Dear CSWE Member,

As Congress continues its efforts to address the COVID-19 pandemic, CSWE encourages its members to consider this voluntary opportunity to contact their Members of Congress to ensure that future relief packages support social work education, practitioners, and the communities served by social work.

You can find the contact information for your member of the House of Representatives [**here**](http://CSWE.informz.net/z/cjUucD9taT03NjkwOTk5JnA9MSZ1PTExMTIxMzY4OTImbGk9NTU1NTcxMjU/index.html) and your Senators [here](https://www.senate.gov/senators/contact).

You can copy and paste the message below if emailing your Member of Congress or use it to guide your conversation.

Dear Senator/Representative X,

I am a member of the Council on Social Work Education (CSWE). I am contacting you today to ensure that social work is included in future COVID-19 relief efforts. Social workers have been a critical component of the COVID-19 response. Both the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Homeland Security (DHS) have designated social workers as “essential workers.” As future legislation is developed, I ask that Congress consider:

* **Aid for students and institutions:** Congress has provided some aid for students and institutions of higher education in previous COVID legislation. Students often rely on on-campus childcare; access to accessible food sources; work-study wages; or reliably safe and stable campus housing. These supports in many cases are no longer available to students. As states begin to cut budgets and students and families experience increased need due to the pandemic, Congress should provide additional funding for higher education to support students and institutions. Congress should also explicitly state that funds should support all students, including DACA, international, graduate, and students who have not filed a FAFSA form.
* **Support for the social work workforce to address health care needs:** Social workers are on the frontlines mitigating this public health crisis. Part of this effort is addressing the nation’s health care needs, including the mental and behavioral health needs of individuals and communities, which have been exacerbated by the pandemic. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), calls to the disaster distress hotline increased 891 percent from March 2019 to March 2020, further demonstrating the growing demand for mental and behavioral health services at this time. Congress is encouraged to:
	+ Increase investments and make new investments in mental and behavioral health workforce education and training programs in order to respond to existing and future needs. This includes support for the Behavioral Health Workforce Education and Training Program (BHWET), Minority Fellowship Program (MFP), and other critical health professions programs.
	+ Continue efforts to transition to interprofessional team-based models to properly respond to public health crises. This includes bolstering support for on-the-ground workforce programs such as the National Health Service Corps (NHSC) and ensuring social work is included when decisions are made around policies impacting interprofessional education, training, and care. Support should also be provided for the Leadership in Public Health Social Work Education grant program at the Health Resources and Services Administration (HRSA).
	+ CSWE encourages Members of Congress to cosponsor S.4055, *Strengthening America’s Health Care Readiness Act* and include the legislation in a COVID-19 relief package. This bill supports the inclusion of social workers in the public health infrastructure. Congress should also include support for state, local, and community-based organizations providing mental health services, including services for frontline workers, through the SAMSHA Community Mental Health Services Block Grant and other means. Congress should also ensure regulations help, rather than hinder, the delivery of mental health services provided through telehealth.
* **Combat and address disparities:** The COVID-19 pandemic is not only a health crisis but also a crisis of social injustice. The inequitable effects on vulnerable and marginalized populations is seen in data from the [CDC](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/racial-ethnic-minorities.html): “Long-standing systemic health and social inequities have put some members of racial and ethnic minority groups at increased risk of getting COVID-19 or experiencing severe illness, regardless of age. Among some racial and ethnic minority groups, including non-Hispanic black persons, Hispanics and Latinos, and American Indians/Alaska Natives, evidence points to higher rates of hospitalization or death from COVID-19 than among non-Hispanic white persons.” In an environment where social determinants of health lead to disparate impacts on health outcomes Congress should make investments to address disparities resulting from COVID-19 on at-risk communities through job training and mentorship, housing, and mental health activities, among other investments.

Thank you for your time and the consideration of these priorities.

Sincerely,