

County to contract with private providers under Medi-Cal/Short-Doyle plan

CONSOLIDATION BEGINS FEB. 1; SUPERVISORS UNANIMOUS

INTERVIEW:

DR. KAREN GUNN

Mental Health
Advisory Board
Executive Assistant



Dr. Karen Gunn is the executive assistant to the Mental Health Advisory Board (MHAB). The 17 member board is appointed by the Los Angeles County Board of Supervisors to advise them and the director of the Department of Mental

"I think I have made a personal and professional commitment to the social action kinds of things . . ."

Health. Its purpose is to open the process to the citizens.

Gunn is well qualified to work in this community process. She holds a doctorate in community clinical psychology from the University of Michigan and has experience in public administration, applied

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As of Feb. 1, 1983 all fee-for-service Medi-Cal mental health services must be provided through a county approved Short - Doyle/ Medi - Cal provider.

Individuals will no longer go to individual fee-for-service Medi-Cal providers, but will go to the county or private providers contracting with the county.

The Los Angeles County Board of Supervisors decided unanimously to participate in the pilot project to consolidate the fee for service Medi-Cal and Short-Doyle systems.

The purpose of the pilot project is to test whether consolidation of the two publicly supported systems into a comprehensive single system will accomplish a more efficient and appropriate delivery of mental health services.

Consolidation was mandated by the state Legislature to be effected statewide by July 1, 1983, if approval is given in the Budget Act.

Los Angeles County is one of 16 counties to begin consolidation in advance of the statewide date. There is the possibility of financial advantage to the county in the earlier implementation of the plan.

Medi-Cal is a tax supported, medical assistance program funded 50 percent by the state and 50 percent by the federal government. Only mental health related Medi-Cal services will be involved in consolidation.

Medi-Cal services unrelated to mental health are not affected by the consolidation.

Short-Doyle is the state law under which public mental health services are provided in California. The state pays 90 percent of the cost of Short-Doyle funded programs, with the county supplying the remaining 10 percent.

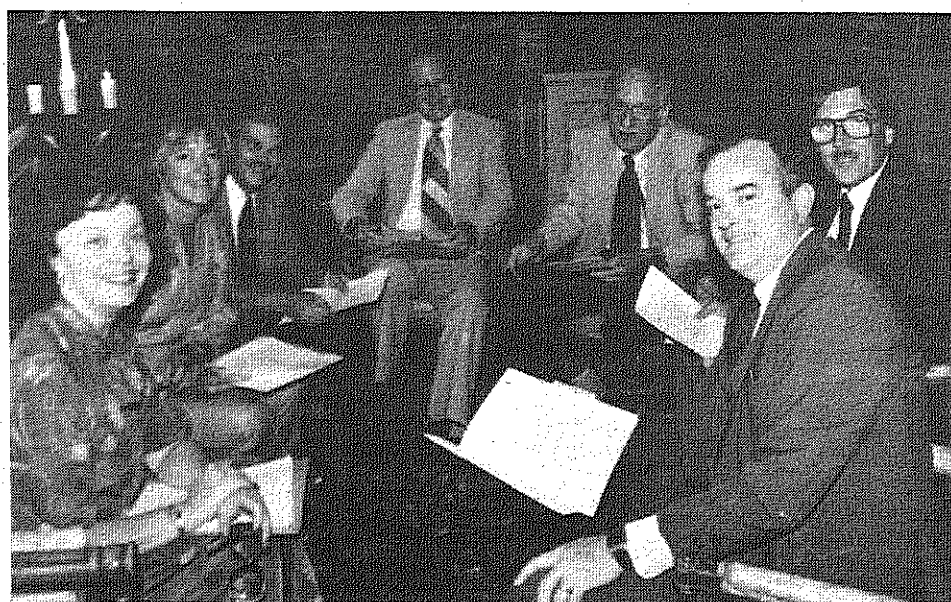
Some providers including the California Psychia-

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FOR DARK
MORNINGS"**
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**SIBLINGS:
A CASE
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Members of the organizing committee for the proposed Project Return clubhouse and education center met following the Project Return Awards luncheon (see page 3). Seated (l-r) are Anne Murphy, Susan Ronc, Dr. Roger Farr, Don Richardson, Don Carlisle, John Siegel and Richard Van Horn.

WHEN DISASTER STRIKES, COUNTY MOVES INTO ACTION

by Julia Scalise

On Saturday, Sept. 4, Margarita Mendez, M.S.W., received a phone call from Dr. Areta Crowell, Los Angeles County Department of Mental Health bureau director of Program Development.

That phone call put the department's Disaster Plan into action.

The Disaster Plan is a procedure through which the department makes its staff available for mental health services in the event of an emergency or disaster situation.

In this circumstance, the disaster was the Sept. 4 fire at the 50-year-old, four-story Dorothy Mae Apartment Hotel on Sunset Blvd., inhabited primarily by Hispanic persons. The Red Cross set up a shelter at the Belmont High School gymnasium.

One of the mental health professionals providing services said the Red Cross described the blaze as one of the worst fire disasters it had ever seen, and fire department personnell's comments in published accounts of the fire echoed that sentiment. A total of 24 persons were killed in the blaze.

"It was such a disaster, such a loss for so many people," said Mendez.

Mendez, clinical district chief at East Los Angeles Mental Health, along with psychiatric social worker Lupe Ramos, M.S.W., and program head Rita O'Neil, were involved in providing services. Elena Dehmer, L.C.S.W., psychiatric social worker, and Reina Juarez, Ph.D., clinical psychologist, both from another Central Region facility, Roybal Comprehensive Health Services, took part in the plan. Ana Luisa Espinoza from San Antonio Mental Health in the Southeast Region also participated.

Calmecca, a non-profit organization made up of Hispanic mental health workers, volunteered their time and did in-home follow-up service.

The professionals from the Department of Mental Health provided initial services at the shelter and the coroner's office and have been involved in follow-up services. They provided crisis intervention, "doing community outreach and consultation," said Dehmer.

"We made a difference. We were there at that moment," said Juarez. "If we had not been there, there wouldn't have been anyone there for them, because they were poor and Hispanic."

Mendez went down to the shelter the morning of the fire. On Tuesday, Sept. 7, she and Ramos went to the coroner's office where the relatives were identifying bodies.

"They wanted someone there from mental health," said Mendez. "We were there for support." They did interpreting for the coroner's office.

Dehmer and Juarez went to the shelter Tuesday night. There they discussed with the families what to expect, what kinds of emotional stages they might go through, and they talked with the children.

"Their boss assigned them (Dehmer and Juarez) to this," said

Mendez, "but she did it because she knew they'd go out there with a commitment."

In addition to providing support, they also were there for the Red Cross.

"One important thing we did was consultation for the staff of the Red Cross," said Juarez. "They were burned out after working Saturday, Sunday and Monday."

"They felt pressure because of the need," said Dehmer.

The county staff also was aware of the need, which Mendez described as "tremendous."

"The thing that really impressed me and kept me from getting burned out was the way the families stayed together and helped each other out. No one was left out," said Mendez. "That was, for me, a reminder of what values are important."

Mendez spoke of a lot of community involvement following the fire. A local church helped at the shelter and with sending bodies back to Mexico. Hispanic radio station KALI held a radiothon.

The follow-up continued through mid-September. Dehmer and Juarez went with families to the coroner's office on Sept. 8, "to provide support and to problem solve with them," according to Juarez. They made home visits as well.

"Our follow-up was important because we were able to identify people (who needed referrals)," said Juarez. "They said they were fine. They were still in shock, and we warned them of possible symptoms."

She also sent out letters "reminding them to come and saying we were available to them," she said.

On Oct. 7, Dehmer went to a dinner attended by 250 families, relatives and friends involved in the fire.

"I let them know we were there to help them as Los Angeles County Mental Health," she said. "I talked to them about procedures, that all the information would be confidential. I talked to them about symptoms."

Reflecting back upon her involvement, Mendez said that "there has to be an awareness that this could happen, and you could be called. I have brought it up at my staff meeting."

"As an agency, we need more orientation than any of us had to do this crisis intervention work," she said. "The thing is to be there when you're needed, when it's actually happening. If I had had a little more orientation, I might have been better prepared."

"Now that we've gone through it, we can share it," she concluded. "Anyone in the Department of Mental Health can call any one of the three of us and use us as resources."

