NEIL ABERCROMBIE GOVERNOR OF HAWAII



STATE OF HAWAII DEPARTMENT OF HEALTH P.O. Box 3378 HONOLULU, HAWAII 96801-3378 LORETTA J. FUDDY, A.C.S.W., M.P.H DIRECTOR OF HEALTH

> In reply, please refer to: File:

House Committees on Health and Public Safety S.B. 310, SD2, Relating to Mental Health Treatment Testimony of Loretta J. Fuddy, A.C.S.W., M.P.H. Director of Health

March 15, 2013, 10:00 a.m.

Department's Position: While the intention of this bill is laudable, the Department of Health (DOH)
respectfully opposes this bill.

Purpose and Justification: The bill proposes modifying existing law and includes changing the current term "involuntary outpatient commitment" to "assisted community treatment." The bill further proposes modifying some aspects of the existing statute to accomplish this goal, and takes a preliminary step towards specifying the operational procedures for implementing an order for what will be termed

7 "assisted community treatment."

8 The department understands the intent of this bill, which is to increase the availability of 9 outpatient services to those who need them and avoid incarceration, prolonged hospitalizations, and 10 institutionalization. The department also cares about the safety of our community and the recovery of 11 individuals with severe and persistent mental illness.

12 The department's concerns are about the operational implementation of the provisions of this 13 proposal. Items including the forcible detention of consumers for transport, the administration of 14 medication pursuant to a court order, the responsibility of a treating psychiatrist, the role of community 15 mental health center employees, a court's ability to order community mental health programs to a

Promoting Lifelong Health and Wellness

1	specific course of treatment and the responsibility for the coordination of care by a provider or
2	organization are not clearly described in the proposed statute and are likely to be very challenging to
3	implement safely. There are also likely to be legal and possibly constitutional issues raised.
4	The department suggests further study and planning be completed which more fully addresses
5	these concerns before specific legislation is enacted. We plan to continue working with community
6	stakeholders and partners regarding the issue of increased and improved accessiblity to needed care.
7	Thank you for the opportunity to testify on this bill.

NEIL ABERCROMBIE GOVERNOR OF HAWAII



LORETTA J. FUDDY, A.C.S.W., M.P.H. DIRECTOR OF HEALTH

STATE OF HAWAII DEPARTMENT OF HEALTH

STATE COUNCIL ON MENTAL HEALTH P.O. Box 3378 HONOLULU, HAWAII 96801-3378 In reply, please refer to: File: DOH/ADAD

TESTIMONY IN SUPPORT OF SB 310, SD2: RELATING TO MENTAL HEALTH

TO: Rep. Della Au Belatti, Chair; Rep. Dee Morikawa, Vice Chair and Members, Committee on Health

Rep. Henry J.C. Aquino, Chair; Rep. Kaniela Ing, Vice Chair, and Members, Committee on Public Safety

FROM: G. Mike Durant, Chairperson State Council on Mental Health

Hearing: Friday, 3/15/13; 10:00 am; CR 329

The State Council on Mental Health passed a resolution in support of SB 310 at its January meeting. Members of the council are appointed by the Governor and include mental health consumers, family members, providers, several state agencies and representatives from all counties.

We believe this bill will improve the lives of severely mentally ill individuals who are being criminalizing by being arrested for petty crimes that arise out of their illness, undergo expensive and unnecessary hospitalizations, or have become homeless because of their mental illness.

Our current law covering these situations is flawed and, as a result, little used by the courts. This bill specifically targets only the most severely mentally ill individuals in our community who are psychotic, unable to function, and extremely vulnerable.

In states where similar laws have been enacted, hospitalization and incarceration have been reduced, individuals with violent histories have become significantly less likely to commit violence after Assisted Community Treatment, and individuals with severe psychiatric illnesses who were not in an assisted community program were almost

CHAIRPERSON G. Mike Durant

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Sandra Simms

Marie Vorsino, Psy.D.

Noelani Wilcox, APRN

Bailey Young

Michael Zarate

EX-OFFICIO:

Lynn N. Fallin Deputy Director for Behavioral Health Administration twice as likely to be victimized as individuals that were part of the program.

I became involved with improving the lives of those with serious mental illness because I had a son who developed schizophrenia and was first hospitalized at the age of 19. For several years he functioned well while taking medication. At about the age of 30 he became less compliant with his medication and was hospitalized several times. He was stabilized in the hospital but became non-compliant with his medication when he was released. Without the proper medication his behavior became erratic and even dangerous. As a result, he took his life 3 years ago at the age of 33. I believe this law could have helped him to stay on his medication after leaving the hospital and may have deterred him from taking his life.

Thank you for the opportunity to testify in support of this SB310, SD2.

Date Page 2

DEPARTMENT OF COMMUNITY SERVICES

715 SOUTH KING STREET, SUITE 311 • HONOLULU, HAWAII 96813 • AREA CODE 808 • PHONE: 768-7762 • FAX: 768-7792

KIRK CALDWELL MAYOR



PAMELA A. WITTY-OAKLAND DIRECTOR DESIGNATE

> GARY K. NAKATA DEPUTY DIRECTOR

TESTIMONY OF PAMELA A. WITTY-OAKLAND, DIRECTOR DESIGNATE DEPARTMENT OF COMMUNITY SERVICES CITY AND COUNTY OF HONOLULU BEFORE THE HOUSE COMMITTEE ON HEALTH AND THE HOUSE COMMITTEE ON PUBLIC SAFETY Friday, March 15, 2013, 10:00 a.m., Conference Room 329

SENATE Bill 310, SD2 "RELATING TO MENTAL HEALTH TREATMENT" Position: Supports

To: The Honorable Della Au Belatti, Chair and Members of the Committee on Health The Honorable Henry J.C. Aquino, Chair and Members of the Committee on Public Safety

Senate Bill No. 310, S.D. 2 establishes an assisted community treatment program in lieu of the involuntary outpatient treatment program, to be held at any location where an individual may receive behavioral health services, such as hospitals and emergency rooms, correctional facilities, state contracted or private behavioral health programs, independent living, community health centers, and crisis or homeless shelters and programs. The City Department of Community Services (DCS) **strongly supports** Senate Bill No. 310 S.D. 2.

