

Backstory: Declarations of independence

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CUTTINGSVILLE, VT. – Standing near the center of a remote, ice-covered lake on an unseasonably warm winter day, Jeana at first wanted nothing to do with the five-foot saws and giant iron tongs stacked nearby.

Her immediate task, to be shared this day with seven others who also battle mental illness, would be to help extract 60-pound blocks of ice in preservation of a Vermont tradition that predates electric freezers. Her long-term task, like theirs, would be to get well enough to live independently - in large part through a program that promotes the healing power of physical labor done in a group. On this day, however, she stalls. "I like to eat, sleep, and watch TV. I don't like to work," she says, as her peers saw away at a 20-by-20-foot hole in the ice. But after a gentle invitation to join in, she, too, works up a sweat. "Mentally," she says later, "I feel a little better."

What seems to be happening with Jeana, who had been hospitalized for paranoia and asked that her surname not be published, is no surprise to boosters of therapeutic work programs like this one at Spring Lake Ranch in central Vermont. They trust in an honest day's work to build confidence among those diagnosed with depression, drug addiction, and schizophrenia.

While the idea of using manual labor to help the mentally ill has been around for a century, it is undergoing a renaissance fueled by the search for alternatives to expensive psychiatric facilities and heavy reliance on drugs. The three newest members of the American Residential Treatment Association, which promotes residential care for the mentally ill, are all farms with work requirements - in Michigan, Ohio, and North Carolina.



OUTDOOR LABOR: At left, Christin Kehoe and Zarrin Leff (left) cut ice on a lake in central Vermont as part of the work therapy at Spring Lake Ranch. At right, guests Erika Gilberti (left) and Moriah Hosanna (right) hug a staff member at the ranch.

For decades, community treatment programs emphasized counseling and recreation for the mentally ill but not work, in part because of concerns about exploitation. But the approach started gaining momentum after state-run institutions released thousands of patients in the 1980s and '90s because of budget cuts, according to Walter Penk, a rehabilitation expert at the Texas A&M College of Medicine in College Station.

What's more, insurance companies are increasingly reluctant to pay for long, expensive stays in psychiatric institutions. Consequently troubled individuals often go back home, where inactivity and low expectations can undermine progress.

"The families have lost their most wonderful thing - hope for their child," says Pam Grace, admissions director at Spring Lake Ranch. "What we do is give them hope again."

William and Agnes Gould first introduced emotional rehabilitation through "respectful discipline, wholesome work, and unstinting kindness" in 1913 at Gould Farm in Monterey, Mass. What started as an alternative to warehousing the mentally ill has transformed into a mission to let residents be productive members of a community, rather than patients in a clinic. "To have ba-

bies, dogs and poetry around - that's really the healthiest way of doing things," says Peter Grace, head of Spring Lake's work program.

Fran Wishnick was willing to give it a shot. Her son, who's not named here at her request, has been diagnosed with Asperger's syndrome and clinical depression. Asocial during high school in the early 2000s, he vowed to kill himself upon graduation. He did love animals, though, enough to foster dogs from the local humane society and care for llamas at a nearby farm. When he agreed to try life at Gould Farm after graduation, the family enrolled him the next day.

At first, he distrusted what was said about him at daily meetings, where everyone is lauded for something they bring to the group. Gradually, however, he claimed responsibility, first by painting a barn. He wrote an egg-sorting manual for everyone to follow. When he started walking the llamas to give them regular exercise, other residents delighted in watching the parade.

"He started seeing himself differently," says Mrs. Wishnick. "He came to see himself as a person with issues and with significant strengths," whereas before he had defined himself by his limitations. After seven months at the farm, he enrolled in college. He's due to graduate this year.

Work is by no means the only factor in learning to live more independently here. To help them function, many residents rely on prescription drugs; some turn to talk therapy; and some get involved in nearby religious services. Residents hone social skills by eating meals in a family-style setting. At Spring Lake Ranch, 7 p.m. to 10 p.m. is free time - something each resident must learn to handle. Some hunch over a chessboard. Others chat playfully in a hallway.

Work is, however, the centerpiece. Located one mile up a washboard road, the ranch is a Currier and Ives collection of farmhouse-style buildings carved out of 500 acres of maple and oak in the hills of central Vermont. For five hours a day, all 29 ranch residents join a work crew. One prepares meals. Another feeds farm animals. Others fell trees, chop wood, or get buckets ready to collect sap for maple syrup. It's not busywork: Without the labor, food wouldn't reach ranch tables

and fireplaces would go cold. Even so, staffers nudge residents gently, asking with a hand on the shoulder, "Would you like to take a turn?"

For this mix of work, play, and supervision, ranch residents pay \$190 per day. Insurers seldom foot the bill, which means a typical six-month stay adds up to \$34,000. Such a sum puts this type of therapy out of reach for many. But ranch administrators believe it's worth it if you can break a patient's long-term cycle of rotating in and out of psychiatric units, which can cost as much as \$1,000 per day.

Still, the ranch-type approach may not be for everyone. Some guests can be reluctant to participate in the work regimen. Moreover, experts such as Michael Shahnasarian, a psychologist in Tampa, Fla., see therapies that separate the individual from the family as a last resort. He says there's a risk of feeling abandoned when family members drive away. "One serious consideration is, what would the potential impact be of the separation?" he says.

Nor does everyone transition easily to "after-care" - an assisted living-type arrangement involving paid work and an apartment in nearby Rutland, Vt. James Ritchie, a wide-smiling man with a passion for Brahms, admits that after 10 years at the ranch, "I don't know how to behave in public."

Erika Gilberti, who struggles with anger issues, has been in six other residential programs. She's now been at the ranch three years. Though some days are still tough, she feels there's progress. "I used to be very blunt and rude," she says. "Now I say, 'This is how I feel' or 'You could do it this way' ... I've kind of bloomed here."

Others report hopeful signs, too. Zarrin Leff, who had overdosed on LSD and now struggles with anxiety and depression, felt "agitated" during his first six weeks here. But he soon learned to contribute his talents: To help in the woods, Mr. Leff designed a pulley system to get fallen trees out of tight spots. And he put tines on a snowblower, enabling it to grind kitchen scraps and hay into compost. Now he is eager to work.

"I know this is my best possible chance," Leff says, "so I do have a lot of motivation."