

TESTIMONY

HOUSE
JUDICIARY COMMITTEE
SUBCOMMITTEE ON CRIME AND CORRECTIONS

on

HOUSE BILL 2620
P.N. 3598
AMENDING TITLE 53 (MUNICIPALITIES GENERALLY)
OF THE PENNSYLVANIA CONSOLIDATED STATUTES,
PROVIDING FOR INSTRUCTION ON
PERSONS WITH DISABILITIES

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ALLIANCE FOR THE MENTALLY ILL OF PENNSYLVANIA

July 16, 1998

Good morning. I am Mary Ellen Rehrman, director of policy for the Alliance for the Mentally Ill of Pennsylvania (AMI of PA). AMI of PA is a non-profit, grassroots, self-help, support and advocacy organization of consumers, families, and friends of people with major mental illnesses such as schizophrenia and bipolar disorder. AMI of PA has 60 affiliates throughout Pennsylvania with 4,200 members.

The issues of police training, the content of the training, and the presentation of the training is of the utmost importance to our membership.

No other group of people with an illness has as much interaction with the police as persons with a major mental illness. A police officer is usually the first one on the scene of a psychiatric crisis. Without proper training and knowledge of the symptomatic behaviors of mental illness, these incidents can easily escalate and endanger public and police safety.

Police officers respond to hundreds of calls each day. Many are calls for service that the officer handles in a routine manner, but there are certain situations where an officer is required to have special skills, i.e.; CPR, use of force and firearms. Encountering a mentally ill person who is acting out is another such incident requiring special skills. On the surface, the conduct may APPEAR to be criminal in nature. Unfortunately, only after many of these situations escalate to the point of physical force and arrest does it become apparent that the conduct is a manifestation of a mental illness. All too many times the officer and the mentally ill person sustain injuries.

Schizophrenia, one of the major mental illnesses, impairs a person's ability to think clearly, manage emotions, make decisions and relate to others. The symptoms of schizophrenia are generally divided into three categories, including positive, disorganized and negative symptoms.

Positive, or "psychotic," symptoms include delusions and hallucinations. The person has lost touch with reality in certain important ways. "Positive" as used here does not mean "good." Rather, it refers to the presence of overt symptoms not present in a normal personality. Delusions cause the person to believe that people are reading their thoughts or plotting against them, that others are secretly monitoring and threatening them, or that they can control other people's minds. Hallucinations cause people to hear or see things that are not there.

Disorganized symptoms include confused thinking and speech, and behavior that does not make sense. For example, people with schizophrenia sometimes have trouble communicating in coherent sentences or carrying on conversations with others, move more slowly, repeat rhythmic gestures or make movements such as walking in circles or pacing, and have difficulty making sense of everyday sights, sounds and feelings.

Negative symptoms include emotional flatness or lack of expression, an inability to start and follow through with activities, speech that is brief and lacks content, and a lack of pleasure or interest in life. "Negative" in this sense does not refer to a person's attitude, but to a lack of certain characteristics that are part of a normal personality.

While there is no cure for schizophrenia, it is a highly treatable brain disorder. In fact, the treatment success rate for schizophrenia is 60 percent, compared with 41-52 percent for heart patients.

With proper training an officer can learn to recognize the conduct associated with major mental illnesses, develop intervention strategies and be able to articulate what has happened. This will help in getting treatment for the mentally ill person, avoid unnecessary arrests and protect the officer and the mentally ill person both physically and litigiously.

AMI of PA has provided such training for the Harrisburg Police Department. As the attached documents indicate, the training was well received and considered to be of great value to the officers in the field. Response by knowledgeable officers will lessen an exacerbation of the person's symptoms and allow the officer to be seen as helpful rather than threatening.

RECOMMENDED CHANGES to the BILL

Section 2172. Instruction on persons with disabilities.

Add under Section 2172, (a): Recognition of symptoms and environmental stressors that exacerbate symptoms, provide rapid access to appropriate psychiatric treatment in order to ameliorate symptoms of people experiencing a major mental illness including people with a dual diagnosis of a severe mental illness and alcohol and drug abuse.

Add a sub section on qualifications for Instructors: Instructors for major mental illnesses shall include persons who have direct experience with persons with a severe mental illness including but not limited to persons with a major mental illness and member of a family that has experienced a major mental illness in one of their members.

Add to (d) Definition: Major mental illnesses such as schizophrenia, schizo-affective disorder, the affective disorders, obsessive-compulsive disorder and any other disorder with psychotic symptoms not otherwise specified.