



February 4, 2022

The Honorable Patty Murray  
Chairwoman  
154 Russell Senate Office Building  
Washington DC 20510

The Honorable Richard Burr  
Ranking Member  
217 Russell Senate Office Building  
Washington, DC 20510

**RE: NASW'S Response to Request for Comments on the *Prepare for and Respond to Existing Viruses, Emerging New Threats, and Pandemics Act (PREVENT Pandemics Act) Discussion Draft***

Dear Chairwoman Murray and Ranking Member Burr:

The National Association of Social Workers (NASW) applauds your leadership in advancing Bipartisan legislation focused on strengthening the nation's public health and medical preparedness and response systems in the wake of the COVID-19 pandemic. NASW appreciates the opportunity to provide input in response to the January 25<sup>th</sup> request for comments on the *Prepare for and Respond to Existing Viruses, Emerging New Threats, and Pandemics Act (PREVENT Pandemics Act)*.

Founded in 1955, NASW is the largest membership organization of professional social workers in the world. NASW has 110,000 members and works to enhance the professional growth and development of social workers, to create and maintain professional standards, and to advance sound social policies. The nation's 700,000+ social workers are an essential workforce that provide critically needed services to millions of Americans every day, in a broad range of settings including health and behavioral health care facilities, schools, child welfare, community agencies, correctional institutions, and private practice.

Social workers are licensed and credentialed at the bachelor's, master's, and doctoral levels. Approximately 250,000 social workers are licensed clinical social workers (CSWs), who are required to have a master's degree in order to practice independently. As the largest provider of mental health services in the U.S., the value and demand for social work services has been evident during the COVID-19 pandemic. As an essential workforce, social workers continue to

serve on the frontlines helping communities directly affected by the pandemic, delivering mental and behavioral health services to individuals and families in crisis, and working to ensure that care and services are accessible for those in need of assistance. Our workforce's first-hand experience delivering care during all phases of the pandemic means that social workers offer important insights about how to improve the delivery of essential services – especially to underserved and marginalized communities.

NASW has prepared comments on the following sections of the discussion draft:

- TITLE I – Strengthening Federal and State Preparedness
  - Subtitle B – State and Local Readiness
    - Sec.112. Supporting access to mental health and substance use disorder services during public health emergencies.
- TITLE II – Improving Public Health Preparedness and Response Capacity
  - Subtitle A – Addressing Disparities and Improving Public Health Emergency Responses
    - Sec.201. Addressing social determinants of health and improving health outcomes.

### ***TITLE I – Strengthening Federal and State Preparedness***

#### ***Subtitle B – State and Local Readiness***

Sec.112. Supporting access to mental health and substance use disorder services during public health emergencies.

The COVID-19 pandemic has exponentially increased rates of mental health concerns with 4 in 10 adults in the U.S. reporting symptoms of anxiety and/or depression.<sup>1</sup> Additionally, 6 in 10 parents report that their child has experienced mental health challenges within the past month within the context of the pandemic<sup>2</sup>. A significant numbers of older adults, too, live with mental health conditions and substance use disorders, and rates of suicide attempts and completion among older adults are increasing. Recent overdose rate data reveals that overdose deaths increased in almost every state during the first eight months of 2020.<sup>3</sup> Added to this, rates of substance use, intimate partner violence, housing instability, economic distress, and exacerbation of chronic diseases continue to increase. In short, the combination of these individual and contextual stressors in conjunction with chronic exposure to the health threats posed by COVID-19 are collectively compromising mental health and well-being.

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<sup>1</sup> Panchal, N., Kamal, R., Cox, C., & Garfield, R. (2021). The Implications of COVID-19 for Mental Health and Substance Use. Kaiser Family Foundation. <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>

<sup>2</sup> Panchal, N., Kamal, R., Cox, C., & Garfield, R., Chidambaram, P. (2021). Mental Health and Substance Use Considerations Among Children During the COVID-19 Pandemic. Kaiser Family Foundation. <https://www.kff.org/coronavirus-covid-19/issue-brief/mental-health-and-substance-use-considerations-among-children-during-the-covid-19-pandemic/>

