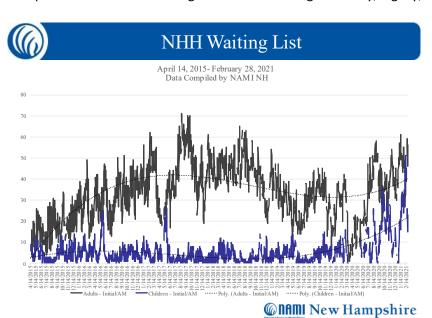
March 16, 2021

Honorable Kenneth Weyler Chairman House Finance Committee Room 210 Legislative Office Building State Street Concord, NH 03301

Chairman Weyler and Members of the Committee:

My name is Kenneth Norton, and I am the Executive Director of NAMI NH, the New Hampshire Chapter of the National Alliance on Mental Illness. NAMI NH is a grassroots non-profit organization whose mission is to improve the lives of all people impacted by mental illness and/or suicide. I am a Licensed Independent Social Worker (LICSW), have served as a subject matter expert on suicide and mental illness to SAMHSA and the Department of Defense, I am a former foster parent, and I have family members with mental illness as well as addictive disorders.

During Governor Sununu's budget address on February 11, 2021, he once again stated NH is in a mental health crisis. This crisis has been exacerbated by the pandemic. Local and national data indicate during the past year there have been significant increases in stress, anxiety and depression across all ages, though particularly impacting children, and youth. The most visible symptom of this is emergency department boarding of individuals in a mental health crisis while waiting for an inpatient bed. This is a practice NAMI NH has long described as wrong medically, legally, ethically, morally, and economically.



During the past month we have exceeded previous highs of the numbers of people being boarded with 51 children being boarded on February 14, 2021, and a combined high of eighty-nine children and adults being boarded on February 17, 2021.

The chart at left gives a longitudinal look at emergency department boarding from April of 2015 through February of 2021. Children are in dark blue, and adults are in black. You will note the spike for both adults and children during the past year coinciding with the pandemic.

Emergency Department Boarding is the tip of the proverbial iceberg relative to timely access to mental health care. There are long waits for outpatient treatment if people can get appointments at all.

Find Help, Find Hope.

Workforce shortages pose an ongoing challenge to addressing NH's mental health crisis. Fully funding the State Loan Repayment Program (SLRP) is critical to addressing workforce shortages in mental health and other health related fields.

Suicide continues to be a signficant public health issue in our state. Suicide is the second leading cause of death (after accidental injury) in New Hampshire for those for ages 10-34 and age third leading cause

of death ages 35-44 and fourth leading cause of death ages 45-54. A 2018 report by the US Center for Disease Control issued report in June 2018 indicated NH had the 3rd highest increase in suicide rates in the US. Suicide has a profound impact on the family and friends left behind and can also have a devastating impact on schools, communities, and workplaces.



