

A new view on mental health

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The city is in the unique position of not just being able to lift the veil on mental illness – it could rip it right off. With a bustling network of organizations already in place and the introduction of the state's first new psychiatric facility in more than 50 years, some see Worcester with an opportunity to become the state's hub of mental health services.

“I’m not from this area and my reaction was, ‘Wow, there is so much happening here,’” says Dennis Nealon, associate director of communications for the Department of Psychiatry at UMass Medical School. “I think there is a lot of evidence to suggest it’s already at the doorstep of becoming a hub. It’s already evolving.”

“Worcester,” says Deborah Ekstrom, “has the advantage of being a big enough city to have a wide range of services and small enough that the organizations can all talk to each other.”

As president and CEO of Community Healthlink, where the specialty is servicing people with co-occurring disorders such as mental illness and addiction, Ekstrom sees firsthand the devastating effects of an affliction to which others cast a blind eye. She is fully aware that, while strides have been made, there is very much a stigma attached to mental illness. She attributes part of that to a misunderstanding of what it really is.

“Mental illness is a label we put on a lot of diseases,” says Ekstrom. “It’s like cancer. There are lots of types of cancer; it’s the same thing with mental illness. There are some people with serious disorders that have a profound impact on their lives.”

A CITY CONNECTED

Ekstrom believes Worcester is at the right place at the right time with a cohesive and cooperative network of mental health services. The new Worcester Recovery Center and Hospital (WRCH) – which is replacing Worcester State Hospital (WSH) – should only help expand that network,

and Ekstrom says she was heartened when she and other area providers were invited to the center last week to discuss ways to better share services and resources. Ekstrom says the center invited Community Healthlink caregivers to work with its patients; in turn, Worcester Recovery Center and Hospital patients can be directed to Ekstrom's agency.

It is precisely that sort of interconnectivity of services that has Worcester well positioned to make deep inroads into pulling mental illness from the shadows out into the open. Community Healthlink, with roughly 80 different programs serving 19,000 clients, is among those leading the way. It is not alone, with dozens of private practices and other agencies such as Genesis Club Inc. on Lincoln Street and Central Massachusetts Recovery Learning Community (RLC) on Stafford Street each offering something different in confronting mental illness. Throw into the mix a widely regarded psychiatric department at UMass Medical School and the city is cooking up a recipe it wants to share with as many people as possible.

"We never give up," Recovery Learning Community Director Brenda Vezina says of what gives Worcester an edge in tackling mental illness. "We're always trying to be cutting edge. We really rally for what we need. There's an excitement about the growth and development in Worcester. It's exciting to be part of a city on the cutting edge of providing these services to people."

The psychiatry department at UMass is but one example of the advances being made. Researchers there are working with MIT, WPI, UMass Medical School and the Veterans Administration to develop iLink, a mobile app that would allow users to access directions to a local shelter or clinic, find work or contact a social worker. It is in development and could be available for testing within a year, according to a press release earlier this year.

"I think Worcester is well equipped," says Worcester's Paul Richard, well known for his volunteer efforts with the city's youths and the new director of the SHINE Initiative in Leominster. "It has a number of competent service providers in both the private and public sector. The biggest problem is there are not enough licensed clinical psychiatrists, especially for those who need screening and counseling."

IN DIRE NEED

Just how acute is the need for available psychiatric services? According to the National Institute of Mental Health (NIMH), an estimated 26.2 percent of all Americans ages 18 and older, or roughly one in four adults, suffers from a diagnosable mental disorder in any given year. That

translates to nearly 58 million people going by the 2004 U.S. Census. The illnesses can range from normal stress-induced anxiety to severe schizophrenia. Many people may not think of anxiety as an illness, and yet 28.8 percent of the all U.S. adults will experience some form of anxiety in their lifetime. The problem can grow to the point of a generalized anxiety disorder, characterized by worrying about a variety of everyday problems for at least six months. According to NIMH, 5.7 percent of the adult population experiences generalized anxiety disorder over their lifetime.

PHOTO: Community Healthlink President and CEO Deborah Ekstrom leads one of the city's most comprehensive mental health treatment centers. Steven King/Worcester Mag

“We have a lot of services in Worcester,” says Ekstrom. “Do we have enough services? Some people would say no. There just aren’t enough providers and most of the ones there are have waiting lists. There is always more demand than availability.”



