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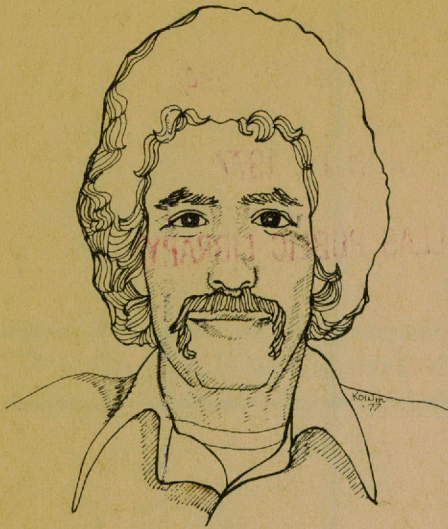
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Psychiatric Aides Honored

Each year the Mental Health Association invites mental hospitals in Texas to honor their top direct care workers during May, Mental Health Month. A selection committee at each facility names one employee to receive the Mental Health

Association's Psychiatric Aide Award. Those employed by participating TDMHMR hospital units are featured on these pages, accompanied by excerpts from the nominating statements of the selection committees.



Andy Dominguez
Big Spring State Hospital

An employee for 10 years at Big Spring State Hospital, Andy Dominguez is one of 250 direct care workers devoting time and attention to the 500 persons hospitalized there. During those years, Dominguez has developed many professional skills to enhance his natural abilities to work with patients.

Assigned to the admissions unit since 1972, Dominguez has demonstrated his talents repeatedly. He is a source of comfort to patients and their families during times of stress and extends his efforts to all phases of a patient's treatment plan.

He displays good judgment, is dependable and takes advantage of all inservice training offered. Co-workers consider him an asset to the nursing service staff.



Linda Price Shelton
San Antonio State Hospital

An employee of San Antonio State Hospital for eight years, Linda Price Shelton now works with severely regressed patients. She is involved in personal hygiene instruc-

tion and adult education, helps with a psychodrama group and leads patient council meetings.

Shelton is well-liked throughout the hospital. She is known as a loyal employee, always busy and willing to try new approaches. Her drive and initiative have been instrumental in bringing about improvements in her work area. Those who work with her recognize her dedication and appreciate her natural ability to build rapport.

To improve her ability to work with and understand the mentally ill, Shelton has taken advantage of the educational opportunities offered by the hospital as well as college courses in psychology. Her dedication, attitude, initiative, dependability and enthusiasm are considered to be examples to all employees.



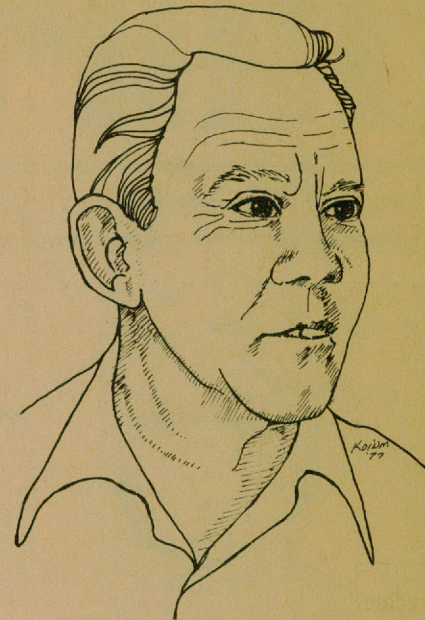
Margarita Martinez
Rio Grande State Center
for MHMR

A graduate of Texas Southmost College School for Vocational Nursing, Margarita Martinez worked at Mercy Hospital in Brownsville before joining the Rio Grande State Center for MHMR in Harlingen in 1971.

Martinez has the confidence and cooperation of both staff and patients in her capacity as supervisor. She shows understanding and compassion for those entrusted in her care and is considerate of the families of the patients, doing much to relieve their anxieties.

Seldom absent from work, she is considered one of the most dependable employees at the center. Most winners of the Psychiatric Aide Award take every opportunity to increase their knowledge of ways to provide better patient care, and Martinez is no exception. She has attended approximately 300 hours of formal training provided by the center.

Martinez is highly recommended by her co-workers for the Psychiatric Aide Award in recognition of her above average performance and her genuine concern for the patients.



Willie Barker
Terrell State Hospital

A long-time interest in the medical field was fulfilled in 1964 for Willie Barker when he joined Terrell State Hospital as a nursing aide. Assigned since 1969 to the Alcoholism Unit, Barker continues to provide superior care to patients and is recognized as a highly effective treatment team member by workers from all disciplines.

Staff members and patients are impressed with the time and energy he spends orienting new patients to hospital procedures and counseling them throughout their stay. He always seems available to patients, whether it is as technical nurse, friend, recreational companion or counselor. His patience, ability to listen and understanding enable him to form trusted relationships.

He is calm and skillful in dealing with crises, whether it be resuscitation of a patient whose seizures have stopped his breathing or escorting of drunk and belligerent patients to emergency care without force. He is noted for having more knowledge of medication than any staff member on the treatment team except the doctor, and he has taken the least time for sick leave of any staff member on the unit.

A questionnaire answered by 32 discharged patients named Barker 21 times as the staff member who had been most helpful during their hospital stay. He also received the overwhelming majority of staff members' votes to represent the unit as psychiatric aide.



Mary Haywood
Texas Research Institute
of Mental Sciences

Mary Haywood is one of 21 psychiatric aides employed by Houston's Texas Research Institute of Mental Sciences (TRIMS). She was nominated for the Psychiatric Aide Award because of her dedicated service since 1968 to the psychiatric unit and its 38 patients.

Haywood has a remarkable ability to show a kind and caring attitude to all patients in all situations. Her sensitivity to patient needs has made her an invaluable person in dealing with the multitude of circumstances.

Helpful to her in her work are six months of training classes for licensed vocational nurses which she attended and courses in child development which she currently is taking.



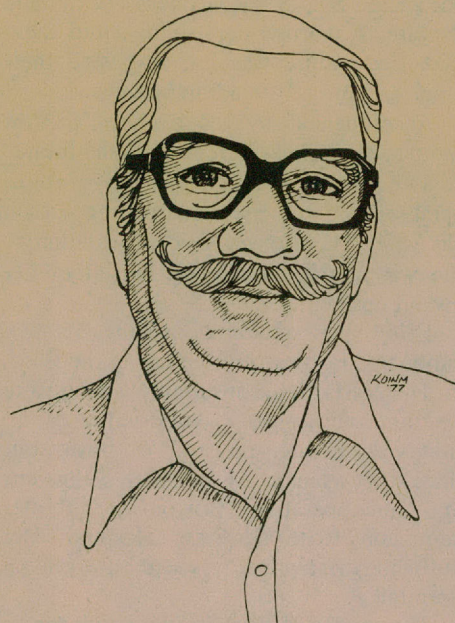
Wanda Choate
Rusk State Hospital

More than 1,500 hours of required and voluntary formal training provided by Rusk State Hospital have contributed to the skills of Wanda Choate, who has been a

hospital employee for 15 years. Choate also earned an associate degree from Henderson County Junior College for two years' training in a program for psychiatric nurse technicians.

Co-workers find Choate to be efficient, innovative and tactful. She uses good judgment, common sense and clinical expertise in performing her duties.

Choate responds to the needs of patients and fellow employees in a benevolent and unassuming manner. She is outstanding in her professional capacity and in community and charitable endeavors. Her unpretentiousness toward her deeds and her dedication to patient care set her apart as an exceptional employee.



Edwin L. "Buddy" Kemp
Vernon Center

During 18 years of service to Vernon Center patients as a psychiatric aide, Buddy Kemp has seen many changes in treatment for the mentally ill. Throughout those years, Kemp has shown an outstanding ability to adapt to change, remaining conscientious and emerging as a leader among employees classified as MHMR Services Series personnel.

Kemp is known among his co-workers for his ability to relate well to patients. He shows special concern for those recently admitted, explaining to them the hospital routine and locations of buildings to help them feel comfortable in their new surroundings. He is often seen accompanying a patient to the canteen, going for a walk with another or sitting and talking in his soothing manner with someone who is troubled.

When a bus driver was needed to take patients away from campus for picnics or

shopping trips, Kemp spent his own money to acquire the necessary chauffeur's license. Many times he returned after work hours to drive the bus.

Kemp's wife, Flo, is a former winner of the Psychiatric Aide Award.



Bertha High
Wichita Falls State Hospital

Bertha High's goal for patients at Wichita Falls State Hospital is to help them help themselves. A 10-year employee of the hospital, High has worked in the Medical and Surgical Unit for half that time. There, she gives total nursing care for ill patients transferred from throughout the hospital. She helps with bathing, feeding, backrubs, changing dressings and many other procedures that promote the physical and psychological comfort of the patients.

She is a kind and gentle person whose devotion to the patients is obvious in all that she does. She frequently buys things for those who have no money and she promotes the self-esteem of each one. She has been able to communicate with patients where others have failed.

High has the ability to establish trust with all her patients. Her warmth and sincerity are particularly consoling to patients' families in times of stress.

Her outstanding nursing care is well illustrated by one patient, a 76-year-old senile alcoholic. A stroke produced paralysis of his left arm which causes difficulty in eating and resulted in recurrent respiratory infections. The patient uses profane language to all staff, bites, pinches, kicks and spits in the faces of others. Caring for him is definitely a challenge, but High has never given up. As a result of her special care and attention, some improvement in his behavior has been noted in recent months. ■

Help Close to Home from SABINE VALLEY REGIONAL MHMR CENTER

By Marjorie Clapp

LONGVIEW--The day started out to be a routine one for Mary Britton, and then the telephone rang.

Before that day ended, she had rescued an aged couple from a possible tragic death, ministered to their physical needs, arranged for their hospitalization, administered medication to 12 mentally ill people and still managed to read her mail, write letters, answer the phone and talk to 25 people.

The nature of the crisis differs from day to day, but crisis is part of the daily routine for Britton, a registered nurse and the geriatrics consultant for the Sabine Valley Regional MHMR Center.

Britton's job is to prevent problems by visiting the elderly at home and, if necessary, involving their families in problem solving.

On the day the aged couple was rescued, Britton was called into the case by workers

for the State Department of Public Welfare. A worried nephew had told them that the couple was locked inside their home and refused to admit anyone.

Accompanied by the nephew, Britton went to the house. Here is what she found:

The 74-year-old man lay abed, paralyzed on the right side from a stroke. His wife, 71, also was in bed, so lethargic she was unable to care for herself or her invalid husband.

Food was molding on the kitchen cupboard. Bottles of urine sat on the floor.

The geriatrics consultant was unsure whether the woman's deteriorated condition was mental, physical or both. But since the woman was hostile, belligerent and uncooperative, Britton sought her admission to Rusk State Hospital. Her husband, meanwhile, was sent to a general hospital.

The woman, it was found, in addition to

emotional problems, had a severe case of diabetes. Her husband was suffering from malnutrition because his wife was too ill to feed him.

The man was hospitalized for three weeks and then was sent to a nursing home. He was fitted with a brace on his paralyzed leg and is now able to use a walker.

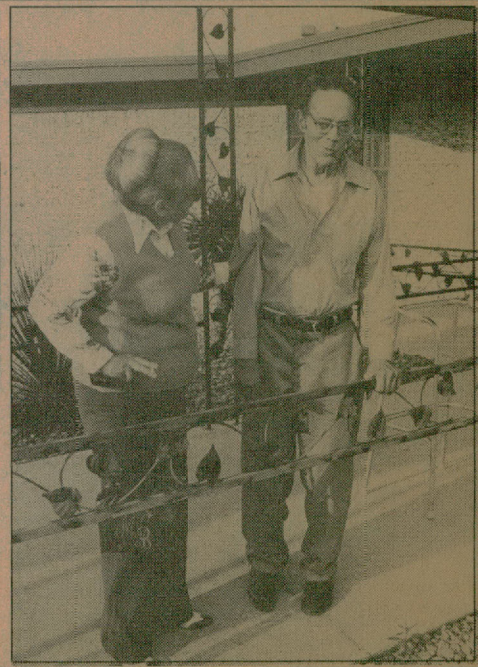
His wife is still in Rusk, where efforts are being made to bring her diabetes under control. As soon as this is accomplished, Britton hopes to see both back in their home.

