

Our daughter did not die in vain

Thursday, Jan. 3, is the 14th anniversary of the death of our daughter Kendra Webdale, who was pushed off a subway platform into the path of an oncoming train by a man who was diagnosed with a mental illness. A question we have been asked recently is whether the two subway pushes occurring over the past month in New York City – the killings of Ki-Suk Han and Sunando Sen – have “brought it all back” for us.

The answer is, we have long understood that we cannot bring Kendra back. The memory of that day is forever in our hearts and in our minds. Nobody has to remind us of our tragedy. We live with it.

What the recent events do confirm, however, is our belief that although the Assisted Outpatient Treatment Law named after Kendra has saved lives and improved the quality of many lives, it does indeed need to be improved – immediately – to prevent further death and grief.

The common threads in each tragic story are all too familiar. A person has a severe mental illness. A friend or family member seeks help for that person. The person receives initial treatment, if they are lucky enough to access the system. The person seems to be doing better. But then the person stops taking medication or “gets lost in the system.”

BE OUR GUEST BY PATRICIA and RALPH WEBDALE

In other words, there is no followup or monitoring of the patient and, tragically, this person hurts someone.

Andrew Goldstein had lashed out at several victims before he pushed Kendra. The most recent accused pusher, Erika Menendez, had attacked a retired fireman. There are almost always warning signs, if only we are paying attention.

In one recent report, a city hospitals spokeswoman was quoted as saying that “people get well and then they get sick again.” This statement is like a land mine. People who are on a treatment plan or taking medication need to stay in treatment and stay on medication. For a person to be showing improvement and then suddenly be without a support system is equivalent to them having a ladder pulled out from under them.

In these times of economic hardship, it may seem that cutting services is a practical course of action – but in terms of human rights, it is a travesty. It is also a threat to public safety. And it's not even cost-effective; providing care to potentially dangerous people who need treatment saves taxpayers thousands of dollars as compared with the cost of trials, incarceration and re-

peated hospitalizations.

A 2009 independent evaluation of Kendra's Law by Duke University and a 2005 report to the governor by the state Office of Mental Health show that the law is working. It has dramatically reduced hospitalizations, incarcerations, homelessness and danger to self and others. It has helped countless people who, because of the nature of brain disease, may not even recognize that they have a mental illness.

We have heard countless wrenching stories over these past 14 years. Only the names and locations change. The illness, the worry, the begging for help, the struggle and, finally, the heart-break, are all the same.

It was very unnerving for us to read a recent newspaper interview with Goldstein, who received a sentence of 23 years for pushing Kendra. Now medicated, he was surprisingly lucid and thoughtful. He now says that he believes that Kendra's Law needs to be strengthened.

“If only” was our first thought. If only he had received followup by a caseworker. If only he had been able to stick with his medication without supervision. If only ... Kendra would be alive and he would not be in prison.

State Sen. Catharine Young (R-Olean) has proposed legislation to correct deficiencies in Kendra's Law. The loopholes to be closed would correct several oversights:

- Orders for outpatient treatment could be lengthened from six months, the current limit, up to one year, as a longer treatment period is required for many people.

- An evaluation would be required when a person with a mental illness is released from jail or discharged from a hospital in order to know whether further treatment is required.

- When a person moves from county to county, the order for treatment would follow them. This would address cases of a patient moving in order to “escape” from their treatment plan.

There have been great strides made in education and treatment of mental illness since Kendra's Law was signed in 1999 – but there is much more to do. It may be your loved one that can be saved. In memory of Kendra, we will do all we can to promote access to treatment for people who might be a danger to themselves and others, and we ask that you join us.

In 1999, the Webdales' daughter Kendra was pushed to her death in front of an oncoming train by Andrew Goldstein.

Strengthen Kendra's Law without delay

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