LISA REYNOLDS, MD STATE SENATOR District 17



OREGON STATE SENATE

Testimony in Support of HB 2467-3: Civil Commitment Bill

April 4th, 2025 House Committee on Judiciary 3:00 p.m., Hearing Room F

Chair Kropf, Vice-Chairs Wallan and Chotzen, and members of the committee:

My name is Lisa Reynolds, State Senator for SD 17. I'm also a pediatrician, a mother, a friend, a daughter, and a sister.

I am here in support of HB 2467-3.

I'm grateful for the hours of meetings and to NAMI and many more.

I remember the exact moment, I remember where I stood, I remember the night air, and I remember my mom's anguish, when she told me that my older brother Pat had suffered a psychiatric crisis and was hospitalized in my hometown, about an hour away from where I was living and attending college. It hit me very hard. AND I had no idea what was in store for Pat, or for our family. I guess I'm grateful we didn't know back then the suffering that was in store.

My brother <u>Pat</u> has schizoaffective disorder, which means he struggles with psychosis AND with depression, sometimes cycling from one to the other. This is in part of the common pattern among the severely mentally ill - folks will sometimes refuse their medications. This is the frustrating and tragic feature of the disease.

Pat lives in fear of depression, which can render him suicidal, and we all worry about that for him. But, I'll be honest, those of us who love Pat really live in fear of when he suffers from psychosis. This is when Pat is experiences hallucinations, paranoia, and delusions. He stops engaging with his family, he leaves his living situation and becomes homeless, he becomes violent. And then we scramble yet again to try to get him to a place of safety - an emergency room and psychiatric ward and medications. I will tell you - every time we get Pat to that setting, he takes his medication, he improves, he is contrite, he is relieved.

Now, I must pause to tell you that when Pat is well, when he is stable and receiving treatment, he is a kind man. This is his current status; otherwise, I could not be here to talk of him today.

He plays guitar, he reads voraciously, he talks sports with my sons, he writes music, he provides company and comfort to my mom. This disease has rendered his life very curtailed. Pat has not worked in years, he has not had a steady partner, he is not a father, he cannot live independently. And speaking of my momshe raised four children, she has four incredible grandchildren, a wonderful community of friends, AND her daily mood is tied inextricably to how Pat is doing. And how could it not?

I would like to describe the scramble - of when Pat is off his meds, paranoid, and yes, violent.

First, we must find him. We call hospitals, we call police stations, we call morgues. We consult with lawyers and have come this close to hiring private investigators to find Pat. We sleep - if we can even sleep - with our phones next to our pillows.

And, when we locate Pat, when we know he may be in a spot for more than an hour, we call police to please pick him up and take him to a hospital.

Once, Pat was in a police station after being arrested for hitting a security guard. And I begged the police officer with tears, "please take him to a hospital. He is schizophrenic. He is a danger to himself or will be. He is clearly a danger to others - he just hit someone. He is living on the streets." And they say, kindly, "sorry, ma'am. He seems fine enough."

One time, he showed up on my mom's porch - an hour from where he had last been living - barefoot and pacing. My mom let him in. She gave him shoes. He's her son.

And when police arrived, officers, who know my mom well, they took Pat tothe train station.

We've looked into guardianships, power of attorney, and any other legal maneuver so that we can get him to safety in times of crisis. And we've been told over and over again - none of this would help in the crisis if Pat "comes off" as somewhat stable. I should note that Pat lives in Illinois, but the situation is similar here in Oregon.

On a side note and in response to other conversations we've had in this committee: Pat has been arrested twice during crises. Once was by the police officer at whom Pat threw rocks. She mercifully brought him to a hospital, and she later told me Pat apologized to her after receiving an IM injection of medication. Our well-resourced family was able to hire an attorney and provide letters from his doctors to get those charges dropped in very stressful court appearances. The thought of Pat in jail adds another layer of terror to our fears for his safety.

In pediatrics, we always trust the caregiver's instinct. If they're worried, if they have that strain in their voice on the phone, if they tear up when sharing their concerns about their babies, we LISTEN. This is what I am asking when it comes to civil commitment for psychiatric illness- we must lower the bar a little bit, to take in more data, to listen to those who know the trajectory. To hear families. To help people in crisis by providing a warm bed, a warm meal, and treatment that will soothe their unquiet mind. I know there are many smart and caring people working on this, and I am grateful. Let's strike a better balance, Oregon.

Thank you.