

Subject: Opposition to Oregon House Bill 2467 – Expansion of Involuntary Mental Health Commitment

Dear [Legislator's Name/Committee],

I am writing to express my strong opposition to Oregon House Bill 2467, which proposes to amend and expand the state's mental health commitment laws. While the stated intent of this bill is to allow for earlier medical intervention, I believe its provisions create significant risks to individual liberties and potentially harmful consequences for people with mental health conditions.

It is also extremely expensive to implement. Expanding civil commitment will cost \$320,000 for one person for 180 days. If this bill were to result in only 100 additional civil commitments, a conservative estimate after lawmakers make it easier to civilly commit individuals, taxpayers would come up with \$32 million dollars of extra funding at a time when our state's mental health budget is already strained to the breaking point.

My opposition stems from the following concerns:

- **Broadening Definitions of "Danger":** HB 2467 expands the definitions of "dangerous to self," "dangerous to others," and "serious physical harm." This expansion creates a significantly wider net for involuntary commitment, potentially capturing individuals who do not pose an immediate and substantial threat. The ambiguity of these expanded definitions is highly concerning.
- **Emphasis on Past Behavior and Potential Risk:** The bill allows courts to consider past behavior, recent threats, and "potential risk of harm" when determining commitment. This focus on predicting future behavior, rather than focusing on imminent danger, is problematic. Past behavior does not always accurately predict future actions, and the concept of "potential risk" is highly subjective and open to abuse.
- **Reliance on Subjective Assessments:** The bill allows for the consideration of "behavioral deterioration" as evidence for commitment. This is a vague and subjective term, leaving room for misinterpretation and potentially discriminatory application.
- **Expansion of Assessment Authority:** Expanding the list of behavioral health clinicians who can make professional assessments increases the risk of inconsistent and potentially biased evaluations.
- **Criminalization of Mental Illness:** The language of the bill, while appearing to want to help, creates a system that will criminalize mental illness, and weaponize

the mental health system against the very people it should be helping.

- **Lack of Focus on Alternatives:** The bill prioritizes involuntary commitment over voluntary, community-based mental health services. This approach fails to address the root causes of mental health crises and neglects the importance of supporting individuals in their own communities.

I am deeply concerned that HB 2467 will lead to an increase in involuntary commitments, potentially violating the rights of individuals with mental health conditions and subjecting them to unnecessary and potentially traumatic interventions.

Instead of expanding involuntary commitment, I urge the legislature to prioritize:

- Increased funding for voluntary, community-based mental health services.
- Improved access to crisis intervention and de-escalation training.
- Investment in alternative models of mental health care that prioritize individual autonomy and recovery.
- Focusing on immediate and imminent danger, rather than potential or past actions.

I respectfully request that you oppose HB 2467 and advocate for policies that prioritize the rights and well-being of individuals with mental health conditions.

Sincerely,

[Your Name]

[Your Address]

[Your Contact Information]