

KITSILANO CITIZENS COMMITTEE ON MENTAL HEALTH

C/O 2741 WEST 4TH AVENUE

VANCOUVER 9, B.C.

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BRIEF ON CITIZEN PARTICIPATION

Submitted to the Subcommittee Looking Into the Question of Citizen Groups.

The Question of Community

The Kitsilano community is made up of diverse elements, but mainly of lower-income and generally transient working people. Figures available indicate that this area has one of the highest per capita rates in the city of admissions to psychiatric institutions.

From the beginning, the Kitsilano Citizens' Committee has sought to incorporate a broad spectrum of people into its core - agency professional workers, interested non-professional working people, welfare and unemployed people, former mental patients, old age pensioners, and all those who have an enduring interest in mental health.

Who is a Citizen?

The Kitsilano Committee has adopted the definition of citizen as anyone who lives, works, recreates or has an otherwise enduring and profound interest in the Kitsilano community. While this definition is admittedly broad, we do not see the purpose of setting up artificial borders which rigidly define a geographic area as a community without regard for its social and ethnic composition.

Nevertheless, for the purposes of the Project, we see Kitsilano as being functionally bounded by Dunbar/Alma on the west, Granville on the east, Cornwall/Point Grey on the north (including the peninsula area around the Planetarium), and 16th on the south. Socially, we see Kitsilano as a generally lower working class area with a high transient population and a large overlapping Greek ethnic population. There are some wealthy people in Kitsilano, but not enough to classify the area any differently from the general definition given here.

What is a Citizens' Group?

While it is a problem to designate in specifics what is and what isn't a citizens' group, a legitimate one that is, there seems little else that can be done than to advertise widely for public meetings, educate as widely as possible the role of the Greater Vancouver Mental Health Project, and try to attract

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as many people as possible to public meetings. This the Kitsilano ~~meeting~~ has done, probably more successfully than other groups.

While Kitsilano has not developed a constitution, in part because of developments within the project as a whole (such as this Subcommittee looking into citizen group structure), there are a number of rules which should be followed, pending more specific clarification of group membership, committee tenure, etc.

The group should have a significant percentage of its members as nonprofessional citizens interested in mental health. It should conduct its meetings openly and in a democratic manner at an easily accessible, well-known location. It should hold these meetings regularly (Kitsilano holds twice-monthly meetings) with elected personnel carrying on the daily work and reporting faithfully to its membership. Efforts should be made not to centralize authority. In this regard, Kitsilano has adopted the procedure of an elected 5-person steering committee administering the work (preparation of agendas, telephoning, preparation of documents, correspondence, liaison with the GVMHP, chairing general meetings, etc.), a 5-person personnel committee (to look into hiring, preparation of budget in concert with the steering committee, etc.), a research committee, and ad hoc committees which are struck as the need arises. In short, every effort should be made to be representative, democratic and efficient.

As noted above, the Kitsilano Committee as of the present time has no written constitution which would legally define its membership. Consequently, we have no set procedure which could account for delinquent membership. We have been operating on the principle that elected committee members should not miss three consecutive committee meetings without their position being disputed. Tenure on our committees are on a six-month basis, while tenure on ad hoc committees dissolves upon the completion of that committee's work. Our meetings are run with a minimum of Robert's Rules formality, though official motions are moved, seconded, discussed and voted upon. Our Steering Committee has been rotating in the Chair to give maximum exposure in terms of experience, and to minimize the centralization of authority in individuals.

Whither the Energy?

Most people on our Committee are donating time. Working people do not have all that much free time, and that which they do have is usually spent recovering from the work day, taking care of personal business, spending time with family and friends, and taking part in recreational activities. ~~It is therefore a burden~~

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~~to have to go to long, exhausting meetings.~~

^{the} Funds should be made available from the GVMHP to ease ~~this~~ burden as much as possible in terms of providing postage for Committee correspondence, stenographic and photocopying resources, and coffee money as well. ^{To} some extent, the Project has done these things, though it is lately becoming apparent that the noose is tightening.

More than funds, however, what is needed from the GVMHP is the understanding that, given the limitations noted above, community participation is sometimes a slow and tedious process. It is not something that springs up overnight. This is often overlooked by people who are paid to do the very things the Committee is asked to do voluntarily. While this must be balanced against the legitimate request that the program should become operational as soon as possible, it is our opinion that without strong and effective community involvement, the program is going to fail in its purported attempt to be responsive to community needs. Patience thus becomes a prime virtue.

The Group and the Team

We see the citizens' group tying into the decision-making apparatus at a number of levels.

- (i) We are of the opinion that each sub-area should have representation on the Coordinating Committee, at least until the various teams are operational.

Up to now, the Burrard area, consisting of four sub-areas, has used an alternating representation. This is unacceptable because information is not efficiently returned to the various citizens' groups, and because it causes dissidence about particular representation. We do not foresee the Coordinating Committee becoming an unwieldy structure of 40 people as some fear, and we have yet to hear a cogent argument as to why this would occur.

- (ii) Once the team is selected conjointly between the citizens' group and the GVMHP, a steering committee should be struck to oversee its general theoretical and practical activities.

At this time, it is difficult to conceptualize what such a committee would look like. Hypothetically, it might be a 7-person group consisting of three citizens from the citizens' group, the Executive Director of the GVMHP, the local team Coordinator and two other members of the team. This group would meet consistently (say monthly) to discuss the team's relationship to and activities in the community, internal policy, new programs, etc.

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- (iii) we feel that citizens should have representation on the Planning and Advisory Committee of the Greater Vancouver Mental Health Project.

It seems rather hypocritical that this body should be asking every association even remotely connected with (mental) health to provide representatives and yet overlook already organized citizens' groups solely active in this field. Among our members are counted a sizable group who have both the expertise and articulateness, as well as direct community experience, to make a significant contribution to this body.

Conclusion

The problems faced by the creation of a new program such as the Mental Health Project are numerous. Citizens can and want to help in the functioning of a mental health program which takes into account their needs and desires. The gap between rhetoric and action can and must be overcome if this program is to have the credibility and appeal of which it is capable.

In this valuable objective, we are ready to cooperate.