

Testimony for HB742 Corrections- Restrictive Housing – Serious Mental Illness-Assessments

House Judiciary Committee, Chairman Luke Clippinger

Date: Feb. 25, 2020, 1:00 pm

From: Trevor A., Montgomery County

POSITION: SUPPORT WITH AMENDMENTS

I am the father of a 35-year-old son who suffers from Paranoid Schizophrenia. My son was in restrictive housing for one month in the Frederick County Adult Detention Center while refusing medication because of his untreated psychosis, when he should have been in a hospital getting treatment. **Without amendments to require evaluation for involuntary hospital admission for those with mental illness in restricted housing, this bill would do nothing to help those like my son.**

Only hospitals, not correctional facilities, can give medication over objection when needed. Also, the highly trained staff in hospitals are also often able to persuade inmates to take medication voluntarily, as happened with my son.

It is hard to describe the suffering we saw our son endure, while in restrictive housing because of his untreated psychosis. **With schizophrenia and no medication, he was deadly scared of all jail personnel. He was going through hell with his paranoia. And this went on for a whole month.**

It is also impossible to explain the agony and helplessness we felt as parents watching our son suffer. **We fervently wish he could have been evaluated sooner for transfer to an inpatient hospital bed. .**

Our son, who I will call “John,” was first diagnosed in 2005 when he was a senior at the University of Maryland. He responded well to medication completed undergraduate degrees in Mathematics and Computer Engineering. Despite obtaining an excellent job, he stopped his medication in 2012 and went downhill fast.

In October 2015, John spent a month in the Frederick County Adult Detention Center after being arrested and charged with disorderly conduct, disturbing the peace and second-degree assault. He was seen by a psychiatrist and offered medication but again refused.

He was considered a suicide risk. This meant that he was kept in an isolated open cell, with the lights and cameras on 24/7 with only a toilet bowl in one corner of the cell. He had to wear a poncho with nothing else. When removed from the cell for any reason, he was shackled hand and foot. He did not have the use of a phone. His only contact with the outside world was for 30 minutes a week across a glass security barrier via a phone that did not work too well. And all this for the major crime of being mentally ill.

We know that staff were trying to protect his life. We do not feel the staff mistreated him. Our aim is simply to describe how extremely difficult and tortuous being in Restrictive Housing can be for someone with an untreated serious mental illness, even when humane care is given.

We are happy to say that John did agree to treatment in the hospital. Today he is back in the community, living in a rehabilitation group home in Montgomery County. He visits his family almost every weekend. As a father it is a pleasure to see him smile again.

My wife and I strongly support this HB742 IF AMENDED to promote the prompt hospital admission for inmates in need of inpatient care. We support the amendments offered by the Maryland chapter of SARDAA to reduce the use of restricted housing by improving access to hospital treatment.