

The Proponents of S.287 / vs . Burden of Proof/ What is really the Right Care :

' If a person has a family member , or any one they claim to love , and that person is allegedly showing signs of mental illness , then they must truly *care* for that person OR then *they must leave that person alone and free to care for themselves*. They do not have the right to interfere , much less take control or commandeer , someone else's life , unless the need is provably , critically urgent . AND even then , only if they do it with love , and the highest standards of honesty , decency , real concern and ethics in general. Not only must they treat any other person as they would want and expect themselves to be treated , they must treat that person as THAT person WANTS and NEEDS to be treated ; they must not supercede the other person's capacity for self- love and self-care; they must not stand in the way of it .

Because every person is as morally bound , as every doctor , to Hippocrates' Oath : " First of all , Do No Harm " . For the simple , common - sense reason : 1 - they have no right to harm anyone , to make a situation worse than it already might be . 2 - And no one ever has the right to create a problem where none exists . In most fields and contexts it is considered criminal to harm other people . The area surrounding mental illness is no exception . Why should it be ? And therefore no justification for those who try to , somehow , make this field an " exception " . (The fact that people have abused this for centuries *still* does not justify it now , indeed , that makes it worse than ever) .

' " Caring " about , or for , a person means empathy : somehow feeling exactly what that person *feels* and helping ONLY , not hindering , them to feel good / do well . " Loving " is not callously or imperiously expecting another to live up to one's own (very possibly unreasonable) standards and punishing them ruthlessly if they do not . And a " doctor " has no conceivable right to do anything to any patient that is not compatible with love and / or care (or prevent that love / care from coming in from family , friends , or even society as a whole) . Certainly no doctor has the factual or moral right to try to force " treatment " on someone who is not sick . And he definitely has NO right to do this , even if the patient is sick , and the " treatment " does not work , or turns out to make the person even sicker than they were before .

' We have heard much impassioned testimony both for and against S.287 (on January 30 , 2014 , at the Statehouse) . But there is something that needs to be said about ALL the people who want this bill to become law : That , without exception , THEY ARE ALL ARGUING FOR THE ' RIGHT ' TO MEDICATE SOMEONE OTHER THAN THEMSELVES ; that they are testifying strenuously , in every extreme , for the bonafide invasion of someone else's body , mind , and life when they themselves have NEVER HAD these same low - level poisons forced down at all , let alone REPEATEDLY into their own stomachs , and saturating their own tissues and brains . And NOTICE that hypothetical patient or family member has always been SOMEONE WHO IS NOT PRESENT , whose case facts , evidence , and alleged " illness " , or " symptoms " (even their very existence !) WE HAVE NO CONCLUSIVE , TANGIBLE PROOF OF . And even if we were to meet them , we have NOT YET HEARD (certifiably without one iota of coercion , threat , or other incentive) from their own lips THAT THE DRUGS HELPED THEM W/OUT HARMING THEM ; also the following :

1- the initial allegations , or case facts , about their purported “ mental illness “ ----the actual egregiousness of their purported “ real and serious harm or threat , to self or others “ --- that these were PROVEN by evidence to be actually true. (and not merely the by-product of the police and/ or court’s corruption , or the care-taker family’s (possible) non – concern and non – love / misunderstanding / different values / lack of education or formal education / ignorance / or even , laziness / selfishness / financial issues , incl. greed / interference / convenience / power & control / outright rejection and exclusion.

There is the vast possibility --- high likelihood probability , nowadays ---- that a person may be grossly misrepresented , deliberately so , falsely accused . Incarceration for Profit is far too rampant and established to credibly bother to deny . And then :

2- once forced ---- once these family members were “ finally involuntarily medicated “ (as we heard more than one caregiver summarize with relief) ---- **WERE these** patients actually either doing better , or even feeling even the slightest bit better , because of the drugs ? (Only because of the drugs ?) But that is still not enough - we need to hear (also see, with our eyes)

3 -- that the “ treatment “ did not come conditional with a (now - entrenched) array of :

a-- SIDE -- EFFECTS , (can be life – altering , serious , permanent , deadly)

b--- personal TRAUMA ; mental , emotional and physical , financial (including -- especially ! --- unreasonable confinement within , and forcible separation from one’s natural life . It is not limited to only instances of Restraint and Seclusion) .

c-- a RUINED LIFE : Even if there were (miraculously) no side – effects : Did the whole forced intervention effect so much NEEDLESS violation , pain , de-railed life’s plans , or excessive legal complications that the patient could only feel and deduce afterward that the life they planned for themselves had either been ruined or made impossible ? (Just one example : having had so many young years either tied up in court / or incarcerated / or compromised by the drugs / or unjustly stigmatized , that one felt they never had the time to explore their options as a single , or find the Right One . And had , as a result of all this mental health “ treatment “ , ended up unhappily single , lonely and without family. OR : After years of dealing with the memory – loss , energy - eroding and brain – scrambling effects of these “ meds “ , a person , finds 10 years , later they cannot mentally compete , and so they cannot build a career , though they might be college grads) . WHEN THE QUALITY OF ONE’S ENTIRE LIFE RUNS THE RISK OF BEING RUINED OR MADE IRRETRIEVABLE by forced “ intervention “ , THEN MAYBE THE LESSER “ IDIOSYNCRASIES “ OF ONE’S (forced -- drug – free and personally manageable) “ mental illness “ IS THE PREFERABLE AND SAFER OPTION. Very often not nearly as dangerous and “ weird “ as the (demanding and corrupt) mainstream world out there right now !

This section is not meant to needlessly disrespect , discourage , or discredit any actual caregiver of someone with mental illness . It is only meant to weed out the true from the false , in a 1 - field where (certainly in Vermont) far more lives have been ruined OR ENDED by the self – serving fraud and opportunistic criminality surrounding the so – called “ care “ of mentally ill (or allegedly mentally ill) ; far more than the lives that were ruined or ended by

actual mental illness itself.

Also where :

2 - the worst bill yet threatens to become law, in psychiatry here in Vt., which is already SO terrible and out of control that NOT ONE SINGLE WORD OF PRAISE IS SAID ABOUT IT by the actual consumers ! (Really , think about that : How many people , over how many decades ? People who were already so outspoken about their own unhappiness , or illness , who would have no doubt been showering these same doctors with gratitude -- and TAKEN THE MEDS WILLINGLY ! --- if these so called " treatments " had worked in the slightest (and been without all the vast negative harm). Always remember the main thing , cited by the consumers , and the national websites and polls : IF THE MEDICATIONS WORKED , THERE WOULD BE NO NEED TO FORCE THEM !!! But NO : Their entire legacy of legal system / mental health care in the Vt. " hospital " system reads like a horror novel , like the detailing of a concentration camp .

