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The Emissary

Texas Research Institute of Mental Sciences, Houston

October 1983



Free at last?

—page 5

Dr. Joseph C. Schoolar



When the chief executive officer of
TRIMS reports to the staff on the state of the institute, everybody listens—not because attendance is compulsory (it's not), but because staff members like to hear about their work

yesterday, today, and tomorrow.

The auditorium has only 120 parking spots and so, like an actor in a short-run play, Dr. Joseph C. Schoolar gave two performances Aug. 24 and 25.

"Nothing could be more important than what we here at TRIMS do," Schoolar said. "Our job is to take too few resources and to establish treatment plans based on new data, to contribute to those data, evaluate and validate them, perform demonstra-

tion projects to illustrate them, and then get the information out throughout this large state.

"The patients we are asked to help often cannot help themselves. They are people for whom little support is available. Do we do this job well? Are we doing useful research? Are we better doctors and nurses, mental health workers, occupational therapists, and social workers? Are we training more people and training them better? Are we using our resources well?"

Director's report to staff is history of achievements

escribing the institute's growing contribution to patients of the Texas Department of Mental Health and Mental Retardation—with 3,000 yearly drug blood-level analyses, 1,300 telephone-transmitted electroence-phalographic interpretations, 300 literature searches, a new behavioral screening instrument, teleducation and DSM-III training—Schoolar affirmed that TRIMS is doing the job it was assigned to do for the state.

Four percent of department's patients

He congratulated the staff for the recent three-year accreditation by the Joint Commission on Accreditation of Hospitals. Forty-two percent of the institute's budget is spent on patient care. This is 1.15 percent of the TDMHMR budget, yet 4 percent of the department's patients are treated in TRIMS clinics and hospital.

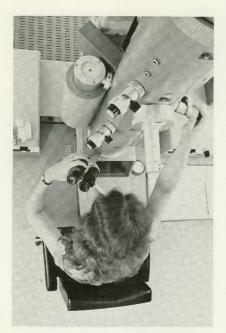
"We serve the commissioner in many ways," he said, "and we carry out demonstration projects as models for the state." The case management model the department wants to put into operation is being researched here.

This is true also for preventionoriented research, he said, particularly in the child and family clinic where well-functioning and troubled families are being studied, and in the developmental neuropsychology section where research focuses on the growth of lowbirthweight infants and on chil-





TRIMS offers training to many levels of mental health professionals, including psychiatric residents, top right. Above, assistant administrator Laddie Hanacek reviews the \$15.5 million budget.





dren at risk of developing learning disabilities.

Schoolar enumerated a long list of group and individual achievements—among them \$1,616,350 worth of research grants, the publication of four books and 160 papers, and the success of symposia on chronic mental illness and on violence.

Models of care

Among the research and demonstration models he described is the Texas Project for Elders, part of the TRIMS Gerontology Center and one of ten case management projects in the country funded by the federal government. The project links elderly, impaired people with social services in the community so that they can continue living in their own homes.

Similarly, the institute is one of

The electron microscope, top left, is a valuable tool in many research projects, including studies of the aging mouse brain. Lower left, TRIMS developmental neuropsychologists test children at risk of developing learning disabilities. Part of recovery for patients hospitalized at TRIMS, right, is participating in occupational therapy.

11 sites of a national study of the effect of fenfluramine on improving the behavior of autistic children.

"We concentrate our research efforts on areas that have been demonstrated as departmental needs: schizophrenia; alcoholism and substance abuse; organic brain disease and aging; depression, mania, and anxiety; developmental defects and retardation; violence and aggression," Schoolar said.

Despite a staff reduction earlier in the year, the institute is now back to full complement, 505 employees. The budget is \$15.5 million, a third more than three years ago, although the dollar value has shrunk.

More retardation research

Turning to the future, Schoolar said that the Research Advisory Council, whose report is not yet final, is expected to recommend more prevention-oriented studies and more research on mental retardation.

"On the first day of this fiscal year, TRIMS became responsible for the Genetics Screening and Counseling Service in Denton. GSCS has 17 outreach centers throughout Texas, a staff of 82, and a budget of about \$2 million a



Barbara Hughes, word processing supervisor, has helped nearly 100 staff members enter the computer age.



year. GSCS provides a network of services for the state and will, for us, be a channel for gathering data and trying out new programs." The Denton agency will function as a division of TRIMS.

Service transfer not decided

As to whether or not the institute will be asked to transfer some of its clinical services to the Mental Health and Mental Retardation Authority of Harris County and concentrate on research and training, Schoolar was not able to make a firm prediction. He said meetings are still under way to decide on the role of the institute when the new Houston Psychiatric Hospital opens, probably early in 1986.

"We may have to transfer some services," he said, "but strong voices in the community are saying that we must keep them, that the community cannot do without them."

Even if TRIMS gives up some patient care, he said, "the principle I always put first is that no patient be harmed. Equally important is that our staff not suffer. If any staff members are to be transferred, we will do the very best we can to make sure that their benefits are portable."

Schoolar predicted more emphasis on evaluative and applied research, more work on the epidemiology of mental diseases, and an expansion of the training division.

He ended with thanks to the staff for work well done.

—Lore Feldman



Preconference reading

Aging 2000: Don't miss it!

