

## Testimony in Opposition to HB 4106

Chair, Vice-Chair, and Members of the Committee:

My name is Elaine Walters, I am a co-founder and the current Executive Director of the Trauma Healing Project - a community-wide effort that works to increase individual and community health by preventing and addressing the consequences of trauma. I am also a contracted trainer for the state-wide mobile crisis training.

I am here to express concern about House Bill 4106, particularly in light of the recent passage of House Bill 2005.

As you know, HB 2005 significantly expanded Oregon's civil commitment framework. It lowered the threshold from imminent danger to harm that is "reasonably foreseeable in the near future," broadened criteria for commitment based on prior hospitalizations, and created new diversion pathways that allow individuals to be detained and treated before a full judicial hearing. As a result, more Oregonians - including those in earlier and potentially resolvable stages of emotional distress - are now eligible for involuntary state intervention.

HB 4106 grants broad immunity to peace officers for the use of restraints or physical force during transport for involuntary treatment. ***This bill doesn't give law enforcement a tool they don't already have, it simply removes accountability for harm caused during the deployment of that tool - which by any measure, should be a tool of last resort.*** This bill is too simple, too discretionary and too broad. Assuming that an officer's belief that 'restraints or use of physical force is necessary' can be the operating standard for making decisions on the use of force is faulty on its face and will remove any true potential for accountability. This may or may not be the intention of the bill's authors, but given the language used around, "cone of protection" used by Rep. Mannix, I suspect it is exactly the purpose. Unfortunately, unchecked freedom to use force has never increased immediate or long term safety for individuals, law-enforcement or our communities.

When we expand who can be detained and simultaneously expand immunity for force used during transport, we increase the likelihood that vulnerable people will experience coercive intervention with fewer avenues for accountability and with no evidence our communities or law enforcement officers will be safer.

Transport is one of the most volatile moments in crisis response. Individuals may be suicidal, psychotic, terrified, or disoriented. Many have significant histories of trauma - including childhood abuse, domestic violence, institutional harm, and over-policing. Physical restraint in these moments can escalate panic, worsen emotional distress, and reinforce long-term mistrust of care systems.

Immunity also reduces incentives to invest in the least restrictive and most trauma-informed approaches. This bill would weaken oversight and law enforcement support at precisely the moment when power imbalance is greatest and individuals are least able to protect their own rights. It is also bad for the health and wellbeing of law-enforcement and crisis responders who

experience the use of force as a ‘moral injury’ that reduces sensitivity and increases burnout. Law enforcement doesn’t need less support or accountability around the use of force, they need more support to effective and less coercive responses in every case where it is possible.

We all know that public safety improves when people have stable housing, access to outpatient care, substance use treatment, and early crisis intervention. It also improves when well-trained and well-supported mobile crisis teams are available, when peers are involved, and when transport is handled by trained behavioral health professionals rather than law enforcement.

Expanding immunity for force during transport does not increase treatment capacity. It does not reduce hospital bottlenecks. It does not address the “aid and assist” backlog that prompted HB 2005. It does not build community-based stabilization services.

Instead, it risks increasing front-end detention into an already strained system without strengthening downstream care, all while deteriorating community trust.

If the state is investing resources, those resources would be better directed toward:

- Dedicated behavioral health transport teams
- 24/7 mobile crisis expansion
- Short-term respite and stabilization beds
- Supportive housing
- Workforce training in trauma-informed de-escalation
- Transparent reporting and independent review of use-of-force incidents

True public safety is strengthened by reducing crisis - not by shielding force from accountability.

***Given the expanded civil commitment authority under HB 2005, HB 4106 has the potential to further erode civil liberties and increase harm to vulnerable Oregonians, and to increase the strain on our systems, without demonstrable gains in community safety.***

I urge you to vote against HB 4106 and to re-center much needed and more cost-effective investments towards prevention, community-based capacity, and trauma-informed systems that not only protect but will increase both individual rights and public health.

Thank you for your time.

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