It leaves no doubt for anything else but the reasonable conclusion that the doctors , as a profession , have had every other alternative , but they have collectively ignored this to the OBVIOUS PREFERENCE for the SADISM and FAST , EASY MONEY had by the HUMAN - TRAFFICKING TRADE which has " PSYCHIATRY " AS one of its STOREFRONT FACES , and then FORCED DRUGGING AS ITS VEHICLE . We only want to make sure here that these claims are " true " , that these absent people claimed here actually received forced meds AND THAT THEY WERE ACTUALLY HAPPY WITH THEM ! (" Better " here is replaced by the word " happy " , for real wellness is synonymous with some kind of personal happiness . We have the right to hear that the person themselves is happy with the outcome , and not just the " care " taker , (for if someone is so selfish that they do not care how that person actually *feels* , then they do not truly care about them ; and then the patient would have the right to be safer and better off on their own . Then the " caretakers " no longer deserve the professional , financial or karmic credit of having these patients , and this includes the doctors , too) .

Also , since there is no limit to the current depravity surrounding forced drugging , then no one has the right to declare outright that these proponents are surely devoid of incentive . There could be any or all manner of threat / coercion / gross misunderstanding / power / financial issues , both greed & need (caretaker income and subsidies) / the failings and shortcomings of old age themselves / or misguided " traditional " view that the doctors and the " system are always safe " because " they must be " No , thank you , but knowing the system as we do , we need to hear these " mentally ill " dependents for ourselves , and see with our own eyes . Under the terrible imminent circumstances , it is not too much to ask .

Even so , if they do exist and can come forward and testify in the positive , then they *still* don't nullify the protest stated by the opponents ! What might work out for one does NOT necessarily work for another ! One person enjoys food that another is violently allergic to . In that field , you don't see doctors *ravidly , incessantly --- psychotically* (themselves !) Hell - bent on FORCING the poison down into the person even after vehement complaint , violation of Constitutional rights , and obvious UNDENIABLE DETERIORATION !! So why in psychiatry ?

When not only the body, but the mind too, stands to be forced into a spiraling nosedive by forced drugging, (that is a true descent into hell and helplessness, and the end of all that is good in life) then: How did these non – “doctors” ever get so much power? It is precisely because the doctors CANNOT be trusted (with court testimony /with discretion /with pt. dosages and overall wellness) ---they cannot be trusted “consistently and over time” as CMS, Boston put it (re: the Decertification) -- that even if we do see these other patients, then Forced Drugging STILL NEEDS to be ABOLISHED ! Because one person’s wellness does not justify the abuse of another . Because just the fact that it is being forced (with so many other options and life - changes --- and yes therapy ! --- available nowadays, especially with the sheer % amount of patients accused, “diagnosed”, coerced (and finally threatened) that it is a dubious claim that a doctor (or patient) has “no other” alternative .

WE MUST BE CONCERNED ABOUT “concerned” FAMILY MEMBERS, testifying for (alleged, absent) others, mainly children or stepchildren: (speakers # 2, 4, 6, 8, 12, 14, 16, 18, 22, 24, 26 etc) or CAREGIVERS, people working in the field (# 10 - psychiatric nurse, # 20 - president of NAMI, Vt.)

It begs the CONSTANT question: Then WHERE ARE THESE PEOPLE NOW? WHY AREN'T THEY HERE? We need to hear them directly, know PROOF of their drugs and dosages, see their health for ourselves. Family members complain for the pts: “How they lost a year of their lives”, but we are not hearing this from the pts. themselves. And the fact is, far many more testify how many More years they lost (even forever, in the form of a permanently altered life) once the drugs were forced into them, permeated, poisoned, and even rearranged every possibly facet of their mind / body / even spirit. Even just the trauma alone is easily comparable to rape, or the worst possible beating. (Meaning: even someone who is beaten or raped *has a chance to HEAL / to regain freedom, privacy and dignity* / they are free to move on and remake themselves, free from NEEDLESS tyrannical legal conditions, public stigma, and the *boxing - in of the inner - prison of the drugs* / Also, *the side effects are often physically obvious and tragically, uselessly permanent* (up to and including full blown unemployability, and Disability, and - only now- dependence on often adverse family members)

I do not feel it is at all possible (# 22, D.Q.) to compare several months without forced drugs to “seeing a family member with cancer without treatment” (except from a position of obvious and safe detachment; or possibly resulting from a grievous lack of medical information. That, or a pressure tactic in favor of the drugs). There is no conceivable correlation between the rapid spreading of millions of invasive, deadly cells, and the NON –metastatic pathology of mental illness (With far more harm and “growth” coming from 1st --- toxic family, home, work, LEGAL and environment issues, both emotional and material / easiest to fix by mere (true) love, honest respect, and life –choices, 2nd --- health changes, (diet, toxin cleanse, and real exercise) . There are just the finest self - help books out these days, more than ever coming straight from the mouths of the consumers themselves (found even in thrift stores). Also it is very

helpful to explore the Spiritual as well as the medical . And if all else fails , then early , sincere , DRUG – FREE , MEANINGFUL PSYCHOTHERAPY (done by an honest doctor. But I have to say , I do not know of a single one in this whole end of the state . Sometimes the best therapy is what one gives to one’s self , with the help of good books, and spiritual growth, friends) . BUT IT MUST START OUT AS DRUG – FREE, IN ORDER TO GET A CLEAR AND UNAFFECTED BASELINE AND INSIGHT INTO THE PERSON AS NATURE (and life) MADE THEM!

