



Back alley route to mental care

Community program helps those in need

By PHIL HANSON

The people in the big, cozy old mansion in the West End have only one request of visitors. Please, they ask, would you mind coming in through the back alley entrance?

It's not that the folk at 1285 Harwood have anything against visitors, it's just that as one of them, Derek Nordin, points out, coming up the front way is a little like entering a haunted house.

And he's right. The bare branches of the deciduous trees, the unmanicured grounds and the rickety old stairs conspire to give the place something of a horror-movie appearance. Some visitors may indeed get the impression that they could go out of their mind here and that's ironical, because the folk at 1285 Harwood are there for the very opposite purpose.

They are the West End

They are careful not to use terms that might cause people with a problem to steer clear of the group.

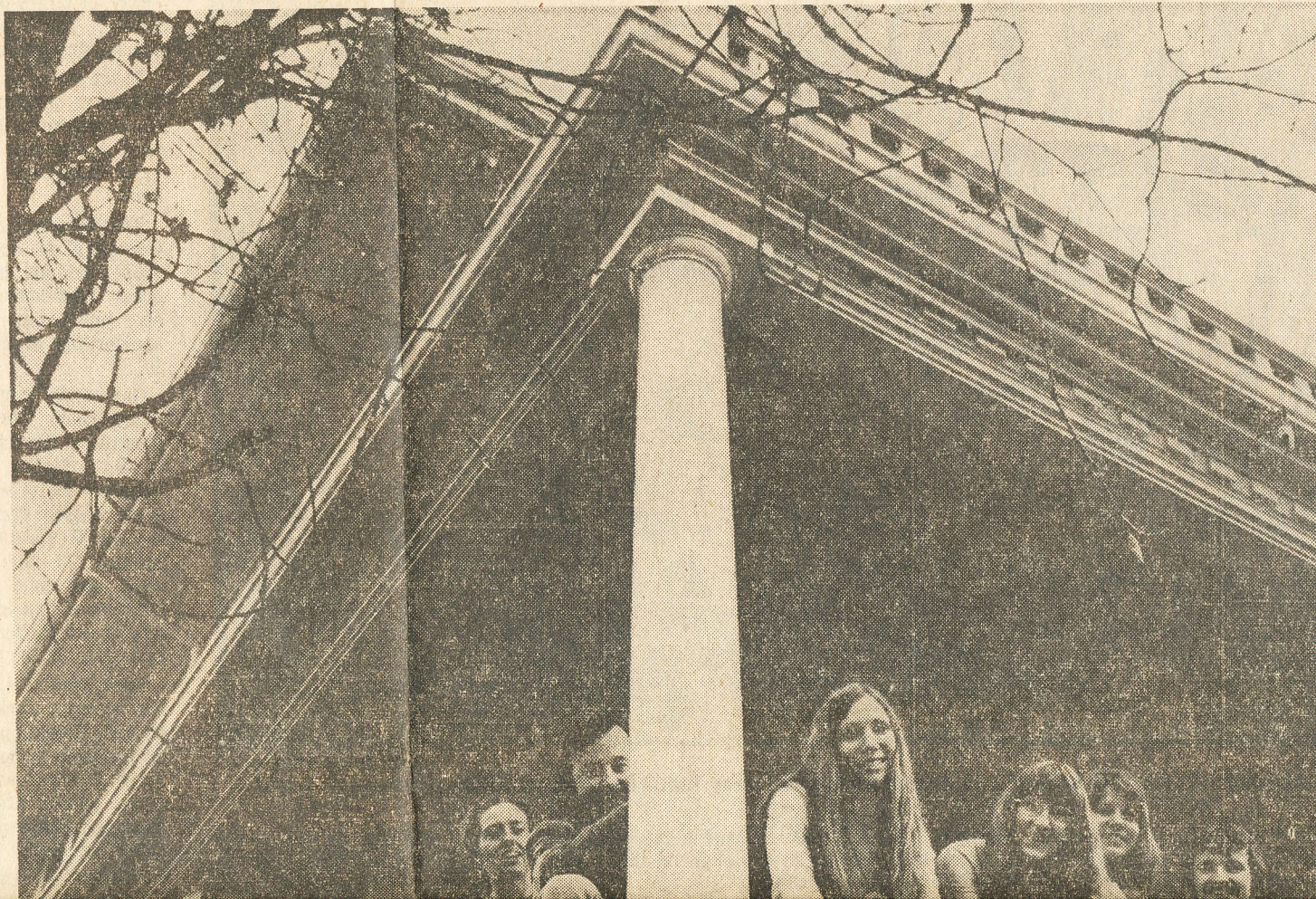
"We stress mental health, emphasis on health, not illness," says worker Jim Johnston.

