

The Virgin Islands Consortium

Op-Ed | In The Name Of Humanity

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On any given day traveling throughout the Virgin Islands, especially in the town area, there is a noticeable sight that breaks my heart and with confidence, this writer believes, you the reader, shares this same sentiment. It appears to be an increase of the mentally ill in the streets of the Virgin Islands. The plight of this problem is not going to fade into the abyss as if it never existed. Let me add the following:

According to a 2015 assessment by the U.S. Department of Housing and Urban Development, 564,708 people were homeless on a given night in the United States. At a minimum, 140,000 or 25 percent of these people were seriously mentally ill, and 250,000 or 45 percent had a mental illness. By comparison, a 2016 study found that 4.2 percent of U.S. adults have been diagnosed with a serious mental illness.

The plight of mental illness/homelessness is not subjected to these islands only. It is a national epidemic. Study after study clearly delineate this issue and the problems this issue displays on a society.

Addressing this need can put a strain on scarce resources, it definitely creates conflicts with family units as to who is not doing their part or who is doing too much. And a point to consider, in the VI, we know the mentally ill intimately! They are not strangers in our midst like in a typical city throughout the USA. They are former teammates, classmates, band members, sometimes former mates, co-workers, neighbor's, childhood friends, church members, etc. So, with that dynamic to consider, there is a must for this matter to no longer be swept under the "proverbial rug".

There are a few suggestions locally we can initiate that may give us a better grasp on responding to the chronic needs of the mentally ill.

One, the Department of Health needs to ensure that the division of Mental Health is fully equipped to respond ASAP to the needs of a chronic patients in the community ie. cars, staffing, public announcements.

Two, RLSH Psychiatric Unit needs to be more accepting to professional recommendations when a patient is being evaluated for the next level of care. The Governor of the Virgin Islands should not have to be contacted in order for a manic or chronic patient to be admitted to the Behavioral Health

Unit. The assessment conducted by a trained and certified employee in the Division of Health should suffice.

Three, the length of stay and care should be determined based on the level of intervention required. Not because someone doesn't have insurance, does not mean they should be discharged within 2 days! Individuals who are in pain and need treatment and care should receive the care required.

Four, before discharge, each client should meet with a case manager from the Division of Mental Health so that they can establish a rapport and follow up appointments can be scheduled. The Division of Mental Health can also do an assessment to determine if the individual can benefit from services provided through the Department of Human Services (DHS) and make the appropriate referral.

Five, of equal importance, The Disabilities Rights Council, Division of Mental Health, RLSH, NAMI and D.H.S. need to meet ASAP and address the issue of Mental Illness and Homelessness in the Virgin Islands. They are our fellow citizens and they have every right in the name of humanity to have their most basic needs met by those who claim to care.

Submitted on Tuesday by: Clarence Payne, St. Thomas resident