Lawsuit Challenges Unwarranted Confinement of People with Mental Illnesses in Connecticut Nursing Homes

February 6, 2006—A lawsuit filed today in the Federal District Court in Hartford alleges that more than 200 people with mental illnesses are “needlessly segregated and inappropriately warehoused” in three Connecticut nursing homes, and asks the court to order state agencies to develop suitable community-living alternatives for them.

The complaint asserts that confinement of these individuals in Chelsea Place Care Center Hartford, Bidwell Care Center in Manchester and West Rock Care Center in New Haven —nearly half of them on locked wards— violates federal laws, such as the Americans with Disabilities Act, that require states to serve people with disabilities in “the most integrated setting appropriate to their needs.”

The suit is filed by the state Office of Protection and Advocacy for Persons with Disabilities (OPA) and the Bazelon Center for Mental Health Law, a national legal-advocacy organization. The Commissioners of Social Services, Mental Health and Addiction Services, and Public Health, and the State of Connecticut itself are named as defendants. OPA is also being represented by pro bono counsel from the firm of Stroock Stroock & Lavan of New York.

“The current situation is a travesty. The state spends huge amounts of money to keep people with psychiatric disabilities where they don’t want to be —and shouldn’t be,” said Ira Burnim, legal director of the Bazelon Center. “Connecticut spends $50,000 to $80,000 a year to house people with mental illnesses in nursing homes. Compare that to under $25,000 that the Pathways program spends to provide community-based services to people with extremely high needs in New York City— hardly a low-cost housing market.”

A representative resident of a Connecticut nursing home, "Susan" is in her 20s and has been at Bidwell almost a year. After leaving home, she lived in shelters and was ultimately hospitalized. She was discharged to Bidwell. She is diagnosed with schizo-affective disorder and multiple personality disorder, and has a history of substance abuse. She has attended college and worked in a grocery store. Susan would like to be discharged to a group home or supportive apartment. She finds it hard to speak on the phone because of the lack of privacy at Bidwell. She would like to be able to use a computer, but there are no computers.

According to James McGaughey, OPA executive director, “Nursing homes have become the functional equivalent of the back wards of the old state mental hospitals: Personal liberty is restricted, skills are lost, treatment is minimal and lives are being wasted. We know how to do better —how to help people with mental illnesses recover their lives and their rightful place in the world. We owe these people more than careers as mental patients.”
More than 2,700 people with primary psychiatric diagnoses live in Connecticut nursing homes, according to the December 2004 report of the Lieutenant Governor’s Mental Health Cabinet, and the number is growing at a rate of between 5 and 10 percent annually. Many are placed in nursing homes “solely to obtain mental health care that could easily be provided in an integrated, community-based setting,” the lawsuit asserts, adding that often they do not have any significant physical health problems.

For example, “Jerry” (a pseudonym, for privacy) has a diagnosis of schizophrenia and depression. He was hospitalized, then discharged to Bidwell five years ago. He remains confined, despite social workers’ assessment that, with medications he can take on his own, he can again work and live successfully in the community. Other long-term residents, like “Kathy” at Chelsea Place and “Marjorie” at West Rock, have addiction disorders in addition to psychiatric diagnoses, but no serious physical problems. They attend AA meetings, which they would continue in the community.

The lawsuit challenges Connecticut’s failure to comply with the United States Supreme Court’s 1999 Olmstead decision, requiring states to develop and implement a “comprehensive and effectively working plan” to identify people with disabilities who are unnecessarily confined in segregated settings, such as nursing homes, and help them move to more integrated living arrangements.

“While continued segregation in nursing homes is contrary to the Supreme Court’s decision and a problem nationwide,” said Bazelon Center staff attorney Karen Bower. “Connecticut, of all the states, has the resources and know-how to address it. Yet,” she added, quoting the Mental Health Cabinet report, “the state itself has pointed out that, ‘rather than effective treatment and recovery, Connecticut pays more for less.’”