent Federal Mental Health Laws

- 3/11/2022** American Rescue Plan Act (H.R. 1319)
- 3/15/2022** STAND UP Act of 2021 (H.R. 1543)
- 3/18/2022** Dr. Lorna Breen Healthcare Provider Protection Act (H.R. 1667)



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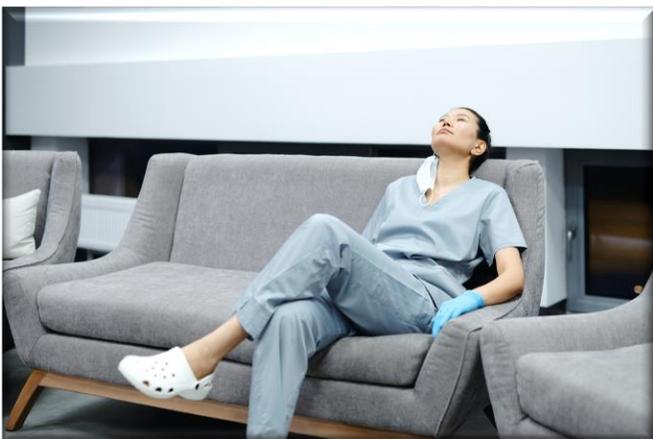


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H.R. 1319 American Rescue Plan Act of 2021

On March 11, 2022, President Biden signed the American Rescue Plan Act of 2021 (H.R. 1319) into law.¹ H.R. 1319 is a \$1.9 trillion COVID-19 relief package that includes mental health, education, public health, nutrition, housing, and other critical provisions. Some of the mental health provisions covered by H.R. 1319 include the following:²

1. Provide block grants for community mental health services and for mental health and substance use services
2. Promote access to mental health services among school-aged youth and their families
3. Increase access to pediatric mental health services in primary care settings
4. Provide additional funding for Project Aware, which promotes access to mental health services among school-aged youth and their families
5. Invest \$103 million to address the devastating mental health crisis facing healthcare professionals



H.R. 1667 Dr. Lorna Breen Health Care Provider Protection Act

On March 18, 2022, President Biden signed the Dr. Lorna Breen Health Care Provider Protection Act (H.R. 1667) into law to strengthen the federal government's commitment to addressing the mental health crisis.⁴

The law is named after Dr. Lorna Breen, a New York City emergency medicine physician who tragically died by suicide in 2020 after experiencing mental strain stemming from the COVID-19 pandemic. Physicians and other healthcare professionals have higher rates of burnout and suicide risk than the general population.⁵ More than ever, healthcare professionals need support to adequately address their mental health concerns in an environment void of stigma and judgment.

The Dr. Lorna Breen Health Care Provider Protection Act is a transformational law that invests \$135 million to redesign the U.S. healthcare system by transforming and enhancing the mental health culture. H.R. 1667 aims to do the following:⁴

1. Establish a national evidence-based education and awareness initiative
2. Enhance or establish evidence-based programs committed to improving the mental health and resiliency of the healthcare workforce
3. Conduct a comprehensive research study that examines the root cause of the issue and aids in the development of a roadmap for future legislation

To learn more about the Dr. Lorna Breen Health Care Provider Protection Act, please refer to the [May 2022 Policy At A Glance](#).



H.R. 1543 STAND UP Act of 2021

On March 15, 2022, President Biden signed the Suicide Training and Awareness Nationally Delivered for Universal Prevention (STANDUP) Act of 2021 (H.R. 1543) into law to encourage states and tribes to expand and implement evidence-based and culturally appropriate suicide prevention training for 6th through 12th graders in the school setting.⁶

Prior to the COVID-19 pandemic, suicide has been the second leading cause of death among youth aged 10 to 24 years.⁷ During the COVID-19 pandemic, the Centers for Disease Control and Prevention (CDC) reported that 1 in 4 students had suicidal thoughts, highlighting the devastating impact of the COVID-19 pandemic on the mental health of our nation's youth.⁸ It is worth noting that younger adults, essential workers, racial/ethnic minorities, and unpaid adult caregivers reported elevated suicidal

ideations and disproportionately worse mental health outcomes.⁸

A promising note is that suicide is preventable. Approximately 70% of people who die by suicide demonstrate warning signs or tell someone about their plans.⁹ However, a highly prevalent education gap prevents youth and adults from noticing the warning signs and properly intervening before someone commits suicide.⁹ To address this issue, the STANDUP Act of 2021 offers the following provisions:¹⁰

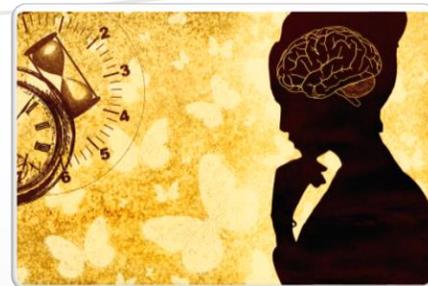
1. Establish and implement a school-based student suicide awareness and prevention training policy
2. Ensure these suicide awareness and prevention programs are evidence-based and culturally and linguistically appropriate and educate students on how to seek help for themselves and others
3. Require states, tribes, and schools to train students, teachers, and administrators on how to address and identify threats before a suicide event occurs
4. Add new requirements to an existing grant program, Project Aware, which promotes access to mental health services among school-aged youth and their families. Of note, when the Department of Health and Human Services (HHS) awards certain grants, HHS is required to give preference to tribal, state, and local education agencies that plan to implement evidence-based suicide prevention and training policies.

Conclusion

The COVID-19 pandemic exacerbated the existing national mental health crisis and generated a sense of urgency to pass federal policies such as H.R. 1319, H.R. 1667, and H.R. 1543. It is worth noting that these policies address a wide range of groups disproportionately impacted by this crisis (e.g., healthcare providers, youth, and essential workers). Although these policies are a step in the right direction in addressing the national mental health crisis, more work needs to be done. There is a need for more permanent and sustainable solutions that provide adequate funding to continue the tremendous efforts stemming from these policies.

References

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Did you know?

Over half of adults with a mental illness do not receive treatment, equating to 27 million adults in the U.S. who go untreated.¹¹



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