

S.B. No. 1: AN ACT EQUALIZING COMPREHENSIVE ACCESS TO MENTAL, BEHAVIORAL AND PHYSICAL HEALTH CARE IN RESPONSE TO THE PANDEMIC.

**Public Health Committee
Public Hearing, March 17, 2021**

Good Morning Respective Members of the Public Health Committee:

My name is Michaela Fissel, and I am registered voter in Windsor, CT. I am also the Executive Director at Advocacy Unlimited, Inc. and I co-chair a workgroup of advocates seeking billable peer services in Connecticut. **I am testifying today in opposition to Section 2 of SB 1.**

Section 2 of SB1 seeks to authorize the Commissioner of Public Health to provide for the certification and education of peer support specialists and specify the peer support services that a certified peer support specialist may provide to another individual in the state. This section is concerning, and further consideration is needed.

On March 9th, the Insurance and Real Estate Committee held a public hearing on HB 6588, AN ACT CONCERNING MENTAL HEALTH CARE AND SUBSTANCE ABUSE SERVICES. Section 2 of HB 6588 will establish a statewide task force to study insurance reimbursement for peer services. This bill is highly supported by Connecticut's mental health and addiction service and recovery communities.

I ask that you strike Section 2 from SB 1, and substitute language that replicates Section 2 of HB 6588.

Establishing a representative task force, comprised of people with direct lived experience navigating mental health challenges, addiction, and trauma, is important for many reasons, including the need for equity. The task force will also further the State's commitment to recovery-orientation. The establishment of a task force will allow a meaningful process to inform the development of the peer workforce in Connecticut.

Currently, the State of Connecticut Department of Mental Health and Addiction Services (DMHAS) endorses a statewide curriculum and examination of Recovery Support Specialists (RSS) who are employed by behavioral health service organizations and agencies. RSS provide nonmedical recovery supports to people who experience mental health and addiction challenges.

In addition, the Connecticut Community for Addiction Recovery (CCAR) offers a nationally recognized educational program for Recovery Coaches. Recovery Coaches are employed across Connecticut, and in many other states. These individuals provide 1:1 recovery supports within various behavioral health settings, including hospital emergency rooms and in methadone clinics.

Peer support services are critical to advancing recovery pathways, and considered an Evidence Based Practice by the Substance Abuse and Mental Health Services Administration.

What we know to be true, is that peer support specialists shift the locus of control and strengthens an internal regulatory system. This means people, themselves, take personal responsibility for the outcomes of their life. They step forward in their life based on self-defined indicators of success. This is an outcome of having people - like themselves - demonstrate the possibilities of recovery and sharing that direct-lived experience.

Since the early 2000s, and through the leadership of past Commissioner Kirk, the DMHAS declared Connecticut's commitment to recovery orientation. This was a critical step forward; yet, there two components of the recovery-orientated system of care remain under funded and as second-class priorities.

These two components include peers in the planning, implementation, and evaluation of services; along with peer support as a requirement at all levels of the system and across healthcare settings. By enacting a task force, you will ratify an inequity and move our state closer to the clearest vision of recovery-orientation.

It is also important to note the contradiction in Section 2, when considering the intention of the bill. I commend the efforts of Senator Mooney to create a breadth of policy that is a balanced approach to equity and inclusion. This must remain a priority in all discussions by decision makers.

Section 2 contradicts this effort. By giving authority to the Department of Public Health you are bypassing the deliberative processes of a representative group of stakeholders. This is discriminatory and further marginalizes a historically ostracized, and arguably abused, group of people. In our society, a psychiatric diagnosis given by a treatment provider is a pass for assumed authority over that individual and the subsequent elimination of their right to choice. So many people are unaware of this inequity, and yet it continues completely unchecked.

The Department of Public Health may have the best intentions. However, without a representative group of people with direct lived experience receiving mental health and addiction services overseeing peer recovery services – you are opening all of us up to egregious human rights violations and the abuse of people who learned helplessness at the hands of the system. This is a mirror version of many civil rights movements, and today I am asking that you stand with us.

No state has adopted a state credential for peer support services the same way. Just compare New York, Massachusetts, and Rhode Island – all different. Every state has gone through a process. While over 40 states have done the work and found a model that works for them. I ask that Connecticut takes the time, without promising anyone anything, and allows the task force to carry out a fair, meaningful, and representative process.

Thank you for taking the time today to hear from so many. This public hearing has created space for a much-needed dialogue. I am grateful for your commitment and service to the State of Connecticut.

I ask that you strike Section 2 of SB 1 and support Section 2 of HB 6588 – let us step forward, together.

Respectfully,

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Advocacy Unlimited is a peer-led non-profit that provides education, advocacy, and support. We are people who identify as having experience navigating mental health challenges, addiction, and trauma. We use our direct lived experience – coupled with training and education – to promote individual growth, human rights, and systems transformation. Since our incorporation in 1998, we have remained committed to offering holistic peer-led recovery supports and we are the largest designated peer-led training organization for those seeking employment as Recovery Support Specialists.
www.advocacyunlimited.org