The DCS works closely with nonprofit service providers to ensure that all people experiencing homelessness, many of whom are severely mentally ill, are offered assistance. Unfortunately, some of the individuals who are the most visible to the public are persons whose mental health conditions are so severe that they do not recognize that they need assistance and therefore resist receiving any type of services. These individuals, considered the most vulnerable and needy population our community, comprise a significant share of Honolulu's chronically homeless population.

The DCS concurs that persons suffering from severe mental illness often cycle between homelessness, emergency room treatment, incarceration, and hospitalization. The current system not only uses limited public resources, but also fails to address the long-term needs of these individuals. Assisted community treatment provides an alternative, and offers an opportunity for severely mentally ill and chronically homeless persons to achieve greater stability in their lives, reconnect with the community, and transition towards greater independence. The DCS respectfully ask that this bill be passed.

Thank you for the opportunity to testify on this bill. Should you have any questions or concerns, please feel free to contact Pamela Witty-Oakland at 768-7760.

Community Alliance for Mental Health

Board of Directors

Anne Chipchase President

Robert Scott Wall Vice President

Crystal Aguinaldo Secretary

William Lennox Treasurer

Sunny Algoso

Jessica Carroll

Randolph Hack

Gina Hungerford

Susan King

To: The Hawai'i State House of Representatives Committees on Health and Public Safety Re: SB 310 SD2

To: The Honorable Representatives Bellati, Aquino, and the members of their committees.

Aloha,

The Community Alliance for Mental Health along with United Self Help neither supports nor opposes SB 310 SD 2. We do however acknowledge the need to address Hawai'i's most vulnerable population when they are in their direst straights. After three years of negotiations SB 310 SD2 presents a compromise which albeit unpleasant is tolerable to the consumers of Hawai'i.

Mahalo, Scott Wall Vice-President



SUBMITTED ONLINE Hearing on March 15, 2013 @ 10:00 a.m. Conference Room # 329

DATE: March 13, 2013

House Committee on Health Rep. Della Au Belatti, Chair Rep. Dee Morikawa, Vice Chair House Committee on Public Safety Rep. Henry Aquino, Chair Rep. Kaniela Ing, Vice Chair

FROM: Walter Yoshimitsu, Executive Director

RE: Support SB 310 SD2 Relating to Mental Health Treatment

Mahalo for the opportunity to testify. I am Walter Yoshimitsu, <u>representing the Hawaii Catholic Conference</u>. The Hawaii Catholic Conference is the public policy voice for the Roman Catholic Church in the State of Hawaii under the leadership of Bishop Larry Silva. We strongly support the need to further the discussions on mental health services in the community for those who are vulnerable and in need of services.

While we do not profess to have all the answers to the mental care crisis in our islands, we want to stress that at the very center of the Church's social teaching is the life, dignity, and rights of the human person. We are called to serve the poor and vulnerable; to build bridges of solidarity among peoples of differing races and nations, language and ability, gender and culture. Even to those whom society has deemed as broken and unchangeable.

There is obviously a great need in the community for this legislature, and social service organizations, to deal with the issue of mental health treatment. Many of our homeless brothers and sisters are struggling and in dire need of services.

Everyone agrees that with the proper treatment, symptoms can be eliminated or reduced, and these precious people can be helped to overcome, and even break, the cycle. Having said this, we acknowledge that there are some severely mentally ill people who will not accept treatment because they may not have the ability to understand their need for assistance. In some cases, they may not even believe they are ill. This bill is to assist them to get the necessary treatment in the community, thereby keeping them <u>out of jail</u> and <u>out of the hospital</u>, and <u>reducing the likelihood of their becoming homeless</u>.

For this reason, we support the bill and are extremely grateful that you are having this very important discussion.

Mahalo for your kind consideration.

TESTIMONY IN SUPPORT OF SB310 SD2: RELATING TO MENTAL HEALTH

TO: Health Committee Chair, Rep. Della Au Belatti Vice Chair Rep. Dee Morikawa Members of the House Committee on Health

> Public Safety Committee Chair, Henry Aquino Vice Chair Rep. Kaniela Ing Members of the House Committee on Public Safety

FROM: Connie Mitchell, Executive Director IHS The Institute for Human Services, Inc.

Hearing: Friday, 3/15/13; 10:00 am; CR 329

Thank you for the opportunity to testify in support of HB991 which will be an important enhancement to our devastated mental health system. Our current system is fragmented and siloed by lack of transitions between places of treatment, poor communication between service providers who are engaged in a person's care and a separation of physical and mental health care. This bill creates stronger bridges between these environments of care and the providers who offer treatment.

As a homeless services provider in Honolulu, we encounter many people who are chronically homeless and chronically mentally ill who do not have the capacity to appreciate the benefit of treatment due to the nature of their illness. We also receive calls from concerned family members of persons suffering from chronic mental illness who do not have a way of helping their loved ones be maintained in treatment if the patient chooses not to take their medication as result of judgment impaired by their mental illness.

We want to make clear that it is not the intent of the proposed bill for law enforcement officers to become defacto transport for any person who is not adhering to treatment. However, we do believe they can have an important role in supporting those persons ordered by the court to be given medication and treatment to assist in the order when there is need. There are strict criteria of a history of arrest or emergency mental health evaluation that would make someone eligible to be court ordered for treatment. This model of engaging law enforcement as part of Homeless outreach mental health team has successfully reduced chronic homelessness in in other cities such as San Diego New York and Boston.

This bill took a statute that was rarely successfully petitioned (only once in thirteen years in family court) and amends it to provide an avenue for mentally ill persons who

have a history of mental instability and failure to adhere to prescribed treatment to be maintained in the community and to avoid incarceration and hospitalization. It also creates the possibility of smoother transitions between different settings where a person may be treated by allowing the assisted community order to follow a person from an inpatient setting to an outpatient setting and vice versa.

Some concerned might argue that this bill is meant to serve people in the community and language should not include reference to treatment in jails or inpatient hospitals based on the dichotomous concept of inpatient and outpatient treatment and keeping them separate. In fact, the most recent literature on homeless and mental health systems of care point to the need for smoother transitions and handoffs between institutional and non-institutional settings to be critical for an effective system. An order to treat that could follow person from community based treatment into the jail (i.e Oahu Community Correctional Center, OCCC) where people stay an average of less than 30 days. Jails are a part of the community and the court order should be effective there to promote continuity of care. Secondly for people in the leaving prison who are assessed to require medications to remain stable, the amendments to the statute would allow initiation of the Assisted Community Treatment order process before release.

