

## **Mental Health – Emergency Evaluation and Involuntary Admission Procedures and Assisted Outpatient Treatment Programs**

### **Testimony for SB 453**

Finance Committee

Date: February 20, 2024

From: Gina Beck, District 15, Montgomery County

### **POSITION: FAVORABLE**

My son is a 32-year-old man who experienced a downward spiral in his life over the past 7 years due to the lack of AOT. He was first hospitalized in February 2016, for attempting self-harm. After four days he was released to his apartment with a prescription for antipsychotic medication which we filled upon his release. I tried to get him to come and stay at home in Maryland while he recovered, but he was a 24-year-old student at the University of the District of Columbia, and he wanted to return to school and continue his studies.

He took his meds and went back to school. He was ok for a few months but then stopped taking meds and was using marijuana. Six months later in September 2016, he told me the voices in his head were too much and I convinced him to go with me to the hospital. At this point he was hallucinating and delusional, stating he thought someone was trying to kill us. We went to Montgomery General Hospital in Olney, MD, because I had been told they had a very good Psychiatric Unit. Well, we never got to find out. I begged the ER personnel to take us out of the waiting room to a place where my son would be secured. Ninety minutes later they triaged him, took his vitals, acknowledged he was clearly psychotic, and sent him back to the waiting room. Again, I begged and told them he was going to run. They did not listen, and he ran. It took me hours to find him, get him back into my car, and back home. Three days later I convinced him again to go to the hospital. This time we went to Shady Grove Hospital in Rockville, MD. I explained the situation just as I had at Montgomery General, only Shady Grove responded and moved him behind locked doors within 20 minutes of our arrival.

My son was released from Shady Grove after five days in the Psych unit and was referred to the Out-patient day program. He went for two days but did not go on the 3<sup>rd</sup> and 4<sup>th</sup> day. When I physically dragged him there on day five, they would not let him attend. My husband and I made multiple attempts to keep him in outpatient treatment, but because he is an independent adult who has no insight into his illness, he refused to continue. Without AOT there was no treatment for him.

On October 16, 2016, in a completely psychotic episode, my son shattered and destroyed 19 oversized windows in our 200-year-old farmhouse, where he grew up and lived for 18 years. Sadly, I had no choice other than to call the police because I was afraid for his safety and for mine. The police chased him until he finally surrendered and put him in handcuffs. At my pleading, they took him to the hospital, not to jail. A Montgomery County District Attorney

advised me the only way for him to be ordered to get help for his mental illness was for me to press charges against him which would come with the risk of him going to jail. As the mother of a young black man that was not an option. Having only the police to turn to during his breakdown was terrifying enough.

In March 2022, my son was again hospitalized after not taking his medication for 18 months. He experienced a severe break with reality becoming physical with one of his caregivers. He was involuntarily committed to a hospital in Randallstown, 50 miles away from where we live in Montgomery County. They tried to release him in 3 days even though he had not been seen by a judge who had the power to continue his involuntary commitment. They were going to release him to a homeless shelter 50 miles away from home where he knew absolutely no one. I had to beg and threaten the hospital and my insurance company to keep him there even though he had attacked someone. In the end he was in the hospital for 30 days. I had to arrange for a very expensive treatment center to prove that he was stable enough for a different group home to take him. This facility cost me over \$50,000 for 3 weeks. This is added to the \$7000 a month I pay for him to live in group home. Neither the treatment center or the group homes he has lived in since 2017 are covered by insurance.

He is our only child and our family is devastated and broken.

AOT has proven, in several states, to have significantly reduced many of the negative and devastating outcomes of Mental Illness including suicide, homelessness, arrests, incarceration, hospitalizations, drug use and victimization. We can't change the past, but if we enact AOT in Maryland, maybe our loved ones suffering from mental illness and families like mine, will not have to repeatedly endure the heartbreaking, emotionally devastating, dangerous, and costly experiences I described above.

Thank you,

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