

**Rosalynn Carter's Testimony**  
**Paul Wellstone Mental Health and Education Equity Act**  
**House Education and Labor Committee, Subcommittee on Health**  
**Tuesday, July 10, 2007**

Mr. Chairman and members of the subcommittee, thank you for the opportunity to speak to you regarding legislation that will profoundly impact the lives of so many Americans.

- I have been working on mental health issues for more than 35 years. When I began no one understood the brain or how to treat mental illnesses. Today everything has changed -- except stigma, of course, which holds back progress in the field.
- Today because of research and our new knowledge of the brain, mental illnesses can be diagnosed and treated effectively, and the overwhelming majority of those affected can lead normal lives – being contributing citizens in our communities.
- I am here today, joining many individuals and hundreds of national organizations calling for an end to the fundamental, stigmatizing inequity of providing far more limited insurance coverage for mental health care than for treatment of any other illnesses. Again I join forces with my friend Betty Ford in urging action on this important issue.
- Jimmy and I founded The Carter Center 25 years ago, and I have a very good Mental Health Program there. Annually we bring together leaders to take action on major mental health issues of concern to the nation. We have focused many times on stigma and discrimination and the importance of ensuring adequate, equitable coverage for people with mental illnesses.
- To me, it is unconscionable in our country and morally unacceptable to treat 20 percent of our population (1 in every 5 people in our country will experience a mental illness this year) as though they were not worthy of care. We preach

human rights and civil rights and yet we let people suffer because of an illness they didn't ask for and for which there is sound treatment. Then we pay the price for this folly in homelessness, lives lost, families torn apart, loss of productivity, and the costs of treatment in our prisons and jails.

- I have always believed that if insurance covered mental illnesses, it would be all right to have them. This may be why the stigma has remained so pervasive – Because these illnesses are treated differently from other health conditions.
- All mental illnesses are potentially devastating. During these 35 years, I have seen so many advances in our knowledge about the brain and improvements in treatment. I urge the subcommittee and sponsors to insure coverage of ALL mental illnesses as defined by the DSM-IV (Diagnostic and Statistical Manual of Mental Disorders Fourth Edition), instead of treating some conditions as a higher priority over others.
- We had an intern at The Carter Center this spring, for example, who has Obsessive Compulsive Disorder and depression. While she was in high school, she once spent two solid weeks in her house, unable to leave or be with her friends. I am happy to say that she received treatment, is a college graduate with Phi Beta Kappa honors, and just got a job here in Washington, DC. Without resources and support, she could still be sick and shut in her home, which is what happens to so many who do not get the help they need because they lack the ability to pay for services. We as a country lose all the many contributions of these wonderful people.
- Through the research of people like Howard Goldman and Richard Frank, we know that parity in insurance benefits for behavioral health care has no significant increase in total costs when coupled with management of care. We also know that a number of enlightened companies such as AT&T, Delta Air Lines, Eastman Kodak, General Motors, and IBM have provided comprehensive coverage for their employees. (*Report to the Office of Personnel Management by the Washington Business Group on Health*)

- I have the pleasure of being friends with Tom Johnson, the former publisher of the Los Angeles Times and former CEO of CNN and a person who has struggled with depression. He has been interested in the mental health benefits offered by employers in Atlanta. He and two other prominent CEOs in the Atlanta community have had an enormous impact on businesses in the area.
- Since the mental health commission we held during Jimmy's presidency, there have been several major reports released including the first ever Surgeon General's Report on Mental Health, President Bush's New Freedom Commission on Mental Health, and The Institute of Medicine's inclusion of mental and substance use conditions in its series of reports on the quality of American health care. All of the reports reinforce the statement that effective treatments are available, but most people who need them do not get them.
- The whole nation has learned a lot about the importance of mental health issues through the events of Hurricane Katrina and the needs of our returning soldiers and National Guard troops. We support our troops in the field, and it is critical that we continue to support them when they come home.
- Finally, I would like to comment on the number of states that have moved ahead with parity. These have been long-fought battles with some states managing wonderful successes. It is so important that any federal legislation not preempt any of these gains.
- After waiting for 15 years, we finally have mental health parity legislation in sight. This subcommittee has worked long and hard to bring forward this legislation, and it is an example of what we can accomplish together with strong bipartisan support. If this legislation is passed, many of our citizens will be healthier, and our nation will be stronger, more resilient, and more productive.
- On behalf of the millions of people affected by mental illnesses, I applaud your efforts to pass the mental health parity legislation. I know the work has been hard, but the benefits to our nation will be enormous.