A preliminary program is printed and nearly 800 pages of reading materials have been mailed to registrants preparing for TRIMS's 17th annual symposium, Aging 2000: Our Health Care Destiny.

The block-buster international conference, designed to address medical, social, psychological, economic, and cultural issues facing people who will be old by the end of the century, will be held Oct. 23-26 at the Westin Oaks Hotel in the Galleria.

Intended to give the stage to forward thinking and provide new insight to researchers, the symposium will be divided into six plenary sessions and 22 workshops.

Sunday, Oct. 23, 4-6 p.m.: Opening remarks and the first plenary session entitled "Aging 2000: Our Health Care Destiny—An Overview."



Monday, Oct. 24, morning: The plenary session is on the basic mechanisms of biologic aging. Concurrent sessions include neurochemistry and dementia; implications for discovering effective treatments for previously disabling and fatal diseases; advances in treatment of affective, behavioral, and thought disorders; health and the changing social psychology of the life cycle.



Monday afternoon: The plenary session will address the prevention and treatment of physical disorders. Concurrent sessions are on experimental neuropathology; neurotransmitters and disease; interface of psychiatry and medicine; and social supports and health of the future aged.



Tuesday, Oct. 25, morning: The plenary session deals with prevention and treatment of mental disorders. Concurrent workshops will include neuroimaging; rehabilita-

tion and maximizing functional capacity; legal and ethical concerns in the aging; emerging trends in work and health; and advances in treatment of senile dementia.



Tuesday afternoon: The plenary session addresses delivery of health care. Concurrent sessions are on neuroregulatory processes; psychological assessment in the future health care of the aged; long-term care system for future elders; anticipated changes in psychiatric treatment; and issues relating to the delivery of care for the aged in the state mental health and mental retardation system.



Wednesday, Oct. 26, morning: A realistic look into the future is the topic of the plenary session. Concurrent workshops will address pharmacologic intervention; health care and physical environments of the aged; future financing of health care; and aging and mental handicaps.

Registration for the symposium, which includes two luncheons and four volumes of preconference literature, is \$125; fee for TDMHMR employees is \$25. Deadline for registration is Oct. 10; late registration, though discouraged, is possible.

For more information write or call Howard Rabinowitz at TRIMS—(713) 797-1976; STS 874-6415.

Rush Record stresses need for research funds

The solutions to mental retardation and mental illness can only come from research, Texas Mental Health and Mental Retardation board member Rush Record told state legislators, their aides, and agency leaders at a workshop Sept. 7 in Houston.

"There is a remarkable lack of understanding about the role of research in mental illness," he said. "Look at the figures. The money granted for research into things like cardiovascular disease is 10 times what is given for mental illness."

With new imaging techniques of the brain, researchers can now make some important advances in answering questions about neuropsychological disorders, he said.

"There is a real opportunity right here in Texas. In the next 10 years, I think we're going to see some remarkable things being discovered in Houston."

Record was the luncheon speaker at an all-day gathering of providers of mental health and mental retardation services in Harris County and of the legislative leaders who decide on funding.

The meeting, organized by Barbara Stanley, an aide to State Sen. Chet Brooks, was held at the Houston International Hospital. TRIMS director Dr. Joseph C. Schoolar and Nancy Wilson, director of the Texas Project for Elders, were among the speakers.

Public education by private hospital

Houston International Hospital offers free education on alcoholism and drug abuse.

Hospital staff members lead a series of training sessions in intervention for family members and offer information on the effects of alcohol and chemical dependence on families, job, and health.

The workshops are held Tuesdays at 7 p.m. at the hospital, 6441 Main Street. In addition, the Adult Children of Alcoholics Group meets at 6 p.m. each Tuesday. For further information call 795-5921.

Do I want to quit smoking? How Much? When? Why?

H e knows it causes cancer, smells up his clothes and house, turns his teeth yellow, and bothers people around him. He's even seen the gory photographs of diseased lungs.

Finally, badgered by his family, a man agrees to try to quit smoking and buys a slick Madison-avenue style manual. Two miserable weeks later, he gives up, lights a cigarette, and breathes a tar-and-nicotine-filled sigh of relief.

Quit-smoking manuals are rarely helpful, says Dr. Carlo DiClemente, chief of the alcohol treatment center and an investigator of addictive behavior.

"A lot of people make an attempt that is half-hearted. Then they fail and let that failure confirm in their minds that they are unable to quit. Actually, they are not ready to quit, not in the right stage of change," he says.

DiClemente and his colleague, Dr. James O. Prochaska, professor of psychology at the University of Rhode Island, have developed and clinically tested—with smokers and alcoholics—a model of the stages of change most people with an addiction go through three or four times before they finally chuck their habits.

Studied 900 smokers

The model was developed after the researchers analyzed the results of their two-year study of 900 smokers who were in every stage of change—from being unmotivated, to beginning to consider change, to seriously contemplating, to quitting, then maintaining the change or relapsing.

DiClemente and Prochaska recently received a two-year extension of their original National Cancer Institute research grant and are planning to re-examine their data with a new statistical method called causal modeling. From those results, they hope to develop a good manual that incorporates the model of change theory and pays off in results.

Causal modeling, DiClemente says, will help researchers look at the "strength of relationships between variables (like health concerns, social support, stress, occupations, and what processes people



Quitting an addictive behavior—like smoking—is not easy task. But, oh, the rewards.

go through to change) to see what elements explain best how people change."

