Finding Community, Purpose and Healing at Arlington School

Some days, Patrick Lovelace couldn’t make it until 3:00 p.m. at his large public high school, and he’d call his mother to pick him up early. Other days, he refused to go altogether. His anxiety was crippling; healthy relationships were hard to nurture.

So, when his family proposed that he check out McLean’s Arlington School, a small, therapeutic high school on the grounds of the hospital, Patrick was hesitant, but ultimately agreed. The visit was anxiety-provoking — the building looked different than imagined, how would it feel to not graduate with the kids in his neighborhood? — but he agreed to enroll. The school changed his life.

“Within a few months, it became my home. I found a community of students like me who had a difficult time in school because of trauma, mental illness or substance use,” recalled Patrick. “We did our best to support each other, hold each other accountable, heal together, and grow into people who could graduate and lead successful lives.” In May, Patrick, 22, will graduate from Suffolk University, with a major in public relations and a minor in arts administration.

Like Patrick, Sean Dolan found a home at the Arlington School and the young man, nicknamed “the gentle giant” for his 6’2” stature, easy hugs, and protective nature, thrived, according to his mother, Janet. Having been diagnosed with bipolar depression during elementary school, Dolan struggled until he joined the Arlington School community. “The love, compassion and support he found at the school fostered a sense of hope and success that he had not experienced any other time in his academic career,” she said. An extremely hard worker, he graduated from college with a degree in criminal justice and later took courses for additional certifications. While depression continued to affect all aspects of his life, he found joy in his family, friends, karate, and his job. But in 2012, at age 27, he took his own life.

As a gift to Janet, Sean’s father, Jim, began giving a yearly college scholarship to an Arlington School senior, and that single scholarship eventually became two. “It’s our way of paying it forward,” explained Janet. “Sean’s love for the school became our love for the school. We wanted to honor Sean and help other students achieve their dreams of continuing their educations.”

A Warm, Flexible Place to Learn

Building a therapeutic, supportive community is as deliberate as it is organic, according to Director Suzanne Loughlin, APRN, BC. Enrollment is limited — about 40 students a year — and each student is assigned to a school mental health clinician, whom they see frequently throughout the week. Teachers teach and clinicians counsel, but everyone pitches in to do what needs doing, taking students on walks, advising clubs, planning events, or serving lunch which students and
Dear Friends

At McLean we often talk about how we serve people across the lifespan. In this edition of Horizons, we share stories that illustrate the breadth of that commitment.

You’ll read two articles about programs for adolescents and young adults – the more than 60-year-old Arlington School and the newly launched STAR (Support, Treatment and Resilience) program. For both, philanthropy is providing critical support and helping young people realize their dreams.

We also share an update about the growing group of dedicated women who comprise McLean’s Women’s Mental Health Leadership Council. Despite not being able to gather in person this past year, which had been a central activity, these women — who span three generations — found new ways to stay connected to McLean’s pioneering work in the field of women’s mental health.

At the other end of the life span you’ll read about an enduring friendship between two boys that later became a source of great comfort while navigating the devastating course of an Alzheimer’s diagnosis. And finally, we give you a brief glimpse into the remarkable life of our former director and his nearly 70-year relationship with McLean.

Stay well,

Lori Etringer
Senior Vice President and Chief Development Officer

Women’s Mental Health Council Offers Connection and Resources During Pandemic

Despite the limitations imposed by the pandemic, 2020 was a year of robust activity for the Women’s Mental Health Leadership Council, a group of women that has been gathering for years to discuss topics of mental health.

Established in 2016, the group comes together to learn from McLean experts about mental health concerns specific to women and girls. Members provide philanthropic support for the hospital’s pioneering work in the field. Built into their signature program, the On Women’s Minds luncheon series, is time for participants to candidly share their own experiences — or those of loved ones — with mental health issues. An important byproduct of the program is de-stigmatizing these types of conversations.

