LOOKING BACK

In reviewing this history, it clearly shows that GVMHS never lost sight of its original mandate to provide service to the serious mentally ill, first with adults, later with families and children, and finally with geriatric populations. GVMHS pioneered community mental health services in the Vancouver area, and in the process, received international recognition as it focussed on individuals who, historically, were left untreated, and which drew interest and accolades from countries around the world.

GVMHS throughout its history, on behalf of its clients, reached out and made agreements with other service organizations such as the Police, Hospitals, Alcohol and Drug Programs, Corrections, Forensic Services, Human Resources (Now called "Employment and Income Assistance"), School Boards, along with a host of community agencies such as MPA, Lookout, Triage, Coast Foundation, and the Kettle.

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GVMHS was adaptable and open to change. As the clientele changed from the early years in 1973, GVMHS recognized these changes and responded clinically by creating special projects like the Multi-Service Network, the Inter-ministerial Project, the Dual Diagnosis Program, the Multi-Cultural Program, the ACT, and the Bridging Teams. In the area of Rehabilitation, aside from the work done by occupational therapist and rehabilitation workers at the Teams, GVMHS created the Gastown Vocational Services, Gallery Gachet, the Art Studios, the Peer Support Program, and embraced the concept of consumer involvement by forming the Client Advisory Committee.

GVMHS also remained non-hierarchical, with each Mental Health Team and specialized unit being unique, and operating with a degree of autonomy within the overall policy guidelines of GVMHS. This was a feat for any organization of this size to accomplish and one which fulfilled the Fifth Objective of Dr. Cumming's Vancouver Plan (Decentralizing This New Community Service).

GVMHS pioneered community mental health services in the Vancouver area and left a legacy for future mental health workers and administrators which will be difficult to ever emulate and which should be acknowledged and not forgotten.