

ADVOCACY AND TRAINING CENTER

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(OAR)

TESTIMONY SB 0480/HB0823 Mental Health Law –Assisted Outpatient Treatment

I am writing to oppose the above referenced legislation for the following reasons:

I am a licensed clinical social worker who has worked with adults who are experiencing homelessness and who have serious mental illness and/or co-occurring disorders for the past 32 years. Throughout these years, I have learned and implemented the following:

1, The most effective way to facilitate adherence to outpatient treatment is through positive outreach, engagement, and the provision of welcoming and individually-determined treatment and services.

2. In my years of working with people who are unhoused, I and my staff, in Baltimore City over the period of 10 years, facilitated engagement with treatment for numbers of individuals who had never stayed in treatment previously. We were able to accomplish this through partnering with Assertive Community Treatment (ACT) teams, homeless service providers outreach teams, our own outreach and engagement, and the initial provision of ensuring that we met individuals' basic needs for housing, food, income, and other necessities. We have multiple examples of success with this approach.

3. "Assisted" outpatient treatment is a euphemism for forced involuntary treatment. Although coercing someone into treatment may make sure they attend, it doesn't ensure their being engaged in treatment, a big difference. I, too, hope that all individuals who are experiencing harshness and the lack of having needs met are able to improve their lives. Coercion isn't the answer. Time spent engaging, treating individuals with respect and hope, and meeting with them where they are, frequently and consistently, are the answers. The incorporation of peer support can be an invaluable tool in doing so.

I urge the Committee to vote no on this legislation and to consider the submission of greater funding for the services that we who do this work know are effective.

Thank you.