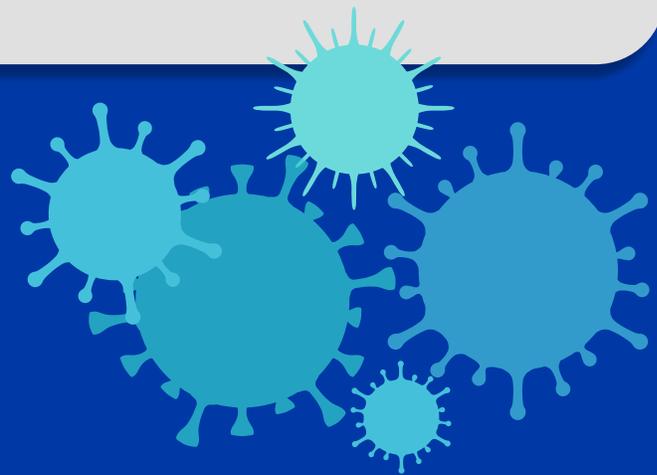


**MILKEN
INSTITUTE**
CENTER FOR
STRATEGIC PHILANTHROPY

Philanthropic Action for a Better Mental Health System

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GIVING SMARTER IN THE AGE OF COVID-19

ABOUT US

About the Milken Institute

The Milken Institute is a nonprofit, nonpartisan think tank.

For the past three decades, the Milken Institute has served as a catalyst for practical, scalable solutions to global challenges by connecting human, financial, and educational resources to those who need them. Guided by a conviction that the best ideas, under-resourced, cannot succeed, we conduct research and analysis and convene top experts, innovators, and influencers from different backgrounds and competing viewpoints. We leverage this expertise and insight to construct programs and policy initiatives.

These activities are designed to help people build meaningful lives in which they can experience health and well-being, pursue effective education and gainful employment, and access the resources required to create ever-expanding opportunities for themselves and their broader communities.

About the Center for Strategic Philanthropy

The Milken Institute Center for Strategic Philanthropy advises philanthropists and foundations seeking to develop and implement transformative giving strategies.



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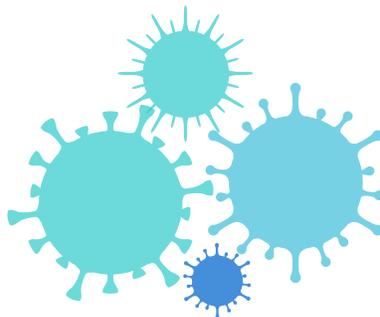


EXECUTIVE SUMMARY

Three distinct but interrelated drivers have arisen from the COVID-19 pandemic and are presenting challenges to America's mental health: the COVID-19 disease itself, the mitigation effects intended to keep people and communities safe, and the economic fallout and massive unemployment that continues to unfold. The mounting mental health crisis, which includes widespread symptoms of anxiety, depression, psychological trauma, substance abuse, and increased suicidality, is further taxing a broken mental health care ecosystem that already struggled with insufficient funding, inadequate access to care, and ineffective treatment long before the pandemic began.

This present moment is a clarion call for the philanthropic community, which is uniquely positioned to lead a multipronged approach to meet the pressing need in two distinct ways. First, in the short-term, the immediate mental health crisis can be mitigated by supporting interventions for the most vulnerable Americans, the development and deployment of rapidly available mental health tools and technologies, and research to drive evidence-based responses to COVID-19-related mental health challenges.

Second, philanthropy is poised to address the long-term mental health impacts caused by the pandemic. There is an ongoing and urgent need for targeted investment in research to better understand, treat, and cure mental health conditions, build capacity and diversity within the mental health system, and advocate for social and policy solutions to improve the ecosystem of mental health care in the United States. By deploying assets to mitigate the evolving mental health crisis caused by the coronavirus pandemic, philanthropists can have a direct and lasting impact on the lives of millions of Americans.



