

HGO - HB1160 - FAVORABLE

Chair Pendergrass, Vice Chair Pena-Melnyk, and Health and Government Operations Committee;

In the hopes of gaining your support for HB1160, I'm going to provide some snapshots of the life of a close family member of mine. Since this testimony will be publicly accessible, I won't use his name.

- Diagnosed with schizophrenia at 17
- Homeless while still trying to get through high school - wasn't able to graduate, even though he stayed in high school until he was 21
- Saw vampires; thought people were breaking into his apartment and injecting him with drugs while he slept
- Violence towards family members over the years
- Went missing - homeless and couldn't be located; \$1000 to a private investigator to try to find him; talked to a lawyer about having him declared incompetent, was told it would cost \$50,000 and we'd most likely lose
- Thought the devil and Lucifer were telling him to shoot me. I spent a lot of time looking over my shoulder.
- Early 20's - stabbed someone in self-defense, then had a psychotic break and committed an armed carjacking without realizing that's what he did
- Jail, awaiting trial, for over a year. Unmedicated or inadequately medicated, in and out of solitary, regularly attacked by others there
- Found Not Criminally Responsible, sent to a high-security psychiatric facility
- While in a group home, made a strong comeback, got his GED, got through trade school, lived independently
- Schizophrenia made it so he couldn't continue to work. Downward spiral. Saw dragons. Repeatedly threatened to shoot up his church.
- Talked with another lawyer about having him declared incompetent. Said we'd most likely lose and go bankrupt
- Tried to kill himself. Nurse didn't know if he'd wake up because he wasn't responding to stimuli.
- Woke up, psychiatrist said he couldn't hospitalize him as he wasn't a danger to himself or others (?!?!?) even when I told the psychiatrist that he'd been threatening to shoot up his church.
- He agreed to be hospitalized, but the psychiatrist there became scared of him once she found out that he had a history of violence, and she discharged him. (!!!)

- One month later, he tried to kill himself again.
- Attended community college - the structure helped him stay on his meds. Did well and graduated.
- Without the structure of college classes, he stopped taking his meds. Said that angels were physically holding him down in a chair, preventing him from taking his medication.
- Hoarded gasoline, oils, etc. Living by kerosene-powered appliances. Mice in the apartment. Lots of scary yelling and banging, throwing things out the window (including his laptop). Cops repeatedly called on him - sometimes multiple nights in a row.
- Smashed the back of an axe into his forehead, repeatedly. Went to the hospital, got staples in his head, was discharged.
- In the hospital - possibly voluntarily, I don't think that was ever clarified. They transferred him from Glen Burnie to a hospital in DC. The DC hospital released him within a week - out onto the street, no way to get home.
- Found out he'd be evicted at the end of the month. Back in the hospital again the next week. Stayed a short time, then released.
- Spent some time packing, but was mostly distracted by voices. Ended up back in the hospital (third time in a month.) They kept him a little longer this time, but still released him before he was medicated to a therapeutic level. I'd spoken to them at length about his history, but it didn't matter. At the time he was discharged, he was begging to stay or to be placed in a group home, and he couldn't have a conversation because the voices in his head were so loud.
- I'd been packing up his apartment during the hospitalizations, putting everything into a storage unit. He tried to help after he was discharged. We ended up throwing a lot away due to mouse damage.
- His friend told me that he'd been hearing voices and was being told to kill his friend and all his family members.
- He was evicted. Lived in his vehicle for a while, then drove off to Utah without a word to anyone.
- Had an apartment for a short time in Utah. Was hospitalized for a bit, then evicted. Homeless, sleeping in a tent in the woods. The cops would check on him to make sure he wasn't freezing, and encourage him to stay in a motel when it was really cold.
- Broke some laws in Utah - felony and some misdemeanors. Not competent to understand the charges, so sat in jail for a couple of months until the judge had him transferred to a psychiatric hospital. He'd been jailed in March, and wasn't found competent to stand trial until the end of the year. He took a plea deal and was told to leave Utah. Moved back to Maryland.

There were more hospitalizations in there, but I'd have to pull out his paperwork to find out when and for how long. There were also a lot more threats of violence. And so many different auditory and visual hallucinations, with the occasional tactile hallucination. Most of his hallucinations have been related to religion (God, angels, devil, etc.) This is very common with schizophrenia.

A couple of months after he returned to Maryland, COVID hit. He's been doing pretty well through that, and started community college classes again. We're always waiting for the next time things will go bad. He's 43 now.

He's been assaulted by the police before during a well check. He's also been ridiculed by the police before for his mental illness. The police tend to be triggering to him. I live closer to him than any other family member, so I'm the one who will have to intervene the next time something goes wrong. Because of his history of violence and his instability, there have been long periods of time when I didn't allow him around my children. His parents have had to avoid him many times over the years for the same reasons.

So much of this could've been avoided if it had been easier to hospitalize him, and to keep him in a hospital. With an extended hospital stay, he can get effectively medicated to the point that he's able to continue taking the meds on his own, AND make appointments with a psychiatrist, AND get to those appointments, AND find a way to structure his life so he doesn't fall back into psychosis. Psychiatrists at the hospital in Glen Burnie have failed him again and again and again and again. The way they interpret "danger to self or others" is absolutely absurd. If someone isn't considered a danger to themselves, even though they just attempted suicide; or a danger to themselves, even when they just slammed an axe into their head; or a danger to others, even when they've been threatening to kill people AND they've even committed acts of violence in the past, then WHAT DOES IT MEAN???

I urge you to give HB1160 a Favorable Report. Please.

Thank you for your consideration.

Sincerely,
Debi Jasen
Pasadena, MD