Another argument you will hear is that there are constitutional rights that may be at risk with this bill related to involuntary mental health treatment. Other states with similar assisted community treatment statutes have been challenged legally, judges have upheld the constitutionality of court orders to treat mental illness involuntarily when evidence has been presented supporting the need for such. <u>Part of the reason for that is that medical treatment of mental illness has improved remarkably and have far fewer side effects than they have in the past.</u>

We need not go back too far in Hawaii's history to be reminded of what tragedy could happen when a person that is clearly suffering from mental illness is not required to remain in treatment. In 2009, Waianae school teacher Asa Yamashita was stabbed to death by Tittleman Fauatea who was diagnosed with schizophrenia and had a long history of mental health treatment and aggressive behavior. He had stopped taking his medications. While serious violence is not typical of persons with mental illness, when dangerous behavior has been documented as part of a person's history, involuntary medication is an option that protects the individual (from wrong doing, repeated arrests and loss of freedom) AND the community (destruction that might be caused by command hallucinations, paranoid ideas or manic episodes).

Please help Hawaii pass this bill for the sake of the person suffering serious and persistent mental illness and for the sake of the community's health and safety.

Testimony in Support of SB310

Friday, March 15, 2013, 10:00 a.m. Conference Room 329 House Committees on Health and on Public Safety

Aloha Committee Chairs and Members of the Committees. My name is Pamela Menter, and I am writing on behalf of Mental Health Kokua as Program Director for Safe Haven, a transitional shelter for homeless severely mentally ill adults.

Currently, in order to receive inpatient mental health treatment at Hawaii State Hospital a person must first commit a crime. Senate Bill 310 will help persons with severe mental illness receive help in the community without resorting to crime in order to get mental health care.

This bill will help the most severely mentally ill individuals who cycle between the streets, the E.R., hospital and jail, often lost in their own psychotic reality, behaving in bizarre and unpredictable ways, and living in extremely degraded circumstances. These are the most vulnerable members of our community.

This bill proposes Assisted Community Treatment, whereby individuals would be ordered by Family court to receive treatment in the community. It is far preferable to treat people in the community, outside of the criminal justice system. Additionally:

- There is no forced medication.
- This bill includes strict eligibility criteria, mandates that the person has an attorney, and lays out a specific treatment plan.

In New York, which has a similar law, 75% of the consumers said the Assisted Community Treatment order helped them gain control over their lives and 81% said it helped them to get and stay well.

This bill is meant to promote better access to mental health treatment for many individuals who are so disabled by their mental illness that they are unable to cognitively accept their diagnosis of mental illness or to continue on prescribed treatment.

Mahalo for your support of SB310. This bill will enhance the existing law to provide Assisted Community Treatment for the most severely mentally ill people in Hawaii.

Pamela Menter, Program Director

Safe Haven/Mental Health Kokua

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 13, 2013 11:35 AM
То:	HLTtestimony
Cc:	DIAMONDHEADCLUBHOUSE@YAHOO.COM
Subject:	Submitted testimony for SB310 on Mar 15, 2013 10:00AM

SB310

Submitted on: 3/13/2013 Testimony for HLT/PBS on Mar 15, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing	
DIAMONDHEAD CLUB HOUSE	DIAMOND HEAD CLUB HOUSE	Support	No	

Comments: IT IS OBVIOUS THAT THERE IS TO MANY PEOPLE OUT ON THE STREETS THAT SUFFER FROM VARIOUS MENTAL ILLNESS CONDITIONS AND NEED HELP. LET'S HELP THEM GET THEM OFF THE STREETS AND INTO THE PROPER FACILITIES AND MEDICAL ATTENTION.

Please note that testimony submitted less than 24 hours prior to the hearing , improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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TESTIMONY IN SUPPORT OF SB 310, SD2: Relating to Mental Health Treatment

- TO: Representative Della Au Bellatti, Chair, Representative Dee Morikawa, Vice Chair and Members of the Committee on Health Representative Henry Aquino, Chair, Representative Kaniela Ing, Vice Chair, and Members of the Committee on Public Safety
- FROM: Trisha Kajimura, Social Policy Director, Catholic Charities Hawai'i

Hearing: Friday, March 15, 2013, 10:00 am; CR 329

Thank you for the opportunity to testify on SB 310, which establishes an assisted community treatment program in Hawai'i. I am Trisha Kajimura, Social Policy Director for Catholic Charities Hawaii. I am testifying in support of SB 310.

Catholic Charities Hawai'i (CCH) is a tax exempt, non-profit agency that has been providing social services in Hawai'i for over 60 years. CCH has programs serving elders, children, developmentally disabled, homeless and immigrants. Our mission is to provide services and advocacy for the most vulnerable in Hawai'i.

Catholic Charities Hawai'i recognizes that serious and persistent mental illness is a significant problem in our community and seen often among the homeless. Our agency provides housing assistance for the homeless and those at-risk of homelessness. We understand how difficult it is to help people who are dealing with an untreated mental illness and how vulnerable they are on the streets. We are very concerned that without treatment, these people cannot care for themselves adequately to avoid harm and mistreatment. They are also seen frequently at emergency rooms and are often arrested and incarcerated.

SB 310 offers this population a means of getting help when they are unable to ask for it themselves. In the types of cases it is specified to address, it will help people receive the mental health treatment that they need to regain their dignity and a chance for the best health outcomes possible. This type of treatment will also save the state money on avoidable emergency room visits and incarceration.

Please help this vulnerable group. Catholic Charities Hawaii urges you to pass SB 310. Please contact me at (808)527-4810 or trisha.kajimura@catholiccharitieshawaii.org if you have any questions.







SB310 SD2 Relating to Health Establishes an assisted community treatment program in lieu of the involuntary outpatient treatment program.

- COMMITTEE ON HEALTH: Representative Belatti, Chair; Representative Morikawa, Vice Chair
- COMMITTEE ON PUBLIC SAFETY: Representative Aquino, Chair; Representative Ing, Vice Chair
- **4** Friday, Mar. 15, 2013; 10:00 a.m.
- Conference Room 329

HAWAII SUBSTANCE ABUSE COALITION Supports SB310 SD2.

Aloha Chair Belatti, Chair Aquino, Vice Chair Morikawa, Vice Chair Ing and Distinguished Committee Members. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide hui of more than twenty non-profit treatment and prevention agencies.

