



Tim Murphy

U.S. Congressman for the 18th District of Pennsylvania

The Helping Families in Mental Health Crisis Act

Untreated serious mental illness in recent acts of mass violence – Adam Lanza (Newtown, CT), James Holmes (Aurora, CO), Jared Loughner (Tucson, AZ), Aaron Alexis (Washington, DC), Elliot Rodger (Santa Barbara, CA) – demands action.

The federal government spends \$130 billion annually on mental health. Yet, over the last 20 years the rates of violence, suicide, homelessness, victimization, and incarceration among the mentally have increased.

The House Energy & Commerce Subcommittee on Oversight and Investigations revealed that those who need help the most have been getting it the least. An astounding forty percent of Americans with a serious mental illness (SMI) are not receiving treatment.

Despite this record of failure, the Substance Abuse and Mental Health Services Administration (SAMHSA) has not been reauthorized since the Clinton Administration. More than half of the programs for those with serious mental illness at SAMHSA have never been evaluated for effectiveness or quality.

That is why I will reintroduce the **Helping Families in Mental Health Crisis Act** (H.R. 3717, 113th) to refocus programs and resources to families and patients with the most challenging cases of serious mental illnesses and bring accountability to federal programs. The legislation:

Reforms the Substance Abuse & Mental Health Services Administration (SAMHSA)

For the first time, brings accountability to how mental health dollars are spent. Requires grant recipients to follow evidence-based standards, eliminates unauthorized programs, and mandates congressional oversight of all federal behavioral health grants. Prohibits taxpayer dollars from going to legal advocates and antipsychiatry activists working to stop medical care.

Empowers Parents and Caregivers

Breaks down barriers to allow families to work with doctors and mental health professionals to be part of the front-line care delivery team

Fixes Shortage of Inpatient Beds

Provides more psychiatric hospital beds, instead of expensive emergency rooms, for those experiencing a mental health crisis and in need of immediate inpatient care.

Reaching Underserved and Rural Populations

Advances tele-psychiatry to link pediatricians and primary care doctors with psychiatrists and psychologists in areas where patients don't have access to mental health professionals.

High Quality Behavioral Health Clinics

Improves quality, accountability, and access to integrated medical and mental healthcare at community mental health providers.

Alternatives to Institutionalization

Helps those with serious mental illness get into treatment when they are unable to understand the gravity of their condition and cannot voluntarily seek out care, thereby reducing rates of imprisonment, homelessness, substance abuse, and costly ER visits.

Advances Critical Medical Research

Increases funding for brain research to better understand the underlying causes of neurological and psychiatric conditions. Advances successful NIMH early intervention programs like Recovery After Initial Schizophrenia Episode (RAISE), which reduces suicide rates & helps patients recover through a combination of low-dose medication and support services.

Criminal Justice Reforms

Expands Crisis Intervention Team training for law enforcement, so patients are treated in the healthcare system and not warehoused in the criminal justice system.

Integrates Primary & Behavioral Care

Extends health IT laws, so mental health providers can coordinate care with primary care doctors using electronic medical records

Organizations & Media Outlets Supporting the Helping Families in Mental Health Crisis Act

Organizations

American Academy of Child & Adolescent Psychiatry
American Academy of Emergency Medicine
American Academy of Forensic Sciences
American College of Emergency Physicians
American Occupational Therapy Association, Inc.
American Psychiatric Association
American Psychological Association
California Psychiatric Association
Center for Substance Abuse Research
College of Psychiatric and Neurologic Pharmacists
Developmental Disabilities Area Board 10 LA
Mental Health Association of Essex County, NJ
Mental Illness FACTS
Mental Illness Policy Organization
Nat. Assoc. for the Advancement of Psychoanalysis
Nat. Assoc. of Psychiatric Health Systems
National Alliance on Mental Illness (NAMI)
NAMI Kentucky
NAMI Los Angeles County
NAMI New York State
NAMI Ohio
NAMI San Francisco

NAMI West Side Los Angeles
Nat. Council for Behavioral Health
National Sheriffs' Association
No Health Without Mental Health
Pennsylvania Medical Society
St. Paulus Lutheran Church (San Francisco)
Sheppard Pratt Hospital
Treatment Advocacy Center
Treatment Before Tragedy
U. of Pittsburgh, Department of Psychiatry
Washington Psychiatric Society
NY State Assoc. of Chiefs of Police

Media

The Wall Street Journal
The Washington Post
National Review
Pittsburgh Post-Gazette
The Sacramento Bee
The Arizona Republic
The Orange County Register

The Toledo Blade
Houston Chronicle
Raleigh News & Observer
Bradenton Herald
The Cecil Whig (MD)
Express-Times (Lehigh Valley, PA)
Fresno Bee
Mansfield News Journal
Ocala Star-Banner (FL)
San Mateo Journal (CA)
Sarasota Herald-Tribune
Seattle Times
Washington Observer-Reporter (PA)
Tampa Tribune