



CHICAGOANS WANT **TREATMENT NOT TRAUMA**

What is Treatment Not Trauma?

Treatment Not Trauma has two demands:

Provide non-police crisis response, focusing on mental health professionals, emergency medical personnel, and peer support workers.

Prevent crises by providing supportive everyday care to those who are at greatest risk of mental health crises, police contact, violence, and hospitalization through the establishment of a fully funded public health network.

Reasons to Support Treatment Not Trauma

POLICE SHOULD NOT BE INVOLVED IN THE ADMINISTRATION OF MENTAL HEALTH CARE.

Armed response can drastically escalate a situation, heighten tensions between police and individuals, and potentially lead to a fatality. The risk of being killed by police is 16 times greater for individuals with untreated mental illness than for other residents.

STRONG NEIGHBORHOOD SUPPORT FOR TREATMENT NOT TRAUMA.

The strong neighborhood opposition to the public mental health centers was ignored, as well as the continued call to reopen them. It's time for the voices of neighborhood residents to be heard. 93% plus supported the TNT advisory referendum where it appeared on the ballot.

OUR CURRENT SYSTEMS ARE FAILING TO PROVIDE ACCESSIBLE, SAFE, QUALITY MENTAL HEALTH CARE.

78.6% of the city lives in areas with less than 0.2 therapists per 1000 residents while 21.4% lives in areas with 4.3 therapists per 1000. Of the not-for-profits that the city contracts with mental health services CCW research found that 17% did not serve undocumented residents, and 25% did not serve people without insurance. Less than half offered free services.

WE NEED SYSTEMS THAT UPHOLD THE DIGNITY AND HUMANITY OF CHICAGOANS FACING MENTAL HEALTH STRUGGLES.

When a neighbor, or a loved one is experiencing a mental health emergency Chicagoans do not want the city to respond by sending a police officer with a gun. Clinicians have the resources and training meant to de-escalate situations that are rooted in a code of ethics and trust.

Our Guiding Principles

Trust

Public health cannot succeed without public trust and sustained funding.

Interwoven

Crisis response works best, and is needed least, when it is interwoven with sustained crisis prevention systems based on supportive interpersonal relationships with people living at greatest risk of behavioral and mental health crises.

Quality Jobs

Good-quality public health jobs in disinvested communities are essential to earn public trust and to build health and safety. Income via dignified, meaningful work is a key tool for enabling individual and collective well-being.

Community Controlled

Effective care is participatory, inclusive, and community-controlled. Public health succeeds when the whole population is enabled by public systems to care for itself, and each community is empowered to set and realize its own priorities.

Prevention support

Functional health systems depend primarily upon non-medical, lay care systems for preventive support; professionalized medical care should generally function as a secondary infrastructure that steps in when first-line prevention is inadequate.

Proposed Timeline for Expansion of CDPH Mental Health Centers

- * **2024:** Expansion of the existing five centers, including the creation of three 24/7 centers and develop an adequate reinvestment in the current centers
- * **2025:** Open three new centers, begin assessing possible properties to purchase or existing city-owned properties that can be repurposed for additional centers
- * **2026:** Open five new centers
- * **2027:** Open six new centers

The Collaborative for Community Wellness brings together mental health professionals, community-based organizations, and community residents to address the lack of mental health access and to redefine mental health to match the needs of the community.

