I have a very close family member who suffers from serious mental illness. She has a long history of hospitalizations - **about 25 hospitalizations to no avail**.

She would be discharged after a very short time, at the most one week, with no follow-up services and often not continue her medication.

My family member has been **homeless** for about 3 years, after being discharged from several hospital stays. It became a pattern: hospital, shelter, shelter, hospital. When in shelters, there was no proper follow-up amid unsanitary conditions, and she was even **victimized by care takers and other shelter users**. **All outpatient treatments have proven a failure**. Meanwhile, she **lost insight of her illness and need of treatment**. She was thrown out of the shelter she was in due to behavior resulting from lack of treatment, **was out in the streets** for a week, and in a total state of psychosis, she was accused of committing a felony and immediately incarcerated. **After two years between jail and forensic hospitalization**, it would seem that the felony charge will be dropped for lack of evidence, but a second degree assault would remain. All efforts and gains on the part of her Public Defender are still in the air and the defendant kept waiting in a devastating situation of uncertainty and injustice.

I believe there must be a more human, effective, and less costly way of taking care of our population with mental illness. One step in a good direction would be to establish in Maryland, an **Assisted Outpatient Treatment** as developed by SAMHSA and the Treatment Advocacy Center which has proven results in reducing homelessness and incarceration.

I request that the Committee give a favorable report to HB823. Thank you for working towards the improvement of a broken, inhuman, and costly system.