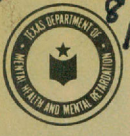
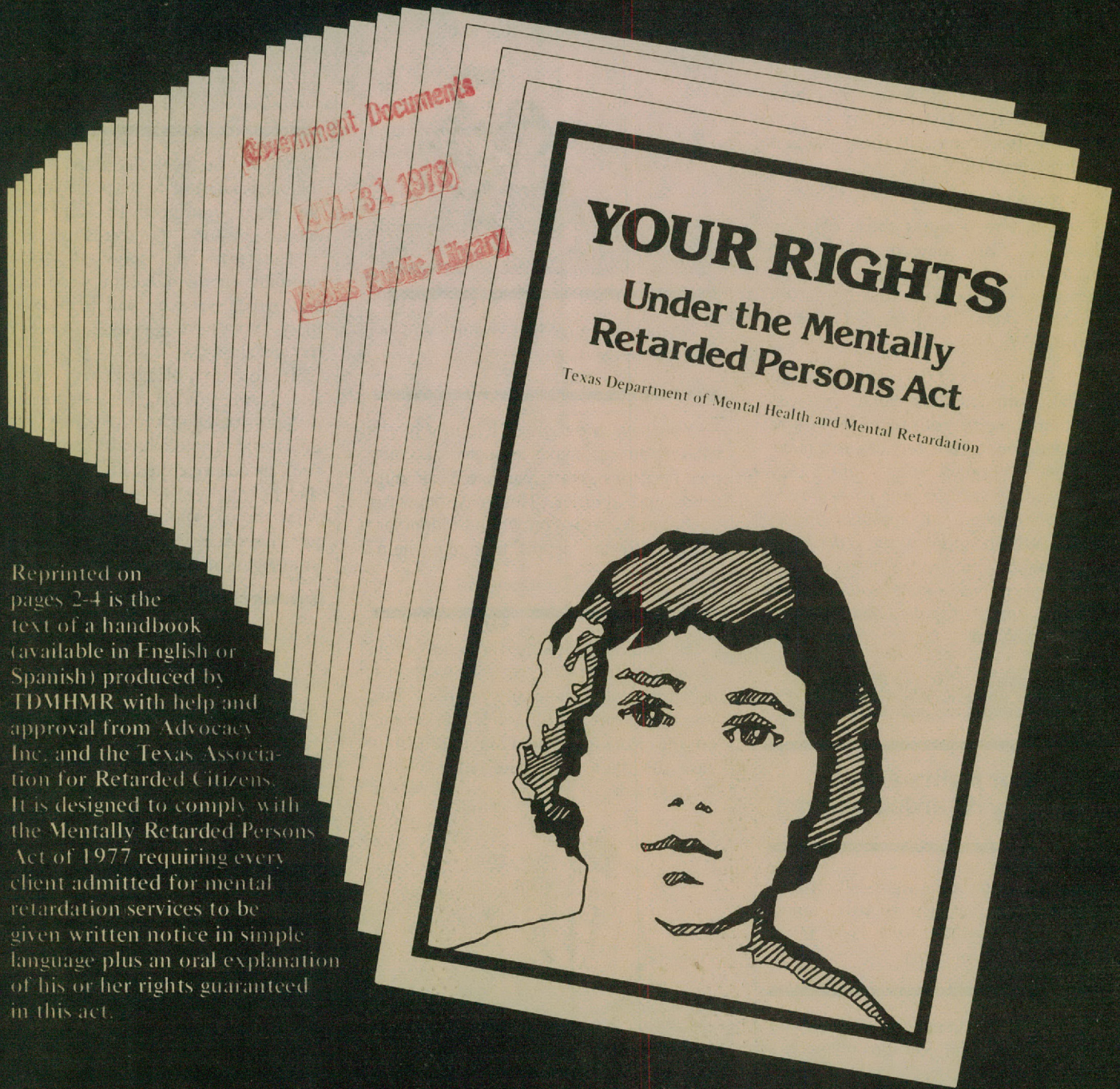


M1000.6
I m 7
8/1

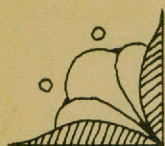


IMPACT

Vol. VIII, No. 1 • Texas Department of Mental Health and Mental Retardation • May/June 1978



Reprinted on pages 2-4 is the text of a handbook (available in English or Spanish) produced by TDMHMR with help and approval from Advocacy Inc. and the Texas Association for Retarded Citizens. It is designed to comply with the Mentally Retarded Persons Act of 1977 requiring every client admitted for mental retardation services to be given written notice in simple language plus an oral explanation of his or her rights guaranteed in this act.



YOUR RIGHTS



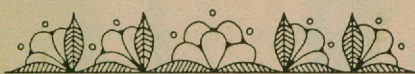
Under the Mentally Retarded Persons Act

You probably know what rules are. Rules tell us what we can and cannot do. Rights are special rules that are written in the law to try to make sure that everyone is treated fairly.

You have the right to be told what your rights are when you are accepted here for mental retardation services. Some of these rights are yours just because you live in Texas. You have more rights if you receive any services from this place and still more rights if you live here.

You can read about those rights in this book. Also, someone will talk to you about your rights and answer your questions. This book is based on a law called the Mentally Retarded Persons Act of 1977.

When you read this book, you will find that some of your rights let you be informed about your services and make decisions about your life. *But remember: if you are not 18 years old yet, your parent or guardian makes those decisions and has the right to be informed. If you are 18 years old or older, you can make your own decisions unless a judge in court has named a guardian for you.*



Your rights as a mentally retarded person:

You have the same rights all citizens have (such as the right to vote) unless some of your rights have been taken away by a judge in court.

If you are 18 years old or older, you can make your own decisions unless you have a guardian. Before a guardian is

named to make decisions for you, you will have a hearing in court with a judge. You can have a lawyer to protect your rights and help you tell your side of the story. If you don't have enough money for a lawyer, the court may pay for one to help you. Only a judge can give you a guardian. That guardian may be your parent or it may be another adult.



No one has the right to hurt you or take advantage of you.

You have the right to live in a place where you can make as many of your own decisions as possible, based on your needs and abilities. This may be with your family, with your friends, alone or where there are people trained to help you.

If you are looking for a job, you cannot be denied the right to work just because you are mentally retarded. But you might not get the job if you cannot do the work. If you have a job, you have the right to be paid fairly for the work you do.



No one has the right to refuse to sell or rent you a place to live just because you are mentally retarded.

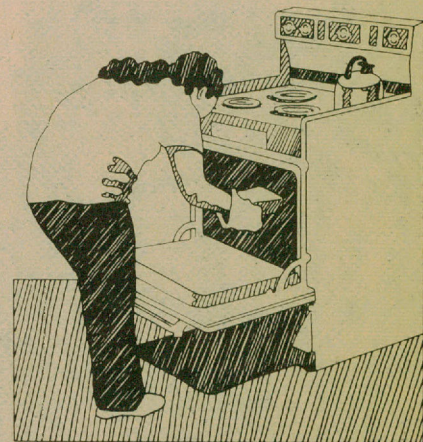


Before you receive services, you must take a special test to see what you know and what you need to learn. If you cannot pay for it, the test is free.

The test will show if you are mentally retarded, if you need services and which services will help you the most. You have the right to see what the test shows.

If you do not agree with what the test shows, you can be tested again by different people. Another thing you can do is ask the people who gave the test for a special meeting called a hearing. At the hearing you can complain about what the test shows about you or about which services you need. (See **What are your rights at a hearing?**)

You have the right to receive services that meet your needs and help you get along better in life.



You have the right to public support for schooling and training. If you are between ages 3 and 21, that education is free. It doesn't matter how mentally retarded you are or whether you have other handicaps. Depending on where you live and what you need, this education may be provided at a public school, a state school, a community center or some other place.



Your extra rights if you receive any services here:

You have the right to live where you can have treatment and services that are best for your needs and abilities.

No one has the right to hurt you or ignore your needs.

You have the right to your own plan for services that meet your needs. You have the right to help decide what your plan will be.

You will be told how well your plan is working. Sometimes you can choose from many services that are good for you.

If you live here, the staff must look over your plan once every year. If you do not live here, the staff must look over your plan four times every year. You have the right to be tested again to see how you are doing.



If you do not live here, you can decide to stop using services at any time.

If the person in charge will not let you keep coming for services, you have the right to ask for a special meeting

called a hearing. At the hearing you can tell why you want the services. (See **What are your rights at a hearing?**)

If you leave a place run by the *Texas Department of Mental Health and Mental Retardation*, the department must offer or try to find services that meet your needs. You and the department must agree on these services.

You don't have to take more medicine than you need. Any medicine you take must be ordered by a doctor.

You have the right to speak up if you do not like your services or if you think someone is taking away your rights. You can tell a staff member or you can tell someone on the Public Responsibility Committee. Or you can ask someone to do this for you. (See **What is the Public Responsibility Committee?**)

Records about you and your services here are private, even after you stop coming for services. You have the right to see your records unless the person in charge of your program says in writing that it would not be good for you. If you are under age 18 and have a parent or if you have a guardian, they always can see your records. Others cannot see your records unless you agree in writing or unless the law says it is all right.



Your extra rights if you live here:

You have the right to medical and dental care when you need it. You must agree to any operation before it is done. No one can give you dangerous treatments or experiment with you.

You have the right to live where it is clean, pleasant and safe. You may have your own things except for those that are against the rules.

You have the right to use the mail and the telephone and to visit with your

family and friends. But you have to go by the rules of the place where you live.



You have the right to ask to move to another place or to leave where you are living. If you are told you can't go, you have the right to tell your story at a special meeting called a hearing with the people who told you that you couldn't go. (See **What are your rights at a hearing?**)

You have the right to disagree if you are told to move to another place or told to leave the place where you are living. You can tell your side of the story at a hearing with the people who want you to move or leave. (See **What are your rights at a hearing?**)

No matter how old you are, your parent or guardian must be told before you move to another place to live.

If you live here because you asked to, you can leave within four days after you ask to go unless the person in charge thinks it would be dangerous for you to go. If the person in charge thinks you should stay, that person must ask a judge to have a hearing to see if you must stay. The judge also might make you stay until your hearing is held.

Your parent or guardian may have asked to have you live here before you were 18. However, when you become 18 you have to decide for yourself if you want to live here. You must be able to understand what your decision means. If you do not want to stay, the person in charge must let you go or ask a judge to have a hearing to see if you must stay.

You can have a lawyer at a hearing to protect your rights and to help you tell your side of the story. If you don't have enough money for a lawyer, the court will pay for one to help you.

Your rights as a parent or guardian:

If you are the parent of a mentally retarded person under age 18 or if you are the guardian of a mentally retarded person, you have rights, too. Some of these rights are:

- To be told what your rights are when your child or ward is accepted for mental retardation services.
- To help decide what the plan for services will be.
- Sometimes to choose from many services that are good.
- To be told how well the plan is working.
- To ask that your child or ward be allowed to leave the place where he or she lives. This may involve a hearing if the person in charge thinks your child or ward should stay.
- To decide that your child or ward stop using nonresidential services at any time.
- To have your child or ward be tested again if you do not agree with what the first test shows.

Remember, you also have the right to a hearing if you don't like the services or placement for your child or ward. (See **What are your rights at a hearing?**)



When can you have a hearing?

You have the right to ask for a special meeting called a hearing if:

1. You do not agree with what the special test says about you or about the services you need.
2. The person in charge wants you to move to another place to live or leave the place where you are living.
3. The person in charge will not let you move to another place to live or leave the place where you are living.

4. The person in charge will not let you keep coming for services.

If you ask for a hearing, the person in charge must give you one. Your parent (if you are under age 18) or your guardian also has the right to ask for a hearing.

What are your rights at a hearing?

You have the right to be at the hearing and to say what you want. You have the right to have other people at the hearing to help you and to speak up for what you want. If you do not agree with what is decided at this hearing, you have the right to tell your story to a judge at a hearing in court. Your parent (if you are under age 18) or your guardian also has these rights.



What is the Public Responsibility Committee?

You have the right to tell the Public Responsibility Committee if you do not like your services or if you think someone is taking away your rights. The committee is made up of people who care about you and will listen to your story. The members of the committee are volunteers. They do not work for the place where you live or for the place where you come for services. Their job is to look into your story and to see what can be done about it. They may tell your story to others who can help you.

You have the right to tell your story to the Public Responsibility Committee or you can have someone else do it. Your parents, guardian or friends can also speak up to the committee for you.

