

Testimony against HB2948
Clay Peterson, Associate Director of ROCC
3/11/2015

Hello Representatives, thank you for the opportunity to address my concerns with HB 2948 to the human services committee.

My name is Clay Peterson, and I am currently Associate Director at the Recovery Outreach Community Center also known as ROCC. ROCC is a nonprofit mental health drop in center here in Salem, it is a peer run organization focused on ensuring that there is a place for people with mental health and addiction issues to go and talk with peers to build connections and live the best life possible while in recovery. Through the community built in this environment peers gain autonomy and control over their life, and share life experiences and tips. The peer support movement has been around for decades, but has really been embraced as a way to provide cost effective care that empowers peers and leads to a better overall life. The acceptance of the peer support model can be seen in the traditional healthcare system which now is using peer support techniques in hospitals. Today peer support centers like ROCC are increasingly funded by medicaid and other government funding because peer support has been shown to be effective at stepping people down from higher levels of care to lower levels of care. A long speech about the benefits of peer support is not why we are here however, it is instead to tell you about how while well intentioned, bills like HB2948 undermine the peer movement and peers currently in mental health and addiction recovery.

While considering this bill, you might think it reduces red tape and allows for more compassionate care, but for many people this bill puts their independence, privacy, and even safety at risk.

I don't know your personal histories or backgrounds, but I came from a supportive, financially stable family where I know that even as an adult I have people that I can rely on and are willing and able to support me. Not everyone has that type of stability. In the community regularly using mental health services I have heard people with this type of background referred to as 'normies'. This is because for so many people in recovery from PTSD, trauma, anxiety, depression, and a wide variety of mental health issues do not have that stable support network from their family so many of us take for granted.

This bill would set a new default rule that brings the family into medical decisions for people in times of need. If I were to have an episode that required hospitalization, in my circumstance, and I suspect many of yours, the fact that my family could be part of the decision making and would know where I am brings me great comfort. For many of the people who use our services this however could be catastrophic. For a woman who has a spouse out to get her, this is not comforting, for someone who has escaped an abusive parent or toxic codependent relationship with family members, this is not comforting. A doctor who just met someone can not know who is a positive or negative influence on someones life, if they could be sure, they wouldn't need protection from liability.

I know you think these are the exceptions to the rule, and we need to make the law work for everyone. You could say people in these situations can sign an advanced directive to ensure their information is not shared. This however assumes people know that they are in a situation like this in advance. This assumes people know how to set up this kind of arrangement in advance. This assumes that people will have the resources to figure out how to create and file this type of document.

Personally, I have much more faith in the ability of someone with that supportive family to be able to find the time, resources, and knowledge to fill out a form granting explicit prior consent to have the information released than hoping that someone in a confusing situation will proactively document that situation down. Many times people are in denial that they are even in a toxic relationship or don't know until a health emergency has occurred. It is essential that the default rule remain keeping peoples medical information private and only released upon their consent.

Whatever the default rule, bad things will happen. I encourage you to protect people's independence and privacy. In most cases the current rule is not a significant block on information, and they will be informed in hours once consent is given. While my heart goes out to those families for the hours of fear and confusion they might have, and goes out more so in situations where consent is not given and perhaps should be, I think this situation is far preferable to pulling people against their will back into toxic relationships which causes steps backward in their recovery. People work very hard to gain autonomy and fight hard to get out of toxic and dangerous relationships by taking control of their healthcare decisions, and building an independent life. If you take that away, it is not a step forward for the way we deal with mental health in Oregon.