In that regard, Worcester is no different than many other communities; being small enough that communication and shared services can be effective does stand it apart, however. Also, some areas do not offer the types of services as Worcester within their city limits. Springfield, for example, does not have a Recovery Learning Community, according to Ekstrom. It does have a clubhouse, but “not of the caliber of Genesis,” says Ekstrom.

Worcester is also looking at recovery more and more when it comes to dealing with people living with mental illness. While not a new concept, it is one that has been slow to catch on. “The entire Worcester treatment community has really embraced the recovery model,” says Ekstrom.

It has also turned more to peer-to-peer therapy. Licensed counseling is often necessary and severe mental illnesses may require hospitalization in a facility like Worcester Recovery Center and Hospital. But once people suffering from a mental health disorder are able, or even during or after in-patient treatment, they can find an understanding ear in someone else that has gone

through the same thing. That is the model used at the Central Massachusetts Recovery Learning Community in Worcester, and it proved a saving grace to 50-year-old Mike MacInnis.

ONE MAN'S JOURNEY

Having grown up in the Blackstone Valley in the small town of Douglas, MacInnis remembers feeling low and hopeless as far back as his early 20s. He just didn't know what was wrong – or that there was a name for it. "I didn't know what it was," says MacInnis. "I would go from zero to 60 in three seconds. I was experiencing a lot of pain. One minute I wanted to hibernate, the next minute I'd be the life of the party. I would spend and gamble. I knew I was in pain, and I just wanted to kill it."

While he did not know it then, the life experiences he was going through were only fueling the feelings of desperation. When he was in his early 20s, MacInnis lost his older brother to suicide. He went through a divorce in his 40s. He also lost a cushy job at Waste Management (WM). "One year I won the National Circle of Excellence Award," says MacInnis. "A couple years later I was taking a severance package. I wasn't doing what I was supposed to be doing. I couldn't focus."

While he had sought out counseling in his late 20s, MacInnis admits he wasn't ready to tackle his problems. Now, he was in his 40s. "At that point, I knew," he says. "In hindsight, I really wasn't putting the work in that I needed to."

He had also skated through his 30s with relatively few hiccups. He was married and had children. Things, he says, were going well. "I don't know what triggered it, but then they started not being well," says MacInnis. He says he thought of taking medicine, but would convince himself he could make it through the rough patches without it. One day, while watching a Patriots game, MacInnis simply got up and left his house and didn't return for a couple days. He says he drove to Boston and Providence and slept in his car.

"It was ugly when I came back, as you can imagine," he says. It got uglier when he told his wife he wanted a divorce. "I kind of blindsided her, which was a horrible, hideous thing to do."

The downward spiral only grew worse after his divorce, MacInnis acknowledges. To that point, he had never tried to kill himself, but one day he filled his bathtub, plugged in a hairdryer, got in

and held the appliance in his hand over the water. “I was pretty sure I didn’t have anything left to give, but I don’t know if I wanted to die,” he says. “Maybe it was a cry for help.”

MacInnis once more went for counseling. What he learned was that he had never given full weight to the events that had shaped his life: a brother’s suicide, the loss of a job, a divorce. Each was a traumatic episode unto itself and all had tossed him into the throes of depression. “My councilor convinced me I had a lot to offer, but I just needed some structure,” says MacInnis. He

also did what he hadn’t done before: take medicine.



PHOTO: Mike MacInnis came to the Recovery Learning Community needing a sympathetic ear. Today he is the agency’s chief relations officer. Steven King/Worcester Mag

His councilor had one more suggestion: “She thought [Recovery Learning Community] could be a good place to come to,” he says. It wasn’t an immediate fit, but over time the few visits

MacInnis made to the agency turned to many, and the time between from infrequent to often.

“I started to get a little sense of belonging,” says MacInnis. “My confidence was coming back. Eventually, I was feeling really good.”

Good enough, in fact, that one day he approached Vezina and asked to meet with her. She agreed and MacInnis brought a resume to that meeting. “I said I have a proposal,” he recalls. “I said I think I can help you. I said to her, ‘Let me get back in the game.’”