The council began modestly, with a couple dozen members gathering for lunch at someone’s home, listening to McLean clinicians and researchers share their work. Today, membership has grown to more than 100 and the group has created a junior membership for women under 35, adding 21 young women to its roster. The council now sponsors a more informal coffee series too.

“We’ve worked hard to create an environment where people can speak candidly about mental health. It’s a no-judgment zone,” said the group’s co-founder and National Council member Carroll Pierce. Added co-founder Kristine Trustey, who is the chair of the National Council: “Women are really hungry for the information and experience McLean experts have to share and for the camaraderie of other women who also have an interest in mental health.”

Although all of the Women’s Mental Health Council’s programs now take place on Zoom, the topics are as compelling as ever. Recent talks have explored stress and anxiety, provided a nuanced look at the impact of cannabis on the brain, cognition and quality of life, and discussed the under-recognized issue of menstrual pain.

Pierce and Trustey said it’s been especially gratifying to welcome younger members into the fold and both have gifted memberships to their daughters. (They have six between them.) “In addition to bringing in new perspectives, it’s been a nice way for mothers and daughters to participate together,” said Trustey.

Among the projects the council has financially supported is the development of an online clinical “toolkit” containing best practices for the screening, diagnosis, and treatment of mental illnesses common to women, and an innovative year-long educational fellowship for clinicians interested in women’s mental health.

For more information about the Women’s Mental Health Leadership Council, contact Erin Collins-Moore at ecollinsmoore@partners.org or 617-855-4596. Make a gift to support women’s mental health at https://giving.mclean.org/womens-mental-health-leadership-council/

“We’ve worked hard to create an environment where people can speak candidly about mental health. It’s a no-judgment zone.”

Council Co-chair Carroll C.D. Pierce

Kristine Trustey (L) and Carroll C.D. Pierce (R) are co-chairs of McLean’s Women’s Mental Health Leadership Council.
Arlington School  continued from cover

staff eat together. And when students struggle to stay focused, teachers are understanding, allowing them to take breaks or leave class to read quietly, engage in coping strategies or meet with their clinician, for example.

“We’re more of a relationship-based program than a traditional behavioral program, which means lots of talking and negotiating,” explained Loughlin. “That doesn’t mean we don’t have high expectations, but our goal is to come to resolutions based on acceptance and respect.” Teachers tend to stick around — some have been there for decades — and the school building is a cozy brick Victorian, originally built as a patient’s residence.

Because in-person interaction is so critical to the school’s therapeutic milieu, and many students have lost touch with friends in their communities, the pandemic has been tough, said Loughlin. School was fully remote at the start of the pandemic, then in July, the doors opened part-time. Beginning in March, the school returned to a hybrid model where students will attend in person 3 days per week.

The Arlington School was established in 1960 to educate the adolescents hospitalized at McLean. (Until the late 1950s, the hospital didn’t admit patients younger than 17.) McLean Director Emeritus Francis de Marneffe, MD, in collaboration with social worker Golda Edinburgh, MSW, founded the school, which initially enrolled fewer than two dozen students. With the advent of managed care and the reduction in hospital lengths of stay, the school began accepting day students.

Today, Loughlin says the school’s biggest challenge is its physical plant, which is loaded with charm, but not ideal for a 21st century school. The rooms are small, and the facility lacks sufficient lab and common space. All-school gatherings take place in a small science lab. The building’s challenges, however, are dwarfed by the school’s strengths, beginning with its staff, according to Loughlin. “I can’t say enough about how dedicated the staff is,” she said. “It’s emotionally challenging work, because at times you have to bear witness to students’ overwhelming sadness and discouragement. But you also have the pleasure of seeing the light at the end of the tunnel and believing in their futures.”

Long-time donor Ellen Ratner, a successful journalist and author, can testify to that. Her time as an Arlington School student decades ago was transformational. And while the faculty often give students a vision for the future, they need additional support for that next chapter. “I have supported the Arlington School Scholarship Fund for years because I want other students to have the opportunity to attend college and achieve their goals the way I did,” she said.