DRIVERS OF A GROWING MENTAL HEALTH CRISIS

The grief, uncertainty, fear, and disruptions to daily life caused by COVID-19 have drastically affected the mental health of Americans of all ages and exacerbated pre-existing challenges for people living with mental illnesses or substance abuse conditions. Without immediate and sustained financial support and resources, mental health challenges will spiral into a widespread and long-lasting crisis of mental illness, substance abuse, and suicide.

Experts have cited three primary drivers of a growing mental health crisis accelerated by the COVID-19 pandemic:

- 1) the **COVID-19 disease** itself,
- 2) the **mitigation effects** intended to keep people and communities safe, and
- 3) the **economic fallout and massive unemployment** resulting from the disease and mitigation strategies.

As discussed during a recent [Milken Institute webinar](#), these primary drivers are medical, social, and economic. They operate in discrete waves but are dynamic and interrelated. They also coalesce to create an omnipresent environment of [uncertainty and confusion](#) that exacerbates collective emotional strain. Much of the uncertainty is to be expected, given the novelty of this virus and the scientific and medical community's evolving understanding of it. However, throughout the pandemic, the public has received [inconsistent, conflicting, and partisan](#) messages from authorities about the severity of the disease, strategies to mitigate its spread and impact, and the economic fallout. Variations in the public health response across different geographies and politicization of the health crisis further intensify entrenched societal inequalities and collective mental health challenges. As it becomes increasingly clear that the social and economic sacrifices required of Americans in spring 2020 were insufficient to avoid a sustained or secondary wave of infections, Americans face an uncertain road ahead.

GLOSSARY

Mental Health refers to cognitive, behavioral, and emotional well-being; preventing or treating mental illness; and preventing or intervening in substance abuse. Mental health affects daily living, relationships, and physical health.

Substance Abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs, which can lead to dependence and addiction.

Mental Illness refers to a condition that affects a person's thinking, feeling, behavior, or mood. These conditions impact day-to-day living and how people relate to others and here are interchangeable with the term "mental health condition."

The COVID-19 Disease Itself

The disease burden of COVID-19 itself is creating widespread fear and anxiety. People are afraid that they or their loved ones may become seriously ill and may not recover. In addition, individuals and families face uncertainty about employment or caregiving responsibilities if they become sick and worry about social isolation that would be required to prevent the spread of infection.

The novel SARS-CoV-2 virus that causes COVID-19 has killed nearly 185,000 people in the United States as of this writing. This coronavirus is highly contagious, the novel disease that it causes is poorly understood and highly variable in different people, and no effective treatments or vaccines exist. People at high risk for contracting the disease (i.e., due to [age or underlying health conditions](#), inability to [limit their contact](#) with others, or entrenched [health disparities](#) and income inequality due to race or ethnicity) are reporting the highest levels of acute [fear and anxiety](#) about COVID-19. For example, Black Americans and other people of color are disproportionately impacted by COVID-19, experiencing [higher rates](#) of infection, hospitalization, and death. They are also experiencing more [symptoms of anxiety and depression](#) related to the coronavirus than white Americans.

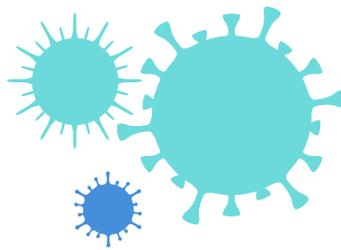
People in different parts of the country are not experiencing the pandemic at the same time or in the same way. Concerns about COVID-19 may depend on [political and religious ideologies](#) and are not necessarily correlated with the severity of the threat to individual or public health. As the virus spreads to [new geographic regions](#), researchers see spikes in anxiety in tandem with spikes in coronavirus cases. As communities moved to ease lockdown measures and resume economic activity in late spring 2020, the resulting surges in coronavirus cases were followed by surges of mental health challenges.

