

Hungry, cold and crazy

The move to deinstitutionalize the chronically mentally ill began several years ago. By the early 1970s the population of Riverview hospital had dropped from 4,000 to about 1,100. Now there are fewer than 800 people there.

The intention behind this move was to allow the patients to be treated in their own communities, with a network of various residential facilities, therapy and employment programs and other support services to help these people re-adjust to life in the community.

The reality behind this move is that the chronically mentally ill are today more likely to be out on the streets without services to help give them direction and support. There are extensive community support services in Vancouver, these are even considered a model for other cities, but there are not nearly enough services to meet the demand. MPA's residence program, for example, is equipped to accommodate 46 people. It is a worthwhile and needed service, but it is only a drop in the bucket compared to the range of services required if the move to deinstitutionalize mental patients is ever to become a success.

Not only is there a lack of facilities to help patients re-adjust to life in the community, there is a pathetic absence of adequate emergency services. Now that people are being released from Riverview sicker and faster than ever before, the need for more emergency beds in the hospitals and crisis services in the community is crucial. Many former patients are simply on their own, with no place to go when they are flipping out.

But emergency services for ex-mental patients is just one aspect of

the range of facilities that are needed in the community. Some of what is required is already in place, such as MPA's and Coast Foundation's residential, drop-in centre and employment programs. But these and other programs that currently exist cannot handle all the need. There has to be more and varied residential programs and other support services, such as therapy, rehabilitation and training programs.

These are hard times in the economy, but one has to question the reason why the provincial government denies these essential services. Funds that could be spent on mental health services are being used by other ministries, such as the Ministry of the Attorney General and the Ministry of Human Resources. If a variety of mental health services were available in the community to meet the current level of need, less money would be required by the judiciary, the penal system and the welfare system.

There are groups attempting to influence these changes by pressuring the provincial government to provide adequate mental health services. The Advocacy Group (TAG), to which MPA belongs, has a massive public relations job ahead of it to get a higher funding priority for mental health services from the province.

Along with pressure on the politicians, the public has to be made aware that many chronically mentally ill people are simply on the streets hungry, cold and crazy. Some might argue that this is an improvement over having 4,000 patients live at Riverview, but it certainly cannot be the desired result of the plan to get mental patients out of the hospital and back to their communities.