October 3, 2016

To: Anderson Cooper and Martha Raddatz, Moderators of the October 9th Presidential Town Hall Debate

Re: Public mental health crisis

Thank you for taking on the public responsibility of moderating the upcoming 2016 presidential debates. We recognize the enormity of balancing competing interests to ensure that voters are well-informed about where the candidates stand on important issues of our day.

One critically important issue stands out for consideration in the next presidential debate: the public mental health crisis facing our country. It’s the crisis we aren’t talking about enough and Americans need to know where their candidates stand on the topic. As you can see, the following numbers are alarming, and many are only getting worse. What plans do the candidates have to address this crisis?

The U.S. suicide rate is the highest it’s been in 30 years.
The suicide rate continues to grow and is a crisis that affects Americans of all ages. The suicide rate jumped 24 percent from 1999-2014. Among middle-aged women (45-64 years old), the suicide rate skyrocketed by 63 percent during this time period. Suicide is the second leading cause of death for 15-24 year olds. An average of 20 veterans die by suicide every day—a rate far higher than the U.S. average. About 2.5 times more people die by suicide—over 42,000 Americans every year—than die by homicide.

One in five people live with mental illness. More than half don’t get mental health care.
Mental health care is unavailable or unaffordable for many Americans. About 17 million children experience mental health problems and more than 43 million adults live with a mental health condition, yet 50 percent of people do not receive mental health treatment. Not being able to afford the cost is the top reason, which is compounded by a national shortage of mental health providers. This shortage is most pronounced in low-income communities and in rural areas.

Mental health conditions are the second most common reason teens are hospitalized.
Not only are our youth and young adults committing suicide at high rates, they are also experiencing mental health conditions that are serious enough to require a hospital stay. In 2012, more than 162,000 hospital stays among 13-18 year olds were for mental health conditions—the second leading cause of teen hospitalizations. We know that 50 percent of all mental illness begins by age 14; 75 percent by age 24, and that early treatment leads to better outcomes. However, in the U.S., there is an average delay of 74 weeks from first symptoms of psychosis to when a person receives care.

Two million people with mental illness are admitted to jails each year.
Our criminal justice system is becoming our default mental health system. Today, people with serious mental illness are overrepresented among people who are incarcerated, especially women. Most are in jail for non-violent offenses, and most receive no treatment after admission. Many people with mental illness leave jail in worse health than when they entered, and we currently don’t have a system that
effectively addresses their needs in the community. All of this comes at a tremendous cost to individuals, families, communities and taxpayers.

**We need to be talking about mental health. Our country can do better.**

Mental health research, services and supports lag far behind that devoted to other chronic conditions, despite the economic impact of mental illness of nearly $200 billion per year in lost earnings and an untold toll on individuals, families and communities. Meaningful reform of our mental health system will require both leadership from the next President and the commitment and ability to work effectively with Congress and with the many federal agencies who touch Americans who live with mental illness.

We are calling on you to raise the issue of the candidates’ plans for addressing this life-threatening and life-saving topic during the October 9th Presidential Town Hall debates.

Signed,
American Academy of Child & Adolescent Psychiatry
American Art Therapy Association
American Association for Marriage and Family Therapy
American Dance Therapy Association
American Foundation for Suicide Prevention
American Group Psychotherapy Association
American Orthopsychiatric Association
American Psychiatric Association
American Psychological Association
Anxiety and Depression Association of America
Association for Ambulatory Behavioral Healthcare
Association for Behavioral Health and Wellness
Clinical Social Work Association
Depression and Bipolar Support Alliance
Eating Disorders Coalition
Luis de la Parte Florida Mental Health Institute
Mental Health America
National Alliance on Mental Illness
National Alliance to Advance Adolescent Health
National Association for Rural Mental Health
National Association for Children’s Behavioral Health
National Association of County Behavioral Health and Developmental Disability Directors
National Association of Social Workers
National Association of State Mental Health Program Directors
National Council for Behavioral Health
National Disability Rights Network
National Health Care for the Homeless Council
National Federation of Families for Children’s Mental Health
No Health Without Mental Health
Sandy Hook Promise

*For more information, please contact:*
Angela Kimball
NAMI National Director, Advocacy & Public Policy
akimball@nami.org
(703) 516-7972