Mitigation Efforts

Physical distancing, workplace and school closures, and stay-at-home orders are necessary to slow the spread of the disease, but they have become major factors driving population-wide emotional distress. Loneliness, anxiety, and depression are devastating by-products of the disease as people are isolated from their families, friends, and their wider communities. Americans who cannot afford to miss work or cannot stay home, or have been deemed essential to the country's functioning, are at a higher risk for exposure to the virus and face additional strains on their emotional well-being. As the pandemic persists and government leaders ease restrictions, people must calculate risks and make difficult decisions for themselves and their families. New stressors emerge as these individual decisions may not align with leaders' directions or the social behaviors of other community members.

Economic Impacts

Even before mandatory mitigation orders and regional lockdowns took effect, people began to reduce their economic activity because of the public health risks posed by the virus. Similarly, the economic damage caused by the COVID-19 pandemic will persist after regions re-open and economic activity resumes. As of this writing, [30 million Americans](#) have reported job losses, while millions of others are experiencing reduced wages and reduced work hours. The scale and speed of this economic calamity are unprecedented, and vulnerable groups are bearing the brunt. Since the pandemic intensified, a growing share of [lower-income adults](#) have reported a loss in household jobs or wages. Even as regions re-open, the persistent public health crisis raises concerns about the timeline for full financial recovery and Americans who may be left behind.



IMPACTS OF COVID-19 ON MENTAL HEALTH

Disproportionate Risk and Impact on Vulnerable Populations

The three primary drivers of mental health challenges related to COVID-19 are not affecting all Americans equally. As one writer stated about the [pandemic](#), we are all in the same storm, but we are not all in the same boat. An exemplar of this reality is the disproportionate risk to mental health for vulnerable populations, such as frontline and health-care workers, people with a pre-existing mental illness or substance use disorders, people experiencing homelessness, people of color, immigrants, older Americans, children and adolescents, and LGBTQ+ individuals. The pandemic exacerbates long-standing and deeply entrenched inequalities in American society, ranging from institutional racism and socioeconomic inequities to structural failures within the health-care system. The insufficient American response to the pandemic underscores the societal imperative to support individuals who will be most impacted by the mental health ramifications of this public health crisis.

Psychological Trauma, Grief, and Post-Traumatic Stress Disorder (PTSD)

For people who become seriously ill themselves, the [mental toll](#) can be severe and long-lasting. Nearly one-third of patients in an intensive care unit (ICU) or similar hospital setting develop a condition known as "[ICU psychosis](#)," a form of delirium that arises from the extreme conditions of their hospitalization. Compounding this situation, hospitalized COVID-19 patients are physically isolated and barred from in-person visitations, which could provide comfort, stability, and mental stimulation.

For COVID-19 patients, psychological trauma and distress can persist for days to months after recovery from physical symptoms and may evolve into PTSD or depression. Some cohorts may be more susceptible to lingering damage to their mental health, such as people with a pre-existing mental health condition, a [prolonged battle](#) with the disease, a particularly severe case, or a traumatic recovery period.

Caregivers of people who contracted or died from COVID-19 are also susceptible to [lasting trauma](#), depression, and PTSD. The nation is experiencing an unprecedented magnitude of grief and bereavement at the individual and collective scales. Abstract numbers of this magnitude can be difficult to conceptualize, but the death of each individual has dramatic and long-lasting effects on countless family, friends, and community members. These effects are exacerbated by social-distancing requirements that have prevented families from saying their final goodbye to their loved ones or mourning their losses together. As in all facets of this pandemic, Black and Latinx Americans are bearing a disproportionate burden of the disease because they are nearly [three times as likely](#) as white Americans to know someone who has died from COVID-19 personally.

Grief, psychological trauma, and anxiety are further exacerbated for frontline [health-care workers](#) caring for the sick and critically ill. The excruciating demands of providing care during this pandemic cause severe anxiety and isolation and, for many, may lead to [long-term trauma and PTSD](#). Since the pandemic began, [overwhelming numbers](#) of doctors, nurses, technicians, and other essential medical workers have reported symptoms of depression, anxiety, insomnia, and distress. High-profile reports of physician suicides underscore the serious mental health challenges facing this community.

