

Written Testimony for the
Appropriations Committee, Subcommittee on Health and Hospitals

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Honorable Members of the Appropriations Committee, it is my privilege to address leaders who have shown unwavering dedication to the needs of people with mental illness and addictions. My comments address a serious threat to this mission posed by proposed cuts to the Connecticut Mental Health Center (CMHC) component of the DMHAS budget. I ask you to restore the support for clinical and research programming at CMHC.

I am a research scientist at CMHC. I have worked there since my arrival in the US in January 2010, having completed my PhD at the University of Cambridge in the UK.

I chose to complete my training at Yale because of the Clinical Neuroscience Research Unit (CNRU) in the CMHC, its international reputation for clinical research excellence. Once I completed my training, I chose to stay here because I want to continue that tradition of excellence in teaching, research and clinical care.

Because of CMHC and the work it has facilitated in my lab, I was named an International Mental Health Research Organization Rising Star.

In conveying this award, Patrick Kennedy of One Mind for Research described our mission, to understand and better treat the causes of mental illness, as like the moonshot that his uncle presided over.

As such, he said, I was one of the astronauts.

Like those astronauts, it takes a vast team of stakeholders and contributors, in my case from the New Haven community, for me to carry out my mission and I am incredibly grateful for the opportunity.

Sadly, brain science is more complicated than rocket science, it is already underfunded and despite being earthbound, its goals seem more distant. The proposed cuts would move them further away.

In my experience of research around the world, the CMHC is unique, with its combined missions of patient care and research housed in the same building.

I am not unique. There are many brilliant dedicated faculty and trainees with missions just like mine at CMHC. The proposed cuts would jeopardize not only all of our hard work and many incremental gains in understanding the biological mechanisms of psychiatric diseases but also advances in new and better treatment for these diseases. By extension, this also jeopardizes the well-being of people with mental illness who live in Connecticut.

As a researcher I sit directly at the interface between clinical care and science. My aim is to understand the symptoms that challenge our patients' lives so that we might better treat them. I recruit patients to my studies from the clinics at CMHC but I also engage with them in community and CMHC facilitates this.

I feel privileged to work with NAMI Elm City and with the Hearing Voices Network in New Haven and I have had the honor of sharing and discussing our findings with community members, people with lived experience of mental illness.

Our research provides hope and these people tell me how grateful they are for the CMHC. These are people who are actively seeking treatment to have more control over their own health, well-being and ability to be active and productive members of the community. They all interact with and benefit from the CMHC.

Like any interaction, there can be friction. The CMHC trains clinicians to better handle that friction. It prepares our future psychiatrists to be mindful of suffering, collaborative in care and progressive in applying the latest research so that we can better serve our community. The CMHC has helped me, my colleagues and our trainees to do this. The proposed cuts would halt our substantial progress.

I feel that both the basic research into the bottom-up biological mechanisms of mental illness and the top-down practical clinical care of patients enrich one another precisely because we share our home at the CMHC.

Whilst the basic research we conduct may seem removed from the immediate needs of patient care, it is not. We are constantly striving to translate our findings into improved care for patients. These funding cuts would isolate these goals and the people of Connecticut with and without mental illness will be worse off as a result.

The proposed cuts would:

- Annualize the 2015 Rescissions, cutting \$343,000 from the DMHAS contract with the Yale Department of Psychiatry that supports clinical programs. This cut would eliminate critical clinical programming within CMHC, significantly limiting access to psychiatric care among low-income residents.
- Eliminate \$786,000 in support for the CMHC research programs. This funding supports essential core resources that cannot be charged to federal grants

and contracts. Loss of this funding would have devastating effects on these research programs, from which they would be unlikely to recover. It would dramatically diminish my ability to contribute to advances in treatment. Further, the CMHC missions are inseparable. Cutting research eliminates the contributions I can make to teaching and patient care.

The CMHC is a critical community resource and a national and international treasure. It drew me from Cambridge to a state-supported community mental health center to help care for the people of Connecticut. It is essential to preserve the integrity of the CMHC mission by restoring its funding.