

CONNECTIONS

THE PUBLICATION OF THE MENTAL HEALTH ASSOCIATION IN LOS ANGELES COUNTY

July 1984

Reactions to budget range from disappointment to outrage as Deukmejian vetos \$10.4 million for Children's Services

GOVERNOR VETOS LEGISLATURE'S INCREASES FOR MENTAL HEALTH

INTERVIEW:

MARVIN WEINSTEIN

Director, Portals House



As executive director of Portals House, Marvin Weinstein, L.C.S.W., is a firm believer in the club model of self-help for mentally ill persons and a strong advocate for a community support system.

A pioneering psychosocial agency, Portals House opened its doors in 1955 and next year will celebrate 30 years of continuous operation. Founded as

"We must recognize and accept that mental illness is a long-term problem and make provisions for long-term support."

a halfway house, Portals works to prepare and equip psychiatrically disabled adults with behavior and skills necessary to function in society.

Based on the philosophy that all people have the capacity to change, Portals House is structured like a club with a comprehensive program providing vocational training, residential living and social skills. In addition to

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Gov. George Deukmejian signed the 1984-85 California state budget on June 27 with \$35 million in augmentation funds for mental health intact, but reduced or eliminated additional mental health provisions passed by the Legislature.

The governor eliminated \$10.4 million for children's community residential treatment systems (CRTS) services. This was not in the governor's original budget announced on Jan. 10, but was approved by the Legislature in addition to the \$35 million in augmentation funds.

Deukmejian also reduced to 3 percent the Cost of Living Adjustment (COLA) for Health and Welfare from the 5.4 percent passed by the Legislature. In his original budget, he included a 2 percent COLA.

This change will mean local counties may have to utilize portions of their augmentation allotment to maintain existing programs rather than use the funds for increases or new services.

"Because COLA is only three percent and we projected a need of 4 percent, we are going to have to take \$1.7 million away from the augmentation and use it to fund the full COLA requirement to keep existing programs in place," said Peter DuBois, acting deputy assistant director, Los Angeles County Department of Mental Health.

Reaction from members of local mental health constituency groups to the governor's budget ranged from disappointment to outrage.

"The administration has been attempting to redirect programs to the local level. It is difficult to comprehend how, given this philosophy, the governor's budget can include a higher cost of living allowance for state employees than it makes avail-

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TASK FORCE SETS PLAN, TIME LINE

On June 19th, for the first time in five meetings, the Mental Health Task Force members agreed about the method they would use to accomplish the assignment given them by the Los Angeles County Board of Supervisors on Feb. 7.

The breakthrough came with a recommendation by task force member Gloria Nabrit, M.P.A., to adopt a time line for the task force and procedures to complete the job. The paper, developed by Nabrit, was distributed and agreed to quickly.

From their first meeting on April 5, the task force members had divergent opinions about what the assignment was, the scope of their work, the purpose of the task force and the politics behind its formation.

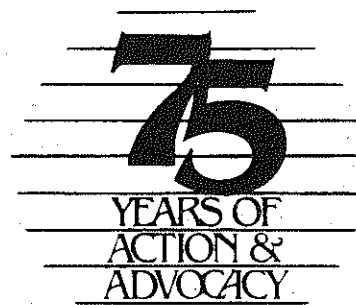
Supervisor Michael Antonovich initiated the request for the task force. Under the original board action,

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INSIDE:

LEARN THE HUSTLE
PG. 4

DANCING SHOWS CULTURE
PG. 5



This year the 650 chapters of the Mental Health Association observe 75 years of action and advocacy. The Mental Health Association works for the prevention of mental illness promotion of mental health and the improved care and treatment of mentally ill persons.

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Winner of the Los Angeles County Department of Mental Health Outstanding Nurse of the Year Award was Suzanne Wilber. Wilber practices nursing at the Therapeutic Residential Center in the San Gabriel Valley Region

COUNTY EMPLOYEES HONORED



Recreation therapist Margo Chapman received her citation as Los Angeles County Department of Mental Health Employee of the year from Roberto Quiroz, acting assistant director of programs (l-r). Chapman currently works at El Camino Mental Health Services.

AB 2579 WOULD PROVIDE SHELTER FOR STATE'S HOMELESS POPULATION

A bill sponsored by Assembly member Maxine Waters (D-Los Angeles) would provide \$10 million for temporary shelters for the homeless in California.

AB 2579 was approved by the Assembly in mid-June and is scheduled to be heard in the Senate Housing Committee on July 3.

The bill would appropriate \$5 million for existing temporary shelter programs operated by local governments and non-profit organizations and an additional \$5 million for purchase and renovation of residential hotels, according to Waters' office.

"The need for this and other programs is obvious," Waters said in a letter about the bill. "California has an estimated 70,000 to 100,000 homeless, composed in large part by former military veterans, persons with emotional problems and those illegally cut off by the social security program (SSI).

The Concerned Agencies in Metro-

politan Los Angeles (CAMLA), an intercity coalition for the homeless in the Skid Row area with 55 member agencies, is in favor of the bill and has sent a letter of support to the Legislature, according to Dr. Roger Farr, head of the county Department of Mental Health's Skid Row program.

Members of Skid Row agencies illustrated the need for additional shelter locally by sending 1,000 post cards to the Legislature. Homeless people described on the post cards where they had slept the previous night. Locations included a garbage bin, a ditch and a cardboard box.

"In terms of providing mental health services, the most basic needs must be provided for first, and then we have to build from that. One of the most basic needs is shelter, so the person can feel safe and have some self-esteem," said Dr. Kevin Flynn, a psychologist in private practice and consultant to agencies working with the homeless.

Letters regarding AB 2579 may be sent to the State Senate, State Capitol, Sacramento, CA 95814.



FINANCIALLY-TROUBLED CENTRAL CITY WINS 90-DAY CONTRACT EXTENSION

The Los Angeles County Board of Supervisors on June 26 approved a 90-day extension of three contracts for mental health services with Central City Community Mental Health Center in south central Los Angeles.

At the same time, the board postponed a decision on the center's drug and alcohol services contracts, pending an additional hearing.