(Can these caretakers be sure to even recognize a real , actual , sound diagnosis from a construed , traditional textbook claim ? And are those even based on facts (given the legacy of psychiatry to date , and the tendency to only further “ cover the a__” as the deadly filth of the lies , and so the liabilities , grow higher and higher ? Can the old really know (100 % remember) youth ? Can the constrained or repressed really know the artistic , the flamboyant or liberal ? Can the sedentary , unhealthy or exhausted really empathize (know) the “ manic “ athlete in their prime ? Upon getting wind of child’s sudden mental health “ crisis” (with kid living away) : once arrested / possibly medicated , does the family member still know enough about the kid to know his present nature / the true facts of the event , case / and then the technicalities of the purported ‘ diagnosis ’ now attached to their son / daughter ? In the case of # 24 , J.C. (along with all the severe instances she cites , but remain unverifiable to us) , she even cites what amounts to the most basic kind of coercion, even life threat (even if it was not intended as such) : demanding to be part of the treatment , as a condition of not leaving the son to starve , literally , as he had no food . BUT REMEMBER : THE VAST AMOUNT OF VSH PTS WRONGFULLY (unethically , un-healthily , un- informedly) AGREED TO TAKE THE DRUGS VOLUNTARILY IN ORDER TO GET OUT OF THAT DANGEROUS PLACE ASAP (no matter how young , strong , healthy , virtuous , free - spirited , SANE (succumbing to , always , the doctors’ threat of the Involuntary petition , really) . The sad irony was that their survival tactic , used just to get out of that dangerous place , was actually the very same danger infiltrating every pore of their body and mind , once they were “ safely “ home , where often side effects commenced in earnest (and out view of concerned activists, and other patients . Any doctor that charts this as a “ triumph” for himself , or ‘ wellness ’ for the patient is a Liar , just never got caught at it). Some of these same patients might actually have beat their Forced -- Drugging petitions if they dared . If they could speak , or research , without reprisal . If they had adequate council .

These caretakers claim they cannot “ live with themselves “ if things got bad or worse due to “ the illness “. BUT THE ONE QUESTION WE NEVER ONCE HAD ANSWERED HERE IS : HOW DO THEY LIVE WITH THEMSELVES ONCE THEY SEE THE RUINATION OF THEIR LOVED ONES MINDS , HEALTH & LIVES **AFTER** THE RAVAGINGS OF FORCED MEDICATIONS ? AFTER THE GRAND DECEPTIONS OF THE DOCTORS AND COURT SYSTEMS , (AND NO possible JUSTICE TO FOLLOW ? None really possible , when you think of it at that point). HOW DO THEY then ‘ MAKE IT UP ‘ TO THE LOVED ONES THEY (even unwittingly) HELPED TO RUIN ? IS IT EVEN POSSIBLE TO DO ? DO THEY EVEN BOTHER TO SHOW THE SAME ‘ CONCERN ‘ BY CONTINUING TO CARE FOR THEM , if needed , possibly for many years ?

---- What exactly is "Pleasant, was stabilized, was working when on meds", etc. vs merely opinion or the possibility of family control (Meaning: Might his lack of work have to do as much with the recession? And is he now "needing disability", not because of lack of meds, but BECAUSE of a total (on and off) of 14 years ON the medications?

---- What exactly is the stated "significant decline in his health"? Be it physical or mental health that is meant here, It is a well-known fact that it is the meds themselves that seriously erode a patients' health, often apparent years later ** (websites). This pt. may not have needed "more meds"; just the opposite -- any reaction could have been the robust reaction of his newly, recently acquired drug-free state -- his TRUE health (mental and physical) that was in fact trying to re-emerge and throw off the detrimental toxic effects of the long time (in #4's case **, from 2000 to 2010) of being under meds; a normal healthy mechanism of the body trying to regain its own natural balance! (Even so the "tying up of bed space here" could have more to do w/ the wholly avoidable issues of prior case management, that is, abuse of meds and or legal issues). Also, the abuse of all other patients is done pretty much routinely; the fraud, the opportunism, just to keep the hospitals going at maximum capacity, no matter what. That is certainly what VSH did for decades.

--- re: #6, H.F.: Here we really need her son's testimony for ourselves to really be sure of this alleged Anosognosia. This "inability of the diseased brain to realize that it is diseased" may or may not be as claimed. If the meds 'helped him in the time prior' then why didn't he happily go back to them now? There is no disputing that the horrible, windowless, tension-fraught confines of the Emergency Room cell is NOT a soothing, normal representation of life (and of how someone normally acts on a regular daily basis). It would make any condition far worse quickly, and indeed could even begin to drive even the very sanest person insane; more than ever when someone is being bludgeoned with the constant coercion and threat of not being allowed out, ever, until "they take their meds". (6 weeks **) BUT REMEMBER: that we all would not have this unnatural condition in the ER's of general hospitals IF the state mental hospitals could be TRUSTED!! If there was not always all this over-the-top, sickening abuse, then people would not be afraid to venture there on a voluntary basis well before crisis. Is someone overlooking the fact that he might be refusing his meds because he found them unnecessary at best, and unbearable at worst? (Or, nowadays it is already well known what meds have done to many others?). Then the trauma of the son "shutting the parents out of the process" .. BUT: if they sided with the pro-drug coercion (however well-intentioned), then how can this be truly patient centered? If once after meds, "he was no longer a danger to himself", Might this be just because he was too numbed, concretely subdued and zombielike to "harm himself" (maybe to move in general!) as opposed to actual "healing"? And if now, "not cured, but no longer hostage to ... his disease" MIGHT it possibly be that he is now instead merely a hostage to the meds itself? which are actually much more damaging and eroding to the persons entire mind/body/spirit health than any of the so called "ravages of the (alleged) mental illness" ever could be. These meds do not usually "pull someone back from the brink", rather they are the cover-all bed of sensory concrete that the patient is

trapped and solidified under . The constant frozen horror (when involuntarily given) and the helpless , stultified state that they are imprisoned , encased within .

H.F.'s Q: The mother here summarizes by saying " How can we allow 'every' civil liberty to be removed from someone POSSIBLY a danger to themselves or others -- "

A: -- and POSSIBLY NOT such a "danger" ? But forced drugs are not a "civil liberty"; they are the exact opposite: They are usually the VIOLATION of all civil liberties , (when resorted to first option , as opposed to other remedies in the Patient's Bill of the Rights / Civil procedure, statute / Constitution) . They are the dead - ended failure result , when every other viable option (all other TRUE civil liberties , like the least restrictive setting , or choice of alternative therapy) has been skipped over or deliberately ignored . Also , NOTE : that the drugs remain no less a "liberty" , because her son remains free to take them if he wants . But he is refusing them for a reason !

