

Mr. Chairman and Members of the Committee, my name is Gretchen Alexander. I am a psychiatrist in the public mental health system in Maricopa County. I am speaking today in support of SB 1471. My testimony today outlines the position of the Arizona Psychiatric Society as well as my individual professional thoughts about the merits of this bill. It in no way represents the views of my employer.

For most of my patients, the recovery model of treatment for mental illness is a good fit. This model is based on the assumption that people living with mental illness can, with treatment and support, eventually live on their own in the community. People who benefit from the recovery model are able to recognize that they have an illness, they see the need for treatment, and they are able to stabilize with the help of medication and counseling. For these people, current case management and housing support resources are sufficient to help them progress safely to independent living.

However, patients with serious mental illnesses such as schizophrenia, and severe bipolar disorder have chronic disabling diseases of the brain and their outcomes can vary. A small percentage of people with these illnesses have a poor response to medication and other traditional treatment. Some of these patients have substance use disorders, are chronically psychotic and require, on a long term basis, a living situation with supervision and supports. However, because they don't recognize that they have an illness, they tend to leave community housing placements repeatedly, after which they stop taking medication, sometimes use substances; they behave dangerously or get taken advantage of on the streets – often this ends with them being trapped in a cycle of repeated re-hospitalizations and incarcerations. In fact, incarceration of individuals with mental illness is a growing problem nationwide and particularly in Arizona.

According to the Treatment Advocacy Center's Arizona report card, we have only 4.4 hospital beds available per 100,000 populations count—the recommended number is 50 beds per 100K population. As a result, Arizonans with severe mental illness are nine times more likely to be incarcerated than they are to be hospitalized.

Nationwide, estimates are that 25-40% of people with severe mental illness will have been in jail or prison at some point in their lives. Once incarcerated, people with mental illness are vulnerable. Over 80% of them do not receive appropriate psychiatric care. They have higher suicide rates and stay incarcerated longer. Once released, they are more likely to commit other crimes and return to jail or prison.

Housing people with mental illness in jail or prison is also more expensive, costing 30-50K per year compared with about 25K per year for a non mentally ill inmate.

Many of our sickest patients will do well as long as they are in the hospital, taking medication and not using drugs. They don't require the level of care of a hospital for very long, but will relapse almost immediately after discharge because they are impulsive and, even with 1:1 staff, will just leave. They cannot be physically detained from leaving a traditional supported housing program and so these programs typically do not benefit them.

Once such a person is no longer behaving in a dangerous or highly agitated fashion, they often won't meet continued stay criteria for a hospital but they still need a longer period of time to stabilize in a secured setting. We need an additional housing solution besides jail for this small group of highly vulnerable individuals.

Studies show that that providing supported housing can substantially reduce long term Medicaid and criminal justice system costs, particularly for high-needs, high-cost, frequent utilizers of Medicaid services. The program proposed in this bill would provide a way for supported housing to be meaningfully and consistently supplied for long enough periods of time to give these patients a better opportunity to stabilize and achieve a meaningful quality of life.

Thank you very much for your time and your attention this morning.