Isolation, Loneliness, and “Deaths of Despair”

People who live alone or in communities that cannot allow visitors are at increased risk for developing mental illnesses and substance use disorders. In addition, older adults and households with adolescents were already at [higher risk](#) for depression and suicidal ideation, and the social isolation imposed by the pandemic is [exacerbating these issues](#). These concerns may become more prevalent as cases rise, forcing people who are particularly susceptible to the virus to remain confined and increasing their feelings of isolation, anxiety, and despair.

Social isolation caused by the pandemic poses acute mental health challenges for children and adolescents, [17 million of whom already live with a mental health disorder](#). Children and adolescents have lost [educational opportunities](#), social support critical for learning and growth, and are missing fundamental developmental milestones. It is highly likely that the coming months will bring new waves of [serious mental health disorders](#) and increasing suicidality among the youngest Americans.

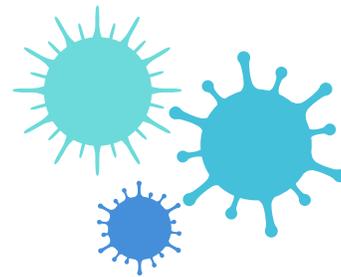
In examining previous economic recessions, researchers have, over time, established a [direct relationship](#) between declines in economic and social well-being and increased rates of death from drugs, alcohol, and suicide, a phenomenon that has been termed “[deaths of despair](#).” For example, [studies](#) from the Great US Recession of 2007-2009 found a strong association between the unemployment rate and the rate of suicides in the US. Recent [reports](#) and [models](#) estimate that tens of thousands more “deaths of despair” will stem from a COVID-19-induced economic recession, with Americans in vulnerable communities disproportionately affected. Indeed, we are already seeing these outcomes, with a [surge in drug overdose deaths](#) amid the first four months of the coronavirus pandemic. Without proper mitigation efforts, a wide-reaching shadow of chronic mental health conditions and preventable death will trail the economic impacts wrought by the pandemic for years to come.

Anxiety, Depression, and Burnout

Nationwide polls have found that nearly half of US adults report that the pandemic has [negatively affected their mental health](#), with one-third showing [signs of clinical anxiety and depression](#). These effects are [most severe](#) in adults who face multiple stressors, such as essential workers, people with pre-existing health conditions that make them more vulnerable, people living with economic insecurity, and people of color.

Caregiving for children or older family members during the pandemic poses serious threats to mental well-being and increases the likelihood of emotional burnout. Many parents and caregivers, especially essential employees and people with lower incomes, cannot afford to stay home or miss work. With schools, daycare centers, and summer camps closed, caregivers must make incredibly difficult choices and accommodations. For others, the abrupt transition to remote work without school or childcare requires an almost unattainable balance of professional demands with round-the-clock care for and education of children.

People who isolate at home or work remotely are also susceptible to anxiety, depression, and feelings of burnout. The mass home-confinement directives instituted in spring 2020 were unfamiliar, unsettling, stress-inducing, and will likely have [long-term effects](#) on mental health and psychological well-being. As the country struggles to resume economic activity in the absence of proven therapeutics or a vaccine to the novel coronavirus, its citizens are grappling with fresh waves of fear and anxiety due to their increased exposure to the virus.



IMPACTS OF COVID-19 ON MENTAL HEALTH TREATMENT AND CARE

[National statistics](#) show that one in five US adults experience serious mental illness each year, with fewer than half (43 percent) receiving treatment. The proportions are similar for [children and adolescents](#). COVID-19 presents additional challenges for people who seek mental health care or support—due to increased demand for these services, decreased availability of mental health service providers, and insufficient effectiveness of available therapeutics to treat mental illnesses.

Multiple Barriers to Mental Health Treatment and Care

Prior to the COVID-19 pandemic, the American mental health care system was chronically underfunded and undermined by a severe shortage of doctors, nurses, social workers, and other mental health professionals. During the pandemic, many mental health care organizations and providers have been forced to further reduce capacity due to staff layoffs or furloughs and to [reduce programs and services](#). Further, physical distancing requirements has limited the number of in-person visits available.

