

PUBLIC HEARING THE PUBLIC HEALTH COMMITTEE – FEBRUARY 28, 2018

Statement of Margaret Watt, Executive Director, Southwest Regional Mental Health Board

RE: HB 5149, AN ACT CONCERNING SOBER LIVING HOMES

and

RE: HB 5162, AN ACT REQUIRING A STUDY OF FUNDING FOR MENTAL HEALTH SERVICES

Distinguished Chairs & members of the Public Health Committee, I am writing with regard to two bills before you today.

HB 5149 An act concerning sober living homes has come before you in the past to strong opposition, since these are by definition (including the proposed language in Section 1(a)) simply rooming arrangements. Most of us have chosen to live with roommates at some point in our lives and we would have been shocked if we had been required to register our rooming situation with the state. Many testimonies have already pointed out the discriminatory nature of requiring registration simply based on tenants' history of addiction, and the community stigma that would result. In addition, DMHAS lacks capacity to manage something like this.

However, I believe that one reason this bill concept continues to arise is due to concerns among families who are seeking a safe place for their family member to work on recovery. I have spoken with parents trying to identify the best sober living home for their adult children; they have no real way to judge the various options on the market. There is a tendency for them to hope that the most expensive options may provide the most support, and as a result some for-profit sober homes are able to charge up to \$8000/month for what amounts to a staffed boarding house. I think the only legislation that could possibly apply in these cases is existing municipal zoning legislation governing boarding houses and truth in advertising laws.

Section (b) of the proposed bill is intended to ensure access to Narcan to a high-risk population. Rather than try to identify every high-risk rooming group and require them to carry Narcan and be trained, which would be unable to be monitored, it would be preferable to make sure that Narcan is available free to any individual who touches the addiction treatment system. *Some* hospital emergency rooms give free Narcan kits to those who have already overdosed (and/or their family and friends); they *all* should.

HB 5162 requires a study of funding of mental health "facilities and other providers" including "availability of inpatient beds for children." With regard to "funding of facilities and providers," we already know that state funding has been cut and services have been affected. The impact can be seen in available data on staffing, caseloads, etc. With the state mental health budget down by almost 20% over the past five years while mental health needs increase, we don't need a study to show that funding is needed.

With regard to inpatient beds for children, which appears to be the primary issue at stake, community members continue to report difficulty in accessing inpatient care both *when* and *where* needed—not

only for children but also adults. However, data on bed capacity and utilization are already reported. Rather than invest in yet another study, perhaps OLR can review available published reports from DMHAS, DCF and hospitals as well as existing budgets to determine where the gaps are and where we need to increase funding—not for studies but for services.

Thank you.