

AMI Newsletter



ALLIANCE FOR THE MENTALLY ILL
of San Mateo County
(Formerly P.A.S.)

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ABOUT OUR MEETINGS....

Remember the fourth Wednesday every month and that's all you need to know. The speakers vary, but the place, time, and date don't. Always at San Carlos City Hall, always at 7:30 to meet folks. 8 PM for the meeting.

This month, it's Wednesday the twenty-fifth of May. That's when we'll have a chance to learn about nutrition. Speaker is Suzanne Williams, from the Great Earth Vitamin Stores. (You may have been in the one Hillsdale.) Come and meet the many people who are as interested in mental health issues as you are. (You sure won't find this kind of comraderie at your bridge club.) If you are new, come learn from others. If you have been in the upside-down world of mental illness for a while, come and lend your wisdom and experience. We need what you have to give.

SYLVIA PORTER AGAINST HALF-WAY HOUSES

If you have a relative in a half-way house, or want to, read Sylvia Porter's column (enclosed). This woman has millions of readers and has had several columns recently urging readers to watch out for the spread of residences for the mentally impaired. Porter's been

urging people to remember their property values and not to let the mentally ill into their neighborhoods. For a usually sensible economist, she sure is getting hysterical, for she warns her readers about the safety of their children if they were so foolish as to let a half-way house into their neighborhood. It's the same old violence stereotype again.

If you would like to let her know how you feel, write to Porter, c/o of the San Francisco Chronicle. It may educate her to the problem of housing for the MI.

THE GREAT CURE HUNT

What's happening in the search for a cure? A lot that's exciting, but not enough.

First, the exciting part... Stanford's Schizophrenia Research Center is conducting efforts on many fronts, cooperating with researchers all over the country. They are trying to understand the chemistry of neurotransmitters such as dopamine. Imagine how difficult this must be, for they have to find ways to study what's going on in the human brain without intruding on the living tissue. Many ingenious ways have been devised to do this. There are various imaging techniques, for instance, such as CAT scans and PETT scans.

Researchers are also trying to understand mental illness by the clues given by the retina of the eye, by brain anatomy, and by looking at the "error correcting" motor behavior of people with schizophrenia. A lot is going on, work that is imaginative and exciting.

So what is there to complain about? Money. It is grossly inadequate. Consider this: we cough up \$200 in research money for each cancer patient in the U.S. We come up with \$90 dollars in research money for each heart patient. Now, without skipping ahead to find the answer, guess how much we spend on mental illness research?

If you guessed a ridiculously low number, you might have been right. We spend \$6 per patient for mental illness research. That's \$200 for cancer and \$6 for mental illness.

How come? For one thing, the other diseases have had an active lobby. They have strong and articulate national organizations, and relatives who organize to raise funds privately, and to write their legislators for more public funds.

We who are concerned with mental illness are just getting off the ground. We are at the very beginning, I think, of a great out-of-the-closet movement. We are just starting to organize effectively: look at the growth of the National Alliance for the Mentally Ill in the last few years. Funding patterns will change if we insist that they must and if we each push personally to see that the irrational allocation of research monies doesn't continue.

Nobody's going to see that our relatives get theirs but us.

WHAT'S HAPPENING AT CORDILLERAS
Sue Miller, our observer at Mental Health Advisory Board meetings, reports that the empty wing at Cordilleras cannot be used for a low-stress ward. The changes required to convert the facilities (plumbing and sprinklering, for instance) are too expensive.

It is likely that the space will be used instead for the expansion of existing Cordilleras programs such as the pre-vocational workshops.

MEDIA-WATCHING:

CALL YOUR TV STATION

If you watch TV, and that's most of us, you may have noticed that the mentally ill are often portrayed in negative ways...both in the news and in TV movies.

For instance, after a recent murder in Golden Gate Park, before any suspect was identified, Channel Seven sent a reporter to look at half-way houses that were near the scene of the crime, the implication being that if something awful had happened, an ex-mental patient must be responsible. That's prejudiced reporting.

A phone call to Channel Seven's News Director told them how one viewer felt. More calls to more stations from more media-watchers can begin to tackle the stigma problem.

AN OFFER...

One reader, Gussie Tarman, wants to offer her copy of FAMILIES IN PAIN

as a loaner to any member of the group. Call Gussie at 854-5564. (Also, thanks for your nice letter, Gussie.)

Another mother wrote to pass on experiences, positive and negative, with the doctors in the area. AMI's position is not to comment on particular doctors one way or the other: What helps one patient may not help another. Nevertheless, AMI does keep a file of incoming correspondence on this subject. Any member who wants to see what others have experienced are welcome to look through the correspondence.

OUR OWN OFFICE...

Some may not know that we have our own office, staffed three afternoons a week by some faithful parents. The office is open Monday, Wednesday, and Friday afternoons from 1-4. Drop in to talk & look through the library.

The office has a list of parents who are willing to be called by others in distress.

They could use some more help. Call Thelma Miller at 591-1828. The office is at 30 West 39th Ave. San Mateo, right off El Camino.. Check it out.

