



**TREATMENT
ADVOCACY
CENTER**

NEWS

200 NORTH GLEBE ROAD ♦ SUITE 730 ♦ ARLINGTON, VIRGINIA 22203 ♦ 703 294 6001

FOR IMMEDIATE RELEASE
September 14, 2007

CONTACT:

Alicia Aebersold, at 703 294 6008 or aebersolda@treatmentadvocacycenter.org
Stacy Fiedler, at 703 294 6003 or fiedlers@treatmentadvocacycenter.org

Gov. Blagojevich signs bill improving Illinois' mental illness treatment law

NAMI Illinois and family members credited for removing requirement for "dangerousness"

Arlington, Va. – Governor Rod Blagojevich has signed Senate Bill 234 into law, to the elation of many who have been fighting for years to improve the state's strict mental illness treatment law. Illinois currently requires someone to be an actual physical danger to themselves or others before they can be court-ordered into mental illness treatment. The new law, which will go into effect June 2008, loosens that strict standard to allow earlier intervention for people with incapacitating symptoms of illnesses like schizophrenia and bipolar disorder.

"This measure opens far wider the door to needed treatment for a small group of people who are extremely ill," said Jonathan Stanley, acting executive director of the national Treatment Advocacy Center, a nonprofit dedicated to removing barriers to timely and effective treatment of severe mental illnesses. "Because of the work of so many advocates, Illinois' law has gone from one virtually mandating non-treatment of those lost to severe mental illnesses to one that can and will save lives. Illinois has joined the national trend toward making mental illness treatment laws more rational and humane."

This standard will make it easier to use assisted outpatient treatment (AOT) in Illinois. AOT has been shown to reduce rates of hospitalization, homelessness, arrests, and incarceration, saving both lives and money.

"The passage of SB 234 is a monumental victory for the mental health system in the State of Illinois," said Senator Dale Righter, the bill's chief sponsor, who along with Representative David Leitch guided the bill through the legislature. "The current criteria make it very difficult and sometimes impossible for individuals suffering from mental illness to get the help they need. In many instances, people stop taking necessary medications, and as a result, fail to realize they need those medications, or even that they suffer from an illness. In these situations, a brief involuntary commitment is the only way to ensure someone with a mental illness returns to their medications and ceases to become a danger to themselves or others."

"The new law has one goal," agreed Lora Thomas, the executive director of NAMI Illinois. "It offers the hope of getting a loved one with mental illness into treatment. Illinois can no longer retain the right for people to remain dangerously ill."

Sen. Righter credited family member Karen Gherardini for first bringing the legislation to his attention. "Karen has struggled for years to help a loved one receive appropriate help and treatment. Karen's perseverance, persistence and dedication to this issue, in addition to the support of so many other families who have loved ones that suffer from a mental illness, have finally paid off."

Ms. Gherardini, whose frustrated efforts for treatment for her family member sparked her five-year quest for the reforms embodied in SB 234, said "I am thankful to the many legislators who stood strong and believed a real change was necessary to save lives. I am elated for the many people that will now be given the opportunity to receive treatment to prevent the progression of a cruel disease. At the same time a part of my heart is very sad...because it comes too late for my family member."

“This means so much to so many families,” said Linda Virgil, Chair of NAMI Illinois’ Public Policy Committee. “The law protects someone’s right to be sick, even to the point of dangerousness. This reasonable change allows the chance of a better outcome for everyone.”

NEW LANGUAGE WILL ALLOW INVOLUNTARY COMMITMENT BEFORE SOMEONE IS DANGEROUS

Current Illinois law permits a person in crisis because of the symptoms of an acute mental illness to be court-ordered into inpatient or outpatient treatment in only one of the two following circumstances:

- A person with mental illness who because of his or her illness is reasonably expected to inflict serious physical harm upon himself or herself or another in the near future which may include threatening behavior or conduct that places another individual in reasonable expectation of being harmed; or
- A person with mental illness and who because of his or her illness is unable to provide for his basic physical needs so as to guard himself or herself from serious harm without the assistance of family or outside help.

The revision in the law will allow for the placement in treatment of anyone who:

because of the nature of his or her illness, is unable to understand his or her need for treatment and who, if not treated, is at risk of suffering or continuing to suffer mental deterioration or emotional deterioration, or both, to the point that the person is at risk of engaging in dangerous conduct.

SB 234 would also add the following definition of “dangerous conduct”:

"Dangerous conduct" means threatening behavior or conduct that places another individual in reasonable expectation of being harmed, or a person's inability to provide, without the assistance of family or outside help, for his or her basic physical needs so as to guard himself or herself from serious harm.

For more on the change in the law or to see how Illinois’ law compares with laws in other states, visit the Treatment Advocacy Center online at www.treatmentadvocacycenter.org.

The Treatment Advocacy Center (www.treatmentadvocacycenter.org) is a national nonprofit organization dedicated to eliminating barriers to the timely and effective treatment of severe mental illnesses. TAC promotes laws, policies, and practices for the delivery of psychiatric care and supports the development of innovative treatments for and research into the causes of severe and persistent psychiatric illnesses, such as schizophrenia and bipolar disorder.

We take no money from pharmaceutical companies. The American Psychiatric Association awarded TAC its 2006 presidential commendation for "sustained extraordinary advocacy on behalf of the most vulnerable mentally ill patients."