

**Testimony for February 2016 Public Hearing on the Governor's Proposed Budget  
for DMHAS, DPH, & DSS**

My name is Vered Brandman, and I'm a Norwalk resident and a person in recovery from mental health issues. My current diagnosis is Major Depression with PTSD and an eating disorder. I'm 28 years old and while I've had symptoms most of my life, it wasn't until I was 20 years old that I was able to get real help that helped.

Since then I've been a client at a Social Club (Keystone House in Norwalk), a member at a Clubhouse (Bridge House in Bridgeport), I've completed my Associate's Degree, gotten certified as a Recovery Support Specialist through Advocacy Unlimited, served as Project Coordinator for TurningPointCT.org, and more. Last spring I was nominated to the Board of Directors for the Southwest Regional Mental Health Board, one of Connecticut's five state-mandated private-non-profits.

You're going to hear about the different services the Regional Mental Health Boards provide, so I'll stick to the pieces that have impacted me the most: my Regional Mental Health Board has been an impartial hub, a neutral place for me to connect with advocates living and working in my part of the state—people like me who are in recovery; people who work in the mental health and addiction system, both in the private and public sector; our loved ones; and concerned citizens representing their towns. My Regional Mental Health Board isn't an office, it is a network—it connects advocacy organizations, service provider agencies, the people they serve, and the people who love us, so that we can all work together from our different vantage points towards a better mental health and addiction services system. They are, as I mentioned earlier, an impartial hub for any organization, agency, group, and individual in the region to come and be heard, to come and be part of the changes we all know our system of care needs.

The Regional Mental Health Boards may seem less important than direct care services, but they are not—please resist proposed cuts the Regional Mental Health Boards. I've learned about more organizations, advocacy opportunities, trainings, and initiatives in the past three years since connecting with my Regional Mental Health Board than in the previous six years of my recovery, to say nothing of the four years before that when I was in and out of ineffective treatment. I can't overstate the importance of the

resource my Regional Mental Health Board is to me, every day. But just as importantly, my Regional Mental Health Board acknowledges my role as a community resource for others. My Regional Mental Health Board—as an organization and through the individual people involved in it, particularly the Executive Director Margaret Watt—has provided tremendous encouragement and support in my efforts to become a valuable resource to my peers in recovery and to my community at large. Please protect the budgets for DMHAS and the Regional Mental Health Boards—we are all doing what we can to make our service system more effective. The proposed budget cuts will destroy four decades of coalition building and will leave community members with no place to go to be heard.