

Behavioral Health Crisis Response Services - 9-8-8 Trust Fund (SB241/HB293)

SB 241 SUPPORT

Behavioral Health Crisis Response Services

And Public Health Safety Answering Points—Behavioral Health Crisis Response Services – 9-8-8 Trust Fund (SB241/HB293)

Finance Committee

Feb. 2. 2022

Dear Chair Kelley, Vice-Chair Brian J. Feldman, Senator Augustine, and members of the Senate Finance Committee:

I am writing, on behalf of the Silver Spring Justice Coalition to urge enactment of **SB241** which demonstrates best practices in Behavioral Health Crisis Response Programs and assures on-going funding.

I am a mental health and homelessness professional, retired from a career dedicated to establishing, administering, and evaluating model residential programs for adults with mental illness and people who have been homeless. I am a former Executive Director of National Alliance on Mental Illness-Baltimore and former Chair of the Montgomery County Coalition for the Homeless. I have worked with mobile crisis teams in D.C. and Montgomery County.

SB241/HB293

- Establishes 988 as Maryland's behavioral health crisis hotline for mental health and substance use crises
- Establishes a state fund to invest in 24/7 call centers, mobile crisis teams, crisis stabilization centers, and related crisis response services; and
- Allocates an initial \$10 million in 2022 to the fund to ensure that call centers are adequately staffed and available 24/7.

The Problem

The pandemic has made mental health and substance use worse for Marylanders, greatly increasing the number of people who are seeking help for mental health and substance use services.

The current system to treat mental health and substance use crises does not have the capacity to serve all those in need 24/7, 365 days a year across Maryland.

Overreliance on law enforcement for responding to behavioral health crises has led to inequitable access to care, poor health outcomes, and disproportionate arrest and incarceration for people of color.

Overreliance on emergency department visits for mental health crises has led to unnecessarily high costs. It stresses hospitals and results in significant delays in care.

Investing in 9-8-8 is essential because crisis call centers like ours in Montgomery County are already understaffed. Congress authorized the states to designate 9-8-8 as the new phone number for mental health and substance use crises. With the launch of 9-8-8 in July 2022 will come greater public awareness of the service, and call volume is expected to rise significantly. Crisis call centers must be ready to serve these individuals. The risk is longer on-hold times. We don't want people in crisis to have care delayed.

Why a behavior health crisis hotline?

- A 24/7 behavioral crisis call hub is one of three essential elements of SAMHSA's National Guidelines for Behavioral Health Crisis Care. SAMHSA's best-practice guidelines are the national for effective, modern, and comprehensive crisis care.
- Behavioral health crisis hotlines in our country have a proven, 17-year track record of saving lives and reducing emotional distress.
- A crisis hotline gives all Marylanders access to support anywhere, 24/7.
- A crisis hotline allows people in distress to maintain confidentiality and dignity. Many people with behavioral health issues say that shame and fear of judgment stops them from reaching out for help.
- A behavioral health crisis hotline is a more effective, less costly alternative to calling 911. Mental health crises require a mental health response. Right now, many of these calls are going to 911. But the protocol at most public safety dispatch centers is to send police or EMS. But those responders lack the specialized experience of mental health professionals. That means people in crisis are delayed in getting the urgent help they need.

- A behavioral health crisis hotline reduces the risk of traumatic and sometimes deadly interactions with police, and the criminalization of people in crisis. Encounters with police can exacerbate the symptoms of people in crisis as well as be traumatic and even deadly. We've seen too many cases of police using force when they encounter someone in crisis who doesn't follow commands or seems resistant to their approach.
- A behavioral health crisis hotline is a more effective, less costly alternative to visiting a hospital emergency department. When people in crisis seek help at emergency departments, they face long wait times. For people in emotional distress, sitting in a waiting room for hours can be very stressful. Studies tell us that for people who are suicidal, going to an emergency department actually increases the risk of them ending their life

Bottom line

All Marylanders deserve equitable, timely, and effective mental health and substance use care, including behavioral health crisis care. We strongly urge a favorable report on SB 241.

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Marilyn Kresky-Wolff, MPH, MSW Silver Spring Justice Coalition mkreskywolff@gmail.com