In October 1983, Central City filed to reorganize under Chapter 11 of the U.S. Bankruptcy Code, listing debts of \$2 million.

In January 1984, the Board of Supervisors voted to fund the center's contracts on a month-to-month basis, with monthly reviews by a county auditor.

Central City filed a reorganization plan with the U.S. Bankruptcy Court on June 27.

The agency has five contracts for services with the county, three through the Department of Mental Health and two through the Health Services Department, for its drug and alcohol abuse programs.

The mental health programs provided through the county contracts are inpatient, outpatient, day treatment, consultation and education, and residential treatment services.

At the June 26 hearing, the supervisors approved four recommendations made by the office of the Chief Administrative Officer (CAO), two of which pertained to the extension of the mental health contracts to Sept. 30, 1984.

Also approved was recommendation that the Departments of Mental Health and Health Services continue the RFP (Request For Proposals) process with other agencies and report back to the board with evaluations of

all proposals.

The fourth recommendation approved instructs the CAO and auditor/controller to continue to work with the center and report back to the supervisors prior to Aug. 1, 1984 on the review of the agency's reorganization plan.

During the 90-day period, the county "will actually monitor our adherence to the reorganization plan we filed, provided the plan is accepted by the court and our creditors," said Bill Harmon, Central City's interim administrator. "What they want to monitor is the center's capability in terms of reorganization of its fiscal operation.

"I'm positive in terms of our capability to follow a plan," he said.

Harmon replaced Dr. James Bush, who was hired last September as the agency's fifth director in three years.

Central City Community Mental Health Center, a private, non-profit agency, is the largest Black-owned, interracial-operated mental health facility in the nation.

"Services are needed there to cover the mental health needs of the residents in the northwest corner of the Southeast Region," said Gloria Nabrit, executive director of Kedren Community Mental Health Center, another private, non-profit agency in the Southeast Region.

"We simply want the services to stay there," she said. "We support continued comprehensive mental health services at that facility.

"Hubert Humphrey (Comprehensive Health Center, operated by Los Angeles County) is in the area, but it has no inpatient services. Also, a number of the Central Region's patients go there (Central City), particularly for inpatient beds, because there are no services of that kind in the part of the Central Region that borders the Southeast Region."

Also cited by Nabrit as a reason for maintaining a center there is "too many of the Black institutions are closing in the community; too many are failing."

CONNECTIONS WITH THE EDITOR LETTERS

Hospital Care

I would like to respond to the comments of Dennis Wilder, chair of the Countywide Interagency Committee on Mental Health, Hospital Alternatives Committee, published in the May 1984 Connections.

As a hospital-based social worker, I would like to publicly express my appreciation for the competent and dedicated board and care facilities which assist our patients in sustaining and building upon the gains they have made in the hospital.

However, from my point of view, calling a board and care home an "alternative to hospitalization" is a misnomer.

In the hospital are found patients in acute phases of illness, which board and care homes are not equipped to treat.

In hospitals are found patients who are unable to maintain minimum standards of behavior for life in board and care homes.

In hospitals are also found patients whose acute illness has subsided and who are preparing for life in board and care homes or other community living arrangements by developing necessary psychosocial skills to benefit from settings in the community.

The time has come for all involved in the mental health system to work together to provide patients with those services which best meet their needs in a given time frame and to use those services flexibly, recognizing the usefulness and benefits of each.

Pearl Rothenberg, L.C.S.W.



Linda H. Hawkins, Ph.D.

ADVISORY BOARD ELECTS OFFICERS

Linda H. Hawkins, Ph.D., was elected chairperson of the Los Angeles County Mental Health Advisory Board (MHAB) at its June 28 meeting.

Hawkins is a nursing researcher at the Sepulveda Veterans Administration Medical Center.

Also elected were Helen Wolff, M.D., M.P.H., vice chairperson, and Mary Ellen Cassman, secretary.

Executive Committee members, in addition to the officers, are Don Richardson, Marion Rubenstein and Alex Aloia, Ph.D., immediate past chairperson.

The MHAB is an advisory group to and is appointed by the Board of Supervisors. Its meetings are listed in the Connections Calendar.

NATIONAL PARENTS MENTAL HEALTH MEETING FOCUSES ON RESEARCH

Research into mental illness, its causes, effects and treatment, is the emphasis of the National Alliance for the Mentally Ill's (NAMI) annual conference, "Surviving the Mental Illnesses: Families Face the Challenge," hosted by the California Alliance for the Mentally Ill (CAMI).

Presented in cooperation with the University of California, Irvine (UCI) School of Medicine department of psychiatry, the conference will be held July 5 to 8 on the university's campus.

The program will feature nationally-known mental health researchers speaking on their field of expertise.

"We have no hope for mental illness unless the researchers find the answers. NAMI has long been advocating for more research, so this is right in line with our stated purpose," said Helen Teisher, CAMI president and NAMI first vice president.

"Southern California is really the center of neurological and psychiatric research. We felt we should take advantage of the learning that exists in this area," she said. Teisher is a member of the conference planning committee, with responsibility for the program.

Conference committee chairperson is Ramona Schneider, CAMI president-elect.

NAMI is a national organization of groups for families of mentally ill persons. The CAMI state chapter has 53



William Bunney, M.D.

affiliates throughout the state, including 10 in Los Angeles County.

Among the presentations at the conference will be a panel led by Dr. William Bunney, UCI School of Medicine department of psychiatry chair, with members discussing their area of specialty. These are Robert Gerner, M.D., depression; Floyd Bloom, M.D., neuroscience; David Janowsky, M.D., psychopharmacology; and Monte Buchsbaum, M.D., PET scan.

Donald Lunde, M.D., and George Solomon, M.D., will present a panel on the insanity plea and related issues.

Commissioner George Conn, Rehabilitation Services Administration, U.S. Department of Education, will speak on vocational rehabilitation for mentally ill persons and will also lead a workshop on this topic.

