

Greetings,

My name is Shea Witzberger. I live in Windham County, and recently co facilitated a process for the Selectboard of Brattleboro that produced a large report about community safety in the wake of Freedom Summer and calls to reconsider the role of police and police like systems in our community. The process involved the feedback of over 200 community members and 25 organizations. In our report, we shared several key findings about the mental health system, gleaned from listening sessions with folks with lived experience in the mental health system as well as with providers, designated agencies, mental health workers, crisis workers and more. These findings included significant opposition to the existing use of the practices and restrictive design elements proposed in this facility. Our recommendations include investing in alternatives to the kind of facility that is being proposed.

The report can be found here:

[https://www.brattleboro.org/vertical/Sites/%7BFABA8FB3-EBD9-4E2C-91F9-C74DE6CECDFD%7D/uploads/CSRT\\_Final\\_Report\\_12-31-201232.pdf](https://www.brattleboro.org/vertical/Sites/%7BFABA8FB3-EBD9-4E2C-91F9-C74DE6CECDFD%7D/uploads/CSRT_Final_Report_12-31-201232.pdf)

Our community members named that experiences in locked psych hospitals that utilize restraint, seclusion, and forced drugging caused deep trauma that made folks less likely to seek help from any systematized care. Involuntary testament and the threat of its harms were named as some of the biggest threats to the safety of psychiatrically labeled and disabled people by those communities, and experiences with forced drugging and restraint were described in detail as “torture” and as physically, sexually, spiritually, and emotionally violating. This was especially true for queer, trans, and BIPOC community members, who are over represented in restrictive and involuntary interventions and have a disproportionately difficult experience in accessing voluntary and affirming care. Our community members with most system involvement, as well as many key figures working in the overburdened mental health and hospital system, named the need for more voluntary care and true alternatives to hospitalization, such as a non emergency department “freak out” space, peer respite beds in home like settings, spaces for connection and belonging, and community skill ups in direct support of those in crisis without calling in risk assessors and enforcers. No one we spoke with advocated for an expansion such as the one being proposed as a solution to the challenges faced in our mental health system.

In 2021, we should follow the lead of frontline communities who are most impacted by these systems. This is the only way to hold power ethically- by sharing it. Psychiatrically labeled and disabled people, advocates, and those on the ground in our community have been clear. It will cause long lasting harm and be wildly wasteful to put millions of dollars into restrictive mental health incarceration when our community desperately needs non carceral alternatives.

Despite the abhorrent cooptation of activist language and euphemistic sugar coating we have heard from DMH in the last few days, weeks, and months about this facility, it is in every measurable way a locked hospital that will use restraint, seclusion, and forced drugging. This is a step UP, not down, from what currently exists in terms of force, coercion, and restriction. It cannot honestly be described as a step down. Ignoring the concerns voiced by advocates throughout the process, DMH has abandoned their own commitment to increasing voluntary and community supports with these plans. The process has been deeply flawed, and DMH should be held accountable for their lack of honesty and integrity when communicating about what will NOT be a “therapeutic community residence” and will be a locked psychiatric hospital.

Licensing it under this misnomer is an **unprecedented expansion** of restriction and control in the system.

We do not need more psych prisons. We do need to take care of people's basic needs for connection, housing, material needs, and supports that do not contribute to alienation, harm, and trauma. We need community supports that psychiatrically labeled and disabled folks are begging for, that \$11.6 million would go a long way toward building up.

Please do the right thing and oppose this facility. Please listen to those most impacted by carceral systems in our state who resoundingly oppose carceral solutions to social and emotional distress. Please listen with a very critical ear to the euphemistic, contradictory, paradoxical, incomplete logics being presented by those who would have it built. Please challenge DMH to live up to their lip service about investing in community supports, decreasing restraint and seclusion, and listening to the community they purport to serve. Please invest in communities, not incarceration.

Please reach out with questions or to learn more about the Brattleboro Community Safety Review. Thank you for labor!

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