GOOD READING

You probably know there are very few books on mental illness on any bookstore shelves. We who are starved for information have to work to get it. Don't be discouraged if you can't find the books reviewed here. Just ask your bookstore to special-order them for you. It sometimes costs 75 cents extra and you have to wait six weeks, but it's worth it.

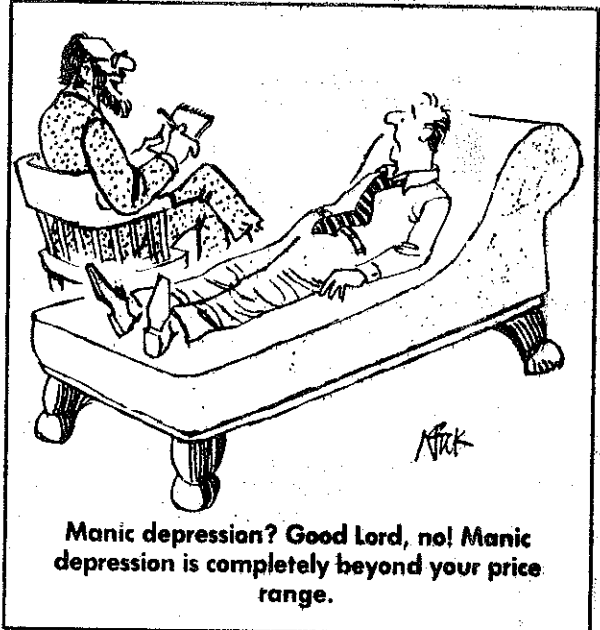
You might try to get **SCHIZOPHRENIA: SYMPTOMS, CAUSES AND TREATMENTS**. It's by Kayla Bern-

heim & Richard Lewine. Norton: \$12.95

The authors do a pretty thorough run-down of the disease. Especially good is the section that tells what it is like to have schizophrenia. People who seek a better understanding of their relatives might learn something.

NOW, FOR A LIGHT NOTE...

THE PICK OF PUNCH



NEXT TIME...

GIVING COMPLETE PHYSICALS TO THE MENTALLY ILL: A VISIT TO A PILOT PROGRAM. (Many of you feel strongly on this issue: the importance of eliminating the physical causes of mental illness, before labelling the problem "psychological".)

A REPORT ON FULLER TORREY'S SPEECH

Your editor is Maryellen Hessel
851-8765. Call in news.

The Battle Over 'Moral Therapy'

In communities from coast to coast, ranging in variety from sophisticated Manhattan to the most exclusive California exurb, bitter battles are now raging between the residents and health care professionals trying to "invade" the neighborhoods with mentally or physically handicapped patients.

The level of hostility in parts of New York recently has stunned me, a lifetime inhabitant. The resentment has resulted in arson in the Midwest, indefensible zoning restrictions on the West Coast, dangerous outbreaks of violence everywhere.

Right now, the winners would seem to be the health care professionals. But don't be too hasty with judgments. What is "winning"?

In the past decade, state lawmakers and mental health professionals throughout the United States have joined together in an effort to "deinstitutionalize" the mentally handicapped and return them, where possible, to a productive and pleasant place in society.

"The trend now is away from commitment to large state asylums and toward housing in smaller, community-based group homes," reports Prentice-Hall's "Equal Opportunity in Housing" service. Many state lawmakers have concluded that the mentally handicapped should be treated outside the asylums where conditions are the "least restrictive."

These lawmakers and psychologists maintain that the mentally handicapped have a right to individualized therapy in a residential "home" in a normal community.

Before you speak out from your "bleeding heart" that "of course the mentally and the physically disadvantaged, too, have the right to live in a normal community," think this problem through. What would a "halfway house" for a small group of mental patients in your neighborhood do to property values? What about the safety of your children? Faced with these problems, would you or would you not join a vigorous campaign against the projects? Actually, Prentice-Hall has shown unusual courage just to be reporting the trend in depth.

Critics of our present system of mental health treatment charge that our state-operated asylums degrade and depersonalize the patients and also impede their recovery. Legislators and health professionals have tried to have the mentally handicapped placed in "group homes" where they can experience a family-style environment and develop basic social skills.

These residential "homes," many therapists assert, are better suited to provide the special training needed by patients to cope with their individual and oh-so-distinct problems.

The group homes commonly take two forms: the halfway house for the convalescing mental patient, and the residential center for the care and special training of the developmentally disabled. The homes are usually staffed by live-in houseparents and visiting therapists who offer support services and treatment for the residents. All the occupants of the home live as a "single housekeeping unit," sharing in household chores and existing much like a traditional family.

The trend away from large institutions and toward small-group residential treatment is not new. It mirrors a similar revolution in the care of the mentally ill that came just before the turn of the century.

European reformers such as Phillippe Pinel (in France) and William Tuke (in England) started movements to free mental patients from inhumane asylums of the 19th century. As Prentice-Hall summarizes it, reformers and their successors developed a new and highly successful form of treatment called "moral therapy."

But later events led back to the rise of the large mental hospitals we have today. Overcrowding and funding shortages soon brought about many of the abuses typical of the old asylums, and moral therapy sank generally into disuse.

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