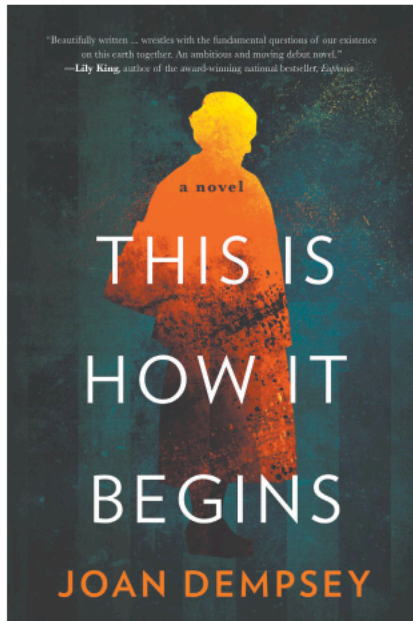


# CONVICTION IN “THIS IS HOW IT BEGINS”

BY S.E. FLEENOR



THIS IS HOW IT BEGINS \* BOOK COVER

JOAN DEMPSEY'S "THIS IS HOW IT BEGINS" weaves together the stories of the Zeilonka-Rosenberg family who find themselves in the middle of a major political moment. Ludka, an emeritus Art History professor, and her husband, Izaak, former Attorney General for the state, live in the same college town in Massachusetts as their sons and grandson. Their eldest son, Lolek, presides over the Massachusetts Senate as the president, having followed in his father's political footsteps. His son, Tommy, teaches English.

When Tommy is suddenly fired from his job at a local high school for "conduct unbecoming," the family is thrown into upheaval. When it is revealed that almost a dozen other gay and lesbian teachers have been fired at the same time under the same auspices, the politically savvy Lolek readies himself for political battle. The signs of a coordinated anti-gay agenda are everywhere, as several anti-gay pieces of legislation are proposed and sponsored by senators Lolek knows.

Ludka and Izaak spend much of the book trying to shake the feeling that this whole situation is eerily familiar. Both survived Nazi-occupied Poland and don't want to believe what they see, but with each more horrendous trial they face, the two become more and more certain of the insidious plan that has been set into motion.

Running against the grain of familial experiences is the story of Warren Meck, a Christian radio host and father, who helped pull this grandiose plan together. He and a coalition of other members of his church have been carefully plotting out a plan for conservative Christians to retake America, starting with Massachusetts. Dempsey presents the reader not with a straw dog in Meck, but instead with the image of a deeply convicted man. In fact, some of the best of Dempsey's writing is in capturing deep religious conviction.

"A person's faith—however defined—could be as entrenched and unmovable as the granite cornerstone anchoring the State House itself; reason was powerless to budge it." As the family and Meck's group clash and interact, ultimately, it is faith in what is right that presents the best argument against the anti-gay legislation being considered, rather than the reasoned arguments of politicians.

In the midst of the greater conflict of the novel, a PTSD-afflicted Ludka faces her own dilemma about a cherished, and long-presumed lost, painting. She had saved the painting, a portrait of Chopin painted by Mieroszewski, during the Nazi occupation. The world believes it to be a casualty of the Nazi destruction of art, but she keeps the painting hidden in plain sight. When the grandson of her long-lost love tricks Ludka and steals the painting for ransom, she is forced to face the reality that technically she herself has stolen the portrait. Only an out-of-the-blue invitation to present her work in Warsaw and the chance to see her love again carry the promise of resolution for Ludka and her painting.

What is perhaps most stunning about Dempsey's novel is her ability to empathetically show two diametrically opposed sides, while still coming out with her final conclusion: this is how it begins. "It" is not just exclusion and pain, but rather "it" is the systematic laying of groundwork for true horror, such as what Ludka and Izaak survived in Warsaw. Dempsey's book feels prescient in our current political climate and one need look no further than the Masterpiece Cakeshop v. Colorado Civil Rights Commission case that is currently being decided in the Supreme Court to see evidence of just how the "it" Dempsey's book warns of begins. ■

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disability insurance system. Our social insurance programs for disability are simply inadequate. Basically, you get \$700 a month if you're relying on disability. That's \$8,400 a year and the poverty level is \$14,000. We should not be locking people into an almost-40 percent below-poverty income just because they have a disability.

We have a disability insurance system in this country that does work. It's called Social Security Disability Insurance. But it's only for people who have a work history of enough years of full-time work. Unfortunately, for people who have a mental illness, the onset of that disease is between 18 and 27. So they are unlikely to have accrued enough semesters of work to qualify for SSDI.

When SSDI was designed in the 1930s, it was basically a welfare program for elderly people who didn't have a work history. Then it was extended to people who were working-age with a disability, and the most common working-age disability is a severe mental illness. If severe mental illness had its onset at age 40, then it would not be the same issue.

**How would you describe the cause and effect relationship between homelessness and mental illness?**

**Culhane:** It's an affordable housing problem. When there is competition for scarce resources, the people who are the most vulnerable are the ones who are going to lose out.

People with mental illness or other disabilities have a harder time competing in that marketplace because it's harder to identify places to live, to get landlords to accept them, and to access treatment, so they are at multiple disadvantages.

Mental illness is an episodic condition. Their homelessness is occurring usually as a part of a psychiatric crisis. Sometimes people have serious psychotic symptoms and other times they go into remission, go on medication, and are able to manage the disease. If that isn't sustained, then they have crises—it's the nature of the disease. And so they get hospitalized often for long periods of time. It's very disruptive. You lose your social connections, your job, your apartment. That often triggers homelessness.

**Where is the field of homelessness heading?**

**Culhane:** The field has gone in the wrong direction. They want to only serve expensive homeless people so that we can save Medicaid money. And I don't think that the public is as interested in saving Medicaid money as they are in more efficiently using the money to serve more people effectively. From an insurance perspective, you don't want to have only sick people enrolled in your program. You want to spread the savings over a larger group so that you're pooling the benefit just like you pool the risk.

It's not a sound actuarial perspective to focus on the expensive people once they become expensive. We really should be targeting the people who are at risk of being a life-long, high-cost burden on society because they're not housed. If we have to make the economic argument to persuade people that this is a morally important obligation, so be it. But obviously, it's more than money. It's about valuing life.

What's going to bear watching is the politics that emerge around autism. The number of people coming into young adulthood with autism is growing dramatically. These are folks who are quite similar to people with severe mental illness in the sense that they have cognitive challenges. In a place like Pennsylvania, the number of autistic adults in their 20s is going to go from about 7,000 to over 20,000 in the next ten years. There's a huge housing component to that. ■

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