



**Southwest Iowa
Coalition**

A Voice for Southwest Iowa

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Ro Foege, Task Force Chairman
% Connie B. Fanselow
Division of Mental Health and Disability Services
Iowa Department of Human Services
Hoover State Office Building 5th Floor SW
1305 East Walnut Street
Des Moines, IA 50319

Dear Ms. Fanselow:

The Southwest Iowa Coalition (SWICO) is Iowa's longest standing rural advocacy group. Our mission is to advance economic development and promote policies that enhance and enable the people of southwest Iowa to survive and thrive. As legislative committee chair for the Southwest Iowa Coalition, I would very much like to bring the following items to your attention:

1. The Clarinda Treatment Complex (CTC) has been very successful at creating an integrated system that allows both public and private entities to coexist on the same campus. This has allowed the campus to evolve into a system where economies of scale have kept costs down. Clarinda is one of the most cost efficient treatment campuses in the State system. The primary partners on the Clarinda campus are the Mental Health Institute (MHI), Clarinda Correctional Facility (CCF), Clarinda Academy, and the Waubonsie Mental Health Center.

2. The closing of the Clarinda MHI would directly impact 103 jobs and the ripple effect on the local economy is projected to cost the regional economy another 40 jobs. The lose of those 103 jobs would create a loss of 7 million in annual salary income and another 1 million in ancillary income as the impact of the closing moves through the local economies. The multiplier effect, in standard use by economists, would equate to an overall economic impact of almost 15 million dollars annually to the region. With the recent plant closings and permanent layoffs experienced in the last 18 months, our region already is posting some of the highest unemployment numbers in the State.

3. Probably the most important point is that the closing of the MHI would create a hardship on the folks who need these services the most. The gap created by this absence in services would force those who experience special challenges to find treatment in other parts of the state. Many of the primary caregivers and the people who use these services are ill equipped, or unable to travel great distances to receive treatment. That means a certain segment of this population will go unattended, be forced to try and seek attention locally, or get no assistance at all. U.S. trends show a parallel rise in cases by medical, public safety, judicial and detention services within regions that have closed facilities of this type, merely shifting and escalating the costs from one institution to another, so no one, especially the consumer or the tax payer benefits.

The State needs to focus on how to provide more mental health services to its citizens, not less, and the Clarinda Campus is a prime example of how these services have/can be provided in a cost efficient, patient effective, and regionally accessible manner.

Sincerely,

Steve Adams,
Legislative Committee Chair

On behalf of the board and members

November 2,
2009