

Hello Senator Baldacci, Representative Meyer, and other esteemed members of the Health and Human Services Committee, my name is Ash Hebert. I am a resident of Waterville Maine and I am here to testify in opposition to LD445.

While I strongly believe in the expansion of comprehensive healthcare coverage for low-income Mainers, I also strongly resist what could set a precedent for increased involuntary treatment in Maine. If this is a matter of securing emergency, last-resort options to help stabilize people, then any energy devoted to addressing the aftermath of someone's crisis must be devoted three times as hard to building more just, equitable, accessible, and humanized systems that cause most harm in the first place. This means implementing a less invasive, money-driven, and disempowering paradigm into our healthcare as well as justice systems. A priority to fund, facilitate, and adopt noncoercive recovery models which encourage people to remain in their communities would absolutely transform how we perceive mental "illness" and the appropriate ways to approach our differences. Examples of alternative mental health options exist today, and they will continue to flourish throughout Maine with financial and legislative support. These include a wide range of peer services (peer support centers, respite houses, warm lines), mental health advance directives, and more.

I am someone who has lifelong challenges with mental health and I am a survivor of chronic child abuse. While I was a Ward of the State, I was involuntarily hospitalized twice, and neither instance alleviated my suicidal ideation. In fact, those experiences instilled a deeper mistrust and the only reason I did not try to escape was for fear of what security guards, typically equipped with something to prevent my leaving, would do to deter my actions. I am so elated to see movement behind building peer respite programs here, because I know deep in my heart that a less hierarchical, force-based environment would have fostered healthier outcomes for me.

While I consider the horrors of my childhood to be both an indictment of intergenerational, systemic disparities as well as a great contributor to my mental health challenges, I also see how their negative impacts are exacerbated by an underfunding of appropriate community-based care networks in Maine. I strongly believe that we should not only consider but also allow history to guide us toward the least harmful options, now as well as in the future. Forced treatment always violates someone's informed consent and as such, is deemed an act of medical mistreatment. Please listen to peers when we urge you away from a slippery slope of historical institutionalization. We cannot afford to backslide, and in fact our only option is to move forward together with a commitment to institute more dignified systems.

In closing, I urge you to not pass LD445.

Thank you for your time and consideration.

Ash Hebert
Waterville