

5230

Testimony before the Human Services Committee

**February 5, 2009
Support for HB 5230**

Good afternoon Senator Doyle, Representative Walker and members of the Human Services Committee. My name is Cindy Walsh and I am here to testify in support of HB 5230 AN ACT CONCERNING A PILOT PROGRAM TO PROVIDE HOUSING AND SERVICES FOR TRANSITIONING YOUNG ADULTS.

My son is 24 and was diagnosed with bipolar disorder II about 2 years ago after many rounds with the mental health system. As those of us involved in it know, it is a broken system.. I will tell you that I am a health care provider so have some better insights than a lay person, but I provide this information as the parent of a child with mental illness. I will provide some examples of how bad the system can be and why I think the proposed pilot program will benefit young adults with mental illnesses.

Two years ago this week, my husband and I took him to the Emergency Room of a large tertiary hospital when he was clearly psychotic to have him admitted. He was suicidal with a plan and wanted to stab his father. He told the nurse these things & we were moved to the ER Psychiatric Unit. His nurse told us that she was certain that he would be admitted and that when she hears suicide and homicide in the same sentence it's an automatic admission. Two to three hours later when we had been sitting with him in the ER and he had had time to calm and think about admission the clinician came to do an evaluation. He was able to convince her that this was all very manageable in outpatient treatment and he really didn't need to be admitted. All the information had been documented when he presented in the psych unit, but she somehow did not feel it was urgent or warranted admission. We fought to have him admitted and he was furious with us, but that admission started the wheels moving for him to be moved onto/into recovery with a 5 week hospitalization. If we were not with him and able to advocate strongly for him, he would have been sent home with who knows what outcome. For young adults in crisis who don't have parent advocates, HB 5230 would ensure that they have trusting relationships with long-term staff who can fill this role and keep them safe. They would know what treatment environment is best for the individual and which is detrimental, like I believed my home would be for my son.

Why do evaluations, therapy, groups, all stop on weekends? If someone with a mental illness is admitted to the hospital on a Friday, they are unlikely to have any kind of evaluation, plan or treatment other than medication during the weekend. It is time spent sitting, no activities, interactions or routine that is so important. A disruption of services and treatment can wreak havoc on the life of a young adult in crisis. This kind of disruption is a very poor use of the hospitalization and hurts the patient. It is also a poor use of insurance. Hospitals provide observation and safety, but nothing therapeutic. HB 5230 creates an environment that is designed to reduce hospitalizations and provide age-appropriate interdisciplinary services and committed staff support, which stabilizes their living environment and promotes their recovery. It would provide them with critical experiences that other young adults in the community have as they transition into adulthood. We know that hospitalization takes away freedoms and is very stressful—chronic crisis care is the costly alternative to the stability provided by the proposed pilot program.

I would like to see supported education more readily available and so that more people are aware of it. Supported education is, and I quote "for individuals with severe psychiatric disabilities for whom postsecondary education has not traditionally occurred or for people for whom secondary education has been interrupted or intermittent as a result of a severe psychiatric disability, and who, because of their handicap, need ongoing support services to be successful in the education environment." If young people with mental illness are able to manage meds, appointments, classes and probably

work, they may need to have a fall back. Young adults need a different array of services than adults or children do. This is the basis for HB 5230—his bill recognizes that all young adults, with or without mental illnesses, have unique needs. It may be hard to work the information in a 'socially acceptable' way into college catalogues, for instances, but the information should be out there so it can be easily found and accessed by students.

What roles do families play? Love, support, transportation, advocacy, love. Sometimes being told 'no we can't tell you that' when we're the only ones who can help because our loved one is unable to help themselves because of their illness. We need to be kept in the loop.

What information do policy makers need? They need to know that our children/parents/neighbors/friends with mental illnesses are people. Young adults with mental illnesses have a disease that is not so different from diabetes; it needs to be controlled with medication and monitored with doctor visits. Sometimes they crash and need to be evaluated and medications adjusted, just like someone with diabetes. They are people who have lives they want to live without stigma. They want health insurance just like everyone else with out a cap because it is for behavioral health. They were once our sweet little babies and they were dealt a lousy hand. I want policy makers to look at their children and think about them having a chronic, incurable, possibly fatal disease that can be managed with appropriate care. And make sure that they get that care. We want the policy makers to put themselves in our shoes, to live this disease on a daily basis and see how important equity is. HB 5230 could help close the gap for inequities between physical and mental health care.

As an addition, my son is doing remarkably well thanks to his hard work, a wonderful physician who listens and prescribes medication, a therapist he has connected with, and our ability to advocate and be there for him when needed. He works, goes to school, speaks regularly at AA meetings, has friends and is in a supportive relationship. He luckily is living his life, not without bumps in the road, but he's doing it. I encourage you to support HB 5230 so that young adults transitioning between two mental health systems that, at times, will fail them, can have the same opportunities for recovery that my son has.

Thank you for your time. I will be happy to take any questions.