The Department of Mental Health is planning on participating in disaster drills scheduled for this fall and early next year.



Working together are Alliance for the Mentally Ill-San Gabriel Valley President Andrew O'Connor, Mental Health Association in Los Angeles County (MHA) Vice-President Tina Judkins, Los Angeles County Department of Mental Health psychologist Dr. Christopher Amenson and MHA staff San Gabriel Valley Regional Director Lucie James (l-r).

THREE GROUPS SHARE ONE GOAL

by Julia Scalise

This month marks the second anniversary of the Alliance for the Mentally Ill-San Gabriel Valley. The organization counts 75-100 persons as members of this relatives and friends of the mentally disabled support group.

It also receives strong support and involvement from two local offices of mental health organizations — the San Gabriel Valley Regions of the Mental Health Association in Los Angeles County (MHA) and of the Los Angeles County Department of Mental Health.

Christopher S. Amenson, Ph.D., psychologist at the county's Arcadia Mental Health Services, described his relationship with the parents group as "the most enjoyable thing and most rewarding thing I've ever done as a professional."

"It's rewarding because I can see the families doing better . . . and because they're so appreciative of anything I do. So many families are used to being abused by professionals," Amenson said. "What they're used to is being dumped on and what they want to do is be helped so they can help."

Approximately one-fourth of Amenson's county time is spent working with the parents, and he said the relationship between the two groups is important to the county.

"What you're doing in effect is taking the two most potentially potent groups as therapists and making allies of them," he said. "To the degree the parents and professionals fight, the ill person suffers. To the degree the parents and professionals work together, the ill person does better."

Parents make up nearly one-third of the active members on the San Gabriel Valley Region's Regional Community Liaison Committee (RCLC) citizens advisory group. This "makes sense," according to Amenson, because "many of the chronically mentally ill can't speak for themselves, but the family can."

A joint venture undertaken by the parents group and the county is a series of coping classes called "Everything You Always Wanted to Know about Schizophrenia but Were Afraid to Ask" and "Surviving and Thriving with A Mentally Ill Relative." It is built around the premises "you can't make good decisions unless you have information" and "what does it mean to the family in specific and understanding terms," according to Amenson.

The series is an expansion of coping classes Amenson was asked to do last year. The original four classes grew into 23 and were open only to the relatives and friends group.

"It was apparent there was such a need, and the classes were so well received that we decided to go public with them in September," Amenson said.

Approximately 100 people attended each of the sessions, which end Nov. 4. From there, the series moves into a second phase, where participants will "break down into smaller groups and meet weekly for about nine months. It will give us a chance to discuss specific issues in each family," he said.

While no new participants will be accepted into the second phase, Amenson said that "we will offer it again in the future."

Of the series, Amenson said, "I think there's been uniqueness working together

in this way, but the interaction has been rich and varied for two years now."

He works with the parents on a one-to-one basis outside meetings and classes.

The Department of Mental Health often refers families of schizophrenics to the group, several ill relatives are clients at Arcadia Mental Health and several have become patients since Amenson's connections with the relatives and friends group, he said.

Amenson has been a member of the group for almost two years, first attending one of the organizational meetings. The group was then called Relatives and Friends of the Mentally Disabled in Pasadena and was started by Lucille Sunde, currently vice-president.

"It became immediately clear to me that it was a group struggling with difficult issues and working hard to help each other with them. There was a real sense of loving, caring and supporting each other in the group," he said.

Alliance for the Mentally Ill — San Gabriel Valley apparently reciprocates Amenson's feelings about them. On Oct. 15, the group honored him at a pot luck dinner attended by 70 members, complete with a presentation made on behalf of the group by its president, Andrew O'Connor.

"He makes so much of it click. He's a good advisor for us," O'Connor said of Amenson. "He is always available for advice or just to talk a problem through."

Both MHA San Gabriel Valley Regional Director Lucie James and board member Tina Judkins, vice-president for regional development, are active with the parents group.

"I believe in support and self-help groups; I believe they're important in the community," said Judkins, who has been involved with the group since its beginning. "It's important for board members to become aware of community activities and groups in the county. I also believe it's important for board members to support community groups, such as the relatives and friends."

James, whose involvement with the group began earlier this year, viewed her role as a "link to opening up a little more communication" between a variety of groups in the region.

As an example, she coordinates an activities program at community care facilities. Through the program, called a "recreation group" by O'Connor, parents go to board and care homes, "seeing what we can do to enrich their lives," he said. This has included showing a film, playing bingo and creating holiday crafts.

James is now working on a training workshop for families and providers, still in the planning stages. The workshop will be a training session where a panel of parents discuss, from their standpoint, having their child in a board and care home. The workshop will then continue as a discussion between parents and providers.

She also is working with Alliance for the Mentally Ill — San Gabriel Valley and Advocates for the Quiet Minority parents group on joint training sessions in areas of shared interest.

In addition to the recreation group, members of the parents group are involved in a number of ways, including speakers programs, with speakers ranging from controversial to futuristic to practical, according to O'Connor, and they take part in health fairs. A relatively new area for the group is political activity. In the past, the group has written letters,

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PROJECT RETURN SAYS GOOD-BYE TO RHODA ZUSMAN — "THE ACE OF CLUBS"

by Julia Scalise

"Basically, I'm feeling good about the development of the project over the past two years. As sad as I am to leave, having worked with John (Siegel) as co-director, I know the transition will be an easy and smooth one, because John is willing, capable and devoted to the continued progress and success of the program," said Rhoda Zusman, co-founder and director of Project Return self-help clubs.

She and her husband, University of Southern California professor Jack Zusman, M.D., have accepted new positions in the Florida mental health community.

In September, Dr. Jack Zusman started work as the new director of the Florida Mental Health Institute in Tampa, a research, training and clinical institute in mental health. It is associated with the University of Southern Florida.

At USC, he was professor of psychiatry and adjunct professor of law.



Rhoda and Dr. Jack Zusman

He came to Southern California from New York in 1973, when, in addition to the USC position, he was medical director of Gateways Hospital and Mental Health Center.

Rhoda Zusman's new post is as consultant to the chief of psychiatry at the Tampa Veterans Administration Hospital. There she will be "working with the staff to develop innovative vocational, rehabilitative and community support programs."

"My goal is to help to develop additional options and opportunities for rehabilitation of the emotionally handicapped in the Tampa area," she said.

She also has received an appointment as clinical instructor in the University of Southern Florida Medical School department of psychiatry and behavioral medicine. Additionally, she will be working as a volunteer with the Mental Health Association in Tampa.

In Los Angeles County, she was a rehabilitation consultant to the West Los Angeles Veterans Administration Medical Center and to the Los Angeles County Department of Mental Health. She was director of Project Return since she and John Siegel started the program in 1980. She first organized Project Return in Buffalo, New York, in 1971.

Locally, Project Return is a Mental Health Association in Los Angeles County (MHA) federation of self-help clubs for recovering emotionally disabled adults.

The Third Annual Project Return Awards Luncheon, held Oct. 5 at the Ambassador Hotel, was the setting for a farewell tribute to Rhoda Zusman.

Rather than a traditional speech, guest speaker Dr. Milton Miller, Los Angeles County Department of Mental Health Coastal Region director, entertained by playing the piano and singing original lyrics to popular show tunes.

Among the seven selections, "Our Love is Here to Stay" became "Project Return is Here to Stay," complete with the lyrics "Project Return, we're very proud of you, Both for your heart and the work you do, Because you

care about people, people who need you, Sometimes they've lost their way . . . Although the Dodgers may crumble, the Rams lately fumble, They're only made of clay, But Project Return is here to stay."

As a finale, Los Angeles County Department of Mental Health administrators Dr. J.R. Elpers; Dr. Harold E. Mavritte; Dr. Areta Crowell; Dr. Pamela Reagor; Roberto Quiroz, M.S.W.; and Allan Rawland, M.S.W., along with Miller, performed a rendition of "Hello, Rhoda" to the music of "Hello, Dolly." The lyrics included the lines, "We're proud of you and all that you have done . . . so, bring her back, Jack, or you're going to be a bad Jack, Rhoda, we think that you're the Ace of Clubs!"

