

“Model” Language for Legislation Authorizing and Funding Community-Led Mental Wellness and Resilience Building Initiatives

Sample language for use by nations, states/provinces, and counties/cities to design policies that support community-led initiatives that use a public health approach to build population mental wellness and resilience for the climate crisis and other adversities

To Enhance and Sustain the Entire Populations Capacity for Mental Wellness and Resilience for Climate-Related and Other Toxic Stresses, Emergencies, and Disasters

SECTION 1 - SHORT TITLE

This policy shall be cited as the _____ ("Community Mental Wellness and Resilience Act" or other locally-appropriate name) also known as the _____ ("CMWRA").

SECTION 2. STATEMENT OF FINDINGS

The _____ (name of national/state/provincial/city government) finds the following:

- Mental health and psychosocial problems are a significant and rising problem in _____ (name of place);
- Even before the Covid-19 pandemic a majority of the people needing mental health assistance were unable to receive it, and today due to increased demand only about a quarter of the people requiring help are able to obtain it;
- Unless the _____ (name of nation/state/province/city) approach to mental health is expanded beyond professionally delivered individualized services, widespread personal mental health problems will occur including severe depression, anxiety, post traumatic stress disorder (PTSD), complicated grief, suicidality, hopelessness, and more;
- Unless the _____ (name of nation/state/province/city) approach to mental health is expanded, psychosocial problems will also accelerate including relationship breakdowns, spousal abuse, child abuse and neglect (and Adverse Childhood Experiences), racial and other types of systemic oppressions, as well as crime, violence, and more;
- Left unaddressed, the combination of rising mental health and psychosocial problems will threaten the health, safety, security, and wellbeing of all _____ (name of nation/state/province/city) adults, adolescents, and young children;

- Left unaddressed, rising mental health and psychosocial problems will aggravate existing and produce new physical health problems such as high blood pressure, heart disease, diabetes, obesity, and more, which will increase the demands on and the costs of health care;
- Left unaddressed, rising mental health and psychosocial problems will reduce worker productivity, increase employee absenteeism and turn over rates, and in other ways hinder the workforce, local businesses, and the economy as a whole;
- Left unaddressed, rising mental health and psychosocial problems will cause people to withdraw into a self-protective survival mode that leaves them uninterested or unsupportive of actions that can reduce social, economic, ecological, or climate-related problems to manageable levels;
- While they will remain very important, mental health and direct human service programs do not prevent mental health and psychosocial problems by strengthening the social connections, teaching trauma-informed and resilience skills, enhancing strengths, resources, hope, and other "protective factors" needed to buffer people from and allow them to counter the traumatic stresses that produce mental health and psychosocial problems.
- These factors require expanding the way we address mental health by empowering local residents to use a public health approach in their neighborhoods and communities to proactively enhance protective factors that can prevent and heal mental health and psychosocial problems among the entire population for all types of adversities, as residents simultaneously pursue innovative solutions to those challenges;
- Using a public health approach to enhance the capacity of residents to prevent and heal mental health and psychosocial problems will, over time, significantly reduce the need for government support, and the costs of health care, family support, and other government services;
- Using a public health and prevention science approach to establish community-based, age and culturally-tailored, population-level psychological and emotional wellness and resilience building initiatives throughout the _____ (name of nation/state/province/city) will help prevent and heal mental health and psychosocial problems generated by many types of human-caused emergencies such as school and community violence, toxic social isolation and loneliness, job and income stresses, and more, as well as emergencies such as a viral pandemic and more frequent, extreme, and prolonged storms, heatwaves, droughts, floods, wildfires, hazardous smoke events, tsunamis, earthquakes, and more.

SECTION 3. ESTABLISH RESILIENCE COORDINATING BODIES IN NEIGHBORHOODS AND COMMUNITIES.

“(a) Grants.—

“(1) IN GENERAL.— The _____ (title of director of agency/department) that oversees the _____ (name of agency/department that will oversee the program), from amounts appropriated to comply with this section, shall award grants on a competitive basis to _____ (nonprofits, community-based organizations) to enable such entities to act as bodies to coordinate activities among a wide and diverse network composed of individuals, civic, non-profit, private, and public organizations and agencies in a neighborhood or community to use a public health approach to strengthen the capacity for mental wellness and resilience to prevent and heal mental health and psychosocial problems among the entire population for all types of stresses and adversities.

