

**Testimony for Appropriations Committee  
Health Subcommittee**

**Public Hearing re: H.B. No. 6439 (COMM) AN ACT CONCERNING  
THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE  
THIRTIETH, 2023**

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March 2, 2021**

Senators Osten, Abrams, Somers, and Representatives Walker, Dillon, and Kennedy, and other esteemed members of the Appropriations Committee, I am here today to advocate for the prevention infrastructure in the state of Connecticut and the maximum level of funding for prevention programs.

I am the co-president of The Governor's Prevention Partnership, a statewide nonprofit organization that has been focused on keeping Connecticut's young people safe from the threats facing them - including illegal substances and bullying - by connecting them to positive influences in their schools, communities, and personal lives for more than 30 years.

I don't need to tell you how much has changed since we were here last year testifying in front of you, and the need for prevention has only grown since that time.

We are nearly a full year into the effects of the global pandemic in Connecticut, and our young people have suffered both directly and indirectly from the pandemic with their social, emotional and mental well-being being impacted. Trauma faced in these early years may have long-term effects.

We are not the same organization we were a year ago. We are much smaller with the loss of staff due to the pandemic, we have left the comfort of our bricks and mortar space for a fully virtual office, all our trainings and events went virtual reaching hundreds of Connecticut practitioners, teachers, and families.

Through all that has been lost, we have gained so much.

Our lean, but mighty team is united behind prevention and harm reduction, and we jumped right into an approach to our services in the new normal. We helped mentoring programs across the state, who previously forbade virtual connections with mentees, get up and running online, so that those critical connections were not lost during the social isolation. We ran a monthlong series for parents and practitioners that focused on mental health and connecting to services that are typically available in the school system. We collaborated with the top experts in the state on suicide prevention, mental health and wellness, and policy. We developed an approach to respond to the increase and normalcy of alcohol use in the home during CV-19. The prevention messages were delivered in conjunction with legislators in English and Spanish speaking communities to reach as many constituents as possible.

We reframed our own organizational values to ensure we could meet the needs of the times, and focused on diversity, equity, and inclusion, putting our team members and those we serve first, and committing to collaboration in a deep and meaningful way at every level of partnership [1]. We have taken chances in the name of serving our youth better.

We could not have done any of this without the tremendous support of DMHAS. Without the guidance of the Commissioner and her prevention team, who have always put partnership, collaboration, and connection at the forefront of their grantee model. They recognize that prevention is not about a moment, it is about the movement. They have been incredibly agile during CV-19 and allowed us the space to meet/exceed our deliverables through a nimble and agile approach to ensure that Connecticut's young people are getting the services they need during these unprecedented and uncertain times and allowed us flexibility and latitude to meet the many challenges no one was anticipating when we were here last February.

One of the residual effects of the CV-19 pandemic has been the increase in alcohol consumption. Nationally, alcohol sales have increased in stores by 29% since late March - and 291% through online sales (Nielsen). According to state estimates as of November, the annual tax revenue from alcohol sales this year is \$73.2 million. That was up from \$68.9 million a year ago. We cannot afford to increase young people's access to alcohol. Youth who start drinking alcohol at or before the age of 15 are five times more likely to develop alcohol dependence than if they wait until the legal age of 21 to drink (NIDA).

States such as North Carolina, Texas, and California have conducted specific undercover operations to determine that people under the age of 21 were able to successfully order alcohol.

While I do not know of any widespread Connecticut-specific data regarding delivery, I have a few personal experiences I could share as it relates to alcohol being delivered to my home without my ID being checked,

including a drop-off while my children were home with an underage babysitter.

Rightly so, there has been much focus on the opioid epidemic and the effect on the community, but we also cannot lose sight of alcohol use disorder and the devastating effects that it has on families. There were previous age verification testing operations by minors in conjunction with DMHAS and DCP, but, sadly, these programs have diminished. The social factors of the pandemic, economic downturn, and social unrest have all contributed to an increase in alcohol use.

Now is not the time to reduce investment in prevention services; if anything, it is time to increase that investment to ensure that the trauma associated with Covid-19 for our young people does not lead to additional long-term effects on their health and well-being.

Thank you for your time. We are poised and ready with our colleagues in the prevention and intervention field to be part of the work to keep our young people healthy.

Respectfully Submitted,

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PreventionWorksCT.org

[1] <https://www.preventionworksct.org/about/>