

Discussion

Name of Student

Institutional Affiliation

4-1 Discussion

The health policy I selected is the "Improving Mental Health Access from the Emergency Department Act of 2021," proposed in the United States Congress. The policy seeks to establish grants that would enable emergency departments (EDs) to develop and implement programs aimed at improving patient access to follow-up mental health care (Holland et al., 2021). The initiative addresses the critical issue of emergency departments being frequently used as the first point of care for individuals experiencing acute mental health crises. Despite the urgent nature of these visits, EDs are often ill-equipped to provide comprehensive mental health care and lack the resources to ensure appropriate follow-up treatment, leading to a cycle of crisis and inadequate care.

A primary social determinant affecting this policy is healthcare access, specifically the availability of mental health services. Individuals often rely on emergency departments for mental health emergencies because they lack access to regular outpatient mental health care, which is less intensive and more cost-effective. Factors contributing to this include shortage of mental health professionals, lack of insurance coverage, and the stigma associated with seeking mental health care.

The evidence base for this policy is strong, drawing on numerous studies that illustrate the challenges and inefficiencies within the current model of mental health care provided in emergency settings. Research indicates that proper follow-up care after an initial mental health crisis can significantly reduce the probability of future crises and improve overall patient outcomes (Anderson et al., 2022). For example, a study by the American Psychiatric Association notes that patients receiving timely follow-up treatment after an ED visit for a psychiatric issue are less likely to require rehospitalization. Furthermore, programs that integrate mental health care with emergency services have shown success; for instance, the implementation of specialized psychiatric emergency programs has demonstrated

improved patient outcomes and reduced ED congestion. Thus, there is compelling evidence supporting the need for initiatives like those proposed in the "Improving Mental Health Access from the Emergency Department Act," highlighting how targeted investments can enhance access to mental health services and potentially transform care delivery for individuals experiencing mental health crises.

References

- Anderson, K., Goldsmith, L. P., Lomani, J., Ali, Z., Clarke, G., Crowe, C., Jarman, H., Johnson, S., McDaid, D., & Pariza, P. (2022). Short-stay crisis units for mental health patients on crisis care pathways: Systematic review and meta-analysis. *BJPsych Open*, 8(4), e144.
- Holland, K. M., Jones, C., Vivolo-Kantor, A. M., Idaikkadar, N., Zwald, M., Hoots, B., Yard, E., D’Inverno, A., Swedo, E., & Chen, M. S. (2021). Trends in US emergency department visits for mental health, overdose, and violence outcomes before and during the COVID-19 pandemic. *JAMA Psychiatry*, 78(4), 372–379.

Responses

Hello Ross,

I find your analysis of the 'Obesity Reduction and Management Act of 2021' thought-provoking. It is important to consider whether the evidence aligns with the policy's assumptions. Research suggests that while removing financial barriers can increase gym attendance, the link to long-term obesity reduction is not as clear. For example, a study in the 'Journal of Health Economics' indicates that while subsidized gym memberships increase initial usage, most individuals do not maintain long-term attendance without additional motivational factors. It suggests that while the policy is well-intentioned, its effectiveness might be enhanced by integrating behavioral and educational components, such as motivational interviewing and lifestyle education, to support sustained lifestyle changes beyond initial financial incentives.

Hi Tonya,

I support your positive assessment of the 'Clean Air for Schools Act.' There is substantial evidence indicating that improving indoor air quality can significantly impact respiratory health, particularly for asthma sufferers. For instance, a study from the 'Environmental Health Perspectives' journal found that enhancements in school ventilation systems led to a marked reduction in the number of asthma-related incidents and school absences. It aligns well with the policy's goals and suggests that such interventions are not only beneficial for student health but also potentially improve academic performance by minimizing disruptions caused by health issues. It is encouraging to see policies proposed with a strong backing of relevant and specific evidence, emphasizing their potential effectiveness and importance.