

April 4, 2025

Members of the Senate Human Services Committee:

On behalf of NAMI Minnesota, we are writing in support of SF 3106. The mental health system is not broken, it has never been built. While we are in a mental health crisis right now in Minnesota, the truth is that we have failed to adequately respond to the problem for years. The result is a system that largely reacts to crises and focuses on deep end intensive services rather than a balanced continuum of prevention, intervention, and stability. For too long we have waited for people to become sick to the point of crisis. We know from the thousands of calls we receive each year that most crises do not develop overnight. In fact, individuals and families often seek help for months and years without an adequate response.

The Engagement Services Pilot, or voluntary engagement, represents a long needed investment in prevention and intervention. Some people with serious mental illnesses may not have insight into their own illness. Rather than wait for the most intensive response to a mental health crisis – civil commitment, or involuntary treatment – voluntary engagement identifies people who may be struggling and engages them to seek treatment voluntarily. The service allows for consistent engagement for up to 90 days to help people identify resources and engage in treatment. If a person refuses at first, a peer specialist or mobile crisis team member, for example, can return the next day and try again. This service provides a more neutral party to encourage the person to seek treatment and can reduce tensions between concerned loved ones and the person needing help.

Moreover, voluntary engagement can reduce the need for all deep end responses to a mental health crisis, including hospitalization or encountering the criminal legal system. As this committee has acknowledged extensively, there are not enough inpatient beds at state operated services or community hospitals right now to meet the needs in Minnesota. The result is a revolving door of hospitalization and crisis for some, and languishing in jail for others. While one answer is to increase capacity for inpatient beds, that is an incomplete solution without building a full continuum of mental health care. We believe voluntary engagement is a critical piece of the continuum. If we want less people needing hospitalization and less people with mental illnesses in our jails, we should intervene before it gets to that point.

Thank you for hearing this important bill to extend the availability of funds for engagement service until 2028. The request for proposal to provide engagement services has been released only recently, and it is crucial that these funds are not lost. Please support SF 3106.

Sincerely,

Sue Abderholden, MPH

**Executive Director** 

Elliot Butay

Senior Policy Coordinator



