

April 19, 2022

The Honorable Thomas Umberg
Chair, Senate Judiciary Committee
1021 O Street, Room 3240
Sacramento, CA 95814



SUBJECT: SB 1416 (Eggman) – OPPOSE

Dear Chair Umberg:

Mental Health America of California (MHAC) is a peer-run organization that has been leading the state in behavioral health public policy and advocacy since 1957. The mission of MHAC is to ensure that people of all ages, sexual orientation, gender identity or expression, language, race, ethnicity, national origin, immigration status, spirituality, religion, age or socioeconomic status who require mental health services and supports are able to live full and productive lives, receive the mental health services and other services that they need, and are not denied any other benefits, services, rights, or opportunities based on their need for mental health services. Along these lines, we support efforts which increase voluntary, culturally responsive, community-based behavioral health services.

While we appreciate the Legislature’s commitment to improving the lives of people living with behavioral health challenges, we do not support efforts which increase involuntary services. For this reason, we are opposed to SB 1416 (Eggman) which would expand the definition of “gravely disabled” to also apply to individuals who, due to a mental health condition, are unable to provide for their medical care or safety needs.

An expansive State Audit of the Lanterman–Petris–Short (LPS) Act protocols and procedures was conducted last year¹ by the California State Auditor. The Auditor concluded, on page one of the report:

“Expanding the LPS Act’s criteria to add more situations in which individuals would be subject to involuntary holds and conservatorships could widen their use and potentially infringe upon people’s liberties, and we found no evidence to justify such a change.”

MHAC agrees wholeheartedly that any expansion of the LPS Act will potentially infringe on individuals’ civil rights. Involuntary treatment is traumatic and must be reserved for the direst of circumstances. California has a documented shortage of behavioral health providers and community-based behavioral health services, which prohibits individuals who want and need services from accessing those services. At the same time, our state is experiencing a very large budget surplus. It is imperative that California substantially increase behavioral health services so that every person who needs those services can easily access appropriate, culturally responsive services, and be given every opportunity to never reach a point of crisis.

Expanding the definition of “gravely disabled” to include individuals with costly unmet medical needs would also create a duty on the behavioral health hospitals to provide complex medical care to these individuals. It is unconscionable to bring these individuals with untreated medical conditions into involuntary mental health holds on the basis of an individual’s refusal to seek medical care without also providing that medical care. Yet, providing this care, or making the medical care available to inpatients would likely put a heavy burden on

¹ Bureau of State Audits, Lanterman-Petris-Short Act: California has Not Ensured that Individuals with Serious Mental Illnesses Receive Adequate Ongoing Care, July 2020.

behavioral health hospitals that would be costly and impact the behavioral health care provided to other residents.

Rather than increasing involuntary services, we urge you to expand the voluntary, community-based services which will move California from a “fail-first” state to a state where individuals with behavioral health conditions can thrive. We appreciate the opportunity to provide comment, and are happy to speak with you if you would like further information.

In Community,



Heidi L. Strunk
President & CEO