THE EMERGENCE OF THE BOWERY AS A PSYCHIATRIC DUMPING GROUND

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The drastic reduction of State Hospital population in New York over the past decade has led to a demographic relocation of the mentally ill, rather than any real decline in the rate or severity of mental disorders. Unable to function on their own in society and without adequate supportive facilities available, many discharged patients live in the streets and eventually end up on the Bowery, where they are cared for at The Men's Shelter. Studies have shown that over 50% of the current Bowery population has a history of mental illness and that alcoholism is often a secondary, rather than primary diagnosis. The most frequently encountered diagnostic syndromes are mentioned and commented upon. Possible alternative treatment interventions are suggested.

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Essentially, the discharged patients have been placed in, or found their way to nursing homes, health related facilities, proprietary homes or single-room occupancy dwellings (SROs). Unfortunately, large numbers of these former mental patients are lost to follow-up and continued treatment and lead aimless existences in various locales in New York City and throughout the state. These patients and the “bag-people” and drifters amongst them, have become a common sight and are well known to the general population. Eventually, many of them end up on the Bowery, at the “bottom-of-the-pile,” and find their way to the Men's Shelter on East 3rd St.

The Municipal Administration Building, commonly known as The Men's Shelter, is located in an old Y.M.C.A. building taken over by the city in 1946 in the decaying Bowery section of New York. Surrounded by lots...
filled with garbage and boarded up buildings, The Men's Shelter is home for those who have no place else to go. Statement of need is the only requirement for service. Meals, beds, showers, clothing, and medical attention are available here. A system of vouchers is used whereby the client is given a ticket for a meal at a central kitchen or cafeteria, a bed at any one of a number of flophouse hotels in the area, and clean second-hand clothing from stores which are under contract to the city to provide these services. No money changes hands except for occasional carfare payments which enable a client to return to a job or visit a relative.

There is a small dormitory which sleeps twelve, used for geriatric clients who, because of injury or ill health, cannot move around the streets on their own. There is a large "day" room on the first floor where the men can watch TV or nap, and recreation facilities are on the fifth floor.

The center maintains a medical clinic, supplies a registered nurse, and provides X rays to detect T.B. There is a medical-social worker and at least one psychiatrist present every morning for consultations and evaluations.

When a man first comes to the center, he is seen by an intake unit on the first floor. If he returns several times, he will be referred to a case unit where a more careful history will be taken and possible referral made to an outside rehabilitation program or another social-service organization. Since it has been found that 60% of those who come to the intake unit will disappear from the shelter within ten days, no further evaluation is made until after that length of time. If an man remains, however, he will be seen by an evaluation and intervention unit, and assigned his own social worker, whom he will see whenever he comes, for counseling or referral to one of several programs run by the shelter. If his behavior is particularly bizarre, he may be referred to the psychiatric section. If not, he may participate in a work-support program. Here clients are seen in groups, for counseling sessions on different common problems, such as poor motivation, alcoholism, or depression. Many of these men are placed in jobs at the shelter itself, or provided with day work through connections with local business.

For the habituated skid-row man who has been making the shelter his home for several years, a permanent population unit aids in obtaining social security pensions.

All of these services, supplied by the shelter, cost approximately $9.84 a man per day, a cost shared equally by city and state.

Most men coming to the shelter are not referred directly by hospitals but gravitate there on their own or are referred by friends. A study conducted by the Senate Democratic Task Force of the City of New York found that in January 1976, 38% of referrals to the Men's Shelter were made by self or friends and 8% reached the shelter via hospital information upon discharge.

In effect, the Bowery and specifically the Men's Shelter has become a dumping ground for severely disturbed mentally ill which is reflected in the changing profile of the Bowery population in the past several years. Ten years ago the standard case at the Shelter was 55 years old, white,