Mary Gray, senior deputy to Supervisor Deane Dana, presented Zusman with a commendation from the Los Angeles County Board of Supervisors. Zusman also received the Project Return Federation Members Award, given in appreciation by club members. It was presented by federation President Larry Brownstein.

Rhoda Zusman and Siegel, co-founder, were given commendations from William Anderson, director of the West Los Angeles Veterans Administration Medical Center. Siegel also was presented with the newly created Rhoda Zusman Award.

The luncheon was a time to recognize leadership and outstanding achievement among club members, volunteers and club facilitators.

Six members of the Project Return Players improvisational theater troupe directed by Carrie Bray entertained at the luncheon. Eleanor Alpert, Bill Richardson, Terry Parkhurst, Peter Fogler, Shelly Chernock and Clayton Hall were the Players performing.

The luncheon ended with a preview of plans for the development of the



Among the Project Return Players performing at the luncheon were Bill Richardson, Clayton Hall, Terry Parkhurst, Shelly Chernock and Peter Fogler (l-r). Also appearing was Eleanor Alpert. The Players are directed by Carrie Bray.

first Project Return social clubhouse and education center for emotionally disabled persons in Los Angeles County.

Rhoda Zusman will continue as a consultant to the education center and has plans to return to Los Angeles on occasion.

"With the support of MHA staff, parents groups and leadership of Project Return members, I am optimistic that the project will expand its support network to reach many new people in the community and to develop the clubhouse, which has been planned and hopefully will become a reality next year," she said. "It has been particularly gratifying to see the individual growth of all the members in Project Return and the inspiration they are to others who have experienced emotional disability. Our motto of 'People Helping People to Help Themselves' is truly at work in the Project Return program."

"Los Angeles has been a wonderful and gratifying place to be," she continued. "I will sorely miss all the friends and colleagues I have here, but I will be back."



William Anderson, West Los Angeles VA Medical Center director, and John Siegel, Project Return co-director (seated, l-r), were presenters at the awards luncheon, where Frances Ronk, John Everett, David Balvin and Shelly Chernock (l-r) were among the award recipients.



Project Return President Larry Brownstein and Director Rhoda Zusman



Mary Gray, senior deputy to Supervisor Deane Dana, presented a commendation to Rhoda Zusman (l-r) from the Board of Supervisors.



Los Angeles County Department of Mental Health Director Dr. J.R. Elpers



Los Angeles County Department of Mental Health administrators Allan Rawland, M.S.W.; Roberto Quiroz, M.S.W.; Dr. J.R. Elpers; Dr. Pamela Reagor; Dr. Areta Crowell; Dr. Harold Mavritte; and Dr. Milton Miller (l-r) took part in a musical tribute to Rhoda Zusman.

FILM TV BOOKS

CAPTAIN FOR DARK MORNINGS

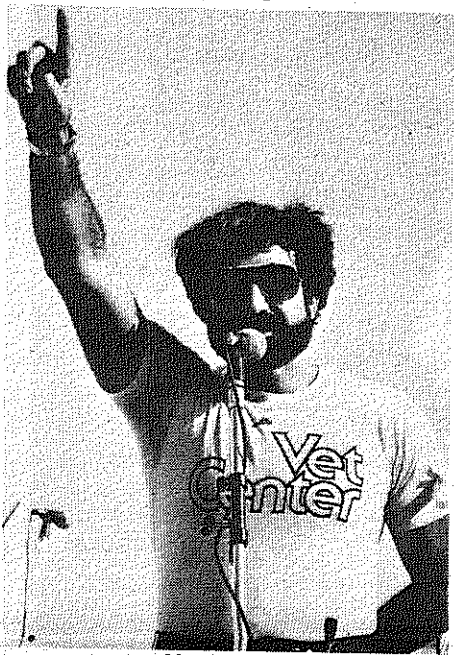
By Shad Meshad

"Sometime before any of us had arrived in Vietnam, a Catholic psychiatrist had been stationed in that KO unit. He'd left the words pax mentis (peace of mind) behind him, his version of 'Kilroy was here', I guess. It was scratched on a couple of pieces of furniture, and painted on the psych unit Jeep.

"We all picked up on it. It became our logo at the psych unit. I loved it. That's all I wanted to do for people after a while; just give them some peace of mind."

These are the words of Captain Shad Meshad, psych officer in the U.S. Army, in his just published personal story of Vietnam, *Captain for Dark Mornings*.

This true story is written from the perspective of an officer trained in counseling. It is an important book for



Shad Meshad

mental health professionals because it relates to the needs of some veterans and their families today.

Much of the setting is the 95th Evacuation Hospital in Danang. The year is 1970.

Meshad brings the reader through his experience, with images and people you want to cast in a movie — so vivid are the scenes. It is exciting to "watch" this book because it is real and he tells it that way. Officers, nurses, chaplains, grunt, prostitutes, friends and enemy — all are caught up in war no one could explain and the country did not want to acknowledge.

It was emergency duty in the Triage room that, early on, brought the war in focus for Meshad.

"Instantly the room was filled with the warm smell of blood and the dead and wounded who lay together . . . a dark green mass with red blotches. . . I grabbed a large red-headed man with Green Beret insignia on his uniform.

"Okay, man," I started saying over and over. "It's going to be okay."

The doctor comes over screaming, "Just the live ones," he screams.

"Doctor, this man is not dead," I scream back . . .

"Everything was deceptive. A man would lie there with a pin hole wound in his chest. Turn him over — his back would have been blown out."

Meshad's responsibilities as psych officer were to fly to different front line fire bases and check out soldiers who were problems. Later they were screened at the Danang hospital.

"A lot of my time went into keeping up these reports on men caught raping villagers, trafficking in drugs, murdering or attempting to murder men in their own units, anything."

There were men who were "genuinely flipped out," as well as those who just did not want to kill any more people, or hear one more round of artillery.

"They had to keep up the body

counts. They were afraid of being killed. For what? They wanted me to guide them out of this no-win situation."

Meshad indicts the military, and certain officers, with examples of behavior in Vietnam than served only to deepen the tensions.

Insight into the situation between blacks and whites threads through the book, but is best illustrated in the chapter on "The Dap," explained as a complex ritual greeting, used by blacks as an expression of unity and brotherhood and found threatening by whites.

In another example, he tells of riding into one base with an M.P. who stopped the jeep, took out a rifle and shot a soldier's pet dog because the commander "doesn't allow dogs on the base. Any pets." Before returning to the hospital, Meshad tells of warning this commander that he was running his base like a prison camp and that the morale of his men was low.

Weeks later, the commanding officer appeared at the Danang hospital in a body bag, a victim of fragging.

Interspersed with the fraggings, drugs, military regulations, suicides, dark morning patrols and friends who disappear are events filled with laughter, emotion and love.

While this is a war story, it is about people and their human condition, rather than about battles. These are different kinds of battles.

Meshad's relationship with a prostitute and his friendship with "L.T." Franco are well explored, but with others, the reader is left looking for the next time a character will appear. The reader is left wondering about their resolution.

The language and the style are direct and while this is appealing, the writing is not polished.

Another distraction is the gratuitous advertizing Meshad gives to his friends.

Captain Meshad was awarded the Bronze Star and was wounded when shot down in a helicopter. None of this helped him when a change in command brought a spit and polish officer to the 95th and a court-marshal for Meshad over the length of his mustache.

The description of the commanding officer, "this insane Napoleon the 95th had inherited," and the confrontation with a major in the latrine, are reminiscent of scenes from M.A.S.H. It is worth the price of the book.

The judge, incensed with the absurdity of the case (and wearing a mustache himself), threw the case out of court, but not before Meshad explodes at his commanding officer with . . . "Guys are coming into us with no legs or arms, rotting feet, drugged up, shot up, shell-shocked, freaked out, and this lightweight KO friend is supposed to put their heads together and readjust their thinking so that when they go back home, if they make it, they don't go crazy and kill some good taxpaying Americans.

"We're supposed to fix 'em up so they'll watch baseball, eat apple pie and remember what it was like to throw a ball, shake hands and have a buddy who did not have guts spilled over his shoes."

Meshad counterpoints events throughout the book with the present day treatment of these veterans. He is a leader in the movement to secure Vietnam veterans their rights.

He writes, "This whole thing that we now call 'post traumatic stress disorder' was so inevitable. All these people that are so ----- up — guys that tried to live up to the values of their parents, who tried to be World War II type GIs. They couldn't because it never existed."

