

Testimony for HB1014

February 24, 2026; House Health Committee

From: Cherie L. Snyder, 87 S. Broadway, Frostburg, MD 21532 (Allegany County)

Position: Support

For over 20 years I have unsuccessfully sought help for my 42-year-old son Bryan who is severely mentally ill with schizophrenia and anosognosia (neurological condition which precludes him from understanding that he is ill and needs treatment).

Because of the current “danger to self or others” definition, only twice when there was a crisis have I been able to get Bryan admitted to our community hospital inpatient psychiatric unit. And then only, 1) with the help of skilled, mental health-trained police officers and, 2) at my insistence that he be admitted when emergency room staff wanted to discharge Bryan to the community.

Despite caring post-hospitalization community supports that have tried to help him after his 5-6 day stays in the psychiatric unit, Bryan has needed much more intensive, long-term care. This has been denied to him due to his behaviors not presenting as “a danger to the life or safety of the individual or others.” As a result, he has continued to live in his own private hell – delusional, paranoid, angry and isolated. His home is filthy, mice infested, and filled with trash. He only eats food from cans delivered by Amazon plus a few weekly deliveries of hot food from a local pizza shop. He let no one in this trash filled house for over 3 years. This deteriorated state was not considered sufficient for him to be in “danger”.

That is until August 2025 when a police officer saw him removing a sign from a fence at 2 AM and stopped to check on what he was doing. Although Bryan has never been violent in his 20 years of isolation with no consistent treatment for psychotic and paranoid delusions, **he became afraid and said he would go in his house and get a knife – which he did.** Fortunately, Bryan did not attempt to stab him. And fortunately for Bryan, the officer did not shoot him in self-defense.

Murder or death or other physical harm could have easily been the outcome. Instead, the result was that Bryan was charged with multiple felonies and taken to the Allegany County Detention Center. There he was eventually evaluated and found incompetent to stand trial. Three and a half months later he finally was assigned to treatment at Finan State Hospital – getting treatment he has needed for so many years as he struggled with severe psychosis, paranoia, and anosognosia.

Our family was relieved! Nothing else has gotten Bryan the care he needs. It took committing a crime that could have resulted in death or injury to either the officer or Bryan to finally get him help.

If HB1014 is passed, people like Bryan will not need to threaten others and have criminal charges in order to get treatment. They can receive help BEFORE they are so severely debilitated and BEFORE there is a serious crisis with criminal charges, personal harm, or death. And taxpayers will not have to cover the costs of public defenders, judges, Detention Centers – not to mention jail terms and trials, wounded or dead police officers and traumatized community members.

Illness must be treated, not punished. Access to emergency evaluation and involuntary psychiatric hospitalization for those who are so ill that they cannot seek the help they need is humane and just.

PS: Bryan is making significant progress at Finan State Hospital – and he is aware of that progress!