

## VIEWPOINTS: Somethin' or nothin' for Alabama mental health system?

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By

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Alabama's Department of Mental Health announced plans recently to close three of its four largest mental health hospitals including Searcy (Mobile), Greil (Montgomery) and North Alabama (Decatur). Many observers already have weighed in to express their concerns.

Some local politicians fear the loss of state employees' jobs. Long-time observers of the state's mental health system fear a return to the darkest days of mental health care that led to decades-long litigation. Others, including mental health consumers, their families and probate judges, ask whether the department will be able to provide the care required in community settings for such a plan to succeed.

As a general principle, the department is moving in the right direction. Just like consumers of other medical services, today's consumers of mental health services deserve to obtain care in their home communities. We are long past the time when it is appropriate to segregate persons with mental illnesses for extended periods in the back wards of state mental health hospitals.

That said, all commentators agree one significant question has not been answered. As of this date, there is very much an open question whether the Department of Mental Health will have adequate funds to provide needed community services in the face of the state hospital closings.

On a strictly economic basis, the department's plan makes sense and should have been put in place years ago. The state receives no matching federal funds to run its mental health hospitals, but it receives significant matching federal funds for care provided in community placements. Thus, more persons can be served in more home-like community settings at less cost than it takes to run traditional state mental hospitals like Bryce Hospital, which will remain open under the plan.

Indeed, if this plan is not funded, the alternatives are far worse. For example, department officials have indicated as many as 21,000 persons who already receive care in the community could lose all their services. If we cannot provide sufficient community services, we will never build enough state hospital beds or have enough local jail cells to compensate for the loss of needed community services.

Yet, even as we write, the state has not made clear that:

- Adequate funds will be available to provide transition, or "bridge," services for persons moving from state hospitals to community settings.
- The department will be protected from proration in fiscal year 2012 so it can fund its plan.
- The department will receive adequate funds in fiscal year 2013 to implement and sustain its plan.

Let us be clear. If adequate funds are not dedicated to the plan, it will not succeed. Despite the best intentions, the plan should not proceed unless it is funded to succeed. Those responsible for the plan, including the governor, need to show their hand.

Billy Preston's words are apt:

*Nothin' from nothin' leaves' nothin'*

*You gotta have somethin' ...*

Alabama's Department of Mental Health, and the consumers it serves, now tread the precipice between *nothin'* and *somethin'*.

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