As law enforcement administrators in the State of Oregon, our mission is to conserve the peace. Essential to conserving the peace is protecting the citizens we serve. Public safety has always been our number one priority. Yet, public safety is often as much about perception as it is reality. When our citizens do not feel safe, peace is difficult to maintain. It is under this premise that, collectively, we wish to address a dangerous situation which threatens to undermine the conservation of peace in Oregon.

The Psychiatric Security Review Board (PSRB) is now engaging in the implementation of a plan which resulted from a recent policy shift. This plan involves transferring forensic clients (those found guilty of a crime, except for insanity) housed at the State Hospital into group homes in various neighborhoods throughout Oregon. Many of these forensic clients have been convicted of serious and vicious crimes, such as murder, rape, assault and arson. Not surprisingly, as word of this plan is leaking out, citizens living near such homes are becoming extremely upset. We are concerned as well.

While we wish to be sensitive to the treatment needs of PSRB clients and are supportive of efforts to treat the mental illnesses which have contributed to their criminal activity, this plan still presents us with the dilemma of having dangerous criminals living in our neighborhoods. This situation poses both real and perceived threats of danger to our citizens. The real danger concerns recidivistic activity. Although this danger is statistically minimal, it is still real. Even one victim is too many. Perhaps more significant is the problem of perceived danger. Living next door to a dangerous and mentally ill criminal would be disconcerting at the very least. Maintaining one’s sense of security and peace of mind under these circumstances must be extremely difficult.

Making matters worse, the PSRB initiated their plan in virtual silence. Although they claim that public safety is foremost in their considerations for moving forensic clients into the community, the lack of communication with citizens, law enforcement and other community partners leaves us all to wonder. By all appearances, this silent plan seems to have been designed to avoid public controversy. As a matter of public policy, we believe this plan was ill-conceived and, frankly, wrong.

We encourage the PSRB to suspend the implementation of their policy, until this issue has been properly addressed with the public in an open and honest manner. We do not wish to inappropriately insert ourselves into the treatment decisions of PSRB clients.
However, when those decisions impact the peace and security of our citizens, we believe it is necessary and right for those citizens to be collaboratively involved in the planning process. To protect our citizens, we in the law enforcement community need to be involved in the process as well. It is local law enforcement who will respond to these locations when problems arise. We stand a much better chance of being able to protect our citizens when we know the potentially dangerous people living in our neighborhoods; know where they live and, know who we can contact for additional information in an emergency.

The fact that the PSRB has made a policy decision to transfer patients from the State Hospital into our communities is obvious. The reason why is not so clear. Regardless of the reason, however, we invite the PSRB to engage the public honestly about this issue. If the casual setting of a group home is more conducive to psychiatric treatment than the clinical environment of a state hospital, we’re certain our citizens will understand. What we do not understand is the secret insertion of forensic clients into our communities and the stiff-arm we have received in asking for an explanation. Let’s not forget that these clients were convicted of crimes and sentenced to lengthy terms of confinement, in order to keep them separated from the rest of society. If group homes are more efficient or effective for the treatment of these patients, then by all means build them. But we suggest building them behind the fences of State Hospital grounds; or at least in locations collaboratively chosen by all those affected.