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The Town Shrink

Trained as a psychiatrist, Mindy Thompson Fullilove now puts entire cities on the couch.

By **ROBERT SULLIVAN** JUNE 23, 2015

High Bridge, spanning the Harlem River and connecting Manhattan to the Bronx, is the oldest bridge in New York City. It is also an aqueduct, or used to be. Built in the 1840s, when public health officials across the country were battling cholera, it carried clean water from upstate to a growing urban population. In just a few decades, planners would build not just aqueducts but the so-called sanitary greens that today we call parks, including Highbridge Park, on the Manhattan side of the bridge. A side benefit of High Bridge was the walkway above the aqueduct that allowed Bronx pedestrians to reach Manhattan. By the 1960s, though, the aqueduct was no longer in use, and city planners, working to fight what was then called urban blight, decided to disconnect the boroughs. The Parks Department closed the old bridge, cutting off an artery.

In June, the Parks Department reopened High Bridge to pedestrians, not just resuming the flow of foot traffic but also connecting it to a more recent innovation in public health, called the Giraffe Path, which was spearheaded by Mindy Thompson Fullilove, a research psychiatrist at the New York State Psychiatric Institute. Fullilove has spent the past 30 years investigating how broken connections between various parts of cities harm public health and, more recently, exploring ways to reconnect them. The Giraffe Path, a six-mile trail that runs from Central Park to the Cloisters, is designed to do just that,

providing links between communities that have, by Fullilove's analysis, undergone systematic disinvestment, resulting in numerous public health crises: AIDS epidemics, crack addiction, asthma, post-traumatic stress and obesity.

The Columbia Center for Children's Environmental Health is a sponsor of the trail initiative, called City Life Is Moving Bodies, or Climb, along with the Northern Manhattan Improvement Corporation, a local nonprofit. This year, after more than a decade of community meetings with the Parks Department, local college students who started hiking the Giraffe Path when they were kids at last saw their route extended, as the gates on High Bridge were opened, a victory for the city's entire circulatory system. "People have a pretty easy time accepting the analogy between the body and the city," Fullilove says. Indeed, when considering the health of the city as a whole, metaphor and reality neatly align. Rule No. 1 for long life: Stay active, keep the blood flowing. Rule No. 1 for urban planning: Never close an artery.

The idea of a psychiatrist's treating an entire city emerges from straightforward questions about how people interact with extreme environments. Fullilove was inspired in particular by the work of Alexander Leighton, who, as a Navy psychiatrist during World War II, studied an Arizona internment camp for Japanese-Americans. Leighton expected to see a tremendous amount of illness and mental trauma — the conditions in the camp were terrible — but the internees, though they were suffering, proved to be startlingly resilient. "He sees this heroic effort to reorganize life," Fullilove says, and the ability to organize their own community appeared to be at the root of their success. After the war, Leighton launched a multigenerational study (still ongoing) to document the ways communal ties influence individual mental health.

Nonetheless, psychology of place remained a radical notion even into the 1990s, when Fullilove was working as a specialist on the mental health problems associated with H.I.V. and AIDS. "The idea that the location was

important — people were just looking at me aghast,” she recalls. But as she continued her work through the '90s, researching community trauma in Pittsburgh and New York, Fullilove increasingly came to see cities as ecosystems, with streams and channels, one flowing unseen into the next, disruptions wreaking havoc, threatening vitality everywhere. In a 1999 article in *The International Journal of Mental Health*, she showed federal urban renewal policies to be a fundamental cause of disease.

In the 1970s and '80s, for instance, city managers practiced what Roger Starr, the New York City housing commissioner, deemed “planned shrinkage,” whereby planners focused their limited resources on high-wealth neighborhoods; the poor, primarily in minority neighborhoods, were left with fewer firehouses, dilapidated housing, parks fenced off, bridges shut down. “A Synergism of Plagues,” Rodrick Wallace’s 1988 paper in *Environmental Research*, described how disinvestment accelerated H.I.V. infection, not just in the inner city but also in the suburbs.

Fullilove’s approach turns the standard story of the American ghetto upside down. Instead of neighborhoods with intractable problems of their own making, isolated from their more comfortable neighbors, she sees people in constant motion, shifted, pressured and harassed by ever-changing federal and state policies that work actively to sort cities by race. In the 1930s, the federal Home Owners’ Loan Corporation steered bank investment away from areas that surveyors identified as minority or foreign-born. In 1949, the Housing Act designated older neighborhoods with high minority populations for slum clearance; cities received federal money to replace thriving neighborhoods with civic centers and housing projects. In the terminology of place psychology, the pathways of the constructed community were devastated. Fullilove’s research showed a total of 2,500 renewal projects in 993 neighborhoods, 67 percent of them black.

Many of these communities are then mined of their jewels, young people who flee the places where their families struggled to raise them. “I grew up

hearing all the stereotypes — ‘There’s nothing here!’” Khemani Gibson told me a few months ago at a youth summit that Fullilove helped organize. Gibson, a 22-year-old Ph.D. candidate in history at N.Y.U., grew up in Orange, N.J., Fullilove’s hometown. “I wanted to leave instead of actually trying to improve my community.”

Fullilove diagnosed the health consequences of this largely African-American displacement as “root shock” — which she defines as “the traumatic stress reaction to the destruction of all or part of one’s emotional ecosystem.” It can also follow displacement relating to natural disasters or gentrification, and her term has been adopted by urban planners and community psychologists. Fullilove’s diagnosis of root shock begins with an analysis of a traumatic past, to identify the breaks in the civic fabric. One treatment, says Fullilove, is to teach young people that they do have roots, and they can tend them by learning history. In Orange, she helped middle-school students write a history of their city, chronicling its troubled legacy, but also celebrating it.

On a recent tour of Orange with Fullilove as my guide, we visited a still-functioning black-owned funeral home, as well as a historic black church, Union Baptist, just paces from the highway that cut it off from downtown. “People mortgaged their homes to build this church,” Fullilove said. We saw the park, fenceless on what had previously been the white side, fenced off on the black side, and we went downtown to see the vibrant small businesses on Main Street. We passed an elementary school just in time to encounter the students spilling out at the end of their day. Miphilove Milord, a seventh grader, approached the psychiatrist. “Are you Mindy Fullilove?” she asked. Milord, it turned out, had been a participant in one of Fullilove’s history projects. “Are you the famous Miphi?” Fullilove answered. The girl beamed.

Last year, on the 10th anniversary of Climb, Fullilove, who was recovering from hip surgery, didn’t get to see much of the trail. This year, hip healed, she was excited to walk the Giraffe Path again, but also a little nervous about the pressure on neighborhood rents from Edgcombe Parc, new luxury

condominiums half a block from Highbridge Park. “It was deeply moving to be there today,” she wrote me after. “So much work has been done — so much remains.”

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