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They didn't have to die

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On Monday, Ryan Devaney stabbed both his parents. The mentally ill Brooklynite killed only one, his mom. In October, mentally ill Staten Islander Eric Bellucci stabbed *his* parents, killing both. In November, Suffolk County police had to shoot and kill mentally ill Thomas Scimone after he threatened to shoot firefighters and ran through West Babylon brandishing a gun.

"When he was on his meds, you would never believe he was bipolar," said a relative.

None of this had to happen. Thomas Scimone, Ryan Devaney and Eric Bellucci were seriously mentally ill and needed ongoing medical help. But all were abandoned by programs "certified" by the Office of Mental Health until they oh-so-predictably became violent.

Gov.-elect Andrew Cuomo can stop these needlessly repetitive and horrific events by hiring a mental-health commissioner who'll prioritize services for the most seriously mentally ill. This would save money, improve care *and* keep the public safer.

The Office of Mental Health is the state's largest agency, with a budget of \$3 billion. It spends more per-capita than any other mental-health system in the country -- yet the seriously mentally ill remain seriously underserved.

The problem is unmitigated mission creep. The solution is returning OMH to its roots.

The predecessor organizations to OMH were founded to help those with "lunacy" or who were "mentally defective." While those terms are offensive today, it was a narrowly focused medical mission that did what the public wanted: Help the most seriously ill.

Today, OMH has largely abandoned treating serious mental illness in favor of implementing social programs for the "worried well" -- less symptomatic people with bad grades, unhappy marriages or other loosely defined "behavioral" or "trauma" issues. Community programs that focus on mental health cheer OMH largess, while those that treat mental illness disappear.

Yes, OMH provides services to some seriously mentally ill individuals: 4,000 in state psychiatric hospitals and 1,850 receiving court-ordered mental-illness treatment in the community, plus a few others in day-treatment programs like Fountain House. But OMH continues cutting back.

In 1993, our state had 10,500 psychiatric hospital beds for the most severely ill; today, it's only 4,000 -- and the plan is to go even lower. The Treatment Advocacy Center estimates New York would have to add 4,311 beds to meet minimum requirements. Instead, OMH continues to provide taxpayer-funded services to 640,000 other New Yorkers.

What services? According to OMH, ones that focus on the "developmental, physical, emotional, social, spiritual, educational and concrete daily living needs (e.g., housing) of children" and "provide hope-filled, humanized environments and relationships in which people can grow."

The result of OMH's abandonment of its medical duties for a social-services agenda: According to Dr. E. Fuller Torrey of the Stanley Medical Research Institute, the most seriously mentally ill in New York are now 1.2 times more likely to be arrested than treated.

Rikers Island has become New York's largest psychiatric hospital, Ryan Devaney and Eric Bellucci its newest inmates.

As governor, Cuomo will decide who will lead OMH. Hiring a commissioner with an MD (which the law used to require) who is committed to making serious mental illness -- rather than social-services programs -- the priority would be the right prescription for a sick department.

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