

Mendocino County Board of Supervisors,

My name is William French. I am a disability rights advocate and television archivist. This fall marks 34-years since I took on the role of advocate. Since 1999, my focus has been on mental health. I am also a peer.

I am greatly worried about the state of services today. In the 2000's, I helped lead the rebuilding of services after the deaths of Marvin Noble and Carol Dunlap. I was on the Mendocino County Mental Health Board from 1999 to, I believe, 2004. I then spent another 3 years consulting for the Director of Mental Health. For part of that time I was a regional director and a state-wide trainer for the California Association of Mental Health Boards/Commissions. After leaving the MHB I spent time at the Ukiah Community Center as Program Manager of the Community Crisis Line.

Here in Mendocino County, we built a system that was a model for the delivery of effective mental health services in rural California. When I moved to San Francisco in 2007 to further my education, outside of budget cuts that affected crisis services, I was proud of the system we had built. We were on the way to having a comprehensive system, including crisis response teams to work in the field with law enforcement. They were literally months away from being created.

When I returned in 2017 I was shocked. Everything we had worked hard to build had been replaced by an expensive administrative structure while services were half of what they had been. Even the crisis workers who would spend time with people in crisis in the ER had been replaced by security guards and the drivers that took people to hospitals had been replaced by expensive and trauma inducing ambulances. At the same time all of the hours we had spent surveying thousands of Mendocino County residents, collected in multiple reports submitted to the Board of Supervisors, had been ignored.

We have shifted back to the most restrictive and expensive services. People are suffering and UPD just severely beat a man who wasn't a danger to anyone. Something has to change. This is not the Mendocino County I grew up in. And this is not the system the people of this County need, asked for, or worked so hard to build.

I joined the board of Manzanita Services, Inc. at the end of 2018. I resigned last year. I witnessed, and was subjected to, a significant level of verbal abuse and intimidation. Staff ended up joining together and writing letters to the Board. I also wrote a letter to the Chair. An investigation was launched. I resigned when it became clear the results were not going to be made available to the full Board and there would be no consequences for the ED. Her retirement was announced a few months later. It is a much needed change and will allow Manzanita to refocus on peers. It should bother all of us that this person did not face any consequences and their abuse was not made public, even though local media had been aware of it for some time.

It's time for the system to be refocused on meeting the needs of peers. For example, there is not a need for 4 agencies in the Ukiah Valley offering adult services. That's why peers and their allies created Manzanita during the MHSA process. Each of these agencies are redirecting significant amounts of money away from services to pay for duplicative administrations.

The system needs to once again be about peers.

I am also concerned about the Measure B Committee. It lacks peer representation and is focused on the most restrictive services. They also have confused mental health, homeless, and substance abuse services. Where there are some crossovers, they are separate services and need to be treated as such.

The Committee has also led the County into purchasing an absolutely unnecessary training facility and are wasting money wanting to build inpatient units.

We do not have a need for expensive psychiatric inpatient facilities. We showed in the 2000's that comprehensive crisis services cut hospitalizations in more than half and significantly reduces costs. They also give peers the full range of care needed. Hospitals are able to get people stabilize on medication. The problems that caused them to become

acutely ill are still there when the person gets out. Hospitalizations need to be confined to those who's issues cannot be dealt with in a community setting.

The problem facing Mendocino County is drug use, not mental illness. Addiction is not a mental illness and cannot be properly treated in psychiatric facilities. We have been using expensive psychiatric hospitals when what we've needed is long-term rehabilitation programs. This is why in the mid-2000's the MHB proposed, along with Yuki Trials, a year-long rehabilitation program. 30/60/90 and the 12 steps do no work for most people because addiction is a medical issue that needs specialized care. Mendocino County can easily become a leader in the treatment of addiction. What we need is new leadership.

It's time for this expensive "experiment" to come to an end. People are being hurt and taxpayer dollars are being wasted. I urge you to step in before people start once again dying. It's time for the County to once again take over management of contracts and oversight while finally turning other adult services, including the planning of services, over the Manzanita. Complete the process the citizens of Mendocino County started in the 2000's.

Thank you,
William French