. . . "Ten years later and here they are now. The same thing really. For 10 years people have been saying Viet vets are crazy. They are not. They're in a no-win situation. No one wants to deal with them. And they didn't then, when they were over there."

— Lorraine Wilson

CONNECTIONS WITH THE EDITOR LETTERS

Open Letter to Each and Every Heart

Feel the next war
The bombs from across vast seas
The devastation, the agony, the death, the sickness
The end
The world gone in one gray moment
Gone in one final mushroom of suicide
How have we come to this
How has this madness come upon us
How we tolerate it is beyond belief
Are we all insane

Now see the smile in a child's eyes
See a soaring eagle
See the green fertile fields
Feel the warm sun on your body
Feel how you love your life
The precious moments of serene beauty
Those moments when love fills your heart
Your warm bed the very last moment before sleep is upon you
Feel your humanity
And now ask yourself do we really need more bombs

Let's do something about it
Before the devastation
Before the ruination of this glorious beautiful earth
Before all mankind blows itself into Oblivion
We must learn the lesson of peace

It's time for all the people of the world to come together
To unite, to understand each other, to live together
What do you have to do today that is more important?
It's time for our leaders to seek peace
It's time to demand this from our leaders
It's time to dismantle the monstrous machines of war
It's time to plant the seed of peace
It's time for mankind to come of age, to bloom
To heal its bleeding wounds, to open its aching heart
To awaken
Or die a final agonizing death, too horrible to imagine
It's your choice, do something today
Write a letter, tell a friend, sing a song of peace
Hug a child, march for peace
Grow
And let peace fill your heart
And most importantly of all, love
Love to the very fullest extent of your being, from the depth of your heart
Love!

John Marabella
Project Return member

CONSOLIDATION Continued from page 1

tric Association have criticized the consolidation effort. Reservations about the plan center on concern for quality service and concern for the evaluation process.

Medi-Cal will cost almost \$5 billion in California in the current year (\$2.82 billion for the state's share and \$2.15 billion in federal matching funds). Of this amount, only a small portion is mental health related. The figures have not been given for Los Angeles County Medi-Cal dollars and few county officials are willing to guess. One amount used for a public meeting is \$24 million.

The Mental Health Advisory Board, which recommended consolidation to the supervisors, agreed with the Legislature's goals for the consolidation project. These goals were outlined as: improving the fiscal management by focusing program responsibility for

costs and revenues in a single entity; reducing inappropriate services, especially unnecessary hospital-based services by consolidating funds and allocating resources to meet priority needs.

Kathleen Snook, assistant to the director, Administration for the county Mental Health Department, said letters of notification will be sent to providers and to all Medi-Cal patients.

The county staff in the regions is working to insure response to all requests for service from former Medi-Cal clients.

Meetings have been held with various groups and will continue in the five regions.

A task force will be set up to monitor the consolidation effort. For information about consolidation call Herman Williams at the Department of Mental Health at 738-4961.

CONNECTIONS NEEDS YOUR HELP

If you would like to support Connections as a valuable communication tool for mental health concerns in Los Angeles County, please send this form and your donation today to: Mental Health Association in Los Angeles County, 930 Georgia St., Los Angeles, CA 90015.

Name _____ Amount \$ _____
Address _____ City, State, Zip _____
Donations to MHA are tax-deductible.

Make checks payable to the Mental Health Association in Los Angeles County and indicate the donation is for Connections.

GROUPS

continued from page 2 sent telegrams and "tried to keep up with bills," according to O'Connor, who said that "we haven't done as much as we should," but added that "we are going to get stronger in that area." The next step, he said, is to "keep up with the local offices" of legislators.

Another new venture, as suggested by a member, is to "try and start a parents group at skilled nursing homes and board and care homes," said O'Connor. The purpose of those groups would be "to meet to try to understand the facility their relative is in" and to interact with their relative and others.

Finally, O'Connor said, "One of the prime things we do is called 'caring and sharing,' and that lets people talk about their situation. They're able to do it a little easier when they find out everybody's in the same boat."

As group member Alice Klappenbach put it, "I was fortunate when I came to know about it (Alliance for the Mentally Ill — San Gabriel Valley). Since I have joined the group, I have found friendship. Sometimes when I have needed some kind of support, I have found it. I always felt so alone; now I feel I'm part of something."

For information about the parents group, call O'Connor at 449-4217.

FILM FESTIVAL EXPLORES FAMILY RELATIONSHIPS

"Two for the Road" is the November showing in the "Human Relationship" film festival presented by Calif. Family Study Center.

"Human Relationship" is a once a month film series exploring love and relationships through film, featuring family therapists as guest speakers. Following each film, the therapists lead discussions on the on-screen relationships, using the family systems perspective.

The series continues every third Sunday of the month through May except December at 10:30 a.m. at the Brentwood Theater, 2425 Wilshire Blvd., Santa Monica. A \$5 admission donation is requested.

Calif. Family Study Center is a non-profit, educational training and counseling center.

Starring Audrey Hepburn and Albert Finney, "Two for the Road," the Nov. 21 film, follows a couple's relationship from first meeting through ten years of marriage.

After a December break, the series resumes Jan. 23 with the scheduled Dyan Cannon's "Number One" and "Men's Lives," 1975 Academy Award winner for Best Student Documentary. Another Academy Award winner, "Splendor in the Grass," starring Natalie Wood and Warren Beatty, is scheduled for Feb. 23, followed by "The Wild Child," a true story, on March 20.

"Rachel, Rachel," the Film Critic Award recipient directed by Paul Newman and starring Joanne Woodward, is the scheduled April 17 film. The series closes on May 15 with the animated "Everybody Rides the Carousel" and "Birth without Violence."

Therapists taking part in the series are Fred Gottlieb, M.D., Family Therapy Institute of Southern Calif. director; Edwin S. Cox, Ph.D., Calif. Family Study Center president; Hadley Fitzgerald, M.A., Calif. Family Study Center administrator and clinical supervisor; Joshua Golden, M.D., director of the UCLA School of Medicine Human Sexuality Program; Margaret Golden, C.S.T., Family Therapy Institute of Southern Calif. staff member; Lo Sprague, Ph.D., Calif. Family Study Center clinical supervisor; Richard P. Varnes, Ph.D., Calif. Family Study Center vice-president of faculty affairs and clinical supervisor; Christine R. Varnes, M.A., Calif. Family Studies Center vice-president of academic affairs and clinical supervisor; and Julian Norton-Ford, Ph.D., Calif. Family Study Center director of research.

For more information about the film series, call 843-0711.

ESSAY

A CASE OF NEGLECT: SIBLINGS OF THE MENTALLY ILL

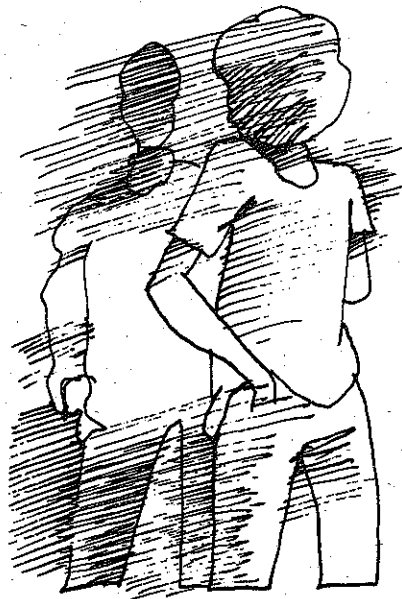
By Wendy Carlisle, M.S.W.

Families of the mentally ill are confronted with an experience for which most people find themselves unprepared. With the onset of the illness, the family is faced with an anxious journey through deeply disturbing emotions — feelings of confusion and general uneasiness — which progress from seeking reassurance, minimizing or denying the illness, to a mirage of others, often including anger, guilt, blame, grief, shame and self-distrust. For a period of time, the family's world becomes confused, disordered and out of balance in response to the illness.

For a sibling in adolescence or young adulthood growing up in such a troubled family, special difficulties arise. This individual is at a particularly vulnerable age, struggling with the normal life tasks of identity development, separation and individuation from the family, in addition to the traumatic family crisis. Unique difficulties exist for siblings because of their role and perspective as another child, as well as being a close peer to the mentally ill individual.