“Long-time Donor Helps Establish Climate Science Program

In addition to student scholarships, families have given back to Arlington School in many different ways. A recent gift from the van Otterloo Family Foundation, whose focus is education, will support the creation of a climate science program. The gift covers startup costs that include the purchase of a movable outdoor classroom, staff salaries, student activities, and the resurrection of the school garden. “The proposal was innovative and well thought out, so our foundation is delighted to support it,” commented Rose-Marie van Otterloo, whose family has long supported the hospital and has always had a fondness for the Arlington School. “The work of the school is very important, and their funding sources are limited, so private donations are critical.”

To make a gift to the Arlington School, contact Ben Ogilvy at bogilvy@partners.org. or 617-855-3623.
Rosalie Rudnick collected friends like she collected Caucasian rugs — easily, passionately, and in large numbers. “The world loved Rosalie,” said Mitch, her husband of 60 years. “She was charming and befriended everyone who came near her.” Even after Alzheimer’s disease robbed her of almost everything that made her Rosalie, upon arriving at the memory care unit where she lived at the end, she immediately befriended the lead nurse.

Rosalie, who was an expert on the antique, hand-spun tribal rugs of the Caucasus and an accomplished restorer too, died in 2018. Her passion had taken her and Mitch all over the country and the world, where they delighted in the rugs’ geometric designs and natural colors, the dealers they met, and the stories behind their finds.

But this story begins at a sleepaway camp in Fryeburg, Maine, more than 40 years ago. There, a 12-year-old Brent Forester became pals with Mitch and Rosalie’s son Charles. The two went on to become lifelong friends and when Rosalie was diagnosed with Alzheimer’s in her 70s, Brent Forester, MD, MSc, chief of McLean’s Division of Geriatric Psychiatry, provided much-needed support to the family. “When Brent found out about Rosalie’s diagnosis, he came to our house that same night,” recounted Mitch. “He told me to bring her to McLean and he would have her examined and come up with a plan for how to proceed.”

Finding Hope in a Clinical Trial

Rosalie was soon enrolled in a clinical trial at McLean that tested the efficacy of a drug targeting her brain’s amyloid plaques — the protein deposits implicated in the Alzheimer’s disease process. Mitch said the team involved in the study, which included David Olson, MD, PhD, medical/clinical director of the McLean Imaging Center, was phenomenal. “Dr. Olson is the brightest man I’ve ever met — loving, compassionate and caring. Like Brent, he made himself available any time I needed him.”

To honor Dr. Forester and the research team, Mitch set up a fund in Rosalie’s memory to support Alzheimer’s research. “My objective was to establish a memorial fund to give thanks to Brent and the research team’s loving support of Rosalie and me over the two years she was in the drug trial,” said Mitch. “Their amazing care, help and follow-through was above and beyond the call of duty.” Mitch created the fund before Rosalie died, and in her obituary, he directed donations to it. At her funeral, which was attended by hundreds of friends and family, he talked about his gratitude to McLean and the fund’s existence, and many people contributed. He and his sister Gini made a pact to contribute to it every year to honor Rosalie’s February 28 birthday.

“I’m incredibly grateful for the Rudnick family’s generosity,” said Forester. “This fund allows us to pursue new treatment studies that aren’t eligible for larger government grants because there’s not enough data yet to show their promise. These pilot studies involve discovering the underlying biology of the disease and finding better treatments to improve the psychological and behavioral symptoms that are most burdensome for both patients and families — such as agitation, aggression and anxiety.” While the drug that was investigated in
Rosalie’s clinical trial didn’t ultimately slow the functional and cognitive decline of its participants, it did “pave the way for what may become first-in-class disease modifying therapies,” explained Forester. “These drugs could someday profoundly and meaningfully slow the progression of symptoms of Alzheimer’s dementia.”

Rosalie’s disease was hard on her family, especially Mitch, who cared for her at home as long as he could. Forester hopes to build more support for patients’ families into his program — an effort that has begun with the hiring of a geriatric care manager, Marie Clouqueur. Clouqueur’s salary is partially funded by the Rudnick family’s gift. “We want to support family caregivers, build their resiliency, and help them with the difficult decisions they have to make along the way,” said Forester.