You can reach the Public Responsibility Committee at:

Others who can help you with your rights are:

Advocacy Inc., 5555 N. Lamar, Suite K-109, Austin, TX 78751, phone 512-475-5543 or toll-free 1-800-252-9108.

Parent Association for the Retarded of Texas, 8301 Franwood, Austin, TX 78758, phone 512-453-7145.

Texas Association for Retarded Citizens, 833 Houston, Austin, TX 78756, phone 512-454-6694.

You might also call or write your local legal aid society or the special education director of your school district.



Copyright © 1978 Texas Department of Mental Health and Mental Retardation. All rights reserved.

The information in this book is based on the law. For a complete text of the rights of the mentally retarded citizens of Texas, see the Mentally Retarded Persons Act of 1977, Article 5547-300, V.T.C.S.

The TDMHMR Community Services Division is funding a year's supply of handbooks for community MHMR centers based on orders from their information directors. Other TDMHMR facility heads are ordering handbooks at cost through regular supply channels.

Handbooks are available to the public at 25 cents each, with a minimum order of four. Add five per cent sales tax unless ordered by a tax-exempt organization. Specify English or Spanish language version. Make checks payable to "Cashier, Texas Dept. of MHMR," and mail to Cashier, Texas Dept. of MHMR, P.O. Box 12668, Capitol Station, Austin, TX 78711.

Learning Can Be Fun

By Pat Sprows

*Put your toes down into your socks.
Put your toes down into your socks.
Wiggle your toes till they go on in.
Down into your socks.*

FORT WORTH--These lyrics are sung to the sing-song tune of a children's nursery song. It will never make the charts in the music world, but it's a hit with the young clients on the Starcross quadrant at Fort Worth State School (FWSS).

When music therapist Margie Reesing or direct care staff compose a song, it means the children they work with are on their way to learning a new skill--a skill as basic as putting on a sock. And there is a discovery. Learning can be fun.

That's an important part of the school's education project known as I.M.P.A.C.T. Recently funded by a Title I grant from the Texas Education Agency, I.M.P.A.C.T. is an acronym for Increased Motivation Provided through the Arts Combined with Training.

There is nothing new about the therapeutic effects of the creative arts for the handicapped. What is an innovation, is using the creative arts to teach specific skills, such as reading, grasping and lifting. Through music, puppetry, drama, crafts and painting, targeted goals on the behavioral characteristics progression (BCP) strands are being achieved.

To practice closing unresponsive fingers can be boring and even painful. Music teacher Virginia Doffort gives Britton Bryan the opportunity to play with the bell choir. That makes it worthwhile. Now his fingers are flexing to grasp the bell mallet. Converting that skill to grasping a spoon to be able to feed himself eventually is a logical result.

To see the potential for success through such activities, all you have to do is look at the joy expressed in David Millett's eyes when he masters foot painting with the help of Ora Rhodes. David is in a wheelchair, and the foot painting encourages leg movement.

There's a bonus to that, too. When a newspaper reporter and photographer visited the class to do a feature story, David wanted to be at his best. The photographer asked David to lift his leg higher, so he could get the picture he wanted. Rhodes spoke up to explain he was unable to do that, just as David, with a glint in his eye and a set to his jaw, raised the leg higher than he ever had. That's motivation.

If you're multiply-handicapped, you have to see, feel, hear, smell and taste to explore your environment. All your functioning senses must be brought into play.

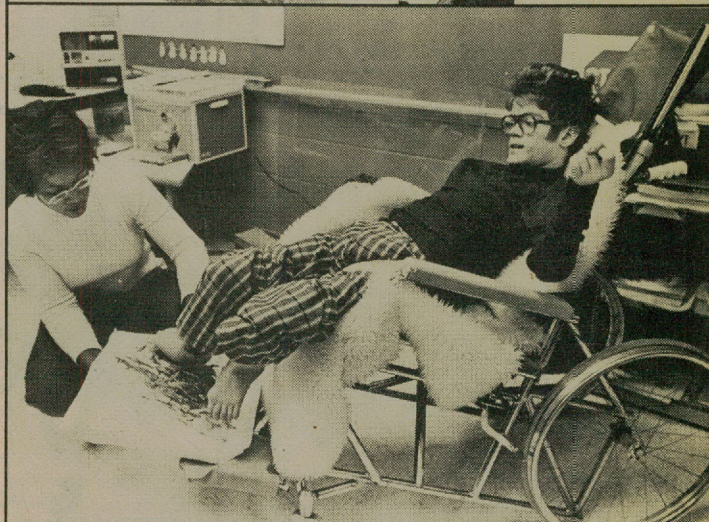
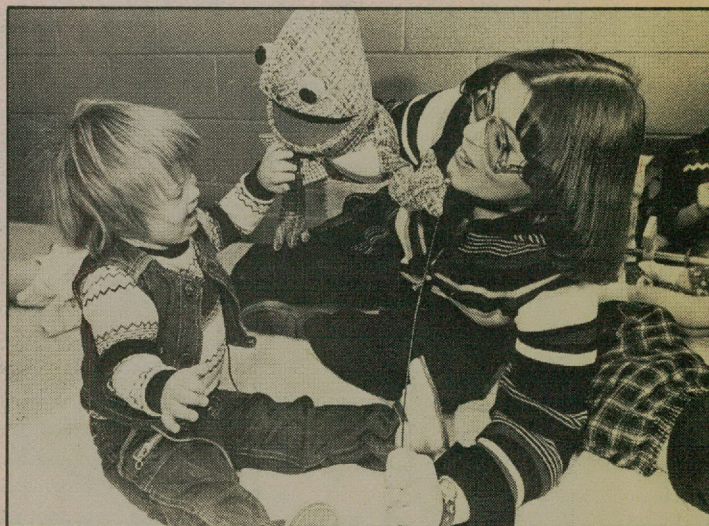
That's why chocolate pudding sometimes replaces watercolors when painting. Then the tongue or the nose replace paintbrushes. They're good tools to have if you can't move your hands or your feet. They also stimulate several senses.

Activities such as these encourage interacting with the environment. Interaction is the byword for drama activities. That's not necessarily drama with a stage, makeup and footlights. It simply may be a hand puppet lovingly controlled by teacher Ardia Kentfield as she coaxes responses from a young, lethargic client.

Ellen Uhler, Ph.D., director of special education, stresses that learning must be lasting and conducive to life sustaining skills and independence. For that kind of learning to occur, she says, "It must be stimulated in such a way that the child wants to participate, is motivated to try again and again and is not placed in a situation where he is right or wrong."

Through I.M.P.A.C.T. the education staff feels that kind of learning is occurring. And while learning, the clients also are discovering new ways to express themselves through the arts. That's an opportunity most of us take for granted. ■

Pat Sprows is director of communication services for Fort Worth State School.




ABOVE: "How many fingers do you have?" asks puppet Freddy Feelgood (alias special education teacher Ardia Kentfield). Amy Hansford gives her answer by showing the puppet her hand. BELOW: David Millett proves to his special education teacher, Ora Rhodes, that finger paints don't have to be applied with the hands. Photos by Gene Gordon, courtesy of the Fort Worth Star-Telegram.

Honored Employees

Each year the Mental Health Association invites psychiatric hospitals in Texas to honor their outstanding direct care workers during May, Mental Health Month. Featured here are those employed by participating TDMHMR hospitals.


Other honorees throughout the state are Marcella Bates, Memorial Medical Center, Corpus Christi; DeLover Burns, Belhaven Hospital, Houston; John Dooley, Houston International Hospital, Houston; Louise Hartin, Pasadena Bayshore Hospital, Pasadena; Wade Ogilvie, Ben Taub General Hospital, Houston; and Frankie Rogers, Harris County Psychiatric Hospital, Houston.



Diane Hillner
Wichita Falls State Hospital

During a time when good, young employees in the mental health field often move on to other jobs for higher salaries, Diane Hillner has chosen to stay at Wichita Falls State Hospital because she is dedicated to her profession and enjoys her work.


Not only does she have the firmness and compassion needed to deal with mentally ill patients, but she goes out of her way to keep them happy and active. Her hobbies of macrame and ceramics have brightened the dormitory, and her initiative in recycling aluminum cans helped pay for the necessary supplies.



Marjorie Kersting
Vernon Center

Along with her regular duties of helping geriatric patients at Vernon Center, Marjorie Kersting encourages them in personal hygiene, holds reality orientation classes each day and conducts a "fun group" once a week. She also finds time to mend their clothing, take them to the canteen for shopping and visit with them.

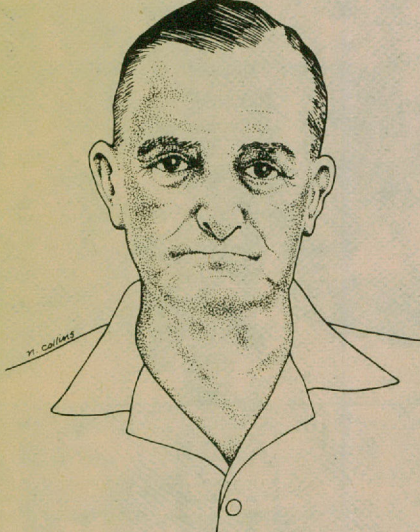
For many years she volunteered her time at night working with handicapped youngsters on another unit. She taught them simple homemaking skills and personal hygiene and wrote letters for them or helped them with their writing. She was named the facility's Employee Volunteer of the Year in 1975 in recognition of her services.



Katherine McClintock
Big Spring State Hospital

An employee of Big Spring State Hospital since 1971, Katherine McClintock is assigned to the Multiple Disabilities Unit. Even though the unit is considered a stressful work situation, McClintock is calm under the most trying conditions. Her interest and concern are evident in her interactions with both patients and staff members. She exhibits a kindness and caring that are therapeutic for the patients.

Coworkers agree that McClintock does more than her share of the workload without voicing a complaint. Staff members enjoy working with her and find her an excellent teacher to train new employees.



John Cockerham
Terrell State Hospital

Coworkers describe John Cockerham as the type of man who does more than his share and who really cares about the patients. An employee of Terrell State Hospital (TSH) since 1970, Cockerham (and his wife, who is also a TSH employee) open their home on holidays to patients who have nowhere else to go.

Presently working as the only male staff member on a female admission ward, Cockerham serves as a role model for many of the women there who have had negative experiences with men. He's a daily reminder that men also can be friends and helpers.

Liz Bradley
Texas Research Institute
of Mental Sciences



Because she likes to be involved with people, Liz Bradley joined Houston's Texas Research Institute of Mental Sciences in 1961. She is one of 12 psychiatric aides employed on the 60-bed clinical research unit. Before she transferred to that unit, she helped prepare meals, worked as laboratory assistant in psychopharmacology, was assistant to the nursing supervisor of the drug and alcohol abuse research section and helped in purchasing.

She is called the "moving spirit" behind every outing, picnic and party on the unit. She realizes the importance of patient input and doesn't make plans without their help.

Helga Riccomini
San Antonio State Hospital

Born in Germany, Helga Riccomini has worked at San Antonio State Hospital since 1973. She is considered an energetic and enthusiastic person who utilizes her initiative and creativity in performing her duties.

Staff members say that she is conscientious, congenial and therapeutic with patients. Among the many topics she has studied in the hospital's required training for direct care workers are prevention of client abuse, personality structure and development, care of the diabetic patient, work station management, side effects of psychotropic medications, cardio-pulmonary resuscitation, medical abbreviations and group dynamics.



James Crippin
Rusk State Hospital



First employed at Rusk State Hospital in 1973 as a canteen worker, James Crippin is now a psychiatric security technician in charge of his shift at the Maximum Security Unit. His 181 hours of required training covered such topics as self-defense, basic nursing skills, security measures and medication administration.

He sets an excellent example for the patients and other employees, showing great empathy and a readiness to help.

A Friend In Need

The parents of an autistic teenager were dismayed that the public school refused to teach their son because of his behavior problems. Advocacy Inc. represented the parents at a hearing which resulted in the school agreeing to train a teacher, provide an appropriate classroom and develop an individual plan of education for the boy.

What is Advocacy Inc.? It's a nonprofit corporation funded by the U.S. Department of Health, Education and Welfare to provide advocacy and protection services for the developmentally disabled in Texas, a category which includes about 400,000 persons with mental retardation, autism, cerebral palsy or epilepsy. Federal legislation in 1975 required each state to establish such a system independent of any agency that provided direct services. After a year of planning by the State Bar of Texas, Advocacy Inc. opened for business in Austin Oct. 1.

"Many people equate 'advocacy' with 'adversary,'" Dayle Bebee, executive director of Advocacy Inc., explains. "We have tried to give advocacy a broad, positive meaning.