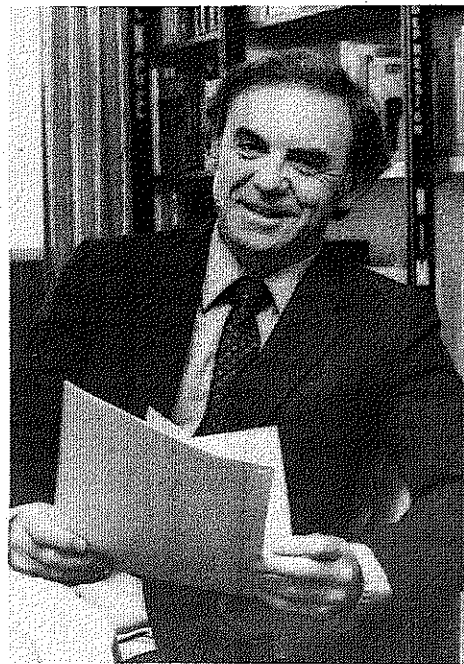
E. Fuller Torrey, M.D., clinical and research psychiatrist at St. Elizabeth's Hospital in Washington, D.C. and author of *Surviving Schizophrenia*, and Herbert Pardes, M.D., director of the New York State Psychiatric Institute,

professor and chair of the Columbia University department of psychiatry and former National Institute of Mental Health (NIMH) director, will speak at the conference.

Other speakers will include Dr. Bert Pepper, of the Information Exchange on Young Adult Chronic Patients, in New York; Lawrence Sporty, M.D., of UCI; and Dr. Charles Miles, NAMI president.

Speakers from California will include D. Michael O'Connor, M.D., state Department of Mental Health director, and Congressman Jim Bates (D-San Diego).

NAMI will recognize Seymour Kety, M.D., with its distinguished ser-



Herbert Pardes, M.D.

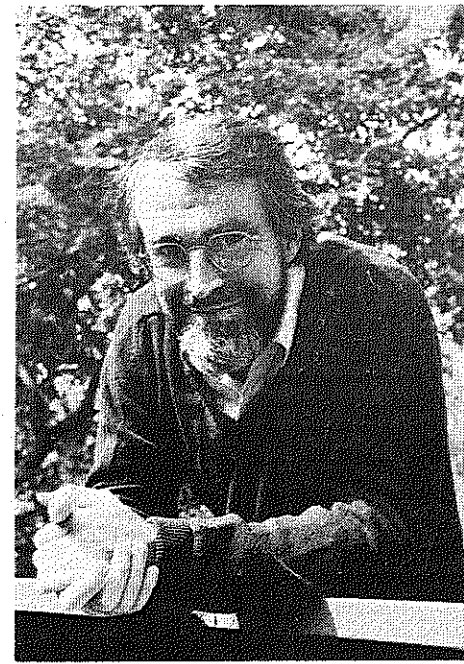
vice award for a lifetime of research, according to Teisher.

"We're On Our Way," a videotape on the need for community support services for persons recovering from mental illness, will be shown.

Conference workshops will cover topics such as trusts and conservatorships, mental health laws, mentally ill persons in jail, long-term schizophrenics, community programs, siblings of mentally ill persons, volunteerism, fund raising and family education.

"These are things that families or anyone who is dealing with mental illness need to know in our attempts to help our relatives cope with their illnesses," Teisher said.

This is CAMI's first time as host for the annual meeting, and planners are expecting 1,000 persons from across



E. Fuller Torrey, M.D.

the country to attend.

Dormitory rooms are still available on a limited basis at UCI, at a cost of \$34 per person per day for double occupancy.

Persons interested in attending this conference may register at the door. The fee is \$40 for NAMI members and \$50 for non-members.

For further information about the conference, call (619) 462-5213 or (714) 544-8488.

ALLIANCE FOR THE MENTALLY ILL LISTS LOCAL PRIORITIES FOR CARE

"Without supportive, structured living arrangements in the community, long-term mentally ill persons cannot survive or be rehabilitated."

The Los Angeles County Alliance for the Mentally Ill (AMI) has endorsed a position paper identifying its top five priorities for mental health care.

The list will be used to "influence county services through concerted efforts in the mental health regions," reads the report. These priorities for mental health dollars were devised by a consensus of the members of the Los Angeles County AMI, which has a membership of nearly 4,000.

The number one priority named is the need for community residential accommodations with treatment. "Without supportive and structured living arrangements in the community, long-term mentally ill persons cannot survive or be rehabilitated," says the paper.

"On the other hand," say AMI members, "the lives of patients in the community can be improved if a variety of community living arrangements, with adequate staff, treatment and activity programs, is established."

In the report, AMI members re-establish their support of a system of levels of housing options and the development of all phases of the California Model's living arrangements.

"There are no long-term residential treatment programs in Los Angeles County," says the report. There is a need, AMI members say, to develop 10-month to three-year programs that offer individuals a chance to develop and strengthen independent living skills in a supportive, family-like community environment.

Another gap in housing is the need for 24-hour transitional residential treatment programs. These one-year programs in small residential settings give residents a chance to take part in personal and home responsibilities.

AMI members also see a great lack of satellite housing in apartments, duplexes or single family homes. This type of housing is usually leased by the mother agency and co-leased by the residents. Individuals need to be able to use the program as a transition to independent living or remain indefinitely.

There is also a shortage of "good" community care facilities (board and care homes). "More than 15,000 chronically mentally ill people live in community care facilities in Los Angeles County," says the paper. It calls for adequate financing and supervision of the physical environment, food and quantity and quality of staff at board and care homes, with a screening out of unsuitable administrators.

The Los Angeles County Grand Jury had several recommendations that should be considered, according to AMI:

"The Department of Mental Health should strive to improve board and care homes so they become quality care homes to meet individual needs. This relationship would help upgrade these facilities. In most situations, board and care operators tend to be untrained and programs are minimal."

"Short-Doyle money (should) be provided to fund beds in selected board and care homes and skilled nursing facilities for patients ineligible for SSI."

"Additional compensation should be allocated to board and care operators who accept difficult patients."