Such help for the elderly, made possible through a \$34,000 grant from the East Texas Council of Governments, is an innovative service provided by the center.

The philosophy behind the service, Britton explains, is that it is better to keep the aged in their own environment rather than place them in nursing homes if



Part of Mary Britton's job as geriatrics consultant is to prevent problems by visiting the elderly at home. Prompted by a concerned relative, Britton called on a couple in poor health who had locked themselves in their home. One result of her efforts to help them (right photo) is that A. J. Eubanks was fitted with a brace and can now walk.



adequate care can be provided. But in many instances, the elderly develop mental problems simply as a result of their isolation.

One example is that of a 92-year-old woman who lived alone and reportedly was doing nothing except reading her Bible. Her constant raving and ranting about Biblical subjects frightened away neighbors and visitors and even her family. As a result, she was going no place and talking with no one.

"Nobody went to see her, so all she had to think about was the Bible. I talked to her for 10 minutes," Britton recalls, "and she opened up and discussed any number of things. I finally convinced the family that the old woman was just lonely, so now they're talking to her and taking her places."

Before the end of the year, Britton expects to have helped at least 100 elderly persons and their families.

Britton's counterpart is Judy Hine, who serves as a consultant to nursing homes. She works with nursing home personnel to develop social and activity programs and assist them in learning to cope with mental health problems.

The consultation by Hine is new, so results at this point are limited. But already group therapy sessions have been implemented in two nursing homes to help the elderly adjust to nursing home life.

The sessions in at least one case have proved highly successful. The case was that of an 87-year-old blind woman who had withdrawn into the loneliness of her room and seldom talked with anyone. Hine persuaded her to participate in a group session. A 60-year-old man quickly befriended her, talking and laughing with her and paying her compliments.

"Just a little rapport with somebody else made a big difference," Hine explains. "The woman dresses up more, has somebody put make-up on her and comes to all the group sessions. She talks with any number of people now."

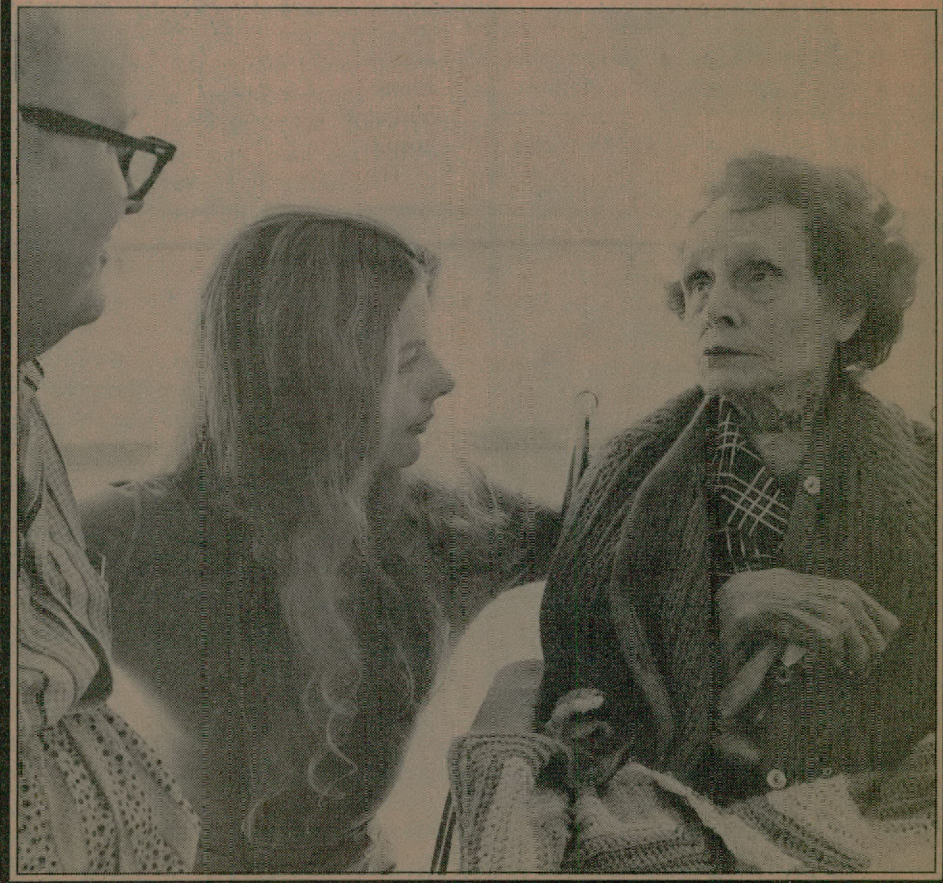
Other programs offered by the center have been developed along more conventional lines. But no matter. Characteristic of both types of programs is an increase in the number of clients helped.

In 1970, when the center (then the Gregg-Harrison MHR Center) was organized to serve residents of two East Texas counties, there were 11 employees on the payroll. Today, there are 100 employees throughout six counties.

"Steady progress with strong community support" is the way Frances H. Willis describes the organization which she

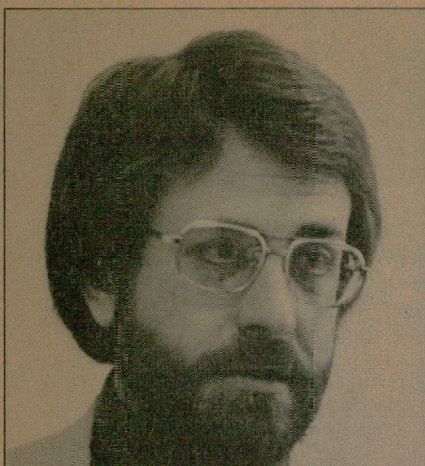


ABOVE: Group therapy is one way consultant Judy Hine helps nursing homes develop activity programs and cope with mental health problems. BELOW: One 87-year-old blind woman in the group, Lennie Hendrix, was befriended by Willie Varnell and left her lonely shell. Hine (center) visits with the pair.





"We've laid firm roots for all our programs," says Frances H. Willis, executive director of Sabine Valley Regional MHMR Center for seven years.



Robert Howell, director of Oak Haven Recovery Center for alcoholics and drug abusers, attributes the program's success to treatment of the total person.



A sheltered work program employee for several years, Anke Harber has seen the enrollment at the Marshall location (where she is assistant director) grow from eight to 50.



Involving family members in the treatment process whenever possible is characteristic of the program at Oak Haven Recovery Center for alcoholics and drug abusers.

has served as executive director for the past seven years.

"Other programs may have grown faster than ours," she says. "But we've laid firm roots for all our programs. From the beginning, we've had the support of the communities we serve."

For example, two Lions Clubs in Marshall raised money for construction of a 7,000-square-foot building to house a sheltered work program. The county donated the land, and the city provided water and sewage lines. Now, the same two civic organizations are raising money for a 5,000-square-foot addition to the building.

The center's greatest mental health services expansion was during the past year, due to a \$692,900 operational grant awarded by the National Institute of Mental Health. The grant boosted the year's budget to \$1,747,089, enabling the center to extend its catchment area to encompass Rusk, Upshur, Panola and Marion Counties.

The center opened with two small outpatient clinics. Today, mental health services include the original but greatly expanded two clinics; outreach clinics in Gilmer, Henderson and Carthage; two day treatment programs; a large and highly effective unit for the detoxification, treatment and follow-up of alcoholics and drug abusers; and services to the elderly.

Programs for the mentally retarded have developed steadily over the past six years. They encompass two sheltered work programs, a residential facility for male adults

and a genetics screening and counseling service.

Screening and referral of clients is another service. Five mental health and two mental retardation workers associate closely with state hospitals and state schools to assist individuals in their return to the community.

Only recently, the center's administrative offices were moved from the second floor of an old hospital in Marshall to renovated quarters in a Longview school building.

Ernestine Finigan, patient data coordinator and one of the original employees, recalls that the first offices were located in an old courthouse building in Marshall.

"We were near a venereal disease clinic," she recalls, "and somebody was always wandering in and wanting a shot."

Anke Harber, an early employee at one of the two sheltered work programs, remembers, "The most fun I ever had was playing beat-the-trash men."

The budget was so limited at that point, Harber notes, that supplies had to be begged or borrowed.

"I had a Volkswagen bus," she explains, "and we all piled in it and went around to all the stores trying to beat the trash men to the garbage so we could get supplies."

At that time, there were eight mentally retarded clients enrolled in the Marshall sheltered work program, where Harber now serves as assistant director. Today, there are 50.

Bud Clynes Volunteers for an Active Retirement

By Eloise Roe

"Family involvement" is a key phrase in Harber's unit, as well as in other programs.

At Oak Haven Recovery Center for alcoholics and drug abusers, heavy emphasis is placed on involving family members in the treatment process whenever possible.

Consider the case of a 47-year-old alcoholic.

"I didn't give him a prayer's chance of staying sober," says Robert Howell, director of the facility. "But he's been on the wagon for nine months now, and I think it's mainly because his wife and four children became involved."

The wife agreed to come for individual therapy, and on Sunday afternoons she, along with the children, participated in a group program.

The wife joined Al-Anon, an organization for the spouses of alcoholics, while the children participated in Alateen, a similar group for teenagers. All efforts were aimed at understanding the disease so that they could help their husband and father during his recovery period.

The alcoholism center was among programs opened during the past year. To date, approximately 130 clients have been through the program, and at least half that number are back on the job and sober.

Howell attributes such success to treating the total person--medically, emotionally, sociologically and spiritually.

"Where alcohol or drugs have become a solution for living," Howell says, "we feel like it's up to us to find a more meaningful and stronger solution."

In an early news release, Waller Ethridge, Th.D., chairman of the center's board of trustees, is quoted, "Possibilities for the center's future are endless and will be limited only by financing."

Now that the financial barrier has been overcome, the future of the center stretches out endlessly.

Planned for implementation by August is a residential inpatient unit for the mentally ill, a halfway house for the mentally ill, a female group home for the mentally retarded and emergency services.

Willis sums up the firm foundation of the center in this fashion: "We are well on the way toward realizing the capability for our center to provide a comprehensive continuum of services in this area.

"It is a great challenge to try to meet the needs that are so evident, but we are confident that the 'growing pains' are well worth it." ■

Marjorie Clapp was, until May, information director for Sabine Valley Regional MHMR Center.

KERRVILLE--It takes spark plugs to run an auto, and it takes spark to run anything active. W. Knight "Bud" Clynes, Jr., could well be called such a spark, or inspiration, because of his many accomplishments in Kerr County.

Since his retirement from personnel management and move to the hill country of Central Texas in December 1972, the Dietert Claim, which is sponsored by the Volunteer Services Council of Kerrville State Hospital, has become a headquarters of sorts for him.

At first, he and his wife Elinor were occasional visitors to the senior citizen's activity center on Jefferson Street. Now, in addition to serving on the Volunteer Services Council representing the Elks Club, Clynes is chairman of the Board of Prospectors of Dietert Claim, which is comprised of representatives of groups which have activities there.

With 35 years' experience as a professional band leader, Clynes started a band at the Dietert Claim. The band practices once a week and plays for a monthly tea dance on the fourth Saturday afternoon. Clynes is president for the second year of the Hill Country Chapter of the American Association of Retired Persons. It is affiliated with the national organization which works for legislation, insurance and other needs of older people.

Now, the local chapter is backing a fund drive for an addition to Dietert Claim. The group already has raised more than \$8,500.

