

Testimony before the Appropriations Committee

March 2, 2021

DMHAS BUDGET HEARING

H.B. No. 6439 AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNIUM
ENDING JUNE THIRTIETH, 2023, AND MAKING APPROPRIATIONS THEREFOR.

Zakia Wright

Senator Osten, Representative Walker and members of the Appropriations Committee.
My name is Zakia Wright and I am a registered voter in New London, Connecticut.

I am here to testify regarding H.B. No. 6439 AN ACT CONCERNING THE STATE BUDGET
FOR THE BIENNIUM ENDING JUNE THIRTIETH, 2023, AND MAKING
APPROPRIATIONS THEREFOR.

Good day to you,

More often than ever now, I have observed how budget cuts and loss of funding for mental health services may be heavily impacting the community where I live. When funds are allocated to a region, it seems that mental health is the first category overlooked for an appropriate budget. I have loved ones who have suffered with trauma and sought solace in the community services to sustain recovery. My own involvement includes volunteering for local non-profit organizations that assist with linking members of the community with housing and essential resources. Working among the courageous members of the community has given me experience on how a budget is needed to increase the chance for success of those in recovery.

I have personally observed individuals showing the need for services and assistance with supportive housing, respite and other resources. However, the same charitable organizations in New London are the only option for far too many to be given the help they are seeking with housing and other resources. With additional funding to critical non-profits, there is more progress and productivity for the community. Financial assistance can create a sense of belonging to those who are stigmatized and overlooked due to their mental health struggles and addictions. Covid 19 added additional hardship to organizations and communities and funding to replenish the lost opportunities, activities and events individuals relied on to prevent relapse should be provided.

Places like clubhouses can boost the self esteem and self image of someone in the community who has had trouble fitting in elsewhere. I am a strong advocate for my peers to feel empowered, inspired and loved. I have been referred by a DMHAS staff member in 2020 to become a peer supporter, which I am grateful to be a leader to those vulnerable and/or without a voice. Therefore, I personally do my best to participate and join groups, meetings and organizations that support mental health awareness. Clubhouses provide opportunities to have social connections and other skills needed to have a fulfilling life experience. Any loss of funding due to Covid 19 or budget cuts have affected the moral and hope for individuals for a brighter future. Correcting this by including more clubhouses, respites and other changes as I mentioned below are being submitted for your approval this year on the matters.

Please provide six million dollars the first year, and five million in subsequent years for the starting and continuing operation of five peer respites. Please allow five respites be allocated one per DMHAS region and be staffed by persons with lived experience in the mental health field and certified in Intentional Peer Support

I respectfully request that the committee support the following proposals and expansions from the Governor's budget for the Department of Mental Health and Addiction Services (DMHAS):

- I support the proposed budget for the Department of Mental Health and Addiction Services' Housing Supports and Services line at \$23.4 million in each year of the biennium.
- I request a new targeted investment of \$2.25 million in the DMHAS' Housing Supports and Services line to provide supportive services to 300 households in scattered-site and development units.
- I request \$375,000 in new funding in the DMHAS' Housing Supports and Services line for enhanced outreach services that would enable us to better identify individuals experiencing unsheltered homelessness.

I support the Governor's proposal to provide an additional \$4 million in FY22 and \$7.2 million in FY23 in DMHAS for continued discharges from Connecticut Valley Hospital, including 30 new Money Follows the Person placements.

- I request the addition of \$352,500 in each year of the biennium for wrap-around services for 47 individuals anticipated to receive federal HUD Mainstream vouchers during FY22.
- I support the CT Community Nonprofit Alliance proposal to restore \$461 million over five years to community nonprofits. Funding for nonprofits, including those working to end homelessness, does not adequately cover increased costs and demands for services.

Thank you for listening to my testimony today.

What is a peer respite?

A peer respite is an alternative support for individuals who are in distress. A peer respite is a voluntary, short term overnight support for up to a week that is in a home-like environment—usually a residence—with all trained peer workers.

- Peer support is the main service provided in a peer respite.
Peer respites also:
- Are voluntary and self-referred. Not an alternative to homeless shelters.
- Do not provide medical services, such as prescribing medication or medication management.
- Often serve as hospital diversions. Emergency care is the most expensive form of care. Will save the state large amounts of money.
- Offer one on one and group peer support, sometimes with additional learning opportunities and supports.
- Empower people to discover what is best for their wellness.
- Are trauma-informed and rooted in recovery values.