One of the most significant outcomes of a study recently completed as a Master's thesis at the UCLA School of Social Welfare confirmed that the experience of having a mentally ill brother or sister was indeed a difficult one and affected the siblings' lives in a number of profound ways. All of the siblings suffered some degree of anguish as a result of the illness, and many felt that their experience had influenced them in terms of major life decisions such as career and marital choice.

The time of onset of the illness was an extremely difficult period for most of the siblings. Comprehending or simply not knowing what was happening to their sibling, acceptance of the illness, coping with their brother or sister's behavior and the sibling's



own emotions were frequently cited as making this time especially troublesome. The emotions that many siblings experienced when they first noticed changes in their brother or sister's behavior ranged from confusion, puzzlement, fear, terror and concern to denial, frustration, shame, pity, annoyance and anger. One sibling recalled her response:

I was really frightened. . . I thought my coming home had upset everybody. I was terrified. I thought he might die like my other brother.

During the time of the illness, feelings of insecurity, loneliness and loss frequently emerged. Several siblings noted fearing for their own sanity,

questioning if they, too, would become "crazy," as if "some wierd time clock were ticking away" inside of them. Grief-like stages emerged in response to the recognition and acceptance of the illness. Several referred to their brother or sister as if he or she had died. In fact, a distinct similarity existed between the reactions to mental illness and impending death; although one is final, in some cases of severe chronic disturbance a sort of death in life occurs as the individual may never return to function at his or her previous level. Another sibling said of her experience:

I think that it's affected everything . . . I realize how much I miss her — it's like the sister I used to have simply does not exist anymore. I miss the closeness. It's almost as if my whole past is gone . . . I feel I'm not like "normal" people . . . I'm constantly examining myself.

Family changes exacerbated this sense of loss; frequently siblings found past images of their families shattered, and often the nature of their families' interactions changed. Commonly, the siblings' role within the families shifted as many assumed, or were given, more responsibilities, status and power. Others were seen as more childlike or helpless and in need of protection. While some siblings received more attention and increased expectations from their parents, others felt neglected, shoved aside and lonely.

Previous perceptions of parents frequently changed, often with an increased awareness of parental vulnerabilities. Generally they were seen more critically and sometimes with an increased respect. Whereas some siblings felt closer and interacted more with their parents, others felt more distant and interacted less.

For the sibling, increased family tensions often had an emotional impact beyond the family's interactions. This sibling described her experience:

. . . It was a very unpleasant place to be because of tension. So even though I don't go there, it's part of you and you take it elsewhere, that tension and that unpleasantness and that little black space inside of your psyche that you're definitely not proud to show to other people and you can't forget it.

In fact, many siblings found particularly distressing the effect on their relationships outside of the family. Many felt it affected their choice of friends, some noted looking more closely at the behavior of others and feeling more selective about the people with whom they wanted to be involved, particularly marital partners.

It showed me who my true friends are . . .

. . . my social life — I wouldn't want to bring my friends around because my brother would say something really crazy to them. . . .

In relationships, I'm careful about opening up too much to people I don't know very well, even to people I know well. There's only a handful I could talk about this with because of their reactions. . . .

The family crisis often brought stress and tension into these outside relationships. While some noted not wanting to bring friends home, others felt they limited their interactions outside of the family, feeling a need to be supportive of their parents. Feelings

of stigma associated with having a mentally ill member in the family affected the degree to which many siblings felt they could talk about having a mentally ill brother or sister; many hid the illness and disclosed information selectively to outsiders. Relationships in which the respondents did not divulge information often were more distant.

In sum, these siblings lives were profoundly affected — emotionally; in their relationships with their families, parents and friends; and in their own self-images. In contrast to the almost total lack of mental health services



provided to these siblings was the significant abundance of requests for more knowledge, information, counseling and family therapy. The message clearly is that these individuals need more. The indication is that supportive, early intervention providing information as well as education about mental illness would be particularly beneficial.

Imagine your brother or sister has developed cancer. You have never heard of it before, never known anyone with it nor ever had a serious tragedy in your family before.

Suddenly your brother begins to withdraw and becomes preoccupied with his illness. Your parents are at loose ends. They want to find out what would be the best treatment, what doctors to see, and the expense worries them. On top of all this, no one tells you what cancer is or how it affects someone. Your parents are increasingly concerned with your brother's illness while your brother isn't the same anymore, wanting to do the same things. You hear murmurings through your parents, which your brother sometimes echoes, that it might be because of the family that he has cancer — the way the family interacts may have put too much stress on him and now he is ill. Your brother doesn't get well and everyone talks of his illness.

You wonder if you too have cancer. You fear your friends will know you have a brother with cancer, and now you feel different from them. No one seems to notice you. Sometimes your parents are proud of their "well" son, but other times you are overlooked in the focus on your brother and his illness. The doctors never told you what is happening to your brother, how long it will go on, how it will end, how to help him or just be around him.

No one ever thought of asking you how you felt.

Mental illness impacts lives in much the same way. Many siblings grow up without the information and support they could have used.

Wendy Carlisle, M.S.W., completed her Master's thesis on "Siblings of the Mentally Ill" at UCLA and is now a psychiatric social worker at Tri-City Mental Health Center in Pomona.

The opinions expressed in ESSAY are those of the author.

ESSAY

GNP — GRIM NATIONAL POLICY AND MENTAL HEALTH

By Charles Ansell, Ed.D.

I confess to a touch of irony in assigning this definition to the more familiar term, Gross National Product, for when our economy determines our health delivery services, we are in trouble.

Already the national efforts at cost containment have begun to take casualties. A recent headline in the *Los Angeles Times* read "Inquiry Sought in Death of Disabled."

The article reported the death of 11 persons who had been cut off from Social Security Disability programs.

Still another article described a most curious casualty — a growing hostility to children. For evidence the article pointed to the recent cuts in Medicaid, in Aid to Dependent Children, in School Lunches, in Supplemental Nutrition for Pregnant Women and Infants and in Compensatory Education. Additionally, cuts in Social Security have already dropped the disabled, many of whom have children to support, and the orphaned youth in colleges.

Thousands are left stranded, unserved, lost, let to drift from one service to another, only to be turned away again and again.

At a time of unprecedented unemployment, rules for eligibility have been changed — raised from previous levels. We speak here of the medically indigent.

Other rules of eligibility now limit services to children under 21 years of age and adults residing in skilled nursing and intermediate care facilities.

It is a grim prospect and no one should underestimate the scope and the severity of neglect.

Now comes the Pilot Project.

Will there be casualties here too? While it may be too early to assess consequences, there is a grim possibility that thousands may fall between the cracks.

The Pilot Project is the consolidation of the Medi-Cal and Short-Doyle public funding of mental health services into one system administered by the county.

It is a necessary but highly controversial proposal, enacted by the state legislature to meet cost containment budgets.

Criticisms of the Pilot Project have come from the private sector, long accustomed to treatment modalities which prize quality of care and necessary continuity of service. The private sector is alarmed at what it perceives to be unnecessary haste to formulate

the consolidation on such a vast scale. The Southern California Psychiatric Society has offered cautious support. The California Psychiatric Association has asked that instead of going ahead with Consolidation Pilot Project in 16 counties far fewer counties might join in at the outset so that necessary evaluations can be made from the sample scale.

They have also suggested that a time limit be set for the project's operation so that there will be a time to breathe, to take stock and to make evaluations.

It is plain that the entire Pilot Project is fraught with implications not yet in view. Most of the questions and criticisms return again and again to the built-in compromises not only with the prospect of withholding service to large sections of the populations most in need, but with the near possibilities of undermining standards of care and quality of service.

For the moment, everyone it seems is proceeding with an open mind. The Los Angeles County Department of Mental Health Pilot Project planners have asked for input from all sources.

This should and must become an important opportunity for the public and private sectors involved in mental health services to remain alert to the progress of the project.

Providers should name knowledgeable members of their associations to function as members of the task force to monitor the progress of the program.

To borrow from the beginner typist's manual: Now is the time for all good people to come to the aid of the project.

Cry out against injustices. You will have a sympathetic audience.

Dr. Charles Ansell is a psychologist in private practice, past president of the Los Angeles County Psychological Association and editor of The California State Psychologist magazine.

The opinions expressed in ESSAY are those of the author.