Previous research has shown that people with both a substance use disorder and a cooccurring psychiatric disorder were more likely to use multiple drugs and to have more economic and social problems than those without a co-occurring psychiatric disorder.

Integrated treatment takes place in different settings (e.g., residential and outpatient) over time, and that much of the recovery process typically occurs outside of, or following, treatment (e.g., through participation in mutual self-help groups). Practitioners often divide treatment into phases, usually including engagement, stabilization, primary treatment, and continuing care (also known as aftercare). Use of these phases enables the clinician (whether within the substance abuse or mental health treatment system) to apply coherent, stepwise approaches in developing and using treatment protocols.

The integration of substance abuse treatment and mental health services for persons with COD has become a major treatment initiative. As developed in the substance abuse treatment field, the recovery perspective acknowledges that recovery is a long-term process of internal change in which progress occurs in stages, an understanding critical to treatment planning.

We appreciate the opportunity to provide testimony and are available for questions.



PROTECTING HAWAII'S OHANA, CHILDREN, UNDER SERVED, ELDERLY AND DISABLED

March 13, 2013

P13:020T:LKR

Board of Directors

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March 10, 20	16 1 10.020
TO:	Representative Della Au Belatti, Chair Representative Dee Morikawa, Vice Chair Members, Committee on Health
	Representative Henry J.C. Aquino, Chair Representative Kaniela Ing, Vice Chair Members, Committee on Public Safety
FROM:	Laura Kay Rand, Interim Executive Director, PHOCUSED
HEARING:	Joint Committees on Health and Public Safety March 15, 2013 at 10:00 a.m.

Testimony in Support of SB310, Relating to Mental Health Treatment

Thank you for the opportunity to provide testimony in support of SB310, which establishes an assisted community treatment program. PHOCUSED is a coalition of health, housing, human services agencies and individual advocates voicing the needs of the marginalized and underserved in Hawaii.

The State's mental health services for the most severely mentally ill individuals have been decimated. This has predictably resulted in these individuals being arrested for petty crimes that arise out of their illness, utilizing Emergency Department services, undergoing expensive and unnecessary hospitalizations, and/or becoming homeless because of their mental illness. This is a very expensive revolving door that is hurtful to these individuals and/or the community. The mental health system that does exist is fragmented, confusing and nearly impossible to navigate.

Assisted Community Treatment is part of the solution. It provides a process whereby the Family Court can order a person with severe mental illness, who is not complying with treatment, to accept treatment in the community, thereby not bouncing in and out of the hospital, jail, and streets. In many other states, this approach has resulted in a reduction in hospitalization and incarceration rates, and patients with violent histories have become significant less likely to commit crime.

I urge your support of SB310. We appreciate the opportunity to testify in support of this measure.

Sincerely, Laura Kay Rand Interim Executive Director

200 N. Vineyard Blvd, Bldg B Honolulu, HI 96817 P: 808.521.7462 www.phocused-hawaii.org admin@phocused-hawaii.org



Committee:	Committees on Health and Public Safety
Hearing Date/Time:	Friday, March 15, 2013, 10:00 a.m.
Place:	Conference Room 229
Re:	Testimony of the ACLU of Hawaii in Support of S.B. 310, S.D. 2, Relating
	to Mental Health

Dear Chairs Belatti and Aquino and Members of the Committees:

The American Civil Liberties Union of Hawaii ("ACLU of Hawaii") writes in opposition to S.B. 310, S.D. 2 relating to mental health treatment. While this bill is no doubt well-intentioned, S.B. 310, S.D. 2 erodes the current standard such that otherwise competent individuals may be involuntarily committed and forcibly treated in violation of their constitutional rights.

Involuntary commitment and forcible treatment are serious deprivations of liberty than can be justified only in the narrow circumstance where there is mental illness and an *imminent* physical danger to the person to be committed or to others, evidenced by observed behavior and where there is no less restrictive alternative. In such cases, strong procedural safeguards must be in place to ensure that the due process rights of individuals are protected.

S.B. 310, S.D. 2 may violate individuals' constitutional rights by eroding the requirement that the person be "imminently" dangerous to him/herself or others. This bill would allow the involuntary commitment and forced treatment of individuals who may not be imminently dangerous to themselves or others – persons who are "unlikely to live safely in the community..." and need treatment to prevent them from becoming "obviously ill." No justification has been given to show why it is necessary to lessen this standard nor has any information been given to show that there are no less restrictive alternatives.

S.B. 310, S.D. 2 opens the door to abuse in that it would allow an otherwise functioning person who is fighting addiction to be committed against his or her will. The ACLU of Hawaii has great concern that passing this bill into law raises the possibility of misuse by family members who petition the court ("My wife is doing drugs").

Committing a person to treatment against his or her will is a significant loss of liberty and freedom and it is a policy that is inherently doomed to failure due to its punitive nature. Because this legislation invites abuse and puts otherwise competent individuals at risk of losing their freedom, the ACLU of Hawaii opposes S.B. 310, S.D. 2.

Thank you for this opportunity to testify.

Sincerely, Laurie A. Temple

> American Civil Liberties Union of Hawai'i P.O. Box 3410 Honolulu, Hawai'i 96801 T: 808-522-5900 F: 808-522-5909 E: office@acluhawaii.org www.acluhawaii.org

Chairs Belatti and Aquino and Members of the Committees March 15, 2013 Page 2 of 2

Staff Attorney and Legislative Program Director ACLU of Hawaii

The American Civil Liberties Union ("ACLU") is our nation's guardian of liberty - working daily in courts, legislatures and communities to defend and preserve the individual rights and liberties that the Constitution and laws of the United States guarantee everyone in this country.

American Civil Liberties Union of Hawaii P.O. Box 3410 Honolulu, Hawaii 96801 T: 808-522-5900 F: 808-522-5909 E: office@acluhawaii.org www.acluhawaii.org Larry Geller Honolulu, HI 96817 SB310 HLT/PBS Friday, March 15, 2013 10:00 a.m. Room 329

COMMITTEE ON HEALTH Rep. Della Au Belatti, Chair Rep. Dee Morikawa, Vice Chair

COMMITTEE ON PUBLIC SAFETY Rep. Henry J.C. Aquino, Chair Rep. Kaniela Ing, Vice Chair

March 14, 2013

Re: SB310 Relating Mental Health Treatment

In Opposition

Dear Rep. Belatti, Rep. Morikawa, Rep. Aquino, Rep. Ing and members of the Committees:

I am aware that the original law was flawed and that this bill is intended to replace it, and that those who support the bill are acting with compassion and concern. Nevertheless, I believe that this bill is also seriously flawed on civil liberties grounds, and so I oppose it.

