

# **Mental health is not a partisan issue**

by Chuck Ingoglia, opinion contributor - 02/25/23 4:00 PM ET



No one is immune from a mental health or substance use challenge.

Sen. John Fetterman (D-Pa.) reminded us of that when he announced he will seek treatment for clinical depression.

And the Centers for Disease Control and Prevention (CDC) last week provided a harrowing reminder of how widespread our nation’s mental health crisis has become, reporting that nearly one in three high school girls in 2021 seriously considered suicide.

When it comes to mental health challenges, age, gender, race and status are merely details, and an enormous amount of work remains to help the growing number of people seeking treatment. We must connect more Americans to care, strengthen the capacity to provide treatment, overcome the workforce shortage and expand access to evidence-based prevention, harm reduction, treatment and recovery.

Finding meaningful solutions to address our mental health and substance use crises will require a bipartisan approach.

Substance use and mental health programs received the federal support they deserved in 2022. The year-end funding package passed in December 2022 and the Bipartisan Safer Communities Act, signed into law in June 2022, resulted in more federal funding in a year for programs to help those with mental health and substance use challenges than we’ve seen in any session of Congress.

That included funding to combat the opioid epidemic, supplement mental health block grants, invest in Certified Community Behavioral Health Clinics (CCBHCs) and support the National Institute of Mental Health (NIMH) and the Substance Abuse and Mental Health Services Administration’s (SAMHSA) suicide prevention activities.

In addition to funding, the legislation passed last year included expansion of the CCBHC demonstration program by allowing any state or territory the opportunity to participate in the program, while allocating additional planning grant funding for states to develop proposals to participate. It also included passage of the Mental Health Access Improvement Act, Mainstreaming Addiction Treatment (MAT) Act and Medication Access and Training Expansion Act, which lawmakers tucked into the year-end funding package.

Those were monumental legislative accomplishments, and we will look back on 2022 as a watershed moment for our field. But it wasn’t a coincidence that we made historic progress. It wasn’t luck. There is no substitute for bipartisanship, and today our field has numerous allies on both sides of the aisle who understand the urgency of the mental health and substance use crises.

Sens. Chris Murphy (D-Conn.) and John Cornyn (R-Texas) introduced the Bipartisan Safer Communities Act.

Sen. Mike Crapo (R-Idaho) has long demonstrated a commitment to expanding access to services through CCBHCs, expanding telehealth capabilities and promoting integrated physical and mental health care services in Idaho and across the country.

The Excellence in Mental Health and Addiction Treatment Act of 2021 had bipartisan support in the Senate — from Sens. Debbie Stabenow (D-Mich.), Ron Wyden (D-Ore.), Steve Daines (R-Mont.), Catherine Cortez Masto (D-Nev.), Joni Ernst (R-Iowa), Tina Smith (D-Minn.), Jon Tester (D-Mont.) and recently retired Sen. Roy Blunt (R-Mo.) — and in the House — from Reps. Doris Matsui (D-Calif.), Markwayne Mullin (R-Okla.), Angie Craig (D-Minn.), David McKinley (R-W.Va.), Paul Tonko (D-N.Y.) and Brian Fitzpatrick (R-Pa.).

More work remains, and we urge lawmakers to build on the progress they made in 2022.

A workforce shortage has made it difficult to meet the overwhelming demand for mental health and substance use treatment. The Wall Street Journal recently reported that the Health Resources and Services Administration (HRSA) estimated the shortage of mental health professionals was nearly 8,000 in 2022, up from 2,593 in 2013. That has left more than 158 million people without access to care, up from 94.8 million a decade ago, according to HRSA.

We must reverse those trends. We need continued investments to attract and retain workers. We need to develop more pipelines that provide multiple avenues to employment in a growing field. Investments in programs to cultivate the mental health and substance use workforce will help us overcome the workforce shortage. More importantly, it will help those in need of care who can’t find a provider.

So, we will continue working with lawmakers on both sides of the aisle to ensure substance use and mental health programs receive funding. We will continue our bipartisan efforts to repair a crippling workforce shortage. And we will do everything we can to make mental wellbeing, including recovery from substance use challenges, a reality for everyone.

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