



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

Testimony of NAMI (National Alliance on Mental Illness) Connecticut
By Thomas Burr
Appropriations Committee
March 3, 2021

Good afternoon Senator Abercrombie, Representative Walker, and members of the Judiciary Committee; my name is Thomas Burr, from Glastonbury CT, and I the Community and Affiliates Relations Manager of the Connecticut Chapter of the National Alliance on Mental Illness (NAMI Connecticut). However, for the purposes of today's hearing I am only speaking on behalf of myself. I am testifying today regarding H.B. No. 6439 – AAC the State Budget for the Biennium Ending June Thirtieth, 2023, and Making Appropriations Therefor (aka the Governor's Proposed Budget).

NAMI is dedicated to building better lives for those with lived experience with mental health illness and their families. NAMI Connecticut and its nine local affiliates provide support groups and educational programs for people with mental health conditions and their loved ones and advocates for policies to improve the lives of people affected by mental health conditions.

I am the parent of an adult child who is in recovery from bipolar disorder, after 8 years' worth of repeated hospitalizations, incarcerations, and homelessness. Some of the best care he received during his illness occurred right here in Hartford, at the Capital Region Mental Health Center. These were services provided by DMHAS and funded by the State of CT via Husky. My son is now in recovery, living on his own with his wife and daughter, working full time; and has been doing very well for the past 14 years!

After a full year with the COVID-19 Pandemic still raging, the state of mental health here in CT has taken a big hit, at a time in our history where we can least afford it. Twenty percent of people diagnosed with COVID develop mental illness within ninety days. Meanwhile, the number of drug overdose deaths, and suicides, which were already astronomical pre-pandemic, is skyrocketing. And meanwhile, what has the state of CT being doing for the nonprofit service providers?

- Since 2007, community nonprofits have lost at least \$461 million in state funding that has not kept pace with inflation. These non-profits employ 117,000 people or 12% of Connecticut's workforce and serve 500,000 people. (Non-Profit Alliance)

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- The opioid crisis has increased the need for substance abuse treatment, yet grant funding has decreased (Non-Profit Alliance)
- Community-based programs have not seen a substantial funding increase since 2007, except for \$50 million added in 2018, primarily for wages in one sector (Non-profit Alliance)
- Since Fiscal Year 2013, Connecticut's drug overdose deaths have increased 253%. Community providers are on the front lines of this crisis, providing lifesaving addiction treatment. They have faced a significant increase in demand all while grant funding for those programs has been cut (Non-Profit Alliance)
- Over the past five years, while the prison population has fallen dramatically, demand for community services for people involved in the justice system has increased, but funding has been cut by nearly 15%, or \$5.8 million (Non-Profit Alliance)
- In July, one in five nonprofits (21%) believed that they were somewhat or very unlikely to be able to fully fund payroll for the next quarter, and more than one in four (28%) worried about being able to fully provide services (Non-Profit Alliance)
- Due to lack of funding non-profits have: Closed intensive residential program due to cuts from the Department of Mental Health and Addiction Services (DMHAS); cut a program that housed women and children who were either formerly incarcerated or homeless; and eliminated employment services for 70 people living with severe and persistent mental illness.
- Although 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.
- After marijuana use was legalized in Colorado in 2012, ER visits linked to cannabis use tripled over the next five years at one of the state's largest hospitals (NBC News).

Therefore, it isn't just raining here in the nonprofit world in CT, it is (and has been for years) a monsoon!

Therefore, we demand that Connecticut increase the funding for both DMHAS and the Nonprofit providers which DMHAS funds. A detailed list of the line items we would like to see funded is attached to my testimony.



In summary, and especially since the Governor is proposing no new money directed to DMHAS in his proposed marijuana legalization bill, we are asking for a serious re-investment in the Department of Mental Health and Addiction Services.

Thank you for your time and attention, I will now gladly answer any questions you might have.

Respectfully

Thomas Burr
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NAMI Connecticut