



Nick J. Mosby
President,
Baltimore City Council

400 City Hall·Baltimore Maryland 21202
410-396-4804 · Fax: 410-539-0647

March 28, 2022

To: **Members of the Health and Government Operations Committee**
Re: **SB 12 – Behavioral Health Crisis Response Services and Public Safety**
Answering Points – Modifications
Position: **FAVORABLE**

Chair Pendergrass and Honorable Members of the House Health and Government Operations Committee,

The Baltimore City Council Suicide Prevention Legislative Workgroup is composed of providers, survivors, advocates, faith leaders, elected officials, nonprofit organizations, educators, community leaders, and researchers dedicated to decreasing barriers Baltimore City residents face to access efficient and effective mental health services to support their mental health, and prevent suicides from occurring within our city.

To this end, the Suicide Prevention Legislative Workgroup urges a favorable report on SB 12– Behavioral Health Crisis Response Services and Public Safety Answering Points – Modifications

An estimated 3.3% of adults in Maryland live with serious mental health conditions, and only 56.8% of adults with mental illness receive any form of treatment¹. The COVID-19 pandemic and resulting economic crisis is expected to have a long-term negative impact on mental health and suicide risk for Maryland residents.

According to a 2020 study published by the National Association of Social Workers, those with severe mental illness are more likely to be physically victimized by police, regardless of their involvement in criminal activities². A Washington Post investigation indicates that from 2015 – 2020, nearly a quarter of all people killed by police officers have had a known mental illness³. Additionally, a 2015 report by the Treatment Advocacy Center found that mental health disorders are a factor in as many as 1 in 2 fatal law enforcement encounters, and the risk of being killed during a police incident is 16 times greater for individuals with untreated mental illness⁴.

¹ <https://www.rtor.org/directory/mental-health-maryland/#:~:text=Maryland%20has%20a%20population%20of,bipolar%20disorder%2C%20and%20major%20depression.>

² <https://pubmed.ncbi.nlm.nih.gov/32393967/>

³ https://www.washingtonpost.com/graphics/investigations/police-shootings-database/?itid=lk_inline_manual_3

⁴ <https://www.treatmentadvocacycenter.org/storage/documents/overlooked-in-the-undercounted.pdf>

Specific to the State of Maryland, the ACLU reported that from 2010-2014, 38% of all deaths in police encounters “presented in a way that suggested a possible medical or mental health issue, disability, substance use, or similar issue”⁵.

Maryland residents experiencing mental or behavioral health crises deserve to be met with care and intervention rather than criminalization. This bill requires that proposals requesting Behavioral Health Crisis Response Grant Program funding minimize law enforcement interactions and changes the definition of “mobile crisis team” to include limiting reliance on law enforcement. Further, the bill requires that public safety answering points develop policies to address calls involving people experiencing active mental health crises.

These measures ensure that local behavioral health crisis response programs will respond to citizens with a public health lens rather than a public safety one. Individuals experiencing mental health crises will be more likely to receive de-escalation measures, obtain trauma informed care, and be referred to treatment options. Reducing contact with law enforcement will result in less violence and ultimately contribute to safer, healthier communities.

A 2021 executive order by the Substance Abuse and Mental Health Services Administration (SAMHSA) says it best: “The most appropriate role for [law enforcement] in a behavioral health crisis is limited or none...It is time to redirect our reliance on [law enforcement] as mental health crisis responders and create the momentum to develop crisis services systems based in behavioral health principles”.

The Baltimore City Suicide Prevention Legislative Workgroup thus urges a favorable report on SB 12– Behavioral Health Crisis Response Services and Public Safety Answering Points – Modifications

Sincerely,



Nick J. Mosby
President, Baltimore City Council

⁵ https://www.aclu-md.org/sites/default/files/legacy/files/md_deaths_in_police_encounters.pdf