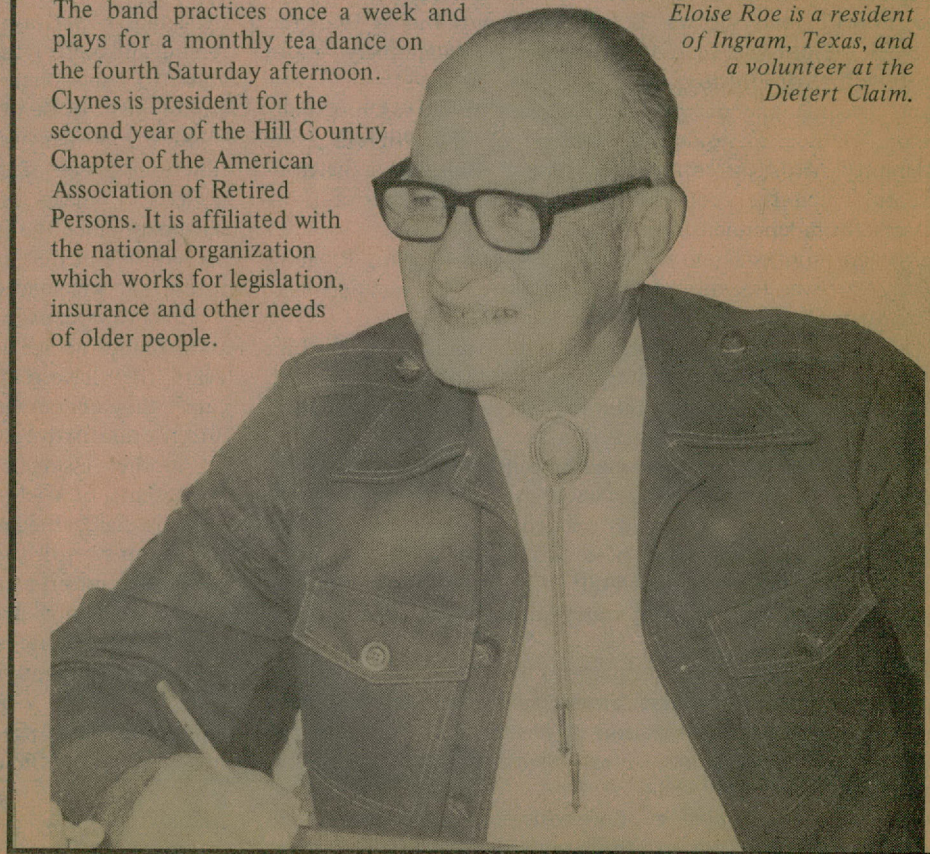
Another hat this active man wears is that of volunteer chairman for the Social Agencies Coordinating Unit, which is housed at Dietert Claim. Constance Cross is co-chairman, having held the post originally. Volunteers coordinate with charitable organizations to keep from duplicating efforts and to better fill unmet needs.

Nell Lenard, program specialist at Dietert Claim, and Marjorie Luther, coordinator of volunteer services at Kerrville State Hospital and project director of the Dietert Claim, are high in their praise of Bud Clynes.

Lenard says, "He's a ball of energy and a fine leader. When he thinks something needs to be accomplished, he either gets it done or he does it himself."

Luther's comment is: "He's a tremendous volunteer. Kerrville is lucky to have him." ■

Eloise Roe is a resident of Ingram, Texas, and a volunteer at the Dietert Claim.



Belinda's Going Home

By Beverly Mack and Mary Ann Patrick



Denton is home for Belinda Kerr. After 17 years there as a state school resident, she spent three years in community center programs in Wichita Falls learning to live independently. Home again, Kerr lives with her family and works at the Holiday Inn.

Photos by John Stark



WICHITA FALLS--Belinda's going home!

Home to a new job and the beginning of a more independent life. The journey home has been a long one, and at times a difficult one.

Belinda Kerr was placed in Denton State School at the age of three. For 17 years she was a model resident. But in 1974 the staff felt that she could function in increasingly more independent environments.

Kerr became one of the first residents of the Wichita Falls Horizon House, a residential facility of the Wichita Falls Community MHMR Center. The Horizon House is a halfway house in which the residents begin the development of skills necessary for independent living.

Eighteen months later, when the Alternative Living Program opened, Kerr was transferred there and moved into an apartment with another Horizon House resident.

The Alternative Living Program, also sponsored by the Wichita Falls Community MHMR Center, was established to provide an opportunity for mentally retarded adults to live in the community while receiving direct services.

A contract system was developed by center staff member Mary Cesare-Murphy, Ph.D., senior psychologist, in which each client has a clear picture of the skills needed for completion of the program. The contract consists of six steps, with decreasing assistance from the counselors built into each step. By step six, the client should be ready for independent living with minimal follow-along services.

The contract covers the refinement of skills in the following areas: apartment cleanliness, interpersonal relations, clothing care, personal hygiene, utilization of leisure time, utilization of community resources, and meal planning, purchasing and preparation.

Kerr also was enrolled in adult education classes where she learned to read and write and to do simple arithmetic problems.

These classes aided her in balancing her checkbook, making grocery lists and learning to write letters to friends and family.

One of the most significant aspects of the Alternative Living Program is that the clients are self-supporting. Kerr was employed by a motel for more than two and one-half years, where she was expected to perform her tasks with little supervision. Her work record and performance were excellent, so her employers were able to give her favorable references when she sought employment in Denton before returning home.

Kerr has many strengths that will enable her to continue functioning well in the future. The Alternative Living counselors noticed tremendous growth in her abilities, attitudes and self-image since the implementation of the contract system. They are confident that because Kerr has set realistic goals for her future, she will succeed in her desire for independent living.

It was not an easy decision for Kerr's family to place her in the state school at age three, but it was necessary. Throughout the years, they have remained supportive of her and, when the time came, they encouraged her to go to the halfway house and finally into the alternative living program.

Another asset in aiding Kerr's development has been the community of Wichita Falls. The stores, churches, transportation systems, bank, theaters and apartment managers are familiar with the center's residents and have been gracious in assisting them in integrating into the community.

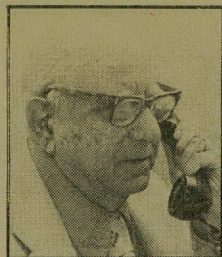
The transition from a dependent member of society, as a resident of a state school, to a productive member of society living in the community has not been an easy journey.

But--after 17 years as a resident of Denton State School, 18 months in the Horizon House and 18 months in the Alternative Living Program--Belinda Kerr is going home. ■

Beverly Mack and Mary Ann Patrick are counselors for the Alternative Living Program at Wichita Falls Community MHMR Center.

Family Doctors Aid Outreach Clients

By
Joe
Woods



Consulting physicians in the Rio Grande Valley are helping treat mental health clients in their communities. Included on this team are (from left to right) J. C. Gomez-Rejon, M.D., of Laredo; Phillip Joseph, M.D., of Alice; and A. M. Figueroa, M.D., of Zapata. Photos by Joe Woods.

HARLINGEN--Taking mental health services to the people where they live, a program started by the Rio Grande State Center for MHMR eight years ago, still is working wonders.

And much of the program's success centers on the use of community physicians rather than a large staff of psychiatrists to alleviate the symptoms of mental illness for hundreds of South Texans.

Through outreach offices in Kingsville, Laredo and Harlingen, the center is reaching many clients as outpatients who otherwise might require inpatient care at the center's hospital unit. The Kingsville outreach office maintains satellite offices in Alice, Falfurrias and Freer. The Laredo office has clinics in Hebbronville, Rio Grande City and Zapata and the Harlingen office has a satellite in Brownsville.

Consulting physicians who have undergone specialized training help the center keep its clients healthy and out of the hospital. Most of the doctors are general practitioners in their respective communities.

There was a bit of skepticism among the consultants at first; many doubted that general practitioners would be successful. This attitude has changed drastically.

The clinics began by treating clients who formerly had to travel to Harlingen for treatment. Many previously had been hospitalized at Harlingen, where the average length of stay at the center's inpatient facility is 21 days.

Other clients have been referred by themselves, their families, private physicians, friends or agencies such as the Veterans Administration Hospital in San Antonio or San Antonio State Hospital.

"I think the thing at which we are most successful is keeping people out of the hospital," said F. C. Glendenning, M.D., consulting physician at Hebbronville. "Our job is to keep clients on their medications and to show that somebody is interested in them."

Zapata is a town whose population just about doubles during the winter months due to out-of-state visitors coming to Texas to enjoy the mild climate and recreational facilities at nearby Falcon Lake. The Zapata Mental Health Center currently serves approximately 150 clients.

"With the introduction of new drugs, the outlook for these patients has improved," said A. M. Figueroa, M.D., of Zapata. "We now are treating them in their own environment. It is much better for a client to stay with his own family, rather than go to a hospital."

Consultants work hand in hand with mental health workers at the clinics. These workers, many with only a high school education, observe clients frequently, seeing that they take their medications and taking them to the doctor at least once a month.

"I don't believe we have any major mental health problems since the mental health clinic has opened," said Richard Penley, M.D., of Falfurrias. "One of the best things that has happened is the mental health workers' checking on clients at home."

"We can only keep patients for a short period at our hospital here," he added, "so we need the inpatient services of Harlingen. Nevertheless, I believe we have only two or three patients in Harlingen at any one time, and we go weeks without having any at all."

In Laredo, the consulting physician is J. C. Gomez-Rejon, M.D. He spends from two to three hours per day seeing clients at the Laredo Community MHMR Center.

"We found we can deal with many cases without having a psychiatric background. If we encounter difficulty, we can always call the state center in Harlingen and consult with one of the psychiatrists there."

Most consultants have been associated with the outreach centers and their satellites since the start of the program in 1969.

Phillip Joseph, M.D., remembers being asked to serve as the consultant in Alice.

"We find that we are becoming more involved and are spending more time with the clients," said Dr. Joseph. "I spend part of one day per week at the center plus I see center patients in my private practice. These outreach centers are important in keeping clients out of the hospital."

There are limitations on the program, however.

"For instance, children with learning disabilities have no resources to turn to in some of the towns," said Graden Brown, M.D., of Freer. "Transportation to the centers also can be a problem for clients." Additional satellite clinics have been suggested as a way of overcoming this problem.

"These outreach clinics have been successful in preventing readmissions to mental hospitals," said Jorge A. Cardenas, M.D., of Brownsville. "Probably 75 to 80 per cent of the patients coming out of the hospital never have to return. As long as there is good communication between the inpatient staff and outpatient staff the percentage of readmissions is going to be low."

"I know that keeping clients out of the hospital saves money for the state," said N. D. Boyd, M.D., consultant to the Kingsville Mental Health Center.

The consultants were unanimous in voicing support for what the centers are doing for mental health. As for the future, Dr. Cardenas, the only psychiatrist among the doctors working with outreach clinics, said, "From now on, our goal should be prevention of mental illness."

The Rio Grande State Center continues to operate programs that have changed the outlook for mental patients from possible years in a state hospital to life in the community as productive, tax-paying individuals. ■

Joe Woods is information director for Rio Grande State Center for MHMR.

THE FUTURE BEGINS NOW for High-Risk Infants of Teenage Mothers

By Phyllis Levenson

HOUSTON--When Terry, age 14, found out she was pregnant, she dropped out of school. Her son, David, was born two and one-half months early and had to remain in the hospital during the early months of his life. Terry has worried increasingly since David, now six months old, frequently appears ill and doesn't smile or respond when talked to and cuddled.

At first, Terry attributed these problems to her inadequacy as a mother. As time went on, Terry knew she should be doing something to help David, but with her limited financial, educational and emotional resources, she didn't know how to translate her concerns into action. She was stymied further because she had planned to go back to school after David's birth, but now felt she couldn't leave him. The future was looking dismal.

These dilemmas were shown in a study by the MHMR Authority of Harris County (MHMRA) to be all too frequent. As the number of pregnant teenagers in Houston increased, so did the incidence of mental retardation in the infants born to this high-risk group. In addition, many teenage mothers have reduced capacities to offer the care and stimulation vital to their infants' development. A need in the community clearly was delineated.

In response to this need, James Hale, Ph.D., of MHMRA, Pat Shell of the Houston Independent School District and Peggy Smith, Ph.D., of Baylor College of Medicine, worked together to obtain a federal grant from the Office of Education, Bureau of Education for the Handicapped.

