


# Maine Voices: Let's have our state be known for caring about those with mental illness

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By Cullen Ryan Special to the Press Herald

In the early 1990s, then-Gov. Rudy Perpich branded Minnesota “The Brainpower State.” A cartoonist had fun when Minneapolis built an incinerator in the heart of the city. In the cartoon, there was a drawing of the incinerator. The banner above it read, “THE BRAINPOWER STATE,” and the caption proudly read: “We burn our garbage right downtown!”

Sadly, I'm reminded of that when I think of the way we treat people with mental illness in Maine.

## about the author

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One hundred sixty-five years ago, our society recognized that people with mental illness were vulnerable and needed protection from us. I'm not advocating for a return to institutions, but when we closed them, the plan was to replace them with a community system involving housing. Instead, after redundant cuts to housing and services, we have a significant population homeless and wandering our streets.

Perhaps our caption would read: “In Maine, we put our people with mental illness on the street where they can fend for themselves – outside!”

What does it mean to have a mental illness? It can mean a lot of things. But a certain subset of people experience psychotic symptoms, and a small percentage of that group tends to become chronically homeless.

Psychosis means a loss of contact with reality. In essence, at least for the moment, a person can't make sense of the world. Auditory and sometimes visual hallucinations interfere with perceptions, as do delusions. It is incredibly frightening, confusing and frustrating. And it is debilitating.

To make matters worse, when continually bothered by voices, delusions or hallucinations, some seek to abuse alcohol or substances as a method to achieve peace. It is not an effective strategy, and we see the results around us.

In Maine, we appear to have grown comfortable leaving significant numbers of people with this illness untreated, wandering our streets, staying outside or in homeless shelters and surviving in the cold without much of our help.

Knowing that, it really bothered me when the Department of Health and Human Services made a provocative announcement that 13 of the longest stayers – 13 people certain to have serious mental illness, 13 of the 2,165 people who pass through the Oxford Street Shelter each year in Portland – had some significant liquid assets. It bothered me because I knew it would be hard for people to not draw

conclusions, pass judgment and angrily wonder how this could be.

People with mental illnesses involving psychotic symptoms tend to cycle into psychosis when under stress. It is stressful being homeless. Indeed, perhaps the most stressful circumstances one can experience is chronic homelessness. This population ages fast, often dying 25 years earlier than expected given their chronological age. Fifty- or 55-year-olds present like 75- or 80-year-olds. And tragically, many die untreated.

For those of us who have provided stable housing to this population and seen people get well, it is a joy to meet the person clear of their symptoms. I am fortunate to know many people who have emerged from homelessness and the cloud of mental illness. They are able to contribute to a world they can now make sense of, primarily because they have a safe and stable home.

So it is not hard for me to imagine that a person chronically homeless, under continually high stress, nearly constantly psychotic and unable to make sense of his or her world, might not understand his or her finances or have the wherewithal to use them.

As a taxpaying Mainer, I am comfortable with our shelters taking in people who would otherwise be outside, fending for themselves, even if a few of them have money somewhere.

When people with mental illness are in stable housing they do much better in our community, creating real savings for all of us – because when each person has stable housing, we immediately subtract that stress.

That means that each person, although still prone to cyclical episodes of psychosis, will not be psychotic all or even much of the time. With adequate support, each will discover lost resources, including family members forgotten because of the psychotic break. I know this because I have seen it again and again.

Attempts to demonize people, or systems that serve them, are not helpful to individuals with mental illness, or to any of us. Caring, dignity and respect are. And that starts with housing and services. Let's have our state be known for that when it comes to the small number of vulnerable people with mental illness. Let's treat our people inside.

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