"We feel it is much more important to let people know what their rights are and to educate them about the law. Our emphasis is on negotiation; litigation is a last resort."

Three areas of concentration for the agency's five attorneys are education and training (informing the public about new laws), systems advocacy (influencing social and political systems, especially state service and regulatory agencies) and legal and protective advocacy (responding directly to the legal rights problems of individuals).

Following each education and training presentation comes an abrupt rise in the number of calls for help--questions about guardianship, problems with rights to education, requests for negotiation, inquiries that call for information and referral.

This consistent rise in the number of persons seeking help, especially since a toll-free line (1-800-252-9108) was installed in December, points to the increasing importance of advocacy and protection for the rights of the developmentally disabled. ■

J.O.

AN OPTION FOR EL PASO

EL PASO--A motel room magazine for travelers who visit El Paso proclaims, with tongue in cheek, that this city is the home of Kim Novak's horse, Raquel Welch's stepfather and John Wilkes Booth's great-great-grandnephew.

An even lesser known fact is that El Paso is now home for Maria, who is 34 years old and mentally retarded. She rarely saw her family during the seven years she lived at Austin State School, the 14 years she spent at Mexia State School or the six years she was at Lubbock State School.

Then the El Paso State Center for Human Development opened in her hometown on the far western edge of the state. Maria came home to an attractive cottage on the state center campus, and now she often visits her elderly mother who lives just across the street.

El Paso is also home for Sammy, a mentally retarded state center client who joined the day activity program last October. Sammy had led a life so sheltered it was almost beyond belief. Before his aging mother sought help from the state center, he never left his home except for a single visit to a physician. He never even went into his back yard. And Sammy was nearly 40 years old. Understandably, he was fearful of new situations.

But today, only a few months later, Sammy rides daily to the state center on a bus that picks him up at his home. Thanks largely to the efforts of therapist technician Virginia Dominguez, Sammy is learning to buckle his belt, brush his teeth and navigate hallways without a walker.

"This center offers an option to the people of El Paso," sums up center director Aurelio G. (Ray) Valdez. "In the past if you found yourself severely mentally ill or mentally retarded, you also found yourself hundreds of miles from home."

That's because the nearest state hospital is in Big Spring, 333 miles away. The closest state schools are at Abilene, 440 miles away, and Lubbock, 345 miles away.

The need was enormous for a local facility to help the mentally retarded and the mentally ill too disabled for outpatient care at the El Paso Community MHMR Center but not in need of long-term residence at a state school or hospital.

The state center's first clients were accepted in March 1975. For two years the programs for the mentally ill consisted of short-term residential treatment for 24 clients. With construction of eight 15-bed cottages in 1977, three of which are devoted to mental health services, 42 clients can be accommodated in the program.

Gary S. Zimmerman, Ph.D., is the psychologist who interviews, tests, diagnoses and follows up progress of the mental health clients. Their stays are generally short, averaging 55 days. Those in need of long-term care still are referred to Big Spring State Hospital (BSSH).

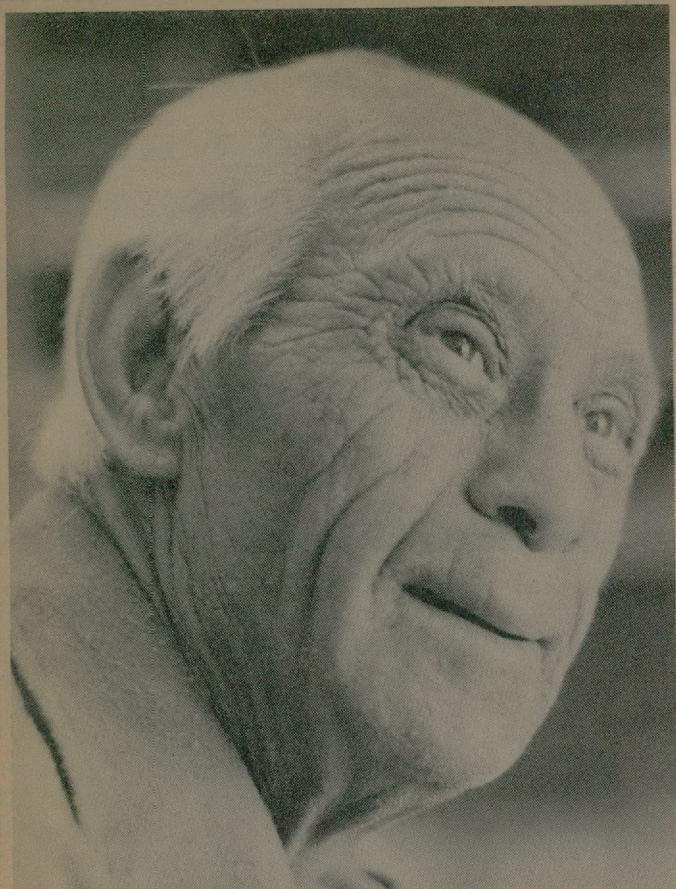
Prospective clients in need of commitment either to BSSH, the state center or elsewhere find support in the decisions of County Judge T. Udell Moore. His understanding of mental illness and the state center as a resource available to El Paso County citizens has contributed to a 50 per cent decline in the admissions rate to BSSH from the six-county area served by the state center.

Services for the mentally retarded at first included only day activity for community residents and respite care for children of vacationing or temporarily disabled families. The respite care service officially was limited to a 90-day period, but it often was extended for clients whose family situations did not permit their return home but whose names had not yet risen to the top of the state school waiting list. The need for residential services in El Paso became more apparent.

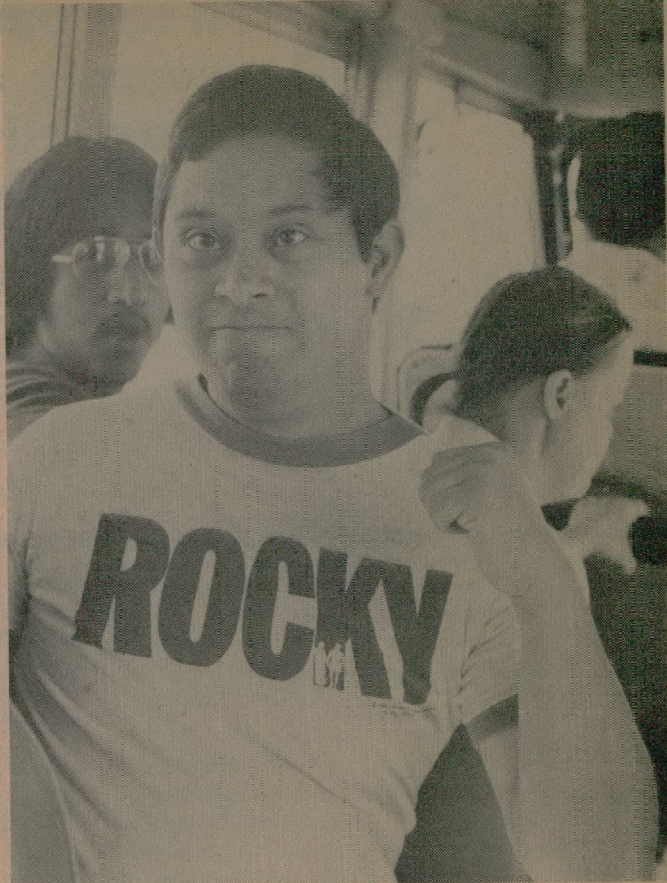
Four of the new cottages now accommodate ambulatory mentally retarded persons, and a dormitory in the Systems Building has beds for 48 more severely retarded persons. The last cottage is home for mentally retarded clients who have emotional problems as well.

Staff members are generous with stories about the good effects of returning clients to their hometowns from state facilities hundreds of miles away.

Many clients abandoned long histories of behavior problems and became more cooperative and responsible. One who was combative and almost nonverbal began communicating in Spanish, his native language.

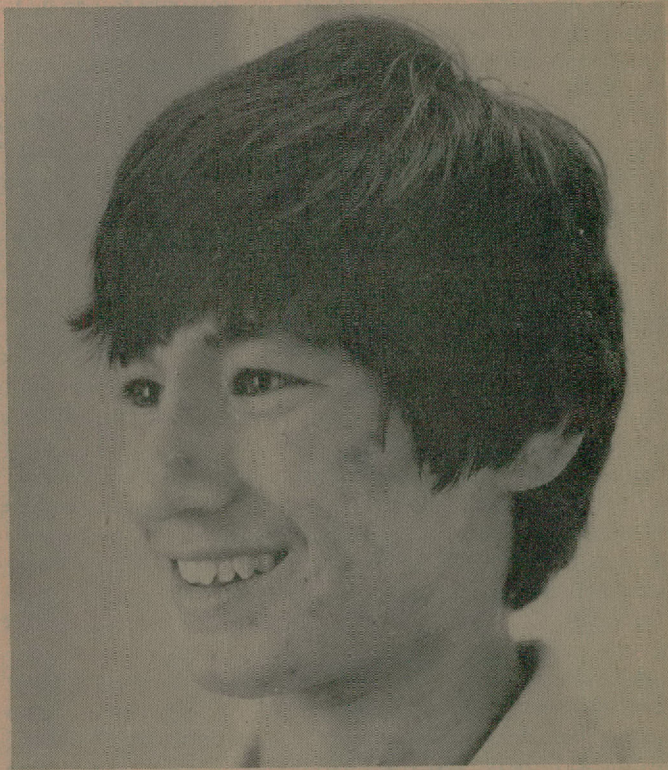
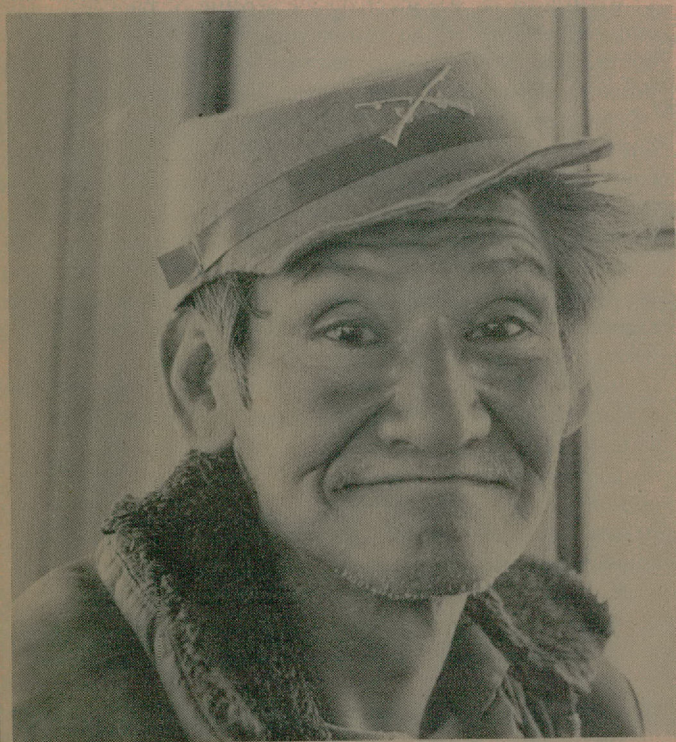


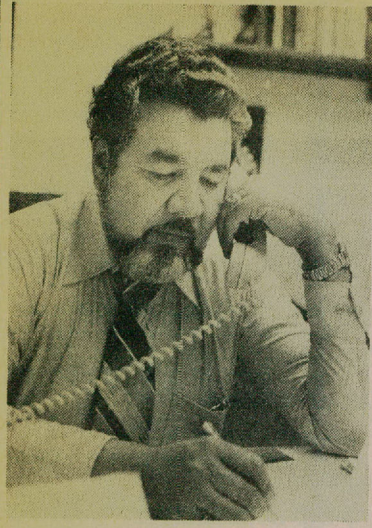
Miguel Marquez, age 59, is the state center's oldest client. He participates in the day activity program.



Riding the bus to his workshop assignment, Ramon Villado pantomimes a role made famous by the movie emblazoned on his T-shirt. His repertoire of imitations, which he's glad to perform at the drop of a request, also includes King Kong.

Jose de la Rosa (below), with his ever-present Rebel cap, is the uncle of Abel Montoya (below right), another resident of the state center.





"In the past if you found yourself severely mentally ill or mentally retarded, you also found yourself hundreds of miles from home."

Ray Valdez, director, El Paso State Center

"We have many Mexican-Americans who were placed far away in state schools and became culturally isolated," explains Norma Howrey, MR admissions coordinator. "I personally feel that coming to these cottages in El Paso really has made a difference for many of them."

