



**Consumer Council System of Maine**  
A Voice for Consumers of Mental Health Services

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Good afternoon, Senator Baldacci, Representative Meyer and esteemed members of the Health and Human Services Committee,

My name is Simonne Maline. I am the Executive Director for the Consumer Council System of Maine (CCSM). I am here today on behalf of the CCSM to testify in support of **LD 540 "An Act To Establish Peer Respite Centers for Adults with Mental Health Challenges in Maine"**.

The Consumer Council System of Maine is a public instrumentality written into State Statute by the Maine Legislature to serve in an advisory capacity and to provide legislators with guidance and advice regarding the delivery of effective and appropriate adult mental health services from those served by them.

We are very excited to see this day! We wish to reestablish this program(s) in Maine. The history of peer respite in Maine and in the US is that Maine was not the first one but close to the very beginning of when peer respite was started in our country. In 2002 the only peer respite in Maine was opened in Brunswick and was available for anyone regardless of where they lived and was of no cost to the individual. It was funded by what we now call the Office of Behavioral Health, DHHS. It closed in 2017. The CCSM has been advocating for respite to return to Maine ever since.

I was fortunate enough to be one of the individuals that ran the program in Brunswick. I saw how many individuals experienced significant support and did not need inpatient or high intensity supports after a stay as a guest in the respite program. I saw individuals move forward in their recovery.

Currently in the US, there are 14 states with peer respites and 43 different programs. The link to the directory is below. The cost difference is also significant. Inpatient can cost 3 times more than the cost of a day at a peer respite.

There are some very distinct differences between clinical services and peer respite. Peer respite is a completely voluntary program whereas inpatient services contain locked units, individuals can be involuntarily committed and many experience trauma from the ways we force people into treatment. Support experienced at respites is a mutual relationship based on dignity and respect. Inpatient services, while some clinicians can be kind to individuals, there is a very different "power over" framework. The "professionals" know what is best and will tell you what you need to be fixed. In that process we overlook the person in distress and assume they do not know what they need. Nor do we give them to space to explore their own inner knowing of what is best. This is the foundation of what peer respite is built upon.

Guests of respite also report a high level of satisfaction in utilizing this type of program. Below are some



links to research done on peer respites that show very positive outcomes as well as where they are in the US.

[Directory of Peer Respite - National Empowerment Center \(power2u.org\)](#)

[Peer Respite – Live & Learn, Inc. \(livelearninc.net\)](#)

[What is a Peer Respite? - Hope and Healing Center and Institute](#)

I would be than willing to be available for the work session and provide additional resources that may be needed.

I urge you to vote ought to pass on LD 540.

Sincerely,

*Simonne M. Maline*

Executive Director

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