H.F.'s Q: " How can we allow , indeed insist on not addressing the conditions which necessitated these drastic deprivations of liberty in the first place ? "

A: Because by allowing the son's true civil liberties ----WITH optimum , individualized , honest and ethical care (also respect , therapy , effective life changes) ---- WE ARE indeed addressing these problems !! They were never " Not addressed " ! This is the typical propaganda of the psychiatrists and proponents here , attempting to forcibly brainwash everyone in their path , that the first and foremost , " Only " treatment is " medication " ... that " therapy is ' only ' effective when coupled with a cocktail of " medications " . (Sound familiar ? we have heard it time and again from the VSH doctors) . It is a shame that the majority of parents fall for this sort of immediate cardinal Lie , instead of believing their own GROWN children , that they are refusing the meds for a good reason !

H.F.'s Q: " -- Before the availability of anti - psychotic medications , sufferers spent months and years in institutions -- "

(A: Years ago psychiatry was even more ignorant and malicious than it is now (if that is even hideously possible !) With many , many people deliberately , fraudulently committed for reasons since recognized (or admitted) as being NO mental illness at all ! Such as a certain VSH patient who was IN ALL HER LIFE , since her teens , over 35 YEARS !! JUST BECAUSE , AS LATE AS THE EARLY 1960'S , SHE HAD GOTTEN PREGNANT OUT OF WEDLOCK !! (this actually admitted directly by one of VSH's own nurses) . (See " Rebuttal pg 34 / also " vsh 7 " pg 1) These nurses also pointed out another " lifer " , an old woman (now totally incoherent) whose initial " diagnosis for Schizophrenia " was merely the skin - itching sensations caused by severe diabetes . The ensuing decades of total confinement and heavy medication -- of totally robbed life ---have reduced her to an unbathed , inarticulate , obese 3 - year-- old - mentality state . Or another wonderful little old woman : stuck in VSH for many , many years (and hellishly abused , almost to death) just because she had been an ex - (Catholic) Nun who dared to leave the order and get pregnant ! See " Vsh7 " pgs 2 , 3)

Or innocent people committed just to get them out of the way (husbands committing wives who were "too rebellious" or "too ambitious"). Or family members ganging up on another family member because they wanted his / her share of the land / inheritance / or just didn't want them around. A young girl kept in VSH her whole life , even with no symptoms , simply because she was A FULL - BLOODED NATIVE AMERICAN ** (article from a Vermont magazine).

THESE POOR PEOPLE WERE " in institutions for months and years " NOT because " anti-psychotics were unavailable " BUT BECAUSE OF THE MONSTROUS CORRUPTION (evil & sadism) INVOLVED IN SHUTTING AWAY UNDESERVING , often SANE, PEOPLE JUST BECAUSE THEY COULD ! Typically the more sane -- the greater the doctors' "error" and so crime --- the longer they tried to hide it by keeping them In ! A PRACTICE THAT HAS OBVIOUSLY NEVER ENDED to this day ! (I, myself, [B.McC. # 13] was threatened by VSH's Dr. Duncan "that he would keep me in VSH 'the Rest of my Life !' unless I took my meds !" -- this when my committal had NO rightful basis to begin with ! see " Rebuttal " pg 17)

With the brazen , crowning , satanic sadism being that --- even after VSH shut down ! ---these 'doctors' are left free and unpunished to perpetuate this worst of lies (among and THROUGH the un-informed family members of SILENCED victims , no less !) IN ORDER TO ROUND UP YET ANOTHER FULL HOUSE OF UNDESERVING VICTIMS !! And it is the doctors' lie that "before .. medications .." because Thorazine and Haldol (2 of the worst) were very much in use during those hellish , rock - bottom days . They were used as chemical lobotomies .

H.F. : " The powerful medications developed over the past 60 years ' can alleviate many of those symptoms-- "

A : " Alleviate " ? Or NUMB utterly ? Or Knock down and OUT ? Please the doctor or "care"taker,. BUT NOT THE PATIENT ? ! CHEMICALLY INCAPACITATE , and "subdue", like a tranquilizer gun used on a wild animal ? Rob someone of all their rightful senses and function ?

H.F. : " Professional judgement , not arbitrary time limits , should be the deciding factor how best to restore the patient's reason .."

A : Here the mother assumes her own idealism will be realized by S.287 , when by its very wording (and when juxtaposed by past hospital "tradition") all we will ever get here will be even LESS ' professional judgement ' because they have consistently gotten away without even the pretense of it in the past ! When you will now have even less patients lucid and able to build and maintain their own cases (and treatment plans) once they are so swiftly OR WRONGFULLY DRUGGED . Which will be the thing to ROB the patient's reason , not " restore " it.

IMPORTANT : But what when the so called Anosognosia is actually not failure to self-realize but the PERSON ASSERTING IN TRUTH THAT THEY REALLY ARE NOT SICK AND DO NOT ' NEED MEDS ' ? Why grant doctors even more ability than they have now to slip around a patient's stated (and supported) facts (and thus their undeniable competence) by subjecting them to

ANY AMOUNT of less time with which to organize their records/ access needed records and witnesses and internet research and downloads/ and BE ALLOWED FULL TESTIMONY (NOT be completely IGNORED and DISALLOWED as I myself (# 13, B.McC.) was, at my committal hearing ; the “ record was closed “ without explanation or justification by Judge Walter Morris , Jr. ; the second we tried to present my valid written rebuttal and argument to indisputable evidence already long filed in his court (my public defender presented no defense whatsoever , and ignored my letters for such . The photocopied documents of these and my own case in general are already long submitted [emailed ‘ to all members of this committee re : the past bills]) .

How is force medicating someone “ addressingnecessitated... drastic deprivations of liberty ...” when it apparently DOES NOT HEAL? when it renders someone incoherent , COMPLETELY UNABLE TO REMEMBER (and organize , or relate ?) When it makes them miserably unhappy ? Makes them often unable to assert (especially when they are alone , & threatened with ugly force or more poisonous toxic meds , if they are telling the doctors or the court the truth , when this truth is something the doctors do not want to hear) . This when they are behind bars and HAVE NO ACCESS TO THE OUTSIDE WORLD , TO THEIR own LEGAL RECORDS , TO INTERNET , TO THEIR CHOICE OF LAWYER , to gainful employment which is the only way they can afford their choice of lawyer ! S.287 in fact is the thing which would allow every last civil liberty to be removed , not the lack of S 287!

