Submitter: Che Walker

On Behalf Of: ALSO

Committee: House Committee On Behavioral Health

Measure: HB4085

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Good morning and thank you chairman Nosse, vice-chair Reynolds and committee members for this opportunity to speak.

My name is Che Walker, Chief Operations Officers at Advocates for Life Skills and Opportunity. We fondly refer to our organization as ALSO. I have worked in the field of intellectual and developmental disability for approximately 24 years. In that time, I have provided support and advocacy for both adults and children as they navigate Oregon's numerous, and person directed community-based support options. I am also a licensed mental health professional practicing in Oregon since 2005. I share this last piece, because I believe it equally qualifies me to speak with experience from the perspective of mental health care and support to people with developmental disability.

I believe House Bill 4085 is well intentioned and meant to bridge a substantial gap for Oregon families in crisis. I also believe that this Bill falls substantially short and may endanger the lives and development of Oregon's children. Parents and Guardians may feel disempowered to seek community-based supports and instead think that an institutionalized option is the only option. I am not here to suggest that a solution to meet the needs of Oregon's youth is already in existence. We have need for qualified mental health professionals that are capable, available, and prepared for the challenges these children will experience. I am here to say, that I have doubt that this path is the right one. We have had institutions like Fairview in Oregon. I wonder how similar the message was that pressured parents to believe only there, could my child receive what they need. We know the wrongs committed by institutionalizing children in the past. We shouldn't go back there.

Children with intellectual and developmental disability will get caught in this mass net thrown by HB4085. These children have multiple community-based avenues that need more investment not a path to forced compliance institutions that don't truly understand the nature of the conditions. Mental health professionals continue to be

woefully unprepared to support children with IDD and these "Neutral fact finders" seem to hold an inordinate amount of power in terms of what happens next. What happens if a child with autism spectrum disorder is placed in a mental health facility? What happens if a child who exhibits behavioral distress is placed in a conversion therapy program? Can we guarantee that children of every color and creed will receive the right and proportionate care? Oh, and do we even ask these children what they want? It truly appears that this Bill would suggest their voice and wants are left unattended as we pursue them to be committed.

This bill states that the neutral fact finder may admit a child should their mental, emotional, or behavioral health needs pose a risk of harm to themselves or others. Am I wrong, or shouldn't we be addressing needs in a substantially different way.

Thank you for your time and willingness to listen.