As a result, the Demonstration and Training Center for High-Risk and Mentally Retarded Infants of Teenage Mothers (ITAM) was formed to provide services to babies like David who meet the following entry criteria: mother less than 20 years of age at the time of her baby's birth, and (1) a birth weight of five pounds, eight ounces or less, (2) a medical diagnosis of developmental delay, or (3) an APGAR score of 6 or below on the five-minute examination after birth.

The APGAR test is given to each baby delivered at most hospitals. It rates a newborn in five vital sign areas: heart rate, respiratory effort, muscle tone, reflex irritability and color, with scores of 0 (not detectable), 1 (detectable but poor) and 2 (good). These scores are then totaled to get the APGAR score. This test is given one minute after complete birth and again at five minutes after birth. A score of 6 or less indicates that there is a significant degree of delay in vital areas of the infant's development and bears watching.

A child entering ITAM goes through formal and informal assessments to delineate his strengths and needs. Once assess-

ments are complete and evaluated, individual program plans--utilizing a developmental sequence in the areas of motor skills, language, cognition, self-help and socialization--are written by client program coordinators. These plans are used to target specific work areas for mother and infant.

Marlene Hollier, unit director of Infant Programs within MHMRA, reports that although MHMRA currently offers both center- and home-based infant services, the home-based services are the most effective way of meeting the needs of ITAM program participants. Therefore, once an individual program plan has been developed, the client program coordinator spends approximately one and one-half hours weekly working with each infant and mother at their home. Primary emphasis is placed on training the mother to teach her child using the stimulation techniques demonstrated during home visits. Consultations by specialists from other disciplines, including behavior modification and physical therapy, are available in order to ensure optimal training for these high-risk babies.

Follow-up evaluation, including tests monitoring infant progress, are given every six months and an annual physical examination is performed.

Parent services include educational and supportive programs designed to assist the teenage mother in fulfilling her role as a parent. Making the most of the mother's coping abilities and feelings of responsibility to her baby is essential because infant progress seldom will be maintained if the mother fails to assume her role as the foremost teacher of her baby.

Furthermore, mothers such as Terry who feel hopeless or anxious most of the time have little emotional or physical energy left to spend on their babies. This problem is compounded frequently by ambivalent emotions about the child's limitations or handicap.

Home assignments directly involve the mother in her role as primary teacher through work with her baby on weekly assignments and daily recording of infant progress. To help the mother and client program coordinator further assess mother/infant interactions, videotapes of the training sessions are made every six months.

Monthly parent meetings offer another means of meeting the mothers' needs by giving them a chance to meet and share similar experiences. Programs for these meetings, selected by an advisory board of mothers, include everything from exercise sessions to speakers on career opportunities.

Classes in parenting skills are offered three hours weekly to

mothers of infants in the program. These classes, taught by teachers in the Houston Independent School District (HISD), have been approved by the Texas Education Agency for school credit. The curriculum consists of 12 modules designed to meet the needs and diversified learning levels of young mothers. Emphasis throughout is placed on the importance of the mother's feelings and subsequent actions as she relates to her baby's physical and mental health.

Homebound classes are provided by HISD as part of the Special Education Homebound Program. This program offers mothers like Terry an opportunity to keep up with regular

classes, even though obligations to provide care for their babies require them to remain at home.

Counseling and transportation services also are available when the need is indicated.

Through the program's services just described, MHMRA of Harris County is helping give mothers like Terry opportunities to view the future with options and offering children like David chances to learn and develop to the best of their abilities, no matter what their handicapped conditions. ■

Phyllis Levenson, M.P.H., is curriculum specialist for the MHMR Authority of Harris County.



ABOVE LEFT: James Hale, Ph.D., director of mental retardation services for the MHMR Authority of Harris County, and Marlene Hollier, unit director for the same agency, discuss program services with new mother Sharon Woodrow.

ABOVE RIGHT: Minnie Jefferson (center), Houston Independent School District teacher, demonstrates infant feeding techniques to a parenting class.

LEFT: A special program in Houston is helping teenage mothers like Sharon Woodrow provide the best possible future for high-risk infants like her daughter Monique.

Photos by Phyllis Levenson

Innovative Programs at MHMR Regional Center of East Texas

By Carol Paar Thompson

TYLER--You probably wouldn't give the house a second glance. It is a red brick, two-story structure with white trim, resembling the other houses on the busy Tyler street.

But the house is special. Called Decision House, the structure is home to as many as 10 persons who have made a commitment to themselves and who are working to solve their own problems.

Decision House, an adult mental health residential facility of the MHMR Regional Center of East Texas (MHMRR CET), is a project designed to help mentally ill persons regain a hold on life.

"The criteria for admission to Decision House are that a person be able to understand clearly the changes he or she is attempting to make and have the capacity to exert himself or herself to make the changes," said Robert L. Brannan, Ph.D., director of Decision House.

When ex-resident John Blake* entered Decision House in November 1975, his admittance forms revealed a 27-year-old man diagnosed as psychotic and having a personality disorder. Blake's symptoms were those of a person whose movement in the community required restriction or supervision according to a nine-level functioning scale utilized by Decision House personnel.

In and out of Rusk State Hospital several times since age 17, Blake was known to sniff gasoline and burglarize houses in his hometown. After a five-month stay at Decision House, Blake was evaluated by MHMRR CET personnel as coping well socially and vocationally but in need of continuing therapy. When he left at that time, Blake bought a car and was planning to take a job in another state.

Today, said Dr. Brannan, Blake at age 30 is functioning well and no contact with MHMR services is recommended.

Dr. Brannan describes Decision House as a "working, problem-solving community

**Names of clients, except those pictured, are fictitious.*

whose resident members have decided that they no longer have to envision remaining dependent on others for their care." There are five full-time and two part-time staff members, at least one of whom is on duty at all times. There are no live-in houseparents.

Janet George, another ex-resident, entered Decision House in 1975 at the age of 21. On probation for a drug charge, she had attempted to cut off her arms with a butcher knife. Following a 68-day residency, during which she participated in therapy sessions and educational classes, she left with her "vocational and social areas of functioning stabilized, but only because of direct therapeutic intervention." She returned for a 12-day stay in 1976 because of recurring problems, but is described by Dr. Brannan now as a happily married woman, functioning well and with no contact with MHMR services needed.

Dr. Brannan reports 39 different residents received Decision House services

from April 1976 through March 1977. A total of 43 admissions was reported because four persons resided in Decision House during two different periods. The average length of stay for a resident is 65 days.

Of 30 ex-residents, 25 had come from state hospitals, but only three returned to such facilities. Among this group of exes, 74 per cent showed a significant improvement at exit time, 23 per cent remained unchanged and three per cent had regressed, said Dr. Brannan.

The philosophy of Decision House, said the director, is for residents to "rejoin the human race." The facility offers no magic but an opportunity for people to make a commitment to themselves and to work at solving their problems. Decision House personnel work cooperatively with other MHMRR CET mental health personnel located five minutes away in the Bryant Building on Broadway.

Dr. Brannan says he is "pleased but not satisfied" with Decision House progress. "The problems of dealing with personality disorders are exceedingly complex. We assume there is always room for improvement. But the program is increasing in potency and we are better able to work with persons having personality disorders than when we started," he said.

Decision House is one of a variety of MHMRR CET community-based outpatient and inpatient mental health programs serving the residents of Henderson, Rains, Smith, Van Zandt and Wood Counties.

Recent additions to the mental health staff include two alcohol-drug abuse liaison workers who provide continuing contact between alcohol- and drug-abusing state hospital patients and their families.

In addition to psychiatric services for those who also need medication, mental health staffers now provide human services to community residents who are having problems of living. Human services involve counseling by psychologists and social workers for marital, job or personal



A strong supporter of the center's innovations is its energetic executive director, Gary Smith.



Birthday decorations for a fellow housemate at Decision House are readied by residents Helen Phillips, Jeff Pinkston and Kathy Maples.

adjustment problems.

A program for mentally retarded adults which is drawing increasing community interest is the Smith County Adult Day Training Center located in Tyler.

A distinguishing quality of the pre-vocational service is the acceptance of physically handicapped mentally retarded adults into the program.

At present, there are 15 clients, some homebound or in nursing homes, who are working to achieve skills needed for entry into vocational training programs established in the area. Program curriculum includes fundamental social and self-help skills as well as training in communication, personal hygiene and sensory/fine motor coordination development. MHMRRRCET buses provide transportation to and from

the training facility.

Each center client has an individual training program with emphasis on the areas in which he or she needs improvement.

Some concentrate on the development of skills necessary to cope in the community--skills such as asking for help or directions, using the telephone or locating public restrooms.

One of the clients is Katie Lawson who is 46 years old and mentally retarded. When her mother died last year, Lawson's elderly father attempted to locate community assistance for his daughter and came to MHMRRRCET.

Lawson's admittance into the Smith County Adult Day Training Center in November 1976 marked her first experi-

ence away from home. She did not speak and would try to hit, kick or scratch the other clients. She refused to enter the training facility or sit in a chair without assistance.

Now, says director Sallie Evans, Lawson has learned to respond to requests and is trying to eliminate inappropriate behavior with the assistance of staff and the use of behavior modification techniques. She can participate in group activities and gets along better with the other clients.

On her "good days," Lawson will come into the center on her own, will dispose of trash properly and can bring a chair to the table and take a seat. She still does not speak.

When she began the program, Lawson was eating with her hands. She now eats

with a spoon and her table habits are much neater, reports the staff.

Frank Mabry, a homebound client residing in a nursing home, would not make eye-to-eye contact with anyone. He spent little time out of his bed and did not respond to anything happening around him.

When day training center personnel arranged for Mabry to be a client, they recognized his need for one-to-one attention. Since he began receiving program services, reports the staff, Mabry is learning to feed himself and is making progress in responding to other people.

Clients at the facility, who range in age from 20 through 74, enjoy field trips to the fair, public library and restaurants.

Physical therapists sometimes participate in a client evaluation so a more successful program can be planned.

Smith County Adult Day Training Center personnel emphasize to the clients that they are adults, said Evans. "It's important for their self-concepts."

Other mental retardation programs are Happy Center for retarded children, located in Tyler, and infant stimulation programs serving youngsters from birth to

three years of age in all five counties covered by MHMRRRCET.

Happy Center offers recreational, social and learning skills to moderately, severely and profoundly retarded children on a full-time or partial basis.

Infant stimulation workers provide training programs with parent involvement to slow developers both in the home and at MHMRRRCET facilities in the various counties.

In the consultation and education division at MHMRRRCET, prevention is the key to the Consumer Credit Counseling Educational Services of East Texas, Inc., which is believed to be the only service for citizens with credit and debt problems sponsored by a Texas community MHR center.

Consumers in the United States owe \$179 billion in credit, noted Doug Pool, director of the consumer credit service, which is designed to provide sound consumer credit education, assist debtors in returning to solvency and provide alternatives to bankruptcy. The program has been serving East Texas since February 1977.

Pool recalled the case of a husband and

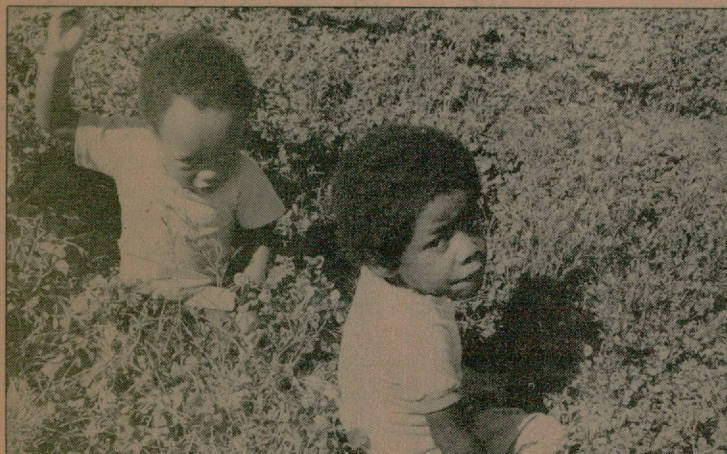
wife who are "self-confessed spendaholics." The couple's monthly payments to credit and loan companies and credit card firms far exceeded their ability to pay, he said. Although they had managed to maintain a good credit rating, the couple sought help at the MHMRRRCET consumer credit counseling service. After counseling, the couple made a decision to ask each creditor for temporary reduced payments, which were granted.

