



Association of Community Mental Health Centers of Kansas, Inc.

534 S. Kansas, Suite 330, Topeka, KS 66603
Telephone (785) 234-4773 Fax (785) 234-3189
Web Site: www.acmhck.org

Michael J. Hammond
Executive Director

Testimony to Senate Ways and Means Committee on Senate Bill 444

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Madam Chair and members of the Committee, my name is Mike Hammond, I am the Executive Director of the Association Community Mental Health Centers of Kansas, Inc. The Association represents the 27 licensed Community Mental Health Centers (CMHCs) in Kansas who provide home and community-based, as well as outpatient mental health services in all 105 counties in Kansas, 24-hours a day, seven days a week. In Kansas, CMHCs are the local Mental Health Authorities coordinating the delivery of publicly funded community-based mental health services. The CMHC system is state and county funded and locally administered. In Kansas, you first must be designated by your County to serve as the CMHC to the county residents, then you must secure a license from the Kansas Department of Social and Rehabilitation Services (SRS), to become the publicly funded CMHC and recognized as such by the State of Kansas. Consequently, service delivery decisions are made at the community level, closest to the residents that require mental health treatment. Each CMHC has a defined and discrete geographical service area. Together, they employ over 4,500 professionals.

The CMHCs provide services to Kansans of all ages with a diverse range of presenting problems. Together, this system of 27 licensed CMHCs form an integral part of the total mental health system in Kansas. As part of licensing regulations, CMHCs are required to provide services to all Kansans needing them, regardless of their ability to pay. This makes the community mental health system the "safety net" for Kansans with mental health needs. Collectively, the CMHC system serves over 123,000 Kansans with mental illness.

I submit this written testimony in support of Senate Bill 444, relating to employment of persons with disabilities and competitive bids for state contracts. The bill does include persons with severe and persistent mental illness (SPMI). We believe strongly that a person with a mental illness should have the same opportunity to reap the benefits of employment as any other disabled person. If enacted, this bill will be one added incentive for employers to recruit and employ persons with a mental illness in meaningful jobs.

Securing and sustaining meaningful employment is obviously beneficial to the individual with persistent mental illness. What may be less obvious is that including these individuals in the workforce can be tremendously beneficial to the companies employing them, as well.

Individuals with persistent mental illnesses are among the most creative and imaginative members of our society. What might the world have been like if leaders such as Abraham Lincoln, Winston Churchill, and others had been relegated to the ranks of the unemployed? Many people find it difficult to believe that individuals whose accomplishments were so momentous as to change the very course of history could have suffered from a serious mental illness. But they did-and they are far from alone.

Research demonstrates that far from hindering creativity, the medications now available serve to actually enhance productivity. Harnessing the talent, creativity, and capability of individuals with a mental illness continues to provide enormous benefits for the enterprises employing these individuals.

Meaningful employment is an essential part of the recovery process. Happily, recent advances in treatment now make it possible for those with persistent mental illness to make a valuable contribution to the workplace.

Unfortunately, while the treatment of mental illnesses has advanced, much of society's thinking about psychiatric disabilities has not. Stigmatization has excluded individuals from key spheres of society, including - and perhaps especially - the workplace. Many myths about the impact of mental illness endure despite clear facts refuting them. Here are just a few:

Myth #1: Recovery from mental illness is impossible.

The Facts: While these illnesses are persistent, research has shown that with treatment, the majority of people with mental illnesses achieve genuine improvement in their symptoms over time and lead stable, productive lives. As the treatment of mental illness has advanced, the focus of treatment has shifted from simply minimizing symptoms to true recovery-that is, to reintegration into mainstream society, including (and perhaps most importantly) the world of work.

Myth #2: Mentally ill tend to be second-rate workers.

The Facts: Far from being inferior workers, individuals with mental illnesses may in fact be superior in many ways to their co-workers without mental illness. Employers who have hired these individuals report that their attendance and punctuality exceed the norm, and that their motivation, work quality, and job tenure is as good as - or better than - that of other employees. Research has shown that there is no difference between the productivity of workers with and without mental illness.

Myth #3: People with psychiatric disabilities cannot tolerate stress on the job.

The Facts: The response to job-related stress, and precisely which factors will be perceived as stressful, vary among individuals with psychiatric disabilities just as they do among people without such disabilities. For all workers -- with or without psychiatric disabilities -- productivity is optimized when there is a close match between the employee's needs and his or her working conditions.

Access to meaningful, paid work is a basic human right for every citizen, and those who experience serious mental illness should have equal access to the fundamental elements of citizenship which include: housing, education, income and work. This means that each individual has the right to be employed in a mainstream job, rather than being labeled as a client in a training program or a sheltered workshop.

Thank you for considering our testimony. We urge you to report out favorably Senate Bill 444.