

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.<sup>i</sup> 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.<sup>ii</sup> 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 SED<sup>iii</sup>. Additionally, psychotherapy and related supports to reduce stressors have prevented the onset of psychosis among those at high risk.<sup>iv</sup>

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

---

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

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

<sup>iii</sup> 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.

<sup>iv</sup> 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.