In the case of # 12 , D.W.L. , this mother quotes her son as saying , “ one of the things that helps is the right medication IF NEEDED “ . Please note (provided this is true to start) the use of the word “ right “ (a relative rarity ; the vast , VAST majority of the patients in VSH “ Rebuttal “ and here tonight (ALL at the Vt. Statehouse Jan .30 , 2014) have found only acute suffering from the drugs , and I stress here again , NO RELIEF) . Also the term “ If Needed “ , implying immediately here that he has always the RIGHT TO REFUSE , the dignity to be able to make that choice . (That is a choice that , honestly , literally , no one else can make for him . But please NOTE : that in ALL the many patients that I knew (full house @ VSH ; I include here the % of those who went home with COERCIVE voluntary orders ESCAPE PETITION , AND TO GAIN RELEASE . Once home , they were threatened with the full petition (and court order) if they wanted to change things) . And so : they were not allowed that choice by the doctors , even once they were home ! But for the son here , NOW THAT CERTAIN MEDICATIONS HAVE BEEN FOUND TO HELP HIM , THERE SHOULD BE NO NEED FOR FORCE . The poem he (supposedly) wrote is certainly hostile and disordered . But I have seen on many occasions in VSH , where , on the sole basis of a poem , or random statement like that (half the time even kidding around ; or venting out anxiety CAUSED by the confinement and abuse) a person has had an involuntary medication order landed right on them faster than they knew how to parry (or in the form of the usual pre - petition coercive threats to “ take it voluntarily or we’ll bring petition “ which such patient (merely not being a professional litigator , and of course not represented adequately by council) usually loses and ends up with far more (and more intense , damaging , and retaliatory) drugs . And then has that gradually upped or worked , by sly

doctors , and against his will , into a lasting , binding order).

The point I want to make here is : even if a patient has a real and actual serious mental health issue -- and need-- the doctors more often than not ABUSE THAT RIGHT and opportunistically maximize on the treatment , giving as much as they can possibly get away with on paper . And if the person gets ill from it -- even deathly ill -- they ignore their suffering , in fact even increase it ! Claiming it justifies the need for more amount , more variety , or “ a longer trial “ (always a longer trial !) of medications .

This goes far , far against the grain of what D.W.L.'s son meant , when he testified what “ did work “ . Also , please note the use of his words , “ IF NEEDED . ” Right there , you have the main thing : he is alleged to have free will in the matter ; also that these powerful chemicals are NOT to be taken IF HE DID NOT need them . BUT THE LEGACY OF FORCED DRUGGING IS always THAT THE DOCTORS DO NOT LISTEN TO THE PATIENT AND THEY DO WHATEVER THEY WANT WITH THEM , however dangerous or degrading !! THEY DO **NOT** GIVE THEM FREEDOM TO CHOOSE ! (How did her son ever get to be an exception ? !)

Because what is the true intended , medical , AND SO LEGAL purpose (at least legitimate , lawful scope) of this or any drugging bill ? The patient's return to wellness . At least that is the only decent , acceptable purpose and outcome .

And what are the key indicators of wellness ? Right up there , every bit as equal with acceptable life functioning , is HOW THE PATIENT FEELS . (A basic standard of humane treatment ; the modern world seems to conveniently forget in favor of other , far more unworthy agendas) . If the patients don't feel good --- more expressly , if they still feel horribly sick or miserable , mentally or physically --- whether as a result of the illness or the drugs or not -- then WELLNESS HAS NOT BEEN ATTAINED . And so then the program has to be fine -- tuned further to suit the Patient , NOT the System . It is supposed to be , before anything else , a Patient -- Centered system , the laws also .

But my main concern with S.287 (and all force drugging in general) is that EVEN WITH THESE LAWS IN PLACE , WE HAVE SEEN NOTHING THE VAST MAJORITY OF THE TIME BUT WANTON , UNCHECKED VIOLATION OF THOSE LAWS BY THE very MANY people who are being PAID WELL , in these economically hard times , put in a POSITION OF TRUST , supposed to HELP VULNERABLE ADULTS AND CHILDREN , and instead routinely , insidiously , ASAP , DO JUST THE OPPOSITE , and SADISTICALLY MAXIMIZE THEIR ABUSE . And all I ever hear is that they all got away with it , again .

The due process rights imbedded in these bills are there for a good reason : they are supposed to keep people who do not need the drugs from having them poured into their systems for months or even years on end . S. 287 would only vastly increase the likelihood that patients like D.W.L.'s son here --- who even know what works for them ! --- would have that summarily violated by just one more doctor who simply sees nothing more than he can get away with doing this .

The mother here (like all the other parents and "care" givers testifying here) does not know force drugging first hand (in the form of her own internal dosage) or she would not make the concluding confident claims about S.287 . The Facts are :

---1) S.287 's " speedy court process " does nothing to better guarantee the ACTUAL TRUTH and LEGITIMACY of the court process (WHICH is the MAIN THING , the health , safety , wellness and legal rights of the patient , NOT the convenience , laziness , whims, money gain or power - trips of anyone else). In fact S.287 is custom designed to encourage shortcuts / disregard / doctors' fraudulent claims of " urgent need " and always " Patient's ' agitation ' or ' swift deterioration ' without the meds " when in reality it is a patient's REASONABLE , understandable distress , panic , anger , or attempts to leave facility when they see things are moving needlessly but quickly towards forced meds / this when they're obviously not being listened to and court - appointed " council " is apparently chiming in with whatever the doctor or the courts , or the DCF wants (for when the DCF wants someone's child regardless of facts , the only way to get it is to force drug the protective parent) ... and so , corruption . As is we don't have enough already ...

With S.287 , there is a far greater chance that someone who does not need --- who MUST NOT BE force drugged (especially one who is essential to the integrity of their own court case) that they will be harmed and impaired possibly for life , as a result as this bill's proponents' sheer zeal just to have themselves a " speedier court process " . Which is so often just railroading a person into jail when someone desires this. " Streamlining " , the usual candy - coating that this country of ours has traditionally handled the worst of its problems with , to the detriment of those suffering , and to the blithe convenience , greed , or power trips of those in control .

