



Bipartisan Virtual Peer Support Act

Sponsored by: Reps. Susie Lee (D-NV) and Fred Upton (R-MI)

Why do we need the Virtual Peer Support Act?

The COVID-19 pandemic has put immense pressure on Americans' mental health and created new barriers to care for people currently experiencing mental or emotional distress, as well as those living in recovery. The toll on Americans' mental health is only exacerbated as necessary measures taken to slow the spread of the virus lead to greater isolation and financial insecurity.ⁱ

Even prior to the pandemic, federal data and academic research showed an unmet need for behavioral health services across the United States.^{ii,iii} According to SAMHSA, shortages in the behavioral health workforce are a key reason that individuals with mental illnesses do not receive needed treatment. In recent years, there has been an increased focus on using peer support specialists—state-certified individuals who use their own recovery experience and training—to help address these shortages.^{iv}

How do peer support services work?

Peer Support Programs provide people living with behavioral conditions a place to build a community, share experiences, discuss coping skills, and offer hope to one another. They utilize state-certified peer support specialists who have achieved significant recovery to model recovery, teach skills, and offer support to assist others in their recovery journeys.^v

Research has shown that these evidence-based **peer support services** improve outcomes such as:

- reducing recurrent psychiatric hospitalization for patients at risk of readmission,
- improving individuals' relationship with their health care provider,
- reducing outpatient visits, and
- better engaging individuals in their course of treatment.

What would the Virtual Peer Support Act do?

During the pandemic, organizations that host virtual peer support groups have seen registrations double and the wait lists grow by 166%.^{vi} To maintain this critical support for at risk communities, the **Virtual Peer Support Act** would provide grant funding to expand and facilitate the transition of these services to online platforms.

Specifically, the bill would:

- Create a grant program to provide a one-time grant that would enable eligible local, tribal, and national organizations who currently offer behavioral health support services to transition from in-person meetings to online platforms, or build out their current online capacity to meet increased need due to the COVID-19 pandemic.
- Grant monies could be used for immediate implementation of peer support programs, virtual transition costs, development of the mental health workforce, and expanding services to meet community needs by offering demographic-specific peer support to groups including health care workers, Veterans, caregivers, seniors.
- The bill also requires that HHS report to Congress on the efficacy of these services.

Endorsements: Depression and Bipolar Support Alliance (DBSA), Mental Health America (MHA), National Alliance for Mental Illness (NAMI), American Nurses Association (ANA), American Foundation for Suicide Prevention (AFSP), Faces and Voices of Recovery (FAVOR), National Register of Health Service Psychologists, Maternal Mental Health Leadership Alliance, American Association on Health and Disability, Lakeshore Foundations, National Association of County Behavioral Health & Developmental Disability Directors (NACBHDD), National Association for Rural Mental Health (NARMH), Schizophrenia and Related Disorders Alliance of America, International Society for Psychiatric Mental Health Nurses, JED Foundation, American Association for Psychoanalysis in Clinical Social Work, National League for Nursing, National Association of Pediatric Nurse Practitioners, the National Association for Behavioral Intervention and Threat Assessment (NABITA), WestCare Foundation, and the Association for Behavioral Health and Wellness.

For more information or to cosponsor or endorse this bill, please contact:

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ⁱ [Kaiser COVID-19 impacting MH](#)

ⁱⁱ [Health Affairs](#)

ⁱⁱⁱ [National Council –Study lack of access impact MH](#)

^{iv} [GAO report](#)

^v [MHA Peer Services](#)

^{vi} [DBSA Depression and Bipolar Alliance Experience](#)