In the second phase of the study, the TRIMS and University of Rhode Island researchers will prepare manuals "directed at different groups of people—from those beginning to take action to those who don't want to quit." They will test the manuals in clinical trials with groups of 45 people each.

The researchers will also try out manuals of different lengths and address a section to spouses, whose support is critical for the person trying to change an addictive behavior.

Nagging, guilt don't work

"We know nagging isn't the sole answer," DiClemente says. "If nagging did it, hardly anyone would be smoking. Guilt is a poor motivator. It raises the anxiety level and ultimately contributes to more smoking."

Diclemente believes that he will be working with a highly resistant group of smokers. Thirty million people have quit smoking since 1964 when the surgeon general reported the health hazards of the habit. But today, 54 million people still cling to their cigarettes.

The study's pilot manual is a 54-page guide that describes the different stages of change and helps smokers understand their feelings about smoking and

continued on page 6



Dr. Carlo DiClemente, project co-director Carol Ivens, and research assistant David Francis examine computer data garnered from a survey of 900 smokers.

Smoking

continued from page 5

their level of motivation to change. It includes quotes from smokers who participated in the original

study. For example:

"I never really wanted to believe it was a physical addiction. I always wanted to believe that I was just smoking because I wanted to. After a while it just got to the point that it just didn't make any sense....It took me a while to make that decision—maybe a year or a year and a half....The reason I became interested in this study was because I really have a firm belief in that whole deal after going through it. I think people can quit smoking."

"Never" works best, but...

The pilot manual, full of selfhelp tests, is designed to take smokers about a month to complete and encourages them, once they stop smoking, to examine their attitudes.

"The best option to promote maintenance is never to smoke even one cigarette. However, we know that not everyone will be completely successful in not smoking in every situation.

"We try to make a distinction between a slip and a relapse. Not every slip results in a relapse but every relapse usually began with a slip," the manual says.

If a person does not quit smoking the first time the manual is used, he or she may be ready later on, when the book can be picked up again, DiClemente says.

"There are no simple answers to the problem. We hope that looking at the model of change in a more complex way statistically will help us to build better intervention methods."

-Kathleen Kimball-Baker

Aging, Living & Caring is a beautiful handbook

F amily members or friends caring for elderly people who are in poor health and living at home face challenges and responsibilities that can seem overwhelming. Their feelings may run from stress to resentment to guilt.

Jane Corinne, community outreach and development specialist with the Texas Project for Elders, has compiled a handbook for caregivers that addresses these concerns and offers detailed information about sources of help for elderly people.

In Aging, Living & Caring: A Handbook for Family and Friends, Corinne tells caregivers they "deserve enormous credit...The task is probably more difficult than you first imagined it to be. But at the same time you are probably more capable than you ever thought yourself to be."

The booklet addresses myths about aging, like "old people are in their second childhood," "it is depressing to become old," and "old people will all eventually become senile."

She advises caregivers that feelings of frustration and exhaustion are normal, that allowing others to help is a sign of strength, not weakness, and that sharing their experiences will help them cope with their difficulties.

A list of services in Houston,

We can help

The Public Responsibility Committee composed of volunteers from the community has been established to assist in protecting the rights and interests of every patient in the care of the Texas Research Institute of Mental Sciences (TRIMS).

Complaints, questions, concerns or suggestions may be made known by writing to:

Chairperson
Public Responsibility Committee
P.O. Box 20391
Houston, Texas 77025



Jane Corinne and her handbook.

like home health care, homedelivered meals, transportation for handicapped people, and housing is included, as are sources of further information and reading.

The booklet also gives caregivers a section called "Your turn to speak," which asks whether or not the publication has been helpful and solicits suggestions.

A committee of 11 people interested in aging—nurses, social workers, students, and administrators—helped Corinne compile the information and edit the booklet.

For more information, contact Corinne, 665-2122, at the Texas Project for Elders, a federal research and demonstration project looking at how best to help elderly people in poor health remain at home.

185 employees responded Survey indicates morale problem

M ost surveys garner a trickle of paper and, from nonresponders, a shrug.

But when the Employee Relations Committee took the pulse of 500 staff members' morale last May, 185 people responded, and with divergent answers that have taken a while to study.

"Indications are that a morale problem exists at TRIMS," the survey subcommittee reported to Dr. Joseph C. Schoolar, TRIMS director. "The morale problem involves the relationship between upper management and the rest of the institute...but it is the professional staff which is the most solidified in this attitude."

The confidential survey was designed to indicate the job functions of respondents and the division to which they belong. Its 10 questions dealt with the respondents' feelings about their contribution to mental health care, their belief in being part of a team, their satisfaction with rewards, and with the quality of communication with their supervisors and the administration.

The questions could be answered on a scale of five between "agree" (1) and "disagree" (5). One surprising result, the report points out, is that many staff members responded to some questions on one or the other side of the scale, with few hovering in the middle.

Faith in contribution

To the question about making a valid contribution to mental health care, more than 80 percent said yes, less than seven percent no.

Nearly 50 percent said "working at TRIMS gives me a feeling of being a part of a team." No-votes came from slightly more than 20 percent.

Fifty-five percent disagreed that "staff recognition at TRIMS is handled well," while 25 percent agreed.