One family returned to El Paso includes two brothers from Lubbock State School and their two other brothers plus an uncle from Abilene State School. An aunt of the brothers sometimes takes all of them to her home for a visit and takes one home with her each weekend. That didn't happen when the family was a day's drive away. The oldest of the four brothers recently was one of the first clients to be transferred to an extended living facility sponsored by the El Paso Community MHMR Center.

Rafael Aguirre, coordinator of mental health programs, is equally enthusiastic about a community-based residential facility in El Paso. He points out that El Paso is second only to Laredo in unemployment in Texas and that it has the largest bilingual, bicultural population in the country. With little money for travel, many families had great difficulty visiting relatives in Big Spring, Lubbock or Abilene. Even if they went, limited knowledge of English of many Mexican-Americans coupled with staff members' limited knowledge of Spanish made communication difficult.

"These factors make the need for services in El Paso desperate," says Aguirre. "The state center is a significant step in state services, especially for the Mexican-American community. It means that for the first time Mexican-Americans, who are very family-oriented, have a facility nearby for their relatives. Sometimes, because they didn't want to send them 350 miles away, they just kept them at home."

Another advantage of the local residential facility is that treatment is enhanced when clients can visit families and friends on weekends and become acclimated to the community where they hope to return. Because one-third of the state center's clients speak only Spanish, it is important that an equally large proportion of the 311 staff members speak Spanish and share their cultural heritage.

"Our staff can understand what is meant as well as what is said," says Valdez.

Even though the opening of the state center has brought services closer to home, distance is still a factor in program planning. The large, sparsely-populated counties of Brewster, Culberson, Hudspeth, Jeff Davis and Presidio are dotted with two outreach locations. One is in Van Horn, 120 miles from El Paso;

the other is in Alpine, 260 miles away.

In El Paso County alone, five buses and four vans log daily runs of 280 miles in efforts to transport community residents to the state center for school classes or the day activity program, and state center residents to the community for higher level school programs, workshop training or recreation opportunities.

One unique feature of the state center among other TDMHMR facilities is the cottage called SOL-R-I that is heated and cooled with a \$60,000 solar energy system. The cottage is monitored by Juan Hernandez, plant technician, who compares its energy consumption with that of SOL-R-TWIN, an identical cottage that is gas-heated and cooled with refrigerated air, and a conventional cottage (like the remaining five) which is gas-heated and cooled with evaporative air conditioning. Without funds for sophisticated instrumentation, monitoring is limited to monthly meter readings.

Results so far are inconclusive because of bugs in the system and variable use of the comparison cottages. But the study will continue for 10 years in hopes that long-term energy savings will prove the initial high investment in solar equipment was worth it.

One cottage resident transferred from six years at a state school is John Britt, age 29. He's both mentally retarded and emotionally immature, what Norma Howrey describes as a "crackslipper." Staff members have helped him become less nervous, have fewer fantasies and develop his attention span.

Raul Garcia, a client coordinator, recalls that when he joined the center last October, Britt was having several temper tantrums each day and was known to break his glasses on purpose. Now he hasn't had a temper tantrum since February.

In March he graduated from the campus day activity center to the community workshop. Each morning he boards the state center bus, arrives at the workshop door, deposits his lunch inside his locker and goes straight to work. In the mornings he assembles boxes while learning to adapt to work situations. Afternoons are spent in classes perfecting personal-social adjustment and other skills.

A visitor once asked Britt which he preferred---the state school or the state center. "I like it here," he answered. Why?

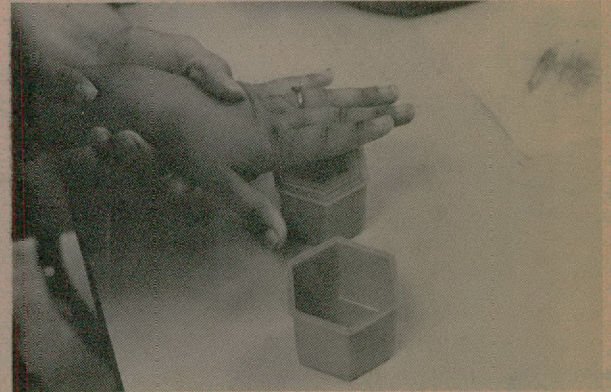
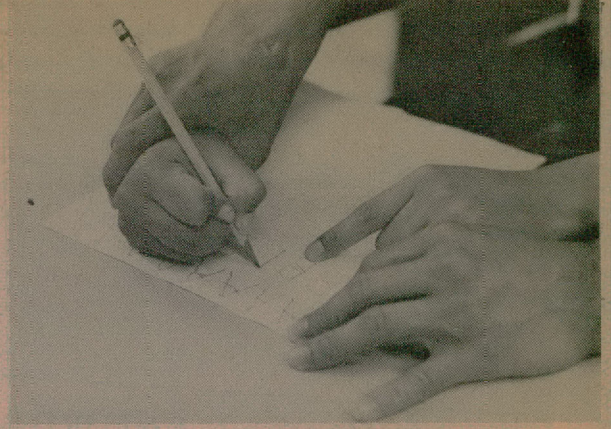
He seemed surprised that anyone would have to ask.

"It's my hometown," he said. "My folks live here. I see them every Sunday."

That's reason enough for John Britt and scores of other clients of the El Paso State Center for Human Development. ■ J.O.



"Don't push so hard, John," admonishes workshop instructor Maria Elena Mungaray to John Britt as she helps him learn to assemble a divider for a cardboard box.



Helping hands at the day activity program for mentally retarded citizens may be those of staff members, parents or volunteers. They help less steady hands learn to trace the letters of the alphabet or stack consecutive sizes of plastic cups.

Mental health clients assemble in the living area of their bright and comfortable cottage for a group therapy session. Guided by earnest questions and warm assurances from Rafael Aguirre, coordinator of mental health programs, the members seek to speed their return to the community through self-examination and group support. Photos by Judy Osborn.



This is the story of Marlene, a 24-year-old woman who last year made the decision to end 10 years of drug abuse. She left her home in a large city for Oak Haven Recovery Center in Marshall.

She tells her story on this page, intercut with italicized remarks by Gail Beil, information director for the Sabine Valley Regional MHMR Center which operates Oak Haven.

1977 AUGUST

SATURDAY, AUGUST 13

Now that it has come
down to the last hours...

...before I surrender to getting HELP, I am facing the reasons for it: the only reasons--I have a bungled life--a loan coming due--\$10,000, three classes I haven't finished and they are due December--I am trying for extensions on all this. I hope building back up isn't as hard as I imagine it to be: it will probably be harder. I could be in a lot worse shape, but I fail to see it right now.

I was faced with kicking my habit in July. A friend suggested I go to Oak Haven Recovery Center in Marshall. After a great deal of thought, I agreed to go by August 15th. With a month to organize everything I did every drug I could get my hands on. The paragraph above was what I wrote the night before I left under the influence of uppers and some downers.

Oak Haven Recovery Center is one of the programs offered by Sabine Valley Regional MHMR Center. Director Bob Howell and his staff draw on any source they think will work in the arrest of chemical addiction. Precepts of Alcoholics Anonymous, as well as individual and group therapy and educational therapy, are put into practice there.

The rural East Texas program, housed in a former nursing home, operates on the theory that recovery from chemical addiction--whether it's alcohol, drugs or a combination--can be accomplished by

using similar techniques for all ages, sexes or types of addiction. And its rate of recovery now stands at about 47 per cent.

So miserable I couldn't even carry out the smallest task, I was constantly on the verge of tears or on the border lines of rage. When I reached Longview by bus, a member of the East Texas Council on Alcoholism and Drug Abuse and an Alcoholics Anonymous member met me. At 9 p.m. I was admitted to Oak Haven's Detoxification Unit. Although scared and hostile, I never lost sight of the fact that I could not go on doing dope.

Oak Haven Recovery Center has a detoxification unit equipped for 13 persons and an intermediate care area capable of housing 16. After detoxification, patients are screened by a committee of the Oak Haven staff. Those who may not benefit from the 30- to 90-day intermediate care program are sent elsewhere; most are accepted. In addition, aftercare is provided for all the patients.

I was screened and accepted after the first week. I moved to my own tiny room but wasn't prepared to open up emotionally. And I had begun having headaches. My head may have been clear of the dope, but psychologically I was a wreck.

Howell maintains that (for the most part) the personality disorders accompanying chemical addiction are strikingly

similar. The behavior of most addicts is irrational and therefore cannot be dealt with using reason alone. Their chemical use becomes more important than anything else--their families, jobs and self-respect.

Group therapy sessions twice a day, in addition to easy access for each patient to an individual counselor, are a part of Oak Haven's recovery program. In addition, the psychiatrist at the Sabine Valley MHMR office in Marshall provides testing and therapy for Oak Haven's patients. These group sessions are the core of the recovery process at Oak Haven.

Because all the therapists are either recovered alcoholics themselves or have immediate family members who are alcoholics, they know the standard lies and evasions which alcoholics and addicts use on society and on themselves. Therefore, the two-a-day sessions, which involve every intermediate care patient, are a mixture of hardness and the offer of hope, as therapists and the clients themselves wear away at the alibis, the personality problems and the value judgments which lead to and support addiction.

I had the mistaken notion that I could continue to smoke pot. I had managed to keep the joint I had on me upon admission; I smoked it with another patient my first weekend there. Then I was cleaning a closet one afternoon and found a Valium,

and I took it without a second thought. I knew I had blown it, so I scored a pill the next day from a fellow patient. And another the next night. Three lousy pills with no high, and I was facing the reality of expulsion, not to mention admitting all this in group therapy. I felt like the biggest traitor who ever lived. After almost a month I had to begin all over again. Had my counselor not seen I needed to learn inner control, I would have left, I guess.

My counselor and a psychologist devised a plan to hide aspirin in the building. When I found one, I had to take it to my counselor and say, "Here is the pill that I found," and he would say, "Very good." It was humiliating, but I was learning inner control and losing the impulse to throw any and every pill into my mouth.

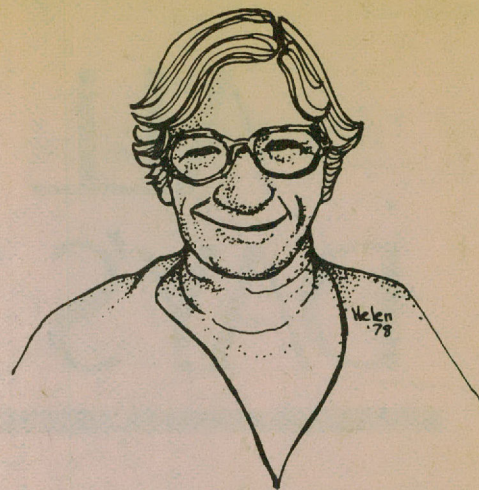
Part of the Oak Haven therapy is a series of 24 lectures on subjects which deal with the nature of chemical addiction and with the psychological problems leading to or resulting from that addiction. The theory is that if understanding is achieved and knowledge absorbed, addiction will no longer be a crutch.

Sharing close group situations with all types of addicts was a learning experience. I never would have believed I could benefit from the same treatment as alcoholics. Yet I saw it happen and work. We lived in basically the same misery and had the same psychological and living problems. Our hope to live free bound us together. We gained from each others' experiences.

Several patients left and came back; I wondered if I could make it. Since I have been out, I've seen more than one person I know well and care for slip. It is so sad and so wasteful.

I now have my life back. If I need something I can usually ask for it. No longer a loner, alone or lonely, I am relatively happy. I believe in my basic drive and determination to succeed. I will never have to rely on chemicals again. My strength is in flexibility and I am growing and enjoying it. I still have a few external problems like the \$10,000 loan, yet I feel I can handle it. I am functioning and doing pretty well. I haven't had a migraine headache in more than a month now.

Marlene has been out of Oak Haven since November 10, 1977. She is working at a responsible job in a law enforcement agency and finds that hard to believe, considering her former life style. She does not claim to be cured, but she is well on her road to recovery. She will probably return to college and finish her degree, but whatever she does, Oak Haven has given her the chance to start over and she has taken advantage of the chance. ■



Overcoming All Odds

By Charles Hugg

STAMFORD---"I really like it here. I don't get mad anymore. This place is great! But what I really want is to get out on my own." These are the words of Dixie Nell Barnett who resides at Skyview Living Center, a privately-owned residential facility for the mentally retarded in Stamford.

