

July 27, 2021

Dear Member of Congress,

On behalf of the 38 undersigned national organizations of the Mental Health Liaison Group, representing mental health and addiction providers, including school-based mental health providers, individuals affected by mental health and substance use disorders, family members, advocates and other stakeholders committed to strengthening Americans' access to mental health and addiction care, we encourage your support and co-sponsorship of the Increasing Access to Mental Health in Schools Act (S. 1811/ H.R. 3572).

Our nation is facing a growing mental health crisis among our young people, including the alarming rise in youth suicide rates. Left unaddressed, mental health problems interfere with learning, behavior, social engagement, overall well-being, and sometimes physical safety. By 7th grade, approximately 40% of students will experience a mental health concern like depression or anxiety and each year one-in-five students will meet diagnostic criteria for a mental health disorder. Alarming, approximately 80% of children and youth in need of services will not receive them. Of those who do receive services, the vast majority get access through their school. Research shows that students are more likely to receive mental health services if they are offered at school – especially in low-income communities.

Unfortunately, we have a critical shortage of school psychologists and other school mental health professionals that prevents many students from receiving the mental health supports they need to thrive and succeed. The National Association of School Psychologists (NASP) recommends a ratio of 1 school psychologist for every 500 students. Current data indicate a national ratio of approximately 1:1400, which is almost 3 times the recommendation. Some school districts report ratios of 1:4000. School counselors, school social workers, and other school mental health professionals face similar shortages. These critical shortages impact school's ability to provide comprehensive mental and behavioral health services that include wellness promotion, early identification and intervention and inhibit the development of collaborative partnerships with community agencies and providers to support students with more significant needs. This legislation is a critical step toward addressing the shortage and improving access to services by providing grants to create partnerships between local education agencies and universities. These partnerships will help train, recruit, and retain school mental health professionals in high need districts experiencing shortages. The legislation further directs the U.S. Department of Education to establish a loan forgiveness program for school mental health providers who serve in areas with significant need.

In 2019, Congress directed the US Department of Education to create a demonstration grant modeled off this legislation. The Mental Health Service Professional Demonstration Grant program has since provided grants to 26 local education agencies to support and demonstrate innovative partnerships to train school-based mental health service providers for employment in schools. Grant recipients have been able to hire additional school psychologists, social workers, counselors, and other school mental health providers; provide travel stipends and health insurance coverage for interns placed in schools; offer additional training and professional development on evidence-based strategies; purchase therapy resources and supplies for instruction and clinical internships; and lower the cost of attendance for graduate education. Grantees have shared how this grant has incentivized school-based mental health

interns to work in rural and isolated districts, reducing unmanageable caseloads for existing school-based practitioners and providing much needed support to teachers facing burnout and high stress levels.

If enacted, we believe that this comprehensive, multi-pronged approach to this problem will make a remarkably positive, long-term impact on students, schools and communities. The Mental Health Liaison Group urges you to co-sponsor the bill and support its passage. If you would like to sign on as a Senate co-sponsor, contact Justin Folsom at justin_folsom@tester.senate.gov // If you would like to sign on as a House co-sponsor, contact David Silberberg at david.silberberg@mail.house.gov.

Feel free to contact Dr. Kelly Vaillancourt Strobach, NASP Director of Policy and Advocacy (kvallancourt@naspweb.org), with any questions or for additional information.

Sincerely,

National Association of School Psychologists

American Association of Suicidology

American Art Therapy Association

American Association for Psychoanalysis in Clinical Social Work

American Association of Suicidology

American Counseling Association

American Psychological Association

Anxiety and Depression Association of America

Association for Ambulatory Behavioral Healthcare

Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)

Clinical Social Work Association

Depression and Bipolar Support Alliance

Eating Disorders Coalition for Research, Policy & Action

Girls Inc.

Global Alliance for Behavioral Health and Social Justice

International OCD Foundation

International Society for Psychiatric Mental Health Nurses

Juvenile Protective Association (JPA)

National Alliance on Mental Illness

National Association of Pediatric Nurse Practitioners

National Association of Social Workers

National Association of State Mental Health Program Directors

National Center for School Mental Health
National Council for Mental Wellbeing
National Federation of Families
National League for Nursing
Psychotherapy Action Network (PsiAN)
REDC Consortium
RI International, Inc.
Sandy Hook Promise
School Social Work Association of America
SMART Recovery
The Jed Foundation
The Kennedy Forum
The National Alliance to Advance Adolescent Health
The Trevor Project
Well Being Trust