The US government has relaxed rules governing telehealth service to increase access to mental health care outside of a physical setting, but these changes will last only for the duration of the national Public Health Emergency declaration. While telehealth services seem to be a net positive, they are largely unstudied. Further, they offer an imperfect solution for some populations and present challenges for treating conditions such as drug and alcohol addiction and suicide ideation.

People who seek treatment for mental health conditions encounter high costs and insufficient insurance coverage—[barriers to access](#) that have been exacerbated by the economic fallout from the pandemic. Many Americans receive employer-sponsored health care, and therefore job losses result in insurance “[coverage gaps](#).” The fallout will likely outlast the current emergency declaration, and financial support for mental health care providers and people who seek virtual or in-person care will be critical to meeting increasing demand.

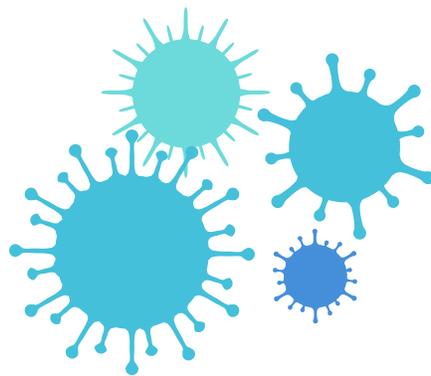
Increased Demand for Mental Health Support

Data from online crisis support services, such as [Crisis Text Line](#), reveal a 40 percent increase in volume months into the pandemic compared to “normal” levels. The US government’s [Disaster Distress Helpline](#), the [National Suicide Prevention Lifeline](#), and the online therapy company Talkspace [report similar increases](#). Extrapolations from [access data](#) collected before the pandemic suggest that roughly 75 percent of people in need of mental health treatment due to either prior need or new experience may be unable to access care today. Still, [national surveys](#) consistently show that gaps in knowledge and awareness of mental health resources and persistent stigma surrounding mental illnesses prevent millions of Americans from even seeking the treatment and support they need. Entrenched stigmas will have serious consequences as more Americans need mental health support.

Restrictions in mental health resources and access resulting from COVID-19 have immediate and serious consequences for individuals with urgent mental health conditions such as depression, anxiety, addiction, and thoughts or attempts of suicide. With reduced access to urgent mental health support, people are either seeking treatment in settings that increase their risk of contracting the virus, such as emergency departments, or not seeking treatment at all. Over time, reduced access to mental health care services will negatively impact people with chronic mental health conditions and with new psychological challenges that transition to chronic mental illnesses.

Interrupted Research for Treatments and Cures

Many people undergoing treatment for mental health conditions find that the drugs or treatments are not effective, have too many adverse side effects, lose effectiveness over time, or do not cure the underlying condition. The reasons for these results existed before the pandemic hit and include the non-specific effects of most drugs or treatments, a persistent lack of understanding about how therapeutics act in the brain, and incomplete knowledge of fundamental mechanisms that underlie mental health and substance abuse disorders. Ongoing research at the basic, translational, and clinical level is critical for untangling these complexities, expanding preventative measures, and finding better treatments and cures for mental health conditions. However, the COVID-19 pandemic caused an abrupt and dramatic cessation of research activities in research labs and clinical centers around the country and thwarted progress toward these goals.



A MULTIPRONGED APPROACH TO MEETING THE NEED

The impacts of the COVID-19 pandemic on mental health and emotional well-being are multifaceted and interconnected. The solutions to meet these challenges are similar and should be catalyzed by public and private support. Philanthropic investments from individuals, families, and foundations are uniquely positioned to address mental health challenges arising from or exacerbated by the COVID-19 pandemic.

The Milken Institute Center for Strategic Philanthropy has identified and categorized mechanisms through which philanthropy can support the nation's mental well-being both immediately and for the longer term. We provide multiple, actionable approaches within each category and highlight individual nonprofit organizations whose efforts exemplify these approaches. Although we highlight specific strategies and actions, such as providing immediate crisis counseling, conducting research, or advocating for policy changes, nearly all of these organizations deploy multifaceted efforts across a broad solution space to address short- to longer-term challenges.