The second priority is the need for outreach programs. The report recommends the development of pilot programs which use a team approach in taking responsibility for an entire "at risk" population in a defined area.

This work, says AMI, must be continuous through a case management team responsible for keeping in touch with each client regardless of how many agencies get involved. "This can provide the 'glue' that binds otherwise fragmented services into coordinated services that respond to the special and specific needs of clients," says the paper.

Example of services provided are: assisting clients in applying for income and other benefits; 24-hour coverage that can respond to a client's crisis; linking clients to psychosocial rehabilitation services; linking clients to supportive services for indefinite duration and assisting clients to obtain adequate medical, dental and mental health care.

Mobile emergency services, 24 hours, seven days a week, are also listed as a priority. This crisis intervention service must have the ability to respond to the location of crisis (residence, place of business, community), says AMI.

The fourth priority is the need for community support programs, designed to provide a range of therapeutic and rehabilitative services to persons in many settings, even their own home.

"There is a need to treat the whole person," say AMI members. "In addition to medication and psychological reinforcement, a system of community support services is required."

Included in a community support program should be psychosocial rehabilitation programs to teach social and job skills, advocacy services to protect legal rights and benefits, volunteer opportunities, housing arrangements, from independent apartments to protective stabilization arrangements, and family education.

"Such a system can link all these activities into a service network to support the mentally ill," says the paper.

The final priority is the recommendation for a psychiatric inpatient facility at Sybil Brand, county jail for women.

A 35-bed, inpatient unit for men was opened at Central Jail in 1979. No program is available for female inmates at Sybil Brand Institute.

AMI's report states that current demands require additional services. "A program for women was approved by the county and state Departments of Health for implementation. To date, no action on this program has been taken," says the paper.

CHILDREN AND YOUTH

NIÑOS Y JOVENES



BILL WILL CREATE NEW DEPARTMENT

Legislation that would allow the formation of a separate Children's Services Department in Los Angeles County is currently pending in the state Senate.

AB 2707 would provide that "the board of supervisors of a county having a population in excess of 6 million persons may establish by ordinance a department or agency into which any or all of the duties of the county departments regarding protective services to juveniles may be placed."

The bill has already been approved by the state Assembly.

The Assembly bill was sponsored by several area legislators, all Democrats, including Frank Vicencia, Bellflower; Gray Davis, Beverly Hills; Dave Elder, Long Beach; Richard Katz, Los Angeles; and Bruce Young, Norwalk.

In April, the Los Angeles County Board of Supervisors approved the motion to establish a separate Children's Services Department which would consolidate the core children's services now delivered by the Department of Public Social Services (DPSS). Core services include, among many services, child protective services, dependency investigation and supervision, and emergency shelter care.

Supervisor Edmund Edelman's motion called for the new department to be in place by September, with a director, and for the adoption of the 47 recommendations made by the Children's Services Task Force. The department is expected to have 1,617 employees and a budget of \$6.9 million.

The 27-member Children's Services Task Force was made up of representatives from the public, and private sector. Members included supervisors' deputies and community and county representatives.

The Board of Supervisors assigned the task force to evaluate and "strengthen" the delivery of children's services.

Among the recommendations was the formation of a Children's Services Commission, a permanent commission "to play watchdog on children's services in the county," said Frank Schneider, deputy, third supervisory district and a member of the task force.

"The commission will see where the gaps are," said Schneider, "and look at such topics as foster care, with attention to bilingual foster families, and better relations between the public and private sectors. There are several areas where the commission can be helpful."

The commission will be made up of five appointments from each supervisor. They will not be county em-

ployees or employees of agencies contracting with the county and will report directly to the Board of Supervisors.

Supervisors Deane Dana and Michael Antonovich have each made their five appointments, Edelman has made two and the other supervisors, Kenneth Hahn and Pete Schabarum, have made no official appointments.

Duties of the commission will include monitoring and evaluating progress toward the implementation of the new department and the task force recommendations. The commission will report its findings to the board at regular intervals, review programs administered by other departments with services to children at risk and receive advice from community agencies and individuals on children's programs.

Also among the task force's 47 recommendations was the hiring of a director "professionally trained, appropriately credentialed and experienced in the field of family and children's services."

The county hired a search firm to look throughout the country for qualified applicants with a final filing date of June 12. The firm will now pull out those that do not meet the requirements. The next step in the process will be interviews by the firm and a panel. The final applicants will be narrowed to five who will be interviewed by the Board of Supervisors.

According to Schneider, the new department, "for all intents and purposes" will be in place in September.



Supervisor Edmund Edelman received an award from the Mental Health Association in Los Angeles County for his efforts in the creation of a Children's Services Department. The award was presented by Barbara Prober, MHA vice president, children and youth.

DRUG ABUSE PREVENTION STRESSES RECOGNIZING A

Dr. Richard Cone and staff at USC's Joint Educational Project have developed a special program for teaching drug abuse prevention. The program is based on the idea that youth are conditioned by advertising to a "hustle" similar to what they get from drug pushers.

"Choices," a substance abuse prevention program for junior high students, is an alternative to the scare tactics previously used in drug education. "Past efforts in drug education scare tactics may have actually promoted some drug use," says Cone. "Those students who did not immediately perceive the dangers of drug uses rejected the overall drug-abuse message."

"Knowledge alone does not help the students learn how to cope with social pressures involving drugs. Through the '60s and '70s, the idea was to present the information to the kids and let them digest it," says Cone. "They were familiarized with the appearance and effect of drugs without any kind of moral guidance. Before that the idea was to scare the hell out of kids."

Says Cone, "As we advise the schoolteachers who use our program, a quick study of the ways that legal drugs are promoted by the media may help students see how drug use is promoted by their peers: 'smoke this and be popular, drink this and be sexy, take this and be beautiful.' We want students to recognize a hustle, whether it comes from the media or a best friend."

The 80-page teaching guide, by Cone and Barbara Werner Sayad, M.P.H., was, says Cone, purposely developed as a soft curriculum. For kids already taking drugs, it can be hard to change their minds, admits Cone. Youth with no exposure to drugs (Cone's definition includes tobacco and alcohol) are the target group. Research showed Cone and his associates that most kids don't take drugs, but think other kids do.

