

November 14, 2022

The Honorable Nancy Pelosi  
Speaker of the House  
United States House of Representatives  
1236 Longworth House Office Building  
Washington, DC 20515

The Honorable Kevin McCarthy  
Minority Leader  
United States House of Representatives  
2468 Rayburn House Office Building  
Washington, DC 20515

The Honorable Chuck Schumer  
Majority Leader  
United States Senate  
322 Hart Senate Office Building  
Washington, DC 20510

The Honorable Mitch McConnell  
Minority Leader  
United States Senate  
317 Russell Senate Office Building  
Washington, DC 20510

Dear Speaker Pelosi, Majority Leader Schumer, Minority Leader McCarthy, and Minority Leader McConnell:

On behalf of the Child and Adolescent Mental Health (CAMH) Coalition, a group of organizations representing a diverse array of perspectives, dedicated to promoting the mental health and well-being of infants, children, adolescents, and young adults, we write to thank you for the work that has been done to address the mental and behavioral health needs of the nation's youth in the 117<sup>th</sup> Congress. However, while important, initial steps have been taken to address the youth mental health crisis in the U.S., the mental health of our nation's youth continues to deteriorate. We urge you to advance legislation before the end of the year that enhances pediatric mental health promotion, prevention, early intervention, and treatment, as well as supporting and growing the pediatric workforce which is the foundation for this care.

Last month marks the one-year anniversary of the [declaration](#) of a National State of Emergency in Children's Mental Health issued by the American Academy of Pediatrics, the American Academy of Child and Adolescent Psychiatry, and the Children's Hospital Association. In recognition of this anniversary, 144 national and state organizations [came together](#) to urge the Biden Administration to treat the youth mental health crisis as the national emergency it continues to be and declare a federal National Emergency in children's mental health. We echo that call to action to Congress.

Taking action on youth mental health is increasingly important as respiratory syncytial virus (RSV) rates rise and hospitals are approaching 100% of their capacity to care for sick children. While most children who have RSV, influenza, COVID-19, and other viral illnesses are able to recover in their homes, some need critical medical support in a hospital. However, many emergency department and inpatient beds in hospitals are occupied by children and adolescents with mental health needs that may be better met in another setting but they have no options for care other than in a hospital, where they are too often boarding waiting for placement in appropriate care. Addressing this crisis will require investments in the full continuum of mental and behavioral health care from promotion and prevention to early identification and treatment to meet the needs of children and adolescents. Otherwise, children in mental health crisis will continue to face significant care delays and we can expect that emergency department and inpatient beds will continue to be at or near capacity when seasonal viruses, COVID-19 and other emergencies occur.

Before the end of the year, we urge Congress to come together to make additional investments and prioritize solutions that address the youth mental health crisis. While we support the reauthorization of a number of existing programs in SAMHA and HRSA, current federal programs and investments are simply not sufficient to address this emergency now and mitigate the crisis in the long term. Steps must be taken to bolster the

pediatric mental health care workforce across disciplines and to ensure that community-based supports are available for youth in need of care. Further, we support substantial, meaningful Medicaid investments targeted to reach pediatric professionals and expand access to mental and behavioral health services for children and youth. To support the full continuum of child and adolescent mental health care and expand our national capacity to deliver timely care in appropriate settings for children, new dedicated investments in pediatric health care infrastructure are vital, including to grow the pediatric behavioral health workforce.

On behalf of our organizations, we thank you for the work that has been done already this year to address the mental health needs of children and adolescents. As you work on end of the year legislation, we look forward to working with you and your staff to ensure that children and adolescents' unique needs are well addressed and incorporated in any final legislation. If we can be of further assistance, please contact Tamar Magarik Haro at [tharo@aap.org](mailto:tharo@aap.org).

Sincerely,

AIDS Alliance for Women, Infants, Children, Youth & Families  
American Academy of Family Physicians  
American Academy of Pediatrics  
American Association of Child and Adolescent Psychiatry  
American Foundation for Suicide Prevention  
American Psychiatric Association  
American Psychological Association  
Association of Children's Residential & Community services (ACRC)  
Catholic Health Association of the United States  
Children's Hospital Association  
CLASP  
Family Voices  
First Focus on Children  
Mental Health America  
MomsRising  
National Association of Pediatric Nurse Practitioners  
National Black Women's HIV/AIDS Network, Inc.  
National Children's Alliance  
National Health Law Program  
Nemours Children's Health  
Sandy Hook Promise  
School Social Work Association of America  
School-Based Health Alliance  
The National Alliance to Advance Adolescent Health  
Youth Villages