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Dear Measure X CAB members,

I appreciated the conversation at last week's Measure X CAB meeting that focused on criminal justice issues. I heard a lot of great ideas shared along with too much community pain during the 5 hour meeting. I shared some of my pain too as the mom of a Contra Costa County LPS Conservatee who was arrested as a patient, criminalized, deemed Incompetent to Stand Trial and held in solitary off and on for 4 years before finally having all charges dropped and diverted to a Mental Health Rehab Center in Merced County. That placement allowed him to recover, achieve medical and psychiatric stability and successfully transfer to a community placement in Santa Clara County. I am hopeful that he will one day be able to re-enter the Contra Costa community and will receive the safety net, housing and the disability right's protections that he needs to remain healed and stable.

Contra Costa must focus on the SMI population that is over-criminalized, suffering on the streets, living in below poverty conditions, and dying too young. In a recent Measure X Committee, there was some hesitation to use the word "disabled" for people who live heroically with "mental health issues." However, it is vital that the committee is clear that in order to receive services in the Adult Specialty MH System of Contra Costa, under existing law, one must have a DSM diagnosis and experience "substantial functional impairment" California's WIC 5600.3 defines the SPMH target population and requirements for access to services, <u>https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?</u> <u>lawCode=WIC§ionNum=5600.3</u>.: WIC 5600.3(B) (i) states, "As a result of the mental disorder, the person has substantial functional impairments or symptoms, or a psychiatric history demonstrating that without treatment there is an imminent risk of decompensation to having substantial impairments or symptoms."

Additionally, According to this report, <u>https://www.kff.org/medicaid/issue-brief/medicaids-role-in-financing-behavioral-health-services-for-low-income-individuals/</u>," **People with behavioral health needs, especially those with serious mental illness, may also qualify for Medicaid based on having a** *disability.* In most states, individuals who have a mental illness that makes them eligible for Supplemental Security Income (SSI), the federal cash assistance program for low-income aged, blind, or disabled individuals, are automatically eligible for Medicaid.^{10,11} To be eligible for SSI, individuals must have low incomes, limited assets, and an impaired ability to work at a substantial gainful level as a result of old age or *significant disability.*"

Sadly, my son became a MediCal card carrying young man at the age of 18 with SSI as his only income. Over the course of multiple 5150s when he was involuntarily treated, he was considered "danger to self and others." And, when conserved by the Superior Court, he was deemed "*gravely disabled*" in order to be conserved. That designation of "grave disability" has been re-established by doctors and courts annually for the past 20 years. and allowed him to be forced into facilities outside of our county for

months and years. So, I urge all committee members to understand that the term "disability" should be considered for this marginalized and vulnerable "mental health" population.

As I stated in my public comments last week, there is a crisis coming to Contra Costa that the Measure X Committee must consider. The Governor's May Revise has realigned LPS Conservatorships from the Department of State Hospitals back to the counties. I am attaching some documents that will explain this grave issue more fully. I had hoped to learn how the county justice partners plan to support the growing needs for housing and caring for the IST and LPS Conservatorship populations in our county last week. Unfortunately, I did not hear that population addressed by anyone. I urge the Measure X CAB to consider the grave needs of this population. Most of this returning population will be considered "dangerous to self or others" or **gravely disabled.** I suggest a presentation from the Behavioral Health Director, Public Defender's Office and Linda Arzio of the CCC Public Guardian's Office at a minimum. An estimated budget need of up to \$25 million to cover this population was suggested at last week's Mental Health Commission meeting.

A question often heard in all state and local meetings for criminal justice reform is "divert to where and what?" Lauren Retagliata and I tried to answer that question in our The Housing That Heals paper that has been shared with the Measure X CAB. The paper outlines the funding disparities for the Specialty MH population. Those disparities have simply not been adequately addressed in Contra Costa for years. They can not be forgotten now.

The Measure X CAB and all Contra Costa stakeholders must understand that not everyone can be diverted from jail, a hospital bed or involuntary treatment. However, there are promising opportunities happening in other counties such as this one that Lauren and I recently visited in Napa. We have shared this resource with our county partners. See this post for photos: <u>https://www.facebook.com/</u> <u>teresa.pasquini.3/posts/10215270987806576</u>. As described in the attached Gray Haven blog post, NIMBYism may prevent this amazing facility from expanding. This isn't stigma. This is discrimination agains a protected class. It is part of what is keeping this population from living in dignity and health and preventing housing solutions to be created.

I have deep respect for the Contra Costa community's rich history for fighting social injustice for all vulnerable populations. Please don't exclude families like mine as you consider the safety net, housing, health and safety needs for our county.

Respectfully, Teresa Pasquini Danny's mom Former Contra Costa Mental Health Commissioner Former Vice Chair of MHSA Finance Committee Former Chair of CCRMC Behavioral Health Care Partnership