WHEREAS, mental health is essential to one's overall health and well-being and will strike one in five adults each year regardless of age, gender, race, ethnicity, religion or economic status; and

WHEREAS, the costs of mental health disorders is more than $150 billion each year, including the costs of treatment, social services and disability payments, lost productivity and premature death; and

WHEREAS, the indirect costs of mental illnesses are estimated at $79 billion, $63 billion of that due to lost productivity; and

WHEREAS, more than half of all prison and jail inmates have a mental health problem; and

WHEREAS, thousands of youth are placed each year in child welfare or juvenile justice systems due to unmet intensive mental health needs; and

WHEREAS, research has established that most mental disorders are as treatable and manageable as general medical conditions, and, with proper treatment, persons with mental illness have at least a 75 percent rate of recovery compared to coronary disease which has only a 50 percent success rate; and

WHEREAS, people with mental illness who are in recovery can lead full, productive lives in the community; and

WHEREAS, when treating mental illness, it’s important to know that each individual patient responds differently to the different treatment options; and

WHEREAS, due to the similar symptoms among the diseases that comprise mental illness – schizophrenia, bipolar disorder, major depressive disorder and others – making an accurate diagnosis can take time; and

WHEREAS, accurate diagnosis of bipolar disorder can take up to 10 years, with 31%-69% of bipolar patients being potentially misdiagnosed; and

WHEREAS, misdiagnosis of bipolar disorder can lead to increased healthcare costs, higher hospitalization rates and increased suicide rates, inappropriate treatment, with potentially misdiagnosed patients costing nearly $5,000 more per patient per year than correctly diagnosed bipolar patients, thereby highlighting the important role of early and appropriate diagnosis; and

WHEREAS, nationally the economic costs of alcohol and drug abuse is well over $254.7 billion annually with $97.7 billion due to drug abuse; and

WHEREAS, more than half of the children involved in the foster care system have parents with drug or alcohol related problems; and

WHEREAS, approximately ten million Americans have co-occurring addictive and mental disorders; and
WHEREAS, substance use and mental health conditions are widespread among persons with other health conditions including cancer, heart disease, diabetes, and other illnesses; and

WHEREAS, individuals with mental health conditions are more likely to suffer from hypertension, diabetes, heart disease, asthma, and acute respiratory disorders than the general population; and

WHEREAS, the effects of substance abuse and mental health issues influences all branches of state government including public health, children and family services, criminal justice, housing, employment, and other services.

NOW, THEREFORE BE IT RESOLVED, The Council of State Governments commends those state legislatures that have created state mental health caucuses as a venue for legislators to learn about important mental health issues affecting the residents of their states and to ensure those residents are best served; and

BE IT FURTHER RESOLVED, given the scope of mental health issues facing states and the challenges that exist in current systems of care, the Council of State Governments urges other state legislatures to form a mental health caucus; and

BE IT FURTHER RESOLVED, that the Council of State Governments urges the state legislative mental health caucuses to develop a strong message about the priority of mental health and wellness, finding solutions that bridge unmet needs, improve the quality and outcomes of care, and strengthen local communities and states; and

BE IT FURTHER RESOLVED, that the Council of State Governments urges the state legislative mental health caucuses to work to ensure that mental health treatment and services, including community support systems, are funded at appropriate levels; and

BE IT FINALLY RESOLVED, that that the Council of State Governments encourages the state legislative mental health caucuses to work with public and private providers, non-profit groups such as the National Alliance on Mental Illness, the Mental Health Association and other mental health patient advocacy groups, as well any other private or public entities with an interest in mental health issues in order to educate the legislature and the public on mental health needs and services in their states.

Adopted this 14th Day of November, 2009 at the CSG Annual Conference in La Quinta, CA.

Governor Joe Manchin III, West Virginia
2009 CSG President

Sen. Bart Davis, Idaho
2009 CSG Chair