OPPORTUNITY: IMMEDIATE CRISIS RESPONSE

- Intervene with vulnerable populations to support their mental health
- Support the development of and expand access to deployable tools to screen, prevent, and treat mental health conditions
- Catalyze research efforts to better understand mental health challenges related to COVID-19 and drive evidence-based responses

OPPORTUNITY: STRATEGIC PHILANTHROPY FOR LONG-TERM SOLUTIONS

- Invest in research for improved understanding of brain health, treatments, and cures for mental health conditions
- Increase capacity and diversify the mental health system
- Advocate for social and policy solutions to reduce stigma and improve the mental health ecosystem

OPPORTUNITY: IMMEDIATE CRISIS RESPONSE

The COVID-19 pandemic presents urgent challenges to mental health and emotional well-being that must be met with an immediate crisis response. These three strategies will address the most pressing mental health–related challenges stemming from the pandemic.

Intervene with Vulnerable Populations to Support Their Mental Health



Multiple populations are particularly vulnerable to the mental health impacts of COVID-19. They can be supported through a variety of acute interventions that meet the needs of discrete communities or act within specific geographies. These communities include but are not limited to frontline health-care workers, people with a pre-existing mental illness or a substance use disorder, people experiencing homelessness, Black Americans and other people of color, immigrants, older Americans, and children and adolescents. Philanthropic actions could support:

- crisis and grief counselors to engage with vulnerable communities, particularly in geographic regions hit hard by the coronavirus;
- existing mental health treatment infrastructure, including community urgent care and crisis facilities and local nonprofit organizations that depend on government funding that is at risk or has already been cut because of COVID-induced economic damage; and
- initiatives that combine mental health screening with resources and tools to improve emotional well-being or refer an individual for further treatment.

SPOTLIGHT

Black Emotional and Mental Health (BEAM) Collective

A nonprofit organization based in Los Angeles, California, the BEAM Collective is committed to the emotional health, mental health, and healing of Black communities. The Collective adopts a multifaceted approach to emotional health strategies, including educating and training peers and families to support themselves and each other. Among other work, the Collective maintains a Black Virtual Therapist Network to help people find a licensed Black therapist who is certified to deliver telemedicine and teletherapy. Learn more at: <https://www.beam.community/>

Support the Development of and Expand Access to Tools to Screen, Prevent, and Treat Mental Health Conditions



Digital mental health tools, such as text lines, online screening assessments, telehealth technologies, and online educational resources, meet an urgent need in an era of necessary physical distancing. These technologies and resources can be deployed immediately and also serve to expand access to mental health services for people who have limited income, mobility barriers, a lack of treatment options in their communities, or inadequate medical insurance coverage. Philanthropic actions could support:

- online clinics, text lines, and virtual peer support groups, especially those intended for Americans who are economically disadvantaged or struggling;
- access to electronic devices, such as phones, laptops, and tablets, and internet connectivity to communities with limited resources to increase telehealth access;
- dissemination of information and strategies for resilience, coping, emotional well-being, and mental health such as sleep, exercise, nutrition, stress-reduction techniques, and essential social interactions; and
- tools to train family members, friends, peers, employers, and other community members to identify signs of anxiety, burnout, mood disorders, substance use disorders, and other challenges.

