



CITY OF CHICAGO



CHICAGO DEPARTMENT OF PUBLIC HEALTH

October 15, 2021

Dear City Council:

All of us want better mental healthcare in Chicago. We have a duty to ensure every resident receives the care they need when and where they need it. **I urge you to support Mayor Lightfoot's 2022 mental health budget plan**, which would make a historic investment in the mental health system to further expand access and equity in Chicago.

As you heard me say at CDPH's budget hearing, I am very proud of the progress we have made as a city in the last two years in *system*-building. We have moved beyond the walls of individual clinics, taking bold and needed steps to bring high-quality mental health services directly to people struggling with unmet needs, including those who are experiencing homelessness, substance use, and mental health crises.

At the same time, we've been strategic with weaving together federal, state, county, and city funding to create a new network of Trauma-Informed Centers of Care — which, by definition, serve all Chicagoans regardless of their ability to pay, insurance status, or immigration status. These outpatient clinics focus on underserved residents and include community clinics, mental health centers, CDPH-operated clinics, and federally qualified health centers. They currently serve Chicagoans in 34 high-need community areas, many with a youth focus.

The results speak for themselves. **In 2019, we served about 3,600 people. In the first half of 2021 alone, even during COVID, we have already served more than 26,000 Chicagoans, including many with much more acute mental health needs than ever before.** This is many more clients, with a wider range of needs, than the City of Chicago has served in decades, if not ever — and we're still expanding.

The plan would invest \$86 million in mental health, of which \$52 million would be new funding. This massive increase is a once-in-a-generation opportunity that builds on the expansions Mayor Lightfoot and City Council have undertaken together. It would result in a seven-fold increase in mental health funding since 2019, with significant investments in organizations rooted in communities. The plan would:

- More than double the funding for the Trauma-Informed Centers of Care network — and expand this network from 34 community areas to the entire city, helping meet unmet mental health needs in every community across Chicago through organizations that know and are embedded in neighborhoods. We anticipate making this expansion within the next six months. With the new funding, we would serve 40,000 additional residents in

need, yielding a total client load **more than 16 times higher** than the number of people the City served in 2019.

- Increase funding for the Crisis Assistance Response and Engagement (CARE) pilot by seven-fold, building on our successful integration of mental health professionals into the 911 system.
- Launch innovative programs that divert people with serious mental illness or addiction away from the criminal justice system and into housing and the treatment that's right for them.
- Continue to invest in both CDPH-run mental health clinics and citywide coordination — balancing the need for the City to serve as both a safety net service provider and a leader in the broader public health system.

This portfolio of investments reflects the reality that one size doesn't fit all in mental health. Different residents need different things and wish to receive services from a diverse array of providers in their communities. Accordingly, our plan is the right path forward for ensuring residents not only have access to care but are able to receive the right care for their needs.

Yesterday, a budget amendment was proposed that would divert \$10 million from the funding for the Trauma-Informed Centers of Care network. This concerning proposal would mean depriving tens of thousands of residents of the services they would receive under our plan, when a rapid expansion of mental health services in Chicago is critical. It would also prevent the program from expanding citywide to serve marginalized residents in every community and slash the new investments we would make in high-need communities. Moreover, the alternative proposal would take years to implement, whereas our plan would put new services in the field within six months. We must stand firm in fighting to ensure that more people receive the right care — as soon as possible. Our city's mental health hangs in the balance.

I ask for your support for this critical plan. Please visit mentalhealth.chicago.gov to learn more about our clinics and work to fight stigma. More importantly, please contact me with any questions, concerns, or thoughts. Together, and only together, will we be able to continue to transform the mental healthcare system in Chicago.

Thanks for reading and for your partnership,



Allison Arwady, MD
Commissioner