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Testimony before the Human Services and Select Committee on Children December 18, 2008

Good afternoon, chairs and distinguished members of the Human Services Committee and the Select Committee on Children. My name is Cheri Bragg and I am the Coordinator of the Keep the Promise Coalition, a statewide mental health advocacy organization dedicated to the creation of a sustained comprehensive community mental health system for youth and adults in CT.

When the Keep the Promise Coalition was formed in 1999, almost 10 years ago, the Connecticut children's mental health system did not address the needs of the clients and families it was supposed to serve. Roughly 90% of Connecticut's children with mental health needs were in expensive, residential settings or institutions rather than community placements and hundreds were placed out of state. The needs of the families were often disregarded and they were offered what was available, not what was appropriate. Connecticut was spending money on crisis, not recovery.

While progress has been made, funding is still tilted toward institutional and residential care rather than community services. Even with the increased emphasis on community and in-home services, I hear from many parents who report that their children are not receiving the appropriate care they require. DCF's voluntary services program, while critical, is still limited, which means that parents are sometimes left feeling that the only way to get the proper care for their child is through custody relinquishment. This should

not be a choice families are forced to make to access critical mental health care.

There is still a great need for early identification and intervention. We still hear stories from parents of their children being kicked out of multiple preschools or fighting to have their children properly assessed. On the other end of the spectrum, we also continue to hear from young adults who were placed out of state, ripped apart from their families who lived in CT. Children need to have natural, lifelong support systems in place in order to facilitate recovery.

There is still a need for much closer collaboration between DCF and DMHAS, specifically surrounding the needs of transitioning youth and young adults. DCF should not be able to disrupt a youth's treatment and housing placement at 18 years of age. Stable housing is the cornerstone of recovery from mental illness. The pressure of knowing you will suddenly need to move on your 18th birthday is counterproductive as is having to change all of your treatment providers. There is a need for increased agency collaboration in order to ensure a smooth transition between the DCF and DMHAS systems of care and to ensure that we are preparing today's youth for the transition to the world of work and adult responsibilities. One example of the cost of not doing so includes those young adults institutionalized at Cedarcrest hospital who remain there solely due to a lack of safe, affordable housing.

Furthermore, Keep the Promise was distressed to hear the testimony of the Office of the Child Advocate indicating that over 90% of the 325 girls under age 18 admitted to Connecticut's maximum security prison for adult women had either current or historical involvement with DCF, including a significant amount who had cases closed in the year prior to incarceration. We are concerned that these children, along with clearly not being prepared for the transition to adult life and the roles and responsibilities that come with adulthood, are getting caught up in the jail and prison system which is no place for those who need treatment for mental illness. This follows the trend we've seen in adult mental health where places such as the L.A. County jail become the nation's largest "de-facto" treatment centers for mental illness, often due to minor, non-violent offenses.

Ten years have passed since the promise was made to create and sustain community mental health services for adults and children. The State of CT continues to break this promise to many of Connecticut's children who require critical mental health care and their families. Everyone pays, including our families and communities. Keep our families and communities healthy with cost-effective community mental health services. Keep the Promise to implement and sustain community mental health services and supports in CT.