

March 11, 2015

To: Senator Chip Shields
Representative Lew Fredrick
Members of the House Committee on Health Care

RE: HB 2948, 2022, 2023

I am writing to urge you to support these three bills so that families who have children with complex mental health conditions are supported in meeting their needs, most notably when they experience acute crises.

I am Nona King, a parent and advocate for my children, Richard and Kat King, 17 year old twins who have been for the last two years and currently in the Multnomah County mental health system of care. They have been diagnosed with anorexia nervosa, severe social anxiety, clinical depression, self-harm and suicidal ideation.

Our daughter, Kat, was suicidal and the doctor called the hospital but was unable to procure a bed. We had to take her home and keep her on suicide watch. We had never experienced anything like this before, so we had to learn fast. We were on suicide watch for 2 weeks before she was admitted to the hospital. 4 days later she was put into an eating disorder clinic.

During the time she was in the hospital, after reading the doctor's book and learning more about eating disorders, it was apparent to me that Richard also had anorexia nervosa, (the diagnosis given to Kat). He went through intake and was put directly into the clinic.

After they reached their weight goal, our insurance refused to keep the twins in the clinic anymore and after several appeals, which were denied, they were forced into another outpatient clinic. Kat tried to take her life and she ended up in a children's mental health psych unit for a week. During that time, the psychiatrist there changed her meds and when she was released she became violent.

She was placed in the second eating disorder clinic where she tore open her flesh with her bare hands and I had to take her to emergency. It was not considered "life threatening", so I had to take her home. I told the emergency doctor about the violence, so he changed her medicine, but that night I slept with my bedroom door locked. Kat didn't go back to the clinic.

It was several weeks later that Catholic Community Services stepped in. That lasted more than twice the allotted time usually allowed and had to close, even though they still needed care.

During that time I attended NAMI classes and began learning how to advocate and keep good records for each of the kids. Nevertheless, my advocacy has been long and arduous. The twins have been in several different programs. Kat went to emergency numerous times with self-inflicting wounds but sent home each time as they were not considered "life threatening."

I have advocated for many services which have not happened because of bureaucracy, red tape, lack of understanding the right verbiage I needed to get doors to open, lack of funding, insurance that is locked into a certain care plan, resistance from care providers, etc.

My son is working with a counselor that always defers to Richard and asks him, "Do you want your Mom to have that info, or know that info, etc., instead if saying, "As a caring support and member of the team your mother would like to have/know this information..."

What we really need are *better treatment care plans and access to information and services that will better help us take care of our children.*

I have hopes for my children like most parents have: that they may live their lives with opportunities to discover what they will be when they grow up and be supported throughout the remainder of their adolescent years in meeting their potential for a good life.

When mental health care has barriers at every turn, it is hard for us to be successful in meeting our children's needs. We want expert health care providers that help us learn about our children's conditions and guide the design of a treatment plan that evolves as they grow up and new needs arise. We want those providers to see us as the most important members of our children's treatment team and who keep critical communication channels open, especially when our kids are most fragile and at risk.

When we experience a crisis that leads us to the hospital, we want services and care plans that are going to give us tools to work with instead of sending us home with nothing but a reminder to call the crisis line if it happens again!

For all of these reasons, I urge you to do everything in your power to move these bills and other prospective solutions forward so that we may all have an improved mental health care system that meets our children's and our families' needs for all Oregonians.

Sincerely,

Nona D King
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