Sixty percent believe "my immediate superior takes an interest in my work"; those who don't think so ranged between 20 and

six percent on the negative side.

Not much communication

"Communication is excellent between employees and the administration at TRIMS" gathered a noanswer from about 57 percent, yes from about 20 percent.

Most dramatic were the response distributions to "the merit system as it exists at TRIMS is an incentive to good work" and "my supervisor acknowledges a job well done." To the first, about 16 percent said yes, 65 percent no. Conversely, the other question was answered positively by 69 percent, negatively by 12 percent.

About 15 percent of the respondents seemed not to know to whom they could bring a grievance.



Subcommittee members, left to right, Mynette Lee, Al Delaney, and Marie Jensen, chair.

Subcommittee members who analyzed the responses were Marie Jensen, Office of Continuing Education, chair; Al Delaney, instrumental analysis section (and chair of the Employee Relations Committee); and Mynette Lee, volunteer services.

In their report to the director, they pointed out the positive aspects—that most respondents "feel that they make a valid contribution to mental health care... that their supervisors acknowledge a job well done...that they are part of a team."

Recommendations

To correct deficiencies, the committee recommended the implementation of a system to recognize employees' accomplishments, open communication, reinforcing employees' belief that they are making a positive contribution to mental health care, and providing programs to encourage loyalty to the institute rather than only to individual superiors.

Dr. Schoolar's immediate response to the report was to appoint a committee to study the recommendations and suggest changes in the areas criticized. The committee is chaired by Jensen, with administrator Frank Womack or his representative, Dr. Edwin Johnstone, chief of psychiatric residency training, and Al Delaney as members. Jensen will recruit other staff members as they are needed.

Must listen to results

Schoolar thanked the committee members for "their interest in the well-being of employees and the institute as a whole.

"Our administrative responsibility," he said, "is to listen to the survey results and to recognize their importance. It's gratifying to know that our staff members realize they make a contribution as individuals as well as members of a team, and that the supervisors are getting such high marks."

Ways of recognizing employees' contributions more effectively must be identified, he said. "As a state agency TRIMS and the department have difficulty employing a true merit system."

-Lore Feldman

The report is available in the TRIMS library.

Denton genetics service joins TRIMS as division

The Genetics Screening and Counseling Service in Denton and its 17 clinics throughout Texas joined TRIMS last month as a division.

Some administrative functions of the two facilities are being combined, but the Denton agency will retain its organization and its clinical, research, and educational functions.

"We are pleased with the smooth transition the two staff teams have been able to make," TRIMS administrator Frank Womack said.

Headed by James E. Snowden, GSCS has outreach clinics in Abilene, Austin, Beaumont, Brownsville, Bryan-College Station, Corpus Christi, Denton, Edinburg, Fort Worth, Harlingen, Laredo, Lubbock, Lufkin, Odessa, Richmond, Tyler, and Waco.

Each community clinic is staffed by a coordinator, usually a social worker, who identifies and evaluates clients. The clinics are visited regularly by a team from Denton—a physician, who is a medical geneticist, and a nurse. They examine the patient and family, taking



James E. Snowden

their history and biological samples back to the biochemical and cytogenetic laboratories in Denton for chromosomal and other analyses.

If a genetic disorder is found, the genetics team returns to counsel family members and others who may be affected by it. The physician, nurse, and local clinic coordinator help the family to understand the nature of the problem and its risks, and support the family's decisions on family planning, whatever these may be. The coordinator refers the family to other services, if necessary, and follows the client's and family's progress.

GSCS began at Denton State School in the early 1970s as a pilot project to determine the need for genetic diagnosis and counseling in the state. National health statistics had shown that birth defects each year strike more than 200,000 infants.

Initial funds came from the Moody Foundation and, in 1975, the legislature began funding the program as a service of the Texas Department of Mental Health and Mental Retardation. This year the legislature directed the \$2.3 million GSCS budget

to be transferred to TRIMS.

The two agencies' programs fit together well, and the GSCS network of clinics and its scientific capability give TRIMS an opportunity for more research in mental retardation and other developmental disorders, Dr. Joseph C. Schoolar, TRIMS director, said in his recent report to the staff.

"While we are mindful of our heritage," Snowden said, "we fit in better with TRIMS's mode of operation than with a state school."

GSCS will soon open its 18th clinic in Texarkana, Snowden said.

JCAH grants three-year approval

RIMS staff members are proud of the threeyear accreditation they received from the Joint Commission on Accreditation of Hospitals last month, although they know the approval is not a blank check.

Dr. Suzanne Bafus, chief of quality assurance, and her staff are helping clinical staff members to correct deficiencies the surveyors pointed out.

These concern mainly inadequately written treatment plans. As Dr. Donald Walk had said during the May survey, treatment planning obviously is done, but "if it's not documented, it's as though it has not been done."

All clinical services are scheduling inservice training on medical record-keeping, and the quality assurance staff is developing an audit system that calls for at least quarterly review of medical records and treatment plans.

The audit will address all rules with which medical records must comply: Medicare, the problemoriented record system, the Commissioner's Rules, and ICAH regulations.

Clinic chiefs have appointed liaison persons to work with the quality assurance staff. In the child and family clinic, Dr. Sergio Henao is beginning to include correct medical-record documentation in his clinicians' job descriptions and evaluations, Bafus said.

