Legislative Testimony given by Betty Barrett on 2/13/18

1.

THANK YOU FOR HAVING ME.

AUGUST/1989:

I BECAME A SUICIDE ATTEMPT SURVIOR. I HAD BEEN DEPRESSED FOR YEARS. I FUNCTIONED VERY WELL WITH LIFE, I THOUGHT,

BUT OTHERS AS WELL AS MYSELF DID NOT NOTICE JUST HOW DEEP IN DEPRESSION I ACTUALLY WAS.

LUCKY FOR ME.

I WAS LIVING IN WARRINGTON, PA AT THE TIME. I HAD CALLED MY GIRLFRIEND, WHO IN TURN CALLED THE POLICE, (I BELIEVE), AND I WAS TAKEN, UNCONSCIENCE, TO THE DOYLESTOWN HOSPITAL, IN DOYLESTOWN PA.

2.

I THANK GOD THAT THEY HAD A PYSCHIATRIC UNIT ON ONE OF THE FLOORS INTHE HOSPITAL.

WHEN I AWOKE, 3 DAYS LATER, I AWOKE TO THIS HOSPITALS WELL STRUCTURED FACILITY FOR PATIENTS THAT GO THROUGH THIS AS WELL AS OTHER MENTAL HEALTH ISSUES. I SAW A PYCHIATRIST AND MET WITH MY COUNSELOR. THERE WAS ALSO GROUP MEETINGS WITH FELLOW PATIENTS THAT WAS HELD TO TALK ABOUT OUR DEPRESSION, AS WELL AS THE PRO'S AND CONS ABOUT OUR CARE.

2 WEEKS LATER, I LEFT WITH APPOINTMENTS ALREADY SET UP WITH MY COUNSELOR, WHOSE EXPERTISE WAS WITH WOMEN WHO SURVIVED

3.

DOMESTIC VIOLENCE.

I CONTINUED SEEING MY
COUNSELOR FOR 2 YEARS, TWICE A
WEEK. 1 YEAR LATER I ADMITTED
MYSELF FOR 2 WEEKS. SINCE THEN I
HAVE HAD RECURRENT LAPSES.

WITH WHAT I LEARNED, FROM BEING IN THE HOSPITAL AND CONTINUING THE APPOINTMENTS WITH MY COUNSELOR, I KNEW MY COURSE OF ACTION AT THE TIME WAS TO CONTINUE WITH COUNSELING.

4.

FAST FORWARD A BIT: IN 1992 I MET MY HUSBAND CHRIS BARRETT, WE MARRIED APRIL 2ND 1993. NOVEMBER 1996 WE MOVED HERE TO VERMONT.

WE LIVE IN NEWPORT CENTER, IN THE NORTHEAST KINGDOM.

SEPTEMBER 30, 2004 I LOST MY SON, MICHAEL TO SUICIDE. HE LIVED IN PENSYLVANIA, AT THE TIME I WAS VISITING WITH MY UNCLE IN WILLOW GROVE PA.,

WHEN I GOT BACK HOME TO VERMONT, I LOOKED FOR A SUPPORT GROUP. THE ONLY ONE IN OUR AREA WAS CALLED "COMPASSIONATE FRIENDS". I WENT TO A MEETING AND WHEN THEY HEARD HOW MICHAEL DIED, THEY DIDN'T KNOW HOW TO RESPOND, BECAUSE AT THAT TIME SUICIDE WAS ONE THING "YOU DIDN'T TALK ABOUT". WE ARE MAKING PROGRESS WITH THIS.

5.

WE MUST IDENTIFY THE PROBLEM AND TREAT IT DIRECTLY. WE NEED SUPPORT OF THE HEALTH CARE SYSTEM TO PROVIDE RESOOURCES TO WORK WITH EMERGENCY DEPARTMENTS, PRIMARY CARE, INPATIENT HOSPITALS, TO USE CURRENT KNOWLEDGE ABOUT SUICIDE PREVENTION.