NH Leading Causes of Death: 2015-2019

	Age Groups										
Rank	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65+	All Age
1	Short Gestation 33	Unintentional Injury 10	Malignant Neoplaams	Malignant Neoplasms 11	Unintentional Injury 321	Unintentions Injury 818	Unintentional Injury 642	Malignant Neoplasms 866	Malignant Neoplasms 2,622	Heart Disease 11,250	Malignant Neoplasms 13,938
2	Congenital Anomalies 29	Congenital Anomalies	Unintentions	Stickle-	Suicide 152	Suicide 182	Malignant Neoplasms 211	Unintentional Injury 608	Heart Disease 1,395	Melignant Neoplasms 10,137	Heart Disease 13,416
3	Maternal Pregnancy Comp. 15	Homicide		Unintentional Injury	Hoart Disease 20	Malignant Neoplasms 62	Suicide 195	Heart Disease 577	Unintentional Injury 484	Chronic Low. Respiratory Disease 3,136	Unintentiona Injury 4,469
4	Placenta Cord Membranes 15	Influenza & Pneumonia	Benign Neoplasms —	Congenital Anomalies —	Malignant Neoplasms 18	Heart Disease 49	Heart Disease 118	Suicide 272	Chronic Low Respiratory Disease 397	Alzheimer's Disease 2,267	Chronic Low Respiratory Disease 3,641
5	Respiratory Distress 10	Malignant Neoplasms	Congenital Anomalies	Berign Neoplasms	Homicide 14	Livor Disease 15	Liver Disease 68	Livor Disease 169	Diabetes Melitus 277	Corebro- vascular 2,203	Corebro- vascular 2.486
6	Circulatory System Disease	Diabetos Melitus	Heart Disease	Chronic Low. Respiratory Disease	Chronic Low Respiratory Disease	Hamickle 13	Diabetes Melitus 31	Diabotes Melitus 101	Liver Disease 277	Unintentional Injury 1,566	Alzheimer's Disease 2.296
7	Intrautorina Hypoxis	Heart Disease	Acute Bronchittis	influenza & Pneumonia —	Congenital Anomalies	Carabro- vascular 11	Homicida 25	Chronic Low Respiratory Disease 81	Sulcide 223	Diabetes Melitus 1,226	Diabetes Melitus 1,646
8	Bacterial Sepsis	122	Diseases Of Appendix	Nephritis	Cerebro- vascular	Congenital Anomalies	Cerebro- vascular 17	Cerebro- vascular 73	Cerebro- vascular 175	Influenza & Pneumonia 1,070	Suicide 1,271
9	Unintentional injury			Preumonitis	Diabetes Malitus	Diabetes Melitus	Chronic Low Respiratory Disease 16	Septicemia 36	Nephritis 84	Nophritis 810	Influenza & Prieumoni 1,167
10	SIDS		27	_	Four Tied	Two Tied	Congenital Anomalies 11	Congenital Anomalies 24	Septicemia 83	Parkinson's Disease 786	Nophritis 926

Source: CDC WISQARS, 2014 -2018



We anticipate the mental health impact of the pandemic will continue for some time to come. For children and youth, the impact of delayed or missing key social or academic developmental milestones will likely have lasting impact academically, socially, emotionally, and ultimately may negatively impact their mental well-being. For parents, the yearlong mental health impact of juggling virtual learning of children with work and other responsibilities is taking a visible toll. We are also beginning to see negative impacts of the year-long pandemic on our workforce, many of whom have been under tremendous pressure. This impact goes well beyond the obvious front line health care providers, first responders, teachers and others and is impacting across many different businesses and organizations.

This includes our Department of Health and Human Services. Across all departments people have worked extraordinarily hard to meet the needs of NH's most vulnerable residents during the pandemic. Specifically, the Division of Behavioral Health needs to be fully staffed in order to have the leadership and capacity to move the 10-Year Mental Health Plan forward and to hold the various systems accountable to achieving the objectives of the plan.

Toward that end, we must continue the work begun during the 2019 legislative session of implementing the key recommendations of the 2019 10-Year Mental Health Plan. This includes continuing to focus on developing a continuum of community-based services for mental health crisis response, step up and step-down services, inpatient and outpatient capacity, supported housing, peer support, suicide

HB1 and 2 House Finance Page | 2

prevention and substance use disorder services. This also includes moving ahead with building a new forensic hospital in order to end the practice of people with mental health conditions who have not been charged with crimes being transferred to the Department of Corrections and the Secure Psychiatric Until. It is imperative that we continue to prioritize mental health funding in order to address the mental health crisis we are currently facing. I call on you to fully fund mental health services as proposed in the Governor's budget.

Lastly, as a member of the Governor's Law Enforcement Accountability, Community and Transparency Commission, I offer my strong support for fully funding Police Standards and Training as included in the Governor's Budget. As a member of the committee, it was clear that Police Standards and Training required significant increased funding in order to meet the recommendations of the previous Legislative Budget Audit. Additionally, there were specific recommendations that were made by the LEACT Commission included in the Governor's budget. With over 45% of the officer involved shootings in New Hampshire being people with known mental illness, NAMI NH strongly supports increased funding and support for Police Standards and Training as proposed in the Governor's Budget.

Thank you to all the Finance Committee Members for your hard work and service to our state. If I can be of any assistance as you address mental health issues during your budget deliberations, please feel free to contact me.

Respectfully,

Kenneth Norton, LICSW Executive Director