

**Testimony by Judith Shaw**  
**Before the Appropriations Committee**  
**IN OPPOSITION TO:**  
**The Governor's proposed DMHAS budget cuts for fiscal year 2016-17**  
**March 6, 2015**

Dear Senator Bye, Representative Walker and distinguished Senators and Representatives of the Appropriations Committee,

My name is Judith Shaw and I am a registered voter in the town of Wethersfield.

**I am writing this letter to state my reasons for continued funding of NORTH CENTRAL REGIONAL MENTAL HEALTH BOARD.**

My personal journey will help clarify my strong belief in the North Central Regional Mental Health Board as I briefly describe my lifetime journey to find wellness - how becoming a volunteer on many committees and then an employee at the Board have completely transformed my life.

At age 12 I knew something was very wrong with me. "Symptoms" that were terrifying, but for which I had no language, were gravely impacting for a preteen who previously only knew joy and love of life. Thus began my life of secrets and silence not knowing who to tell or how.

Then at 14 my life turned upside down. My amazing dad, visionary business man and my best buddy fell apart himself with mental illness and had become a person who abused substances. We moved to Atlanta his home state and the place of my birth. Again, no language, secrets. A new beautiful home. But, my father could only stay in bed many days and could not work. I became very "sick" and finally had a psychiatrist.

We came back to Connecticut. My father and mother divorced. We left every belonging my sister, mom and I had in Georgia. Dad had cycled through many hospitals finally into Milledgeville State Hospital.

Raw, I began my senior year. My struggles only got worse. After graduation I was hospitalized multiple times and attempted suicide. At 19 I was a patient at Norwich State Hospital. I was also a victim of sexual assaults.

I have had many successes. I graduated with honors from Trinity College. I held many excellent positions, but couldn't hold on. I was in and out of hospitals and sought treatment for year after year trying so hard to hold on for myself, my children. I didn't and had to survive on Social Security Disability Income..

Who were the victims? My children. My family. My friends who were lost about ways to help. A replay of great similarity to my childhood and young adulthood.

I finally found subsidized housing" in Wethersfield. I was over-medicated, immobile, still locked in misery. Then, I became a volunteer at NCRMHB. I gradually started flourishing.

I listened to peers, clinicians, town social service directors. Folks listened to me. I came out of a silence so overpowering that I had barely talked for years. My long standing work in oral history was discussed at CAC meetings. I joined the Review and Evaluation Committee which evaluates DMHAS services of all kinds and gives voice to people who are receive services in mental health agencies in the 37 towns that we monitor. All of this work is done with small staff and countless devoted volunteers. Two of my previous employments gave me broad experience in volunteerism.

Then, in a few years our Executive Director, Sheryl Breetz hired me to become Director of "A Day In The Life" (ADITL) Project, a collaborative effort of NCRMHB and Yale Program for Recovery and a Community Health (PRCH). I was no longer a hopeless "patient", but leader of an initiative that I believe changed my life and also the lives of the peer research team. We assembled under my leadership, and with our Executive Director's guidance and training in qualitative research with Larry Davidson, Ph.D. from Yale, launched the ADITL Project. We interviewed 80 people who used DMHAS services and asked questions about what their daily lives were like as people with mental illness. Interviews were taped with signed permission and transcribed word for word. People told us their stories. They were painful, almost unbearable to hear though the interviewees' words were similar to what the peer research team knew about their own anguish.

The Regional Board has been a profound source of support to me and many others whose lives I have touched during my 16 years as a volunteer and then director of this project. I am fortunate to have come to know and work alongside so many incredible human beings – peers, professionals, and legislators.

Please think about my story and the oral histories we gathered. These stories reflect peoples' incredibly difficult experiences with poverty, homelessness, being marginalized, and discriminated against. We cannot ignore this ongoing crisis that becomes more visible each day. People like myself and the people we interviewed and worked alongside cannot be held down any longer. The Regional Mental Health Boards provide the most incredible empowerment to all of those people who suffer needlessly. Therefore, please vote for the continuation of funding for Regional Mental Health Boards.