Connections welcomes ESSAY contributions from readers. ESSAYS are opinion pieces on a single subject and are approximately 850 words in length. Connections reserves the right to edit ESSAYS for style and libel. Submitted ESSAYS must include author's name, mailing address and telephone number. Connections also encourages letters to the editor, which should be kept as brief as possible.

To submit an ESSAY, to inquire about an ESSAY idea or for more information, contact Connections at Mental Health Association in Los Angeles County, 930 Georgia St., Los Angeles, CA 90015 or at (213) 629-1527.



Southeast Regional Community Liaison Committee Chairperson James Walker (l) and Central City Community Mental Health Center staff prepare to open doors for cheese distribution held at the center. Central City was chosen as one of the sites for the distribution, a federal program where cheese was given out in low-income areas.

GUNN continued from page 1
research and program development.

She served as staff for the Southeast Regional Community Liaison Committee (RCLC) before this appointment.

In her work with the MHAB, Gunn believes in getting out where the people are.

"I'm not an isolated person. I need to have a sense of what people are feeling. It helps me understand people's problems — the day to day constraints," she said.

"It's all about taking it out there so the folks feel they are involved and can collaborate," she continued.

One example of this is the closer ties being built with the five RCLCs.

"The advisory board established an RCLC committee of the board to bring the relationship between us stronger. The role of the RCLC in the regions is vital with consolidation. They will be the ears to listen for the kinds of problems that are in the regions as we get into it," Gunn said.

Gunn's role with the board is to facilitate their meetings and to keep the chairperson informed and in touch with the issues that are coming up.

"Dr. (Alex) Aloia (chairperson of the MHAB) has been supportive of me, working along without that overseer feeling," she said. "This could be the hot seat," she said, "because you are

"We need to recognize that people have a greater sense of what they need than professionals give them credit for."

trying to develop a balance with your boss in the department (Los Angeles County Department of Mental Health) and the person you are responsible to on the advisory board."

She brings a perspective to the board about community involvement that was developed in her work in Michigan.

There, among other jobs, she worked in a low income area conducting a needs assessment study to see what problems needed to be dealt with and what services were available.

The problem seemed to be drug abuse, and available services were not being used to alleviate the problem.

"We collected our information from the community in stages, and we provided feedback to the community as we went along. We talked with leaders and professionals, not just mental health professionals, and we were able to develop a board of directors as we went along," Gunn said. This process helped to build trust.

"The net result is we started something that has outlived anything else in that community," she continued.

What they started was a center able to match the needs of individuals with

the services of the surrounding community human services agencies.

"We laid to rest some false notions of how to get services out to people," Gunn said. "Perhaps services were provided in a mode, an environment that is a put-off. For example, the client comes to the professional sitting behind a desk in an office. This can be a barrier, and it might suggest that

"Much more exists as a positive nature out there than we realize . . ."

sometimes the professional needs to go out to the folks," she said.

For some people, the traditional model of therapy must change, she asserted.

"We need to recognize that people have a greater sense of what they need than professionals give them credit for," Gunn stated.

"We discovered these people could help with their own solutions."

The mental health of the people in this community was considered to be a complex issue, she explained. "There is a need to understand that the environment has an impact on the person, for example, the unemployment situation, housing and their sense of control or lack of control over agencies there to help them," Gunn said.

About her private life, Gunn said, "People comment on the diversity of my friends. You see a real cross section of L.A. folks coming through my kitchen, and I feel that is good. It enhances me, and it allows me to be effective because I need an extensive network."

Gunn is prevention oriented. When it comes to mental health she believes in physical therapy, so she enjoys running and horseback riding. She enjoys reading for pleasure as well as in preparation for the courses she teaches.

At Calif. State University at Northridge, Gunn teaches a required graduate course in "Mental Health Theories and Community Psychology" and an undergraduate course in "Psychology of Prejudice."

She also does consulting work. Her volunteer work is extensive. She is often called on to help write grant proposals for both the Hollywood/Sunset Free Clinic and Youth Services Unlimited, which is a south/central Los Angeles program for youth with some experience in the juvenile justice system.

Gunn spoke of being a social action style person.

"I think I have made a personal and professional commitment to the social action kinds of things . . . that is an enabling thing. The field of psychology believes — endorses — the role of enabler," she said.

"Much more exists as a positive nature out there than we realize," she said, "and it is up to us as individuals to help that to happen."

HINCKLEY RULING SPURS DEBATE

Birch Bayh, former U.S. senator from Indiana, has been appointed chairperson of the National Commission on Insanity Defense by National Mental Health Association (NMHA) President Tom Binkley.

In announcing the commission, Binkley said, "We should not be rushing to abolish or drastically change the insanity defense laws based on emotion and caprice. The facts are simply not in yet. We need considerable more debate and public education before we conclude that change is either appropriate or necessary."

The commission is designed to broaden issues in the insanity defense debate and to develop national guidelines for considering any change in law. The commission was established when President Reagan rejected the Association's proposal in June 1982, to appoint an interdisciplinary task force to develop appropriate national guidelines.

Binkley said, "John Hinckley should not be the focus of this debate. The legislative process must focus on the fundamental ways that we as a society deal with the mentally ill. We must not ignore historical moral standards by which people are held accountable for their actions. And the nation must acknowledge that mental illness touches one out of every three households in America."

Without that kind of analysis and debate, Binkley said the clamor for radical and precipitous change of these historical legal standards is being fed by "the public's search for vengeance."

"Legislative reform is the prerogative and responsibility of an informed public," he said. "We offer this commission and hearing process as a way to bring about public understanding, and, if necessary, appropriate guidelines for legislative reforms."

For more information, contact Susan Ridgely, commission staff director, Government Affairs Department, NMHA, 1800 N. Kent St., Arlington, Virginia 22209.

NATIONAL COMMISSION ON THE INSANITY DEFENSE MEMBERS

Birch Bayh, J.D., Chair

Former U.S. senator from Indiana and Chairman of the Constitutional Rights Subcommittee of the Senate Judiciary Committee; active in mental health affairs; Washington, D.C. attorney, firm of Bayh, Tabbert & Capehart.

Thomas C. Binkley, J.D., Co-Chair

President, National Mental Health Association; Nashville attorney, firm of Howser, Thomas, Summers, Binkley and Archer.

Barbara Atkins, Ph.D.

Assistant Professor of Educational Psychology, University of Wisconsin (Milwaukee); active in mental health affairs in Wisconsin.

Mildred Mitchell Bateman, M.D.

Professor of Psychiatry, Marshall University; former commissioner of Mental Health of State of West Virginia; member, President's Commission on Mental Health.

Hugh Downs

Host ABC-TV's 20/20 Show; former host of NBC-TV's Today Show; former host of PBS's A Closer Look.

Richard Lonsdorf, M.D.

Professor of Psychiatry, University of Pennsylvania; active in Pennsylvania mental health affairs; former Board Member of the National Mental Health Association.

Allan Moltzen, J.D.

San Francisco attorney, firm of Long & Levit; Chair of Legal Rights & Advocacy Committee of National Mental Health Association.

David Wexler, J.D.

Professor of Law, University of Arizona, (Tucson).

Rev. Cecil Williams

Pastor, Glide Memorial Church, San Francisco.

The insanity defense laws have become objects of controversy. Tell us what you think. Connections welcomes your opinion on the subject in a letter to the editor.



Celinda Jungheim, Mary Jane Maggio and Edith Newman (l-r).

PEOPLE CONNECTION

RECOVERY INC. CELEBRATES 45 YEARS OF SELF-HELP

When you attend a Recovery Inc. meeting for the first time, you will be met at the door by the hostess or host and, before the meeting starts, you will be asked to observe only and hold your questions until the "mutual aid" portion at the end of the meeting.

It is just as well you are only allowed to observe at the first visit, because you would not understand the language. Words like "spotting," "endorse," "fearful temper," "outer environment," "cultured remark" and "average" are used by the members as they gently share a recent trivial experience that caused them some distress.

Now, you could leave, never to return and shake your head about the experience or you could listen closely, observe and learn.

What is Recovery Inc. and why the special language?

National President Mary Jane Maggio, visiting in Los Angeles from Chicago, told that Recovery Inc., the Association of Nervous and Former Mental Patients, is celebrating 45 years as a self-help organization.

It is one of the oldest mental health self-help organizations and was founded by the late Dr. Abraham A. Low, then associate professor of psychiatry at the University of Illinois Medical School and author of the book *Mental Health Through Will Training*.

