

The Virgin Islands Consortium

Mental Health Crisis Exposes Divide Between Health Department and Legislature

As residents voice growing concern over behavioral health services, DOH defends current care models while Senator Kurt Vialet says years of funding, legislation, and planning have failed to translate into accessible treatment and visible progress.

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Growing public concern over behavioral and mental health services in the Virgin Islands has prompted parallel responses from the Department of Health and the Legislature, revealing sharp differences in how each views progress, accountability, and the pace of reform amid visible unmet needs across the territory.

In a statement issued Wednesday, the Department of Health acknowledged heightened public anxiety surrounding access to behavioral and mental health services, calling the issue a critical public health responsibility that must be addressed in a manner that is effective, lawful, and centered on patient safety. At the same time, Senator Kurt VIALET warned that what residents are witnessing daily reflects deeper systemic failures that continue to place vulnerable individuals and communities at risk.

The Department noted that behavioral health is an umbrella term encompassing mental wellness, substance use, stress management, and healthy coping behaviors, while mental illness refers specifically to diagnosable conditions that may require clinical treatment. DOH said this distinction is central to understanding the complexity of service delivery, particularly when it comes to inpatient care.

Providing inpatient mental health treatment, the department said, requires more than constructing a building. Sustained clinical staffing, specialized security, proper licensing, and compliance with federal and territorial standards are all necessary. While the government previously explored building a local inpatient mental health facility, DOH said escalating construction costs and competing infrastructure demands forced a reassessment of how limited public resources could be allocated while still meeting immediate patient care needs.

VIALET, however, said those explanations have done little to reassure residents, pointing to what he described as a visible and troubling increase in individuals with untreated mental health conditions roaming streets, towns, and public spaces. He said the trend reflects not isolated incidents, but a systemic breakdown that places individuals, families, and communities at risk.

At present, DOH said mental health services are delivered through a combination of community-based care, outpatient treatment, crisis intervention when activated by other agencies, and off-island inpatient placements when clinically necessary. Individuals requiring long-term or forensic inpatient treatment are placed in accredited facilities outside the territory pursuant to court orders and medical necessity, with those placements monitored by the Department to ensure patient safety and access to appropriate levels of care.

VIALET acknowledged that multiple legislatures have acted to address these challenges, noting that laws have been passed, land conveyed, and millions of dollars appropriated to build a functional behavioral health system. Despite those efforts, he said progress has remained minimal, facilities remain unfinished, and critical services continue to be out of reach for many residents.

Beyond clinic-based services, DOH highlighted the role of its Behavioral Health Division in community outreach and early intervention through mobile services, including behavioral health outreach vehicles commonly referred to as “Zen Vans.” According to the Department, these vehicles are used for public health education, mental wellness outreach, and early engagement in schools and neighborhoods to help connect individuals and families to services before crises escalate.

VIALET expressed concern that those same vehicles, purchased specifically to expand mobile outreach and crisis response services, are underutilized. He said the vans remain

parked and unused, representing a missed opportunity to intervene, stabilize, and support individuals in crisis by bringing care directly into communities.

The department also addressed public questions surrounding the use of funds from the Epstein-related settlement. DOH said it has been allocated \$6.9 million from the Mental Health Survivors Fund, which has been used in accordance with legal and financial requirements to continue providing inpatient mental health care for Virgin Islands residents while longer-term infrastructure solutions are evaluated.

“Mental health care is not optional—it is essential,” the Department stated, adding that it remains focused on balancing immediate patient needs with long-term planning, while ensuring services are clinically appropriate, fiscally responsible, and delivered with dignity and compassion.

Violet echoed the urgency of that message but questioned the Department’s communication and transparency. He said DOH has not provided the Legislature or the public with a clear accounting of how previously appropriated funds have been used, nor sufficient updates outlining progress toward addressing the territory’s mental health needs.

“In a Territory where the needs are visible and the resources have already been allocated, inaction is unacceptable,” Violet said. “Mental health care is not optional. It is essential. Our people deserve transparency, accountability, and real results.”

DOH said it remains committed to improving communication and transparency around behavioral health programs, expenditures, and future planning. The Department said work continues to strengthen community-based services, expand outpatient and crisis response capacity, and assess feasible options for enhancing local behavioral health infrastructure.

“Our responsibility is to ensure that residents receive appropriate care today while we plan responsibly for the future,” said Health Commissioner Justa Encarnacion. “That requires honesty about challenges, transparency about funding, and a commitment to continuous improvement.”

Violet detailed legislative actions spanning several legislatures, including Act No. 8152 from the 32nd Legislature, which appropriated \$2 million for mobile wellness vans for St. Croix and St. Thomas-St. John; Act No. 7967 from the 33rd Legislature, which conveyed land at Anna’s Hope to DOH for a behavioral health facility; and Act No. 8187, which appropriated \$3,082,909 for mental health programs contingent upon a comprehensive plan that was never submitted.

He also cited Act No. 8688 from the 34th Legislature, which established the territory’s first comprehensive Behavioral Health Act and authorized development of a public behavioral health facility for voluntary and involuntary treatment, and Act No. 8920 from the 35th Legislature, which appropriated \$18 million for completion of the behavioral health facility at Anna’s Hope on St. Croix. Additional funding was provided through Acts Nos. 8474, 8759, and 9035 to support behavioral health mobile staff and supplies.

“The Legislature has done its part,” Violet said. “Now it is time for the Department of Health to demonstrate progress and provide the people of the Virgin Islands with a clear

and credible path forward.”

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