Five Funding Opportunities in the American Rescue Plan For Violence Prevention, Trauma Recovery, Reentry, Mental Health and Community Development

During the National Coalition for Shared Safety 3/23 forum, “The American Rescue Plan: An Overview of Opportunities to Access Resources for Violence Prevention, Trauma Recovery, Reentry, Mental Health and Community Development,” speakers will go over five funding opportunities summarized below. To find the American Recovery Plan (ARP), go to Congress.gov here: http://bit.ly/38MQ4Eq. To find the parts of the legislation listed below, search for the specific section by typing in “Sect.” followed by the section number, for example, “Sect. 9901.” Look for a forthcoming report from the Alliance for Safety and Justice that will lay out more extensive arguments, analysis, examples, and language that can be used to advocate for ARP resources.

1. Increase in violence in communities hit hard by COVID-19 justify requests for funding essential services like community-based violence prevention, reentry, trauma recovery, and economic development. (Sec 9901)

**Funding Amount:** $219.5 billion to state, territorial, Tribal governments, and the District of Columbia and $130.2 billion local governments (Sec 9901). Find your state or local jurisdiction’s fiscal relief allocation here: http://bit.ly/318XFZG.

**Overview:** The pandemic’s public health crisis has led to severe increases of violent crime, especially homicides, aggravated assaults, gun assaults, and domestic violence, in communities across the country, particularly in low-income communities of color and immigrant communities that have also experienced disproportionately high rates of COVID-19 infections and deaths.¹

In its description of how recovery funds may be used, the ARP states that governments may provide assistance to nonprofits that have been negatively impacted by the pandemic and/or provide “grants to eligible employers that have eligible workers who perform essential work.”

Some state and local governments have declared that nonprofits that provide such services as violence prevention and reentry supporter “essential,” directly linking these funds to assist nonprofits that provide essential services like reentry support, trauma recovery, and street violence intervention.²

Using these funds to support organizations that are based in and staffed by the residents of the communities they serve has the additional benefit of making workforce development a part of local public safety infrastructures, providing jobs to people who are closest to violence and an opportunity to be trained in public health approaches to violence reduction. There is significant public support, including bi-partisan support, for using federal funds to pay for community-based
violence prevention, and documented gaps in what these organizations need to deliver these services.

**How to access:** To access these funds, identify the amount your state and/or local government are scheduled to receive and use the following arguments to make a case to your governor, mayor, or county board executive for why your organization and/or organizations in your field should receive them.

2. **Funding to meet the needs of domestic violence and sexual assault survivors, especially who have been underserved by existing providers. (Sec 2204(c))**

**Funding Amount:** $49.5 million to the Secretary of Health and Human Services (HHS)

**Funding Purpose:** “to support culturally specific community-based organizations to provide culturally specific activities for survivors of sexual assault and domestic violence, to address emergent needs resulting from the COVID-19 public health emergency and other public health concerns.”

The clear intent of this language is that these funds should be used to support community-based programs to help survivors of sexual assault and domestic violence whose needs have historically been unmet by more established programs. Programs like Trauma Recovery Centers (TRCs) are ideally suited for this purpose. TRCs are an evidence-based model that is designed to meet underserved crime survivors where they are, providing wrap-around, trauma-informed services through an orientation of cultural humility. There is significant public support for using federal funds to address the unmet needs of crime survivors, and documented gaps to provide these services because of a lack of resources for them.  

**How to apply:** To apply for these funds, look for future solicitations from HHS at [https://www.grants.gov](https://www.grants.gov).

3. **Funding for diversion and reducing over-incarceration to stop the spread of COVID-19 (Sec 2401)**

**Funding Amount:** $47.8 million to the Secretary of Health and Human Services (HHS).

**Funding Purpose:** “to provide technical assistance, guidance, and support, and award grants or cooperative agreements to State, local, and territorial public health departments for activities to detect, diagnose, trace, and monitor SARS–CoV–2 and COVID–19 infections and related strategies and activities to mitigate the spread of COVID–19” (Emphasis added).

**Overview:** Since jails and prisons have been the site of high rates of COVID-19 infections and disproportionate deaths, some of these funds should be used to support programs that help deflect, divert, release and keep people from returning from prison as "related strategies and
activities to mitigate the spread of COVID-19. "There is strong public support for the policies that have been implemented to reduce the number of people in the justice system because of public health concerns, and to continue and expand these policies."^6

**How to apply:** To access these funds to keep people out of jail and prison, identify your state and/or local public health department and use the above arguments to advocate for them to direct funds for these purposes.

4. Responding to Pandemic-Related Behavioral Health Challenges (Sec 2707)

**Funding Amount:** $50 million to the Secretary of HHS.

**Funding Purpose:** to make grants to “State, local, Tribal, and territorial governments, Tribal organizations, nonprofit community-based entities, and primary care and behavioral health organizations” to address behavioral health needs exacerbated by the pandemic. Eligible programming includes “promoting care coordination among local entities; training the mental and behavioral health workforce, relevant stakeholders, and community members; expanding evidence-based integrated models of care; addressing surge capacity for mental and behavioral health needs; providing mental and behavioral health services to individuals with mental health needs (including co-occurring substance use disorders) as delivered by behavioral and mental health professionals utilizing telehealth services; and supporting, enhancing, or expanding mental and behavioral health preventive and crisis intervention services.”

**Overview:** As violence and trauma stem from and implicate behavioral health issues, there is a strong argument to use these funds to support violence prevention and trauma recovery services, particularly in communities that have experienced increases in violence during the pandemic. There is a strong, documented need to expand these approaches across states.

**How to apply:** To apply for these funds, look for future solicitations from HHS at [https://www.grants.gov](https://www.grants.gov).

5. Medicaid Waiver for Mobile Crisis Intervention Services *(mostly relevant for Medicaid Expansion states)*

)(Sect. 1947)

**Funding Amount:** $15 million in planning grants to apply for new Medicaid-funded services for people in crisis.

**Funding Purpose:** to help states amend their Medicaid plans or use section 1115, 1915(b), or 1915(c) waiver requests to create “community-based mobile crisis intervention services” for people who are otherwise covered by the state’s Medicaid plan.
**Funding Timeline:** If their proposals are approved, states would be able to use this funding to implement these services as of March 11th, 2022, one year after the American Rescue Plan was signed into law.

**Funding Requirements:** The community-based mobile crisis intervention services must have a number of features, including the following:

- they must be dedicated to people who are experiencing mental health and/or substance abuse crisis;
- the services must be provided year round 24-hours a day, outside of a hospital, jail, or prison facility, through a multidisciplinary mobile crisis team “whose members are trained in trauma-informed care, de-escalation strategies, and harm reduction” and which includes at least 1 behavioral health care professional who is capable of conducting an assessment of the individual;”
- the services must be able to be provided in a timely manner, offering people “screening and assessment, stabilization and de-escalation, and coordination with, and referrals to, health, social, and other services and supports as needed, and health services as needed;” and
- the providers of these services must “maintain relationships with relevant community providers.”

**Overview:** The ability to use Medicaid funds to support these services presents a profound opportunity for states to create the capacity to help people in crisis who often end up in cycling through jail, prisons, and hospital emergency rooms.  

**How to apply:** To help your state access these resources, use the above arguments to advocate to your governor and Medicaid agency why they should apply for planning grant funding to amend or use a waiver to change your state’s Medicaid plan.

For question about this text or the American Rescue Plan, please contact John Maki at jmaki@safeandjust.org

---


7 Find your state’s Medicaid agency here: https://www.medicaid.gov/about-us/contact-us/contact-your-state-questions/index.html