Karena Bayruns 3625 SE 16th Avenue Portland, OR 97202 February 17, 2021

Oregon House of Representatives Behavioral Health Committee 900 Court Street NE Salem, OR 97301

Re: Testimony is support of HB 2980 to establish peer respites in Oregon

Dear Behavioral Health Committee Members:

I strongly urge you to support and advocate for HB 2980 to establish peer respites in Oregon. Oregon really needs peer respites to fill gaps in the currently inadequate array of mental health services and supports in this state.

I am enthusiastic about the peer respite model that has been operating in 14 different state systems, because I understand the enormous value of peer support and peer-run organizations. I started to make great progress in managing my own Depression and Anxiety illnesses when I worked at one of the programs in a large peer-run mental health agency when I was living in Philadelphia, Pennsylvania. Encouragement, inspiration and accountability for self-care were far more compelling to me when modeled by my co-worker peers who had overcome mental health challenges even beyond what I had experienced. Peer support inspires personal responsibility and self-determination in a convincing way that doctors, therapists and social workers usually cannot.

Additionally, my perspective on gaps in Oregon's mental health services is partially informed by my usually wonderful 20-year relationship with a person who has a "severe mental illness" who has had numerous mental health crises. We have had some not so wonderful times in addition to wonderful times. When I first moved to Oregon, my partner was going through a very rough time, and his loud and delusional behavior towards neighbors led to us getting kicked out of 3 apartments in 2 years. On a number of his crisis nights, we would try going to the Emergency Room of a hospital. But he was often turned away from the hospitals for not having a plan to kill himself or commit a crime. So, during nights when it was clear that my partner was not going to be able to stay quiet after 10:00 PM when apartment quiet hours started, we would often go to a cheap hotel or motel to avoid transgressing standard quiet hour terms of an apartment lease. We noticed that he was able to calm down fast when we would go to some other location. Our unplanned escapes to another location were the extra action he needed to realize that I was taking his distress seriously enough and he was safe. It helped every time. Unfortunately, paying for hotels and motels over and over again was not a financially sustainable practice, so it was not the perfect solution. The perfect solution would have been a peer respite, a service that we do not have in Oregon without HB 2980.

My partner and I are currently doing well. But it took him about 10 years to start recovering from a flagrant psychotic break he had around 2004 and he acquired a criminal record along the way when acting on paranoid beliefs, so times have not always been as good as they are now. If there had been a peer respite for him to go to for voluntary help for a few days from peers who knew what it is like to hear voices and have weird, horrible paranoid delusions, he could have

worked through his distress with support before feeling desperate enough to act on paranoid notions that led to a string of arrests for misdemeanors. If he could have gone to a peer respite back then, I also could have gotten respite for myself at home from his insomnia and delusional arguing which would have allowed me to catch up on sleep and get a break to recharge my own batteries to support him more effectively upon his return. For every one person who checks into a peer respite, there are also roommates, family members and neighbors in the apartment building who are also benefitting from that person in crisis being away to chill out and work through some stuff with fresh listeners for awhile. Everybody in a community benefits when there is voluntary respite for people in extreme distress.

Peer respites are an affordable, proactive choice that will allow Oregonians with mental illnesses to have a voluntary way to take back responsibility for their health during a downward spiral with some help from peers with similar lived experience, before housing is lost or being a danger to self or others leads to expensive hospitals or jail. We need this as a diversion option of support in the middle of the continuum of care for times when appointment-based outpatient services are not enough; but the expensive, often scary or traumatizing experience of being locked in a hospital is excessive.

I commend Representative Hayden for his leadership for this bill. Thank you! I also thank all the committee members for this hearing and for making time to understand how replicating this peer respite model in Oregon will help many people who are facing a mental health crisis, as well as the people who live with them who are facing stress and housing instability risks with them.

Sincerely,

Karena Bayruns