This bill permits the involuntary commitment of individuals who are **not** a danger to themselves or others, and who have the same civil liberties we all enjoy. The process of petition, taking into custody and commitment to the state hospital described in this bill is easily subject to abuse by family members or others, and the affected person, perhaps more vulnerable than many others, will be unable to mount a defense against those who would take them away.

The person who is the object of a petition is a **fully emancipated adult--not a child over whom parents have control** with no responsibilities to live life as a parent dictates. The person may also be an ex-spouse or have other relationship to the petitioner, who could abuse a state law to impose their view of a proper lifestyle on the object of the petition.

Note that a person who is made to appear in court has to bear the cost of hiring an attorney and paying for experts (e.g., a private psychiatrist). The provision for a court-appointed public defender does not alleviate this, because a person has a right to be represented by an attorney of their choice. If the court finds that the petition is not adequate, there is no provision for the person filing the petition to be made to pay all attorneys fees and court costs. So even in a contrived, malicious or frivolous situation, the person who is the object of the petition is damaged.

In the case of a homeless person, the individual would almost certainly be unable to afford their own experts as this bill purports to allow. There is also the possibility that this bill could form the basis of "sweeps" designed to remove homeless people from the streets.

There are also problems with medical privacy. This bill would appear to bring protected medical information into the public record.

While the stated intent of this bill is to prevent criminalization of mental illness, it is hard to see what the difference is. Note that while the object of the petition has a right to hire an attorney, alternatively, the court may appoint a public defender. How is this different from a criminal case? **Public defenders are experienced in criminal law, not in complex mental health issues.** The object of the petition is still subject to physical detention in this draft of the bill. In other words, **they are deprived of liberty and freedom of motion as in a criminal case**. There will also be a public record of the proceeding with the person's name on it, and the person may end up on federal lists of those with mental health issues.

If a person with mental illness has difficulty advocating for him-or herself, how will they fare in court, with **an inexperienced defense attorney and unable to afford their own expert witness to counter the testimony of state-paid experts**? If they are allegedly unable to make informed decisions about their treatment, then they are being coerced without question: how can they suddenly be expected to make informed decisions about their options when in court?

Finally, unless I'm missing something, the text does not require that the paraprofessionals or mental health professionals who may petition (the definition is vague) have experience with the treatment history of the individual. This would appear to permit shopping around for sympathetic persons rather than those acting on the basis of evidence.

Accordingly, my concern lies with the individuals who could find themselves swept into the legal system almost exactly as though they were criminals, but are disadvantaged by their situation from adequately defending themselves in court.

I recommend that the Committees put more thought into this bill and the consequences of passage. If the law it seeks to replace is defective, perhaps repeal is the best course.

Larry Geller

TESTIMONY IN SUPPORT OF SB 310 SD2: RELATING TO MENTAL HEALTH

TO: Health Committee Chair, Rep. Della Au Belatti Vice Chair Rep. Dee Morikawa Members of the House Committee on Health

> Public Safety Committee Chair, Henry Aquino Vice Chair Rep. Kaniela Ing Members of the House Committee on Public Safety

FROM: Janet L. Pappas

Hearing: Friday 3/15/2013; 10:00 a.m. CR 329

I support SB 310 which is meant to promote better access to mental health treatment for many individuals who are so disabled by their mental illness that they are unable to cognitively accept their diagnosis of mental illness or to continue on prescribed treatment. This bill affects those persons who have demonstrated a history of nonadherence to treatment that has resulted in repeated emergency room visits, hospitalization or jail time.

Please pass this bill into law to facilitate access to treatment. Many of these potential subjects of assisted community treatment are homeless because of their mental illness.

Thank you for the opportunity to testify in support of bill SB310.





From:	mailinglist@capitol.hawaii.gov
Sent:	Tuesday, March 12, 2013 5:18 PM
То:	HLTtestimony
Cc:	Gfarstrup@msn.com
Subject:	*Submitted testimony for SB310 on Mar 15, 2013 10:00AM*

Follow Up Flag:Follow upFlag Status:Flagged

<u>SB310</u>

Submitted on: 3/12/2013 Testimony for HLT/PBS on Mar 15, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Greg & Pat Farstrup	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing , improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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TESTIMONY IN SUPPORT OF SB 310 SD2: RELATING TO MENTAL HEALTH

TO: Health Committee Chair, Rep. Della Au Belatti Vice Chair Rep. Dee Morikawa Members of the House Committee on Health

> Public Safety Committee Chair, Henry Aquino Vice Chair Rep. Kaniela Ing Members of the House Committee on Public Safety

FROM: Lansdale Lau, M.D.

Hearing: Friday 3/15/2013; 10:00 a.m. CR 329

I am writing in support of SB 310 which is meant to promote better access to mental health treatment for many individuals who are so disabled by their mental illness that they are unable to cognitively accept their diagnosis of mental illness or to continue on prescribed treatment. This bill affects those persons who have demonstrated a history of non-adherence to treatment that has resulted in repeated emergency room visits, hospitalization or jail time.

I have volunteered to canvass the homeless in the recent 1001 Homes drive and the Homeless Census. I was impressed by the large number of homeless with severe mental illness. I spoke at length with a man with severe depression who was not taking his medications and was not keeping his doctors appointments. I spoke with a woman living under a tarp on Nimitz Hwy. with severe personality disorder not under medical care because of anger issues with her outreach worker and the medical system in general. I attempted to talk to a young man wrapped in a garbage bag to keep the rain off trying to get into the HIS facility but who could not speak to me or plead his case because of severe schizophrenia. These were heartbreaking examples of human beings who could not cope with their illness, cannot function in society in their present state, and who are therefore, homeless and out on the streets.

Please pass this bill into law to facilitate access to treatment for these people desperately in need of help, and the many others like them.

Thank you for the opportunity to testify in support of this SB310.





