

Adaptive Reuse Proposal - Charity Hospital

After several meetings with members of the New Orleans community and healthcare and justice advocates, SaveCharityHospital.com proposes that the million square foot abandoned Reverend Avery C. Alexander Charity Hospital Building be developed to consolidate organizations tasked with finding solutions to systemic challenges of mental illness, homelessness and meaningful workforce development into one space - as well as to create a comprehensive/cohesive/multi-complex facility to act as a “nerve center” to drive a regional 10 to 15 year strategic master-plan designed to address the aforementioned systemic problems.

The space would be divided up into four main parts:

- Clinical and mental health research
- Affordable/transitional housing
- A crisis unit/restorative center to provide long-term inpatient care to patients suffering with severe mental illness as an alternative to incarceration - including rehabilitation for substance abusers
- The remainder of the space is to be used by a matrix of organizations collaborating together under one roof to drive a 10-15 year comprehensive plan that acts as the nerve center that drives implementation of the plan region-wide.

An expanded version of the plan, and how all the space can be used, would involve many new and existing components working in conjunction with one another. A long-term comprehensive plan is necessary to knit together systemic problems regarding the epidemic of mental illness, workforce, education and housing inequity to create a roadmap that drives changes necessary to get to the roots of what is making people, cities and our society sick.

Here are some of the more outstanding necessary components:

- Long-term Inpatient psychiatric facilities - including rehabilitation programs – in part to mitigate the need to incarcerate people with mental illness.
- Outpatient primary care clinics.
- Independent living and supportive communities with medical support staff on site.
- Preventative and holistic health healing and treatment programs.

- An aggressive marketing campaigns to help alleviate the stigma around mental illness and to generate positive messages that get people excited about wanting to work in their respective fields.
- Urban Cooperative Development and investment to enable under-resourced people to be members and stakeholders in worker-owned businesses. Cooperatives allow members with good ideas the same entrepreneurship opportunities as people that perhaps more endowed.
- Research Organizations
- A cooperative sharing environment – implementation of the strategic master plan benefits from the entities being in close proximity to one another providing an opportunity to share resources, products and expertise
- Affordable/Transitional housing for homeless people and/or people with certain types of mental illnesses.

Discussions need to pursue the possibility of diverting **funding meant to ensure safe and constitutional facilities for inmates that suffer from mental illness at Orleans Parish Prison to a crisis unit/restorative center - at the Charity Hospital building - as part of the larger complex – providing compassionate care versus incarceration.**

A portion of the million square foot building can be physically separated to create a crisis unit/restorative center with long-term beds to care for mentally ill people, reducing the necessity to incarcerate those who cannot find appropriate inpatient care nearby.

We are at a critical juncture in New Orleans. The fate of people afflicted with mental illness rests largely on whether or not we as a society choose to continue to incarcerate sick people under the department of corrections, or rather, create alternative facilities where patients can be cared for in a local hospital environment close to their families and community.

In terms of commercial real estate, it makes sense to reuse Charity for its originally intended purpose: i.e. medical use that also complements the biomedical industry with a focus on mental health research.

Faced with the challenge of how to pay for a renovation that could potentially cost anywhere from \$600 to \$800 million dollars, proponents of this new initiative envision using multiple financing sources. Some possibilities include: **bond money, State and Federal financing, grants, philanthropic gifts, international investment and historic and low income housing tax credits** to help meet critical mental health needs and mitigate the lack of inpatient public psychiatric hospital beds locally - and regionally. A debt obligation to a bonding authority could be met by leasing out space to private health and research organizations.

We have not only an epidemic of mental illness locally and regionally; we also have an epidemic of abandoned hospitals and buildings. If the Charity Hospital as a Mental Health facility vision is successful, the model could be replicated in other Cities and States across the country.

The concept is not a strategy to recentralize people with mental illness inside of Charity Hospital, but rather to have the building act as the brain center to implement out a larger decentralization plan by creating programs that are missing and enhancing programs already in place.

Please do not hesitate to contact us with any suggestions, questions or concerns.

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