SPOTLIGHT

Crisis Text Line

Crisis Text Line is a national, free, 24/7 crisis-intervention hotline that provides mental health support exclusively via text message. The nonprofit matches texters with live, trained crisis counselors who respond quickly to support people through difficult situations, diffuse crises, and provide referrals for longer-term counseling or therapy. Learn more at: <https://www.crisistextline.org/>

Catalyze Research to Better Understand Mental Health Challenges Related to COVID-19 and Drive Evidence-Based Responses



Research and evidence-based practices should be of utmost priority in the intervention and mitigation efforts to mental health challenges caused by COVID-19. However, because of the novelty of this coronavirus, not enough data exist to guide our efforts. Philanthropic support could catalyze research into the neurobiological, psychological, or social dimensions of COVID-19 across diverse populations such as:

- researching the influence of the COVID-19 disease and mitigation measures on brain function and psychological well-being;
- studying best practices for promoting adherence to behavioral and social measures that mitigate the spread of the coronavirus while minimizing mental health challenges; and
- understanding the effectiveness of methods for digital and virtual mental health interventions that have been deployed during the pandemic.

SPOTLIGHT

MQ Mental Health and the MQ Foundation

MQ Mental Health is the leading UK-based mental health research charity, with the MQ Foundation serving as its US-based arm. MQ influences high-level decision makers, coordinates research consortia and other collaborative arrangements, funds cutting-edge mental health research around the world, and engages people with lived experience in the research process. Learn more at: <https://www.mqmentalhealth.org/>

OPPORTUNITY: STRATEGIC PHILANTHROPY FOR LONG-TERM SOLUTIONS

The COVID-19 pandemic exposes fundamental flaws and disparities in the mental health ecosystem. CSP has uncovered three opportunities for immediate philanthropic investment that will have a long-term impact.

Invest in Research for Improved Understanding of Brain Health, Treatments, and Cures for Mental Health Conditions



The COVID-19 pandemic brought an abrupt halt to the basic, translational, and clinical research seeking to understand fundamental mechanisms of brain function and to develop new treatments and cures for mental health conditions. Diversion of funding to research coronaviruses and to develop vaccines and treatments is understandable; however, other biomedical research topics critical to the nation's mental health are suffering. Philanthropic investment is needed to:

- fund researchers working at the basic, translational, or clinical level to understand brain function and the causes of mental health and substance use disorders;
- support research to develop new methods to treat, diagnose, and prevent mental illnesses; and
- support scientists studying these issues who are at vulnerable career stages, such as trainees and investigators who have recently established independent research groups.

SPOTLIGHT

Brain and Behavior Research Foundation (BBRF)

BBRF is the nation's largest private funder of mental health research grants and is focused on improving the understanding, prevention, and treatment of psychiatric and mental illnesses. The foundation supports innovative research, such as early efforts to develop new treatments for depression including brain stimulation techniques and rapid-acting antidepressants. Learn more at: <https://www.bbrfoundation.org/>

Increase Capacity and Diversify the Mental Health System



The health-care system in the US currently lacks enough doctors, nurses, social workers, and other mental health professionals to meet the population's needs for mental health care and treatment. Long-term efforts are needed to increase the number, array, and diversity of professionals who can support holistic mental health and provide direct care, early intervention, and screening. Philanthropic actions could support:

- initiatives that increase the number of quality mental health care professionals and that diversify the community that can provide direct care and screening (efforts could include training physician assistants in mental health, educators in identifying signs of mood disorders, and other community members who interface with people who may be at risk for mental health conditions); and
- development of targeted educational programs and interventional tools for family, friends, peers, and colleagues to support mental and emotional well-being within communities and to identify early signs of mental health challenges.

SPOTLIGHT

The Child Mind Institute

The Child Mind Institute is a national nonprofit organization dedicated to the lives of children and families with mental health and learning disorders through clinical care, scientific research, education, and advocacy. Among other efforts, the Institute is expanding the ability to reach more children with direct mental health care by working directly with schools and mental health professionals to train academic administrators and teachers. Learn more at: <https://childmind.org/>

Advocate for Social and Policy Solutions to Reduce Stigma and Improve the Mental Health Ecosystem



Stigma and false beliefs about mental illness and addiction present persistent barriers for many people who need treatment and support. Many Americans who seek help for mental health conditions encounter a mental health care system that has long been in a state of crisis. The 2020 pandemic provides opportunities to normalize the need to prioritize emotional well-being, reduce stigma surrounding mental health challenges, and ultimately build a better system. Given the complexity of the challenges presented by COVID-19 to the nation's mental and emotional health and well-being, a multidimensional approach is needed across government, private organizations, and the nonprofit sector in all jurisdictions and geographies. Philanthropists could engage in long-term efforts to support the mental health landscape through advocacy and financial support for:

