

Submitter: Dane Gatewood  
On Behalf Of:  
Committee: House Committee On Early Childhood and Human Services  
Measure, Appointment or Topic: HB3835

I am a mental health technician (a direct caregiver) at a youth residential psychiatric facility in Portland. A significant proportion of our beds are dedicated to kids in the Secure Containment level of care where physical restraints and seclusion are regularly used. I believe that the parts of this bill that change definitions of restraint and seclusion for child caring agencies [CCAs] and alter what can be defined as child abuse are essential to improve the quality of care and safety of the children in residential psychiatric and behavioral treatment.

As the situation currently stands, caregivers who take actions directed or modeled by their supervisors or institutions, or those who interact with a dysregulated child in ways that would be viewed as normal and safe outside of a CCA, are being wrongly labeled as child-abusers. Intervention is often necessary in these cases, but current law is misdirected and harmful. Rather than providing opportunities to train staff and address institutional shortcomings, current law discourages or outright prevents workers from taking on and maintaining careers in childcare at a time when the state is ringing alarm bells about access shortages. Existing law increases turnover, reduces safety for kids and staff, impedes hiring of quality caregivers, and disrupts therapeutic relationships. The status-quo is not working.

Like many, I am a proponent of the reduction of all types of restraint in mental health care. I believe restraint reduction is especially important in the care of minors due to issues around consenting to treatment. Restraint and seclusion cause trauma to all involved and I believe that we have a responsibility to work towards their elimination. I agree that restraint and seclusion are overly and sometimes wrongfully used in youth residential care, but my experience leads me to believe that this is due more to inadequate/misdirected state funding, poor oversight of CCAs, and unsophisticated and punitive legislation; not simply caregiver abuse. The opposition to this bill is amplifying language that has been shown to harm caregivers and, in turn, client outcomes. We cannot disregard the realities of how SB 710 and related legislation continue to damage the quality and availability of youth mental healthcare in Oregon. Please push back against these simplistic discourses; child safety cannot be guaranteed through punitive legislation.