"Our efforts in drug education," says Cone, "are directed at prevention. We do not think this curriculum is powerful enough to win converts among those already taking drugs. Our experience has been that most kids in grade seven do not take drugs and do not plan to take drugs. We want to help them maintain that position by offering them some knowledge and social skills."

To develop these skills, chapters in the book cover advertising, peer

pressure, personal values, facts on drug use, self-assertion, stress reduction and values clarification.

"Students can learn ways to say no to drugs and to protect themselves," says Cone. "Peer pressure is the primary motive in taking drugs. I think most kids have seen damage caused by drug abuse and don't find drugs particularly enticing. They want to say no." In the course, students learn passive, assertive and aggressive responses in turning down an offer of drugs.

"A lot of students use drugs as a way to relax and escape," says Cone. The curriculum includes relaxation techniques as a way of handling stress, sort of an introduction to meditation. "To our surprise this has been well received," says Cone, "and there is nothing similar to it in the school curriculum."

"Values clarification needs to be in the curriculum to give students a sense of integrity and a better sense of who they want to be, especially since during early adolescence peer pressure can be overwhelming. Drug use promotes a certain image. We need to



ask students, is that the image you want to project?"

Say Cone and Sayad in their guide, "Advertisers would have us believe that without their product, we are socially unfit, undesirable, powerless and dumb. Drug pushers intimidate individuals with threats and less than subtle tactics. Peers may be the most potent force and use the threat of disapproval or exclusion to get others to use drugs."

"Recognizing and resisting the social claims of advertisers, the physical and psychological threat of drugs, and the promise of friendship by peers requires a recognition of the illusions, knowledge of drugs and skills to resist pressure. More importantly, it demands that individuals know, understand and accept themselves. Promoting self-esteem is in our opinion the key to substance abuse prevention programs."

The socio-psychological state of the individual is extremely important in preventing drug use and abuse, says Cone. "Students need to think about what they want to be; with low self-esteem, all the prevention education in the world will do no good in preventing abuse. Young adolescents are shaped by their social milieu. The significant others for 13- to 17-year-olds are people the same age. They turn to their peers for reinforcement of who they are."

Cone believes that peer pressure is the main thing that has made drug

PROGRAM 'HUSTLE'

education and prevention hard to teach. "The only real talking about drugs is done on the streets with peers. If teachers have to battle a peer group that says drugs are cool they can't win. That is why we have prepared a guide that includes information, but that stresses the anti-hustle concept along with lessons in values, awareness and self-assertion."

Students are curious, and teachers are perplexed and feel unprepared in teaching drug abuse prevention, says Cone. "Teachers are looking for better methods for teaching this subject; I think it ranks right up there with sex education."

Cone points out that "Choices" utilizes many small group discussions "which can be difficult for a teacher trying to maintain an authoritarian role. But we believe our course is more helpful than past approaches."

"We look at advertising of legitimate drugs and the methods used to entice consumers. We talk about television and billboards and analyze sales pitches. Youth today are sophisticated television watchers; they should recognize that the same pitch used by the Marlboro man could be used by their peers. We want them to be able to recognize how things are promoted."

However, Cone sees negatives in the program, given in eight, one-hour sessions. He believes it is much too short. "There is a limited amount of time devoted to drug education," says Cone. "A three-month curriculum is needed."

The Joint Educational Project received a grant from the Walter Johnson Foundation for the development of the course. "They had an open mind," says Cone. "They were willing to let us develop and use whatever methods we found effective."

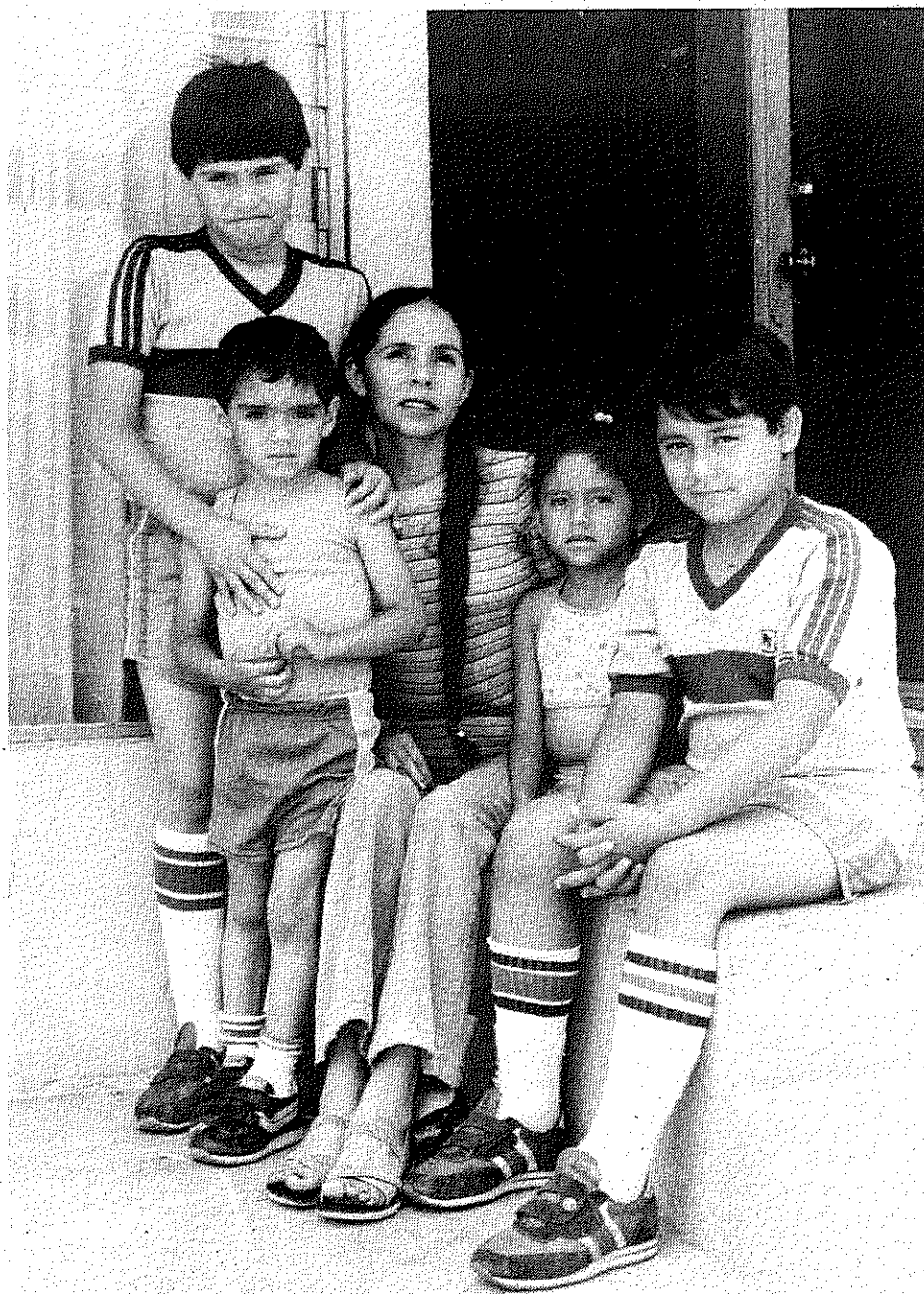
Cone spent four months evaluating what was available in drug education and found most material unsuitable and outdated. "Most material used the fear tactics approach, that one thing leads to another; a kids starts out with marijuana and ends up mainlining heroin. We have found that that assertiveness training is more effective in preventing drug abuse, and we are relatively happy with the results."

