## Testimony for SB 807 – Frederick County – MH Law – Assisted Outpatient Treatment Pilot Program

Senate Finance Committee

Date: March 8, 2022

From: Shakeemah White, Olney, Montgomery County

**POSITION: Favorable** 

Assisted Outpatient Treatment (AOT) might have saved my mother 15 years of ongoing psychosis, physical assaults, long periods of homelessness, and ongoing psychological and physical deterioration. My mother is diagnosed with paranoid schizophrenia and has no insight into her illness. Injectable antipsychotic medication has proven successful in providing her sustained periods of relief from delusions, fear, and agitation. Sadly, she has never reliably taken oral medication. The result – my mother has been hospitalized over 15 times since we moved here in 2006. Since 2016 she has not voluntarily accepted any treatment.

She initially agreed to treatment – Haldol injections – from 2006 to 2007. I am her only child, and we were happy to all be together. But in 2007 she started refusing the injections. One weekend while my two children and I were away, my mother – believing that we were all moving back to New York – packed all our clothes, shoes, accessories, and small appliances onto a moving truck and left town with our belongings.

My mother agreed to return to Maryland in 2008 and was accepting of the Haldol injections and therapy from 2008-2013. She was stable, doing very well, and living with us. In 2013 she started refusing the medication again as she believed she no longer needed it. She predictably deteriorated, believing she had a newborn baby girl, that her ex-husband was following her, and that demon spirits were jumping out of magazines. She would squander her money. I doggedly sought treatment and a variety of services for her, but she consistently refused services and there was no way to compel her into the treatment she so desperately needed. It was difficult to keep her stable, and she went through the "revolving doors" of the mental health system, involuntarily hospitalized many times during 2014-2016.

In 2016 she again returned to NY where she was homeless, living in train stations and abandoned buildings. That year my grandmother passed away, but my mother insisted she had to stay in New York "to take care of my mother." Periodically she would call me – belligerent, cursing and screaming – but in December 2020 she stopped calling and I didn't know if she was dead or alive. Last September, after receiving a call from a good Samaritan, I went to New York and found my mother in a Brooklyn train station. She was frail, dirty, and incoherent. On the way to my hotel, she pulled down her pants and defecated along the busy street. I got her back to Maryland, and she was immediately involuntarily admitted. She has been hospitalized involuntarily three times since returning to Maryland. She continues to refuse all medication, even for her high blood pressure. In addition to her suffering from the psychosis, I worry she will have a devastating or fatal stroke.

Court monitored outpatient treatment is the compassionate choice for those who cannot be reached otherwise. She could be safe, stable, and preparing to celebrate her 67th birthday in 2 weeks. She could enjoy the years ahead. Instead, she is currently hospitalized and again, insisting that she does not need medication.

Thus, the cycle continues, needlessly wasting state resources, both human and financial. You know better than I the cost of inpatient psychiatric care and the grinding, endless strain on all parts of the mental health system. AOT would help free individuals like my mom from the domination of this devastating illness. Although neither my mother nor I line in Frederick County, others there would benefit.

We know what doesn't work. For a change, let's offer something that could. Please support this pilot program.