To members of the Senate, re: S.287 from Laura Ziegler <u>zieweed@gmail.com</u>

"Every violation of a person's bodily integrity is an invasion of his or her liberty. The invasion is particularly intrusive if it creates a substantial risk of permanent injury and premature death. Moreover, any such action is degrading if it overrides a competent person's choice to reject a specific form of medical treatment. And when the purpose or effect of forced drugging is to alter the will and the mind of the subject, it constitutes a deprivation of liberty in the most literal and fundamental sense...

The liberty of citizens to resist the administration of mind altering drugs arises from our Nation's most basic values." -- U.S. Supreme Court Justice Stevens, dissenting in *Harper v. Washington*

"Involuntary medication is an even further intrusion on a patient's autonomy than involuntary commitment." -- Vermont Supreme Court, *In re L.A.*, 2006 Vt. 118 (2006)

I feel compelled to respond to the discussion of S.287 during yesterday's caucus.

The claim that autonomy is not implicated in refusal of mind altering drugs because people are diagnosed with serious mental illness and involuntarily hospitalized misinforms and distorts the debate. It's also grossly discriminatory. The claim that the short term risks and adverse effects of these drugs are rarely serious misinforms and distorts the debate. It also endorses malpractice.

Whether a person is capable of making a decision to accept or refuse drugs and appreciate the consequences of that decision, and whether forcibly administering drugs would be in that person's best interests, is determined on an individual basis by a court during an involuntary medication proceeding.

These matters are *in dispute* -- not *predetermined*. They require careful consideration of evidence at an impartial hearing. This requires time for counsel to effectively prepare. The debilitating, destructive and potentially lethal effects of these drugs are well known. The *prevalence* of those risks and adverse effects remains a matter of controversy, which is not resolved by glib assurances of safety and efficacy.

Due process saved my life. I was involuntarily hospitalized, given the most serious psychiatric diagnoses, and until a court enjoined it, subjected to forcible non emergency administration of neuroleptic (aka "antipsychotic") drugs. That intrusion on my mind -- on whatever made me a human being -- was a profound and unjustified violation. It resulted in permanent physical and psychological harm.

I've been active on this issue for over 30 years. I've known many people who were denied the right to informed choice and who sustained permanent harm from these drugs. Some did not survive. Following S.287 has meant watching that harm trivialized to promote expedient use of force.

Rather than crafting a remedy for unwarranted delays in court hearings and addressing the fundamental issue of inadequate resources, this bill subverts the legal process and makes drugs and coercion the centerpiece of the system of care. It's a disservice to people with disabilities and the interests of justice.

Please reject it.