

From: [REDACTED]
To: [FamiliesCommunities Committee](#)
Subject: Mental health act reform
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Hello. My name is [REDACTED]. I have been admitted to the hospital several times and have grown accustomed to the process, although at many times i have felt they have used undue authority. When I was first admitted, they took me into the ward, where i saw large holding cells, and I hunched over kind of in sickness and panic for where i was. I was not acting out in any way. I did not want to be there. You might think they would ask me some questions, or emphasize with me. Instead they put me in one of those cells, and forced me to have sedative. I did not resist in any way, but they still forced me down and gave me a sedative!. I use this as a small example of a gross overuse of authority being employed.

Every single time I've been admitted I have been under certificate. My story isn't rare. I was put in a room where there were guards outside. I was left alone for a very long time, and in a time of crisis for people, I can imagine this would raise fears and make it worse for anyone but with a steady mind. The doctors came and asked me a few questions and took a short glance of me, and based only on that, they judged me and put under certificate. I was in no way shape or form deteriorating, yet their field implies almost everyone with a mental health disorder will deteriorate if left untreated. The doctors use the, "suffer substantial mental or physical deterioration" clause very loosely. This assures nearly every gets put under certificate, even when they are no harm to themselves or others, and is just going through a bad spell in their life. I have met some of the most rational calm people in the hospital who were under certificate. The doctors have no right to force their treatment and force people to be admitted to facilities under these dubious and specious circumstances. I would have easily gone voluntarily, even though I didn't have that choice. And even when i had good judgment, they put me under certificate by this clause.

f.1, g in the mental health act. Grossly affecting judgment is not clearly defined, nor is capacity to recognize reality or ability to meet the demands of life. These can be taken in different ways. I have always shown good judgment in taking care of myself in terms of eating and sleeping and not hurting myself. But at times people may act out emotionally due to hopelessness or frustration. Is this showing good judgment or not? I think it's quite natural in many circumstances to feel and act this way, yet are they not showing good judgment when they do? It is a matter of the condition vulnerable people are placed under. Capacity to recognize reality can be dubious as well. Some people might argue Christians who believe the devil is taking over the world or people who join dooms day cults have an impaired ability to recognize reality; although, this does not occur from any physical disorder of the mind. They are disorders of thought, perpetuated by continued exposure to consistent but false ideas from people they put trust in. The psychiatric profession would interpret this as schizophrenia, put the person on pills, and under certificate, and say they will deteriorate mentally if they stop. And in terms of ability to meet the ordinary demands of life, I may have struggled throughout my life, and not been able to get a job, but that does not mean I can't find my way around the city, drive, get food for myself etc. These loose terms do a disservice to real variables of diagnosing mental illness.

I propose that that doctors do not have the good judgment based on quick examinations and the orthodoxy of the mental health profession to determine whether or not someone is mentally or physically going to deteriorate without continued examination over time, so they

have no right to put us under certificate. And even over that extended period of time, perhaps only some patients, with clear signs, and them voluntarily admitting that they are deteriorating can it be determined if they will deteriorate. In any case they do not use science. It is not like a clogged artery where you can take a scan, and it will tell you that you will have a heart attack. These judgments are not being made by science. They are mere opinion. To further my case, I direct you to the Rosanhan study. [1] In this study questionnaires were taken by medical health professionals to detect the pseudo-patients, and they were not able to. They also supposed during this time that the pseudo-patients actually had a mental illness. It was more the perception than the matter of facts that determined these professional judgments.

Doctors and mental health professionals do not have the good judgment in most cases to determine whether or not someone is mentally or physically going to deteriorate, unless there are clear signs. For example if someone comes into the hospital starving because they are too afraid to go out of their house. This would be a clear sign of deterioration. In no way was I going to starve or not be able to meet the basic demands of life due to my condition. They use the term very loosely because to the doctors, any schizophrenic patient will be considered to deteriorate mentally if not treated, even when their delusions are brought on by continued exposure to consistent but false ideas from people they put trust in as stated above with the Christian or doomsday beliefs. And it's dubious whether or not mere thought can make a mind deteriorate physically. Either way they do not have the right to hold people like this against their will based on these poor examinations unless there is an obvious condition or the obvious threat of hurting themselves or other people.

In making changes to the act, I would hope you take into consideration giving more room for people to be admitted voluntarily, instead of just having a certificate stuffed at us. On subsequent admissions I WAS going voluntarily anyway, and they still put me under certificate. so I think more room to be admitted voluntarily would be appreciated. I would imagine most people who are physically and mentally deteriorating in the community would appreciate the services provided at the hospital, so it is dubious whether or not someone who is actually mentally or physically going to deteriorate needs to be put under certificate. It's in the rarest of conditions where they are actually deteriorating and are unwilling to be hospitalized, and they have impaired judgment. And I'd like to add I have always had a sense of good judgment about me even when I was sick. A mental illness does not mean your judgment is always necessarily impaired to be able to make basic decisions. Your awareness is still there. People might not always make the best judgment, but they do the best thing with what information is given. Only in conditions where there is serious physical brain deterioration and they lack awareness, may there be an inability to have sound judgment. Some fundamental questions have to be asked then. Is it ethical to put these people under certificate? What is making them unwilling to be hospitalized? Can we determine if they are mentally physically or deteriorating? Have we asked them if they are mentally or physically or deteriorating? For them to be unwilling may stem from an underlying failure in the health care profession and the services they provide, so it has to be taken quite seriously. In other cases it may stem from undue paranoia, and then anything the mental health profession can do to convince them that they are there to help, would be a reasonable course of action.

Similarly with community treatment orders, if people think that they will be forced to get treatment in the community, this may prevent them from wanting to seek help again. I certainly am questioning whether I will go back to the hospital even if I am deteriorating, because I would not want a forced protocol stuffed down my throat with mandatory blood samples taken and forced injections, even though I have been medicating for several years. We appreciate that there are people there who want to help, but undue use of authority can

have a negative impact as well. So you must be very careful not to give people disincentive people from getting treatment when they need it. At least leeway in giving community treatment orders would be much appreciated. I encourage you at least not to make it any shorter than 3 years, and encourage you to remove the clause suffer substantial mental and physical deterioration. And as already stated, the profession uses this clause very loosely, and only in the most obvious and clear circumstances when they have a clear lack of being able to judge for themselves should it even be considered. Even in the worst of my times, I have always had a sense of aware judgment about me, and it should be my right whether or not if I want to deny treatment regardless of how many times I've been admitted.

I would also like to bring your attention to one more issue I have. When I was first admitted there was an impression given to me that there would be negative consequences if I appealed my certificate. That they would have more control over me if my appeal was rejected. I don't know if this is true, but this was the impression I got, and an impression I think many people get. If true, this deters people from speaking out when they clearly feel they have a right to, and is a gross injustice.

So I propose a) that if there are any negative consequences to appealing the certificate, that these be removed from the act. And b) that the health act by law is required to be in a place of common viewing for patients in mental health facilities to view to know their rights.

So in conclusion, I would hope you consider my experience from dealing with the mental health profession closely in amending the act, and I wish you good judgment in your review. Thank you for listening.

[1] <http://www.bonkersinstitute.org/rosenhan.html>