



NAMI
National Alliance on Mental Illness

**Keystone
Pennsylvania**

**STATEMENT OF CHRISTINE MICHAELS AND NIKKI WEIGAND
PITTSBURGH, PENNSYLVANIA
ON BEHALF OF THE NATIONAL ALLIANCE ON MENTAL ILLNESS (NAMI) KEYSTONE
PENNSYLVANIA**

**REGARDING PA HOUSE HUMAN SERVICES HEARING ON
“SUPPORTING THE NEXT GENERATION OF EMERGENCY AND MENTAL HEALTH RESPONSE”**

**JUNE 5, 2023
10:30 A.M.**

Room 140 Main Capitol, Harrisburg, PA 17120.

Good Morning, Chairman Kinsey, and Members of the Health and Human Services Committee. On behalf of NAMI Keystone PA, we thank you for the opportunity to submit testimony Supporting the Next Generation of Emergency and Mental Health Response and 988 in Pennsylvania.

More than 1.8 million people in our state live with a diagnosed mental health condition, with even more reporting symptoms of anxiety and depression. Of those diagnosed and reporting symptoms, less than half will receive the treatment they need. This can lead to thousands of people in our state experiencing a mental health or suicidal crisis each year. It can happen to any of us or any of our families, at any time. This is not including the number of children in Pennsylvania experiencing anxiety and depression. Nationally the number of children diagnosed with anxiety and depression has increased exponentially to 29% and 27%, respectively.

Unfortunately, law enforcement -- not a mental health professional -- is frequently the first and only response a person in crisis receives. This leads to avoidable trauma and tragedy, unnecessary arrests and hospitalizations, and the overrepresentation of people experiencing mental health symptoms in our criminal justice system.

There's a better way to address crises and it starts with 988, the new universal dialing code for mental health and suicidal crises, and related crisis services. In 2020, Congress took an important step in reimagining crisis response by passing bipartisan "988" legislation, the National Suicide Hotline Designation Act of 2020, to designate 988 as the new three-digit number for mental health and suicidal crises.

Since the launch of 988 on July 16, 2022 counselors have provided mental health intervention services to nearly 50,000 residents of the Commonwealth. 988 crisis counselors should ideally be able to connect a caller to resources and additional services in the community -- but they can only do so if those services exist.

While 988 went live in July of last year, it is up to our state to ensure that the right personnel, technology, and services are in place so that 988 callers actually receive the help they need. National guidelines for crisis care say that an effective crisis system needs three main parts:

1. Crisis Call Centers that are available 24/7 with trained staff who can offer immediate support and connect people in crisis -- and their families -- with local services.
2. Mobile Crisis Teams of mental health professionals that can be dispatched to de-escalate a crisis when a person needs more support than can be provided over the phone.
3. Crisis Stabilization Programs that provide short-term stabilization services as an alternative to the emergency room for people with more intensive needs, connecting the person to additional care if needed.

An underfunded 988 crisis response system has real consequences including:

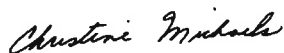
- Longer wait times -- When someone is in crisis, especially if they are suicidal, every second counts. Call centers are already struggling to keep up with current call volume due to workforce shortages. And when these calls cannot be answered locally or within the state, callers cannot be connected to resources in our communities.
- Lack of in-person behavioral health response -- Without mobile crisis teams and crisis stabilization services, we will continue to see law enforcement resources misused, individuals stuck waiting in emergency rooms, and avoidable hospitalizations, arrests, and incarceration.
- Trauma and tragedy – Without these crisis services in place, people in crisis will continue to face tragic consequences. In 2021 alone nearly 2,000 people in Pennsylvania died by suicide with another 416,000 experiencing thoughts of suicide. Additionally, since 2020 there have been several police related shootings involving individuals who were experiencing a mental health crisis; four where the individual in crisis was killed by law enforcement and another two where law enforcement were killed and or injured.

Right now, the full crisis system we need to have in place around 988 is not available statewide, and we face these outcomes if we don't act. Understanding these gaps, the federal 988 law provided states a tool — monthly fees on telecommunications bills — to help states sustainably fund 988 and crisis services similar to how 911 is funded today. The federal law (P.L. 116-172) specifically permits 988 fees to pay for the efficient and effective routing of calls, personnel, and the provision of acute mental health crisis outreach and stabilization services. This language had the full support of Congress with a unanimous vote in both chambers.

With passage of a telecommunications fee we can ensure Pennsylvania has a way to define, coordinate, oversee and fund these core crisis services.

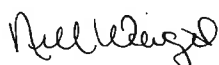
In closing we urge you to support funding for a fully developed crisis system across the commonwealth as every person in Pennsylvania deserves to receive a mental health response to a mental health and suicidal crisis. Thank you for the opportunity to submit remarks.

Respectfully Submitted,



Christine Michaels, MSHSA

Chief Executive Officer, NAMI Keystone PA



Nikki Weigand, MSW

Director of Advocacy, NAMI Keystone PA