

January 21, 2022

Senate Bill 12 – Behavioral Health Crisis Response Services and Public Safety Answering Points – Modifications - SUPPORT

Chair Kelley, Vice Chair Feldman, and members of the Senate Finance Committee,

The National Alliance on Mental Illness, Maryland and our 11 local affiliates across the state represent a statewide network of more than 45,000 families, individuals, community-based organizations and service providers. NAMI Maryland is dedicated to providing education, support and advocacy for persons with mental illnesses, their families and the wider community.

Mental health treatment and suicide prevention are critical health care issues for our state. Yet, when someone experiences a mental health crisis, they are often more likely to interact with a law enforcement officer than a medical professional. The absence of a truly comprehensive community mental health system means that law enforcement are often the first responders to mental health crises. When law enforcement responds, people in crisis often end up in jails, in emergency departments, on the street, or worse, they are harmed or killed during the encounter. To change this costly dynamic — which is taking an enormous toll on both human lives and our state's resources — we need readily accessible crisis care as an essential component of our mental health service system.

The Maryland Behavioral Health Crisis Response Grant Program provides funds to local governments to help establish and expand local crisis services to meet this growing need. Mobile crisis units, walk-in crisis services, crisis residential beds, and other behavioral health crisis programs and services are funded through this program – an investment of \$5,000,000 for FY 2022 and increasing annually to \$10,000,000 per year by 2025.

Senate Bill 12 would require that local government mobile crisis teams that minimize the role of law enforcement in crisis interactions and response, strengthening the existing Behavioral Health Crisis Response Grant Program to ensure Maryland is investing in programs and services that address mental health emergencies.

In addition, this legislation helps pave the way toward 988 implementations (coming July 2022) by requiring public safety answering points (the call center where emergency 911 calls are routed) by asking the PSAPs to create a written protocol for mental health crisis calls that come in. The protocol is required to include the resources that are available for dispatch (CIT/mobile crisis units/other mental health and/or law enforcement resources).



Why are these changes necessary? Deploying law enforcement as the first response for mental health crisis has led to the criminalization of mental illness in Maryland and across the nation:

- 1 in 4 people with a serious mental illness are arrested during their lives.
- 2 in 5 adults in jail or prison have a diagnosed mental illness.
- 7 in 10 youth in the juvenile justice system have a mental illness

In 2019, 1 in 4 people killed by police officers in America had a known mental illness. A well-designed crisis response system can be the difference between life and death for people experiencing a psychiatric emergency. Both provisions of this legislation will help Maryland start building these resources.

For these reasons, NAMI Maryland asks for a favorable report on **SB 12**.