The program is being used as a part of "Project Smart" by the Los Angeles School Unified District and the Los Angeles Police Department by officers who talk on drug abuse in schools. "We have been pleasantly surprised by the response," says Cone. "We haven't received any criticism."

A junior high and high school teacher for 10 years, Cone is director of the Joint Educational Project which has been placing students in a variety of programs in the USC community for 12 years. They work in such settings as health centers, senior citizen centers and schools. Students can negotiate with professors for credit and gain actual experience in a project rather than writing a paper or researching in a library.

Cone directed about 60 students in a three-year field test of the "Choices" program in neighborhood schools. "They and the students they taught have learned that everywhere people are peddling their wares," says Cone, "everything from analgesics to vitamins. We want students to recognize a hustle."

For information on the project, contact Cone at the JEP House, University of Southern California, Los Angeles, CA 90089, (213) 743-7698. Copies of "Choices" are available at \$7.95 each from Health Communication Inc., 2119-A Hollywood Blvd., Hollywood, FL 33020, (315) 920-9435.



Carla, shown with her children, teaches cultural dance to neighborhood children as part of her involvement with the Bilingual Community Outreach Program.

OUTREACH PROGRAM HELPS ISOLATED RESIDENTS BUILD COMMUNITY PRIDE

Luann Castanoli is a familiar face to residents of the Bryant Street apartments in Northridge.

As she walked down the street toward a visit with one family, she chatted with neighborhood children and stopped to ask about a resident's new baby. Neighbors on a balcony across the street called out a greeting to her.

Castanoli, with a master's degree in social work, is program coordinator of San Fernando Valley Child Guidance Clinic's Bilingual Community Outreach Program, started last November.

The community she works with is in the southwest corner of Northridge, a small, low-income enclave surrounded by middle class homes.

Well over 3,000 people, primarily Spanish-speaking, live in the six-block area, estimated Castanoli. More than half the homes in the 50 apartment complexes have two or three families living in them, she said.

Many of the residents are recent arrivals to this country, with the majority from Mexico or El Salvador.

"It's mental health in the community," Castanoli said of the program, funded through grants from United Way and the Hilton Foundation. "We're preventing them from having to come in (to the clinic) at a later time by creating some positive alternatives."

"The child guidance clinic works for all children, not only children who come into the office. It sees the value of outreach work in the community, to prevent child abuse and to prevent behavior or emotional problems in children or to be aware of them early."

Program director Stephan J. Fleisher, Ed.D., who wrote the program's proposal, agreed.

"The community needs a mental health perspective," he said. "It became obvious to me that sitting in an office wasn't the way to get the job done. Mental health professionals have to try to influence the system rather than just one family at a time."

The outreach program involves California State University, Northridge (CSUN) students and community parents, adolescents and children. Castanoli has an office based at the Headstart office of the local Napa Street School.

The program is intended to encourage the community to work closer together, to prevent crime and delinquency, to strengthen individual families, to make families aware of available mental health services and to prevent emotional disorders and child abuse.

These individual purposes are interrelated, Castanoli said.

"Many of the families have been isolated and frightened. They feel disconnected. We wanted to bring the families closer. Getting the community to work together will reduce the isolation and prevent crime and delinquency."

"If the families are working together, they are going to have more positive self-esteem. They are going to find out that they are not the only ones having certain problems. They are going to relate to their children differently and their neighbors differently. They're going to feel better about the community."

"The families are going to take what they are going to get with each other and work together within their own family. Because, of that, the kids will feel better because they are getting more positive nurturing."

Much of Castanoli's initial contact with families occurs through home visits. There she tells them about various programs "and I ask about problems that I may be of assistance with."

She offers her help in a variety of areas. She may accompany residents on an initial visit to various agencies and act as interpreter, if needed; "this acts as a cushion and may make them come back on their own." She may

assist in filling out forms or give referrals for mental health.

As part of the program, parent education classes are offered in Spanish at a community location. The clinic-developed "Hugs 'N' Kids—Parenting Your Preschooler," a program utilizing videotape vignettes with responses to various types of behavior, was presented twice and was well-received, Castanoli said.

"Not only did the parents get together and share problems, they worked on a lot of community problems," she said. "After 'Hugs 'N' Kids' was completed, we continued to meet together as a parent support group, at the parents' request."

A third parenting program, STEP (Systematic Training for Effective Parenting) is now in progress and is attended by many of those who were part of the "Hugs 'N' Kids" workshops.

