

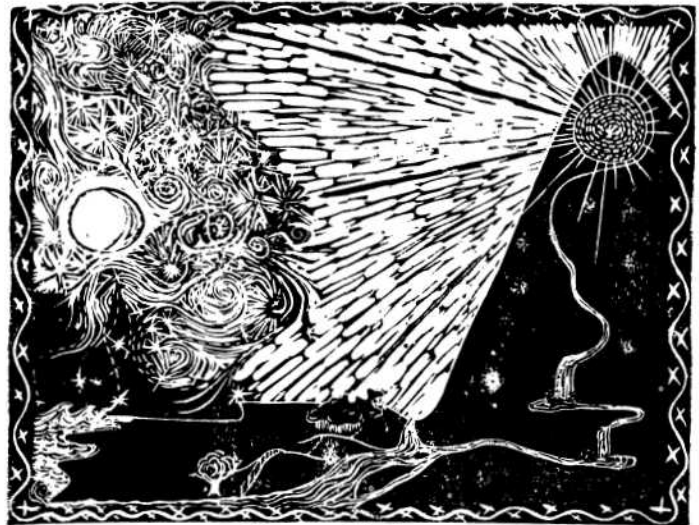
Critical Mass

On one of the walls in the ward was written:

I am trying to work on some of the larger issues in mental health such as the whole problem solving process. It seems to me that the more a community deflects its problems (say hospitalizes a crazy) rather than dealing with them as part of the community that community loses its ability to solve problems as a group. In my observation that is where it is now with this country large and small groups of alienated people who have never learned problem solving skills they certainly don't teach that in school. Sooooo what I like to do is organize our community, the hospital, around issues and problems under the guise of making a video tape. Now if you are making a tape you can ask a lot of questions you can't without a camera in your hand, so I spot a problem area in the hospital and proceed to make a tape on some aspect of the program around the problem. First, I do not approach the group and say: "wow, have you got a problem!" That immediately would put them on the defensive and put me outside of the group. Instead, I approach ... with a friendly smile ... and a rap about how much a particular tape is needed for training, "can they help me?" They always want to because video IS fun. In the process of getting something together I ask questions that make them aware of their problem - they thought of it - and we are able to process it out and I truck off with a tape under my arm ..and more often than not their problem in my tape box. No one has to loose face or be faced with "professional" help for a "problem". This is just one way of focusing on a community of 1800 patients and staff.

I've always operated a very accessible studio. Information content is high in my area. We are located centrally, adjacent to the training area and have access to a lot of information about the facility. Video is used to fill some of the needs of the front line staff (as opposed to administrative decision makers). For instance, several of the groups I've had in the studio have been hassled about something going on the structure of the hospital. They were not in a position to check those things out for themselves and there were many information gate-keepers above them to filter out all the goodies. So I organized the

group around the old reporter model. We started with who do you want to talk with, then call him/her up and rap on them about the super video we are making for training with a student group. Could he/she come to the studio for a short rap? Sure, he/she would really dig it. The studio group then frames questions which get at the things they wanted to know. So the talent shows, the students do the rap, while of course running all the equipment, directing, etc. The star leaves not feeling ripped off, in fact feeling really good about the thing. The students are really into the trip of having "tricked" some information out of the system.



I am into many things which are subversive in a "sense". Information control is a very big issue in any bureaucratic organization and I am into proliferating information.

We do all the other things with video like feedback in therapy, group analysis and so on. But what I am trying to do is take more of a global look at the problem of running a large state institution and in looking at that I have assessed (along with others) that the structure of the system is conducive to mental illness (whatever that is). For example, a person in crisis is open to new states of consciousness. Contrary to how we usually think about crisis it is one situation in a person's life which is filled with potential. A person in crisis is open to signals from his social surroundings as to who he is. Since his identity is not clear to him he builds new identity from the