From:	mailinglist@capitol.hawaii.gov
Sent:	Tuesday, March 12, 2013 8:57 PM
To:	HLTtestimony
Cc:	mkemble@hawaii.rr.com
Subject:	Submitted testimony for SB310 on Mar 15, 2013 10:00AM
Follow Up Flag:	Follow up

Flag Status: Flagged

SB310

Submitted on: 3/12/2013 Testimony for HLT/PBS on Mar 15, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Marcia Kemble	Individual	Support	No

Comments: I am writing to express strong support for SB 310. This bill relating to mental health treatment is a well-crafted bill that will help individuals who are so disabled by their mental illness that they are unable to accept help. I believe this bill includes strong safeguards and will really provide help to people who desperately need it but will not seek it out on their own. All of us have seen pathetic examples on the streets of severely mentally ill people who now are getting no help and so obviously need it. Some of them are "dying with their rights on." Please pass this bill into law to facilitate access to treatment. Thank you for your consideration of my comments. Aloha, Marcia Kemble Makiki resident

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From:	Robert A. Collesano [robert@mauimentalhealth.org]
Sent:	Wednesday, March 13, 2013 11:17 AM
То:	HLTtestimony; pbstestimony
Subject:	I support Senate Bill 310 which proposes Assisted Community Treatment

Right now, in order to receive inpatient mental health treatment at Hawaii State Hospital, a person must first commit a crime.

Senate Bill 310 will help persons with severe mental illness receive help in the community without resorting to crime in order to get mental health care.

This bill will help the most severely mentally ill individuals who cycle between the streets, the E.R., hospital, and jail, often lost in their own psychotic reality, behaving in bizarre and unpredictable ways, and living in extremely degraded circumstances, oblivious about the reality of their condition. These are the most vulnerable members of our community.

This bill proposes Assisted Community Treatment, whereby individuals would be ordered by Family Court to receive treatment in the community.

It is better to treat people, in the community, outside of the criminal justice system.

- There is no forced medication.
- This bill includes strict eligibility criteria, mandates that the person has an attorney, and lays out a specific treatment plans.

In New York, which has a similar law, 75% of the consumers said the Assisted Community Treatment order helped them gain control over their lives and 81 percent said that it helped them to get and stay well.

The bill is meant to promote better access to mental health treatment for many individuals who are so disabled by their mental illness that they are unable to cognitively accept their diagnosis of mental illness or to continue on prescribed treatment.

Mahalo for your support of SB 310. This bill will enhance the existing law to provide Assisted Community Treatment for the most severely mentally ill in Hawaii.

Aloha,

Robert Collesano, CSAC on Maui No. Kihei Resident Working in Wailuku

×	To help protect your privacy, Outdook prevented automatic download of this picture from the Internet.	

Robert A. Collesano, CSAC, CCJS, ICADC Director Mental Health America On Maui

Robert@MauiMentalHealth.org 808-242-6461 Fact Sheet

From:	mailinglist@capitol.hawaii.gov
Sent:	Tuesday, March 12, 2013 6:38 PM
To:	HLTtestimony
Cc:	scyboron@yahoo.com
Subject:	Submitted testimony for SB310 on Mar 15, 2013 10:00AM
Follow Up Flag:	Follow up

Flag Status: Flagged

SB310

Submitted on: 3/12/2013 Testimony for HLT/PBS on Mar 15, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Sheila Cyboron	Individual	Support	No

Comments: This bill represents an important step in the right direction to address the needs of this underserved, hard-to-serve, population.

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TESTIMONY IN SUPPORT OF SB 310 SD2: RELATING TO MENTAL HEALTH

TO: Health Committee Chair, Rep. Della Au Belatti Vice Chair Rep. Dee Morikawa Members of the House Committee on Health

> Public Safety Committee Chair, Henry Aquino Vice Chair Rep. Kaniela Ing Members of the House Committee on Public Safety

FROM: Marc R. Alexander

Hearing: Friday 3/15/2013; 10:00 a.m. CR 329

Honorable Chairs Au Belatti and Aquino and members of the House Committees on Health and Public Safety.

Thank you for hearing this important legislative proposal and for the opportunity to submit written testimony. I strongly support SB 310, Relating to Mental Health. During 2011, I served as Governor Abercrombie's Coordinator on Homelessness. Prior to that appointment I served for 25 years as a Roman Catholic priest with a longstanding commitment to public policy issues including housing and homelessness. At present I serve as Director of Community Relations and Development for IHS, The Institute for Human Services, Inc. I speak today, however, as a private citizen.

SB 310 is critically important legislation because it seeks to help those who can no longer help themselves due to chronic mental illness. Many of those who are chronically homeless suffer from chronic mental illness so severe that they are unable to realize the need for treatment and the benefits it offers. The result is that they end up living on the streets in very horrific conditions and unable to function on even a most basic level. These people are our neighbors, our brothers and sisters, who are crying out for help in their helplessness. They are not acting out of free choice but from the effects of their mental illness.

The present laws governing involuntary community mental health treatment are ineffective and outdated. They result in persons who are mentally ill being criminalized repeatedly, their mental health not being improved, and waste and frustration of the limited resources of law enforcement and healthcare because of the revolving door between the streets, jails, healthcare and courts.

This legislation would increase access to mental health treatment for those so disabled by their mental illness that they are unable to recognize their illness and accept appropriate treatment. Through a court ordered community treatment protocol, with appropriate safeguards, our community would be able help to those in this terrible situation.

Please support this legislation in order to bring real help and hope to some of the most needy and desperate in our community, those who are homeless and severely mentally ill.

Mahalo for your kind consideration and for your service to our community.

David Swatland 3356 Francis St., Honolulu, HI 96815 dswatland@gmail.com Senate District 10/House District 19

13 March 2013

The Honorable Della Au Belatti, Chair, House Committee on Health, and The Honorable Henry Aquino, Chair, House Committee on Public Safety Hawai'i State Capitol 415 South Beretania St., Honolulu HI 96813

Dear Chairman Au Belatti and Chairman Aquino,

I am writing in support of HB 310, SD2 that establishes an assisted community treatment program and makes several other substantive changes to Hawai'i Revised Statutes (HRS) Section 334. Passage of this bill will provide mental health professionals, law enforcement authorities, and most importantly, family members, valuable tools to help treat and care for persons with mental illness.

