

Submitter: Linda Case  
On Behalf Of:  
Committee: House Committee On Judiciary  
Measure, Appointment or Topic: HB2467

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April 1, 2025

To the House Committee on Judiciary,

I have worked as a registered nurse in a hospital in Medford, Oregon for 25 years. Force and trauma are not what people need. Health care for extreme mental health states could look like caring staff, a good medical workup with a supportive family member's accompaniment to retain the information, a doctor to explain to the person and their support person about potential causes, concerns, lab work, imaging, open conversations about substance use when applicable, and recommendations. People with mental health concerns would like a choice about treatment, full disclosure about medications, side effects, and alternatives to hospitalization. Many people would be safer, feel more helped with outpatient treatment.

Good mental health care could be a system that connects the person at the center of concern to a therapist and provider team that could work with them in their crisis and continue to work with them and their support people as an outpatient. We don't have this model now, but we could. Even in extreme states, many people have families that with a little education about how to help, and a good follow up plan, can assist their loved one through with allowing choices around their own care.

People don't do well with force. Higher doses of medication are used when people are held against their will. Mental health treatment in hospitals is frankly not good enough to make forced treatment easier to impose. Oregon can do better than this and move towards better outcomes and full recoveries.

I am in opposition to HB 2467. Thank you for your consideration.

Linda Case