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NAMI Virginia Testimony to the Senate Finance Health and Human Resources Subcommittee – 1/28/08

Mr. Chairman, members of the Committee: Thank you very much for the opportunity to speak today. My name is Mira Signer, I'm the executive director of Virginia office of the National Alliance on Mental Illness. NAMI Virginia provides support, education, and advocacy for people affected by mental illness. We have 26 grassroots affiliates around the Commonwealth. Our members are mental health consumers, family members, mental health professionals, and concerned citizens. On behalf of NAMI Virginia, I first want to thank you for your past support of people with mental illness and access to services that have been provided in past years.

For just a moment I would like to describe to you several of the typical calls that we receive on our statewide hotline each week to illustrate the need for better access to mental health services:

- A father calling about his son who has just been locked up in the local jail for a petty crime. The son has a clear history of schizophrenia and is in need of treatment, not jail time.
- A mental health consumer trying to access outpatient counseling services through her local community services board but has been put on a waiting list several weeks long.
- A parent who has been desperately trying to navigate the system to access services for her young son with mental health needs, only to find services are almost nonexistent due to ineligibility or lack of availability.
- A 40 year old stable, independent mental health consumer in need of safe, stable, affordable housing, a critical component of his continued stability and recovery.

These are just a few of the kinds of calls we receive each week from individuals around the Commonwealth and underscore that the system is in need of attention and resources.

<u>Support of the proposed MH initiatives – good first step</u>

We support the Governor's budget for community-based mental health services and believe the proposals provide a down payment toward the funding needed to increase the community services boards' capacity to:

- Respond to mental health emergencies
- Reduce wait times for individuals who need to access the system
- Increase case management for adults and children

- Provide jail diversion to route individuals into the mental health system where appropriate instead of into the criminal justice system
- Provide funding for crisis stabilization services
- Enhance the ability of DMHMRSAS to engage in monitoring and accountability of community services boards

Additional areas to be addressed/funds needed

However, there are remaining gaps not addressed in the mental health proposals and funding must go above and beyond what is being proposed in the Governor's mental health initiatives.

We ask you to support an amendment to provide funding for wrap**-around services for children**, which would provide in-home services, intervention, and treatment strategies modeled off evidenced-based best practices. These services help avoid costly and disruptive residential placement of children. (**Item 316** #8s/Hanger).

We ask you to support an amendment to provide funding for intensive **and ongoing support services** including medications, inpatient bed purchase for acute care, and residential arrangements to provide greater stabilization and support after an emergency. (**Item 316** #16s/Howell).

We ask you to support an amendment for **jail diversion** – to support ten projects to divert individuals with serious mental illness and co-occurring substance abuse disorders from jails so that individuals get the treatment they need and to avoid the costly and unnecessary strain on the criminal justice system. (**Item 395** #2s/Howell).

Lastly, in the area of housing, we ask that you support a **language-only amendment for the portability of auxiliary grants** for individuals who receive case management services through a CSB and who would choose a housing option that is more appropriate and supportive of their treatment and recovery needs other than an assisted living facility. Currently auxiliary grants are only able to be used at an assisted living facility which, for many consumers, is not the most appropriate setting. (**Item 282** #2s/Houck/Hamilton). $0/$0.

Virginia ranks 9th in the country on our spending for institutional care and 39th in the country on spending for community-based mental health care services. The proposed $42 million for the 2008 – 2010 biennium is a start but it's just that. To adequately meet the need that exists for a responsive system, additional funding is needed. With the appropriate investment we will start to see the kind of shift the system needs that is long overdue.

Thank you very much. We look forward to continuing to work with you.
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NAMI Virginia is the Virginia state office of NAMI (the National Alliance on Mental Illness). NAMI VA was created in 1985 to provide support, education, and advocacy for consumers and family members affected by mental illness in Virginia. It is our mission to improve the lives of all those who are affected by serious brain disorders and to fight the stigma that surrounds mental illness. NAMI VA's 27 local affiliates play an active role providing support, education, and advocacy at the community level.