Barnett's journey to this level of achievement has been long and hard. Admitted to Abilene State School in 1941 at the age of eight, Barnett was transferred to Big Spring State Hospital in 1967. She returned to Abilene State School in 1975, remaining until she moved to Skyview in November 1976. Officially discharged to Skyview last July, Barnett receives consultative services from the Abilene Regional MHMR Center.

Barnett has posed a distinct challenge to the skills of personnel who have worked with her over the years. Her diagnoses have included organic brain syndrome, mild mental retardation, behavior disorder, psychoses, severe speech impediment and grand mal epilepsy. Though Barnett has experienced some dark days in her life, she persistently has expressed a desire to overcome her handicaps. Efforts of various facility staffs to provide her individualized therapy activities have helped her progress to a functioning level not dreamed possible. She has prevailed over most of her handicaps and is close to achieving independence.

At Skyview Barnett is learning skills necessary to be able to cope with more complex environments. For example, she now can repeat her words, when others do not understand her, without becoming angry. A series of positive experiences is helping her to develop confidence. She is learning more complex academic skills and how to budget money, sew and groom herself.

Barnett's involvement in a workshop program is improving her vocational skills. An important ingredient of this and of her other programs has been the interest of staff in providing personal attention directed to her needs. She has not responded well to group programs unless they have been presented to her in a personal way.

Barnett has a considerable distance to go before she can realize her dream of being on her own, but the staff members who work with her believe there is a good chance she will succeed. At Skyview a plaque hanging on Barnett's wall states "Nothing is impossible where there is love. There is no mountain that love cannot climb, no ocean that love cannot cross." ■

Charles Hugg is a staff psychologist at Abilene State School.

ALL IN A DAY'S WORK

The people on these pages work for TDMHMR facilities and community MHMR centers. Their stories appear here as the result of a suggestion by Stephen Hinshaw of Central Office (featured below) to tell about employees who have physical disabilities. Many information directors who responded to IMPACT's invitation to submit stories were pleased to highlight handicapped coworkers who do their jobs well; others pointed out that the subjects of their stories are valued employees not because of or in spite of their handicaps, but because of who they are and what they do.

The employees, of course, have in common only their physical disabilities. Their skills, interests and attitudes are just as individual as those of other employees. Some are proud to share how they compensated for their handicaps; others wonder why anyone would be interested. But all consented to tell their stories.

**"Never stick anything
in the mouth of anyone
having an epileptic seizure."**

This is the message training consultant Stephen Hinshaw hopes to impress upon everyone in the world.

Central Office's Hinshaw knows about what he preaches, after 13 years of painful experience.

"My teeth have been broken by well-meaning friends who have forced belt buckles, sticks and other objects in my mouth. And all it does is hinder my chances of breathing," Hinshaw says.

An accidental encounter with a Studebaker, and later, a fall from a West Texas oil field cooling tower at age 18 possibly produced the damage resulting in his epilepsy.

All of this Hinshaw considered as an "inconvenience" and went on to college in El Paso. He supported himself by helping his cousin build and restore organs, including such giant undertakings as repairing the fire-damaged organ at the National Cathedral in Mexico City.

Graduation was followed by a teaching career in El Paso high school and community college classes. Such courses as literature, drama, political science, English and the 102 Great Ideas of Western Man are indicative of Hinshaw's varied interests. They contributed to his move to Austin three years ago to consider becoming an Episcopal priest.

About that time he discovered another "inconvenience" in his life. A diagnosis of diabetes insipidus necessitates painful injections every 36 hours and a salt-free diet.

Acquisition of a training grant by the Office of Staff Development Services in Central Office made possible Hinshaw's recruitment in July 1976. He has worked in the formation of new programs for MHMR paraprofessionals.

The loss of vision in one eye about a year ago added another "inconvenience" to Hinshaw's active life. But lack of vision hasn't interfered with his ability to shoot pool, collect stamps, do crewel embroidery or bowl. (His team is called "The Developmental Disabilities.")



Stephen Hinshaw

Theater stage lights don't bother him either. He admits to being "all ham" and enjoying anything involved with the theater. He acts and has danced and sung professionally. A recent backstage assignment was considered by some as enviable: he was dresser for a large cast in "A Little Night Music." The necessity for split-second timing demanded concentration on fasteners and lacings instead of the beauties within.

"Stephen's epilepsy is a tool we use in the office," says his supervisor, Dan Jones.

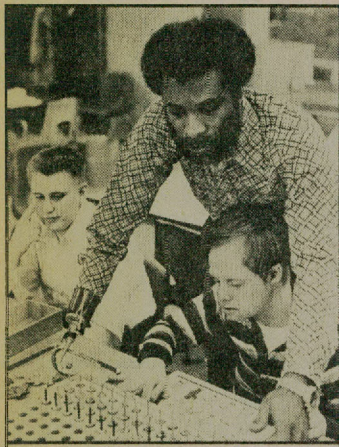
"Although we may be immersed in planning new services and programs for people with disabilities, this may be the first time some employees have had daily contact with anyone with his disabilities who functions fully and will discuss and has a sense of humor about those disabilities," Jones adds.

"This may be part of my preparation for what I'd choose as my life's work, training those who train the disabled," Hinshaw observes philosophically.

"In the meantime it would help if my office had a little carpeting," he adds quickly, "because a couple of times I've hit the floor and a carpet would soften the blow. But my main message is going around. They aren't sticking things in my mouth."

*By Hazel Casler, Coordinator
Arts, Graphics and Educational Services, Central Office
Photo by Jo Ann Hammer*

"I can't help but feel handicapped. But I've accepted it."



Rob Fennell

Four mentally retarded residents worked on puzzle and counting exercises at a table in the Denton State School Work Activities Center. In a class that would prepare them for vocational placement, either at the workshop or in a job situation, the residents were learning task completion and how to increase their attention span.

As one student raised his hand upon completion of the exercise, work adjustment trainer Rob Fennell knew he must find another activity to keep the resident busy and

interested. This time Fennell carefully showed the student how to screw a bolt, washer and nut together. Glancing across the table, he noticed another resident having difficulty sorting out colors. He pointed to the proper color of beads and gave her a token as she finished her exercise.

All the trainers at the center give the students such individualized attention. But Rob Fennell is physically handicapped, and he is helping mentally handicapped persons learn to help themselves.

After losing his right arm in the Vietnam War, Fennell saw veterans who were more disabled than he and felt the need for social work to help them readjust.

"Maybe a few of the residents I work with here have some inspiration because of my handicap," Fennell said. "If I can do it, then they can certainly do it with two hands."

Although Fennell makes friends quickly with his students by joking and playing with them, he holds a hard line when it comes time to be serious about classwork.

"They need to be taught socially accepted skills for a work environment," he explained. "I stick to the teacher role, so they can learn the difference between a houseparent and trainer and can make appropriate responses like shaking hands instead of hugging."

While attending North Texas State University part time to earn a bachelor's degree in sociology, Fennell managed to make the social adjustment and good grades in addition to holding down a job as assistant librarian at Parkland Hospital in Dallas. He is thinking about returning to school to pursue a career as a social worker.

"I can't help but feel handicapped," he said. "But I've accepted it. Handicapped people don't want pity."

"You don't know he's handicapped," his supervisor Rochelle Beauchamp praised. "He's flexible and willing to do everything."

Fennell has been recognized by the Texas Rehabilitation Commission for his outstanding contribution as a state employee.

By June Bilsborough, Information Director

Denton State School

Photo by John Stark

"Don't ever give up."

She's never missed a day of work.

She's never been late.

And her work is outstanding.

That sums up brown-eyed Frances Sanchez, caseworker assistant at San Antonio State Hospital-San Antonio State School (SASH-SASS).

Although she's been in a wheelchair most of her 26 years, Sanchez has done just about everything she puts her mind to. Which includes a lot.

For starters, she earned her bachelor's degree in social work from the Worden School of Social Service at Our Lady of the Lake University after receiving a tuition grant from the Texas Rehabilitation Commission (TRC). After graduation, she worked part time at Girlsville Inc., a home for runaway girls. A year ago she came to SASH-SASS, highly recommended by her counselor at TRC.



Frances Sanchez

When Sanchez isn't on the road to the 10 outreach clinics (traveling with a team in the hospital's Winnebago), she works on different units. Able to spend most of the day out of the wheelchair, Sanchez goes where she's needed in her own car. She cannot move easily from the elbows or knees down, but this doesn't keep her from answering the phone and doing plenty of paper work in what fellow workers call "beautiful penmanship."

Although she was struck by polio at the age of three, even doctors didn't recognize her illness for a few years. At six, when the weakness in her arms and legs indicated polio, the little girl began therapy. The inability to run and play with the other children "hurt the most," Sanchez confides.

Being able to work with other people is the biggest reward of her life, she says. Recently, she became a member of San Antonio Citizens Concerned for the Handicapped where she serves on the transportation committee.

Sanchez' dreams include receiving a master's degree. For fun, she'd like to travel to Switzerland.

The spunky woman credits family support and her religious faith for the life she leads today. Any advice for fellow handicapped? "Don't ever give up," she says. It's obvious that Frances Sanchez never has.

By Thelma Ledger, Information Director

San Antonio State Hospital

Photo by Bob Burne

"I never consider myself handicapped."

Bobby Masters was majoring in physical education and planning to be a coach.

The Vietnam War changed his plans.

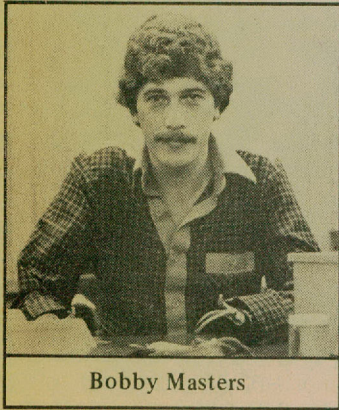
Vicki Patton graduated from high school but doubted that she would ever find a job.

Her obstacle was cerebral palsy.

And while government definitions would consider both Masters and Patton handicapped, both are dedicated employees of Trinity Valley MHMR Authority (TVMHMRA) in Fort Worth and both have special skills to serve clients in human service programming.

Masters, a Marine during the Vietnam War, lost both arms due to injuries sustained in a 1968 Labor Day mortar attack.

"When I realized what had happened, I was thankful to be alive," recalls Masters, who was determined to return to a normal lifestyle as quickly as possible.



Bobby Masters

One year after the injury Masters, fitted with artificial arms, enrolled in college to study vocational rehabilitation. His new career choice was brought about by his own experiences and his belief that he could assist others in the rehabilitation process.

After earning a graduate degree in rehabilitation counseling, Masters became a work adjustment specialist and has served three years as a program

manager in the TVMHMRA skill assessment unit.

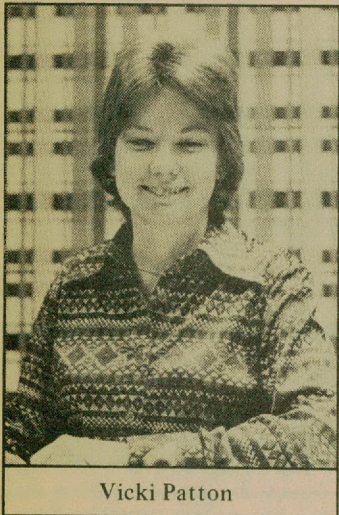
Masters attributes his own successful rehabilitation to his positive attitude.

"I never consider myself handicapped, and the only obstacles I must overcome are the ones I create for myself," he says, noting that even those don't surface often.

"I feel comfortable," Masters says, with his life and his job.

He even has had a chance to fulfill his original coaching dreams. He's coach of the TVMHMRA softball team.

"I never knew I would be able to type."



Vicki Patton

Vicki Patton has experienced the TVMHMRA service system from the perspective of both a trainee and an employee. She is determined to set a good example for the trainees in the Benbrook Industrial Training Center where she is a clerk-typist.

Upon graduation from high school, Patton feared her mobility problems would prevent her from being able to find a job. But after a year as a TVMHMRA trainee, she enrolled in the local junior college secretarial training program.

"I never knew I would be able to type because of my coordination problems," says Patton, who quickly developed the skills necessary to find a full-time job.

One obstacle to employment remained.

"I had always had a fear of driving, so I never tried. But once I finished school I decided to enroll in a driver's education program," she explains.

After passing the driver's test on her first attempt, Patton bought a car equipped with hand controls.

Now mobile, she completed an on-the-job training program at TVMHMRA and was added to the full-time staff where she handles typing, filing and the completion of numerous reports.

While she still experiences some difficulties walking, Patton is determined to walk unassisted. "Using a cane just gets in my way," she says.

