

March 26, 2019

Senate Committee on Judiciary  
Oregon 2019 Legislative Session

**Subject: AOC Testimony on SB 973**

Dear Chair Prozanski, Vice-Chair Thatcher and Members of the Committee,

As the First Vice President of the Association of Oregon Counties (AOC) and on behalf of our state's 36 counties, thank you for the opportunity to testify today on SB 973.

**AOC strongly supports SB 973.**

Oregon should be very proud of the success of our current Justice Reinvestment program ("JRI"). JRI has allowed Oregon to slow our need for DOC beds while maintaining public safety, holding offenders accountable and maximizing use of our limited resources. BHJRI can be similarly successful in helping tackle the unfortunate reality that our county jails have collectively become our state's largest mental health institution.

Jails Are Our Largest Mental Health Institutions

Today, nearly 60 years after national "deinstitutionalization" of the mentally ill, an estimated 2 million people with serious mental illnesses—almost three-quarters of whom also have substance use disorders—are booked into local jails in the United States each year. In Oregon, that translates to about 25,000 individuals per year.

Among this group, an even smaller but significant number of people with mental illnesses and substance addictions are cycling through Oregon's county jails, courts, emergency rooms, and state hospital, costing local communities and the state millions of dollars. Better addressing their needs will not only help lessen their criminal justice involvement and improve health outcomes but also ensure effective use of limited state and local resources.

- The CSG Justice Center estimates that the statewide financial impact of people with complex behavioral health conditions who also repeatedly come into contact with Oregon's criminal justice and health systems is more than **\$310 million every two years**.
- Options for treating people with complex behavioral health conditions or diverting them from jail are often absent or under-resourced, and housing options—especially those that include supports and services for people struggling with serious mental illnesses and substance addictions—are sorely lacking across the state.
- Local communities have struggled to develop adequate and sustainable funding resources for alternatives for law enforcement to use—such as detox and crisis stabilization centers.
- Additionally, information sharing across agencies is inconsistent, undermining care coordination and continuity of care for people who have complex behavioral health conditions.

In an effort to improve outcomes for people with complex behavioral health conditions, Senate Bill 973 creates a new, state-administered grant program designed to foster a more robust, community-based continuum of care.

**Funding a Behavioral Health Justice Reinvestment Initiative (BHJRI)---AOC SUPPORTS:**

A. BHJRI funding that is in addition to (i.e. does not supplant) existing levels of original Justice Reinvestment Initiative funding.

B. A BHJRI approach that helps align and focus the various behavioral health programs that already exist. BHJRI should bring strategic clarity to behavioral health services and it should not create new administrative approaches that further fragment and/or complicate the delivery of services.

C. A BHJRI approach that leverages a partnership between OHA, the Criminal Justice Commission and the work of Oregon Housing and Community Services to create more “supported housing” to reduce the number of mentally ill individuals who currently cycle in and out of local county jails for low level offenses, often because of co-occurring substance abuse disorders.

**The Overall Opportunity to Create a More Integrated Approach to Public Safety-Behavioral Health-Physical Health-Housing System of Care**

We believe there is a very strong case to be made that the Governor’s \$54.5 supported housing investment should be focused specifically on the needs of those suffering from severe and persistent mental illness and/or addictions. By focusing on the health (physical and behavioral), housing, and social support needs of these individuals, local system partners can improve public safety outcomes and better meet the needs of mentally ill individuals at the same time. This integrative, problem-solving approach should leverage existing Local Public Safety Coordinating Council (LPSCC) work by expanding community based partnerships with CCOs, Housing Authorities, Local Mental Health Authorities (LMHAs) and the public safety-judicial system.

We urge you to pursue BHJRI. SB 973 presents a unique opportunity to divert mentally ill individuals from county jails, to align healthcare and housing initiatives, and ultimately to achieve better outcomes for individuals suffering from mental illness, while promoting public safety.

Sincerely,



Jim Doherty, Morrow County Commissioner  
First Vice President, Association of Oregon Counties