Union Calendar No. 452 H.R.5469

116TH CONGRESS 2D Session

U.S. GOVERNMENT INFORMATION

[Report No. 116-552]

To address mental health issues for youth, particularly youth of color, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 17, 2019

Mrs. WATSON COLEMAN (for herself, Mr. HASTINGS, Ms. NORTON, Mr. CLEAVER, Ms. OMAR, Mr. DANNY K. DAVIS of Illinois, Ms. ADAMS, Mrs. HAYES, Mr. HORSFORD, and Ms. LEE of California) introduced the following bill; which was referred to the Committee on Energy and Commerce

SEPTEMBER 29, 2020

Additional sponsors: Ms. MOORE, Ms. JOHNSON of Texas, Ms. JACKSON LEE, Ms. CLARKE of New York, Mr. GARCÍA of Illinois, Ms. PRESSLEY, Ms. BLUNT ROCHESTER, Mr. ENGEL, Mrs. BEATTY, Mr. CARSON of Indiana, Mr. THOMPSON of Mississippi, Ms. ROYBAL-ALLARD, Mr. SERRANO, Mr. PAYNE, Mr. CÁRDENAS, Ms. BARRAGÁN, Mr. TRONE, Ms. JAYAPAL, Mr. RASKIN, Mr. LOWENTHAL, Mr. SAN NICOLAS, Mr. SIRES, Ms. DEAN, Ms. SCANLON, Mrs. LAWRENCE, and Mr. DESAULNIER

SEPTEMBER 29, 2020

Reported with an amendment; committed to the Committee of the Whole House on the State of the Union and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on December 17, 2019]

A BILL

2

To address mental health issues for youth, particularly youth of color, and for other purposes.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,

3 SECTION 1. SHORT TITLE.

- 4 This Act may be cited as the "Pursuing Equity in
- 5 Mental Health Act".

6 SEC. 2. TABLE OF CONTENTS.

7 The table of contents for this Act is as follows:

Sec. 1. Short title. Sec. 2. Table of contents.

TITLE I—HEALTH EQUITY AND ACCOUNTABILITY

- Sec. 101. Integrated Health Care Demonstration Program.
- Sec. 102. Addressing racial and ethnic minority mental health disparities research gaps.
- Sec. 103. Health professions competencies to address racial and ethnic minority mental health disparities.
- Sec. 104. Racial and ethnic minority behavioral and mental health outreach and education strategy.
- Sec. 105. Additional funds for National Institutes of Health.
- Sec. 106. Additional funds for National Institute on Minority Health and Health Disparities.

TITLE II—OTHER PROVISIONS

Sec. 201. Reauthorization of Minority Fellowship Program. Sec. 202. Study on the Effects of Smartphone and Social Media Use on Adolescents.

8 TITLE I—HEALTH EQUITY AND 9 ACCOUNTABILITY

10 SEC. 101. INTEGRATED HEALTH CARE DEMONSTRATION

- 11 PROGRAM.
- 12 Part D of title V of the Public Health Service Act (42
- 13 U.S.C. 290dd et seq.) is amended by adding at the end the
- 14 *following*:

1"SEC. 554. INTERPROFESSIONAL HEALTH CARE TEAMS FOR2PROVISION OF BEHAVIORAL HEALTH CARE IN3PRIMARY CARE SETTINGS.

4 "(a) GRANTS.—The Secretary shall award grants to 5 eligible entities for the purpose of establishing interprofessional health care teams that provide behavioral health care. 6 7 "(b) ELIGIBLE ENTITIES.—To be eligible to receive a 8 grant under this section, an entity shall be a Federally 9 qualified health center (as defined in section 1861(aa) of the Social Security Act), rural health clinic, or behavioral 10 11 health program, serving a high proportion of individuals from racial and ethnic minority groups (as defined in sec-12 $tion \ 1707(q)).$ 13

14 "(c) SCIENTIFICALLY BASED.—Integrated health care
15 funded through this section shall be scientifically based, tak16 ing into consideration the results of the most recent peer17 reviewed research available.

"(d) AUTHORIZATION OF APPROPRIATIONS.—To carry
out this section, there is authorized to be appropriated
\$20,000,000 for each of the first 5 fiscal years following the
date of enactment of the Pursuing Equity in Mental Health
Act.".

