

April 7, 2020

The Honorable Nancy Pelosi, Speaker  
United States House of Representatives  
1236 Longworth House Office Building  
Washington, D.C. 20515

The Honorable Mitch McConnell, Leader  
United States Senate  
317 Russell Senate Office Building  
Washington, D.C. 20510

The Honorable Kevin McCarthy, Leader  
United States House of Representatives  
2468 Rayburn House Office Building  
Washington, D.C. 20515

The Honorable Charles Schumer, Leader  
United States Senate  
322 Hart Senate Office Building  
Washington, D.C. 20510

**RE: Supporting the Mental Health of Americans Impacted by COVID-19 through Peer Support**

Dear Speaker Pelosi and Leaders McConnell, McCarthy, and Schumer:

The undersigned organizations are grateful for the actions Congress has taken to address the urgent needs facing the health care industry and to deliver relief to families and small businesses. As you continue to advance policies to support our nation during this difficult time, it is important to recognize the impact COVID 19 is having on the whole health of individuals and communities. At this time of great uncertainty and anxiety, we urge you to *provide funding for virtual peer support programs for individuals, including group support meetings, for individuals with behavioral health conditions and substance use disorders.*

In response to the COVID-19 pandemic, the President has issued guidance recommending that individuals self-isolate for at least two full weeks if they have been exposed to or are experiencing symptoms of the virus, and to cancel or postpone gatherings of 10 or more people. For those with higher risk of infection, individuals are advised to stay home as much as possible. At this time all but essential business operations have been closed throughout the nation with the guidance having been extended until April 30<sup>th</sup>.

The sequence of events in other countries affected by the virus indicates that social distancing can aid in slowing the spread of the virus and is a vital precaution to take to protect public health. However, physical distancing can have a profound impact on the mental health of individuals—increasing feelings of isolation and removing access to certain key factors of an individual's mental health wellness and/or treatment plan.

According to the Substance Abuse and Mental Health Services Administration, disasters such as the one we are currently facing can result in serious mental or emotional distress for individuals and communities, which can in turn create new or exacerbate current mental health concerns. Finding and utilizing support in a timely fashion can help individuals mitigate negative outcomes.

Experts in the field have long pointed out that the gold standard of treatment for behavioral health conditions and substance use disorders is the combination of 1) traditional behavioral health care; 2) prescription medication when necessary (and administered pursuant to best practices); and 3) community-based recovery support.

Peer support, as provided by certified peer support/recovery specialists and in the context of mutual aid group support meetings, addresses that vital 3rd component of the gold standard. Now, during the COVID-19 crisis, when we are all sheltering in place (which for many means alone, in isolation) community-based recovery support is needed more than ever. Providing that third component in real time, virtually, where anyone can participate in safety, even while the treatment centers, community centers and other usual meeting places are not open, is essential, and Congress needs to recognize as such by providing needed financial support. Additionally, peer support is critical to ensuring health equity among vulnerable populations such as those experiencing domestic violence and living with such conditions as HIV and other major health conditions. Peer support is a recommended public health strategy for individuals in these populations.

### **Virtual Peer Support**

Peer support offered through mutual aid groups for people living with behavioral health conditions and substance abuse disorders is critical. In one survey, over 85 percent of individuals who attended a mental health mutual aid meeting stated they were more willing to take medications, cope with side effects, and follow their doctor's instructions. Even more encouraging, those who attended mutual aid meetings for more than a year were less likely to be hospitalized within the past year.<sup>1</sup>

Virtual or online mutual aid meetings are needed now to take the place of these lifesaving in-person meetings. Online mutual aid meetings can reduce the sense of isolation for individuals without access to in-person support due to distance, reticence, or in this case, a global pandemic.

Organizations are currently offering online support groups, but the demand is high and continues to grow. Before the coronavirus outbreak one organization reported over 2,100 individuals were "waitlisted" to join one of their groups. That same organization reported new registrations for online support groups have doubled in the last three weeks and waiting lists for meetings jumped 94 percent in this same period.<sup>2</sup>

In addition to participation in mutual aid groups, people living with mental health conditions benefit from peer support delivered by a certified peer support specialist. These paraprofessionals are individuals with the lived experience of recovery from a mental health or substance use disorder who use their personal experience to provide hope and inspiration— characteristics much in demand during this time of crisis. This evidence-based practice helps individuals navigate the often-confusing health care system, get the most out of treatment, identify community resources and develop resiliency.<sup>3,4,5</sup>

Emergency funding will enable these organizations to increase capacity to provide both virtual group peer support around the country and one-on-one virtual peer support regardless of geographic location by:

- Providing technical equipment and platform accessibility to organizations
- Providing technical assistance to organizations and communities around the country looking to bring this service to their communities
- Providing employment for certified peer support/recovery specialists— people with lived experience and recovery from a mental health conditions— to facilitate the online virtual mutual aid meetings and provide one-on-one peer support
- Train additional certified peer support/recovery specialists to meet this need

Member organizations of MHLG look forward to working with appropriate federal agencies to develop the appropriate guidelines to ensure that local and national non-profit organizations are able to access and utilize these critically needed resources.

The time to act is now. As physical-distancing increases isolation more and more Americans will begin to be impacted with mental health conditions. Providing peer support delivered by Americans who know through personal experience how to build resiliency and navigate through difficult challenges paves the way for a healthier United States as we all recover and work towards whole health outcomes.

Sincerely,

2020 Mom

Anxiety and Depression Association of America  
American Association for Geriatric Psychiatry  
American Association for Psychoanalysis in Clinical Social Work  
American Association on Health and Disability  
American Association of Suicidology  
American Counseling Association  
American Foundation for Suicide Prevention  
American Mental Health Counselors Association  
American Psychiatric Association  
American Psychological Association  
American Psychoanalytic Association  
Anxiety and Depression Association of America  
Association for Ambulatory Behavioral Healthcare  
Association for Behavioral Health and Wellness  
Children and Adults with Attention-Deficit/Hyperactivity Disorder  
Clinical Social Work Association  
Depression and Bipolar Support Alliance  
Global Alliance for Behavioral Health and Social Justice  
International Certification & Reciprocity Consortium  
The Kennedy Forum  
Mental Health America  
NAADAC, the Association for Addiction Professionals  
National Alliance on Mental Illness  
The National Alliance to Advance Adolescent Health  
National Association for Behavioral Healthcare  
National Association of County Behavioral Health & Development Disability Directors  
National Association of Rural Mental Health  
National Association of State Alcohol and Drug Abuse Directors

National Association of State Mental Health Program Directors  
National Council for Behavioral Health  
National Disability Rights Network  
National Federation of Families for Children’s Mental Health  
National Register of Health Service Psychologists  
NHMH - No Health without Mental Health  
Postpartum Support International  
Schizophrenia and Related Disorders Alliance of America  
SMART Recovery  
Treatment Communities of America  
The Trevor Project

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1. Depression and Bipolar Support Alliance, Agitation and Emergency Care survey, December 2015
2. Ibid.
3. Solomon P, Draine J, Delaney M. The working alliance and consumer case management. *J Ment Health Admin.* 1995;22:126–134
4. Wexler B, Davidson L, Styron T. Severe and persistent mental illness. In: Jacobs S, Griffith EEH, editors. *40 years of academic public psychiatry.* London: Wiley; 2008. pp. 1–20
5. Davidson L, Stayner DA, Chinman MJ. Preventing relapse and readmission in psychosis: using patients’ subjective experience in designing clinical interventions. In: Martindale B, editor. *Outcome studies in psychological treatments of psychotic conditions.* London: Gaskell; 2000. pp. 134–156