After Rosalie died, Mitch gave several rugs to his children and auctioned off the rest — more than 100 — for their benefit. He didn’t keep a single rug for himself; it’s his memories of his and Rosalie’s collecting that sustain him, he said. “I loved the camaraderie, the travel and the time I got to spend with the love of my life and my best friend.”

“The world loved Rosalie. She was charming and befriended everyone who came near her.”

Donor Mitch Rudnick

"The late Rosalie Ablow Rudnick poses with her beloved pup Oreo"

Registration for The 2021 Ride for Mental Health is open!

Join us on June 19 and 20 in New Paltz, NY, to #RideAwaytheStigma and support mental health treatment, research and education. Individuals can participate in person or as a virtual rider using the Ride’s Strava club app. Read more about this annual event at www.rideformentalhealth.org and register as a member of Team McLean.
“As with many illnesses, the earlier we intervene, the better the prognosis and it’s so true with psychotic disorders,” said Guvenek-Cokol. “Our greatest efforts should be applied to prevention and early intervention — giving young people the tools and skills to be empowered to manage whatever comes their way.”

Early intervention is the founding principle of the one-year-old Support, Treatment and Resilience (STAR) program, which delivers top-quality outpatient care to young people ages 14-25 who are at risk of developing psychotic illnesses. Patients with full-blown versions of these disorders experience disruptions in their thoughts and perceptions, making it difficult to judge what is real and what isn’t. Some may suffer from hallucinations — seeing, hearing, or even smelling things that don’t exist. Psychotic symptoms often begin between ages 18-20, although some people experience them later. About 1 in 100 people suffers from a psychotic disorder.

Donor support has been critical to STAR, as a novel clinical program with limited reimbursable services. Nicholas Zeppos, McLean Trustee and chancellor emeritus at Vanderbilt University, seeded the new clinic with a philanthropic gift in 2019 because he found its goals so compelling. “As someone who spent a good portion of his career working with college students, I have seen how devastating psychiatric illnesses can be,” he said. “A program like STAR can make a tremendous difference in the trajectory of a young person’s life at a critical time in their development.”

A 2020 gift from the Gildea-O’Keefe Family Foundation, a long-time supporter of the hospital, fortified the program further. “Between the pandemic and the social and political upheaval, it’s an especially fraught time for many of us, and the stressors are exacerbated,” said foundation Trustee Ann O’Keefe. “Supporting mental health causes, especially ones like STAR that are trying to intervene earlier in a disease’s trajectory, is more important than ever.”

The adolescents who are treated through STAR often have symptoms that may seem like depression or anxiety — a loss of interest in things that once gave them pleasure, neglect of personal hygiene, trouble concentrating. But layered on top of those changes are symptoms that point to possible psychosis down the line. “They may hear their name called when it hasn’t been, see shadows out of the corner of their eye, become more preoccupied with religion, or begin mistrusting people,” explained Guvenek-Cokol. “Sometimes they’re just feeling something odd that they may not be able to articulate.”

The STAR Treatment

Patients treated through STAR see therapist Sarah Burke, LICSW, who is also the program director, at least weekly. The sessions are tailored to the young person’s specific symptoms, and Burke may incorporate tools such as cognitive behavioral therapy, dialectical behavioral therapy, behavioral activation and motivational interviewing — all commonly used with other psychiatric illnesses. “Our program puts a lot of emphasis on building skills, resilience and routine. Good sleep, hygiene, eating well, and abstaining from substances — marijuana, most commonly — is key,” explained Burke. There is a strong correlation between heavy cannabis use and psychosis, so some patients are also referred to addiction treatment programs. One STAR patient who was a heavy cannabis user received care in McLean’s substance use residential program. “His paranoid thinking cleared up when he maintained sobriety from cannabis,” reported Guvenek-Cokol.

When needed, patients may also be prescribed medication by Guvenek-Cokol, but she tries to limit this to cases where symptoms are severe.