They are currently making reduced payments, slowly eliminating the number of bills owed.

Linda Case, a 28-year-old divorced woman with one child, had a good income and was buying a house. Her payments were not out of line, said Pool, but her monthly living expenses were tremendous.

"When she sat down and filled out the family money management program we gave her," said Pool, "she solved her own problems because she saw where the money was going." By changing child care arrangements and cutting down on such items as meals away from home, Case soon found herself in sound financial shape.

A 27-year-old man, said Pool, discovered he was over-emphasizing his



Happy Center offers recreational, social and learning skills for retarded children like Jimmy Pierson in the wagon, Byron Bailey and Travian Young at the work table and Travian again with Anthony Smith in a field of clover.

attempts to save money and was running short each month. By reducing the amount he put into savings, he solved his financial dilemma.

Another consumer credit client, a college instructor, had adequate income but simply didn't know where his money was going. When he began applying proper principles of money management, his financial crisis also passed.

Pre-credit education is an important aspect of the consumer credit service. By educating students and the public in the proper use of credit, Pool hopes to reduce the number of East Texans needing consumer credit services through preventing the formation of unwise credit habits.

This is not the only innovative program sponsored by the center's consultation and education division. Consider the Langleys, who had just moved to Tyler. Mr. Langley was ill and the family was experiencing financial problems. The Langleys had applied for benefits but it would be a week before they received aid. The Langleys needed food and Mrs. Langley wanted a minister to visit them.

She called the Information Referral

Service for the Aged at 1-800-482-8178 and talked her problems over with Janice Freeman, an information referral worker. Freeman contacted a local agency which agreed to provide the Langleys food and located an area minister who visited the family.

The Langleys are examples of citizens 60 years and older who are aided by the toll-free number in operation from 8 to 5 weekdays, a service sponsored jointly by MHMRR CET and the East Texas Council of Governments since April 1, 1976.

A monthly average of 100 incoming and outgoing follow-up calls are recorded by information and referral workers Freeman and Janice Hunter.

Obtaining transportation to the grocery store or the doctor is a frequent need. Other informational and service requests involve home repairs, legal advice, nutrition, employment, volunteer work and nursing homes. "Sometimes it's just a lonesome person needing somebody to talk to," added Freeman.

One Smith County woman telephoned to say her commode needed repair and she needed the name of a reputable plumber. She later requested information about the

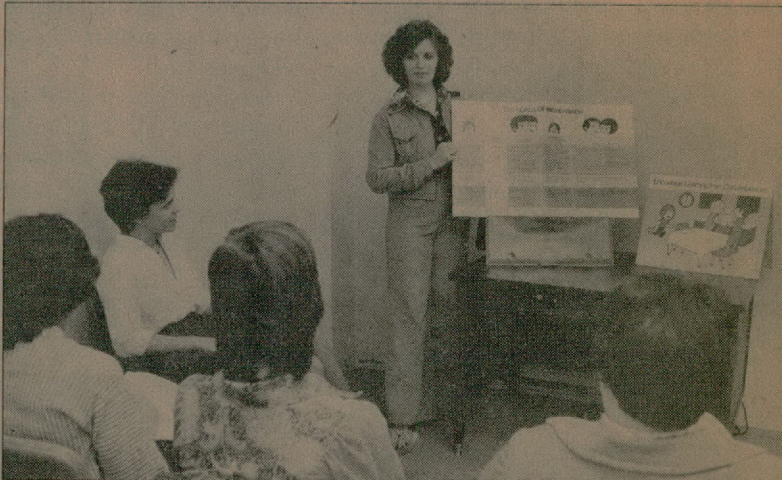
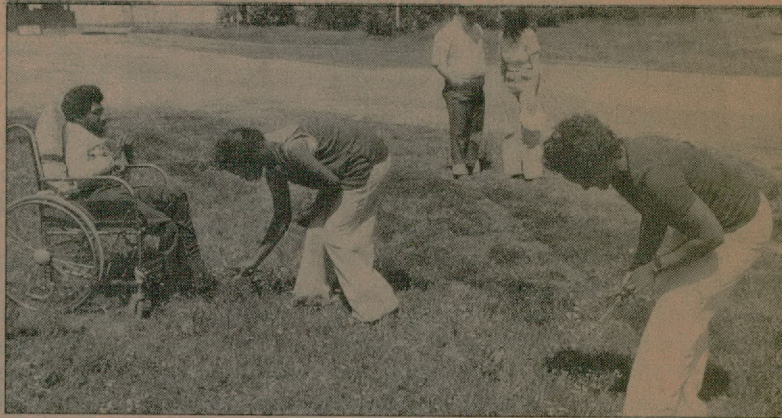
swine flu shot. Another time a couple came to the Tyler office with a legal problem. Both wife and husband were on Social Security and had no money to see an attorney. The couple was referred to a legal aid service, said Freeman, and the woman returned several months later to say everything had been settled.

The counties served include Anderson, Camp, Cherokee, Gregg, Henderson, Harrison, Marion, Panola, Rains, Rusk, Smith, Upshur, Van Zandt and Wood.

"The Information and Referral Service for the Aged is a valuable resource to older East Texans," said Cindy Sill, coordinator of community education for MHMRR CET and supervisor of the service. "The aged persons in the 14 counties can learn about a specific service or all the services available in the home community. We feel that by providing this free information, the older persons in the area can take advantage of the many services that are designed specifically to make their lives easier and more enjoyable." ■

Carol Paar Thompson is public information officer for the MHRM Regional Center of East Texas.

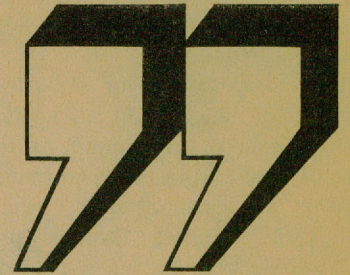
Individual training programs are developed for each client of the Smith County Adult Day Training Center. BELOW: Jean Pierce practices grooming and self-help skills. RIGHT: A spring day provides recreation outdoors for those who wish to pick wildflowers or throw a Frisbee.



ABOVE: Cindy Sill, coordinator of community education, instructs a parent training class.



WHAT HAVE YOU DONE FOR ME LATELY?



By Lore Feldman

HOUSTON--A few weeks ago Cherry Morris, who presently lives at Wichita Falls State Hospital, wrote a letter to TRIMS, the Texas Research Institute of Mental Sciences.

"Can a layman subscribe to your publications?" she asked. "I'm a mental patient fascinated by research."

If she were more assertive, or if she held some of the state's purse strings, Morris might have asked the question differently.

"You people down there," she might have said, "have been doing research on mental illness for 15 years. What have you done and what are you now doing for me?"

It's what lecturers, baffled, call a "good question."

One answer is that Cherry Morris will go home to Fort Worth, instead of staying for years in the hospital, because TRIMS researchers participated in the one "significant breakthrough" worthy of the name in mental health: the discovery and use of medicines that enable emotionally ill people to return to normal or near-normal living.

TRIMS was one of the first institutions in the country to test the effectiveness of the phenothiazines on mental patients. The work, nation- and worldwide, reduced mental hospital populations by half. Since it began here, fewer than five per cent of TRIMS patients have had to leave town to enter a state hospital.

Since then--in laboratories with rats, mice and monkeys and in clinics with human volunteers--TRIMS researchers have tested a horde of new drugs, finding some of them useful, some undesirable, in treatment.

"Mental illness continues to be an enigma," TRIMS Director Joseph C. Schoolar, Ph.D., M.D., says, "because we have few animal models of mental illness."

In that way psychiatric research is different from cancer research, he explains. Malignant tumors can be induced and studied in animals. In another way the areas of research are similar: the basic information of what causes the two diseases is still missing.

In the last 20 years the electrical-chemical connections of nerves in the brain--neurotransmitters, their receptors and the enzymes that fuel the mechanism--have been guessed at, named, traced, synthesized and finally photographed by electron microscopy. New transmitters and the ways they work are being found all the time, since the study of drugs leads back to information about the brain.

In one TRIMS laboratory, scientists are working on the enzymes believed to be associated with neurotransmitters disturbed in schizophrenia and depression. In another, they're culturing white blood cells with major tranquilizers to trace the effect of medications. Having no access to the living brain, the researchers must use biological fluids--blood, urine, sometimes spinal fluid--which a patient can spare without harm.

Monkeys are trained to self-administer cocaine and alcohol and are having their brainwaves tested; young and old mice are getting shots of chlorpromazine to learn whether age changes the drug's action; rabbits are lending blood from their ears to be used in studies of marijuana and long-term effects of methadone.

A bank of instruments, variations and refinements of gas chromatographs, is used by analytical chemists to isolate minute amounts of medications in blood samples. The idea is to relate what happens in a patient's bloodstream to that patient's clinical progress, or standstill, or relapse on a particular drug. If Cherry Morris were

here, she might be glad to give 10 cubic centimeters of her blood to some of these studies, for the good they might do her and others in the future.

The people at TRIMS tend to take a long view of their work. One seemingly esoteric question--for example, about the way cocaine acts on the neurotransmitter dopamine--can occupy a doctoral student of biochemistry every day for three years. The researchers have found a puzzling cycle of tolerance and sensitivity to the drug in monkeys.

Still, James Claghorn, M.D., TRIMS assistant director, makes short shrift of the notion that scientists hope for results only over the long haul. "It's the most outrageous idea I've ever heard," he says. "You don't build a house by waving a wand over it. You pour a foundation, you lay brick by brick, you frame windows, wire and plumb, and you wind up at some point with an edifice you can identify. But even that you don't leave unchanged--you modify, rebuild, add on, whatever."

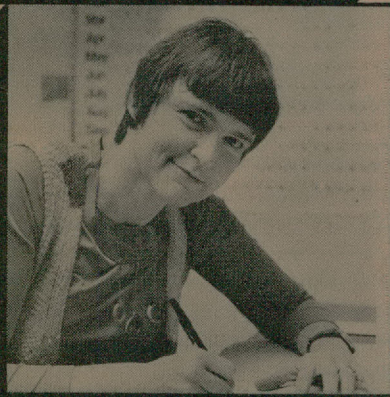
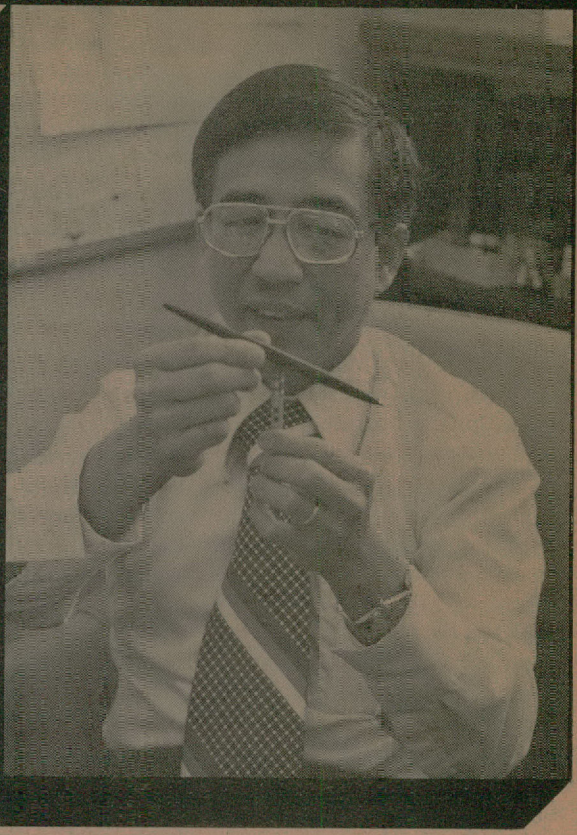
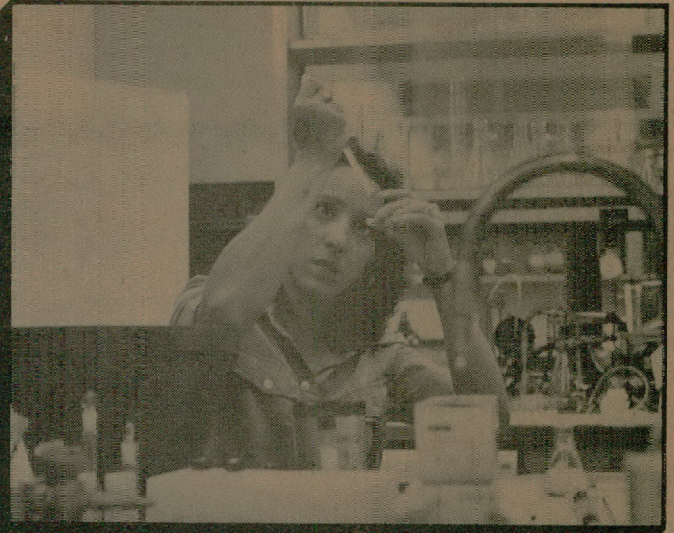
"Research proceeds in about the same fashion. It is at its best an orderly process in which idea is added on to idea until a series of ideas can be constructed as a comprehensive theory, and that's when somebody screams 'Eureka!' and perhaps travels to Stockholm to pick up a Nobel Prize."