One of the primary symptoms of serious mental illness is the firm and unshakeable conviction that there is nothing wrong with you. This makes it incredibly difficult to treat and care for adult mental health consumers, who under the current law in most states, must consent to treatment. This is the law in California where my son, who suffers from schizophrenia, recently spent a year in jail for knocking a cell phone out of someone's hand. We had been trying to help him for months, pleading with social workers, facility staff and the police to intervene before something bad happened, but were repeatedly told that unless he was "a danger to himself or others", mental health professionals and law enforcement authorities would not take any action, and the family would not be provided any information.

As you well know, "danger to him or herself or others" is often so narrowly defined in these cases that unless the mentally ill person has a gun to his or her head, or to someone else's, the person is not "a danger". This interpretation is not productive for the mentally ill person or for society, as the person often ends up in jail, where the illness goes untreated and the person is released in worse condition than he or she went in. If you had a highly infectious disease that could hurt you and infect others, wouldn't you want someone to treat you, even if you didn't think you were ill?

Had my son been in Hawaii and the revised HRS Section 334 been in effect, we would at least have had an opportunity to help him <u>before</u> he got into trouble with the law. Passage of HB 310 and its companion SB 991 provides a mechanism for early intervention, establishes a clear framework for cooperative treatment and care, and will likely keep a significant number of mentally ill people out of jail, while ensuring the constitutional safeguards necessary to prevent a patient's civil rights from being violated.

As a society, we have a responsibility to care for those too ill to care for themselves - it is our kuleana. Your support for passage of these bills will help us to do that. Please vote yes on this bill. Thank you for the opportunity to testify.

Sincerely Advantand David Swatland

Testimony in Support of SB310

Friday, March 15, 2013 10:00 a.m. Conference Room 329 House Committees on Health and on Public Safety

Aloha Committee Chairs and Members of the Committees.

My name is Philip I. Enomoto and I am a volunteer- registered-nurse with the National Alliance on Mental Illness / Hawaii and I have a family member stricken with a grave mental illness. As an R.N. I currently faciliate support groups and am an instructor in the NAMI Family to Family Educational Program to which I welcome all of you to visit at-will as time permits so that you might be able to meet the real faces , real people and real families like yours, who have been affected by a grave mental illness in their family.

We care for families and some comprise a population of the most severely mentally ill individuals who cycle between the streets, the E.R., hospital and jail, often lost in their own psychotic un-reality. Often, behaving in bizarre and unpredictable ways resulting in homelessness.

As a former EMT / Mobile Intensive Care Technician / Paramedic with the City and County of Honolulu Emergency Medical Services Division I have experienced the so called "revolving door cycle" of inffective care for many mentally ill persons who are so ill that they cannot cognitively accept their diagnosis and / or continue with their own prescribed treatment. Therefore, I have come to the conclusion that SB310 will be a move in the right direction to the following:

- Mobilize health care directions for the severly mentally ill in Hawaii for those unable to help themselves.
- Help to alleviate the seemingly "occult" reasons for many who suffer from homelessness.
- Help to alleviate misdemeanor crimes and thereby releasing the officers of the Honolulu Police Department from Hawaii's citizenry who call "911" as a last resort for ill family members who i.e. commit no criminal offense but who rather exhibit disorderly conduct such as "loud obnoxious behaviors or "untidiness". ("911" calls includes those calls made to the Emergency Medical Services Division). The immediate desired effect would be that very costly services will be redirected towards genuine criminal occurrences, truly acute medical emergencies and more effective prehospital care for victims of casualty and trauma.
- Lastly, to help to make a Hawaii a great destination place for travel and recreation thereby helping to improve our local economy.

Mahalo for your support of SB310. This bill will enhance the existing law to provide Assisted Community Treatment for the most severely mentally ill people in Hawaii.

Aloha.

Philip I. Enomoto R.N. Volunteer / NAMI Hawaii Tom W. Leland, M.D. 1487 Hiikala Pl. #13 Honolulu, HI 96816

TESTIMONY IN SUPPORT OF SB 310 SD2: RELATING TO MENTAL HEALTH

TO: Health Committee Chair, Rep. Della Au Belatti Vice Chair Rep. Dee Morikawa Members of the House Committee on Health

> Public Safety Committee Chair, Henry Aquino Vice Chair Rep. Kaniela Ing Members of the House Committee on Public Safety

FROM: Tom W. Leland, M.D.

Hearing: Friday 3/15/2013; 10:00 a.m. CR 329

I am writing in support of SB 310 which is meant to promote better access to mental health treatment for many individuals who are so disabled by their mental illness that they are unable to cognitively accept their diagnosis of mental illness or to continue on prescribed treatment. This bill affects those persons who have demonstrated a history of non-adherence to treatment that has resulted in repeated emergency room visits, hospitalization or jail time.

Please pass this bill into law to facilitate access to treatment. Many of these potential subjects of assisted community treatment are homeless because of their mental illness.

Thank you for the opportunity to testify in support of this SB310.

Respectfully submitted,

Tom W. Leland, M.D.

Jon Lland mos

From: Sent:	Marion Poirier [mpoirier808@gmail.com] Wednesday, March 13, 2013 3:13 PM
To:	HLTtestimony
Subject:	S.B. 310 SD2 for Friday, March 15, 2013 House Committees Health and Public Safety

FROM: Marion Poirier, M.A., R.N. Health Care Consultant Member, Mental Health Task Force Member, Hawaii Health Authority

TO: HOUSE HEALTH CHAIR BELATTI AND HOUSE PUBLIC SAFETY CHAIR AQUINO:

TESTIMONY IN SUPPORT OF S.B. 310 SD2 For Joint HEaring on Friday, March 15, 2013 at 10 A.M. In Rm. 329

My name is Marion Poirier, M.A., R.N. I serve on the Mental Health Task Force that worked on this proposed legislation. It has been a challenging task to create a bill that is intended to be in the best interest of a person who has chronic serious mental illness. This bill does its best to honor and respect the person, while providing common sense remedies. Public safety and family caregivers need attention as well.

I was a former Executive Director of NAMI HAWAII for 12 years, and dealt with the ramifications of no effective law in this regard over and over again. We need a new law, and S.B. 310 SD2 has the needed substance to improve the ramifications of the topic of mental illness in Hawaii.

Thank you for the opportunity to provide this supportive testimony, and I would be happy to be of appropriate assistance.