Maggio has been the national president for six years.

"It is a labor of love, and with each new responsibility, my own mental health becomes stronger. I'm giving, but I'm reaping the rewards," she says.

The two Los Angeles area leaders are Celinda Jungheim, south area, and Edith Newman, north area. They explain there are more than 40 groups in Los Angeles County alone.

All three begin to explain what Recovery Inc. is all about.

As with many things, they first share what it is not. Recovery Inc.

does not try to replace the person's therapist, physician or counselor; does not offer diagnosis, treatment or advice; nor even make professional referrals. Recovery Inc. does not raise funds nor does it turn anyone away.

It is non-denominational, non-profit and self supporting (\$7.50 a year membership dues and small free will offerings to cover meeting expenses). The organization has only six paid staff in the entire country.

"It is truly run by volunteers," Newman says. The leaders are average members of the group who have received leadership training. Mental health professionals are welcome to attend meetings, but may not participate as leaders.

All of this structure has a purpose, Jungheim and Newman state.

For example, the sharing of a trivial experience with the group is emphasized because it makes it easier for members to relate it to their own experiences and the problems requiring professional help are kept with the patient's doctor or counselor.

"In Recovery, this is a plus because you need not share intimate personal details of your life. A lot of people are afraid of confiding their soul to another person," says Newman.

Having an "inhouse" language and special terminology is helpful because it prevents the use of words used in therapy.

When all terms mean the same thing to all participants people can understand, according to Newman.

The emphasis is on self-leadership, "taking responsibility for oneself." Group members try to achieve a balance between empathy, caring, encouragement and acceptance. At the same time, the structure, the leadership and the language prevent members from slipping into a judgemental or treatment model in the meetings.

Jungheim feels a panel demonstration is one way to see what Recovery is all about. She participates in panels for hospital staff and nurses training. There will be a panel at USC for medical staff on Jan. 17.

Jungheim says, "I've met fabulously interesting people in Recovery.

I even met my husband."

Recovery meetings are open to all, but a look around the room and the observer would note few members in their teens or twenties.

It may be the language or the structure that provides the barrier or, says Newman, "with young people it may be because of the age gap. They are not looking for this style, yet."

At each meeting tapes of Low's lectures are played. He developed the Recovery principles and then, true to the understanding of the organization, he encouraged the members to be the leadership.

Recovery Inc. met with resistance and indifference from the medical profession when it was first organized. Now many professionals encourage their patients to observe a meeting.

Information about Recovery Inc. and a list of scheduled area meetings can be obtained by calling (213) 651-2170.

RECOVERY INC. GLOSSARY

Averageness — You strive for averageness in handling the trivialities of every day life. Average people have both successes and failures.

Exceptionality — A form of sabotage where a person thinks of what is happening as being exaggerated and different from what happens to others. A person may set high, unrealistic goals and when these aren't accomplished, a feeling of exceptional failure develops.

Spotting — To identify or describe some action or thought of oneself or another.

Sabotage — Undermine your mental health.

Self-led not symptom-led — A person who makes a will to effort and puts mental health first is self-led.

Angry temper — When you blame someone else.

Fearful temper — This is the other major form of temper. This temperament reaction is when you blame yourself when something goes wrong.

Courage to make mistakes — Good mental health demands that you will try to have the courage to do something you know you should do even if you might make a mistake.

Controlling thoughts and impulses — Everyone can control thoughts and impulses, but no one can control sensations or feelings.

Use of Muscles — The person is taught how to move muscles, relax muscles or control them. Muscles are seen as being able to teach the brain. (You can't get out of bed? Move your muscles to get up even if the brain is not willing.)

Willingness to bear discomfort — You can develop a willingness to bear discomfort.

Trivialities of everyday life — Average life consists mainly of trivialities. It is usually these average daily things which cause the person to become worked up rather than some big occurrence.

Self Endorsement — Give yourself a compliment or a pat on the back. You always endorse your effort and never the accomplishment.

Humor — Humor is your best friend.

PEOPLE LIKE YOU... HELPING PEOPLE LIKE YOU!



The United Way Campaign
A fundraising campaign in business and industry with major health organization partners, more than 250 United Way Agencies and the American Red Cross.

CALENDAR

RCLC

The Regional Community Liaison Committees (RCLCs) the citizen advisory groups providing input to the five regions of the Los Angeles County Department of Mental Health, meet as follows:

November 9

San Gabriel Valley Region RCLC will meet 7 p.m. at Arcadia Mental Health, 330 E. Live Oak, Arcadia.

Call 960-6411 for more information.

November 10

Coastal Region RCLC will meet 6:45 p.m. at Harbor-UCLA Medical Center eighth floor conference room, 1000 W. Carson St., Torrance.

Call 533-3120 for more information.

November 12

San Fernando/Antelope Valley Region RCLC will meet 10 a.m.-noon at regional headquarters, 5077 Lankershim Blvd., suite 400, North Hollywood.

Call 508-7800 for more information.

November 17

Central Region RCLC will meet 7 p.m. at LAC-USC Medical Center Psychiatric Hospital, room 2C18, 1934 Hospital Place, Los Angeles.

Call 226-6424 for more information.

November 18

Southeast Region RCLC will host the Mental Health Advisory Board noon at Augustus F. Hawkins Mental Health Center, 1720 E. 120th St., Los Angeles.

Call 603-4873 for more information.

These meetings are open to the public.

November 3, 10, 17, 24

Forte Foundation: Batterers Anonymous, a self-help, confidential group for men who abuse women, will meet at 7:30 p.m. at 17277 Ventura Blvd., suite 201, Encino. There is no fee.

Call 788-6800 for more information.

November 4

Mental Health Coalition in Los Angeles County: An examination of election results and a review of mental health needs will be the topics of the 7:30 p.m. meeting, held at the Los Angeles County Department of Mental Health, 2415 W. Sixth St., Los Angeles. Enter from the roof parking lot.

Call 629-1527 for more information.

November 4, 5

Block Grant Advisory Task Force: The task force will hold public hearings on the federal block grant implementation. On Nov. 4, the hearings will be held 8:30 a.m.-4 p.m. at the California Museum of Science and Industry, Kinsey Auditorium, 700 State Drive, Los Angeles, and on Nov. 5, 9 a.m.-4:30 p.m., at the Board of Supervisors Meeting Room, 500 W. Temple St., room 381, Los Angeles.

November 4

Long Beach District Council of the Mental Health Association in Los Angeles County, Long Beach Family Service and Cedar House: "Myths and Realities of Step-Family Living," a seminar, will feature Elizabeth Einstein, recipient of the 1982 American Psychological Association/American Psychological Foundation National Media Award, as lecturer. It will be held 7:30-9 p.m. at Marshall Jr. High School, 5870 E. Wardlow Road, Long Beach.

Call 591-7530 for more information.

November 6-7

UCLA Extension and Santa Monica/West Los Angeles Community Services Task Force for the Disabled: "Counseling the Developmentally Disabled," a two-day course by Linda Andron, M.S.W., will be held 9 a.m.-4 p.m. at the Neuropsychiatric Institute sixth floor conference room, UCLA, Los Angeles. This is a special low-fee program.

Call 825-6701 for more information.

November 8

Help Anorexia: Superior Court Commissioner David A. Ziskrout will speak on guardianship and conservatorship at the family support group meeting, held 7 p.m. in the Glendale Federal Savings and Loan Community Room, 3812 Sepulveda Blvd., Torrance.

Call 326-3763, 6-8 p.m. for information.

November 8

South Bay Board and Care Operators Group: The group will meet 7 p.m. at Torrance First Christian Church, 2930 El Dorado, Torrance.

Call 518-6873 for more information.

November 9

Relatives and Friends of the Mentally Disabled — Norwalk: Peter DuBois, revenue management chief for the Los Angeles County Department of Mental Health, will speak on the pending Medi-Cal consolidation in Los Angeles County at 7 p.m. at the Norwalk-La Mirada Unified School District administration building, 12820 S. Pioneer Blvd., Norwalk.

Call 864-4412 for more information.

November 10

Relatives and Friends of the Mentally Disabled in Redondo Beach: The group will meet 10 a.m.-noon at the Office of Mental Health Social Services (OMHSS), 2810 Artesia Blvd., suite D, Redondo Beach.