The inpatient unit staff is discussing the responsibility of members of the medical and social service disciplines in treatment planning for each patient. Until now, Bafus said, the responsibilities were unclear.

The quality assurance staff will soon have a microcomputer to help with auditing, but until then Dr. Rick Allen is doing the job on his computer at home.

'Lift your soles' in second annual run

B old red and gray posters are appearing throughout the medical center as the word spreads about the second annual TRIMS "Lift Your Soles for Mental Health" event, a five-kilometer run to raise money for mentally ill patients.

Runners and joggers will begin the race at 8 a.m. Saturday, Nov. 5, at the TRIMS building at 1300 Moursund.

Sponsored by the TRIMS Volunteer Services Council, the run is open to men and women of all



Run chairperson Pamela Biggers

ages and to children from age 14 up. Last year, the event, the first in the Texas Medical Center, attracted 550 participants and raised \$3,000 for TRIMS clinic and hospital patients.

Registration fee is \$8. Entry forms and brochures are available from medical center institutions, sporting goods stores, sponsors' locations and area grocery stores. Runners should register by Oct. 29; late registration until the day before the race is \$10.

Slogan-imprinted T-shirts, prizes, and refreshments will be provided by sponsors, who include Capital Bank, Getty Oil Company, Interfirst Fannin Bank, Cullen Bank, Stella Cottrell Travel Agency, restaurants, hotels, and clothing stores. Prize winners' names will be drawn at the end of the race.

The Texas Medical Center's traffic division will ensure the runners' safety by controlling traffic. For more information, call volunteer services at TRIMS, 797-1976, ext 6318.

Library tips

A two-inch-thick guide that lists more than 3,000 assessment tools is one of librarian Felicia Chuang's suggestions this month.

Tests: A Comprehensive Reference for Assessments in Psychology, Education and Business (Test Corporation of America, 1983) skillfully organizes and summarizes the many tests mental health and other professionals use regularly or may need at some time.

One can find anything from the Bayley Scales of Infant Development to College Level Examination Program (CLEP) tests outlined. Editors Richard C. Sweetland and Daniel J. Keyser succinctly list the purpose, description, timing, age range, scoring method, cost, and publisher for each assessment.

Chuang's other recommendation is Signs and Symptoms in Psychiatry (Lippincott, 1983). Jesse O. Cavenar Jr. and H. Keith Brodie focus on clinical signs and symptoms instead of specific syndromes and diseases. The book's 25 chapters, written by 25 contributors, deal with such topics as clinical evaluation, anxiety, depression, suicide, psychosis, countertransference, alcoholism, and delusions.

We won what?



They aren't always such clowns but, poor things, they don't get much chance to pose for pictures. The Emissary staff—Lore Feldman, information director, Kathleen Kimball-Baker, editor, Peter Baer, photography consultant, and Julie Kavitski, art director—heard some good news recently. The Emissary won first place in the newsletter division of the National Association of Mental Health Information Officers' annual media contest. Feldman won first place in the news/feature writing competition, and Kimball-Baker and Feldman tied for second place in the same category. Jeanne Nicholas, education director of the Denton Genetics Screening and Counseling Service, won third place for a public service announcement she and her staff produced.

Accredited

James Snowden, executive director of the Genetics Screening and Counseling Service, and Kay Ransom, GSCS director of community services, were recently certified as mental health administrators by the Association of Mental Health Administrators.

Contribution to training

Drs. George Niederehe, Anita Woods, Victor Molinari, Anne Carlisle, Sophia Havasy-Galloway, Betsy Baldwin, and Jane Corinne produced three videotapes as part of "A Model Curriculum on Mental Health of the Aged" developed by the University of Texas Medical School. The tapes are "Expectable psychological changes in the well elderly," "Enhancing psychological treatment of mental disorders of the aged," and "Pyschological aspects of prevention of mental

Service Awards

"One of the nice things about TRIMS," Dr. Joseph Schoolar said during the service awards ceremony, "is that there are so many people who have been here for a while—and if you watched the football game last night, you realize

Rhodes, Judith Scott, Ruth Smith, Linda Smith, Dr. Kenneth Solway, Lloyd Tansey, Harry Turley, Joyce Warner, Patience Williams, Frank Womack, Beverly Woods, and Roosevelt Yancy.

Ten years:

Dr. Harold Altshuler, Lenora







Coy Nolley (left); Dr. Robert C. Smith (middle); Dr. Cyrus Sajadi (right).

it makes a difference."
About 200 employees were honored with certificates and pins

Berry, Sharon Botts, Dr. Lazard Brener, Miriam Brown, Thelma Cain, Felicia Chuang, Felice

Honorabilia

illness in the aged."

At meetings

Dr. George Niederehe was invited to speak on "Dementia and family dynamics: Clinical research issues" at the spring scientific meeting of the Boston Society for Gerontological Psychiatry.

In publications

Louise E. Hsu, Thaddeus Samorajski, James L. Claghorn. Effects of acute and chronic ethanol and dihydroergotoxine (Hydergine) on neurotransmitter enzymes in brain. Alcoholism—Clinical and Experimental Research vol. 7: Summer 1983.

John W. Largen Jr., Marcos Calderon, and Robert C. Smith. Asymmetries in the densities of white and gray matter in the brains of schizophrenic patients. *American Journal of Psychiatry* 140:8, August 1983.

for their years of service to the institute.