<sup>3</sup> Jesse C. Baumgartner and David C. Radley. (2021). The Spike in Drug Overdose Deaths During the COVID-19 Pandemic and Policy Options to Move Forward. To the Point (blog), Commonwealth Fund, Mar. 25, <https://doi.org/10.26099/gyf5-3z49>

The disparate mental health and health impact of the pandemic is especially felt by racial and ethnic minorities who historically experience higher rates of chronic medical conditions which in turn further exacerbate their baseline risk factors for severe illness from COVID-19.<sup>4</sup> Furthermore, the pandemic has served to disrupt key social programs that provide essential forms<sup>5</sup> of complementary support to vulnerable populations and communities.<sup>6</sup> Thus, the retraction of supportive services has doubly harmed populations that were already experiencing the harmful effects of social isolation, marginalization, and economic vulnerability.

The expansion of telehealth and related flexibilities (i.e. audio-only behavioral health services) during the COVID-19 pandemic has been critical in enabling access to essential health, mental health, behavioral health and substance use care. These flexibilities have created viable solutions that expand access to care while removing barriers to care that are resultant from poverty, disability, geography, and even disaster.

During the COVID-19 pandemic, thousands of social workers and other mental health providers quickly transitioned to deliver vital mental health and behavioral health services using technology, including video conferencing, smartphones and audio-only telehealth. Telehealth has been and remains a lifeline for countless clients, allowing access to services, while ensuring safety from COVID-19 and other potential public health threats. Still many social workers, working in communities have provided services in-person, throughout the pandemic.

Responding to the nation's current and future complex mental health and behavioral health crises will require meaningful and strategic investment in the social work profession across settings. Funding is needed to incentivize entry into and retention of the social work workforce. Incentivizing entry into mental and behavioral health fields also necessitates removing cost-prohibitive barriers to entry posed by tuition and/ or student loan debt.

**NASW recommends:**

- Increase workforce investments in mental health professionals to include social workers:
  - Provide funding for scholarships, service opportunities, fellowships, Pell grants and other forms of financial support to social work students, practitioners and other mental health professionals who work in public child welfare, schools, healthcare, mental health, substance use care and other settings.

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<sup>4</sup> "Addressing Racial Health Disparities In The COVID-19 Pandemic: Immediate And Long-Term Policy Solutions," Health Affairs Blog, July 20, 2020.

DOI: 10.1377/hblog20200716.620294

<sup>5</sup> Panchal, N., Kamal, R., Cox, C., & Garfield, R., Chidambaram, P. (2021). Mental Health and Substance Use Considerations Among Children During the COVID-19 Pandemic. Kaiser Family Foundation. <https://www.kff.org/coronavirus-covid-19/issue-brief/mental-health-and-substance-use-considerations-among-children-during-the-covid-19-pandemic/>

<sup>6</sup> "Addressing Racial Health Disparities In The COVID-19 Pandemic: Immediate And Long-Term Policy Solutions," Health Affairs Blog, July 20, 2020.

DOI: 10.1377/hblog20200716.620294

- Provide funding for social workers who work in crisis response (such as mobile crisis, domestic violence and rape/ sexual violence social workers).
- Increase and at least maintain the workforce investments by the Children’s Bureau through Title IV-E, Title IV-B and other funding sources to enhance partnerships between schools of social work and child welfare agencies and to increase the number of professional social workers practicing in child welfare.
- Fund social workers and other health care providers in schools and promote the expansion of mental health programs in K-12 and higher educational settings.
- Expand the delivery of and access to Telehealth services and make internet service available to all Americans.
- Ensure access to safety-related protective equipment (i.e., PPE etc.) as well as supportive services for essential workers:
  - Authorize funds for access to essential safety equipment for first responders and essential workers.
  - Ensure access to and the delivery of mental and behavioral health services to first responders, healthcare workers, and other affected essential frontline providers and personnel.
- Remove barriers for social workers and other providers to practice interstate during public health emergencies.