That was two years ago. Today, MacInnis pays daily visits to Recovery Learning Community - as the agency’s chief relations officer. “Hell no,” says MacInnis, breaking into a wide grin when asked whether he ever envisioned himself where he is today. “Heck, I used to vote Republican. I’m in a good place in my life. I have a house, and I live with my girlfriend and her two daughters. I’ve reacquainted with a lot of friends I lost when I was sick. My kids respect me again. I don’t have everything I want, but I’ve got everything I need.”

IN RECOVERY

In a nutshell, what MacInnis did as a client and does now as a RLC employee is what the recovery model is all about. Beyond the drugs and the psychiatric counseling, it is involvement with everyday activities. It is being around others going through the same or similar things, struggling with the same or similar problems. It is being treated not as different, but as an equal, even if they need to be coached, taught or guided along the way.

PHOTO: Worcester State Hospital's clock tower looms behind the new Worcester Recovery Center and Hospital. Steven King/Worcester Mag

At Recovery Learning

Community, it involves being helped by a peer – someone who has been through his or her own lived experience. At Community Healthlink, it means being exposed to one of the city's most



comprehensive treatment facilities through services ranging from psychiatry, medication and counseling to case management, outreach and crisis stabilization. At Genesis, it is getting to work side-by-side with club employees, chatting with fellow members, going back to school at area colleges and universities and taking part in a transitional employment program that last year saw 161 members working for 35 participating employers and earning a combined \$1.2 million in wages. (According to Executive Director Kevin Bradley, Worcester's Genesis Club meets and exceeds the best employment outcomes in the country when compared to similar work programs for the mentally ill.) And when patients at the old Worcester State Hospital move to the new \$302 million Worcester Recovery Center and Hospital, it will mean getting healthier in a state-of-the-art building that was designed not just to house patients, but to be a part of their recovery.

AN 'INCREDIBLE' INVESTMENT

The fact that mental health providers in Worcester are excited about the opening of the Worcester Recovery Center and Hospital is understandable. While organizations like Genesis have been preaching recovery for years – and while the state Department of Mental Health

(DMH), which oversees the new facility, has long fought to put a spotlight on mental illness – the Worcester Recovery Center could be the tie that binds it all together. Sprawling in size and magnificient in scope, it is unlike any other mental health facility before it. Whereas older buildings had windows that let in little light, lending to a dark and dank atmosphere inside, the new building was designed especially with light in mind.

“Light,” says the hospital’s chief operating officer Tony Riccitelli, “was a tremendous part of the design. You have a tremendous amount of light coming into the rooms, but the windows also let the light out. You have light in almost every area of the hospital.”

Patients young and old will see a path to recovery at every turn – from special color-schemed patios in each wing for relaxation, to 11 outdoor courtyards for quiet contemplation, to a “downtown” section inside the hospital designed to replicate an actual downtown – replete with a salon, bank, store and more – Worcester Recovery Center and Hospital is much more than a treatment facility. It is a bold attempt by the state not to nudge mental health service into the spotlight, but to shove it right onto the stage.

“When I think about the significance of the commonwealth committing \$302 million to mental illness, I get choked up,” says DPH Commissioner Marcia Fowler. “It’s an incredible testimony on the part of the leaders in this state. There has never been such a commitment.”

Recent DMH annual budgets reflect that. The department’s overall budget has risen the past two years, after a reduction in fiscal 2011 when the budget was \$622 million. In fiscal 2012, the budget jumped \$12.9 million to \$648 million. This year’s budget went up by \$14.5 million to \$671 million. Worcester-based agencies have been the beneficiary of many of those funds. Community Healthlink, for example, received a combined share of more than \$16 million for adult respite, community-based flexible support and the Program for Assertive Community Treatment (PACT). The latter serves 140 people. Genesis received \$812,342 for clubhouse services.

It is, Fowler acknowledges, all part of a growing effort to change the perception of those living with mental illness. “There is a lot of stigma attached to people with mental illness,” she says. “People don’t realize there are efforts and people do recover.”

Fowler’s passion comes not just from her job title, but from personal experience. “I grew up with a mentally ill father,” she says. “He was a janitor and what was difficult was every time he lost

his job, we lost our housing because he was a building superintendent. I was almost taken away from my father because we were homeless so often, not because he was a bad father. He was mentally ill.”

