

April 3, 2025

To Chair Kropf, Vice-Chair Chotzen, Vice-Chair Wallan, Representative Andersen, Representative Chaichi, Representative Lewis, Representative Mannix, and Representative Tran:

We are the current Chair and Vice-Chairs of the Oregon Consumer Advisory Council (OCAC), a statutory council ORS430.075, submitting this letter on behalf of OCAC members on the issues addressed in House Bill 2467, after discussion and vote by our members. To be clear, however, neither we nor OCAC are authorized representatives of the Oregon Health Authority agency. We offer this statement to collect the opinions and perspectives of our individual members, who support communities impacted by mental health, substance use, and process addiction challenges across our state, so that they can be added to the discussion.

Members of the Oregon Consumer Advisory Council are writing to provide our perspectives on the topics being discussed as related to House Bill 2467, which we understand could make it easier for judges to commit individuals to involuntary treatment and hospitalization based on the definitions of “dangerousness to self and others” included in the bill.

We are providing this information in the hope that the members of your committee will be able to use our perspectives while considering this legislation. Again, it is not within our scope to endorse or oppose legislation, and we are not acting as representatives of any public or private agency. But we are consumers, survivors, and ex-patients of the behavioral healthcare system, and family members and caregivers of those who utilize those systems, and we do have relevant experiences to offer the committee on the topics of HB 2467.

Our council is comprised entirely of people who have been or are currently consumers of behavioral healthcare in Oregon. Each person on the council has lived experience of mental health challenges, substance use or other process addictions, and/or are caregivers/family members of those who do. We know firsthand what it takes to foster a pathway of recovery and healing. And from our experiences, we believe it almost never begins with involuntary treatment.

For those of us who care for and support loved ones with mental health conditions, we know how painful it is watching them suffer. We have felt the powerlessness, the uncertainty, and the anguish of seeing systems fail. We know that lack of access to care reduces the chance for our loved ones to regain their strength and live the lives they deserve. We believe that all Oregonians need support to find the path of recovery and

healing that works for them, and that each person deserves respect and the power to determine what that path looks like for themselves.

As people with our own challenges, we know the path of recovery is not linear; it takes time and patience, as well as people who are willing to walk beside us when we are in crisis, when we face setbacks, and to cheer us on when we succeed. This can be very hard work, for both the people struggling and the people who care for them. It can be scary and heartbreaking; but mistakes, wrong turns, and even failures are often part of the process.

Members of OCAC have personally experienced and witnessed the ways that force, coercion, and loss of autonomy can do more damage and make that path harder in the long run. Statistics show that before and after rates of suicidality sharply increase for people who experience voluntary hospitalization for a mental health condition, let alone involuntary hospitalization.

Additionally, there is substantial research that demonstrates how People of Color are significantly more likely than white patients to be subjected to involuntary psychiatric hospitalization. Black patients are particularly vulnerable. An international study has shown that in the United States, the rate of involuntary hospitalization for Black children is almost double compared to white children. To create an easier pathway for civil commitment without also addressing the gross racial disparities and inequities of the system only perpetuates harm and further marginalization for People of Color, especially Black people.

Aside from the personal toll and further marginalization that forced treatment inflicts, the collective financial toll is also substantial. It costs more than \$32 million to forcibly commit 100 people for 180 days, according to the 2023 Oregon Criminal Justice Commission Report. Our members have many other ideas for more humane and effective ways to spend that money on solutions that work. We would like to offer some of those ideas here:

- Mobile crisis response teams that do not involve law enforcement and instead utilize mental health professionals such as peer support. \$32 million dollars would fund teams for 40 cities across our state.
- \$32 million dollars could fund over 20,000 additional shelter beds for individuals and families.
- We could use \$32 million to increase access to behavioral healthcare supports that help people before a crisis occurs.
- We could use \$32 million to fund educational programs in our schools that teach kids life-long skills and practices for mental and emotional wellness.
- \$32 million could be used to create many more peer respites and drop-in centers, which not only offer support and connection to people who are struggling, but can provide family members a pause from their caregiving responsibilities.

As a council, when we have been asked to give input on the provision of behavioral healthcare in the State of Oregon, we have strongly recommended making peer support more available to everyone who wants it. We have often recommended to leaders and directors of the behavioral healthcare system that more funding and workforce development be made available for peer support programs. Members of the council believe that we need to create easy access points for peer support, such as drop-in centers, where people can go to feel connected to others, to engage in their own journey of recovery while surrounded by others who know what it's like, and to feel the strength and change that is possible in mutually supportive relationships.

Under the current federal administration, the rights of disabled people are threatened. Many laws that disability justice advocates worked for decades to attain are now under attack. We hope that Oregon State Representatives will demonstrate their commitment to disability rights by affirming that everyone deserves care, respect, and access to treatment; and by supporting programs that offer a chance at real hope and recovery rather than those that could inflict more trauma.

While we agree that something urgently needs to be done to provide better care, support, and options for recovery for our state's most vulnerable, we do not believe that any form of force is the way.

Thank you for devoting your time and energy toward funding programs that would promote lasting healing and change.

Signed,

Molly Griggs, Marquita Corley, and Heather Irwin

Molly Griggs, Chair of the Oregon Consumer Advisory Council

Marquita Corley, Vice-Chair of the Oregon Consumer Advisory Council

Heather Irwin, Vice-Chair of the Oregon Consumer Advisory Council

On behalf of the members of the Oregon Consumer Advisory Council

Oregon Revised Statute (ORS) 430.073 established the **Oregon Consumer Advisory Council (OCAC)**. The role of OCAC is to provide the Oregon Health Authority feedback and recommendations from the independent, consumer and community voices of People with Lived and Living Experience, through recommendations on the provision of Behavioral Health services under the scope of the Oregon Health Authority.