Continually encouraged by her family to become more independent, Patton's new goal is an apartment of her own and, she smiles, "a more active social life."

In both their professional and private lives, Masters and Patton exemplify the TVMHMRA motto that all individuals must have the opportunity to "unlock their own abilities."

By Drenda Witt, Information Director

Trinity Valley MHMR Authority

Photos by Drenda Witt

"I can think of a lot of things I would rather talk about."

Two handicapped persons, one an employee and one a volunteer, provide Sabine Valley Regional MHMR Center in Longview with special talent and expertise as well as empathy with clients.



Karen Bradley

Karen Bradley, medical records clerk in the Marshall Outpatient Clinic, has been part of the staff since May 1977. Born before the development of the Salk vaccine, at age two she contracted polio. The illness left her with paralysis in both legs.

She was married in June 1976 and went to work as an apprentice artist in a pottery factory. Deciding that her talents would be put to better use in the secretarial area than as an artist,

she joined the staff of the MHMR center as a medical records clerk.

On the job, her crutches don't cause any delay in getting the work done. She navigates the long halls of the Marshall clinic almost as quickly as her coworkers. She also moves quickly from files to her typewriter, using her wheeled desk chair like a skateboard.

Sometimes she is the source of questions, particularly by the elderly people who are clients of the center. One asked her seriously if she ever took a bath. "I assured her that I took one every day, and that I always took off my brace first, and she seemed satisfied."

Bradley manages all her housework with only the help of her husband and is matter-of-fact in her explanation to children why she wears "those things on her legs."

"After a while I get frustrated with the explanations, though. Sometimes I think kids don't understand the strangeness and so they ask the same questions over and over. Personally, I can think

of a lot of things I would rather talk about.”

Bradley looks on life and her part in it as any other person would. She feels that her contribution to the work at the mental health center is made neither because of nor in spite of her crippled legs. She's there because she can handle the job better than all the other persons who applied for it. Her bosses agree.

“I feel like the more people know about mental health and mental retardation services, the better for all of us.”



Don Steelman, with Laura Beil and Schotzie

Don Steelman, a volunteer for Sabine Valley, has been blind since about two weeks of age because of retrolental fibroplasia caused by pure oxygen administered to incubator babies. But he has not let blindness prevent him from pursuing a varied number of interests and a demanding career, the law profession.

Steelman recalls a camping trip to Padre Island where crabbing was the order of the day. One of his fellow Boy Scouts, because of a cut foot, was banished to the campsite to cook the catch, while the rest took to the bay with soup bones and nets to snare more of the ugly creatures.

“As we came back, we could hear terrible language, and then whacks, and then more cursing. It seems nobody told the guy that you boil the water and then you throw the crabs in,” Steelman relates. “As the water got hot, the crabs tried harder to crawl out, and the ol’ boy was telling them what he thought of them and hitting them on the head with a piece of firewood to knock them back in the bucket. Funniest sight I ever saw,” Steelman concluded.

After graduation from law school at The University of Texas, Steelman began his career as a federal commission attorney in Washington, D.C. Along the way, he broadcast his own regular radio show in Fort Worth, where he had joined the staff of Tarrant County Legal Aid.

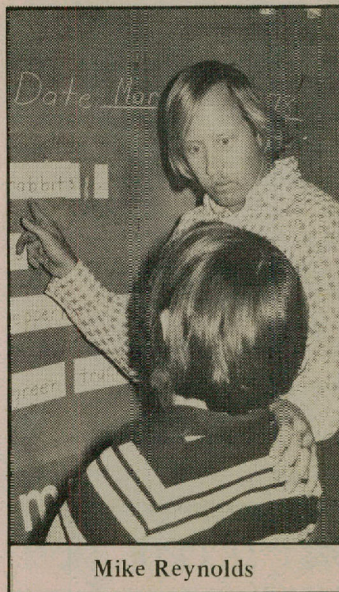
It was that radio talent that Sabine Valley tapped. Along with Laura Beil, only 14 but a four-year veteran in making commercials, Steelman with the vocal assistance of Schotzie, his seeing-eye dog, made four public service announcements for 11 radio stations in Sabine Valley's catchment area.

“I wanted to do this because I feel like the more people know about mental health and mental retardation services, the better for all of us,” Steelman observed.

Steelman can be seen daily running behind Schotzie (who does not seem to understand “slow down”) from his office to the courthouse. He also is making public service announcements for TV stations serving three community MHMR center areas.

*By Gail Beil, Information Director
Sabine Valley Regional MHMR Center
Photos by Glenn Sherill*

“When will society recognize individuals as they are and not as they have been labeled?”



Mike Reynolds

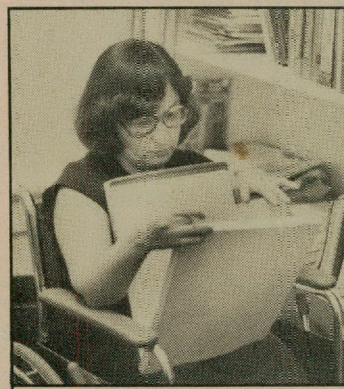
Mike Reynolds does a superb job teaching mentally retarded children at Corpus Christi State School. He is a 1976 graduate of Texas A&I University with a master's degree in special education. He also is deaf. Reynolds does not remember when he lost his hearing but recalls having difficulty hearing when he was in elementary school. He never was taught how to read lips, but as his loss of hearing increased his ability to read lips increased.

Reynolds does not consider himself handicapped but recognizes certain needs and limitations. His definition of handicapped is “not being as good as everyone else.” Reynolds feels he can compete with anyone in anything. Employers, teachers and a large portion of the human race only see stereotypes. Reynolds believes that people are individuals and need to be dealt with that way, with individual problems and individual abilities.

When will society recognize individuals as they are and not as they have been labeled? Reynolds does not know, but he says, “I'm still waiting.”

*By Sal Villaneuva, Ass't. Coordinator, Volunteer Services
Corpus Christi State School
Photo by Kat Kiwior*

“Don't just see my wheelchair. See me.”



Mary Ellen Bailey

Mary Ellen Bailey is one of the 108 handicapped persons employed at San Angelo Center. The attractive, dark-eyed young woman radiates the feeling of warmth and competence. This has taken some real effort on her part and a supportive family.

Born with multiplex congenital arthrogryposis, a rare birth defect in which most of her joints were dislocated, she had loss of range in all limbs and had club feet and hands. She was two and one-half years old

before she could leave the hospital to live at home. When she was 14, she enrolled in The Crippled Children's School at Jamestown, N.D., 120 miles from her home town.

There she became interested in the speech, language and hearing problems of younger children. Later she earned her bachelor's degree in education from Kansas State Teacher's College and master's degree in speech pathology from Wichita State University in Kansas.

Her early interest plus an excellent education and specialized training qualified Bailey for her job at San Angelo Center. She evaluates and treats speech, language and hearing problems of the adult mentally retarded population.

Bailey invests valuable time building healthy rapport with residents. She is keenly aware that many of them have been ignored and isolated because of their speech. She constantly challenges residents to do their best.

A statement to Bailey that "You seem to be a strong person" brings a slightly barbed reply which perhaps gives insight into the problems of handicapped persons.

"The image of 'always strong' is not necessarily good nor is it realistic," she says. "Not until you cease to deny anger, tears and, yes, even failure, can you get rid of your personal 'hang-ups.' A handicapped person has the same ups and downs you do and will run the whole emotional scale in his daily living."

Bailey may speak for all handicapped persons when she says, "People are prone to group us. They immediately think of disabilities instead of abilities. Don't just see my wheelchair. See me."

"People really don't accept you until they know you."

Another outstanding center employee, Don Johnston, is behavioral characteristics progression (BCP) coordinator for SAC Industries, the sheltered workshop employing 192 client workers.

After contracting polio while an infant, Johnston's legs were paralyzed until age nine and a muscle transplant restored use of his right leg. He wears a full brace on his left leg.

As BCP coordinator, Johnston is responsible for establishment of quality pre-vocational and vocational programs to develop clients' work skills. He maintains their vocational histories and serves as liaison between the center's interdisciplinary teams and SAC Industries' training staff.

Johnston's enthusiasm for this work and loving concern for the clients is infectious. He appears to have mastered the art of knowing when to encourage gently and when to hold a firm line by telling it like it is.

Although he's only 29, Johnston's work experience include singing professionally, pattern-making in a steel foundry, managing a grocery, owning a pet shop and working for a publisher and in an art gallery.

Johnston was associated with Head Start and programs for the blind but is emphatic when he states, "Working with the mentally retarded is for me. It can be the most frustrating and, by far, the most rewarding work I could do."

As a person with a disability, Johnston says, "One of the things that really bugs me is that people tend to overreact. They really don't accept you until they know you."

"In approaching any job, a handicapped person has to decide he can do it and gain acceptance and trust of those he works with. Then he just has to do it."

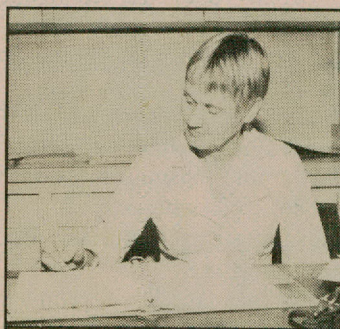
*By Mary Kennemer, Information Director
San Angelo Center*

Photo by Roy Blackwell

"Both identify the support of their families as a key element in coping with their handicaps."

To choose a representative handicapped employee of Abilene State School seems an injustice, for each one is a success story, earning the respect and admiration of coworkers and supervisors.

But two individuals represent the spirit and dedication of this segment of our work force because they reflect not only their own convictions but the standard of excellence of their contemporaries. They are Marcelyn Smith and Marilyn Sue Fletcher.

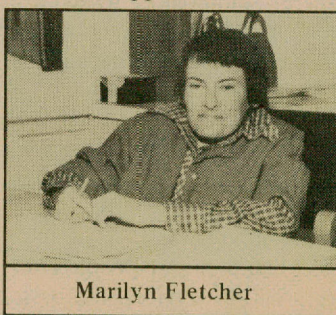


Marcelyn Smith

At the age of 13 Marcelyn Smith lost her left arm to sarcoma cancer. She later worked as a secretary and office nurse and as an assistant administrator of a nursing home. In 1974 at the age of 39, a widow with three sons, she enrolled in nursing school. During this time, two events touched her life: she remarried and she became interested in Abilene State School during her inservice training.

A few concessions have been made on her job, such as the problem of safety lock caps on medicine bottles. This was easily solved by the pharmacist through the use of flip top caps. In this situation lies the key to Smith's success. She is a member of a team and through teamwork employees accomplish their jobs.

Both Smith and Fletcher identify the support of their families as a key element in coping with their handicaps. Smith's warm smile shines as she tells about her son's response when she used one of the hospital's parking spaces reserved for the handicapped. The space was chosen due to bad weather and the supplies she would be transporting to her dormitory. As she pulled into the space, her son said to her in surprise, "Mother, this is reserved for the handicapped."



Marilyn Fletcher

Marilyn Sue Fletcher has a congenital heart condition and kyphoscoliosis, a curvature of the spine. A native of Oklahoma, she received her master's degree from Texas Tech in psychology, specializing in rehabilitative counseling. She then was employed as a staff psychologist at the West Texas Rehabilitation Center and assumed her present position as unit psychologist in the female nursing service unit of Abilene State School in 1974.

As do diamonds and dynamite, Fletcher comes in a small package---4 feet, 5 inches tall. To assure both comfort and function, her desk is an illustrative example of necessity being the mother of invention. With its legs removed and adjusted to the proper height by a brick foundation, her desk resembles a car on blocks.

In dealing with her handicap, Fletcher states social adjustments probably were the most difficult to overcome. But she feels her adjustments have provided insight into the feelings and anxieties of the multihandicapped females with whom she works.

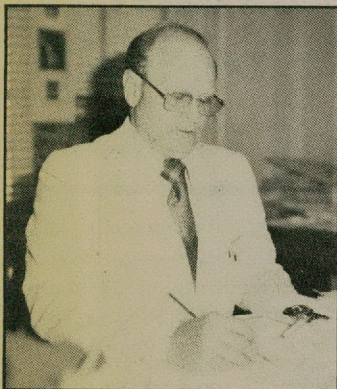
To see their obvious abilities is to understand why their coworkers were surprised they were selected for the article. They are special people, not in the sense that they're handicapped but because of who they are and what they do. They are friends, they are coworkers, they are assets to the school and the clients.

