

EVALUATION OF
THE MENTAL PATIENTS ASSOCIATION AS AN OPPORTUNITIES PLACEMENT

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In review, the MPA applied, and was accepted, as a placement in May 1971, so this evaluation covers a nine months period. During this time a total of 27 people have worked as volunteers within the MPA. The average number of volunteers placed at any one time has been fifteen. All, excepting one man, are people who have been, or are, undergoing treatment for psychiatric problems that prevented employment, or acceptance, by the working community. At the MPA, the volunteers have been assigned to perform useful work in a sheltered, confidence-building, environment.

Since Fall, six people have left this Opportunities placement, and re-entered the working community. Two volunteers obtained employment, via requested new VOP placements, as school aides funded through the Federal Local Initiatives Programme, and three volunteers obtained full-time employment. All five are no longer in receipt of Social Assistance.

One former volunteer is currently employed at the MPA as cook.

One other volunteer has returned to school.

Two more volunteers requested other placements, and are currently functioning independently in the community.

To date, this makes a total of ten people that have made a combined use of the shelter and supported services offered at the MPA, plus the incentive and structure of the VOP, to gradually move back into the community. Due to the short time this association has a number of Opportunities, it is difficult to project what the average length of time is that a volunteer may need to spend at the MPA as his placement. However, it has been demonstrated that the MPA encourages movement into the community, as soon as the volunteer appears ready. The total length of time needed for participation in Opportunities, is probably going to be shown as standard. This, of course, is dependant upon individual needs, the same as for anyone who participates in the VOP.

It is my opinion, that the MPA is a model self-help group, and provides a real service to its specific group of people, and to our community. The shelter offered, affords those lacking self-confidence, the chance to re-enter society in a gradual and positive manner. The liaison between the VOP and the MPA, is an invaluable resource for these former patients. The fact that ten people in nine months have been able to return to the working community, whether as volunteers, workers, or students, is a statistic that cannot be quoted by many other self-help groups, and certainly not by one that has mental patients as its membership.

The supervisors of MPA*VOP volunteers, Mr. Lanny Beckman, Mr. Barry Coull, and Mr. Gerry Walker, have demonstrated to me an honest concern that the criteria for volunteer placements be met, and enforced. This is illustrated by the fact that, although there is an allowance for 20 volunteers at any one time, there has never been more than 18, and the current number is 13. There are not make-work situations developed in this placement, and a volunteer is not placed unless he will be doing a valid function, and is capable of performing his job well. If a volunteer does not prove satisfactory, he is terminated, thus proving that internal discipline is strong, and the VOP protected from any who might wish to misuse it.

To date, I have not collected written opinions from Doctors and Social Workers on this subject. But, I have a lot of verbal communications, and the thoughts are that the combination of MPA-VOP, is of great benefit to their patients, and produces positive results. Professional documentation would delay the submission of this evaluation for some months, but I will get such papers, if requested.

I recommend two changes in the restrictions now placed on the MPA:

1. That a Psychiatrist's letter no longer be a requirement

for placement, as the initial screening practised by the supervisors, has proven to be effective and sufficient.

2. That the ceiling of 20 volunteers be established as negotiable. The MPA is now opening a second "house", and it is probable there will be need for more volunteers in the next year.

Any reservations that may have been felt when the MPA first became a member agency of the VOP, have most certainly been erased in the last nine months. There can only be genuine respect for this group, and their attempt to meet the very real needs of the mental patient. In conclusion, I ask for the acceptance of my recommendations, and say that the MPA is a valid and necessary Opportunities placement.