“(2) MAXIMUM AMOUNT.—The _____ (name of agency/department that will oversee the program), shall award such grants in amounts of not more than _____ (amount appropriated).

“(3) DURATION.—The _____ (name of Department of Agency) shall award such grants for periods of _____ (number of years), and may renew the grants after review of results.

“(b) Eligible Entities.—

“(1) IN GENERAL.—To be eligible to receive a grant under this section, applicants shall demonstrate through descriptions in their grant applications how the entity shall include representatives from many or all of the categories described in paragraph (2).

“(2) COMPOSITION OF RESILIENCE COORDINATING BODIES— The categories of individuals, groups, and organizations to involve are:

“(A) Grassroots groups, community-based organizations, neighborhood associations, and volunteer civic organizations.

“(B) Elementary and secondary schools, high-needs schools, institutions of higher education, including community colleges, job-training programs, and other education or training agencies or organizations.

“(C) Youth serving organizations, such as youth after-school and summer programs.

“(D) Parental, family, and early childhood education programs.

“(E) Faith and spirituality organizations.

“(F) Senior care organizations.

“(G) Climate change mitigation and adaptation, and environmental conservation, groups and organizations.

“(H) Social and environmental justice groups and organizations.

“(I) Disaster preparedness and emergency response groups and organizations.

“(J) Businesses and business associations.

“(K) Police, fire, and other agencies and organizations involved with community safety, security, and the justice system.

“(L) Social work, mental health, behavioral health, substance use, physical health, public health, and other professionals, groups, organizations, agencies, and institutions in the human health and social services fields.

“(M) The general public, including individuals who have experienced adverse mental health or behavioral health conditions who can represent and engage with populations relevant to the community.

“(3) QUALIFICATIONS.—In order for an entity to be eligible to receive the grant under this section, it must be a non-profit or community-based organization (NGO) designated by a broad and diverse Resilience Coordinating Body to serve as its fiscal sponsor.

“(c) Application.—To be eligible to receive a grant under this section, an entity shall submit an application to the _____ (name of managing department of agency) at such time, in such manner, and containing such information as the _____ (name of managing department of agency) may require, including information describing how the resilience coordinating body funded under the grant will;

“(1) develop, implement, and continually evaluate and improve its activities;

“(2) serve the entire population including underrepresented and economically disadvantaged people, black indigenous people of color, youth, retired people, single women with children, and others;

“(3) continue its activities after the end of the grant period for a period of not less than 4 years;

“(d) Program Requirements-- A program using the funds under this legislation shall take a public health approach to mental health prevention and promotion, using the best available evidence, to detect, prevent, and heal mental health, behavioral health, and psychosocial conditions among all adults, adolescents, and young children by strengthening the entire community’s psychological and emotional wellness and resilience, including by—

“(1) collecting and analyzing qualitative information from residents of the community as well as quantitative data to identify—

“(A) protective factors that enhance and sustain the community’s capacity for mental wellness and resilience during adversities; and

“(B) risk factors that undermine such capacity;

“(2) strengthening such protective factors and addressing such risk factors;

“(3) building awareness, skills, tools, and leadership in the community to—

“(4) developing, implementing, and continually evaluating and improving a comprehensive strategic plan for carrying out the activities described in paragraphs (1), (2) and (3) above that includes utilizing developmentally, linguistically, and culturally appropriate evidence-based, evidence-informed, promising-best, or indigenous practices for—

“(A) engaging residents in building social connections, including across cultural, geo- graphic, and economic boundaries;

“(B) enhancing local economic, social, and environmental conditions, including with respect to the built environment;

“(C) becoming trauma and resilience-informed and learning simple self-administrable ‘Presencing’ (or self-regulation and co-regulation) and ‘Purposing’ (or adversity-based growth) mental wellness and resilience skills;

“(D) engaging in community activities that research demonstrates strengthen individual and community mental wellness and resilience;

“(E) partaking in nonclinical group and community-minded prevention, healing, recovery programs; and

“(F) other activities to promote mental wellness and resilience and prevent or heal individual and community traumas during and after significant stresses, emergencies, and disasters.

“(c) Rural Set Aside.—The _____ (name of managing department of agency) shall reserve _____ (20% or name percentage) of the funds appropriated to carry out this grant program to award grants to entities in rural agencies delineated as towns and regions that lie outside of an urban area. In these rural areas the resilience coordinating body may include individuals and organizations from a number of towns in the region.

