Mike’s Mental Health and Suicide Prevention Plan

One in five American adults struggles with mental health issues, and problems are increasing among adolescents. Since 2005, the incidence of major depression among adolescents has risen more than 50%. Anxiety disorders are the most common mental illness; some 6.8 million people in the U.S. – roughly 3% of the adult population – suffer from generalized anxiety disorder. And too few are getting the treatment they need. The evidence shows that with better mental health screening and treatment, we could prevent more severe depression and other mental health disorders, physical health problems such as heart disease, and even suicide.

The U.S. suicide rate has grown by a third since 1999. In 2017, 47,173 people took their own lives. Men are three and a half times more likely than women to kill themselves, and middle-aged white men are especially at risk, accounting for 70% of all suicides. Other groups also face heightened risks. In 2017, the suicide rate among veterans was 1.5 times the rate for people who haven’t served in the military. Now, 17 veterans die by suicide every day. And although women are less prone to suicide than men, their rate is increasing faster – narrowing this gender gap. Suicide has also become the second leading cause of death among people aged 10-24, a 56% increase from 2007-2017. For children ages 10-14, the rate has nearly tripled. These deaths, entirely preventable, are contributing to the decline in life expectancy across the U.S.

Furthermore, young people of color and LGBTQ+ people are more likely to suffer from poor mental health. LGBTQ+ people face a higher risk of substance use disorders, STDs, anxiety, and depression – and when seeking health care services, often encounter discrimination and clinicians who lack appropriate training.

There is no single reason that rates of anxiety, depression, and suicide are climbing; many factors are at play – from instability abroad to chaotic and uncertain leadership at home. Problems are compounded by the onslaught of social media and a 24-hour news cycle.

1 NAMI, Mental Health Facts in America.
2 Science Daily, Mental Health Issues Increased Significantly In Young Adults Over Last Decade, March 2019.
3 Anxiety and Depression Association of America, Generalized Anxiety Disorder.
4 Mental Health America, New State Rankings Shines Light On Mental Health Crisis, Show Differences In Blue, Red States, October 2016.
5 CDC, Preventing Adverse Childhood Experiences.
7 CDC, Suicide and Self-Inflicted Injury.
8 American Foundation for Suicide Prevention, Suicide Statistics.
10 Military Times, New Veteran Suicide Numbers Raise Concerns Among Experts Hoping For Positive News, October 2019.
11 CDC, Suicide Rates in the United States Continue to Increase, June 2018.
12 National Center for Health Statistics, Death Rates Due to Suicide and Homicide Among Persons Aged 10–24, October 2017.
13 National Center for Health Statistics, Death Rates Due to Suicide and Homicide Among Persons Aged 10–24, October 2017.
14 American Academy of Family Physicians, CDC Data Show U.S. Life Expectancy Continues to Decline, December 2018.
15 Philadelphia Inquirer, Study Links Race Bias, Depression In Black Teens, December 2019.
16 Human Rights Campaign Foundation, Mental Health And The LGBTQ Community, July 2017.
Suicide risk is greatly increased by the widespread availability of firearms; Americans have more guns per person than any other country. And suicides increase during periods of increased stress or reduced security – as they did during the Great Depression and World War II. Finally, increased use of opioids has contributed to both accidental deaths and suicides.

Medications and evidence-based psychotherapies to treat depression, anxiety and addiction are available, and health care providers have greater knowledge about mental health than ever before. Yet treatment is stigmatized and hard to access: either because of provider shortages or expensive out-of-pocket costs. Currently, 65% of non-metropolitan counties have no psychiatrists.

Mike Bloomberg has a multifaceted plan to improve access to mental health care and reduce suicides in the U.S.

1. **Make mental health services more affordable.** Mike will enforce mental health parity laws to ensure that insurance companies are providing beneficiaries with comprehensive mental health services and making the copays affordable.

2. **Increase mental health screenings.**

   - **Screenings in school.** A significant and growing number of schoolchildren suffer from anxiety, depression, and other mental health problems. Diagnosing and addressing these issues earlier on can prevent bigger problems later on, from poor academic performance to dropping out to self-destructive behaviors. Mike will make sure that school personnel receive effective training for how to identify and help youth in crisis. Ideally, all schools should conduct universal mental health screening, but not all schools have the resources or the expertise to do so. Less than 15% of schools are estimated to have such screening. Mike will direct the Department of Education to work with the Substance Abuse and Mental Health Services Agency to create model screening programs for schools and work with states on new funding for such programs, and for teacher training to understand how learning is affected by mental health problems.