1SEC. 102. ADDRESSING RACIAL AND ETHNIC MINORITY2MENTAL HEALTH DISPARITIES RESEARCH3GAPS.

4 Not later than 6 months after the date of the enactment 5 of this Act, the Director of the National Institutes of Health shall enter into an arrangement with the National Acad-6 7 emies of Sciences, Engineering, and Medicine (or, if the National Academies of Sciences, Engineering, and Medicine 8 9 decline to enter into such an arrangement, the Patient-Centered Outcomes Research Institute, the Agency for 10 Healthcare Research and Quality, or another appropriate 11 12 entity)—

(1) to conduct a study with respect to mental
health disparities in racial and ethnic minority
groups (as defined in section 1707(g) of the Public
Health Service Act (42 U.S.C. 300u-6(g))); and

17 (2) to submit to the Congress a report on the re18 sults of such study, including—

19 (A) a compilation of information on the dy20 namics of mental disorders in such racial and
21 ethnic minority groups; and

(B) a compilation of information on the
impact of exposure to community violence, adverse childhood experiences, structural racism,
and other psychological traumas on mental disorders in such racial and minority groups.

1SEC. 103. HEALTH PROFESSIONS COMPETENCIES TO AD-2DRESS RACIAL AND ETHNIC MINORITY MEN-3TAL HEALTH DISPARITIES.

4 (a) IN GENERAL.—The Secretary of Health and
5 Human Services shall award grants to qualified national
6 organizations for the purposes of—

7 (1) developing, and disseminating to health pro-8 fessional educational programs best practices or core 9 competencies addressing mental health disparities 10 among racial and ethnic minority groups for use in 11 the training of students in the professions of social 12 work, psychology, psychiatry, marriage and family 13 therapy, mental health counseling, and substance mis-14 use counseling; and

(2) certifying community health workers and
peer wellness specialists with respect to such best
practices and core competencies and integrating and
expanding the use of such workers and specialists into
health care to address mental health disparities
among racial and ethnic minority groups.

(b) BEST PRACTICES; CORE COMPETENCIES.—Organi22 zations receiving funds under subsection (a) may use the
23 funds to engage in the following activities related to the de24 velopment and dissemination of best practices or core com25 petencies described in subsection (a)(1):

1	(1) Formation of committees or working groups
2	comprised of experts from accredited health profes-
3	sions schools to identify best practices and core com-
4	petencies relating to mental health disparities among
5	racial and ethnic minority groups.
6	(2) Planning of workshops in national fora to
7	allow for public input into the educational needs as-
8	sociated with mental health disparities among racial
9	and ethnic minority groups.
10	(3) Dissemination and promotion of the use of
11	best practices or core competencies in undergraduate
12	and graduate health professions training programs
13	nationwide.
14	(4) Establishing external stakeholder advisory
15	boards to provide meaningful input into policy and
16	program development and best practices to reduce
17	mental health disparities among racial and ethnic
18	minority groups.
19	(c) DEFINITIONS.—In this section:
20	(1) QUALIFIED NATIONAL ORGANIZATION.—The
21	term "qualified national organization" means a na-
22	tional organization that focuses on the education of
23	students in one or more of the professions of social
24	work, psychology, psychiatry, marriage and family

1	therapy, mental health counseling, and substance mis-
2	use counseling.
3	(2) RACIAL AND ETHNIC MINORITY GROUP.—The
4	term "racial and ethnic minority group" has the
5	meaning given to such term in section $1707(g)$ of the
6	Public Health Service Act (42 U.S.C. 300u-6(g)).
7	SEC. 104. RACIAL AND ETHNIC MINORITY BEHAVIORAL AND
8	MENTAL HEALTH OUTREACH AND EDU-
9	CATION STRATEGY.
10	Part D of title V of the Public Health Service Act (42
11	U.S.C. 290dd et seq.), as amended by section 101, is further
12	amended by adding at the end the following new section:
13	"SEC. 555. BEHAVIORAL AND MENTAL HEALTH OUTREACH
14	AND EDUCATION STRATEGY.
15	"(a) IN GENERAL.—The Secretary shall, in consulta-
16	tion with advocacy and behavioral and mental health orga-
17	nizations serving racial and ethnic minority groups, de-
18	velop and implement an outreach and education strategy
19	to promote behavioral and mental health and reduce stigma
20	associated with mental health conditions and substance
21	abuse among racial and ethnic minority groups. Such strat-
22	egy shall—

