

Click here to see a story written for the Tryon Daily Bulletin in November of 2005 by Judy Heinrich about Don Cooper & Lisbeth Riis Cooper and CooperRiis.

Lisbeth, Don Cooper: Turning Adversity to Healing

by Judy Heinrich

In its November 15 issue, Woman's Day magazine named Lisbeth Riis Cooper one of its four "Shining Stars of 2005." She was honored for creating, with her husband, Don, the CooperRiis Healing Farm for the treatment of mental illness, located in Mill Spring. Considering its 20 million readers and the many nominations Woman's Day received, Riis Cooper's selection is surely worthy of celebration. But most of us would gladly forego the award if we could also avoid the circumstances that led to it.

An Expert by Necessity.

If you're lucky, your family is among the 75 percent who will not have to deal on a firsthand basis with serious mental illness – severe depression, bipolar disorder, schizophrenia and other disorders – according to statistics from the National Alliance on Mental Illness (NAMI). Riis Cooper found herself on the other side of that equation when it became clear some 15 years ago that her daughter's behavior was more than typical teenage rebellion or mood swings. With that realization, Riis Cooper began a journey through a mental health system that seemed more like a maze than a path toward help and recovery.

At the time Riis Cooper was an apparel industry executive and divorced mother of three living in New York City. "I was a mother like anyone else," she recalls. "I had no knowledge or background with mental illnesses or treatment."

Her family's need for mental health support unfortunately coincided with social, political and insurance changes that were greatly reducing the availability and quality of care.

"Because of funding cuts and new managed care plans, hospitals were offering fewer beds for the mentally ill. They would only accept patients on a crisis basis and then discharge them in a few days," Riis Cooper says. "You would think your child is getting help and then would come the call from the social workers which made your heart sink because they want to talk about a discharge plan. How can you discharge someone who needs help? The system depended on psychotherapy drugs and halfway houses with locked doors, yelling and keepers with keys. Even a well person would start feeling paranoid."

While she was learning to navigate the mental health system and any other resources she could find, Riis Cooper's job also had her traveling regularly to the Carolinas to visit textile companies. During that time she married Don Cooper, an Atlanta-based financial executive. The couple moved to North Carolina part-time in 1992 and full-time in 1993. Meanwhile her daughter had reached adulthood and

was living with periods of improvement and decline. She was in North Carolina when she suffered a severe episode in 1999 and the Coopers needed help.

"Everywhere I turned I was met with obstacles and the things you can't do," Riis Cooper remembers. "I found a facility that had beds but wouldn't accept my daughter because she was not already in the system. I couldn't apply for her; she had to do it in person. She was hospitalized but was supposed to go in person and complete an application so she could be in the system and then on be a waiting list – even though there were beds available. How do you make sense of that?"

From Crisis to Crusade

That Catch-22 situation turned out to be the final straw for Lisbeth: it's when she first approached Don about creating a treatment community. "If someone tells me I can't do something, that's when the fun starts," she says. "I'm not good about taking no for an answer because if there's a problem, it's an opportunity to find a solution."

With an idea in mind for a healing community similar to ones they knew of in New England, the Coopers began looking for land in the fall of 1999. They found and purchased 80 acres in Polk County near the intersection of Highways 9 and 108. The next step was to qualify for 501c3 non-profit status with the IRS – which took 11 months to achieve. "We knew from Day One that we wanted this to be non-profit," says Don. "We couldn't sleep at night knowing we were making money from other people's illness and sad circumstances".

The first contribution to the new non-profit was the farm the Coopers bought. "It was my children's inheritance and our legacy," says Lisbeth. "Many years ago I made myself a promise that when I die I don't want to have any regrets in life and I don't want to leave a lot of money for people to fight over. If I have extra money, I want to share it now and be part of the joy and benefit gained by it."

Convincing others to lend financial support wasn't always easy. Don and Lisbeth reached out to contacts they'd made throughout their careers as well as to individuals and foundations in the Carolinas. "We had never done anything like this before individually or together and there were times we wondered if we could really see it through," says Lisbeth. "But then we'd remember all the people who had already supported us and realized we couldn't let them down either. We made a pact to tell at least two more people every day about our mission – people at the bank, in the supermarket, wherever we could find an audience. It became our daily affirmation and kept the adrenaline flowing: 'We can do this.'"

In the end the Coopers were able to raise \$10 million through private donations. The fundraising was just part of a three-year whirlwind of permits, design, setbacks, construction, learning and excitement that culminated in the June 2003 opening of CooperRiis, a Healing Farm Community.

