

Following is part of the testimony delivered by David Gonzalez of the Recovery x-Change at the April 8th, Assembly Public Hearing on Kendra's Law in New York City that was co-chaired by Assembly Mental Health Committee Chairman Peter Rivera and Codes Committee Chair Joseph Lentol.

Kendra's Law (4/8/05)

According to OMH's Final Report on Kendra's Law, 63% of people being court-mandated under Kendra's Law are identified as Black and Hispanic (OMH Final Report on Kendra's Law 3/1/05).

The OMH Report opens up with the following introduction: "Kendra's Law was named in memory of Kendra Webdale, a young woman who died in January, 1999 after being pushed in front of a New York City subway train by Andrew Goldstein, a man with a history of mental illness and hospitalizations."

The implication here is obvious. The question of violence and mental illness is as old as psychiatry itself. What most people don't know is that Kendra's Law is merely the culmination of old policies and old laws, which have been re-packaged under a new name. (None Dare Call it Treason, John A. Stormer, Chapter IX, Mental Health, 1964; the Tragedy of Sane People Who Get Put Away, Albert Q. Maisel, Reader's Digest, February 1962)

At one time these laws were passed - allegedly - to protect "the mentally-ill" from themselves, today they are passed - allegedly - to protect society from "the mentally-ill." All of which, by the way, have never worked. **Which is why we are sitting here today!**

The reason why these laws had to be repackaged was because the constitutional rights of the person made it difficult to apply them. So in order to eliminate this roadblock, the advocates of forced treatment latched onto Kendra Webdale's tragedy to convince the public that this was not an isolated incident, but the beginning of a terrifying new wave of crime - **knowing full well that fear and emotion all too often override reason and rationale.**

Allow me to quote a Daily News editorial released that very same year:

"In our newfound complacency, we have forgotten a particular kind of violence to which we are still prey. **The violence of the mentally-ill.**" (New York Daily News, 11/19/99)

Ironically, in 1999 - the very same year Kendra's Law was passed - the Surgeon General's Report on Mental Health concluded that minorities:

- have less access to, and availability of, mental health services
- and are less likely to receive mental health services when needed

These findings were confirmed and validated in the Final Report of the President's New Freedom Commission Report on Mental Health in 2003 (Achieving the Promise, July 2003).

So since the main thrust of Kendra's Law is to force people into treatment, regardless of whether or not they have a history of violence - which is borne out by the fact that 85% of people being court-mandated have no history of violence - is it any wonder that minorities who "have less access to... and are less likely to receive mental health services" are the victims of this law?

The most widely publicized figure is that "1,000 murders a year are committed by Americans with severe mental illnesses." And although this figure is not supported by any figures from the Bureau of Justice or culled from any studies conducted by impartial researchers - this self-admitted calculation made by the leading advocate of forced treatment (E. Fuller Torrey) is accepted as fact by the American public.

In contrast, according to a 1998 study by the MacArthur Foundation, individuals with mental illness are no more violent than the general public unless they're abusing drugs and alcohol, (which applies across the board, whether an individual has a history of mental illness or not).

Once again, this finding was affirmed in 2003 in the Executive Summary of the President's New Freedom Commission on Mental Health, which states that:

"61% of Americans think that people with schizophrenia are likely to be dangerous to others. However, in reality, these individuals are rarely violent. If they are violent, the violence is usually tied to substance abuse."

Am I saying that individuals with mental illness don't commit acts of violence? Absolutely not! To even suggest such a thing would be disingenuous and dishonest.

Am I saying is that individuals with mental illness are no more violent than the general public?
Yes! That's exactly what I'm saying!!!

In fact, in August of 2003, Nicholas Regush, former producer of ABC's Nightline and World News Tonight with Peter Jennings, queried in his online column, Second Opinion:

"Where is the science that supports the need to use coercion so often when it comes to the treatment of patients, as opposed to, say, offering a wide range of community-based services? In all my research on violence for a book published several years ago, I had not seen one credible study showing that society has more to fear from patients labeled "mentally ill" than other people in the community. For example, there has never been any appropriate follow-up of patients that has determined whether the absence of treatment leads to violence. The very foundation of forced treatment is ideology and fear-mongering and not science."

Interestingly enough, nowhere throughout their 23-page report on Kendra's Law does NAMI quote any independent research. They openly admit that their research is based solely on discussions with a selected group of 20 families and 40 local NAMI leaders. They make no attempt to conceal their bias and their report is full of lead-in statements such as "**OUR** research found... and "**WE** found overwhelming evidence..."

So the real question is: “If it is true that individuals with a history of mental illness are no more violent than the general public, could this tragedy have been prevented?”

To find the answer to this question I ask you to consider the words of Andrew Goldstein himself the day he was arrested, when asked by a reporter why he did it. His response to the reporter was:

“Do you think I can get some help now?”

Were his actions driven by a “mental illness” as the advocates of forced treatment would have us believe, or were they driven by the frustration of being turned away everywhere he went asking for help?

One of the things that struck me the most about the OMH report is that while the report suggests significant positive outcomes from Kendra’s Law, it totally fails to demonstrate what produced those significant positive outcomes – better access to services or court-mandated orders?

A three-year study at Bellevue Hospital compared the impact of providing an enhanced service package, with and without the use of mandated services, and found no difference in the rates of improved outcomes - suggesting that people do better when they are receiving better services, **not because they are forced to accept them.**

Allow me to conclude by pointing out the following quotes from two people who asked that their feelings about Kendra’s Law be shared at this hearing. One of these people is a person who is court-mandated and the other is a provider who oversees court-mandated individuals:

Court-mandated individual:

“The AOT order states two things. 1. That I am a danger to self or others. And 2. That I would be unable to survive in the community independently. Neither of these statements is true, but there is no way to prove that. There was no evidence that I was violent but **my future has been ruined.**”

(Sidebar: in a criminal court of law, the defendant is “innocent until proven guilty,” in a mental health court of law, the defendant is guilty until proven innocent.” DG)

Provider overseeing court-mandated individuals:

“AOT robs individuals of their self-determination and creates an atmosphere of distrust between the consumer and the provider. **It sets the providers against the very people they serve.**”

In closing, I’d like to suggest that the solution to this problem is to keep the enhanced services portion of this law and to remove any form of coercion. The forced treatment aspect of this law is merely a diversionary tactic intended to deflect attention away from what started this problem in the first place, a fragmented mental health system. This fact is reflected throughout the whole report from the President’s New Freedom Commission on Mental Health which calls for a major overhauling of the entire mental health system in the United States.

Is it merely a coincidence that this commission was called the President's **New Freedom** Commission? And that their report was titled "Achieving the Promise."

Does Kendra's Law truly achieve this promise?

The **Recovery x-Change** logo was inspired by the belief that while medications can be helpful in the recovery process, they are only one facet of an integrated approach necessary for recovery and so our logo puts a recovery-focused spin on the traditional pharmaceutical symbol. The "x" identifies the need to x-terminate the belief that recovery is not possible and the "Change" identifies the need to change the paradigm from one of "mental illness" to one of mental wellness.

