

National Mental Health & Substance Use Disorder Advocates to Hold Press Conference Calling for Funding Vital Services

"We Urge Congress to Reject Proposals to Gut Medicaid, Housing Assistance, and SNAP"

When: June 11, 9 a.m. Where: House Triangle (east side of the Capitol)

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Daniel B. Fisher, MD, PhD, a founder and the vice president of NCMHR

a.m. ET on the House Triangle (east side of the Capitol), mental health and substance use disorder advocates from around the U.S. will hold a press conference to call on Congress to approve pending legislation and advance a budget that protects the lives and promotes the recovery of millions of people diagnosed with mental health conditions and/or substance use disorders. The groups call on Congress to reject proposals to cut access to lifesaving healthcare, housing, and food assistance benefits for people with disabilities, and to demand a restoration of proposed cuts to behavioral health services.

“There is new hope for persons with behavioral health

conditions to recover fulfilling lives in the community through the expansion of peer-run services and supports, rather than expanding costly—and harmful—forced treatment in institutions,” says Daniel B. Fisher, MD, PhD, a founder and the vice president of the National Coalition for Mental Health Recovery ([NCMHR](#)), which has organized meetings with legislative staff from June 9 to 12.

“As some states move to justify increased institutionalization based on a person’s inability to meet their basic needs, the federal government is considering devastating cuts to the very programs that help people meet those needs,” NCMHR board member Luke Sikinyi says.

“Gutting them would strip essential supports from over 78 million Medicaid enrollees, nearly 40 million SNAP recipients, and 3.8 million people relying on Medicaid, SNAP, and housing assistance. We must protect and strengthen these services, not dismantle them.”

“Alternatives such as [peer-run crisis respites](#), warmlines, crisis stabilization units, and crisis outreach must replace institutional care with compassion, connection, and real understanding,”

NCMHR president Braunwynn Franklin says.

The NCMHR recommends that the federal budget emphasize employment of behavioral health peer support staff to improve people's lives and provide jobs for persons with behavioral health conditions. In keeping with the proposed new direction of the U.S. Department of Health and Human Services (HHS), the NCMHR urges Congress to:

1. Fund at the 2025 budget level:

- The consumer-run technical assistance centers, as they provide a means for peers to share their insight and knowledge to improve training and policy formation;
- The consumer-run statewide networking grants, to organize peer advocacy and support at the state level;
- The Mental Health and Substance Abuse Block Grants to states, and ensure that 10% of these funds are set aside to fund peer-run services, such as peer-run crisis respite alternatives to hospitalization.

2. Ensure that peer supporters are paid the equivalent of the wages of other professionals providing similar services.

3. Reject budget cuts to Medicaid, which funds services and supports essential to recovery, and to not require Medicaid recipients to work to receive health coverage.

4. Eliminate funding of the highly coercive Assisted Outpatient Treatment program.

5. Pass the PEER (Providing Empathetic and Effective Recovery) Support Act (H.R. 2741, S. 1329), which would codify and ensure that there is a federal Office of Recovery, expand [the peer support workforce](#), and support access to effective mental health and substance use disorder treatment.

6. Fund expansion of peer-led alternatives to police responses to mental health crises, which would save lives.

7. Ensure that persons with lived mental health experience have a voice in the development of national mental health policy decisions.

NCMHR, founded in 2006, is the national voice for millions with lived experience. A member of the National Disability Leadership Alliance, NCMHR works with Faces and Voices of Recovery and the Bazelon Center for Mental Health Law.

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