Ed Brown calls himself the last survivor of the first generation who came to The Gathering Place in Athens. Fitted in a bold yellow parka, rocking gently in his chair and glancing out the window, the man of 70 is a little rounder and a little balder than the trim, handsome young man he was in a photograph on the mantle. That young man ran a few marathons and earned a college degree, despite being schizophrenic, with some encouragement from this drop-in program for people who are struggling mentally and emotionally.

When the Athens Mental Institute closed in the ‘90s, its residents, people like Ed, found themselves in a region with few means to support them. The Gathering Place opened the doors of a Victorian house at 7 North Congress Street as a haven for community, comfort and guidance. As Ed recalls the institute, he shifts in his seat. In the orderly ward on the hill, “they would drag you over and dope you up. Stick a needle up your butt,” he says. At The Gathering Place, though, “people learn friendship.”

The mental hospital, now The Ridges at Ohio University, shut its doors when a weak economy forced cuts in federal and state funding for social projects. Now, with money again uncertain, mental health and addiction care is back on the cutting board.

Funding for these programs comes from several sources, and state law has established entities like the 317 Board across the state to administer those resources to local services. The 317 Board funnels money into Athens, Vinton and Hocking counties’ mental health agencies such as The Gathering Place, Tri-County Mental Health and Addiction Services, and My Sister’s Place, a domestic abuse shelter. Institutions such as a state mental health hospital, which covers 21 counties in southeastern Ohio, and the regional jail in Nelsonville receive some funding from the 317 Board.

Institutions such as a state mental health hospital, which covers 21 counties in southeastern Ohio, and the regional jail in Nelsonville receive some funding from the 317 Board. The boards combine money from two state departments with local property tax levies. Those state departments are funded based on a budget signed by Gov. Ted Strickland with input from the Ohio General Assembly.

Strickland cut $132 million, almost a quarter of the Department of Mental Health’s funding, in the last two years. Mental health care weathered its share of $2.5 billion in total cuts by the state, a result of shrinking tax revenue in the ailing economy.

Money from the federal stimulus package has filled holes for now, and patients with Medicaid still can access the services they need. But the future looks grim with little help expected from Columbus or Washington.

With one in five southeast Ohioans below the poverty line, those without Medicaid usually cannot afford to pay for any treatment themselves. Strickland cut $132 million, almost a quarter of the Department of Mental Health’s funding, in the last two years. Mental health care weathered its share of $2.5 billion in total cuts by the state, a result of shrinking tax revenue in the ailing economy.

Money from the federal stimulus package has filled holes for now, and patients with Medicaid still can access the services they need. But the future looks grim with little help expected from Columbus or Washington.

With one in five southeast Ohioans below the poverty line, those without Medicaid usually cannot afford to pay for any treatment themselves. But that model is being tested. Scott Kreps, the home’s director, reduced a similar outreach program in McArthur in Vinton County as dollars dwindled. He cannot afford any transportation for his visitors—Ed walks—and he cannot add anyone to his overburdened staff of seven.

When Scott talks about money, he sounds tired. “It’s hard not to feel as though we’re climbing up a steep hill with little traction,” he says. But the home still opens its doors for more than 100 people a week, 365 days a year. Some of them, like Ed, come almost every day. Around noon on a Tuesday, Ed and others sit at the dining room table for lunch. The conversation meanders from gossip about someone else in the “family” to Ohio State University basketball and around again.
The twang of guitar strings ripples through the living room. The place is meant to feel like home, and it does. A sign, hung from the staircase by the front door and crafted with poster board and colored markers, reads: “Mental illness is not a choice—Learn before you judge!”

One evening this winter, a homeless woman stumbled through the red front door. She had been saved a dozen people from homelessness over these three months, according to Scott, the company’s president. “It empowers them. Over time, they learn that they can make decisions for themselves now. They are safe; a police officer takes routine rounds past her house. She sees her parents and siblings regularly for the first time in decades, Brenda lost weight suddenly. Soon, her spouse realized other men were taking notice, and she was frightened of the attention. He timed her trips to the grocery store. He accused her of flirting with patrons and co-workers. She walked a few steps behind him in public. He timed her trips to the grocery store. Late at night, he sometimes sat a pistol on the kitchen table and told her to shoot herself. He told her she was a nuisance. He said he needed to be free of her.