Coy Nolley, chief of personnel, received a 30-year pin and Dr. Neil Burch was awarded a 25-year pin. **Twenty years:**

Frances Addison, Dr. Vicente Estevez, Norma C. Frey, Willie Jacko, Alfred Meyer Jr., Dr. Joseph C. Schoolar, and Sarah McClain.

Fifteen years:

Ruth Bowlin, Lizzie Bradley, Leola Burks, Dr. Sebastian Cos, M.L. Crummedyo, Dr. Chester Davis Jr., Dr. Walter DeLange, Dr. Leo Englert, Margaret Finn, Emma Lee Francis, Dr. Charles Gaitz, Ruth Ann Gooding, Clarence Harris, Johnnie Hatcherson, Dr. J. Ray Hays, Mary Haywood, Dr. Beng T. Ho, Ann Hollis, Patricia Kralik, Frances McDonald, Dr. Mae McMillan, Wallace Ragan, Dr. Jon Reck, Geraldine Meeker, Rebecca Reyes, Ernestine W. Cohen, Bettie J. Davis, Barbara Dufresne, Dr. Jaime Ganc, Carolyn Hemphill, Dr. Sergio Henao, Donnie Johnson, Thelma Johnson, Christine Jones, Gregory Kennon, Tillie Koch, Clarance Langford, Mario Lara, Preston Manual, Catherine Marshall, Martha Napper, Lillie Oliver, Jerelene Page, Juanita Edwards, Paul Phillips, Thomas Richardson, Charley Roberson, Emma Search, Ana Maria Simonelli, Linda Smith, and Linda Sohns.

Five-year certificates:

Myriam D. Albertini, Teresa P. Algaze, Dr. Richard H. Allen, Rene Anderson, Betty J. Andress, Roten L. Armstrong, Marie Avey, Peter Baer, Dr. Suzanne Bafus, Tim Batsche, Pamela Beach, Mildred Beaman, Charles Biggs, Obie Booker, Barbara Bowen, Ruby Faye Brown, William Burton Jr., Vernice Callier, Dr. Eileen Cassard, Velma Collins, Jane

Corinne, Floyd Cruise, and Dr. Vivi Daniel.

Also, Geneva Davis, Arlee Dewhard Jr., Dr. Carlo DiClemente, Jeanette Dillard, Mildred Dobson, Dr. Maxine Weinman Epstein, Dr. James Ferrero, Dr. Jack Franklin, Dr. Jack Fletcher, Virginia Fromme-Montgomery, Antoinette L. Gennusa, Lester Goekler, Frieda Goldberg, Frank Gordon, Marjorie Gorham, Constance Green, Dixie Hahn, Artmus Harrison, Melba Haynes, Jeanie Hicks, Paul Hicks, Georgetta Hooks, West Jackson, and Richard Johnson.

Also, Hazel Junior, Sidney Kindle, Jeannine Kriegel, Satish Kumar, Edgar Dunbar Jr., Dalton Landry, Susan Landry, Dr. John Largen Jr., Josie Lee Larkin, Lossie Lastee, Nadine Lokey, Elizabeth Lucas, Dr. Chandra Misra, Dr. George Niederehe, Dr. Beatrice Nugent, Jane Peterman, Howard Rabinowitz, Dr. Guruswami K. Ravichandran, Glen Razak, Dr. Sigsby Rusk, Harnath Shelat, Ira Mae Sam, Dr. Bernard Saltzberg, Alla Shvartsburd, Dr. Caryl Smith, Dr. Robert Smith, Willie Smith, Mary H. Sosa, Elderine Turner, Manuel Venzant, Darci Volpendesta, Ching Wah-Wan, Junius Washington, and Sandra K. Vick.

Employees of the Denton Genetics Screening and Counseling Service who received 10-year pins were Rodney A. Barton, Michael G. Frazier, and Dr. Carl B. Mankinen.

Five-year certificates were awarded to Jeanne Nicholas, Shirley Smith, Dawn Swank, and William Thompson.

Interns, residents, fellows



Interns

New psychology interns, left to right, are Donna Cohen, Donna Hilton, Julie Purser, Frances Worchel, Walter Weinstein, Laura Stephenson, Claudia Anderson, and Peter Cousins.



Residents

Psychiatric residents this year, left to right, are Drs. Antonio Bartonico, Victor Gutierrez, Rakil Yusin, James Joiner, Luisa Lohner, Henry Remy, Nurun Shah, Ilya Kolpakchi, Shanaz Saleem, Kinh Van Nguyen, Rene Espiritu, and Dodds Simangan.



Fellows

Geriatric fellows are Drs. Jonathan Malev, Nancy Jo Dunn, Carol Yoder, and Lynn Mades. Not pictured are Drs. Michael Finegan, and Beth Garrison.







Claudia Anderson



Father Albert Moraczewski

Who we are



Larry Wells



Dr. Ilya Kolpakchi



Brad Perkins

Jeanie Hicks

Jeanie Hicks, administrative secretary in the Gerontology Center's research section, is a slim, soft-spoken woman as polite as she is efficient.

But when she slips three fingers into a 14-pound bowling ball what emerges is a pin-smashing, tournament-hopping semiprofessional.

