

US: Mentally ill woman left to die in hospital waiting room

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A videotape aired on national television showing a patient dying in the waiting room of the Kings County Medical Center in Brooklyn last month has provoked a wave of revulsion.

Esmin Green, 49 years old, was taken to the psychiatric wing of the massive public hospital in New York City's most populous borough on June 18. She was apparently having some form of mental breakdown. Ms. Green was left almost 24 hours in the psychiatric emergency room because there was no bed available.

Video cameras in the emergency room later showed the woman sliding off a chair at 5:32 a.m. the next morning, nearly a day after she had arrived. At first Ms. Green writhed on the floor, and then lay face down. For the next hour, a security guard and other staff members ignored her. At last one employee attempted to arouse the patient with her foot. Finally, an hour after she had fallen, an unsuccessful attempt was made to revive Ms. Green. A Jamaican-born immigrant, she worked at a day care center and was the mother of six children, the youngest 14 years old, all still living in Jamaica.

What brought this death in the emergency room to public notice was that it was captured on tape and also that the New York Civil Liberties Union had joined in a lawsuit against the public hospital a year ago, accusing the authorities of exactly the sort of behavior documented on the video. The suit charges not only that psychiatric patients are neglected at Kings County, but that they are kept in filthy surroundings and drugged in order to keep them more manageable.

The video was turned over to the Civil Liberties Union in connection with the ongoing court case, and that is how the graphic illustration of conditions at the hospital became public knowledge, shown on television and on the Internet.

The airing of the videotape has been followed by a predictable flurry of official reactions. Alan Aviles, the president of the city's Health and Hospitals Corporation, issued a letter on July 1 to all hospital staff, expressing his "sorrow and shame," and announcing that the HHC had now agreed, in connection with the NYCLU lawsuit, to increase monitoring of patients in the hospital's Comprehensive Psychiatric Emergency Program. Patients awaiting admission will now be checked every 15 minutes and the hospital pledges to reduce waiting time to between 10 and 13 hours within the next four months.

Donna Lieberman, executive director of the NYCLU, declared: "That it took somebody keeling over and dying, and it being captured on videotape, for the city to come to the table in a meaningful way is unconscionable."

Aviles also reported that six employees, including those who had ignored the patient, a nurse who falsified the patient's medical chart after her death in an apparent attempt to cover up for gross negligence, and two senior psychiatric managers, had been fired.

It is not surprising that the entire focus of the official response remains on punishment for those with immediate responsibility, along with a few minor procedural changes. It has also been reported that federal and city authorities are considering criminal charges in connection with the death of Ms. Green.

This horrifying incident calls for more than outrage, however. This death begs for careful consideration of what it reveals about the health care system and more broadly about life in New York City and society at large.

The response of New York Mayor Michael Bloomberg was perhaps unintentionally revealing in this regard. After declaring that he was "disgusted," the

mayor said to reporters, “I can’t explain what happened there. Does it say anything about our society? ‘I hope not’ is the basic answer.”

Of course Bloomberg knows the answer is yes, but he chooses to say “hope not” as a way of communicating concern without delving any more deeply into the significance of the incident, much less proposing any systemic changes in response. It is Bloomberg and the whole political and financial establishment who are responsible for the conditions at Kings County.

When a half dozen employees, who stand out in no particular way, are involved in something like this, the endemic character of the problem should be apparent to anyone. A lengthy investigation should not be necessary to discover understaffing and underfunding, low pay and inadequate training, all contributing to a demoralized workforce in which feelings of empathy or consideration for the patients with whom they work has declined or evaporated completely.

In addition there is the prevalent stigma attaching to mental illness, in which chronically ill and often “difficult” patients are shunted aside, treated with contempt or in some cases viciously abused.

Although conditions may be most severe for psychiatric patients who are unable to care for themselves, the crisis at Kings County is part of a broader, nearly universal state of affairs in urban public health. As a general rule, the poorer the population, the worse the services. The demoralization of the workforce translates, not all the time but all too often, into substandard care and occasionally abuse.

Nor is this problem confined to health care. The prevalent atmosphere is the law of the jungle, in which empathy is considered something quaint. Even in the wealthiest country in the world—especially in the wealthiest country, under conditions of growing inequality, poverty and social tension—life is cheap, the values reflected by reality television are increasingly encouraged, and ignoring or trampling on others is not considered anything special.

Social polarization permeates every aspect of life. The super-wealthy have their own private “concierge” health care and every imaginable luxury at their command. The growing numbers of the poor, like Ms. Green, are shunted aside and thrown literally onto the scrap heap. And the great majority of the population in the middle faces loss of jobs and joining the 47 million

Americans without health benefits, only a step away from destitution and treatment similar to that suffered by Esmin Green.



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