

by Robert Norse

For years, survivors of California's mental health system fought a drive by State Assemblywoman Helen Thomson (D-Davis) to expand state powers to forcibly incarcerate and drug those labeled "mentally ill."

Advocates were able to stop AB 1028 and AB 1800, earlier versions of the bill. But on September 28, 2002, Governor Davis signed AB 1421, which allows counties to opt into an involuntary outpatient commitment [IOC] program. IOC significantly increases the pressure to take psychiatric medication. For counties who choose the IOC program, AB 1421 significantly weakens the protections of the Lanterman-Petris-Short (LPS) Act.

The LPS Act mandates that people cannot be forcibly held in a psychiatric hospital (or 5150ed) unless they pose a threat to themselves or others, or are "gravely disabled" (i.e. unable to provide the necessities of life). AB 1421 allows the forcible restraint and medication of a person suffering from a serious mental illness "if the person's relapse or deterioration... would be likely to result in grave disability or serious harm to the person or others." This seriously weakens the civil rights protections of the LPS Act.

Additionally, the person must (1) be deteriorating to the point at which they might be dangerous to themselves or others or gravely disabled — again a weaker protection; (2) have been offered voluntary services and refused them; and (3) be offered the "least restrictive alternative."

Finally, one of these two conditions must also apply: (1) A person must have had "a history of lack of compliance that has caused them to be in a hospital or incarcerated [i.e. a jail] in the last 36 months;" or (2) must have made "acts, attempts, or threats of serious violent behavior toward self or others within the

last 48 months." Although the list of conditions is longer, the wording of AB 1421 makes it significantly easier to ensnare and coerce an unwilling "patient" and force them to take "medication."

Robert Whitaker, former *Boston Globe* reporter, documented the toxicity of neuroleptic drugs (such as Thorazine and Haldol) and "atypical" antipsychotic drugs (Zyprexa, Clozaril, and Risperdal) in his book, *Mad in America: Bad Science, Bad Medicine, and the Enduring Mistreatment of the Mentally Ill* [see *Street Spirit* interview with Whitaker, June 2003].

Jane Kysor is an independent PIRC [Psychiatric Inmates Rights Collective] advocate from Santa Cruz who has been monitoring psychiatric abuses for many years. She commented, "The hazards and toxicity of psychiatric drugs are well-known. The mental health system already uses untruths and exaggerations to hold people. This bill makes it potentially much worse. The only free services the system provides are drugs, restraint, and electroshock. Instead of forcing more drugs on people, we need to start detoxification programs for those who want to get off the psych drugs."

Virginia Knowlton, head legislative public relations worker at Protection and Advocacy, tried to get Davis to veto AB 1421. "We took a pummeling from the *L.A. Times*. There's so much stigma and misunderstanding of people with psychiatric disabilities. The media falsely claims that people lack insight into their own treatment, so they have to be coerced."

"In New York City," Knowlton notes, Kendra's Law — a similar bill — was used "as a sort of street-cleaning measure. The numbers were overwhelmingly black male. It was skewed in a racially, economically discriminatory fashion."

Sally Zinman, an activist since 1977 in



"If it's not voluntary, it isn't treatment." Sally Zinman (at right), of the California Network of Mental Health Clients, protests the American Psychiatric Association.

**"Given the budget crisis, the idea that any county would divert funds from current programs that are working for an approach that is unproven and could be damaging would be criminal and illegal. AB 1421 isn't meant to force people to take housing, counseling, services or jobs; it's there to force drugs on people."** — Sally Zinman