By Gilbert Allison, Ass't. Personnel Officer

Abilene State School

Photos by Larry Fink

"If fate hands you a lemon, turn it into lemonade."



Robbie Roberson

R. H. (Robbie) Roberson, staff services officer at Wichita Falls State Hospital, is a real-life success story of a handicapped employee who is coping successfully with a full schedule of work. The story he has to tell began when he volunteered for the army in 1942. During World War II he served in North Africa, Sicily and Italy with Darby's Rangers and the 36th Infantry Division. It was there he lost his left arm and three rib sections from an exploding artillery shell.

Formerly left-handed, Roberson had to train himself to be right-handed. He says his hardest adjustments were learning to strike matches, tie shoes and write letters.

Roberson was employed at the hospital in 1955 as a property clerk. He advanced to bookkeeper, then accountant, and served as chief accountant for 10 years. As staff services officer, he is in charge of property control and housekeeping services.

He was given the Texas Rehabilitation Commission Merit Award in 1971 for outstanding contribution to the handicapped and the State of Texas.

Roberson never considered the loss of his arm a stumbling block. Instead, he designed arm straps which control movement of the artificial limb. Soon afterward the Veterans' Administration, University of California and New York University adopted his design for use. Roberson has made it a point to visit other handicapped people to be an inspiration to them. With one such friend who lost a right arm, he exchanges gloves at Christmas, the right hand for the left one.

Roberson says it has been his pleasure to serve the hospital for 23 years and to have a part in the lives of the patients. He has lived by the adage that "if fate hands you a lemon, turn it into lemonade."

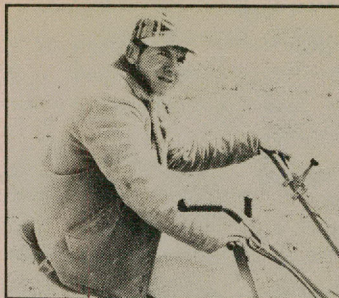
He adds, "I have never considered myself or others to have a special handicap for I believe the body to be mortal and never perfect. The thing I miss most is not being able to clap my hands in appreciation to others."

By Michael Uriniak Jr., Information Director

Wichita Falls State Hospital

Photo by Michael Uriniak Jr.

"I like my work, but I particularly like all the people."



Bobby Reed

Robert Reed's accommodation to his hearing and speech disability is an inspiration to other handicapped people. Bobby, as he is called at Brenham State School, has had severely impaired hearing since birth. The speech limitation is a natural consequence.

Reed spends little time dwelling on his handicap. He always is friendly and ready to participate in all activities. He attended public school but did not graduate. He is working to earn his GED. He is a valuable member of the grounds maintenance crew as an operator of mechanical equipment. Noisy machines do not bother him.

The Texas Rehabilitation Commission provided Reed with an improved hearing aid. This significant contribution helps him cope with limited hearing.

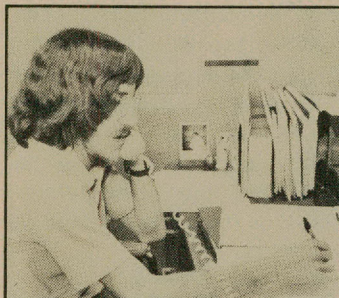
Reed, age 34, married, believes he has found his niche. "I like my work at Brenham State School, but I particularly like all the people. They are the best and friendliest," he says.

By Lillian Wilder, Information Director

Brenham State School

Photo by Dan Bayless

"Through personal example I can convey to clients my philosophy of developing yourself to your fullest capability."



Johnnie Prosperie

Johnnie Prosperie, rehabilitation coordinator for the Beaumont State Center for Human Development, has proven that life can be meaningful and successful for those with a willingness to learn. As he learned to make a life for himself, Prosperie bridged the gap from being an active young college man to life in a wheelchair.

His life changed on a sunny afternoon in 1971 when he decided to go swimming. He broke his neck in a diving accident which resulted in major paralysis. After two months in traction, he spent three months at the Texas Institute for Rehabilitation and Research in Houston. While there, he redeveloped all of his

self-help skills and went on to learn how to drive a car with hand controls. That same year he earned his bachelor's degree in sociology from Lamar University.

As he became more independent, he moved out of his family's house to live with friends, entered graduate school and worked part time at a halfway house, teaching self-development techniques and helping in group therapy. Later he purchased a trailer home built to his needs.

In 1974 Prosperie joined the Beaumont State Center as a part-time aide. He was promoted to full-time employment as a work evaluation technician in 1975 and later became work evaluator and then rehabilitation coordinator.

Prosperie has completed 21 hours of graduate work and purchased land in the Beaumont suburbs where he lives in relative independence. He enjoys drama, nature study and camping.

"I am appreciative of the guidance and financial aid given me by the Social Security Administration and the Texas Rehabilitation Commission," Prosperie said. "They helped me rebuild myself as a contributing member of society. I now feel that my rehabilitation process is complete.

"Through personal example I can convey to the clients I serve my philosophy of developing yourself to your fullest capability regardless of circumstance, hindrance or innate ability."

When talking with Prosperie, one never notices he is in a wheelchair, but one does notice he is a capable person always willing to help his coworkers. Prosperie has bridged the gap, and his future is planned.

*By Beverly Roney, Information Director
Beaumont State Center for Human Development
Photo by Mark Konox*

"My association with the center offers learning experiences."



Paula Peterson

If a future career path had been predicted for Paula Peterson when she was a child, a job offering an opportunity to help others would have been inevitable. An early-developed skill in meeting people resulted in her selection as a Texas March of Dimes poster child, a representative in publicity releases for the Texas Scottish Rite Hospital for Crippled Children and a guest on the Queen for a Day television program.

This ability to communicate effectively is a vital part of Peterson's job as secretary/receptionist for Dallas County MHMR Center (DCMHMRC) in the Child and Adolescent Central Intake Unit.

The road from past to present was not easy even for such a goal-oriented person as Peterson because of having polio at age 16 months. The attitude that people with a handicap should limit their expectations so as not to encounter disappointment was frustrating for her. Even though others believed their intentions were in her best interest, she rebelled at being pampered. That spark of independence even caused her to run away from home once.

The many obstacles that Paula Peterson encountered only helped to reinforce her determination to achieve her goal of becoming a children's counselor. She has completed 12 semester hours toward that goal. However, as a single parent, she currently directs her attention to three-year-old Christopher and eight-month-old Julie.

Even though her school plans are temporarily delayed, she simply pursues an alternate course of learning. Peterson states, "My association with the center offers learning experiences. I listen to staff, interact with children and attend training and staff development programs offered by DCMHMRC."

If one were to predict the probability of Paula Peterson reaching her goal, success seems certain. One person's handicap has become her incentive to achieve.

*By Pat Knee, Information Director
Dallas County MHMR Center
Photo by J. David Hare*

"I make a bunch of people happy by doing something that means a lot to me."

He came, he works, he plays and everybody appreciates it. He is Moose Quintero and he expects to be treated the same as other employees in his job category. Unlike other employees, though, Quintero wears a platform shoe on his right foot to compensate for the shortness of that leg. The right leg also does not straighten to a full extension.

A mesquite thorn stuck in his knee when he was thrown from an overturning hay wagon at age 11 caused these problems. The thorn remained lodged for one and one-half years. In an attempt to relieve the resulting knee stiffness, he underwent surgery. Due to complications during surgery, his leg ceased to grow and the knee stiffness remained.

But he works. Hired as a night watchman for Vernon Center in 1969, he transferred to a position as truck driver in 1973 and was later given responsibility for maintenance of the vehicles and supervision of the other truck drivers. Supervisors and coworkers rate him as a good hand, well-liked, cooperative and willing to do his share.

And he plays. Shortly after Quintero began work for Vernon Center, he noted that a band was not always available for patient dances. He played the guitar, violin, mandolin and accordion, and friends and fellow staff members played enough other instruments to form a band. Performances increased from one or two a month to two or three a week and occasionally to five a week.

Quintero has worked with patients as long as he has worked at the center and feels "when you do something for them they appreciate it. I know darn well every time I go up there, I make a bunch of people happy by doing something that means a lot to me and to them, too." In 1975 he was named Employee Volunteer of the Year for his efforts.

So he won't become bored, Quintero farms 320 acres of his mother's land at Gilliland, 40 miles from Vernon. He raises wheat and cotton, keeps up the fences and does any other work required of a farmer. It's all in a day's work . . . and play! ■

*By Roy E. "Buck" Byers, Information Director
Vernon Center*

Come and Play

By Janet Glesby and Maggie Bilderback

HOUSTON--Meet Marissa. She is 11 and loves music. Meet Junior. He is 17 and has a buddy named Frank. Meet Catherine. She is 25 and likes photography.

What do these people have in common? Each takes part in programs of the Recreation Unit of the MHMR Authority of Harris County for mentally retarded children, teenagers and adults living in Harris County. The programs offer chances for fun, friendship and a wide variety of recreational activities.

Marissa participates in the unit's programs for children under 12. On Saturday she goes to the drop-in center which supplies music, art, games and activities to develop motor skills. Three after-school programs also provide help to satisfy each child's need for play and activity.

For Junior, becoming part of the Buddy program with an older volunteer helps him do new things. The volunteer, in turn, feels needed and finds much satisfaction in giving. Teenagers also can be involved in weekend camping trips, Scouts, slumber

parties, a youth club and a Moving-On program which provides opportunities to learn leisure time community living skills.

Catherine participates in adult recreation programs called People Power. She has opportunities to form friendships, learn new recreational skills and make choices about use of her free time. Catherine also can participate in classes such as cooking, folk dancing, photography and ceramics. Field trips, monthly socials and campouts also are offered.

"Come and play the game with me," are the words that opened up new opportunities for Marissa, Junior and Catherine. They, along with other mentally retarded individuals and volunteers, now have new ways to spend free time with their friends in order to grow as individuals and feel good about themselves. ■

Janet Glesby is the unit director of the Recreation and Adult Education Units of MHMR Authority of Harris County. Maggie Bilderback is coordinator of the Buddy program.

Not Forgotten

VERNON--At age 17 Richard Allen Kelly had just about seen and done it all, the wrong way.

He began smoking marijuana when he was 13. A year later he was on pills, popping everything he could get his hands on.

By the time he reached 17, last June, he had been arrested two times for suspected burglary. His troubles with authorities over truancy were too numerous to mention. He had been placed in several detention homes and halfway houses but had run away more times than he had been detained. Finally he was referred to the Trinity Valley MHMR Authority in Fort Worth.

In March 1977 young Kelly was admitted to the Drug Dependent Youth Project at Vernon Center South. Once free of the effects of drugs, Kelly became interested in the unit's academic and vocational programs, specializing his interest in mechanics and engines.

Meanwhile, Kelly learned to cope with himself. He learned what rules were. He learned to get along with other people, to take directions and to appreciate others.

Last September Kelly was released from the unit. He returned to his parents' home and found a job. It was a good job with good pay and it was in the line of work he had learned to love. It was in an auto repair shop.

Kelly's work was appreciated by his boss, too. He gave the 17-year-old a couple of raises, and then last Thanksgiving he gave the youngster a few days off for a holiday.

Kelly and a couple of friends took advantage of the free time and decided to spend the time in Colorado. While en route to Colorado there was a highway mishap. The crash was not his fault, but Kelly was killed.

But Sue Kelly is not one to forget. She remembers the good things in her son's life. And for him, learning to work with engines was about the best thing that ever had

The death of a former client of the Vernon Center Drug Dependent Youth Project prompted his parents to donate needed equipment and a plaque to the program. Tom Bell (left), vocational supervisor, accepts the plaque from Vernon and Sue Kelly.



happened to him. And it began at the drug treatment unit.

Mrs. Kelly wanted to show her appreciation. She purchased a professional-type engine testing center and donated it to the center in the name of her son.

"I want others to know my son, Ricky, and I feel that when they are here using this equipment they will feel a part of him," said Mrs. Kelly who was present when the equipment was delivered April 25.

"Perhaps others will learn what life is all about. And they, too, can make a contribution." ■ H.P.

Day Treatment

Program staff members get lonely, too, especially a staff of a fairly new program in a relatively new field like day treatment. Exchanging ideas and experiences is great for improving both the quality of a program and the morale of the staff.

In July 1977 the Abilene Regional MHMR Center (ARMHMR) Day Treatment program sent its staff to the Southwestern Partial Hospitalization Conference in Houston. The two-day meeting was cosponsored by TDMHMR and the Texas Research Institute of Mental Sciences in Houston. The impact on the Abilene people was solid.