There are daily products, Dr. Claghorn says ("small bridges," one of the country's leading psychiatric researchers, Seymour Kety, M.D., calls them). "That is the way discovery takes place. And serendipity happens to those people who have been working vigorously in preparation for it to happen."

TRIMS is the department's major research and training facility and its patient care facility in Houston. Seven thousand patients are treated yearly in TRIMS



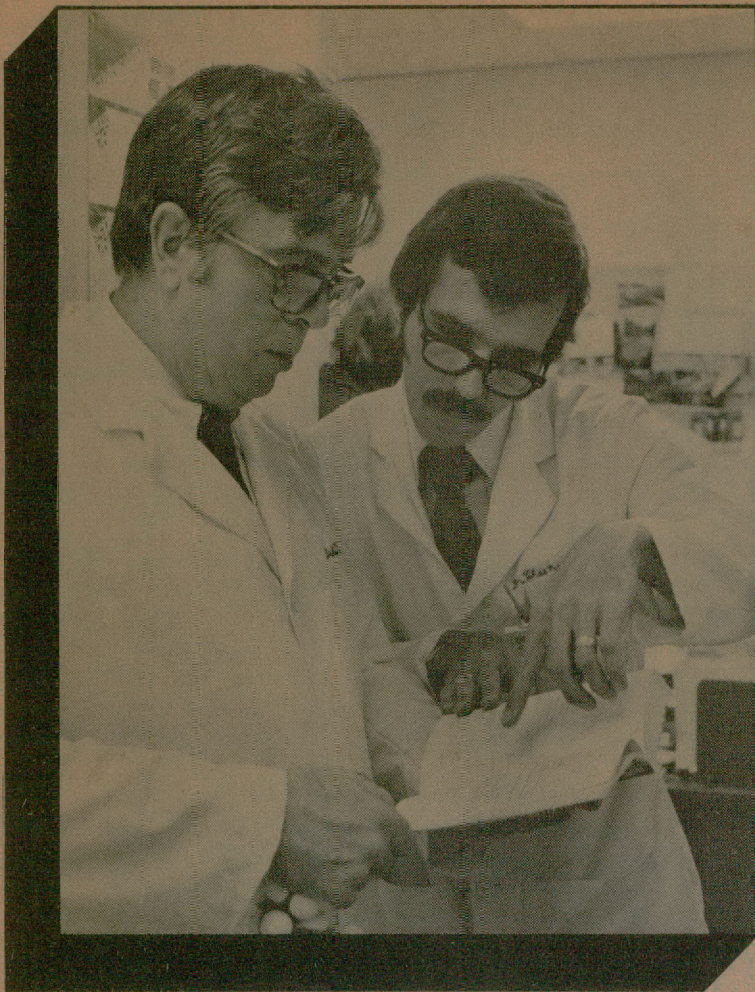
TOP LEFT: Joseph C. Schoolar, Ph.D., M.D., the TRIMS director, flies into his lab coat to go on hospital rounds.
 TOP RIGHT: Research technician Cathy Velasquez prepares blood sample of alcohol-addicted rat. Animals are injected with various drugs to study drugs' influence on alcohol intake.



CENTER LEFT: Kay R. Lewis, M.D., and her developmental services group are researching the state's psychotic retarded population to close a long-standing gulf in services.
 CENTER RIGHT: Beng Ho, Ph.D., demonstrates imbalance of brain amines in schizophrenia, but it's more complicated than this pen and pencil model. Dr. Ho is chief of neurochemistry and neuropharmacology at TRIMS.

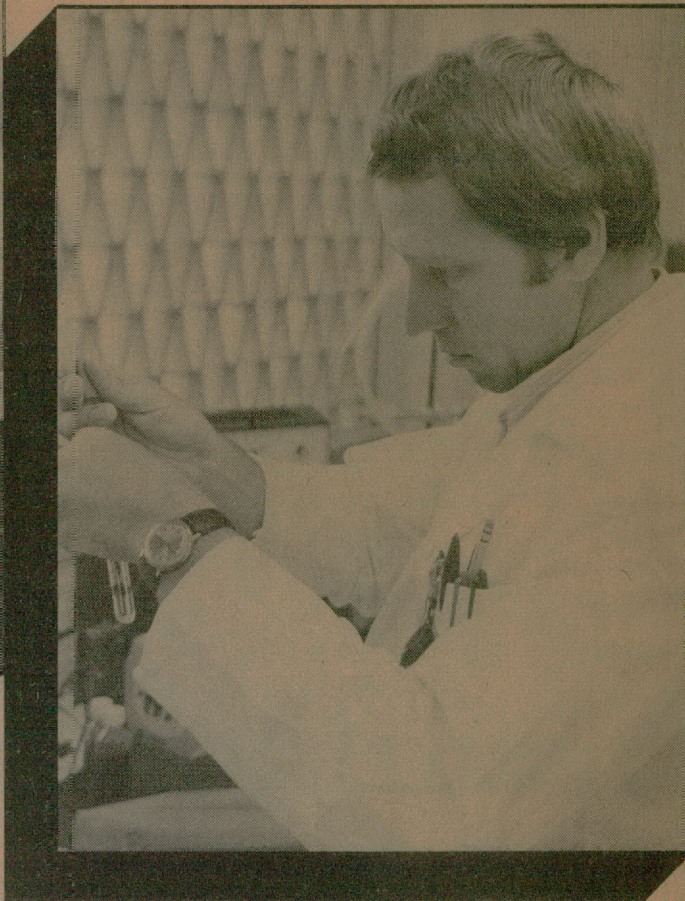


BOTTOM LEFT: Joseph C. Schoolar, Ph.D., M.D., the TRIMS director, joins a case conference in the clinical research ward with (from left to right) nursing director Sondra Stickney and nurses Christine Jones, Emma Purvey and Helen Smith.



ABOVE: David Fenimore, Ph.D., chief of instrumental analysis, (left) and Chester M. Davis, Ph.D., research specialist, answer questions about haloperidol, one of the newer tranquilizers. They've devised methods for detecting one trillionth of a gram of some drugs in blood plasma, seeking clues to patients' reactions to their medicines. Photos by Mike Wallace.

BELOW: Vernon Wiersema, research assistant, analyzes amino acids in research on autism and schizophrenia.



outpatient clinics and hospital.

In the last four years or so, TRIMS has become much more integrated into the state mental health system. The department expects more than in the past, and TRIMS clinicians and scientists give more to other facilities in the department.

Dr. Claghorn led the effort to write the new drug formulary and reduce prescriptions of multiple drugs in all hospitals and schools. The multiphasic health screening clinic he set up at TRIMS is the first in the state system. Dr. Schooler heads the training of all professionals in the system and he is chairman of the Central Office committee responsible for reviewing all research in the TDMHMR system. Edwin Johnstone, M.D., head of outpatient clinics, has a "traveling road show" of videotapes and lectures, teaching state hospital personnel how to use the problem-oriented medical record especially designed for psychiatric patients.

Kay Lewis, M.D., a pediatrician, and

Nancy Pezzia, M.D., a child psychiatrist, visit the nearby state schools at Brenham and Richmond monthly to consult about the schools' difficult cases. They've begun research with clients who are both psychotic and retarded--a group that is shunted between agencies and between hospitals and schools because it presents so many problems. The point of the research is to develop services.

The computerized system of electroencephalography (EEG) developed by Neil Burch, M.D., over the last 15 years has just become part of a telephone tie-up between Brenham State School, TRIMS and the Methodist Hospital in Houston. An EEG of a Brenham resident will be read in Houston while it is being run. Other state schools may join the system later.

Agencies all over Texas are picking up ideas from the geriatric service Charles Gaitz, M.D., developed from a government-funded research and demonstration project 10 years ago. It became a "model"

of comprehensive services to elderly people--with psychiatric and social counseling, inpatient care, information and outreach, and research. Its concept is to use services already available in a community and to create the missing parts.

So TRIMS has gone heavily into the business of initiating services born of research.

Latest and most ambitious is the clinical research ward of 18 beds, next door to the TRIMS general psychiatric ward at Center Pavilion Hospital. Here Richard Hall, M.D., medical director of the research ward and an assistant professor at The University of Texas Medical School at Houston, intends to prove the value of the therapeutic community and to answer the most pressing question in psychiatry: how and why the psychotropic drugs work in an individual patient.

For three months, beginning last September, Dr. Hall assembled and trained staff members. While purchase orders

ground through the mill to make the unit as livable and noninstitutional as possible, researchers designed protocols and got them approved. Drs. Schooler and Hall are joined by all research sections to study pharmacokinetics (how a drug moves through and is distributed in the system) and bioavailability (the active amount the system retains) from each investigator's own field of expertise.

Two physicians at Austin State Hospital (ASH), Janus Garwacki, M.D., and Charles T. McCormick, M.D., have joined the program to study differences in metabolism between chronically and acutely ill schizophrenic patients on two ASH wards. Questions they ask are: Do chronic and acute patients respond differently to the same drug? And if so, are their blood concentrations of the drug different? Do patients who do not respond

to a drug have abnormal breakdown products in blood cells? Can lymphocyte cultures be used to predict the best drug for a patient?

One man in the TRIMS unit has been in and out of mental hospitals for more than 15 years. The high doses of drugs he was taking did nothing but knock him out.

"He came here after being on Thorazine, Stelazine, Prolixin, Artane---and he was almost vegetative," Dr. Hall says. "So we backed up on drugs. His EEG and blood levels showed he was not absorbing the drugs he was getting by the bucketful. He had no therapeutic effects, only side effects."

At the end of this patient's tunnel is the lowest dosage of a drug that will do him some good. The Burch group is testing his brainwaves, his blood plasma is being examined by the instrumental analysis

group led by David Fenimore, Ph.D., amino acid analysis and lymphocyte cultures are being done by Robert Johnson, Ph.D., and blood enzyme studies are being done by Beng Ho, Ph.D., and his group.

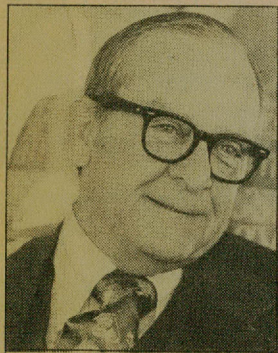
"It's not an economical system to create a clinical ward in which we control all the variables and bring the full pressure of many labs to bear on one patient. And our treatment has to be good for patients to be willing to participate," Dr. Hall says.

On his ward the patients' families participate in treatment, and patients help each other find jobs and apartments when they get out. If visitors bring food, they bring enough for the whole group.

Cherry Morris might like it. ■

Lore Feldman is information director for the Texas Research Institute of Mental Sciences.

