

Testimony from Ann Cooper Cummins  
President and Board Chair of NAMI Vermont  
Senate Committee on Economic Development, Housing and General Affairs  
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My name is Ann Cooper Cummins, from Jamaica, Vermont. I am President and Chair of the Board of the Vermont Chapter of the National Alliance of Mental Illness (NAMI Vermont). This is a statewide non-profit, grassroots, volunteer organization comprised of family members, friends, and individuals affected by mental illness. Our mission is to provide education, support and advocacy to individuals and family members living with mental illness.

We are joined here today with 20 other co-sponsors of Mental Health Advocacy Day along with the many advocates, family members, peers, and mental health professionals throughout the state. We need to ensure that adequate funding will continue to be available for mental health services and housing programs. In Vermont, approximately 23,000 adults and 6,000 youth and teenagers face serious mental illness. The good news is that most people living with mental illness can lead fulfilling, productive lives, but only if they have access to treatment. With your help, we need to protect and strengthen the services and programs for people living with mental illness.

We want to ensure youth and adults living with mental illness receive the right care at the right time and in the right place to experience lives of resiliency, recovery and inclusion. We hope that we can count on all of you to ensure that we meet this goal. We are calling on you to pass legislation that will invest in proven, cost-effective, community-based treatment and services that promote recovery.

When adults living with serious mental illness cannot get adequate treatment or services, they often end up on the street. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), about one in four homeless persons are diagnosed with a severe mental illness.<sup>1</sup>

Lack of housing causes people with serious mental illnesses to cycle among hospitals, shelters, the streets or jails at very high costs.<sup>2</sup>

Addressing homelessness for people with serious mental illness requires “supportive housing,” a combination of both affordable housing and mental health services. The most successful approach, “housing first,” provides permanent housing followed by voluntary supportive services.<sup>3</sup>

We believe that lives are saved when people have housing security and proper health services. We also believe the investment in supportive housing and mental health services also saves money.<sup>4</sup>

#### Endnotes

<sup>1</sup> *Homelessness – Provision of Mental Health and Substance Abuse Services*.  
<http://mentalhealth.samhsa.gov/publications/allpubs/homelessness/> . Visited 12/9/2009.

<sup>2</sup> Burt, M. R., *What Will It Take to End Homelessness?*, *Urban Institute Brief*, Urban Institute, (2001).

<sup>3</sup> *Chronic Homelessness*, National Alliance to End Homelessness, (March 2007).

<sup>4</sup> *The High Costs of Cutting Mental Health*. NAMI State Advocacy Fact Sheet on Homelessness.