Schizophrenia, schizoaffective disorder, and bipolar disorder with psychotic features are diagnoses laden with stigma and they can sound downright frightening. Child psychiatrist Esra Guvenek-Cokol, MD, an expert in psychotic disorders, doesn’t dispute their seriousness. But she knows that with the right care, people with these diagnoses can go on to live happy, fulfilling lives.
and impeding the progress of talk therapy. “It’s like physical therapy (PT),” she explained. “If you have severe back pain, you may need pain medication in order to get to the point where you can engage in PT.” Medication can be particularly helpful with what’s called mental rigidity, when a patient lacks the cognitive flexibility to recognize that a delusion may be just that. “We never want to invalidate a patient’s experience and their suffering, but we do want them to consider whether there may be other explanations for what they’re experiencing.”

Getting families involved in treatment is also critical. “Child psychiatry is family psychiatry,” said Guvenek-Cokol. “Young people live in the same home as the parents, so we would like families to understand and support our interventions and also understand what their child is going through. We bring families in during intake, and Sarah stays in close communication with them.” Patients and their families learn what’s called emotional labeling — the language of feelings — so they are better able to talk about their feelings using common terms. STAR is in the process of developing a more formalized family therapy program.

Dost Öngür, MD, PhD, chief of McLean’s Division of Psychotic Disorders, says while preventing patients from ultimately experiencing psychosis is important, that’s not the end goal of STAR. “Ultimately, our goal is what we call in the field ‘functional recovery’ — teaching the coping skills that allow people to have meaningful, fulfilling lives.”

McLean is grateful to all the donors who have supported the STAR program and the Psychotic Disorders Division more broadly. To learn more or make a gift, contact Keith Raho at kraho@partners.org or 617-855-3421.

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Donor Ann O’Keefe
Born in 1924, McLean Director Emeritus Francis de Marneffe, MD, has had a life brimming with stories many of which are chronicled in his two – soon to be three – memoirs. He arrived at McLean in January 1953 as a second-year resident in psychiatry and, by 1962, at the young age of 38, de Marneffe ascended to the top spot. He served as McLean’s general director from 1962 to 1987, a role he loved despite the inevitable challenges faced along the way.

“There is something about the dedication of the people at McLean … a feeling of being special, but not in an arrogant way,” mused de Marneffe. “It’s about passion and sense of duty. It feels as though doing whatever they can to help others is part of their DNA.”

Philanthropically, McLean has been de Marneffe’s top priority for more than half a century. He is forthright when he recounts how he knew nothing about fundraising when he began his tenure at McLean’s helm. But in order to bolster McLean’s research efforts, he needed to build more laboratory space. After a crash course in fundraising, de Marneffe hopped on a plane and convinced the late Joseph Mailman to fund one-third of a $3M capital effort. The Mailman Research Center was built, and McLean accelerated along its path to becoming the robust research enterprise it is today.

De Marneffe is proud of the hospital McLean has become. “There have been many marvelous improvements over the years,” he said. “When I was running McLean, the research, clinical and education arms were all so separate. Research wasn’t feeding into the clinical work. Dr. Rauch has done a tremendous job developing an organizational structure and culture that bring these three areas together to promote innovation and collaboration.”

De Marneffe continues to stay up to date with research and clinical advancements at McLean. He attends events and is a member of McLean’s Board of Visitors and The Mary Belknap Society, McLean’s leadership annual giving circle. He is a sustaining donor, making monthly, unrestricted gifts and generously supported McLean’s COVID-19 fund in early 2020.

Recently, de Marneffe decided to make a provision for the hospital in his will. “McLean hasn’t just been a career; it has been my life’s work. McLean is my other family,” said de Marneffe. “Including the hospital in my estate plans is, perhaps, my way of saying ‘thank you’ for the life and the career.”

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Saying Thank You for a Life and a Career

Contact Keith Raho at kraho@partners.org or 617-855-3421 to learn more about legacy giving at McLean.