For the children, an after-school tutoring program, with CSUN education majors, was developed.

"It gave more of the one-to-one attention they might not get in the classroom to the children," Castanoli said. "Some of these kids didn't like school, but they came to tutoring, so some of the attention they were getting may have made the difference."

During income tax time, two sessions were given by CSUN students on filling out tax forms. Additionally, high school students in the community were trained on how to fill out the short form.

There were also three social work students from CSUN, all bilingual, who did their field placement work in this community from January to May.

A major community-based project held earlier this year was a Cinco de Mayo festival, for which "we incorporated the community at all levels," said Castanoli. Organization and fund raising were done by community members.

The fund raising activities for the event included the raffling of Mexican dinners donated by local restaurants; two car washes, with community mothers, adolescents and children participating; and bakes sales of items made by the mothers.

A mother in the community taught a traditional folk dance to the children. Mothers made the costumes and pinatas. More than 1,000 people attended the celebration.

"It gave the community something to work on together, and it was ethnically based," said Castanoli. "It gave them a sense of cultural pride, and it gave the kids a special project." She plans to have a similar party at Christmas.

Castanoli has prepared a busy summer for the community children and their parents. Through Councilman Hal Bernson's office, the program has the use of a bus, and museum and beach trips are planned. Castanoli is arranging for the Northridge Library to come and have story hours in the community. She would like to see more ethnic dance and art taught to the young people.

Carla, a mother of five, who taught the folk dance to the children for the Cinco de Mayo festival, plans to continue her involvement in the community. She has a group of children come to her home for singing and dancing.

"Born here a lot of the children were born since or came here at a young age, they don't know a lot about the culture," she said. "Teaching dance is one way of showing them."

Being active in the community is important to Carla.

"I want everyone to realize that we can do something for ourselves and be the leaders, instead of having somebody above us do it and hold our hands. We can do it."

San Fernando Valley Child Guidance Clinic is located at 9650 Zelzah Ave., Northridge, CA 91325. Its phone number is (818) 993-9311.

WEINSTEIN CONTINUED FROM PAGE ONE

the residential program for members, Portals offers satellite apartments in the mid-Wilshire neighborhood as a step toward independent living.

When he joined the Portals staff in 1965, Weinstein brought a lengthy and varied background in social work to the job. Following his graduation from the University of Wisconsin, Weinstein worked for two years at a state mental hospital in Milwaukee.

"My job was to help prepare people for release into the community, place them in a situation and follow up. We had to find these people places to live, places to work and places for fun. The truth is that these did not exist," says Weinstein.

"The situation here now is not much better than it was in Milwaukee in the 1950s. Community support money has not been a heck of a lot, and I'm not even sure those of us in mental health have the same idea of what constitutes a community support system," he says.

"For example, is it social services or

services for Jewish Big Brothers in Los Angeles, Weinstein became administrator of an anti-poverty program in Venice, Calif. The program provided vocational training for young people and aid to families "using untapped resources."

In the program, college-educated housewives were trained to be family agents. The women were assigned to families through the welfare and probation departments.

"They were advocates and helped people learn the ropes of the system," says Weinstein. "They showed the people how the middle class deals with bureaucracy and served as role models." One of the things the agents did was show families where to shop outside of their own communities for better prices.

"One of the things I learned," says Weinstein, "is that there is a thin line between poverty and mental illness; you can't separate emotional problems and poverty." This was during the 60's and the Watts riots, "and we had

"I realized that people could be incarcerated all their lives for not committing any crime. It horrified me that these people received no due process. Even some of the most hardened criminals are paroled, and ... hospital patients were dependent on supervisors for their release."

outpatient services? Are they provided by the county (Department of Mental Health) or contracted out (to private agencies)? A community support system is an essential part of treatment.

"As I see it, community support is a way of focusing on dealing with the ups and downs of chronic mental illness. There must be a range of services to sustain a person that includes availability and access on evenings, weekends and holidays."

He continues, "It must include case management with a strong advocacy component and a range of residential services."

"We must recognize and accept that mental illness is a long-term problem and make provisions for long-term support. It should be considered normal for this population to be in crisis unless we want to medicate them into stupors."

During his time with the state hospital, part of his graduate training, Weinstein saw that the custodial staff hid many of the most productive patients. "The patients were doing the work, making things easy for the staff."

"I realized," says Weinstein, "that people could be incarcerated all their lives for not committing any crime. It horrified me that these people received no due process. Even some of the most hardened criminals are paroled, and before certain legislation was passed, hospital patients were dependent on the hospital supervisors (for their release)."

"I was gratified to help people find and develop the freedom to live outside a hospital. It's like giving a hearing aid to someone going deaf. I loved doing good, strong social work."

Weinstein was working in the state hospital at the time when new medications were being developed and administered. "With symptoms reduced there was no rationale for keeping people in the hospital. They were out on the street, and there was really no place for them. Some went back with their families, but others couldn't go home, and a revolving door opened. But I saw social workers were doing something. They were out in the community developing resources."

Weinstein arranged for hospital patients to serve as orderlies in a Catholic nursing home, supervised by brothers of a holy order. He arranged with a Lutheran church to sponsor a social club in its basement two to three times a week.

After a stint as director of volunteer

some riots of our own," says Weinstein. "There was much work to be done to change attitudes and the situation."

He also learned the value of using non-professional volunteers in helping mentally ill people and developed a conviction that volunteers "are a critical and potent force in effecting change and in most instances are more effective than professionals."

Much of the problem, Weinstein says, is "a short-sighted psychiatric establishment that sees mental illness as a medical problem rather than a social problem. They say mental illness is an individual matter as opposed to a social problem, and the emphasis is on treatment through outpatient psychiatric care. They treat the illness rather than the person, and the treatment is medical, in a hospital and out. We know that what we have tried in the past has not worked."

Portals began as a halfway house for veterans, with two houses, one for men and one for women. The program was supported by private fund raising and a board and care fee. Then the county Department of Mental Health changed its priorities to outpatient and inpatient psychiatric services provided directly by the county, according to Weinstein. All non-medical services were cut back, and in 1965 the state gave up residential funds.

