

Chairman Pavliga, Ranking Member Brewer and members of the House Behavioral Health Committee, thank you for the opportunity to provide written-only interested party testimony on House Bill 249 (HB 249). My name is Matt O’Nesti and I am an advocate for Ohioans with Disabilities. As you know, HB 249 expands the criteria for involuntary commitment to include psychiatric deterioration. This expansion could have harmful impacts on Ohioans with disabilities.

Having a mental health condition, or any condition for that matter, should never lead to a circumstance where a person is deprived of their rights or ability to make an autonomous decision. If empathy and compassion are a part of our value systems then our systems of care should not be oppressive or coercive. The moment we allow something like this to become the norm is the moment we further empower the stigma around mental health, which could ultimately lead to people not seeking help when they genuinely need it due to fear of being “pink-slipped” for overly-broad reasons. If the trust breaks down between the patient and the system, then the mental health crisis we are experiencing will only snowball and get worse. Further expanding the criteria on involuntary commitment can put people at risk of excessive or inappropriate detention which lead to more forms of abuse and neglect. I say this because this bill also expands who is able to determine deterioration and hand out a “pink-slip.” Sadly, allowing officials who are only parallel with the mental health field and may not have the education to make an appropriate decision can lead to tragic outcomes for the individual involved. Additionally, forced treatment can cause significant harm, including long-lasting trauma, as well as collateral consequences, like the loss of housing, employment, and disruptive impact on family relationships. The ends cannot justify the means in this conversation. The means for dealing with a mental health crisis should be person-centered and rights-based, in a community-based setting, and every attempt should be made to meet people’s needs in the least restrictive way possible.

The greatest need is for community-based supports, which are proven to reduce hospitalization, increase housing stability, reduce incarceration rates, increase community integration, and improve the quality of life for people. This is where the Ohio State Legislature should be focusing their efforts. People’s rights should not be jeopardized simply because they have a diagnosis, are experiencing symptoms, and because the community lacks the availability of adequate services and supports to meet their needs.

I am asking the committee to consider the effects of involuntary commitment, the potential harmful consequences of HB 249, and the voices of those with lived experience. Thank you for the opportunity to provide testimony on HB 249. If you have any questions or wish to discuss this issue further, please contact me through my email: onesti.matt@gmail.com or through my cell: (330) 651-3768