

## **Position Statement In Support**

## LD 582: An Act To Support the Fidelity and Sustainability of Assertive Community Treatment

My name is Jeanne Gore. I'm a resident of Shapleigh, the Mom of a young man who suffers from schizoaffective disorder. I'm also the coordinator for the *National Shattering Silence Coalition* known as **NSSC**. Our mission is to speak out and inspire change for those suffering from serious brain illnesses.

From a personal perspective, I can tell you that, until my son was enrolled in the PTP Program in 2013, he suffered many years with the kind of torture none of us would ever think was possible to survive. He thought a worm was invading his body. He thought Jesus was telling him to kill his brother (somewhere in his heart of hearts, thankfully, he recognized this to be wrong), I witnessed him literally attempting to pull the hair out of his head just wanting the "bad demons" to leave. He was hospitalized 43 times, jailed twice, missing (can you just imagine the horror of not being able to find your child), beaten up by 7 police officers in Burlington, VT. He was homeless in Burlington, VT one year and I kept driving up there every weekend to attempt to engage him, somehow, into treatment. He thought I was a hooker who wanted to have sex with him. He no longer recognized me as his Mom. Imaging how devastating that was for both of us.

In 2013, once we were able to get him into the PTP program, the suffering, for the most part, finally ended for him. All those years we were unable to get successful treatment, however, killed brain cells, making my son unable to achieve his maximum ability to become a contributing member of society and, more importantly, achieve his dream to become a recognized musician and artist. He and I both now suffer from PTSD, anxiety, etc... in addition to his schizoaffective disorder and anosognosia.

Below I am providing links to studies, etc... proving the success of ACT Teams, both in economic terms and in terms of how effective they are at helping those who are the most seriously ill to achieve stability and a meaningful life.

I know this is a trying time and your budget dollars are stretched thin. If we truly want to find our way out of this, we can no longer ignore our most vulnerable citizens – those with serious

brain illnesses commonly referred to as serious mental illnesses (SMI). By ignoring them, not only is the human cost high, in terms of suffering, loss of life, etc... the economic costs are catastrophic. At NSSC we call it the #CostOfNotCaring.

One more note - as I witnessed back in 2012, before we could actually get the PTP program for my son, the services of an ACT Team alone, though they helped tremendously, did not provide what was needed for my son to achieve a true recovery from his illness. I would encourage this committee to support LD 1090 as well - Resolve, To Equitably Fund Legal Fees for Progressive Treatment Programs. The combination of an ACT Team, along with Assisted Outpatient Treatment, would give those with schizophrenia or bipolar disorder also suffering from anosognosia the best chance at true recovery from their illnesses. See the link below from SAMHAS for more information.

This doesn't mean that, without PTP, ACT Teams cannot greatly improve the lives of those with SMI who know they are ill. From SAMHSA: "Reviews of ACT research consistently conclude that, compared with other treatments (e.g., brokered or clinical case management programs), when faithfully implemented, ACT greatly reduces psychiatric hospitalization and leads to a higher level of housing stability."

Thank you, and I sincerely hope you will support the passage of this bill. Our children deserve every chance at a happy, successful life.

## Jeanne Gore

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## From the Treatment Advocacy Center:

"Assertive community treatment (ACT) is an effective and evidence-based intensive service program for individuals with serious mental illness. ACT provides specialized wrap-around services with intensive case management and has been proven to reduce hospitalizations, arrests and other adverse outcomes associated with lack of treatment for one's severe mental illness. However, there is significant variability in the availability of ACT or ACT-like programs in the United States. New research published this month in *Psychiatric Services* suggests that only 13% of mental health facilities provide ACT or ACT-like services. Of the facilities that did offer some form of ACT program, only 19% of those provided all of the core elements of ACT that have been shown to produce the greatest results. The authors suggest this large unmet need of ACT services calls for more funding from legislative appropriators throughout the country. "

https://ps.psychiatryonline.org/doi/10.1176/appi.ps.201700561

https://www.mercycareaz.org/assets/pdf/news/AssertiveCommunityTreatment-ACT-Report.pdf

https://store.samhsa.gov/sites/default/files/d7/priv/buildingyourprogram-act 1.pdf