Call 370-1538 for more information.

November 11

Advocates for the Mentally III: "A Parents Self-Help Answer to Assisting the Mentally III," focusing on the proposed Project Return clubhouse, will be the topic of the AMI meeting, held 7:30 p.m. at Thaliens Community Mental Health Center, 8730 Alden Drive, Los Angeles.

November 12

Alliance for the Mentally III — San Gabriel Valley: Allan Rawland, San Gabriel Valley regional director of the Los Angeles County Department of Mental Health, will speak on "A New Beginning: The Single System of Mental Health Care — 'Medi-Cal Consolidation'" 7:30 p.m. at San Marino Community Church, 1750 Virginia Rd., San Marino.

Call 797-3562 or 449-4217 for more information.

November 13, 20, 27

Teen Talk: Hosted by educator-therapist Joe Feinstein, Emmy-Award winning Teen-Talk television program will air 9 a.m. on KHJ-TV, channel 9. The teenage talk show will feature a discussion with seven teenagers on "The World of Punk" on Nov. 13, "Coping with Stress" on Nov. 20 and "Anorexia and Bulimia" on Nov. 27.

November 13

Los Angeles Group Psychotherapy: "The Group Therapists' Dilemmas: Role Models, Values and Blind Spots" will be presented 1-5 p.m. at Thaliens Community Mental Health Center, 8730 Alden Dr., Los Angeles.

Call 396-2406 for more information.

November 14

Senior Health and Peer Counseling Center: "A Sentimental Journey," an evening of dinner and dancing to benefit the center, will be held at Riviera Country Club, Pacific Palisades. A no-host cocktail hour will begin at 6 p.m., with dinner at 7 p.m. Tickets are \$100.

Call 829-4715 for more information.

November 15

Mental Health Association in Los Angeles County: A presentation on Project Return for the San Fernando Valley mental health community will be held noon-1:30 p.m. at the Northridge Hospital education auditorium, 18300 Roscoe, Northridge. The Project Return Players improvisational theater troupe will perform. A salad bar lunch will be provided. Reservations are required.

Call 780-1931 for more information.

November 15

El Centro Community Mental Health Center: "Pre-Holiday Anxiety: Planning for Enjoyable Holidays" will be the topic of the "Family Night" meeting, held 6:30-8 p.m. at 972 S. Goodrich Blvd., Los Angeles. "Family Night" offers support and information to persons who have a family member with a long term mental illness. The program will be presented in Spanish on Nov. 17.

Call 725-1337 for more information.

November 15

Southern California Psychoanalytic Society: Dr. Irwin M. Schultz will present "Cardiac Neurosis: An Analytic Case Study and Review of the Literature" at the 8 p.m. scientific meeting, held at 9024 Olympic Blvd., Beverly Hills. Panelists will be Dr. Bernard Brickman, Dr. Bernard Sosner and Dr. Leon Wallace.

Call 655-1634 for more information.

November 15

South Bay Relatives and Friends: The group will meet 7 p.m. at Torrance First Christian Church, 2930 El Dorado, Torrance.

Call 518-6873 for more information.

November 16

Advocates for the Quiet Minority, Families for Ongoing Independent Living and Alliance for the Mentally III — San Gabriel Valley: "Planning for the Future: Providing for Heirs with Special Needs" will be discussed by Steven Beltran, Esq., attorney specializing in mental and developmental disabilities, at 7 p.m. at San Marino Community Church, 1750 Virginia Rd., San Marino. A donation of \$1 is requested.

Call 796-7430 or 449-4705 for reservations or information.

November 17

National Association of Social Workers: The California Chapter Mental Health Council will meet 6-8 p.m. at a new location, Hollywood Mental Health Services, 4759 Hollywood Blvd., Hollywood.

Call 620-2063 for more information.

November 17

Families and Friends Group of Pomona/East San Gabriel Valley — Alliance for the Mentally III: The group will meet at 7:30 p.m. at Pomona First Federal Savings and Loan Community Room, 1933 Foothill Blvd., La Verne.

November 17

San Fernando Valley Coalition of Community Care Providers: The group will meet 10 a.m.-12 noon at California Villa Retirement Hotel, 6728 Sepulveda Blvd., Van Nuys.

Call 508-7800 for more information.

November 18

Mental Health Association in Los Angeles County Children and Youth Committee: A potpourri of innovative mental health programs for youth will be presented noon at 930 Georgia St., Los Angeles.

Call 629-1527 for more information.

November 18

Hollywood Human Services Project Mental Health Task Force: Dr. Ford Kuramoto will speak on "Practical Management of the Assaultive Client" at the noon meeting, held at Hollywood Mental Health Services, 4759 Hollywood Blvd., Hollywood.

Call 467-3605 for more information.

November 18

Mental Health Advisory Board: The board will meet at noon at Augustus F. Hawkins Mental Health Center, 1720 E. 120th St., Los Angeles.

Call 738-4772 for more information.

November 18-21

Association for Advancement of Behavior Therapy: "Working Together to Work Through: Collaborating Around the Challenges of the '80's" will be the theme of the 16th Annual Convention, held at the Biltmore Hotel, Los Angeles.

Contact Marian McDonald, Ph.D., at 420 Lexington Ave., New York, N.Y. 10170 or (212) 682-0065 for more information.

November 20

Westside and Coastal Friends and Advocates for the Mentally III: The two parents groups will sponsor a party for Los Angeles County parents and friends of the mentally ill to benefit the proposed Project Return clubhouse. Tickets are \$7.50 per person. It will be held 8 p.m.-midnight at Toluca Hills Oakwood Garden Apartments social center.

Call Susan Ronec at 472-4926 or 472-0834 for more information.

November 21

Southeast Mental Health Region: "Rape and Sexual Assault Against Females" with guest Amelia Bellone from the Southern California Rape Preventions Studies Center will be the topic of "A Healthy Mind: For You and Your Family" radio program. The show will air 8 p.m. on KACE, 103.9 FM, and will be hosted by Julius I. Fuller, M.S.W., coordinator of children services/child abuse services for the region.

November 24

Anorexia Nervosa and Associated Disorders: ANAD will meet at 8 p.m. at 18345 Ventura Blvd., suite 414, Tarzana.

Call Suzy Green at 343-9105 for more information.

CONNECTIONS

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Executive Director: Richard Van Horn

November 1, 8, 15, 22, 29

Airport Marina Counseling Services: A new Walk-In Consultation program will be offered 4-8 p.m. at the agency's new Family Development Center, 6228 W. Manchester, Los Angeles. No appointments will be needed for the one and one-half-hour session. Consultation fee is \$20.

Call 670-1410 for more information.

November 1, 15

Help Anorexia: The West Los Angeles self-help group will meet 7:30 p.m. at the Federal Building, room 10124, 11000 Wilshire Blvd., West Los Angeles.

Call 558-0444 for more information.

November 1, 8, 15, 22, 29

San Fernando Valley Community Mental Health Centers Inc. Hombound Program: A support group for families of the ill, disabled and elderly will meet 5:30-7 p.m. at 6740 Kester Ave., Van Nuys. The group provides information, resources and support. Fee is \$15 per person or \$20 per couple. Sliding scale is applicable.

Call 988-8050 for more information.

November 1, 15, 22, 29

Help Anorexia: The South Bay self-help group will meet at 7 p.m. in the St. Margaret Mary Church meeting room, 255th and Eshelman Streets, Lomita.

Call 326-3763, 6-8 p.m., for information.

November 2, 9, 16, 23, 30

Airport Marina Counseling Services: Crisis Intervention, a new six-session program with a counselor specially trained in short-term intervention, will begin Tuesdays, 4-8 p.m., at the new Family Development Center, 6228 W. Manchester, Los Angeles. Fee for the series is \$48.

Call 670-1410 for more information.

November 2

Central Valley Mental Health Services and Advocates for the Mentally III: A new parents support group will meet 7:30 p.m. at Central Valley Mental Health Services conference room, 8101 Sepulveda Blvd., Van Nuys.

Call Vivian Isenberg at 902-0327, ext. 242, for more information.

November 3

Interagency Committee on Mental Health: The committee will meet 9:30 a.m. in the Los Angeles County Department of Mental Health first floor conference rooms, 2415 W. Sixth St., Los Angeles.