23 "(1) be designed to—

1	"(A) meet the diverse cultural and language
2	needs of the various racial and ethnic minority
3	groups; and
4	``(B) be developmentally and age-appro-
5	priate;
6	"(2) increase awareness of symptoms of mental
7	illnesses common among such groups, taking into ac-
8	count differences within at-risk subgroups;
9	"(3) provide information on evidence-based, cul-
10	turally and linguistically appropriate and adapted
11	interventions and treatments;
12	"(4) ensure full participation of, and engage,
13	both consumers and community members in the devel-
14	opment and implementation of materials; and
15	"(5) seek to broaden the perspective among both
16	individuals in these groups and stakeholders serving
17	these groups to use a comprehensive public health ap-
18	proach to promoting behavioral health that addresses
19	a holistic view of health by focusing on the intersec-
20	tion between behavioral and physical health.
21	"(b) REPORTS.—Beginning not later than 1 year after
22	the date of the enactment of this section and annually there-
23	after, the Secretary shall submit to Congress, and make pub-

24 licly available, a report on the extent to which the strategy25 developed and implemented under subsection (a) increased

behavioral and mental health outcomes associated with
 mental health conditions and substance abuse among racial
 and ethnic minority groups.

4 "(c) DEFINITION.—In this section, the term 'racial
5 and ethnic minority group' has the meaning given to that
6 term in section 1707(g).

7 "(d) AUTHORIZATION OF APPROPRIATIONS.—There is
8 authorized to be appropriated to carry out this section
9 \$10,000,000 for each of fiscal years 2021 through 2025.".

10sec. 105. Additional funds for national institutes11of health.

12 (a) IN GENERAL.—In addition to amounts otherwise authorized to be appropriated to the National Institutes of 13 Health, there is authorized to be appropriated to such Insti-14 15 tutes \$100,000,000 for each of fiscal years 2021 through 2025 to build relations with communities and conduct or 16 support clinical research, including clinical research on ra-17 cial or ethnic disparities in physical and mental health. 18 19 (b) DEFINITION.—In this section, the term "clinical research" has the meaning given to such term in section 409 20

21 of the Public Health Service Act (42 U.S.C. 284d).

1SEC. 106. ADDITIONAL FUNDS FOR NATIONAL INSTITUTE2ON MINORITY HEALTH AND HEALTH DISPARI-3TIES.

In addition to amounts otherwise authorized to be appropriated to the National Institute on Minority Health
and Health Disparities, there is authorized to be appropriated to such Institute \$650,000,000 for each of fiscal
years 2021 through 2025.

9 TITLE II—OTHER PROVISIONS

10sec. 201. Reauthorization of minority fellowship11**PROGRAM.**

Section 597(c) of the Public Health Service Act (42
U.S.C. 297ll(c)) is amended by striking "\$12,669,000 for
each of fiscal years 2018 through 2022" and inserting
"\$25,000,000 for each of fiscal years 2021 through 2025".
SEC. 202. STUDY ON THE EFFECTS OF SMARTPHONE AND
SOCIAL MEDIA USE ON ADOLESCENTS.
(a) IN GENERAL.—Not later than 1 year after the date

19 of enactment of this Act, the Secretary of Health and20 Human Services shall conduct or support research on—

- 21 (1) smartphone and social media use by adoles22 cents; and
- 23 (2) the effects of such use on—
- 24 (A) emotional, behavioral, and physical
 25 health and development; and

(B) disparities in minority and under served populations.

3 (b) REPORT.—Not later than 5 years after the date
4 of the enactment of this Act, the Secretary shall submit to
5 the Congress, and make publicly available, a report on the
6 findings of research described in this section.

7 SEC. 203. TECHNICAL CORRECTION.

8 Title V of the Public Health Service Act (42 U.S.C.
9 290aa et seq.) is amended—

(1) by redesignating the second section 550 (42
U.S.C. 290ee-10) (relating to Sobriety Treatment
And Recovery Teams) as section 553; and

(2) by moving such section, as so redesignated,
so as to appear after section 552 (42 U.S.C. 290ee–
7).

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