2 -- this mother envisions ' Patient - centered ' treatment as a result of S.287, but nothing could be further than the probable reality if this bill becomes law . IF THE DECADES OF ABUSE IN VSH AND OTHER FACILITIES HAS GONE 100% UNCHECKED AND UNPUNISHED BY THE STATE OF VERMONT to this date ---- as it has --- THEN WHY SHOULD WE DARE TO DREAM IT WILL BE OTHERWISE UNDER S.287? Which would only make summary processing and abuse of vulnerable adults many times easier than it already is . Namely by eliminating to any degree the automatic stays NEEDED until the Appeals process, in the case of a DELIBERATELY MISREPRESENTING and MANIFESTLY UNJUST LOWER COURT like the one I had (# 13) , and like many -- most -- at VSH had experienced (for example my own case , see " Rebuttal " pgs .5 - 7 , 8 - 15 / other patients cases pgs. 16, 17 , 19, 21 , 26 , 27 29 , 30 - 32 , 35 - 37 Also " vsh 7 " pgs. 1, 2, 5)

3 -- like all the other parents here , the mother here envisions that S.287 will insure that the pt . will be " allowed to make clearer decisions when in a more balanced state of mind " . But REMEMBER THAT, FOR THE VAST MAJORITY OF PEOPLE , THE DRUGS DO NOT WORK LIKE THEY allegedly DID FOR HER SON . They only wreak havoc upon the pt, with no greater " health " attained , and certainly no better " justice " within their court case .

4 ---- she envisions S.287 as helping people to “ remain safe “ as well as “ people in the community “ . But she is entirely misinformed on this , or is overlooking the often presented , abundant facts : That VERY FEW PLACES IN THIS COUNTRY ARE MORE DANGEROUS THAN THE INSIDE OF A MENTAL INSTITUTION (or a prison than allows forced – drugging) . NO WHERE ELSE is the slightest expression of personal freedom , or the smallest unintentional offense --- or even the MEREST INSISTENCE UPON THE (legal) TRUTH more quickly and viciously leaped upon as an “ excuse “ for the most severe forms of vicious assault and battery (the so – called “ staff “ using the brutal , unneeded force of a football team to “ subdue “ a “ combative “ , terrified patient (this term ‘ combative ‘ has been used in VSH to describe harmless , elderly patients who were just waving their arms in terror , trying to get away from the brute force and the poison needle coming at them (see “ VSH 7 “ pgs. 2 , 3 ; also any pt. who dares to say the word ‘ No ! “ at all (even when they HAVE the RIGHT , under the “ Patients ‘ Bill of Rights **See “ Rebuttal “ pg. 30 , 31 [this elderly patient did later DIE AS A RESULT of VSH ‘ s supposed “ care “ ; the elderly lady mentioned before him suffered a massive heart attack and almost died . She was one of the few that got to be taken out of VSH for her own good. Probably only because of her age]) . Or a patient who understandably tries to resist an UNWARRANTED force - drug attack that involves the UN-NEEDED stripping them from the waist down (a wholly unnecessary terror tactic , with its sadistic - intimidating facsimile of rape) , B.McC # 13 “ Rebuttal “ pgs 4 , 5 . Besides the obvious , life - long trauma , these attacks have led to serious physical injury : both of which have been whitewashed by the doctors and the courts

Just to use one comparison : one is in CONSTANT , GREATER DANGER INSIDE hospital than out in the deepest woods , or on the roughest city street . Animals are relatively rare , and rarely ever attack . And even in the baddest , “ bad “ neighborhood there is usually some reason a conflict started ; and so , often a subsequent human way to avoid it . At the very least , an all - out foot race . In the “ hospitals “ , you don ‘ t even have these normal , healthy , dignified , natural fight – or – flight options . (It could literally be said that , once incarcerated , one has less options and legal rights than *a squirrel ! How low will human dignity be allowed to go nowadays ? !*) Even if what you say or do might be 100 % totally reasonable or LEGALLY TRUTHFUL : if the “ staff “ has been ordered by the doctors (who have been illegally “ ordered “ by the courts) to silence you (“ Rebuttal “ pgs. 3 , 4 , 7 , 8 , 14 , 15 , 16 , 19 , 21 , 27 , 35) , (or “ discourage “ you) on an issue : then it can literally cost you your life , or your life – long health , to get these DEGENERATE , CRIMINALLY – MINDED TYRANTS angry .

No , in summary , the only ones who feel “ safe “ here are the family members , who have in fact , turned their backs on a vulnerable family member , and handed him over to be LOCKED inside , to a very uncertain fate , and with the most uncontrollable , most dangerous possible company .

5 - As for the “ legal and timely parameters “ mentioned here ---- they ALREADY EXIST without the “ help “ of S.287 (It is not as if S.287 is “ creating “ these for the first time) . And in their present , more moderate and due - process - safeguarded form , they STILL do not ensure

that the system will “serve” these poor people --- and (just as important !) leave alone the ones that do not need “services”.

The last paragraph sounds an awful lot like the sheer propaganda jargon of pro - forced - drugging groups like NAMI . In fact it sounds like a direct quote used , many times that I’ve heard , by them and the staff of the now closed VSH .

Regarding #10 ,psychiatric R.N. VM, I heard everything that I expected to hear from someone in this field ; it was exactly like being back Inside 10 years ago : hearing all the staff from the (now terminated) VSH testify in court shamelessly , zealously , fraudulently & tirelessly in favor of the toxic dosages forced upon helpless (and not present) patients -- even as those very same patients were (at that moment !) right back in their rooms literally *DYING* of those very same drugs --- but not being allowed a choice -- or a voice , or even their day in court .

But to summarily rebut here :

---the ‘number of years , and places , and treatments she has experience ‘ should MAKE her testify FIRST and FOREMOST to the needless ABUSE of the patients !! To the damage and needlessness of the drugs and treatments ! Which she doubtlessly has seen , as this situation is rampant in virtually every state of the country ! If she is truly patient centered , if it truly “breaks her heart “, and if she truly has the “love for the patients “that she claims , then these are the words we should be hearing ! Not this (and only this) pro -- forced – drug personal opinion , that is unthinkable in someone with so much experience

---claims “ I’ve been doing this for 17 years , and I’ve never been hurt “ (which means there is NOT the universal need for drugs that she claims , RIGHT ?) “But I’ve been hurt 2X over the last 2 months “ (So is she this alleging this happens in Vt. alone ? Right in time for S.287 ?) PLEASE!!!

