

Testimony to the Housing Committee regarding HB 6052
March 1, 2011

Mr. Chairman, honorable members of the Housing Committee,

My name is Billy Bromage. I am a graduate student at the University of Connecticut School of Social Work. I live in New Haven. I am here to speak about my support for **HB 6052: An Act Concerning Supportive Housing**. I would like to thank you for the opportunity to share my perspective about this vitally important legislation.

Prior to enrolling as a student at UConn, I spent over ten years working in mental health programs in New Haven, including five years in supportive housing programs. During that time, I saw the critical role that supportive housing plays in the lives of people who are striving to regain the stability that lies at the foundation of reaching one's aspirations in life. Also during that time, and during my studies at the School of Social Work, I learned how policymakers and workers in the field can cooperate to ensure that people are not left out in the cold, when other feasible and attainable solutions exist. This legislation is especially important in these times of economic struggle for our state.

According to research cited by Connecticut's *Reaching Home* campaign, the number of people experiencing homelessness in the state has increased, as our economy still struggles to rebound. Among the people experiencing higher than average rates of homelessness are people dealing with chronic mental illness or substance abuse issues. Some of these people are meeting their housing needs by frequent visits to emergency rooms, inpatient psychiatric facilities, or detox programs. Others spend months or years living in state-subsidized nursing homes, in spite of their potential to live more independent lives. All of these living arrangements are far less than ideal for a person's development. Moreover, they all cost the state more money than supportive housing units.

I would like to tell you the story of a woman with whom I worked closely for several years. Her life was profoundly impacted for the better by access to supportive housing. I have changed her name to honor her privacy.

I first met Magda, when she was in crisis. She was homeless, and was struggling profoundly with an addiction to crack cocaine. As a result, she was not keeping up with her mental health care, and was experiencing strong hallucinations that the devil was after her. She had been in and out of inpatient psychiatric units several times in the preceding months. It broke my heart to see someone in such profound pain. I was later assigned to be Magda's case manager, in the supportive housing program, in which she resided and I was employed. As our relationship grew, I learned that Magda had recently had her young daughter taken into custody by DCF. She was at the end of her rope. She often lashed out in anger at me and other people around her.

Over the next several months, Magda lived in her own apartment in the supportive housing program, and worked with me to develop ways to deal with her anger. She cultivated a good working relationship with her therapist. She got her financial life in order, and even applied for a job at a supermarket, which she got. As Magda continued to succeed in her job, see her therapist, and organize her life with the help of the case management staff, she realized that she wanted to reconnect with her daughter. Through the advocacy and support of the case managers, she was able to begin supervised visits with her daughter.

Eventually, the time came when my assignment for the day was to help Magda load her belongings into our agency van, so she could move into another supportive housing program, with less intense case management services. She still had her job at the supermarket, and her relationship with her daughter was still growing. She had put her life back together. There can be no doubt that the supportive housing services Magda received were an integral piece in recovering the life she envisioned for herself.

In the years after I was her case manager, when I worked as the manager of New Haven's largest psychosocial rehabilitation program, and she lived in supportive housing, Magda would sometimes stop by to say hello. She sometimes wore the uniform of the supermarket where she worked. Within less than two years, she was able to secure a Section 8 voucher, and was living in her own apartment. She had rebuilt her relationship with her daughter to a point where the adoptive family and her own extended family were regularly spending time together. She smiled. She laughed. She had not returned to being homeless. She had not returned to her addiction. She was not relying on frequent inpatient stays to manage the symptoms of her mental illness. She was proud of herself, and of her accomplishments. She was contributing to the workforce, and to her daughter's life. She was living on her own in an apartment.

Not all people have the same kind of miraculous story as Magda. But, there are so many people who can directly cite supportive housing as the cornerstone in moving beyond homelessness and hopelessness, and toward a life that is meaningful and productive. I have seen dozens of success stories. You have heard the brave stories of those who have testified today. Thousands more success stories are possible, as long as supportive housing units are made available to people, when they face dire situations.

I would like to thank you for your time and attention, in listening to my testimony. I would also like to thank you for your support of **HB 6052**. This legislation is a profoundly important step toward building a Connecticut where all citizens have a fair chance to succeed. I would be very happy to answer any questions you might have.