

## ‘I nearly suffocated’: Petaluma native recounts troubling experiences accessing mental health care

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Petaluma native Mary Beth Leland has found that living with symptoms of post traumatic stress disorder is much more than just being sad or stressed.

It’s something that can last for decades and can change life in ways that were once unimaginable, she said. What has made the situation worse, however, is not having immediate or reliable access to a support system.

Leland is a longtime community volunteer and a teacher at Casa Grande High School. She’s a well-known local. She’s an activist, a wife, a mom, a sister and a neighbor. At 48, she’s even a grandmother.

She has few qualms about sharing her struggles with mental health. What’s more, she hopes it could help people who might be in her situation.

Leland has twice taken action against her local health care provider, Kaiser Permanente, a system which she has relied on for [adequate access to mental health services](#), but which she says has ultimately left her behind.

“The woods were too dark, and I was too alone,” Leland said. “Kaiser had walked me towards danger and left me on its doorstep.”

Leland first sought treatment for her PTSD in fall 2017 from Kaiser. At that time Kaiser told her she qualified to receive cognitive processing therapy, a treatment proven to help patients learn how to change unhelpful beliefs related to past trauma. Kaiser notified her that she would begin the therapy once she committed to coming in weekly for the 12-week program.

“I was excited because with Kaiser, finding out you’re going to weekly — any type of mental health treatment with them is rare,” Leland said.

But the process was far from what she had imagined.

Kaiser said its approach and commitment to mental health care is based on “meeting the vast array of members’ and patients’ individual needs and goes well beyond individual therapy.”

“At any time in their treatment, members may receive a breadth of mental health care and services that spans inpatient care, individual and group therapy, teletherapy, access to digital self-care tools, and collaboration of our expert clinical staff across care disciplines,” Kaiser spokesperson Adriann McCall said in a statement to the Argus-Courier.

Kaiser said, however, it doesn’t want any of its members to have experiences with its services like Leland had.

## Problems begin

After being rescheduled multiple times from her assigned therapist, Leland was told she would have to complete a six-session intake process to map out the details of her trauma to the therapist before starting the actual program. But, she was told, the intake sessions would only occur once per month. She wouldn’t begin actual treatment until six months later, even though her symptoms were quickly escalating.

“I struggled to open up wounds, knowing I wouldn’t be able to address them again for a few weeks,” Leland said. “Even when we did have more than one appointment in a month, I never knew how many times I’d see (my therapist) the following month.

“I held back — how could I begin to talk about trauma without any reliable schedule, knowing I might not see the person I was talking to about it for potentially four weeks?”

Then, in January 2018, the cognitive processing therapy program was put off, Leland said, because the therapist said they were too busy to meet on a regular basis. Three intake sessions in a row were scheduled that month as Leland continued to await the start of the formal program.

But two sessions in, the therapist again told Leland she would be too busy to meet more than once a month until the intake process was completed in August, Leland said.

“I argued that that model is unreasonable, irresponsible and negligent, especially given that everyone knows that when you start giving an inventory of trauma, symptoms are likely to escalate, and she was leaving me with no care in between the monthly appointments,” Leland said. “She lured me into opening up wounds, and then abandoned me just as soon as I started talking about them.”

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That last interaction with her therapist pushed Leland into a PTSD relapse. She began experiencing traumatizing nightmares, she said, which led her to take a new medication that left her constantly feeling nauseated.

“I met with (the therapist) again, desperate to sort it out and come up with a plan,” she said. “Instead, she buckled down on her previous assertions. The relationship — and my faith in healing — was over.”

Leland said she walked out of the office barely able to breathe and waited for the scheduled phone call with her doctor that evening, “desperate to ask him how to navigate this path.”

But he didn’t call, and instead sent an email the next day that said he would see her in a month.

“I nearly suffocated,” Leland said. “I stayed in bed, dizzy and lethargic. I cried and wondered how long I would be alone here.”

She filed a formal complaint, which she said prompted the Department of Managed Health Care to demand Kaiser provide Leland the necessary weekly therapy it had promised.

“I started to breathe again,” she said. “The fog started to clear and I started seeing what was in front of me. And with the support of professionals who had expertise in trauma, I knew I could get out of the woods. And I did.”

## Another setback

In January 2020, Leland was seen at Kaiser’s behavioral health offices in San Rafael after another escalation of her symptoms, which she said led to cannabis use to manage intrusive thoughts, insomnia, flashbacks and “feeling constantly under threat.”

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She was given a treatment plan that included a dual diagnosis of PTSD and drug addiction. But she hadn’t agreed she was an addict.

“The only way they would agree to treat the PTSD was if I joined their addiction medicine recovery (program),” Leland said. “So, reluctantly and desperate for help, I agreed.”

She would undergo weekly exposure therapy through the adult psychiatry program to help with her PTSD and attend an early recovery group.

“I was talked into thinking it was appropriate, as it was addressing my history with trauma as the reason for my marijuana use,” Leland said.

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She was told adult psychiatry would be in touch with her. But after more than a week in the addiction recovery program, Leland has asked Kaiser about moving the adult psychiatry referral forward and was told she could not be seen in both departments at one time.

The addiction recovery director told her that wasn't true, she said. Still, Leland said she went months without contact from the psychiatry department.

“I experienced increasing fear and panic at night, significant insomnia, nightmares, elevated nervous system responses to external triggers and completely cut myself off from many friends and family members,” Leland said.

She filed another complaint with the state, which directed Kaiser to offer Leland one-on-one therapy, she said. Through that therapy, Leland was able to begin healing through a technique developed to help process trauma called “brainspotting.”

Now, more than a year and a half after she concluded therapy and her symptoms have stabilized, Leland feels more like herself again. She's even taken up running ultra marathons.

## **‘Reminder to improve’**

“When we hear frustration and concern shared by our members, it is a powerful reminder we need to continue to improve and advance our care and service,” McCall said.

Leland advocates for others in need of access to mental health care through the Petaluma-based organization Deviled Egger, “a place for people who are dedicated to creating strong communities” that offers focused workshops, gathering spaces and other support services.

McCall said members can call Kaiser's dedicated phone line at 800-390-3503 to get help if they experience any difficulty obtaining mental health care appointments.

“And, we have escalation processes to support our therapists if they are unable to schedule a needed return appointment for a patient,” McCall said.

The Department of Managed Health Care also helps members obtain timely appointments. If a Kaiser enrollee experiences issues with access to care, they can contact the department's help center at 888-466-2219 or [HealthHelp.ca.gov](https://www.healthhelp.ca.gov).

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