

WESTERN REGIONAL ADVOCACY PROJECT

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February 22, 2023

Honorable Patricia Guerrero, Chief Justice, and Associate Justices Supreme Court of California 350 McAllister St.
San Francisco, CA 94102-4783

Re: Amicus Letter of Western Regional Advocacy Project, Request for Review of Disability Rights California v. Gavin Newsom (S278330)

Dear Chief Justice Guerrero and Associate Justices of the Court:

Pursuant to Rule 8.500(g) of the California Rules of Court, the Western Regional Advocacy Project and its undersigned members submit this amicus letter urging the Court to grant review in the above- entitled case. We support the arguments made by Petitioners, Disability Rights California, *et al.*, in their Petition for Review. Western Regional Advocacy project also strongly supports review because the CARE Act will have devastating consequences for individuals with mental illness that are experiencing homelessness and will adversely impact peoples health and well being.

Interest of Western Regional Advocacy Project

Western Regional Advocacy Project (WRAP) exists to expose and eliminate the root causes of civil and human rights abuses of people experiencing poverty and homelessness in our communities. WRAP is part of a movement committed to defend and expand the social, political, and economic rights of historically oppressed communities. We are building a democratic, multi-lingual, multi-racial and gender-balanced organization whose leadership and membership reflect our communities.

Reasons Review Should be Granted

• The CARE Court system deprives individuals of their personal autonomy.

The CARE Court system deprives individuals of their personal autonomy by creating a treatment plan with a team of judges, lawyers, medical personel and social workers who will substitute their judgment for that of the client. Clients will then be forced to complete the treatment plan under threat of forced hospitalization or conservatorship. This CARE Court system also raises serious concerns about racial implications and abuse against people with disabilities.

We have also seen over our many decades of doing this work that forced treatment seldom, if ever, actually works. If someone is choosing to forego treatment, little can be done to force their adherence to a plan, including threat of incarceration or loss of liberty. Instead, forcing someone into treatment is

inherently traumatizing and can even increase the severity of their illness and exacerbate the conditions keeping them in crisis and unhoused.

The CARE Court system also enables family members to petition for individuals to be placed in CARE plans. Without proper safeguards, this will inevitably include family members with dysfunctional, toxic, or even abusive relationships with individuals. Moreover, through decades of Social Security advocacy, we have seen thousands of medical evaluations from mental health professionals that are arbitrary, wildly inconsistent, and do not accurately depict a client's symptoms, limitations, or abilities. We have serious concerns with medical professionals determining the level to which an individual may retain their own autonomy.

• The implementation of the CARE Act involves ambiguities and lack of clarity that will cause harm to respondents.

Beyond the fact that forced mental health treatment has been proven over this country's history as fraught, WRAP has serious concerns about the implementation of the CARE Courts. For one, the consequences of noncompliance are unclear, including the consequences if a potential respondent fails to appear for their initial hearing, or if they fail to comply with parts of their CARE Plan such as taking their directed medication. The only consequence mentioned in the plan is potential referral for conservatorship proceedings, which is the ultimate loss of liberty.

Additionally, several elements of the CARE act, as it currently stands, are vague and will likely induce confusion. The lack of definition of technical terms in the Act is deeply problematic because it will lead to inconsistent application of the rules among counties. Such inconsistent application would result in disparate impact on protected groups of people with low income and disabilities. Further, some notice requirements are by mail only, despite the fact that several respondents will not have access to reliable mailing addresses.

Lastly, it does not appear that the CARE Act will do anything to address the underlying causes of homelessness. Even if an individual successfully completes a CARE Plan and is medically stabilized, the CARE Act does not dedicate additional dollars for affordable housing, and such housing remains scarce in California. Individuals will likely exit a CARE Plan and return to the exact conditions that led to their destabilization in the first place.

Respectfully,

Tane Boden

Paul Boden, Executive Director Western Regional Advocacy Project