***TITLE II – Improving Public Health Preparedness and Response Capacity***

**Subtitle A – Addressing Disparities and Improving Public Health Emergency Responses**

**Sec.201.Addressing social determinants of health and improving health outcomes.**

Social workers are skilled in conducting outreach to and providing comprehensive care to socially vulnerable patient populations; in conducting preventative social needs screenings; in coordinating linkages to services; in addressing co-occurring behavioral health and social determinants of health needs; and in providing crisis response services to affected individuals and populations. Research has shown that rates of patient-provider discussion about social demographic circumstances were found to be associated with significant risk of adverse outcomes<sup>7</sup>. Social workers have a comprehensive understanding of these areas of expertise and practices as well as training regarding factors that contribute to mental health, behavioral health, and health disparities.

**NASW recommends:**

- That grants and relevant funding to address the social determinants of health are inclusive of the social work workforce (BSW, MSW, DSW and PhD) and the value that the profession brings to addressing complex psycho-social challenges.

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<sup>7</sup> National Academies of Sciences, E. and M., Health and Medicine Division, Board on Health Care Services, & Committee on Integrating Social Needs Care into the Delivery of Health Care to Improve the Nation’s Health. (2019). Integrating Social Care into the Delivery of Health Care : Moving Upstream to Improve the Nation’s Health. National Academies Press.

### ***Additional Provisions for Consideration: Enabling Community-Based, Public-Health, Population Responses to Address the Climate Crisis***

The medical and social issues prompted by the COVID-19 pandemic have provided critical lessons about the need for comprehensive preparedness and response strategies to *new global threats*. The effects of climate change and necessary resilience measures and social responses should be included in the *PREVENT Pandemics Act* legislation. The direct and indirect traumatic stressors generated by the climate emergency are certain to exacerbate the scale and scope of the mental health and psychosocial problems in society.

The science is unequivocal that the climate emergency will for decades continue to accelerate. The COVID-19 Pandemic offers a preview of some of the consequences that we can anticipate. As in the pandemic, continuous and often surprising cascading disruptions will occur in the ecological, social, and economic systems people rely on for food, water, power, shelter, jobs, incomes, health, safety, and other basic needs. The devastation prompted by the climate crisis in the form of disasters, emergencies and other adversities will doubly harm already marginalized and vulnerable populations and the problems that will arise will be chronic and pervasive.

Without proactive efforts to establish a public health and prevention science approach to prevent and address these compounding traumas, the result will include a tidal wave of individual mental health problems including anxiety, depression, PTSD, complicated grief, increased suicidal ideation, accelerated drug and alcohol abuse, spousal and child abuse, Adverse Childhood Experiences, aggression, crime, and violence. We need both investment in mental health providers and also community based public health population responses.

#### **NASW recommends:**

- That language be included in the *PREVENT Pandemic Act* that authorizes and funds a public health and prevention science approach that establishes community-based, public health, population-level mental wellness and resilience building initiatives nationwide.
- NASW supports the recommendations submitted to this request for comment by the International Transformational Resilience Coalition (ITRC), of which NASW is an organizational member.

#### **Resources:**

**To further inform your important work on this issue, NASW offers the following resources for your review and benefit:**

- [The Grand Challenges for Social Work](#)
  - Initiated by the American Academy of Social Work and Social Welfare, the 13 Grand Challenges for Social Work is a groundbreaking initiative to champion social progress powered by science.
- [Integrating Social Needs Care into the Delivery of Health Care to Improve the Nation's Health](#)

- Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health was released in September 2019, before the World Health Organization declared COVID-19 a global pandemic in March 2020. Improving social conditions remains critical to improving health outcomes, and integrating social care into health care delivery is more relevant than ever in the context of the pandemic and increased strains placed on the U.S. health care system. The report and its related products ultimately aim to help improve health and health equity, during COVID-19 and beyond.
- **[NASW Blueprint of Federal Social Policy Priorities](#)**
  - NASW's 2021 Blueprint articulates meaningful actions the Biden-Harris Administration and Congress can take to address the COVID-19 crisis, promote mental and behavioral health, eliminate systemic racism and ensure civil and human rights for all.

Thank you again for the opportunity to provide comments. If you have any questions, please do not hesitate to contact me at [sbutts.nasw@socialworkers.org](mailto:sbutts.nasw@socialworkers.org).

Sincerely,



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National Association of Social Workers