

Chair, Vice Chairs, and Members of the Committee:

Disability Rights Oregon submits this testimony in opposition to SB 187. This bill makes it easier to civilly commit individuals who may be able to receive care in the community using a definition of dangerousness that is out of step with current clinical understanding of assessing risk.

<u>The Problem</u>: As written, SB 187 would inappropriately and unnecessarily increase the number of people civilly committed in Oregon.

Civil commitment is one of the most invasive infringements that the state can make upon individual rights. While awaiting a civil commitment hearing, a person may be held for days or weeks in a spare, windowless room in the emergency department. Then, if they are admitted to inpatient treatment, the person may be sent across the state – far from family and other support systems in the community. Furthermore, an abrupt confinement like civil commitment can result in the person losing their job, their housing, their service animal or pet, or temporary custody of children. And people who are committed may be forcibly medicated or restrained. Producing standards that make it easier to disrupt individuals' lives in this way serves neither the individuals nor the community.

Setting aside the individual rights concerns, expanding civil commitment will not improve conditions for people with disabilities unless the state creates adequate housing, residential services and community-based behavioral healthcare to support people once they are discharged from commitment. Additionally, until the state addresses the ongoing aid and assist crisis, there are few available beds for civilly committed patients.

SB 187 creates a thirty-day timeframe for assessing potential dangerousness to self or others. Predicting future risk, however, is not clinical best practice. A review of studies related to predicting psychiatric clinical outcomes explained that the "major limitation of predictors based on diagnosis and clinical features is dependence on clinical assessments that may be inaccurate, imprecise, or unstable over time."¹ Uncertainty is inevitably part of the civil commitment process but SB 187 adds additional uncertainty into the equation by extending the amount of time that courts are forecasting an individual's dangerousness.

¹ McMahon, *Prediction of treatment outcomes in psychiatry—where do we stand?*, Dialogues in Clinical Neuroscience (Dec. 2014) available at https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4336916/

<u>The Solution</u>: Invest in community-based mental health services and support systems.

Commitment should only be sought as a last resort. Rather than making it easier to commit individuals in need of mental health services, Oregon should invest in a robust continuum of care to support people in the least restrictive environment possible.

About Disability Rights Oregon

Disability Rights Oregon is a statewide nonprofit that upholds the civil rights of 950,000 people with disabilities in Oregon to live, work, and engage in the community. Disability Rights Oregon serves as a watchdog as we work to transform systems, policies, and practices to give more people the opportunity to reach their full potential. Since 1977, the organization has served as Oregon's federally authorized and mandated Protection & Advocacy System. Disability Rights Oregon is committed to ensuring the civil rights of all people are protected and enforced.