Written Testimony in Opposition to Senate Bill 480: Mental Health Law: Assisted Outpatient Treatment Programs

Thank you Chair Griffith and Vice-Chair Klausmeir and committee members for your time.

My name is Mindy Morgan and I am 43 years old. I am here to state my position in opposition to Senate Bill 480. I am a mother of three, a member of my local church, a taxpayer, a clinical social worker, and the clinical director for a substance use treatment program. I have a Masters Degree in Social Work and have worked in the field with those with mental health issues for over 20 years.

I was diagnosed with bipolar disorder at age 21. I didn't seek treatment until age 35. I have been hospitalized three times over the last nine years. Through my hardest times, I maintained my full time job and was the sole breadwinner for my family while fighting to get the care I needed.

I spent over a decade of my young life afraid and ashamed. The people I trusted helped me see that I needed treatment. People don't develop the trust and openness to seek help through court orders.

In my third hospital stay I was held against my will. I wanted to leave a dangerous environment and I was not assessed to be at risk for harm. But I was locked in anyhow. As a result, I have told myself that never again will I seek help at a hospital. Forced treatment was harmful to me.

Am I less entitled to my constitutional rights because of my bipolar diagnosis? Are we proposing this for those with diabetes or heart disease who are struggling?

From my personal experiences as both a consumer and a professional, I will be clear that establishing court-ordered outpatient treatment will significantly increase barriers to individuals seeking care. People already don't trust the system. I know I don't. We will be far less likely to be honest and open in treatment or even to seek it at all if we know that our medical records will be open for examination should some person file a petition against us- with legitimate concern or not.

Now, as a taxpayer, I'm also concerned that this will burden our already overburdened systems- with people who are likely not fully engaging with care because our treatment systems are broken- not because they don't want help. It takes months to see psychiatric provider in some counties. Limited services are covered by insurance. Some people have no insurance. Schedules are full, providers are scarce and when you do see a provider there is little to no choice if you feel the care is of poor quality. Those providers who are skilled, competent and caring are poorly paid, overburdened with demand and paperwork, and are struggling with burnout.

Forced commitment programs operate from the standpoint that the consumer is the one who is broken. This couldn't be further from the truth. Our system is broken.

Please, let's take the target off those with mental health issues, address these systems, and fund real solutions. Forcing people into broken systems is not the way to help them get well. Thank you for your time.