---We know nothing of the specifics of the case involving the pt. who kicked her , and certainly no testimony from the pt herself . 1st of all : Why was she in Restraints to start ? Was there even a valid reason ? As cases DO abound , where the use of R&S was COMPLETELY UNPROVOKED and UNJUSTIFIED , opportunistic and sadistic . Many , many times was this the case at VSH (See “ Rebuttal “ pgs. 1-5, 26 , 30 -31, “ VSH 7” pgs 2 & 3” : it states on the Decertification report that this was in large part the very reason they were decertified . See “ CMS report for Decertification of VSH” (with Proof of mailing from CMS) which has been lodged with every member of this committee for many years now).

2nd ---- no matter what , it does NOT amount to some kind of immediate atrocity that “ she was in restraints and she was not medicated ! “ The Patients’ Bill of Rights states and demands (at all times , EVEN during emotional times !) that the “Least Restrictive environment (or treatment / method / alternative) is the thing to be used , NOT whatever the staff “ feels like doing “. And so , if restraints were actually warranted (which we have no proof here) then it would actually be better if she were left clear headed and able to think things through . And calm down on her own, not be force drugged into some facsimile of submission that has no real basis or agreement in her own mind, and just leads to future bitterness . It is , after all ,

just more force). She should at least be given that choice, at least freedom of thought !
And -- again!-- we will never know this patient's side of things (even though she is apparently within Vt.).

----3rd ---- time and again , not only I complained (but CMS corroborated , with their seizing of the patient files , and Decertification) that REPEATEDLY , RESTRAINT & SECLUSION & FORCED DRUGGING happened without VALID reason given---- or ANY reason given !! (it says so right there on the CMS report !) And so in these cases it verifiably meant WITHOUT A VALID REASON -- for certainly none was given afterward as a defense . For : a harmless , decent woman was attacked in VSH just in order for staff to " try out " a new restraint bed , and another (very small lady) attacked just to illicitly gain very large amounts of her blood for unknown reason .

THESE WOULD HAVE BEEN AMPLE , LEGITIMATE REASONS FOR ANY PATIENTS TO LASH OUT IN TERROR OR SELF-DEFENSE, anyone would have done their best to keep these monsters (the staff) away from them. WE DO NOT KNOW THAT THIS WAS NOT THE CASE HERE with this nurse testifying today , or similar , and until we know , the clinician cannot be taken solely on her word alone . Here as also in

----4) " a patient involuntarily medicated with the proper medications will calm down and be allowed to be escorted back to their w/in 15 - 20 min " . I have seen this and the following appeal for " streamlining the system " used as a candy coating for some of the worst brutal silencing of a human being and blithe overriding of human rights . What is really meant is that the patient has been compromised to a near - zombie status , NOT that they've suddenly become sweetly in agreement with whatever might have gone wrong -- or even that they should do so ! Remember that " Proper " medication here does not mean good or healthy or even remotely safe for the patient ; it means whatever mind destroying cocktail most quickly reduces a capable , vibrant individual to a near zombie , regardless of side effects (temp. or permanent.) , let alone the life - changing trauma that comes with being treated worse than an animal . THIS is the part that is inhumane , not the failure to use these drugs .

Noteworthy is the fact that this clinician does not mention this . Which shows we need to err most on the side of caution , that is that the patient might have all the merits here and MIGHT never have needed any kind of " treatment " at all ! Much less the full horrific , medieval gamut of Restraint , Seclusion and Forced - Drugging .

---5) among herself and her colleagues , it is " unconscionable " that a person be put into hospital but not ' be treated ' . But all these testimonies , over all these years, decades , in all these websites and many books (here in Vt. and all over the country) never once has it been proven that these medications were EVER any actual " treatment " ! That they were ever anything else besides mind altering toxins used for financial gain, for short term and long term control , and for legal torture and coercion . That is the ONLY word coming from the only group that has EVER had the meds IN THEM, and that is we who have been force drugged . And it is " unconsciable " that she not knew this , or pretend not to know this. If she and her colleagues are so " experienced , in so many states " and " compassionate " , then why aren't we

hearing about the sheer amount of people who have been hospitalized without good cause / or for far too long a time / humiliated , their lives stolen / and always , force - drugged with the inevitable life - ruining side effects but NOT ever any ACTUAL HEALING ?? !!

_____ Re: # 20 , W.B. : How can one be the president of NAMI VT and not know the experience of having medications forced on herself ? Meaning : To what degree can one really say " they know " what is needed to professionally KNOW about forced medications , when they purport to aggressively lobby for these drugs " on behalf " of other (absent) people ? (It also begs the question here : That if this bill S.287 matters so much to NAMI, and if this one man's story is so central to that goal , then Why did he not catch a ride to the Statehouse with W.B. on the night of Jan. 30 , 2014 to testify ?). As for this man B.P.'s hearsay testimony --re : his " credentials , from here we know nothing of the places he's worked (just as many all over the US and VT did not truly how deep the horrors were at VSH, for decades , until it was finally closed). Howard Center is NOT patient centered and has , among its graduates , the so - called " Behavior Specialist " DONNA DUROCHER (of Millers' Run School , Sheffield) who (see " Rebuttal" pg 10) FRAUDULENTLY ALLEGED EDUCATIONAL NEGLECT OF MY OWN SON (B.McC. # 13) RESULTING IN HIS PERMANENT REMOVAL (from me) BY THE VT. DCF , ---- even as 3 different , licensed Vt. schoolteachers attested to the adequacy AND integrity of his schoolwork AND so our home - study program , (therefore our satisfaction of the Home Study statute 166 (b) ; therefore we were never " truant " . Let it be known that one of these teachers is the wife of Vt. Judiciary Committee's Sen. JOE BENNING ; her letter to me (re: verification of this) is still on file here with Health & Welfare , along with the rest of my case documents (for previous bills) . Certainly I still have the indelible record of it ! And Durocher has long since been terminated from her position at M.R. school .

And as for the SAMSHA Grants in general , let it be known that one recipient of such is VSH. Former " Medical Director " Dr. Thomas Simpatico , he who presided unrepentantly over the worst - of - the - worst abuses there for years , including the state's kidnapping of my own son . Either SAMSHA pretends not to know (despite many newspaper articles , and the 2nd CMS Decertification) or they do not care who they give such grants to .