Marion Poirier <u>mpoirier808@gmail.com</u> From my iPad

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 13, 2013 9:30 PM
То:	HLTtestimony
Cc:	Arianaeunji@gmail.com
Subject:	Submitted testimony for SB310 on Mar 15, 2013 10:00AM

SB310

Submitted on: 3/13/2013 Testimony for HLT/PBS on Mar 15, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Ariana Lania	Individual	Support	No

Comments: I support this bill because I believe we need a change in the current statute for involuntary community treatment for the mentally ill. So many of them continue to go in and out of emergency rooms and jail. We need to put an end to this costly and inefficient process. Everyone will benefit from this bill. The state saves money it would otherwise spend on costly emergency room visits, the police would not have to respond to the same homeless person so many times a month, the community would look better without the multitude of homeless people on the streets and most importantly the homeless people will receive the help they need.

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From:	Moll
Sent:	Thu
То:	HLT
Cc:	pbst
Subject:	Sen

folly Mayher [molly_mayher@yahoo.com] hursday, March 14, 2013 7:33 AM ILTtestimony bstestimony enate Bill 310

I *urge* you to support this bill. My daughter suffers from mental illness, and I am keenly aware of the problems of our street people. *Please help!*

Sincerely, Madeleine Mayher 67-255B Kahaone Loop Waialua, HI 96791 637-6530 To: House Committees on Health and on Public Safety

From: Joanne Lundstrom, ACSW, MPH (Phone 808-284-0605)

Subject: Testimony in Support of SB310 Date: March 15, 2013

Honorable Chairs, members of the House Committees on Health and on Public Safety

As a long time provider of, and advocate for timely and relevant services for people with serious mental illness, I am urging your attention to, and passage of SB310, known as **Assisted Community Treatment.**

The unfortunate reality for many people who do not get intervention services for psychiatric symptoms on a timely basis, is that the mental illness overtakes lives, placing those affected at high risk of physical and mental deterioration, social alienation, homelessness, public nuisance activities and a cycling through punitive criminal justice systems with little sensitivity to people with mental illness. SB310 would allow Family Court to intervene on behalf of estranged, vulnerable people who do not recognize, or reject treatment interventions.

That said, Assisted Community Treatment guidelines must be in place that recognize and accord civil liberties, while protecting people whose lives may be at risk because of the severity of their untreated illness. As importantly, **clinical and psychosocial** rehabilitation services in the community must be available to ensure the benefits of recovery continue beyond the court ordered clinical interventions.

Your support of SB 310 is appreciated. Mahalo for your attention to this testimony.

Joanne Lundstrom

From:	mailinglist@capitol.hawaii.gov
Sent:	Thursday, March 14, 2013 8:46 AM
То:	HLTtestimony
Cc:	alohamau@gmail.com
Subject:	Submitted testimony for SB310 on Mar 15, 2013 10:00AM

SB310

Submitted on: 3/14/2013 Testimony for HLT/PBS on Mar 15, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
LYNNETTE L MAU	Individual	Support	No

Comments: Dear Hawai'i Senate Committee: I am in total support of SB310. I am Lynnette L Mau mother of Adam Mau-Goffredo who has serious mental illness and under court order is in the HSH under 'forced treatment'-as his trail is still proceeding until and if he is ' fit to proceed to stand trail' from Paranoia/Schizophrenia type 2. I am in total support of SB310 and those compassionate hearts who feel deep and sincere transformation of the archaic ways on how we view mistreat and place blame & shame towards these human beings who have this worse disease we cannot even imagine what it can be like-a living hell-no one in their right mind would ask for. Had there been more supportive services in this state of Aloha and Hawai'l for our families individuals loved ones and each human being needing help due to the organic/mental illness of brain and its symptoms- we would not have the tragedies that continue to happen. yet we keep waiting and disregarding the signs/continued tragedies whether suicides or senseless harm to others and death rather then need for URGENT attention and transformation desparate support needed in this area. it is so sad. It definitely is time for change from the heart..from each human being who cannot even imagine what this disease of the brain can be like to live in anthers world of illusions delusions hallucinations and dark voices. Yes, we all need heartfelt support and inner strength which is happening with this SB310. and to come together as human beings and unveil the compassion for our community our state our families and loved ones and each human being who cannot help themself. they do not belong in prison. they already are imprisoned with their hallucinations delusions- let us not be caught in ours thinking we are better and they are less but see we are all equal and as equal human beings maintain that dignity humility and honor to maintain equal human rights to all beings regardless of their physical mental spiritual disposition. Let us remember, 'the individual is NOT the illness.' for i have found those with mental illness have the kindest sweetest hearts..and this is true..they truly are not violent beings.. it is the symptoms and result of the illness they never asked for..who would? Mahalo Nui Loa to all these dedicated and committed and compassionate beings who are Pono with their soul and who are making the difference in being human rather than choosing anything else. This SB310 can make the difference in many lives and for the safety of the whole State of Aloha this transformation for those with this unfortunate disabiliity needs to happen from the heart..let us remember during these times of hardship for everyone - perhaps these people are reminding us the true meaning of what it is to be human. May you find the peace in your heart and dance with it and share it with others less fortunate..for we could be in their shoes one day.. Me Aloha Ke Akua, Lynnette L Mau alohamau@gmail.com

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convening of the public hearing.

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Testimony on SB310.sd2 Relating to Community Assisted Treatment House of Representatives Committee on Health and Public Safety March 15, 2013, 10:00 a.m.

From: Marcia Hamilton

Aloha my name is Marcia Hamilton and I am testifying in support of SB310 as revised. I work with people who are homeless and this measure would provide a much needed mechanism for those with untreated severe mental illness to be treated, stabilized and housed. To be homeless with untreated mental illness is a horrible existence as basic physical, social and emotional needs go unmet and the person becomes isolated and sinks even further into their illness. All too often this results in a lonely and needless death.

At this time the police, emergency rooms and hospitals are hesitant to work with such individuals as their efforts so often seem wasted when the person quickly regresses once they are put back on the street. There are homeless service providers who are trying to work with this population to get them into supportive housing, but without treatment it is hard for them to comply with basic housing rules. On the other hand, I have observed the life changing improvements that come with appropriate treatment and supportive housing and I have seen people return to positive and nurturing relationships and behaviors once they are stabilized.

Please pass SB310 so that people that are homeless with severe mental illness can be helped to gain the stability, housing and positive relationships that everyone deserves.

Mahalo, Marcia Hamilton