"For the first time I recognized that day treatment is a respected treatment modality in its own right," said Don Frederick, coordinator of the Day Treatment Program (DTP). "Since our program had grown up by itself, we weren't aware that what we were developing was being used and proven effective across the nation."

LaNelle O'Neal, director of DTP, returned from the meeting excited: "It felt so good to see other peoples' programs and share ideas--mistakes as well as successes. It upgraded our self-image and that improved our performance."

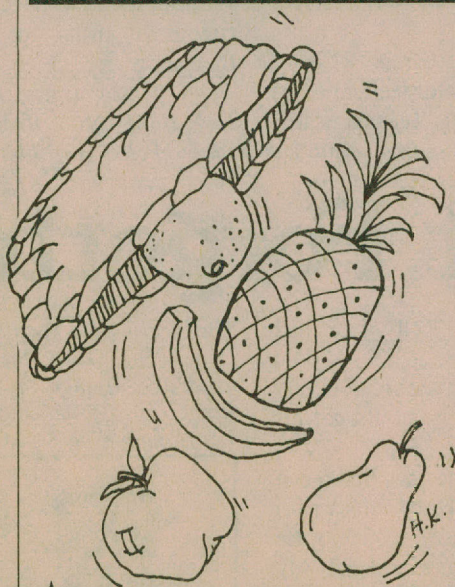
The enthusiasm did not stop there. Aware of other DTPs in their area, the Abilene staff called a one-day meeting for DTP workers in the general area of western Texas. Six community MHMR center DTPs sent staffs. Others from El Paso and Plainview were involved but unable to attend.

Paulette Koncelik of Friendship House of the Wichita Falls Community MHMR Center says that their staff went away from Abilene brainstorming. Friendship House will host the second meeting of the group, probably in the fall of 1978. To keep in touch until then, an occasional newsletter will be sent by the ARMHMR DTP staff, edited by Frederick.

"Our group is informal and not exclusive," says Frederick. "We'd be glad to hear from anyone who is

interested in partial hospitalization." The address is Don Frederick, Chief of Social Services, Abilene Regional MHMR Center, P.O. Box 3253, Abilene, TX 79604.

What's New



★Put it in print and the need to revise is immediate.

The Key Central Office Personnel list on page 11 of the last issue of IMPACT needs to be updated with these changes approved by the Texas Board of MHMR April 21:

Arts, Graphics and Educational Services has moved from the Information Systems Division to assistant commissioner James A. Adkins.

Mental Retardation Services is now headed by acting deputy commissioner John W. Carley III, Ph.D., following the resignation of deputy commissioner James E. Craft, Ed.D., April 30.

Program Support Services no longer exists. Director Dan Sheehan, Ph.D., resigns effective June 30.

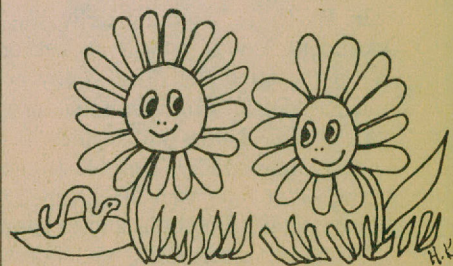
Program Analysis and Statistical Research has moved from Program Support Services to the Information Systems Division.

Standards Compliance and Quality Assurance have been combined into a single section with Sue Cavin as chief and moved to assistant commissioner Adkins.

★John J. Kavanagh, M.D., was appointed May 10 as the commissioner of TDMHMR. Dr. Kavanagh served as acting commissioner since March 1 when Kenneth D. Gaver, M.D., resigned the post to enter private practice.

★The *Texas Health Careers Newsletter* reports that a health careers counseling hotline began in January at The University of Texas Medical Branch at Galveston. It's designed to provide advice to high school and college students in Texas who are making career decisions. For information call toll-free 1-800-392-6433.

★The second edition of the publication *Texas Laws Relating to MHMR* is available. The price per book for the public is \$4.00 for tax-exempt organizations and \$4.20 for all others. Checks should be made payable to "Cashier, Texas Dept. of MHMR" and mailed to Cashier, Texas Dept. of MHMR, P.O. Box 12668, Capitol Station, Austin, TX 78711. Complimentary copies have been sent to each county and probate judge. Employees of TDMHMR facilities and community MHMR centers should check first with their superintendents or directors before ordering copies.



★The completion of a fiberglass greenhouse 48 feet by 84 feet at Rusk State Hospital is providing the patients with year-round enjoyment of live plants. Horticulturist Doug Currier, supervisor of the greenhouse, coordinates a program of supplying plants for the dormitories and recreation areas.

★The Tejas Symposium on Youth and Humanity, scheduled for June 1-5 in Terlingua, will result in videotapes, transcripts and a book for sale to the public. Interested persons may contact Tejas Foundation of Youth Inc., P.O. Box 286, Alpine, TX 79830.



Does the State Have the Right?

This article, by clothing consultant Jean Batemen of Abilene State School, appeared in the April 1978 issue of the school's newsletter, The Rumor.

Does the State have the right to require a 40-hour work week, ask us to be on time, bring an excuse after three days' illness and walk from a parking area?

How can these outrageous demands be justified by any employer?

People just can't leave well enough alone. I remember back in 1943---why, we walked from Abilene to the "Colony," then worked seven days a week and were ecstatic to get two hours a week off! We had no choice as to when we could take this precious time off, so our recreation was often unorganized. If our two hours off came prior to reporting for work, we got to sleep one hour later, take a little longer getting ready and---best of all---walk slower than usual to the "Colony."

Not only did we get time off, but we were paid handsomely for our duties. We *earned* a total sum of \$37.50 per month. What more could we ask of a State employer?

We thought things couldn't be better, but with the passing of time comes change. And by the latter part of the forties, change is exactly what we got. The State people really had nerve---they took away our seven-day work week and substituted the 48-hour work week with eight hours off per week.

Along with this change came 12-hour

shifts and two dormitories assigned to one person, each dorm having 60 "patients." At the same time salaries were increased to an unbelievable high---\$90 per month.

We would settle into a comfortable routine, finally accepting the new rules and regulations, and everything would be changed again. For example, in 1950 it was decided that employees had to rotate. Our hours were from 6-10 and 2-6.

There were more adjustments to make, but salaries were raised to \$126 per month, which did make the adjustments considerably easier.

And 1960 brought even more changes. If you can imagine---salaries were raised again, a 40-hour work week began and workloads were lightened. How could they expect us to tolerate so many drastic changes?

Between the sixties and the seventies we were forced to adjust to even greater changes such as improved facilities, a base pay of \$534, rotating weekends off for every employee, sick leave, paid vacation, holidays and better retirement benefits, responsibility for one dorm with 15 to 30 clients---and, heaven forbid, we are asked to walk from a parking area to a building.

When we review the last 30 years, it really makes us wonder. How can we tolerate all these changes?

Does the State have the right?

Conference Calendar

June 19-20

Section 504: How to Make It Work in Texas

A conference on equal employment, physical access, nondiscrimination and compliance with Section 504 of the Vocational Rehabilitation Act of 1973

Held in Austin

No fee; preregistration requested

Contact: Advocacy Inc.

5555 N. Lamar, Suite K-109

Austin, TX 78751

(512) 475-5543

June 19-23

A Group Relations Conference on Authority, Leadership and Organization in Mental Health

Sponsored by Medical Services Continuing Education of the Texas

Research Institute of Mental Sciences and the Texas Center of the A.K. Rice Institute

Held in Wimberly

Registration: \$50

Contact: Mary Beth Holley

TRIMS

1300 Moursund

Houston, TX 77030

(713) 797-1976, Ext. 405

STS 859-9405

June 22-23

Sexual Counseling Approaches

July 6-7

Working With Councils and Boards

July 13-14

Invisible Clients: Crisis Intervention by Phone

July 20-21

A New Model for Bilingual-Bicultural Intervention with Chicanos

Aug. 3-4

The Role of Individual Temperament in Counseling

Aug. 10-11

Advanced Practice with Genetic Clients

Sponsored by Worden School of Social Service, Our Lady of the Lake University

Held in San Antonio

Registration: \$50-\$60

Contact: Ms. D. Furber

Worden School of Social Service

Our Lady of the Lake University

411 SW 24th St.

San Antonio, TX 78285

(512) 434-6711, Ext. 115

June 23-July 1

1978 Summer Study Program on Rural MH Services; Program on Administration for Rural MH Administrators; Annual Meeting of the Association for Rural MH

Held in Madison, Wisc.

Registration fees vary

Contact: Mental Health

University of Wisconsin-Extension

414 Lowell Hall

610 Langdon St.

Madison, WI 53706

July 27-28

"Psychotherapy of the Psychoses"

Held in Houston

Contact: Robert R. White

Director, Medical Services

Continuing Education

Texas Dept. of MHMR

P.O. Box 12668, Capitol Sta.

Austin, TX 78711

Searching for Centenarians

By Lore Feldman

HOUSTON--If you are 100 years old or know someone who is, Suha Beller, M.D., wants to talk to you if you live in the Houston area.

Dr. Beller, a geropsychiatrist and supervisor of the geriatric clinic at Texas Research Institute of Mental Sciences (TRIMS), is interested in a long, active life for himself and others. He is starting a research project to examine the biological and social characteristics of centenarians in the eight-county Houston-Galveston area, assisted by researchers from the Center for Studies in Aging at North Texas State University and Charles Gaitz, M.D., George Niederehe, Ph.D., and Thaddeus Samorajski, Ph.D., of TRIMS.

Dr. Beller's interest in superseniority stems from his study of sprightly elders in Turkey, some of whom were said to be as old as 140 but might have been a mere 103 or so. He met them while he worked as a chemical engineer in that country, and he has slides showing the elders working in the fields and dancing at festivals.

Dr. Beller published two papers from his Turkish studies which showed certain blood types prevalent among the centenarians. The majority were in good health with vision and hearing fairly intact. They had lived on simple diets with little meat or animal fat, had eaten a great deal of yogurt, smoked pipes but no cigarettes and were moderate drinkers and vigorous exercisers. All of them had been married, and three-fourths of the men claimed to have continued sexual activity until at least 90 years of age. They enjoyed their long life and were honored by their village communities.

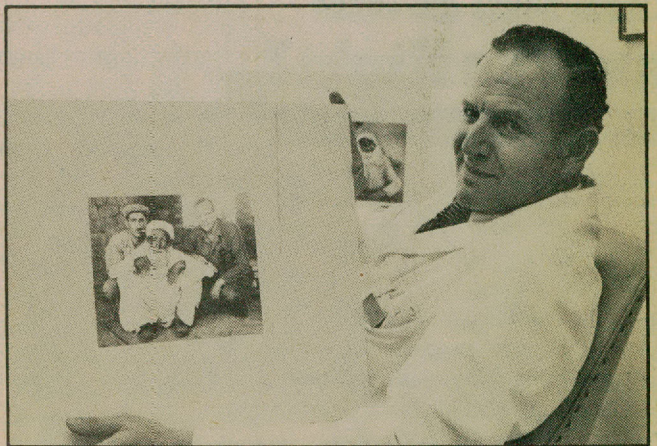
Now, if he can find enough volunteers, Dr. Beller would

like to do a similar study here, comparing the centenarians to a group of retired elderly persons 65 to 85 years old and following the groups for three to four years.

For this country, in which a growing number of people are reaching advanced age, the study will be a pioneering work to identify the ingredients of a healthy old age.

For referrals or information, contact Dr. Suha Beller, Geriatric Clinic, Texas Research Institute of Mental Sciences, 1300 Moursund, Texas Medical Center, Houston, TX 77030. ■

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



Turkish citizens 100 years old or older, like the man in white in the photograph, led Dr. Suha Beller to research the ingredients of a healthy old age among centenarians in the Houston area. Photo by Jefferson Fegley.



IMPACT

Published bimonthly by the Texas Department of Mental Health and Mental Retardation, P.O. Box 12668, Capitol Station, Austin, TX 78711.
John J. Kavanagh, M.D., Commissioner

Arts, Graphics and Educational Services:
Harley Pershing, Director
Hazel Casler, Coordinator
Judy Osborn, Editor, IMPACT
Nancy Collins, Graphics Coordinator
Helen Koinm, Illustrator
Jo Ann Hammer, Photographer
Phyllis Haydon, Production

IMPACT will be sent to persons requesting it. Enclose full address label when submitting change of address. News items welcome.

SHARE THIS COPY OF IMPACT

address correction requested
return postage guaranteed

An Equal Opportunity/Affirmative Action Employer