

Testimony for HB1017

March 9, 2022, 1:00 pm, House Health & Government Operations Committee

Date: 3/6/22

From: Marianne Eichenberger, Howard County

Position: SUPPORT

I am an advanced practice mental health nurse of 40 years living in Howard County. I support the bill for Assisted Outpatient Treatment (AOT). I have worked with many seriously mentally ill clients that due to their illness (delusions and /or hallucinations) have refused treatment and ended up homeless or worse arrested for a criminal behavior and hospitalized in a forensic mental health facility. It is critical to get these individuals whose judgment, reasoning and/or inability to control their behaviors into treatment so they can make informed decisions regarding their future treatment.

The evidence shows that severely mentally ill clients that do not receive treatment in earlier stages of their illness or that have had to have multiple re-stabilization have a poorer response to future treatment and poorer long-term outcomes. AOT is less expensive as shown by a 2013 Duke research study where costs per person declined by 43% the first year with AOT. As a clinician this is a less restrictive and more humane treatment alternative that has worked in 47 other states.

I have worked with a client that due to delusions that she was being poisoned remained on the streets homeless, awake and fearful every night because the individual had been raped in a shelter and begging for food. The client was admitted numerous times to short stay admissions and discharged to the shelter. This client would not remain in the shelter and finally ended up in the forensic system where they were able to get treatment. I began treating this client in the outpatient setting after the forensic hospitalization and the client was on SSDI, living in a group home where they were able to get their first pet. It took the client 8 years to get to this point. The expression of happiness when discussing this animal is something I will never forget. AOT would have begun the treatment process at a time when the client judgment and ability to reason were seriously impaired. It would have been much more cost effective, safer for the client, and much more humane.

I ask all members to support this bill and the seriously mentally ill.

I appreciate the time you have taken to consider this vital issue.

Marianne Eichenberger, RN, PhD