Lewis & Clark Graduate School of Education and Counseling

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Teacher Education

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Dear Governor Kitzhaber and Oregon Legislature,

Four years ago, this month, our 21 year old daughter was <u>across</u> the street from you at Willamette University and our 19 year old son was <u>on</u> the street *somewhere* in L.A.. He got on a plane with no ID and \$300 cash that he had just received for working on Grand Jury. This was his first manic episode and we suddenly were faced with the reality that he was living in a state of non-reality thousands of miles away.

After almost two months we miraculously were able to find a way to contact him via his use of library computers and get him back to Portland. Three months later he had a full psychotic break that left us with no safe recourse other than to call the crisis line. He was taken away by the police to OHSU.

It was the crisis team that first told us about EASA (Early Assessment Support Alliance). And, after nearly two weeks of traumatic and expensive forced hospitalization, we were suddenly and efficiently being serviced by the EASA team — even before his discharge. We had very specific expertise related to those who experience first-time onset of psychosis. Our son had a person to talk to, peers his own age who could relate to his situation, social opportunities to help normalize the sudden frightening message that you are mentally ill (i.e. "crazy"), a place where we as family could meet with other clients and families, a doctor and nurse team who teamed with our original doctor, vocational, and occupational assistance. What impressed me further was that to find out that this was based on a proven model that is evidence based. **

EASA, for now, is only a two year program. Fortunately, we have been allowed to receive a few extended, yet minimal services. This is probably the only reason there has not been a relapse. Because our son wasn't caught before hospitalization his progress has been much slower than those who get early attention. The trauma of hospitalization, especially for a very young person in a facility with older long-term mentally ill patients, is so difficult to overcome. I firmly believe that if he had been brought into EASA when he was showing the early (very hard to recognize) signs in his Junior or Senior year of High school, his life (and ours) today would be quite different.

PLEASE CONTINUE TO FUND EASA and other EARLY INTERVENTION PROGRAMS BECAUSE THEY ARE WORKING!

Additional funding is needed to:

1. Expand these basic services to all youth and young adults in all counties of Oregon

Help us get the message into the schools and community so that we avoid expensive/ineffective hospitalizations and sad
preventable acts of violence (psychosis with weapons). (This requires less funding if you do #1 – positive results and word-ofmouth messaging will naturally happen – police, schools, and the community are desperate for this kind of resource.)

3. Increase training and resources to support substance abuse treatment that is so often associated with the illness

4. Allow services to extend longer than two years for those who need it

Thank you for supporting EASA and for your service. Please feel free to contact me if you have any questions.

Sincerely.

Christy Emlaw McMurtry, Administrative Specialist, Teacher Education Parent and Member of the Multnomah County Early Assessment Council

^{**} Please contact me if you would like this data.

2/23/13

To our Oregon state legislators,

Easa saves lives. Easa saves money. There is no downside and there are big benefits to funding this program. We have seen this for ourselves.

Money:

Easa clients avoid expensive Hospitalizations, Law Enforcement Encounters, and Incarcerations.

Easa outpatient services are less costly and more effective.

Lives:

Hospitals are for stabilization only. Released patients are still prone to dangerous, illegal and suicidal behavior.

Longer term care by trained staff able to respond with kindness and skill, often at a moments notice, in crisis situations over a period of years has been seen to de-escalate dangerous behavior gradually and permanently.

Our son experienced four hospitalizations following a suicide attempt. A second very serious attempt occurred after the first hospitalization that involved two emergency rooms, an ambulance ride to a hospital to physically recover, days in intensive care under a 24 hour suicide watch, then an ambulance transfer to a locked ward for eight days, then a transfer to another facility for a longer period until his release. He was seen by eight psychiatrists, each one time, each prescribing more drugs on top of the previous drugs. Complaining about drug side effects, he was threatened with a six month commitment to Salem if he refused to comply. He is still experiencing physical drug side effects years later. He personally owes \$28,000 for this—that's with insurance.

Fortunately he was accepted into the Easa program upon release. He has not been hospitalized since. Easa has saved tens of thousands of dollars of care costs in his case alone. He is now a happier, very creative young man functioning well and voluntarily participating in therapy. It's not too much of a stretch to say Easa saved his life.

During the two year course of his Easa treatment staff responded on short notice, in person and on the phone, to his calls to them in cases of extreme and/or dangerous behavior when he was upset and needed help. These were situations potentially otherwise involving the police and in at least one case life threatening.

An ongoing benefit of Easa is the Multi Family Group (MFG)—meetings held twice monthly for clients, family and close friends. These provide a sense of community and a chance to work through the stressful situations we share. They are invaluable.

Easa is now limited to accepting clients with only certain mental health diagnoses. Easa is now operating only during business hours. Funding will allow expanded hours and a more inclusive client base. This can only contribute to a more mentally healthy and happier population of Oregon Youth.

Saving money is a good thing too. Please give Easa what it needs.

Thank you, Robert Archer and Linda Denning

Robert. Derning