

NYC Pioneers an Innovative Alternative for Those on the Verge of a Mental Health Crisis



Crisis Respite Center

This piece comes to us courtesy of Stateline. Stateline is a nonpartisan, nonprofit news service of the Pew Charitable Trusts that provides daily reporting and analysis on trends in state policy.

NEW YORK – It is a busy Friday afternoon. Staff members check in guests at the front desk. Other employees lead visitors on tours of the upstairs bedrooms, or field calls from people considering future stays. Aromas of garlic and roasted chicken seep out of the kitchen.

Community Access is not a bed and breakfast, although it feels that way when you walk through its unmarked door off Second Avenue on Manhattan’s Lower East Side. Also known as Parachute NYC, this quiet seven-bedroom facility is one of four publicly funded mental health centers in New York City (located in Manhattan, Brooklyn, Queens and the Bronx) that provide an alternative to hospital stays for people on the verge of a mental health crisis.

Parachute’s respite centers have no medical staff, no medications, no locks or curfews and no mandatory activities. They are secure, welcoming places where people willingly go to escape pressure in their lives and talk to trained “peer professionals” who can relate to what guests are going through because they are recovering from mental illness themselves.

Without places like this, New Yorkers who suffer from serious mental illness would have little choice but to check into a hospital or a hospital-like crisis center when their lives spin out of control. Some people need to be hospitalized for severe psychosis and depression, but many others end up in the hospital because they have no other options.

Relatively rare in the U.S., respite centers like this one cost a fraction of the price of a hospital stay, and can be far more effective at helping people avoid a psychotic break, severe mood swing or suicidal episode.

Community-based mental health services are particularly vital at a time when the number of beds in state psychiatric hospitals has declined sharply. Nationwide, psychiatric hospitals shed 3,222 beds from 2009 to 2012 amid recession-related budget cuts, and the number has continued to decline even as the economy has improved. According to the U.S. [Substance Abuse and Mental Health Services Administration](#), 55 percent of U.S. counties have no practicing behavioral health workers and 77 percent have reported an unmet need.

Launched in 2013 by the city's public health department, Parachute NYC includes mobile treatment units and phone counseling in addition to the four brick-and-mortar respite centers. A collaboration of city and state mental health agencies, the project received a three-year \$17.6 million [innovation grant](#) from the U.S. Department of Health and Human Services. Its financial goal is to save \$50 million in hospital expenses.

In addition, New York state's Medicaid agency plans to use a federal waiver to pay for respite services and other community mental health services for 140,000 state residents under a managed care program for people with behavioral health needs. Separately, New York state's mental health office has invested \$60 million since last year on the creation and expansion of community-based services throughout the state, including child and adult respite programs.

"A hospital is the last place you want to be if your life is unraveling," said Community Access CEO Steve Coe. "They put you in a room, check your blood pressure and walk away and leave you for hours. You need to put your life back together, not be held in a place where you can't do anything or talk to anyone," he said.

Nevertheless, there is broad agreement that nonmedical services such as Community Access are not for everyone.

"The caution is that while this approach is good for some people, others really need medication and structure, so it has to be a good match for the person who is coming into it," said Sita Diehl, director of state policy at the National Alliance on Mental Illness. "The advantage is that you get an expert listener working with you, really delving into who you are, rather than someone slapping a diagnosis on you and handing you a prescription."

Averting Crisis

Parachute NYC provides a non-threatening environment where people who are coming undone can take a break

from their turbulent lives and think through their problems before they reach a crisis point. Many who shun hospitals and crisis stabilization units will voluntarily seek help at respite centers.

In fact, Community Access insists that all prospective guests check in on their own, without coercion from a doctor, friend or family member. They also screen applicants to ensure that respite is their best option. Some may need medication and more intensive treatment from medical professionals.

"We're not against medication," assistant director Keith Aguiar explained. "If they come in with their own medications and they want to take them, that's fine. But we do not tell them they have to."

