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The plank report is a terrific document. It really ought to be a roadmap for all of us at the national level to use as a checklist.

In many of the areas listed here [in the plank report], I think the P&A system is doing important work. I hope you’re aware of it in your own communities. Look at the agenda set out by the plank report and make sure we expand those efforts.

Most of you have experience with the protection and advocacy system, which is the only legally based individual advocacy program for people with disabilities throughout the country. When it comes to talking about consumer-driven activities, the concept that your advocate, your lawyer, should be taking direction from you is the major underpinning of our system. We always want to be listening to individuals, since each one may have a different approach. We resist hard and fast rules: I know that, as soon as I make that rigid choice, the next person through the door will ask me for something else, and they should have the right to that kind of representation.

I could go through each of the planks, and would sound similar to what Bob Bernstein [of the Bazelon Center for Mental Health Law] talked about.

In regard to involuntary outpatient commitment, I can give you evidence of why it doesn’t work. For example, there were two gentlemen in California who were living and functioning in the community, and [as a result of an outpatient commitment order] the police tracked them down and killed them. These are vivid examples of how flawed that system is.

In regard to deaths from seclusion and restraints, we desperately need the consumer voice in Washington. We have fought hard with HCFA [Health Care Financing Administration] to get a regulation that makes sense, including the mandate to report deaths to the P&A system. We found after six months that HCFA wasn’t doing that. After we got to the press [with our report], we got reports of another 24 deaths since August 1999. These are self-reported cases; obviously there are others who died that we did not know about. In the fight on this issue I was told by one of the national organizations that this wasn’t a crisis. We have a serious problem when national organizations with clout can say that 24 people dying from inappropriate seclusion and restraint is not a crisis.

In regard to the whole issue of community mental health services, a damaging report was issued on the failure to provide services in community, and the report had some major backlash. We run the risk of saying that people should go back into institutions since the community is not safe. We need the consumer movement to put pressure on the powers-that-be to bring people into the most integrated [community-based] system possible.

The Americans with Disabilities Act is very much under attack. There are groups who failed to derail the passage of the ADA 10 years ago and they’re still active. Challenges are pending in
the Supreme Court. States are trying to gin up support for an amicus brief supporting the state of Alabama, which is saying that the ADA is not constitutional. Consumers should reach out in their states, saying, Don’t sign on to the brief. Minnesota is supporting the ADA, and we’re asking the states to sign on to that brief. We’d like the support of the consumer community in this effort.

If the SAMHSA reauthorization bill passes, which would reauthorize the P&A system, we’ll be able to create a Native American P&A program and to expand P&A services to people in the community so that it is not just facility-based.

Thank you for inviting me. The criticism you give us keeps us honest and makes us re-examine what we’re doing. We look forward to working with you all in trying to make the planks a reality.