Regarding B.P.'s (now , 3rd - hand) testimony on behalf of (now unidentifiable) patients ----- I'm not interested. And I sincerely hope that no one on either of these committees is either until we are all furnished WITH THE 1ST HAND TESTIMONY OF ALL THE PATIENTS THEMSELVES who were drugged or FORCE DRUGGED AND AFTERWARD ACTUALLY " CLAIMED " (in a provably coherent , non - threatened , non - coerced sort of way) THAT THEY WERE ACTUALLY " HELPED ' BY THE DRUGS . Something very interesting here : Please notice the use of both (alleged) Mr. B.P. and his contact R.F. repeatedly (ALLEGEDLY !) citing the phrase " For First time patients these drugs can be ' very beneficial ' if started immediately etc . , etc (The same exact phrase and spiel the VSH doctors used to use)

Is no one here ----- has anyone (anywhere , ever !) asked the glaring question : " WHY JUST FIRST TIME PTS ? "

--- Isn't it because they don't know any better ? And may foolishly trust the doctors ?

--- Is it because their initial health is fresh , but that LONG TERM PATIENTS INVARIABLY SUFFER DAMAGE FROM THE DRUGS ?

--- Is it because “ returning to a rewarding , productive life “ here only means the only type of lifestyle ‘ approved ‘ by the (unethical) doctors, and ‘ allowed ‘ by (very possibly) unfair courts?

--- Notice the use of the word “ recalcitrant “. Why not use the word “ option – seeking “ , or “ health - minded “ , “ holistic “ , “ self – reliant “ , (wanting to try psychotherapy first) ? I am not surprised at all to hear NAMI incline headlong toward a word with authoritarian undertones ; hinting that a person who simply wants to try out natural (healthy , perfectly LEGAL) recourse first is somehow being “ willful , “ or “ stubborn “ or unruly . And as always , in need of a (NAMI - approved) firm , strong , totalitarian hand .

--- Most tellingly, he claims that S.287 is , here , apparently the ‘ ONLY ‘ way a person can get a “ fighting chance “ to “ never graze the inside of a mental health facility .. hospital again “ .

WELL : now HOW ABOUT THAT ? How about the psychiatric survivors here in Vt, (many of whom testified at the Statehouse on Jan. 30, 2014) who actually DID succeed in beating our Involuntary Medication Hearings at VSH and elsewhere ? (Yes , there were actually a few ! the doctors do not ‘ always win ‘ : it is not “ inevitable “ and they are not “ indomitable “) . I myself (# 13 , B.M.) beat not only 1 but 2 such petitions , and like ALL the others who beat theirs , I went back to resume the hard – working , rewarding , productive life I ‘ d had before (Which , by the way , would have verifiably been grossly hampered or made impossible – NOT ever “ helped “ -- by forced drugs.) What about Rep. Anne Donohue , there in our midst ? Told by the doctors “ she would never heal “ , she went on, not only to heal , but to run a successful newspaper , and be elected as a Vermont State Representative ! Most of all , WE HAVE ALL STAYED OUT ! --- Or is what R.F. trying to (ALLEGEDLY) maintain is that “ the only ‘ fighting chance ‘ we all ever have [at not being in danger of thrown inside a mental institution] is to just accept these forced drugs [whether we need them or not ; whether they kill us or not] ? . But rather that this blood sacrifice would be the ONLY thing to appease these rabid “ doctors “ , and get their assurances to not look our way when it comes time to fill the Commitment quotas ? (For they cannot seem to bear , for long , empty beds). Now THAT I would believe !!

--- the final insult to our collective intelligence here , is when he (ALLEGEDLY) maintains “ at least , forced drugging (his “ outside maintenance “) is a chance to get some ‘ R & R ‘ , ‘ some respite ‘ from life ‘ s daily challenges “ . It takes the cake . Because IF life is even regainable after the doctors have had their way with you , and after an exhausting bout with mind - altering , metabolism -- changing , forcible drugs ---- even IF there are (miraculously) no side effects --- then I can think of nothing that is FURTHER from “ R & R “ or “ respite “ than trying to jobhunt all over again regain your lost housing , reputation , pets , and ALL your costly , precious , personal possessions (out from some obscure , or costly storage , if they were not thrown away !) . If you missed mortgage payments , knowing what it takes (when just out of hospital , no less) trying to appease those people ! If the estate was lost , the state here has shown NO ACCOUNTIBILITY ever in the retrieval of it (see “ Rebuttal “ pg 25) AND THIS INCLUDES PEOPLE MADE NEEDLESSLY TO LOSE THEIR ENTIRE HOUSES AND LAND !!

(I can say this because VSH almost made me lose EVERYTHING I ever had ,incl. all my pets-- all for nothing ! I DID lose all my dairy goats AND my ONLY CHILD !!! And never got him back to this day !)

I should add that the only people who would even be able to convalesce afterwards at home would be a settled home with (supportive) family members able to take care of them (or of the bills). Virtually EVERY PERSON I saw leaving VSH on forced meds left there in a HIGHLY IMPAIRED STATE (read " Rebuttal ") and would NEED someone to TAKE CARE of them (anything from uncontrollable shakes to Tardive Dyskinesia , which can be permanent) / to inability to speak , read , write (well , if at all ; again , can be permanent , certainly long - lasting) / to SEVERE memory issues / certainly some car - driving issues / sleeping almost around the clock / absolutely destroyed energy levels , impossible to work hard , or raise children / or complete inability to take the weather (Neuroleptic Malignant Syndrome , can happen in the healthiest of young adults when force drugged , can be FATAL)... the list goes on ... But the certainty is they do NOT get " R & R " or " Respite " , that is an insult . (They do not even get a ' healthy sleep ' from the drugs : a forced - drug stupor is leaden / nightmarish / un- natural). All the victims of forced drugging get is an INTENSIVE , UNTENABLE REBOULEMENT of life's problems upon return : Jobs and money , and housing AND relationships AND CHILDREN and pets to be strenuously re - gained (& if not , lost and then having to be missed bitterly , and having to be re - earned all over again . IF possible .)

In other words : life undeniably ruined and lost .

This : when very often there was NO valid , truthful , legitimate reason for the committal AT ALL .

Or This : often when someone voluntarily sought " help " , with the very best of intentions...

Or worse , sought it in earnest for someone else.... No , thank you , we all " rest " well enough , in our present homes & chosen lives , without the " help " of S.287!!!

(to be cont'd / end of pt . 1)