In the eight years since she took up the sport, Hicks has won 75 trophies and can boast an average of 169 (which, for those of you who don't know the game, is mighty good).

On a bulletin board behind her desk hang photographs of her team and other bowling memorabilia. Hicks believes her talents are inherited from her mother who has won cars and large sums of cash with her bowling skills.

Hicks would like to enter national competitions in Oklahoma and New York this year if she can find a sponsor to send her.

In the meantime, her work at TRIMS will keep her quite busy. She is receiving calls from all over the world about the upcoming TRIMS symposium on aging and future health care.

Among her duties are typing,

word processing, answering calls for 17 staff members, ordering supplies, handling leave forms, and running the office. She says she enjoys her job and especially likes being involved in the medical field.

Her last position was with Ben Taub General Hospital where she worked the graveyard shift in the emergency room as a ward clerk. She was responsible for seeing that physicians' and nurses' orders for tests and lab work were carried through.

It was a grueling job. "After eight years of having my days and nights turned around I was more than ready for a change."

Claudia Anderson

laudia Anderson knew from the time she was 15 years old that she wanted to be a psychologist.

She even had an inkling before then when, as a Los Angeles grammar school student, she saw her peers getting involved with drugs. "I remember thinking how sad it was that they were damaging their lives and if they'd only had someone to talk to may be things would be better."

But it was in high school that she made her personal commitment. She attended a Catholic college preparatory school in Houston where she met some Jesuit priests who, though not psychologists, were excellent counselors.

"I've always liked talking to people and helping them. And I knew then that I should become a psychologist," she says.

She has remained firm about her conviction, except for one "itty-bitty time," she admits with a grin. That was her first semester at Rice University when her parents wanted her to be "something more practical—like a biochemist."

A heavy dose of physics, chemistry, and biology during those anxious first months of college persuaded her that her original plan was much better.

After earning her bachelor's degree in 1978, she got a master's degree in psychology and worked in the TRIMS therapeutic nursery (now the child development clinic). She is completing a doctoral program at the University of Maryland and is a child and family intern at TRIMS.

She eventually hopes to work with autistic and schizophrenic children to help them "adjust and live in a less-than-understanding world."

Father Albert Moraczewski

A quick wit, kind face, distinguished background, and sharp mind are only a few of the qualities that make **the Rev.**Albert Moraczewski, O.P., the perfect match for the new position of liaison officer between TRIMS and other TDMHMR facilities.

He has expertise in technical fields like pharmacology (in which he has a doctorate), an understanding of the mechanics of research, and the ability to relate well to people, which is at least partly the result of his years of service to the Catholic church as an ordained priest in the Dominican Order.

What's more, he is one of the early staff members of TRIMS, having joined in 1960. He helped design some of the biochemical research laboratories of the then-Houston State Psychiatric Institute.

From 1974 until now he worked in St. Louis with the Pope John XXIII Medical-Moral Research and Education Center, initially as its first president, and later as vice-president of research.

In his new job here, Moraczewski will help carry out TRIMS's mandate to "make greater efforts to transfer research knowledge to other facilities for the improvement of patient care," he says. Conversely, he will be the person from whom the research needs of those facilities can be heard here.

And he is a wonderful listener. One can discuss with him any topic from the chemical origins of the universe to gripes with the Catholic church to Chicago politics.

Moraczewski says he was conceived in Paris, born in Chicago and reared in both. From the University of Chicago he earned a bachelor's degree in chemistry and master's and doctoral degrees in pharmacology. And in the seminary, he received master's degrees in both philosophy and theology.

Larry Wells

o bags and circles under the eyes? Even as a first-time father, Larry Wells manages to appear unruffled and unweary. Delight with his new son, Ellory Creighton, who was born August 29, is balancing the effects of lost sleep and the other less than joyful aspects of becoming a father.

Wells is director of fiscal services for the Denton Genetics Screening and Counseling Service. Although a native of Oklahoma, he arrived at GSCS by way of Arkansas where he worked as business manager for the Human Development Center and met his wife, Jo Nell, a home health nurse.

In talking with Wells it becomes apparent that the superintendent of the Arkansas facility, Louis Brown, significantly influenced his view of the world. Wells says. "This gentleman and his wife decided to adopt a child, and before the adoption process was completed, they learned that the child was retarded. Not only did the couple proceed with the adoption, but Mr. Brown took on a complete career change so that he might help individuals who are mentally retarded. While working with him, I learned a great deal about how much a motivated individual can accomplish." Looking at possibilities for contributing to the work of state facilities, Wells sees the application of a business administration background like his.

"If I were able to accomplish whatever I wished, I would establish a financial foundation strong enough to assure (at least from the fiscal standpoint) the continuance of the organization."

Asked to identify what he finds most frustrating in his current effort, Wells says it is "not always being able to answer the questions brought to me."

—Jeanne Nicholas

Coming attractions from the Office of Continuing Education...

October

Beverly Myers, a specialist in teaching techniques of professional development and interpersonal communication, will present the series, "Positive approaches to people with power." The teleconference series, on consecutive Thursdays from Oct. 20 through Nov. 17, will help participants learn to handle difficult situations and people, confrontations, conflict, and staff communication. To register, call 791-6665.

