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Back in the '60s, in Santa Clara County, Agnews State Hospital housed a standing population of 5000 mentally ill patients. As part of the state's "deinstitutionalization" movement, Agnews was converted to a facility for the developmentally disabled, which left the area without a public mental health hospital. But the need for such services remains. Last year, 19,000 clients used some kind of public mental health service. Roughly one-third of those served were judged to have a "severe and persistent mental disorder," like schizophrenia, paranoia or mania. County officials calculate that at least one-half of the severely mentally ill also have substance abuse problems, like alcoholism or drug addiction. Local authorities add that another 3000 to 5000 severely mentally ill persons in the county received no treatment at all last year.

In addition to those figures, an unknown number of transients suffer from mental illness. Nationwide, there are an estimated 3 million homeless persons, many of them migrants to California, where they can sleep outside without freezing. Santa Clara

County's Office of Human Relations puts the local figure at 20,000 homeless.

According to the United Way, the county and approximately 15 community and religious groups currently provide an estimated 2470 spaces in emergency shelters for the mentally ill. The shelters range in size from an eight-bed program to a consortium of local providers who supply between 370 and 630 beds at any one time. The majority of these facilities are located between Mountain View and San Jose, with few spaces in the northern and southern parts of the county. In 1987, 40 percent of those seeking shelter in these local emergency facilities were turned away due to lack of space.

"It's worse than ever," says Glen Robertson, who runs Rehabilitation Mental Health Services for the county. "We're reaching about one person out of 20 who need our services." Robertson, director of a program that offers roughly 100 residential treatment beds, says referrals to his agency come in at a rate three to four times higher than the program's capacity. "We refer them to someplace else," he says. "It's terrible."

To make matters worse, a recent

landmark study conducted by Stanford Medical School Professor Lorrin Koran revealed another reason, aside from homelessness, why many of the mentally ill don't feel very good. Many of them are sick. Physically sick. By studying a group of 529 patients drawn from eight program categories in California's public mental health system, Dr. Koran found that 45 percent of them had "an active, important physical disease."

The mental health system had recognized only 47 percent of those diseases, missing the majority, including "32 of 38 diseases [that] cause a mental disorder and 23 of 51 diseases that exacerbate a mental disorder."

Dr. Koran is a frustrated man. "We've proven that there is a more cost-efficient way of screening the mentally ill for physical health problems, and it's very frustrating to learn that it is not in routine use."

Koran's method, whereby each patient is asked a battery of questions and given a blood test, is currently being refined and validated at Valley Medical Center. "When you accurately diagnose a patient," Koran says, "you save money and you also improve patient care." Too often, says Koran, the

opposite happens, as beleaguered physicians try to weed out the GOMERs, battle-fatigued medical slang for "Get Out of My Emergency Room."

Koran says the mentally ill, who sometimes present themselves to doctors in inappropriate ways, often don't get the same careful examinations usually afforded the non-weird. "Patients treated in public sector mental health facilities should receive careful medical evaluations," he says.

Officials in Santa Clara County hoped those evaluations would be routine by now. Two years ago, the County Mental Health-Bureau submitted a reorganization plan to the state Department of Mental Health in response to Assembly Bill 3777. That legislation, cosponsored by state Sen. Dan McCorquodale, was supposed to pump money into counties that agreed to redesign mental health systems to be more oriented to clients' needs.

"It was kind of the shining hope for the state's mental health system," says Nancy Gardner, principal consultant to the Assembly Ways and Means Committee. Originally, nine counties were targeted to receive funds. "The governor cut that down to just one county," Gardner says. "It's devastating."

Despite the fact that Santa Clara County is home for two of Sacramento's most powerful legislators, Vasconcellos and Alquist, who chairs the Senate Finance Committee, there is apparently no favoritism coming out of Sacramento for local mental health programs.

On average, the state spends \$25.84 per capita for mental health services. According to the most recent figures, Santa Clara County gets about \$22.53 per capita, just under the state average and 32nd on a list of 56, behind San Mateo, Los Angeles and even Kern County. San Francisco, the home of Assembly Speaker Willie Brown and the previous speaker, Leo McCarthy, gets the most, at \$54.08 per person, while San Diego, a county that is currently suing the state in an attempt to get more mental health money, is at the bottom of the list, receiving just \$17.16 per person.

"Counties receive funding based on poverty population formulas," explains Gardner. "Santa Clara County is comparatively wealthy," she says. This year, the county will receive approximately \$25 million from the state, roughly \$1.7 million less than was expected before the most recent round of budget cuts.

Vasconcellos doesn't think his role as chairman of the Ways and Means Committee should be used to fatten local programs at the expense of other counties. "I try to make sure we get our fair share," he says.

Vasconcellos' evenhandedness may help explain why he has been chairman of the Ways and Means Committee for a record ten years,

more than twice as long as any other person in California's history. But it is of little comfort to some of those who run the local programs.

"We got burned," says Tom O'Brien, the outgoing head of the county's mental health community support division and one of the principal authors of the county's reorganization plan. "I think it was political," he says of the evaluation process that placed Santa Clara County out of the running for the first AB 3777 funds. "We found some irregularities in the rating process. A couple of raters gave us a zero rating," he says, "that just couldn't have been right."

Consultants working for the state Department of Mental Health say there was no favoritism involved. Ventura County, near San Diego at the bottom of the list in terms of mental health funds received from the state, simply made a more compelling proposal, they say.

At the county level no one is waiting around to see if the state will make good on its 30-year-old promise to adequately fund community mental health programs. This summer, Supervisor Lofgren convinced the board to use county revenues to compensate for reductions in state funding. Year after year, she has bolstered local programs, doing for mental health what Rod Diridon has done for transportation. At Lofgren's repeated urgings, Santa Clara County's local contribution to mental health programs has increased from virtually nothing in 1980 to more than \$10 million this year.

Other counties have not been so generous. In August, Alameda County announced the closure of several local mental health facilities due to state budget cuts. Similarly, San Mateo County Supervisor Anna Eshoo appeared near tears last August as she voted to cut \$5.3 million from local mental health services. "You're having the guts, heart and soul ripped out of your program," a shaken Eshoo told San Mateo's mental health director. "I'm very sorry I have to preside over the dismantling of this budget," she said.

Numerous other counties are also closing facilities, shutting down remaining services and telling patients to leave town if they want treatment. "Parts of this state are beginning to look like a Third World nation. It's not going to happen here," Lofgren fumes. "It's more than appalling, and what makes it even worse is that we have made so much progress here in Santa Clara County. There are some wonderful things going on here. We have some model mental health programs that are really helping people, saving people's lives, and we need to find the support to keep these programs alive."

Lofgren's steady refusal to gut