Fowler knows that, despite all the advances and efforts to help the mentally ill, a stigma still exists. The most important thing, she says, is to keep pushing forward. “Hope,” Fowler says, “is the key word.”

NEVER GIVE UP



PHOTO: James Rodriguez is a member of the Genesis Club in Worcester. Steven King/Worcester Mag

When talking about mental illness and recovery, it is hard not to think of James Rodriguez as a walking advertisement for what will and hope can accomplish. He lives with bipolar disorder, acute anxiety disorder, dysthymia and post-traumatic stress disorder. “I had the best psychiatrists money could buy and the best medicine. But I was still sick,” he says.

Rodriguez can tell you the best places to eat in the city, if you are into dumpster diving. He has been homeless and destitute, getting meals by carefully watching as people ate and tossed their leftovers in the trash. He became an expert at talking his way onto a city train for free. If he needed to get through the turnstiles at the T in Boston, he would shadow the person in front of him. He has stayed at the old PIP Shelter in Worcester. He knew the best places to sleep inside Logan Airport – until he got lazy and slept in the same spot too often and got booted by police.

Demons have eaten at Rodriguez most of his life, going back to when he lived in Mexico, when he had to flee to the U.S. after having his life threatened. He has spent time in a psych ward. Like MacInnis, he has thought of ending it all. “I was staying with friends in Millbury,” Rodriguez says. “I had dinner with them one night, I watched some TV and then I went to bed. I took an overdose of medicine and wrapped my head in a plastic bag and went to sleep.”

Call it fate, divine intervention or mere happenstance, but Rodriguez fell out of bed and woke up when he hit the floor. His lips curling into a smile, he says, “I don’t think it was my time. I didn’t want to let go of life, of hope.”

One day, someone told Rodriguez about Genesis. “A member invited me to lunch,” he recalls. “I came back the next day, and the next, and the next. It was either continue coming here or take a blanket to the park and fall asleep all day.”

Before he knew it, Rodriguez had a full schedule and it did not include sleeping in the park, hopping trains or eating out of the trash. He ended up being placed in one of the Genesis Club’s 46 housing units throughout the city. He even got a transitional job at UMass Medical Center in the mailroom, where he replaced another member who had suffered a breakdown.

“They were afraid of the mailperson,” Rodriguez says with a quiet laugh. “But I would come in with a tie every day. I wanted to impress them. I guess I did, because they offered me a full-time job.” Rodriguez will be among the members who eventually move on to traditional employment, Bradley says.

Rodriguez likes to indulge his appreciation for art. When he was much younger, he was a visual art major. With the Genesis Club he has helped organize meetings for visiting organizations, and he is headed to Australia for the next annual meeting of Genesis clubs.

Don’t take that as meaning all is well and he is cured. “I know I’ll always be burdened by this mental illness,” says Rodriguez. “But if I take the past two years as an example, I can honestly say that the measure of my involvement in the clubhouse and my recovery are a mirror image. The more I become involved, the better prepared I am to deal with the illness.”

WORCESTER AS A HUB

Neither Rodriguez nor MacInnis has let mental illness define them. The services available in the city are geared at making sure it never does and some believe that is where opportunity lies.

“That’s where I think Worcester is going to be able to make a statement,” says Bradley, “the statement that mental illness is not going to define me.”

Not that those efforts have not been undertaken before. There is, however, an acknowledgment that more emphasis is now being placed on the issue. “I think we’ve always made that effort,” says Riccitelli. “I just think [Worcester Recovery Center and Hospital] provides us a greater opportunity.

There is really a push at this point to make it into a reality.” There is also a push to take full advantage of Worcester’s wide range of available psychiatric services. “There is a whole continuum of services with our staff and all our community partners that provide mental health services,” Riccitelli says. “We always want relations with the community. We should always have that connection back to the community provider. Our relationship with that provider has to be absolute.”

Evidence that Worcester is becoming a hub of mental health services, according to Vezina, is ample. “With UMass, the new hospital and the way providers deal with each other, I think that is absolutely true,” she says. “I think Worcester really is an up-and-coming melting pot. We see it. We see people with all kinds of illnesses that come here, and they’re rising like a phoenix from some sort of oppression.”