A Message from the Chairman of the Board



Edwin R. VanZandt
Chairman, Texas
Board of MHMR

"Our thanks go to you and the board for your sincere interest and help....The hopes and prayers of many are with you, our parents and children."

That, in part, is a letter recently received from a parent.

There is nothing more rewarding to me as a member of the Texas Board of MHMR than to know someone is being assisted in our never-ending efforts to provide the best possible care for the mentally ill and mentally retarded.

It has been my pleasure to have worked with outstanding and dedicated men and women on the board since being sworn in June 20, 1969. There have been differences of opinions on various occasions, but there never has been any question regarding the sincerity and willingness of any member to help those so dependent upon others.

House Bill 3 made it clear that the purpose of the Act is to conserve and restore the mental health among people of this state and to help the mentally retarded live as useful and productive lives as possible.

This mandate has been foremost in the minds of board members and department administrative leaders and others over the years. Tremendous progress has been made; yet much remains to be accomplished. A perfect state of affairs probably never will be reached---but it will not be because of

the lack of interest, enthusiasm or hard work by the many loyal MHMR employees throughout Texas.

It is encouraging that more and more Texans, including our legislators, are taking an active interest in proper care for the mentally ill and mentally retarded. Time was when few persons were knowledgeable, or cared, about the problems of the mentally handicapped unless the illness struck close to home.

Now there are thousands of volunteers who last year logged enough hours of free time to equal that of 445 full-time staff workers. It is estimated that their work and other donations had a value in excess of \$4 million. This alone shows there are many people who care---and who do something about it.

To supply the needs of the handicapped, the department operates eight mental hospitals, 12 schools for the retarded, three human development centers, one comprehensive MHMR center, a research and training facility, and one rehabilitation and recreation center. Many outreach clinics, halfway houses and other program centers spin out from the institutions to add considerably to the total persons benefitting.

Financial aid and other support is given by the department to 27 community MHMR centers scattered throughout Texas. Help is in the reach of everyone.

The department is big and has a big task, but not so large that individual care is forgotten; not so large that it does not remember that each day is a challenge to expand successful programs and initiate innovative programs.

The client is the name of the game---played in earnest. ■

Continuing Education for Nurses

One plus one can add up to much more than two. If training is involved, one and one has possibilities of producing much more.

Representatives of TDMHMR's Medical Services Continuing Education and schools of nursing facilities are observing this beneficial action resulting from 16 pharmacology workshops. The series of four two-day sessions has been planned for San Antonio, Fort Worth, Houston and Big Spring between March 22 and July 20, involving more than 250 nurses from TDMHMR facilities and community MHMR centers.

Each nurse enrolled in the current regional pharmacology workshops shares new knowledge with facility treatment personnel at home and serves as a special expertise resource. This collaboration has an endless ripple effect.

Two things happened to create this training advantage.

In December, 1,712 nurses completed a 150-question self-assessment on medication. The tabulation of the data indicated need for knowledge about specific medications. An



About 60 nurses came to Houston for the first of 16 pharmacology workshops. Photo by Mike Wallace.

evaluation of the data led to a joint effort by a nursing advisory committee of TDMHMR facilities and schools of nursing continuing education departments to design the workshops to include updated information about the most commonly used drugs.

Also, the mandate of Commissioner's Rule 302.04.02 requires each facility to provide ongoing continuing education in pharmacology for staff members whose major responsibility is direct client care. The pharmacology workshops are an assist of Continuing Medical Education to the facilities in supplementing this pharmacology training requirement.

Midway into the workshops the bonus spinoffs include:

- Facility pharmacists have learned more about pharmacology and offered assistance in future continuing education efforts.
- State hospital and state school nurses are exchanging their solutions to care and treatment problems encountered with the mentally ill and mentally retarded clients.
- Knowledge of new drugs and possible interactions gained at the workshops is enabling nurses to be more effective team members in client care conferences.
- Schools of nursing continuing education faculties in Arlington, Big Spring, Houston and San Antonio are meeting a new audience and mutual professional respect has developed.
- Contributions by faculty from The University of Texas Health Science Center Schools of Pharmacy at Austin and San Antonio and Southwestern Medical School Department of Pharmacology in Dallas, as well as Texas Research Institute of Mental Sciences in Houston, add immeasurably to the nurses' skills with drugs.

Robert R. White, director, and Barbara J. Brooks of Medical Services Continuing Education are counting on the spinoffs never ending, and possible re-runs of these successful pharmacology road shows capturing the attention of more nurses in the TDMHMR audience. ■

Conference Calendar

June 15-17 (originally scheduled May 16-18)

Texas Conference on Poverty Alcoholism

Held in Austin
Contact: Gloria de Leon-Ewen
Texas Dept. of Community Affairs
Economic Opportunity Division
P.O. Box 13166, Capitol Sta.
Austin, TX 78711
(512) 475-6601 or STS 822-6601

June 16-18

Southwest Texas Conference on Mental Retardation

Second annual conference
Held in Corpus Christi
Contact: Ajit Kumar Mukherjee, Ph.D.
Corpus Christi State School
P.O. Box 9297
Corpus Christi, TX 78408

June 25-July 1

National Rehabilitation Conference

21st conference
Held in San Francisco
Contact: Guy Herald
P.O. Box V-13
Veterans Administration Hospital
Palo Alto, CA 94304

June 29-July 2

National Society for Autistic Children

Annual meeting and conference
Held in Kissimmee, Florida
Contact: National Society for
Autistic Children
169 Tampa Ave.
Albany, NY 12208

September 14-16

Conference on Issues in Forensic Psychiatry

Held in Tyler
Sponsored by TDMHMR
and others
Contact: Robert C. Arizpe,
Unit Director
Maximum Security Unit
Rusk State Hospital
P.O. Box 318
Rusk, TX 75785

directory of services

This information will help you update your *TDMHMR Directory of Services*, published Fall, 1976. Copies are available upon request from Arts, Graphics and Educational Services, TDMHMR, P.O. Box 12668, Capitol Station, Austin, Tx. 78711.

ADDITIONS

CARTHAGE

MH Clinic
108 N. Shelby (75633)
214-693-7811
Outpatient 8-5 weekdays except till 8 p.m.
Tues. and till 1 p.m. Fri.
MH, MR, alcohol, drug
Children thru adults
Auspices: Sabine Valley Regional
MHMR Center
Serving: Panola County

CROCKETT

Houston County Sheltered Workshop
628 N. Fourth St. (75835)
713-544-8627
Workshop 8-5 weekdays
MR
Adolescents, adults
Auspices: Deep East Texas
Regional MHMR Services
Serving: Houston County

DEL RIO

Del Rio MH Clinic
200 Bridge (78840)
512-775-8814
Outpatient 8-5 Mon., Tues. and Thurs.,
7:15-4:15 Wed. and Fri.
Day activity 9:30-noon Mon. and Thurs.
MH
Children thru adults
Auspices: San Antonio State Hospital
Serving: Val Verde County

GILMER

MH Clinic
301 N. Montgomery (75644)
214-843-5518
Outpatient 8-5 weekdays except till 9 p.m.
Tues. and till 1 p.m. Fri.
MH, MR, alcohol, drug
Children thru adults
Auspices: Sabine Valley
Regional MHMR Center
Serving: Upshur County

HENDERSON

MH Clinic
P.O. Box 1082 (75652)
(113 N. Jackson)
214-657-7526
Outpatient 8-5 weekdays except till 7 p.m.
Tues. and till 3 p.m. Fri.
MH, MR, alcohol, drug
Children thru geriatric
Auspices: Sabine Valley
Regional MHMR Center
Serving: Rusk County

LONGVIEW

Day Activity Program
P.O. Box 1128 (75601)
(323 S. Gum)
214-758-8243
Day treatment 9-3 Mon. thru Thurs.
MH
Adults
Auspices: Sabine Valley
Regional MHMR Center
Serving: Gregg, Harrison, Marion,
Panola, Rusk and Upshur Counties

MARSHALL

Oak Haven Recovery Center
P.O. Box 1224 (75670)
(Route 5)
214-938-5149
Inpatient, residential facility, emergency
care and outpatient 24 hrs.
Alcohol, drug
Adolescents thru geriatric
Auspices: Sabine Valley
Regional MHMR Center
Serving: Gregg, Harrison, Marion,
Panola, Rusk and Upshur Counties

SILSBEE

Hardin County Sheltered Workshop
950 N. Fifth St. (77656)
713-385-7463
Workshop 8-5 weekdays
MR
Adolescents, adults
Auspices: Deep East Texas
Regional MHMR Services
Serving: Hardin County

CHANGES

AMARILLO

Amarillo Hospital District
Change zip to: "79105"

AUSTIN

The Canteen
Change service and hours to:
"Socialization 7:30-9:30 p.m. Wed."

DALLAS

Southeast County Work Training Center
Change name to: "County Southeast
Work Training Center"
Change line 5 to: "Workshop, education
and training 8:30-3 weekdays"
Delete: "Adolescents"
Change line 9 to: "Serving: Dallas County"

GATESVILLE

Central Counties Center Outreach
Add to mail address: "Temple"

HOUSTON

Community Service Center - Area V
Change address to: "6821½ FM 1960"
Infant-Parent Training Center - Area IV
Change address to: "3309 Richmond
(77098)"

LEVELLAND

Lubbock Regional MHMR Center
Change phone number to: "806-894-7840"

LONGVIEW

Sabine Valley MHMR Center
(formerly listed under city of Marshall)
Add to name: "Regional" before "MHMR"
Add to address: "S." before "Gum St."
Add to counties served: "Marion,
Panola, Rusk, Upshur"

PEARLAND

Stand-by Community Service Center
Change name and address to:
"Community Service Center of Northern
Brazoria County, 3322 E. Walnut,
Suite 106"

TULIA

Family Service Center
Change name and address to:
"Tulia Development Center,
105 Hospital Ave. (79088)"

WACO

Centex Guidance Center Halfway House
Change zip to: "76701"

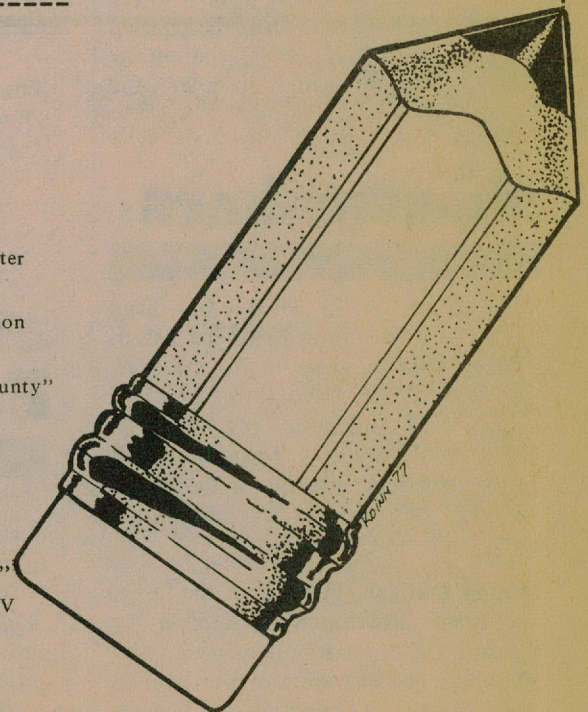
DELETIONS

CROCKETT

Houston County Developmental Center

MARSHALL

Child Development Center



★★★ PEOPLE & PLACES ★★★

Mini-Olympics

The first mini-Olympics at **Rusk State Hospital** were held the week of April 11. Patients and staff of the Social Learning Unit were drafted onto teams: the Mellow Yellows, the Blue Streakers, the Scarlet Starlets and the Orange Crush.

Burt B. Gabbert, Ph.D., director of the unit, noted that morale improved and the energy level among the patients increased. Pre-competition excitement caused some who were characteristically withdrawn to chant slogans and support team rivalry.

The four groups competed in games, races and team events. These included volleyball, paddleboat relays, tug-of-war, mixed mile relays and mixed sprint medleys. Individual events were horse-shoes, ring toss, 50-yard and 220-yard dash, arm wrestling, basketball toss and the tobacco spit.

