

May 21, 2025

The Honorable Representative Marvin L. Abney

Rhode Island House of Representatives

82 Smith Street

Providence, RI 02903

Dear Representative Abney:

My name is Christine Ambrosino, and I am writing in support of bill H-6128. Long term funding for the 988 Suicide & Crisis Lifeline will save lives, reduce strain on emergency services, and provide faster and more compassionate response to mental health crises. This legislation does not create any new fees or taxes for Rhode Islanders. Allocating some 911 funds for 988 will help support the emergency services and first responders by providing an alternate path to help during a mental health crisis. Access to trained professionals encourages individuals to seek help without the fear of police involvement or long waits in the emergency room.

I want to share my personal experiences with you today in the hope that you will continue the progress already made in mental health emergency response. My father was diagnosed with bipolar disorder and fought through 10 years of medication trials, hospitalizations and even ECT (Electroconvulsive therapy). We had to leave the house and hide numerous times because he was manic or having a crazy reaction to the medications. In the end he took his own life when I was 17 years old. Thankfully my mom's family was very supportive and provided safe haven for us when we needed it, or she could afford a hotel where family was not an option. Not everyone can afford a hotel or have family support and 988 provides a safety net for people in crisis.

Unfortunately, mental illness is often hereditary, and this is very evident in my family. My children, brothers, nieces, nephew, and I each have our own set of diagnoses including one or some combination of depression, anxiety, ADHD, mood disorders or bipolar disorder. We have all been to the emergency room at different times to seek help. An emergency room visit for a mental health issue usually results in a very long wait in an empty room with a guard watching you. If you are lucky a bed might be open but usually you get a handful of information and are sent home to follow up with your doctor. My brother tried to go to the ER but left after waiting for hours and being told the best they could do was a mattress on the floor of a conference room. A few weeks later he attempted to take his own life. Thankfully my family has become very close, and everyone knows what to watch for. After a few cryptic texts and Facebook messages, my mother went to his house and got help just in time. Things could have gone differently if he had access to 988 and faster access to care when he was seeking it. Maybe my mother could have been spared the trauma of finding her son on the living room floor and

the next week waiting to see if there was going to be permanent brain damage from the lack of oxygen or all the medicines he took. By some miracle, he got away without any permanent damage but not everyone was so lucky. Not everyone knows what to look for or what to do. Access to 988 can help family and friends support loved ones with mental illness who will not or cannot seek help on their own.

Supporting this bill can reduce altercations with police and first responders who may not have the training to deal with mental health crises. These altercations with the law and the court system often cause more harm. Access to 988 may have reduced the trauma caused by the way I had to get help for my son. I was a single mother of 3 who all had mental health issues that I was trying to get help with, while trying to manage my own mental health. My son was 13 and acting out in anger and being defiant. He had been diagnosed with ADHD and oppositional defiant disorder when he was 8 and 9. As he got older, his behavior became more than I could manage even with medication, an inpatient stay at Bradley, and in-home therapy. The police were involved a few different times for different things. One officer, who said he had a degree in psychology, told me in front of my son that he was on too much medication and I should try to get him off the meds. He thought that my son's medication was over prescribed and causing the issues. This officer decided after a 15-minute conversation that all the behavior problems were because he was being bullied at school, and he was taking it out on me and his sisters. He knew more than the doctor I spent years working with. I eventually was left with no option but to file a wayward petition with the police saying that I could no longer keep my son at home. Then I had to stand in court and again in the DCYF office and say repeatedly that I could not take my son home. The DCYF worker asked me 3 times in front of him if I could take him home and I had to say no to get him the help he needed. This was devastating for both of us. It was the most gut-wrenching thing I had to do in all my battles to get help through the years. Finally, he was placed in a residential program and got the help he needed. We did a lot of work and were able to repair our relationship. Now he is married and has a baby of his own. The 988 professionals can provide a much less traumatic way to obtain help and resources and reduce the risk of added legal issues from altercations with police.

Establishing long-term funding for the 988 Suicide & Crisis Lifeline will ensure that trained professionals can provide someone to talk to (24/7 crisis call centers), someone to respond (mobile crisis response teams), and somewhere to go (crisis respite and stabilization centers). We need to keep access to mental health care moving forward.

Thank you for your consideration,

Christine Ambrosino