To create the campus, the CooperRiis team added to an existing arts-and-craft style home that became the farm's 12,000 square foot Main House, with administrative offices, dining hall, living room, meeting areas and state-of-the-art commercial kitchen and bakery. Three 10,000 square foot Residential Lodges mirror the architecture of the Main House and provide housing for 12 residents each and recreation areas. A dilapidated 5,000 square foot hay and storage building was restored to become the Arts & Crafts Barn with a fully equipped shop for woodworking, arts, crafts and music. There are five acres under cultivation and two large greenhouses tended by residents who grow organic vegetables and flowers. A restored horse barn, animal pastures, chicken coop, tennis court and lake round out the pastoral setting.

"We have a certain standard here and we designed this place to be special," Lisbeth explains. "If you put people in nice surroundings they live up to the expectations. We want our residents to feel special and, so far, they haven't let us down."

The CooperRiis Vision

The CooperRiis goal is to support residents in mind, body and spirit through a combination of community setting and strong clinical programming. The entire experience is overseen by the Executive Director team of Virgil and Lis Stucker, respected mental health professionals who met, lived and raised their children at the Gould Farm in Massachusetts, one of the community models CooperRiis has followed. Dr. Sharon Young leads the CooperRiis Enhanced Recovery Program. Forty-eight full and part-time staff and eight part- and full-time volunteers serve the needs of 36 community residents. All residents perform some job at CooperRiis as part of the recovery process.

"All residents start work on the farm since those jobs are lower-skill but they also provide a very healing experience," says Lisbeth. "When they feel better they can ask to work in the kitchen, in housekeeping, on the maintenance crew or with the animals. Our current residents also produce a CR television show and a community newspaper."

"Our residents are some of the smartest, most talented and interesting people you would ever meet," says Don. "A lot of them haven't been encouraged to show that previously. It is so punishing to go out and not meet people's expectations so they often just stay home. Here everyone is encouraged to re-engage and it brings out such talent."

Most residents stay at the farm for six to nine months and then enter the graduate program, living off campus in a group home and or an apartment, with the level of staff support depending on need.

"The objective is for everyone in the graduate program to have developed enough capability and stability to work 30 hours a week, with 'work' being going back to college, volunteering or a paying job," Don explains. "The intention is that from the CooperRiis experience, graduates will move back into society but with support – not just turned out as happens with hospitals."

With the quality of clinical care and staff support that CooperRiis provides, the community is not an inexpensive proposition. Each resident is responsible for their first two months at the full rate of \$6,500 per month. "That's not covered by insurance so it's an out-of-pocket expense for the residents and their families, says Don. "Some can simply pay it while others may take out a home equity loan or put it on a charge card. It's an amount that allows us to break even on our expenses while also indicating the individual's commitment to the process." After the initial two months, CooperRiis works with residents and their families to provide a range of scholarships based on need. "We have yet to fail," Don says. "We have been able every time to do what was required to support the resident."

Thus far CooperRiis has served 130 people from 27 states. The community doesn't plan to expand beyond 36 residents but the potential for the graduate program is unlimited. CooperRiis uses a sophisticated Management Information System to track program statistics and measure the progress of both residents and graduates. Successful practices are shared with others who are already in the mental health field or who are interested in creating a similar setting to serve the mentally ill in their own areas.

"We hear from parents, especially after the Woman's Day award, asking how did you do it? How did you start?" says Lisbeth. "We know that CooperRiis is making a difference and my dream is that, in my lifetime, I will see something like a CooperRiis in every state. We don't have the ability to go out and build another one but we are here to consult with others who have the desire."

Toward that end, the CooperRiis leadership team dedicates time to sharing their experience, knowledge and hard-won expertise with other mental health facilities, industry organizations and parent groups. Don talks about financials and philanthropy, Virgil about programs and Lisbeth about a parent's perspective. A "how to manual" is another goal of the Coopers for helping others start similar programs.

Part of the Larger Community

The Coopers say they've been very gratified by the response of their Polk County neighbors.

"We've been terribly blessed with the welcome we've gotten from the community," Lisbeth says. "The fire department and police department have been wonderful both in helping us design our facility for safety and in coming out to do courses. Our residents have been accepted in the community, with many working for local organization as volunteers or at paying jobs."

"Sometimes society has a stigma against mental illness," Don adds, "with people being afraid and shying away from contact. But that hasn't been our experience here. We are so pleased that we located in this area."

"A person with mental illness is not so different from you and me," says Lisbeth. "If you come to our dining room, you wouldn't be able to tell the residents from the staff. Dr. Sharon uses the analogy that if a person loses a leg, it doesn't change whom they are inside: they just have to learn to do things differently. Mental illness is the same way – it's biological. Those affected by it are still the same wonderful people inside. Here we are teaching them ways to do things differently, to manage their symptoms and cope with their own needs so they can have self-esteem and be part of society. It's what we all want: to be accepted for who we are and be with people who care about us."

November 2005