Authorization of Depression Centers of Excellence – Federal Initiative

BACKGROUND

According to the National Institutes of Health, most people with mood disorders can be effectively treated via medication, psychotherapy or combined treatment. However, according to the Depression and Bipolar Support Alliance (2009), one-third of those suffering from mood disorder (4.8 million) do not receive treatment for one or more of the following reasons: (1) they cannot afford it; (2) do not believe it is needed; (3) are afraid of societal judgment, or (4) do not know where to go for services. Additionally, according to a 2007 article in the Journal of the American Board of Family Medicine, identification of depression and bipolar disorder are missed approximately 50 percent of the time and this diagnostic gap yields adverse outcomes.

To address these problems, Senator Debbie Stabenow (D-MI) introduced the Establishing a Network of Health-Advancing National Centers of Excellence for Depression (ENHANCED) Act of 2009, S. 1857 in the Senate and Representatives Patrick Kennedy and Tim Murphy introduced H.R. 4204 in the House. These pieces of legislation would expand depression centers of excellence with the goal of increasing access to the most appropriate and evidence-based depression care and developing and disseminating evidence-based treatment standards to improve accurate and timely diagnosis of depression and bipolar disorders. Additionally, they would create a national database for large-sample effectiveness studies and a repository of evidence-based interventions and programs for depression and bipolar disorders. They would also utilize the network of centers as an ongoing national resource for public and professional education and training, with the goal of advancing knowledge and eradicating stigma of these mental disorders.

The legislation would provide grants through the Substance Abuse and Mental Health Services Administration (SAMHSA) for up to 20 centers of excellence for depressive disorders within the first year and up to 30 such centers within the first 5 years after enactment. The grants would be made to institutions of higher education or to public or private non-profit research institutions.

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