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Before the Public Safety &
Security Committee

In Support of SB 572: AN ACT CONCERNING COMMUNITY CRISIS RESPONSE TEAMS AND REENTRY CENTERS

Good Afternoon Senator Bradley, Representative Horn, and members of the Public Safety and Security Committee. My name is Rebecca Simonsen and I am a Vice President with the New England Healthcare Employees Union District 1199. District 1199 represents 26,000 members across Connecticut in a variety of public and private sectors, including approximately 7,000 workers that provide direct care within the Department of Mental Health and Addictions Services (DMHAS).

Today I am testifying in support of Senate Bill **572, An Act Concerning Community Crisis Response Teams and Reentry Centers**. District 1199 represents members of DMHAS funded mobile crisis units across the state. The work that these mobile crisis units do centers around the idea that trained professionals like social workers and other community responders rather than police should be the ones responding to mental health and addiction crisis. District 1199 members know that increased policing disproportionately affects Black and Hispanic men and women at a higher rate than white people. Many times police shootings have occurred when someone is experiencing a mental health or addiction crisis. People with mental health issues are sixteen times more likely to be killed by the police. Here in CT, over fifty percent of those who have been killed since 2001 were experiencing a mental health crisis.

District 1199 believes that Mobile Crisis Services provide the most effective strategy for responding to mental health emergencies, preventing suicides and overdose deaths, and reducing psychiatric hospital bed use, and we have seen the need for them skyrocket during the COVID-19 pandemic. Twenty percent of people diagnosed with COVID develop mental illness within ninety days. Meanwhile, the number of drug overdose deaths, already astronomical pre-pandemic, is skyrocketing. We can see the results of the pandemic in places like Capitol Region Mental Health Center in Hartford where police calls have tripled since the pandemic began.

Unfortunately, even though mobile crisis services are clearly needed now more than ever, chronic underfunding has cut them to the bone—leaving huge gaps in coverage on nights and weekends statewide. In addition, DMHAS’s mobile crisis units operate only when they receive calls from the 211 service that is designated to receive these calls, not 911.

Instead of continuing to commit resources to police departments to respond to these calls, District 1199 is recommending that the State commit \$6 million dollars or the equivalent of 74 positions to the DMHAS run mobile crisis units. We are recommending that these units run 24/7 with coverage across the state in all 5 regions, and that mobile crisis intervention services be the default response to 911 mental health calls, dispatched directly through 911. Several municipalities, including NYC, have adopted this approach. **CT has opportunity to have the first comprehensive, statewide system if we do this right. We must expand Mobile Crisis Services—because it's the difference between life and death for CT residents experiencing mental health emergencies. Please support SB 572.**