“(d) Social Justice Set Aside.—The _____ (name of managing department of agency) shall reserve _____ (20% or name percentage) of the funds appropriated to carry out this grant program to award grants to entities composed of Black, Indigenous, People of Color in urban, suburban, or rural areas.

“(e) Fossil Fuel Free and Ecologically Regenerative Implementation.— Included in the plan of the resilience coordinating body will be a strategy to provide their education, training, and other activities in ways that continually reduce and eventually eliminate the use of fossil fuels and release of greenhouse gasses and regenerate ecological systems and biodiversity.

“(f) An _____ (Office of Mental Wellness and Resilience or other name of new agency or department) shall be established to Oversee Grant Program and Provide Technical Assistance and Regional Coordination. The office shall provide education, training, and other technical assistance opportunities for individuals that desire to organize, facilitate, or in other ways participate in a Resilience Coordinating Body in their community as described in this Act. The technical assistance services shall also include mechanisms to bring together representatives of resilience coordinating bodies located throughout the _____ (name of nation, state/province, county or city) to share their vision, goals, strategies, tools, performance metrics and results, engage in joint problem-solving, and in other ways continually learn from each other and coordinate their activities.

“(g) Supplement Not Supplant.—Amounts made available under this section shall be used to supplement and not supplant other local public funds and private funds expended to provide trauma-related coordination activities.

“(h) Evaluation.—At the end of the period for which grants are awarded under this section, the _____ (name of agency or department) shall conduct an evaluation of the activities carried out under each grant under this section. In conducting the evaluation, the Secretary shall assess the outcomes of the grant activities carried out by each grant recipient.

“(i) Reports From Grant Recipients.—A local entity that receives a grant under this section shall submit a report to the _____ (name of agency or department) no later than 1 year after the date of receipt of the funds containing information of how the grant funds were used, activities implemented during the year, evaluation of results, and any other information as requested by the Secretary.

“(j) Annual Report to _____ (name of body enacting the policy).—No later than 2 years after the first grant is awarded under this section, and annually thereafter, the _____ (name or agency or department) shall submit to the _____ (name of committee or executive department), and make available to the public, a report on activities and results under this section.

“(k) Authorization of Appropriations.—There is authorized to be appropriated to carry out this act _____ (total funds appropriated) for the period of fiscal years _____ (name year) through _____ (name year) of which not more than _____ (total funds) may be used by the _____ (name or office or department) for reports and technical assistance.

SECTION 4. DEFINITIONS.

In this Act the term:

(1) The term ‘public health approach to mental health’ refers to methods that—

“(A) take a population-level approach to promote mental wellness and resilience to prevent problems before they emerge, intervene before they become more severe, and heal them when they do appear, not merely treating individuals one at a time after symptoms of pathology appear; and

“(B) address mental health and psychosocial problems by—

“(i) identifying and strengthening existing protective factors, and forming new ones, that buffer people from and enhance their capacity for psychological, emotional, and behavioral wellness and resilience for adversities;

“(ii) taking a holistic systems perspective that recognizes that most mental health, behavioral health, and psychosocial conditions result from numerous interrelated personal, family, social, economic, and environmental factors that require multipronged community-based interventions; and

“(2) The term ‘community’ means people, groups, and organizations that reside in or work within a specific geographic area, such as a city, neighborhood, subdivision, or urban, suburban, or rural locale.

“(3) The term ‘protective factors’ means strengths, skills, resources, and characteristics that —

“(A) are associated with a lower likelihood of negative outcomes of adversities; or

“(B) reduce the impact on people of toxic stresses or a traumatic experience.

“(4) The term ‘mental wellness’ means a state of well-being in which an individual experiences positive emotional functioning, pursues self-defined goals, establishes and maintains meaningful relationships, and feels a sense of meaning and purpose. At the individual level, well-being is based on fundamental social, cognitive, and emotional skills that help individuals react, cope, and adapt in healthy ways to stress, uncertainty, adversity, trauma, and change. At the community level, well-being is influenced by the social, economic, educational, and environmental factors and conditions that either enhance or diminish well-being within the community.

“(5) The term ‘psychosocial problem’ refers to social and environmental structures and processes that adversely affect and influence an individual’s mental state.

“(6) The term ‘resilience’ means that people develop cognitive, psychological, emotional capabilities and social connections that enable them to calm their body, mind, emotions, and behaviors during