November

In November, the Office of Continuing Education begins a four-part series called "A Matter of Time." Produced by TRIMS and KUHT-Channel 8, the public broadcasting station in Houston, the series deals with the lives of elderly persons, looks at the problems they face, and gives health care professionals a chance to examine their own feelings toward the fast-growing minority of elders. Featured in the teleconference series are Dr. Alec Comfort of Stanford University, and Maggie Kuhn, founder of the Gray Panthers.

Who we are

Dr. Ilya Kolpakchi

I t's not American society that makes him feel like a stranger, Dr. Ilya Kolpakchi explains. "In Soviet society I felt foreign. This country is really much closer to my understanding and my philosophy."

Kolpakchi grew up in the Central Asian republics of the Soviet Union, the son of two Jewish physicians forced to move from their Ukrainian home to wherever the Soviet regime sent them. In 1981, 16 months after they applied for a visa, Kolpakchi and his wife Anna finally came to the United States, arriving in San Francisco. They had to leave their parents behind because the older couples, in their fifties, felt they were too old to start their careers over again and too young to retire.

Dr. Anna Kolpakchi is in her first year of residency in internal medicine at the University of Texas Medical School. And Ilya, who experienced little of the Soviet Union's fabled snows, feels at home in hot weather.

Kolpakchi has two years of psychiatric training in a large hospital and experience in psychiatric practice with clinic patients. He was dismissed when he applied for permission to emigrate, but after a year of unemployment found work in an outpatient clinic for alcoholics and drug addicts, in a specialty

called narcology in the Soviet Union.

The country has 50 million alcoholics, their number having doubled every 10 years, he says. "You have no idea how much more serious this disease is than here, where a person who drinks throughout the day is considered an alcoholic. Six, eight, 10 beers a day are considered 'supernormal' there."

After passing the foreign medical graduates' and federal licensing exams in San Francisco, Kolpakchi chose TRIMS for his psychiatric residency from among several other offers because he likes the institute's eclectic program. "It's not strictly biologic and not purely psychoanalytic," he says.

Having worked in government service during his whole career, he finds a state agency set-up quite comfortable. And the culture shock, he says, wears off fast when one finally arrives in a society whose ideas fit one's own.

Brad Perkins

I if you thought automaticeverything cameras were the latest invention in photography, think again—and talk to **Brad Perkins**, TRIMS's new photographer.

He is an alert observer of the state of the art and can fill you in quickly on the latest news about laser photography, computer graphics technology, and picture-taking through electron microscopes.

Perkins, who studied photography at Sam Houston State University and Houston Community College, comes to TRIMS by way of the department of pathology of the University of Texas Medical School at Houston where he worked for four years.

Equipped with cameras, flashlight, and reflecting equipment, Perkins is already becoming a familiar sight here as he snaps his way through a new issue of *The Emissary*.

He says he enjoys the opportunity to do more photojournalism. But he quickly acknowledges that photography is more than running around shooting pictures: a photographer must have strong skills in the darkroom and be willing to spend a good deal of time in a windowless room.

Part of Perkins' sense of discipline comes from his three-year stint in the army. One of the last men to be drafted as the Vietnam war was ending, Perkins was stationed in Virginia.

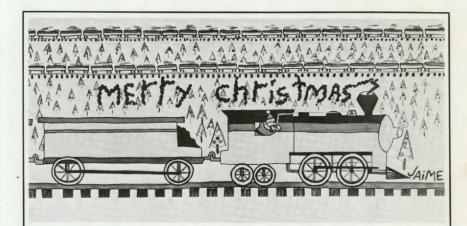
On an old horse farm converted to a communications outpost, Perkins worked with the Army Security Agency, translating Morse code transmissions from around the world. He also ran the post's photography laboratory.

"It was a fun job, but it was not exactly fun being in the service."

SUN	MON		TUES	WED	THURS	FRI	SAT
	E				1801		
2	Introduction to Computers 12 noon-2:00	3	4	5	6	7	8
9	Columbus Day	10	11	12	13	14	15
16		17	18	19	Positive 20 Approaches with People with Power 10:00-12 noon	21	22
23		24	25	26	Positive 27	28	29
		Agir	g 2000 – TRIMS Symposium		Approaches with People with Power 10:00-12 noon		
30		31					

OCTOBER

SUN	MON	TUES 1 A Matter of Time 10:00-12:00	WED	2	THURS 3 Positive Approaches with People with Power 10:00-12 noon	FRI 4	SAT 5
6	7	Election 8 Day	A Matter of T 10:00-12:00	ime 9	Positive Approaches 10 with People with Power 10:00-12 noon	Veterans 11 Day	12
13	14	Rapid Treatment of Acute Psychosis 10:00-11:30	A Matter of T 10:00-12:00	ime 16	Positive Approaches 17 with People with Power 10:00-12 noon	18	19
20	21	22	2	23	24 Thank	25 sgiving	26
27	28	Jerry Harvey - 29 Innovations in Organization 9:00-11:30	Jerry Harvey Innovations i Organization 9:00-11:30	in	*Role of Functional C and Intervention	communication in Assessment	ı



Holiday greetings!

This Christmas card, actually in bright primary colors, is one of a collection painted by young patients at the University of Texas M.D. Anderson Hospital and Tumor Institute. The hospital's gift shops sell the cards—\$6 for 20—and proceeds go to the hospital children's fund. You've already guessed that printing the card is *The Emissary's* Christmas and New Year greeting.

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