The semantics of the job are more involved than the objectives: simply to help people overcome mental problems in their own community, without having to send them to hospital.

Techniques of community care are not new, they have been practised overseas and elsewhere in Canada for years, but until the Greater Vancouver Mental Health Project started its West End team early this year, Vancouver had been out in the cold.

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They are the West End Community Care Team, a carefully-worded title that hints at, but does not come right out and say their job is to help West Enders with mental-health problems.

care are old and new, they have been practised overseas and elsewhere in Canada for years, but until the Greater Vancouver Mental Health Project started its West End team early this year, Vancouver had been out in the cold.

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On the heels of the West End team are others. Mount Pleasant is starting now; others are forming in Kitsilano, Strathcona and Richmond.

The West End team operates on a budget of \$120,000 a year. After they've paid the wages of the 10 workers, the rent, and other essential services there's little left for frills.

In the small administrative office some members of the team were worrying this week about the Christmas party. They want to cater to about 130 people, and right now they're wondering where the money will come from.

During a tour of the main floor and basement, occupied by the team in the big old house, Nordin frequently commented about a lack of funds. "If we had this . . . One day we hope to do that . . ."

It's a limited operation but it's a start and the enthusiasm of the staff, all trained in psychiatric work, makes up for what the dollars can't yet provide.

It is impossible to generalize about the way the team works because every approach is as varied as the problem of the patient (or client, or case, as the team prefers to call them).

Occupational therapy, is available, perhaps to get a person used to a working environment, or perhaps to teach a lonely old person a hobby. There is individual counselling; group therapy.

Two part-time psychiatrists on the team, Drs. Peter Buntin and Don Coates, are on hand when they're needed.

"We have a wide range of psychotherapeutical techniques at hand, and we use whichever one is best," explains Nordin, a para-professional.

"A lot of social work things also go with what we do. Often the problem is just that a person needs some socializing."

"A large number of our cases come from apartment dwellers," notes Johnson. "Not so much from the high rises, but from the smaller older, lower-rent buildings. A lot of them are older people.

"Loneliness is one of the big problems, and of course it's often precipitant to other things."

The words West End in the team's name are slightly misleading. In addition to caring

for that part of town, the project includes the area east to Cambie, and with it the seedy rooming houses and fifth-rate hotels that sprinkle the dominantly business district.

"Actually, we get more calls from this (the west) side of Burrard than from the other," says Johnston. On "the other side" of the street the problems are often alcohol-related, and compounded by the transient nature of the residents.

"You work with a person for a few weeks and then he hangs ups and takes off," says Johnston, underlining the often frustrating nature of the team's work.

On the west side of Burrard the old folk, the lonely people and single parents frequently come to the attention of the team.

Of the single parents, coordinator Ann Geddes says, "It's not just the fact they are single parents

harder to raise a child in an apartment, there's more pressure, and often the mothers also are on welfare. They have a very difficult time."

So far some 250 people having a difficult time have sought, or been referred for help to the team. Had the group not been there some of the cases would have ended

up in Riverview or the University of B.C.'s health sciences hospital.

"We can't treat everyone in the community," said Nordin. "Some people we have to send to hospital."

But most are given a chance to sort out their problems in familiar surroundings. Instead of being torn from

their homes, sometimes in a mental environment free to go to a shop. They keep in for more. And the house apartment wood is



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But most are given a
chance to sort out their prob-
lems in familiar surroundings.
Instead of being torn from

their home and put in a
sometimes frightening hospi-
tal environment they're still
free to wander English Bay
and shop at their favorite
shop. The process in turn
keeps institutional beds free
for more chronic cases.

And that's why the haunted
house appearance at 1285 Har-
wood is only skin deep.



COMMUNITY CARE TEAM . . . gathered on the verandah of their old West End mansion.

—Glenn Baglo Photo