Many guests have full-time jobs and continue working and seeing friends during their stay. They can come and go any time of day or night. Unlike a hospital, Coe stressed, respite centers allow people to maintain their lives and relationships instead of putting everything on hold. Guests can also continue seeing their regular mental health providers during their stay.

The maximum length of stay at Parachute NYC respite centers is 10 days, soon to be shortened to one week under new Medicaid rules. But guests can return up to three times per year as needed. They also can visit weekly and monthly as "alumni" and take part in group activities and talk to staff.

To qualify for any of Parachute's respite centers, guests must be New York City residents who are 18 or older. They must also have a clinical evaluation (within the last 48 hours) and a referral from a mental health provider stating they are not an imminent risk to themselves or others and would benefit from respite care. Guests also must have stable housing to go back to.

The Guest List

"We have a wide diversity of guests, from a Columbia University professor and an art critic to people who have been chronically homeless much of their lives," Aguiar said. "We see men and women of all ages and all walks of life."

In the last month, the guest list at Community Access included a 28-year-old woman who was living in mental health support housing and believed her roommates were practicing witchcraft on her. She was referred by her housing counselor. Another 24-year-old woman

with a diagnosis of schizoaffective disorder needed to escape mounting conflicts at home with her brother, who had a diagnosis of schizophrenia. She was referred by a community psychiatric team.

A 70-year-old jazz musician who suffered from drug and alcohol addiction came to get away from his chaotic living situation. He talked to peers about his struggle with addiction, played his trumpet and napped a lot during his stay. “It was the best sleep I’ve had in years,” he told the center’s director Lauren D’Isselt, who is a psychologist.

Another woman, 25, applied to become a guest without a referral (the center arranged for Parachute’s mobile unit of clinical professionals to provide an assessment.) She’d heard about Community Access from a friend. A native New Yorker who left college because of severe depression, Maggie (not her real name) spoke calmly about her history of mental illness while sitting on a bench on the center’s sunny back courtyard.

“I wanted to finish college,” she said, “but I kept ending up on the tops of buildings.” Diagnosed with depression when she was seven, Maggie has been in psychiatric care most of her life. She spent the better part of the last six months in hospitals.

Now that she’s back in New York temporarily living with her parents, she said she wants to find the right kind of treatment and get on her feet so she can return to school. “Living at home is not very comfortable because my parents are the source of my problem. They abused me when I was a child,” Maggie said. She said she could stay with friends, but they don’t understand what she’s going through.

Five days into her stay, Maggie said it’s been good for her. She’s been able to make plans for future treatment. “It makes a lot of sense,” she said. “At a typical hospital, they take depressed people and lock them up and away from everyone and expect them to get better. Here you can go out and have coffee with a friend and no one has to go through double-locked doors to see you.”

“When I feel really anxious or sad, I can talk to a peer. Places like this are rare,” Maggie said. “But they shouldn’t be.”

A National Need

One in four adults, about 62 million Americans,

experiences some form of mental illness during the course of a year. Of those, about 14 million live with a serious mental illness such as schizophrenia, major depression or bipolar disorder, according to data from the National Alliance on Mental Illness. More than half of them do not seek treatment, in many cases because they don’t know where to find help.

For those who do seek treatment, the direct medical costs total more than \$100 billion per year, according to estimates from the National Institute of Mental Health. Community mental health services such as respite centers may make it possible to reduce those costs and relieve the demand for psychiatric hospital beds, which are in short supply in most communities.

Parachute NYC has so far served about 700 people at its respite centers, 600 through its mobile treatment teams and more than 20,000 through its peer-operated telephone support service. The city’s health department intends to analyze the program to determine whether it has resulted in a reduction in the city’s 100,000 annual psychiatric emergency room visits.

“We don’t perform miracles here,” D’Isselt said. “But we do help people find joy in their lives.” Most guests forge new friendships and leave with a new life plan, she said. “A lot can happen in a week.”