   - **Screenings in primary care.** Mike will improve screening and treatment for depression, including for adolescents, in primary care. And because almost 40% of people who attempt suicide see a doctor within the preceding week, he will make sure that residency programs for the appropriate specialties train providers in suicide prevention. Mike will also increase community training for doctors and psychiatric nurses who are already practicing. And he will

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22 CNN, *The U.S. Suicide Rate is up 33% Since 2019, Research Says*, June 2019.
27 American Journal of Preventive Medicine, *Geographic Variation in the Supply of Selected Behavioral Health Providers*, June 2018.
28 CDC, *Data and Statistics on Children's Mental Health*.
30 Washington State Department of Health, *Suicide Prevention Training for Health Professions*. 
use the National Health Service Corps, which offers loan repayment and scholarship opportunities to health care workers who practice in high need areas, to increase the number of practicing psychiatrists and psychiatric nurses in rural areas. In particular, there is a major shortage of psychiatrists that treat adolescents and children.\(^\text{31}\)

3. **Emphasize suicide prevention.**

- **Suicide hotline.** Mike will increase funding for the Substance Abuse and Mental Health Services Administration’s suicide prevention budget (now roughly $62 million\(^\text{32}\) annually). SAMHSA currently partners with state and local groups to run the national suicide prevention hotline. Mike will also encourage public-private partnerships with groups like Crisis Text Line, which provide text services and counselors to help people in crisis, something that has shown great promise\(^\text{33}\) in preventing youth suicides.

- **Veteran suicide prevention.** Mike will expand Department of Defense suicide-prevention programs by improving data collection, outreach, and mental health screening. Although veterans can now access mental health care via telehealth, Mike will authorize the Department of Veterans Affairs to hire more mental health care providers, increase the number of sites where veterans can access telehealth, and better connect every service member transitioning from military to civilian to VHA health care.

4. **Increase supportive housing.**

- To help those with mental illness that has led to homelessness, Mike will expand permanent supportive housing, which provides stability to the chronic homeless. He will also provide services to address substance use disorders and help people move on to independent living. This approach has been proven\(^\text{34}\) to improve health and lower public costs by reducing the use of publicly funded crisis services, including shelters, hospitals, psychiatric centers, and prisons.

- Mike will direct federal agencies – including the departments of education, health, transportation, and housing – to collaborate on new programs that address the social determinants of health, like housing. He will expand low-income housing tax credits\(^\text{35}\) and ensure that eligible units are built in low-poverty areas and in places where substantial investments have been made to improve schools and reduce crime. He will also allow more flexibility\(^\text{36}\) for Medicaid and other public health care dollars to be spent directly on housing.

5. **Pass a national red-flag law.** Mike will instate a national red-flag law to allow family members to get a judge’s order to temporarily remove firearms from people who seem likely to harm themselves or others. He will also use 48-hour waiting periods for gun purchases to help prevent impulsive suicides. And finally, he will mandate safe storage of guns so they’re not easily borrowed by people looking to take their own lives.

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32 HHS, *HHS FY2016 Budget in Brief*.
36 MACPAC, *Medicaid’s Role In Housing*, October 2018.
6. **Improve the economic outlook to reduce stress to American families.** Finally, poor mental health doesn’t occur in a vacuum. There is a lot of evidence that anxiety and depression\(^{37}\) are correlated with financial stress. Many Americans don’t have enough savings to cover a $1000 emergency.\(^{38}\) This means that life’s highs – a special occasion that requires a new dress or suit – and lows – an unexpected hospitalization – add to an already stressful life. Creating better employment opportunities and increasing the minimum wage to $15 will improve the financial, mental\(^{39}\) and physical health\(^{40}\) of Americans.


\(^{39}\) Journal of Epidemiology and Community Health, *Effects Of Increased Minimum Wages By Unemployment Rate On Suicide In The USA*, January 2020.