



Alliance for Addiction and Mental Health Services, Maine
The unified voice for Maine's community behavioral health providers

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Testimony in Support of LD 475
Resolve, To Create the Frequent Users System
Engagement Collaborative

Sponsored by Representative Victoria Morales
March 24, 2021

Good morning Senator Claxton, Representative Meyer, and members of the Joint Standing Committee on Health and Human Services. I am Malory Shaughnessy, a resident of Westbrook, and the Executive Director of the Alliance for Addiction and Mental Health Services. The Alliance membership represents the majority of Maine's community based mental health and substance use treatment providers. The Alliance advocates for the implementation of sound policies and evidence-based practices that serve to enhance the quality and effectiveness of our behavioral health care system.

On behalf of the Alliance, I am here today to speak in support of LD 475, **Resolve, To Create the Frequent Users System Engagement Collaborative.**

This collaborative will develop a plan to provide stable housing and community services to 200 persons who are homeless or at risk of homelessness and who are frequent users of high-cost services, such as psychiatric hospitals, emergency shelters, emergency rooms, police, jails and prisons.

We know from years of research that the intersection between homelessness and mental illness is clear, "homeless people in Western countries are substantially more likely to have alcohol and drug dependence than the age-matched general population in those countries, and the prevalence of psychotic illnesses and personality disorders are higher. Psychiatric disorders in homeless individuals -- for instance -- psychosis is estimated to be three times higher than in the population with a sheltered living."¹

A home offers the element of stability, privacy, safety, security and the ability to control living space. Homelessness is defined as a lack of these elements – leaving a situation that is transient in nature, unsuitable and unstable.

Over this past year we have seen this type of collaborative already building in some of our communities in response to the added pressures of COVID-19 and we support this effort to formalize these initiatives.

We would offer a **friendly amendment to the sponsor** – in order to fulfill the task before it, adding to the collaborative a member representing providers of community-based behavioral health services is essential. We feel this voice and experience will be critical to developing any successful plan.

With this addition, we urge the committee to vote Ought to Pass on LD 475.

¹ Fazel S., Geddes J.R., Kushel M. The health of homeless people in high-income countries: descriptive epidemiology, health consequences, and clinical and policy recommendations. *Lancet*. 2014;384(9953):1529–1540.