Four dozen baseball caps were donated, as were trophies and ribbons, and about 300 spectators attended the final afternoon's competition. Based on points awarded for placing in each event, the Orange Crush team won the overall competition. Mark Meng, team captain and language arts teacher on the Social Learning Unit, accepted the trophy.

Newsmakers

★ **Linda S. Davis, Ph.D.**, has been named executive director of the **Brazos Valley MHMR Center** in Bryan, effective June 1. Dr. Davis formerly was a professor of community psychology at Texas A&M University. **Dean Breiting**, acting executive director of the center since last October, has become assistant to the executive director.

★ **Carl Fairman**, director of the Office of Staff Development Services at **Central Office**, has been named Texas Occupational Therapist of the Year by the Texas Occupational Therapy Association.

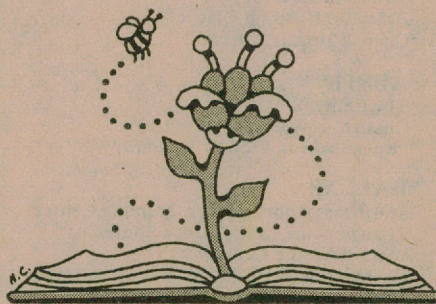
★ **William H. Lowry, Ph.D.**, director of auxiliary programs at **Mexia State School**, is serving as acting superintendent of that facility following the resignation of **Malcolm Lauderdale**. Lauderdale is now director of special projects at the school.

★ **Thelma Ledger**, information director at **San Antonio State Hospital**, won a feature writing award from Alamo Business Communicators for her article "Psychodrama: Acting Out Feelings," which appeared in the Sept./Oct. 1976 issue of **IMPACT**.

★ The appointment of **Aurelio G. Valdez** as director of the **El Paso State Center for Human Development** was approved in April by the Texas Board of MHMR. Valdez had served as acting director of the facility since March 1976.

★ Staff physician **T. J. Williamson, M.D.**, clinical director for **Kerrville State Hospital** for 13 of the 16 years he was associated with the facility, resigned last month.

★ **Raymundo Rodriguez**, executive assistant of the Hogg Foundation for Mental Health in Austin, was the only Texan named to the President's Commission on Mental Health.



Publications

Two publications required for use in department facilities are now available for public distribution.

The *Drug Formulary*, a listing and detailed analysis of the drugs available through facility pharmacies, will be priced under \$10.

Behavior Modification: A Curriculum for Instructors consists of a manual for

implementing the department's training program in behavior modification and is accompanied by 180 slides. Cost is \$8.40 for the manual and \$34.65 for the slides, while the supply lasts.

Orders for the *Behavior Modification* package and inquiries concerning final cost of the *Drug Formulary* should be addressed to:

Harley Pershing, Director
Arts, Graphics and Educational
Services
Texas Dept. of MHMR
P.O. Box 12668, Capitol Station
Austin, TX 78711
512-454-3761 or STS 824-4271

Check or money order payable to Texas Dept. of MHMR must accompany these orders.

Free copies of the *TDMHMR Directory of Services* also are available from the address above.

Did You Know?

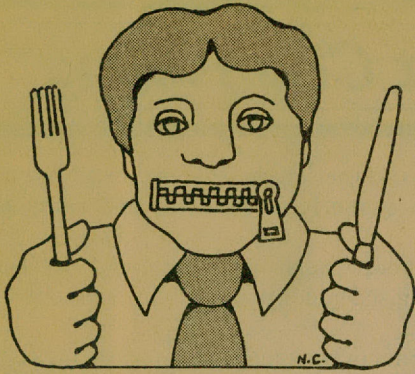
★ The third annual conference on Research with the Profoundly Mentally Retarded was held in California last spring. Topics presented included the effects of exercise, use of a robot for training, effects of tour groups on the nonambulatory, effects of climate, vocal utterances and vocational training.

One Texas representative at the conference was Barbara Ross, coordinator of physical therapy and adapted physical education for non-ambulatory and semiambulatory residents of **Denton State School**.

"Many people, like myself," she writes, "are interested in the profoundly mentally retarded but are unaware there are others. I would like to place more people in touch with this group because the support is encouraging."

"It is possible the conference will be held in Texas next year," she adds. "Anyone with a serious interest in the profoundly mentally retarded will find this an encouraging experience."

There are no dues--only a registration fee to attend the conference. Ross suggests those desiring more information contact Dr. Larry Talkington, 2250 Strong Rd. SE, Salem, OR 97310.



★ Staff members of Edinburg's **Tropical Texas Center for MHMR** could hardly believe it, but 123 people showed up on a cold, rainy night last winter to attend the organizational meeting of **Overeaters Anonymous**, a chapter formed under the sponsorship of the center.

The self-help group believes that compulsive overeating is a progressive illness and one that--like alcoholism--can be arrested.

★ A new cottage complex will be dedicated June 25 at the **El Paso State Center for Human Development**, opening the way for 120 mentally retarded clients of the El Paso area to receive residential services near their home. Delivering the dedicatory address will be State Sen. H. Tati Santiesteban of El Paso. State Rep. James J. Kaster, Jr., of El Paso will participate.

The first residents will be El Paso persons now in state schools for the mentally retarded far from their homes. Later, the cottages will admit retarded citizens from the El Paso area.

One of the cottages is equipped with a solar energy system for heating and cooling. The system will be monitored to determine possible use and cost savings in future construction projects.

★ Randy Loyd, co-editor with Terry W. Peterson of the **Gulf Bend MHMR Center's Journal** in Victoria, notes in a recent issue of the newsletter that community centers have contributed to the reduction in the number of patients in state hospitals since the centers began in Texas in 1965. The state hospital population, for example, has declined from 15,715 on Aug. 31, 1966 to 5,916 on Aug. 31, 1976.

★ **Central Plains Comprehensive Community MHMR Center** in Plainview has broken ground for two group homes scheduled for completion by January 1978. Each 4,000-square-foot home will contain five bedrooms plus houseparent quarters.

★ A new audiovisual aid for teaching the mentally retarded titled "Sexuality and the Mentally Handicapped" has been made available by Stanfield House, P.O. Box 3208, Santa Monica, CA 90403. The material consists of several hundred slides accompanied by teacher guides which enable the instructor to use parts selectively according to his or her discretion and the level of the students' understanding.

Seven sets of slides cover these topics: Parts of the Body, Male Puberty, Female Puberty, Social Behavior, Human Reproduction, Fertility Regulation and Venereal Disease, and Marriage and Parenting. Each set costs \$40 and all seven may be purchased for \$225. The full series can be rented for \$50 for 15 days.

★ The captions for two photographs on page three of the last issue of **IMPACT** incorrectly identified the winner of a **Mexia State School** employee-of-the-month award. Evelyn Thomas, not Evelyn Wright, was the honoree.

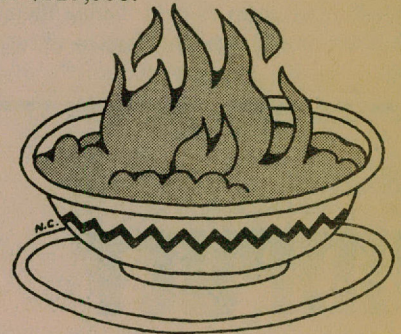
★ "The Heimlich Maneuver," an 11-minute film on a life-saving technique to prevent choking deaths, is available for loan to any department-related employee from Judy Jones, Office of Staff Development Services, Texas Dept. of MHMR, P.O. Box 12668, Capitol Station, Austin, TX 78711. Interested viewers are requested to coordinate their requests through their facility's staff development coordinator. The film also is available as a video-cassette, so specify which format is needed.

★ Two volunteer-sponsored recreation projects have been approved by the Texas Board of MHMR.

A wheelchair park at **Travis State School (TSS)** will extend recreational opportunities for nonambulatory residents and will be available for all residents to enjoy. The landscaped, two-thirds-of-an-acre park area is adjacent to the physical therapy complex.

Upon completion, the TSS Volunteer Services Council will donate the \$50,000 wheelchair park facilities to TDMHMR.

The **Fort Worth State School** Volunteer Services Council members will begin raising necessary funds for the proposed aquatic center at the school. Enclosed for year-round use, the center will include a heated swimming pool, a smaller wading pool and dressing rooms. The cost of the project is estimated to be \$125,000.



★ In a tough battle in the Texas Legislature on April 27, red hot chili beat out watermelon, spaghetti, chitlins and even gumbo to become the official state dish. The vote may have been swayed the night before when chili connoisseur Bob "Yellow Dog" Marsh of San Antonio prepared more than a ton of chili in Austin's Zilker Park for state legislators.

Through the efforts of State Rep. Gerald Hill, more than 100 gallons of the chili were donated that evening to the **Austin State School**.

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Capitol Station, Austin, TX 78711

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TDMHMR To Offer Retirement Counseling

"What will my insurance coverage be when I retire?"

"After combining Social Security and retirement benefits, will I have enough money without working?"

"Could I return to state employment for a few months each year after I retire?"

"What tax exemptions will be allowed when I am 65?"

"I'm 37 now. What should I be saving monthly to supplement my income at retirement? Should I invest in savings bonds, credit union, tax sheltered annuities or what?"

These are typical questions posed by Texas Department of Mental Health and Mental Retardation (TDMHMR) employees when they discuss retirement planning.

Beginning with a pilot program in Austin in August, TDMHMR employees will have the opportunity to attend preretirement training sessions. The first program will be for a selected group of Austin facility employees.

The course will test lessons learned at workshops conducted for the State Agencies Advisory Committee for Preretirement Education. TDMHMR representatives attending were Homer DeGlandon, personnel director; Karen Hood, personnel assistant; and Carter Clopton, specialist in aging with Standards Compliance.

"The semiannual sessions, tentatively planned for all TDMHMR employees who are 45 and over," said Bill E. Reno, chief of personnel and training, "will be practical and answer these vital questions for staff members.

"Training will be on duty time. We consider it positive mental health for the employee and family members, and that's the business we're in," Reno added.

"We know there are 1,071 TDMHMR employees in the Austin area, 50 years and older," said Hood, "and we hope they find this training to be a bonus."

"It's not an attempt to run anyone off," added Clopton, "because we want to help them understand what the benefits will be as well as discover the challenges retirement holds."

The program will harvest gains made by long-time advocates of early retirement plans: commercial, industrial and educational organizations.

"Their expertise, both people and material," explained DeGlandon, "will be utilized in designing training appropriate for our employees."

San Angelo Center employees approaching retirement already are profiting from a preretirement counseling session arranged in March by Lonnie Willis, personnel officer.

In response to such evaluations as "should be required beginning at age 45," "long overdue" and "everyone should attend," Willis is scheduling the sessions quarterly to reach in the future employees as young as 45.

An employee since July 1953, Richard Formby, MHMR supervisor, acknowledged, "The session brought out some things I had not thought about."

"Now I can tell where I stand in regard to my retirement benefits," said Reva Bohne, MHMR supervisor and a state employee since February 1950, "and there was an opportunity to ask questions."

It is this response that confirms the belief of some that retirement planning should begin the day of employment. It may soon be true at TDMHMR. ■

Suggestions for the Preretirement Planning Training are welcome. Submit them to: Chief of Personnel and Training, TDMHMR, P.O. Box 12668, Capitol Station, Austin, TX 78711.



P.O. Box 12668, Capitol Station
Austin, Texas 78711

IMPACT

Vol. VII, No. 1

May/June 1977

A report about the programs, progress and people of the Texas Department of Mental Health and Mental Retardation. Contributions welcome.

Interested citizens may be added to the mailing list. Enclose full address label when notifying of change of address.

Kenneth D. Gaver, M.D., Commissioner

Arts, Graphics and Educational Services:

Harley Pershing, Director

Hazel Casler, Coordinator

Judy Osborn, Editor

Nancy Collins, Graphics Coordinator

Helen Koinm, Illustrator

Jo Ann Hammer, Photographer

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