Brenda and her husband had no children. “He always told me no one would help me,” she says. The only time Brenda found herself alone was at a doctor’s appointment. The physician asked her what was wrong after she noted Brenda’s refusal to make eye contact. “I didn’t feel like I was worthy enough to look at anyone,” she says. With some prodding, Brenda told her doctor about her husband’s abuse. At first, though, Brenda still could not believe anyone would help her. A psychologist came to her home. After two years and told Brenda she could escape if she wanted. Finally, when Brenda felt on the verge of hurting herself, she agreed. She brought only her birth certificate, her Social Security card and some loose cash to My Sister’s Place. Comfort did not come immediately. “When I first got there, I was scared to death,” Brenda says. “If someone opened a curtain or left a door unlocked, I would panic.”

Brenda repaired herself emotionally by meeting with a counselor every day for three months. They brainstormed a plan for Brenda to live alone. A sense of belonging grew as she met other victims of abuse, an important part of Brenda’s healing process. The staff located an apartment for Brenda and reunited her with her dog. She had arrived at the shelter with no shoes, no coat—only the clothes she was wearing. She left with a new wardrobe. She makes decisions for herself now. She is safe, a police officer takes routine rounds past her house. She sees her parents and siblings regularly for the first time in 30 years. “I have everything I need,” she says. Brenda did not pay a penny for the support. No one at My Sister’s Place does. The shelter serves Medicaid patients, too, but money is still a problem. Kate McGuckin, its director, relies on almost $150,000 from local tax levies, which come through the 317 Board, to keep afloat.

If that money is lost, Kate says the shelter might not remain a Medicaid organization. That could cripple its effectiveness in serving the families who seek safety.

The agency has cut community outreach, a means of serving women like Brenda, in anticipation of the coming crisis. My Sister’s Place also eliminated one of the three batterer treatment support groups. “We saw this coming five years ago. We used to lose sleep over these things,” says Kate, who has been in social work for more than 20 years.
Everyone involved describes the 317 Board and its agencies as a “system of care.” Tri-County Mental Health, the board’s largest provider with 4,500 clients a year, coordinates with many smaller organizations like My Sister’s Place and The Gathering Place to reach as many people as possible.

When one organization is hurting, they all are. George Wengly, Tri-County’s director for 25 years, says, “This is the worst time I’ve ever seen.”

Cuts have forced Tri-County to deny care for anyone without Medicaid or private insurance. Every day, people walk into the sparsely populated lobby, filled with empty green chairs, and are turned away because Tri-County cannot afford to treat them.

If those people want to pay for themselves, a session of counseling costs $90. Someone needing regular attention would spend $1,500 or more a year without insurance.

This situation tears at the psychiatrists and nurses who give primary care. A case manager makes only $23,000 a year. A counselor in his or her first year will make $28,000. Employers are not in it for the money. “They’re committed to helping people,” George says.

The 317 Board and its partners work extensively with law enforcement and the courts because mental illness and substance addiction are common catalysts to crime. Tri-County runs annual Crisis Intervention Training (CIT) for local police officers. The program focuses on diverting the mentally ill from jail for minor offenses.

David Malawista, a CIT officer with a psychology practice, says police need an alternative to the “cuff ‘em and stuff ‘em” policy because incidents involving mentally ill individuals are increasing. The line between criminal circumstances and a mental health situation is often thin.

One day, a woman called 911. She was hysterical and claimed her child was missing. David and an entire police unit descended on her home, but he soon detected glitches in the woman’s story. A pile of pills was gathered on a table in the living room. She repeatedly asked, “What is today?” David reminded her it was Monday. A call to the elementary school confirmed her child was safely in class. Because David recognized clues that the mother was struggling to keep a mental grip, she did not face charges. She was directed to treatment instead of being put “back in the loop.”

Keeping the mentally ill and drug-addicted out of the court system is a major focus. But in an area where heroin addiction is spreading, hand in hand with petty crime, the responsibility often falls on the courts in southeastern Ohio, houses 88 beds for only the most troubled offenders.

The region and its people benefit, and everybody chips in. Taxpayers hand the 317 Board almost $3 million a year in property tax levies.

But questions loom about the near future. Earl Cecil, the 317 Board’s director, says funding from the federal stimulus package has been a “life saver,” but it expires in the middle of December 2010. As for the Statehouse, “It’s a question they don’t want to talk about.” Earl says: “They don’t have answers.”

“With no other obvious options, putting pressure on the state legislature and the governor’s office appears to be the only game in town.” For now, the skies are still darkening.