I WAS INTRODUCED TO A COUPLE OF PEOPLE IN 2012 THAT WAS STARTING AN

"OUT OF THE DARKNESS" COMMUNITY WALK IN NEWPORT. I BECAME 1 OF THE 4 MOTHERS THAT WAS THE COMMITTEE FOR THIS WALK.

THESE WALKS ARE DONE THROUGHOUT THE U.S. AND IS PART OF THE "AMERICAN FOUNDATION FOR SUICIDE PREVENTION" WHICH IS PARTNERTO THE VT SUICIDE PREVENTION CENTER AND HELPS SPONSOR THE ANNUAL SYMPOSIUM.

6.

BEING INVOLVED IN THIS HAS HELPED ME TREMENDOUSLY WITH WHAT I HAVE GONE THROUGH WITH THE LOSS OF MY SON MICHAEL.

SINCE THEN I HAVE BECOME VERY ACTIVE IN SUICIDE PREVENTION.

THE NORTH COUNTRY HOSPITAL IS IN NEWPORT. THIS PAST YEAR, I VISITED

THE ER 2 DIFFERENT TIMES AND NOTICED THERE WAS NO INFO ON SUICIDE POSTED ANYWHERE. WHILE I WAS IN THE TREATMENT ROOM, THE NURSES CAME IN AND STARTED REMOVING ALL THE EQUIPMENT NOT PERMANENTLY SECURED, AND ZIPTYING THE CABINETS SHUT TO RESTRICT ACCESS. WE WERE TOLD THIS WAS FOR A PATIENT COMING IN AND BEING PUT ON "MENTAL HEALTH WATCH". THERE WERE ALREADY 3 TREATMENT ROOMS

OCCUPIED WITH "MENTAL HEALTH WATCH" CASES. AFTER THE NURSES FINISHED PUTTING THE EQUIPMENT AWAY I WAS MOVED TO ONE OF THE AISLE AREAS THEY USE FOR OVERFLOW.

WE WERE INFORMED, THAT THE PREVIOUS YEAR THEY HAD A PATIENT ON "MENTAL HEALTH WATCH" IN THE ER IN A TREATMENT ROOM FOR 3 MONTHS.

NORTH COUNTRY HOSPITAL DOES NOT HAVE A DESIGNATED UNIT SPECIFICALLY FOR THESE CASES! THE NORTHEAST KINGDOM DOES NOT HAVE A FACILITY TO HOUSE THESE CASES!

SINCE THIS HAPPENED, MY HUSBAND AND I HAVE BEEN TAKING STEPS TO WORK WITH THE CEO OF NORTH COUNTRY HOSPITAL, CLAUDIO FORT, AND WENDY

8.

FRANKLIN, ANOTHER ADMINISTRATIVE MEMBER OF NORTH COUNTRY HOSPITAL, TO DISCUSS THIS ISSUE.

PEOPLE WHO HAVE SEVERE
DEPRESSION AND THOUGHTS OF
SUICIDE, AS WELL AS THOSE WHO HAVE
MADE A SUICIDE ATTEMPT, NOT
HAVING THE PROPER FACILITY AND
TREATMENT PROGRAM IN PLACE IS
UNACCEPTABLE.

WE ARE NOW WAITING TO COORDINATE WITH NCH CEO AND "NORTH EAST KINGDOM MENTAL HEALTH".

SUICDE IS EVERYONES BUSINESS. IF LEFT UNTREATED AND NOT ADDRESSED IMMEDIATELY, WE FAIL THEM. THIS REQUIRES PUBLIC INFORMATION,TRAINING AND RESOURCES.

9.

WE NEED TO GIVE THESE PEOPLE "HOPE". THAT IF THEY GO FOR HELP THE SYSTEM CAN RESPOND.

THANK YOU FOR LISTENING.