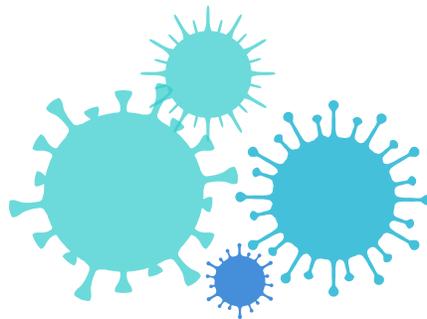
- improved and continued use of telehealth and digital technologies for mental health care;
- payment parity for primary and mental health care (for example, by advocating to extend emergency changes enacted during the coronavirus public health emergency);

- development of educational tools, resources, and social influence campaigns to reduce stigma surrounding mental health, reduce discrimination, and celebrate people with diverse neurological abilities; and
- further research to understand the social constructs that drive mental health challenges and inform evidence-based policy solutions.

SPOTLIGHT

One Mind

One Mind is a leading nonprofit organization that centers the patient experience and bridges gaps between mental health research funding and support for patients and others with lived experiences. One Mind's efforts include multiple initiatives to reduce mental illness stigma and advocate for systematic changes to the mental health care ecosystem. Learn more at: <https://onemind.org/>



A CALL TO ACTION FOR THE PHILANTHROPIC COMMUNITY

Stresses on Americans' mental health, and indeed on the mental health system as a whole, have been laid bare for all to see throughout the pandemic. Without immediate and sustained attention, these pressures will worsen. While the challenges on the system predated COVID-19, a multifaceted systems-approach, led by philanthropy, can lay the foundation for a strong system that will meet America's current and future mental health needs.



ACKNOWLEDGMENTS

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ABOUT THE AUTHORS

Sylvie Raver is an associate director at the Milken Institute Center for Strategic Philanthropy. She applies her expertise in neuroscience, mental health, biomedical research, and higher education to identify opportunities where philanthropic investments can have a transformative impact on medical research and health. In her role, Raver provides analysis and advice to individual philanthropists, families, and foundations and implements strategies to deploy philanthropic capital to advance research and health priorities. Previously, Raver worked for the Society for Neuroscience and led the Society's global programming and policy efforts around neuroscience training for individual scientists and members engaged in biomedical workforce education and training. Raver received her bachelor's degree from Lafayette College, her doctorate from the University of Maryland School of Medicine, and conducted her postdoctoral training at the National Institute on Aging. She works at the Institute's Washington, DC office.

Cara Altimus is a director at the Milken Institute Center for Strategic Philanthropy where she leads the Center's biomedical research portfolio. A PhD neuroscientist, Altimus advises individual philanthropists and foundations on the state of research for various areas, including neurodegenerative disease and mental health, to identify opportunities where their capital can make the biggest impact.

With more than a decade of experience in neuroscience research, including neurological devices, psychiatric illness, learning, and memory, as well as sleep and circadian rhythms, Altimus has led Center projects ranging from the development of a philanthropic drug development program for neurodegenerative disease to a large patient-perspectives study for depression and bipolar research.

Prior to joining the Institute, Altimus worked at the Food and Drug Administration leading the Neural Interfaces Laboratory, which evaluates the safety and effectiveness of electrical stimulation methods in the brain. In addition to her research experience, she serves as the chair for the Trainee Advisory Committee for the Society for Neuroscience, is an advisor to the Ontario Brain Institute, and spent a year as an AAAS Science and Technology Policy Fellow developing a neuroscience research portfolio at the Department of Justice. Altimus holds a bachelor's degree in genetics from the University of Georgia and a doctorate in biology from Johns Hopkins University. She works at the Institute's Washington, DC office.