With residential services becoming so costly, Portals changed its direction, adopting the clubhouse, psychosocial model. Weinstein took a trip to the East Coast, visiting and studying successful agencies that used the club model of self-help, such as Fountain House in New York, Threshold in Chicago and Horizon House in Philadelphia.

When the change was made, Portals worked closely with existing board and care homes to increase social programs and group counseling opportunities. "We have started new and innovative programs," says Weinstein. "We have been ahead of our time pioneering projects in several areas."

Says Weinstein, "This approach has been demonstrated to work well. Clubhouses (for recovering mentally ill persons) are functioning and working well. But the investment, in either money or commitment, is not there. I find this frustrating."

He points out that on the East Coast there is support for places like Fountain House. "Why do they have such agencies back East but nothing like them here? Such places were in ex-

istence long before Portals and other such agencies were here in California. Portals has long been the only institution of its kind in Southern California.

"There has been no great commitment by the Community Support System, the state or the county," says Weinstein. "We have a limited community residential system, our day program is a token of what it should be, and last year our vocational program was cut. It is a myth that California has been a leader in mental health care. California is a leader in Prop. 13-type legislation and deinstitutionalization without planning."

"When Ronald Reagan was governor, he pushed to get people out of hospitals. The minute they were out, they were on welfare and no longer the responsibility of the state. There was much motivation for this cheaper method of care, and it caught on. The hospitals were seen as too costly and not cost-effective."

"The governor is now working to bring the state hospitals up to standard," says Weinstein, "so they can qualify for federal funding. As it is now, the state is footing the bill. I think we will always need hospitals for institutionalization. They don't cure people, and they don't really treat them. We know there are other methods of treatment that are more cost-effective and humane."

For the future, Weinstein sees Portals as a training and demonstration project for psychosocial rehabilitation. He expects to soon have people doing post-graduate work from the USC School of Social Work and students-in-training to become occupational therapists from Los Angeles City College.

NEW TRANSITIONAL FACILITY ADDS TO PORTALS SELF-HELP PROGRAM

To expand its program of psychosocial rehabilitation, Portals House will break ground for its new transitional living facility this month.

The eight-bed facility will be built behind the agency's existing residence on land recently purchased by Portals. It will become part of the complex of buildings at Third and Mariposa in Los Angeles' mid-Wilshire district where Portals has operated for nearly 30 years.

Funding for the new facility came from a combination of sources, a matching \$57,680 grant from the Los Angeles City Community Development Department; a \$60,000, 30-year interest-free loan from the Los Angeles Community Redevelopment Corporation; and \$10,000 from Portals own fund raising.

"Portals has been concerned with the growing number of uncared for mentally ill people for many years," said Marvin Weinstein, Portals executive director. "But even with the addition of the second residence, there is still a critical shortage of community-based residential care in Los Angeles, especially in the Central Region."

If all goes as planned, the new facility should be ready for occupancy by January 1985, said Weinstein.

"The California Model calls for 500 beds in this region, but the only ones now in existence are at Portals. This causes the system to back up, because after release from hospitals, people are quite often homeless and end up in the streets or end up in the hospital again. This is not just a Skid Row problem," Weinstein said.

"In building from a model of our own development, instead of adapting an existing facility, as we've had to do in the past, we are now able to use our experience and design into our member's needs."

Said Weinstein, "The residence will be geared to developing a family-like atmosphere with full participation in activities by the residents. With our experience in running such a facility,

He is also planning to develop a range of employment opportunities and businesses. "We have tried to help our people find jobs outside and have discovered that mentally ill persons are too subject to the ups and downs of mental illness to maintain job stability. We would also like to have a complete residential system with various levels of care."

Weinstein grew up on the West Side of Chicago, where his gang involvement led to troubles in school and with the law. This became his first contact with social workers, specially assigned to work with gangs, and they served as a role model.

When he graduated from school, he wanted to help delinquents as he had been helped. His first year out after graduation, as part of his training, he did gang work.

"I like social work," says Weinstein. "You start with a person's reaction to their problem and deal with the environment. It is exciting to look at difficulties from a social perspective, viewing them in a social context and social reality."

"We don't all know what it means to be poor, socially, emotionally and intellectually, and the feelings these conditions create."

"If one has diabetes, he or she might feel fearful, cheated, guilty and angry. And that can be the least of the person's worries. He or she has to deal with family reactions and a whole new dimension of coping. This is the way many mentally ill people feel. Mental illness is a social problem with social ramifications. Dealing with this whole picture is the excitement of being at Portals."

we have received input from residents. We wanted to design a place with as homey an environment as possible."

People using the new facility would come from a hospital, crisis unit (like Puerto Esperanza or Compass House), a skilled nursing facility or "any point in the community," according to Weinstein.

With 24-hour supervision and a structured environment, the new facility will be a place for those who will later move into a satellite apartment or for those in apartments going through a particularly bad time in their illness.

"Often," said Weinstein, "people need a safe place to return to for a few days, a place to heal wounds."

"I am pleased that Portals has been able to build their new facility and thus increase transitional residential beds in the Central Region," said Cecil Hoffman, director of Community Counseling Services.

Said Hoffman, "There continues to be a limited number of long-term transitional beds. Our programs (Puerto Esperanza and Compass House) are limited to 14 to 30 days; where do these people go after that time is up? There is a real need for residential programs with longer term care than we can provide."

"We already have effective linkage with Portals," he said. "Many people have had their crisis resolved in our program and can't get into Portals because of the limited number of beds. This new facility will improve that situation."

Often, says Hoffman, the alternatives for the chronically mentally ill are board and care homes with little or no treatment program. "This makes it difficult for persons to continue toward their maximum capacity for independent living."

"New programs like this can be another step in addressing the revolving door syndrome and establishing alternatives to hospitalization."



The Los Angeles County Alliance for the Mentally Ill (AMI) Legislative Coordinating Committee met with legislative aides Bunny Wasser, from state Assembly member Burt Margolin's office, and J.J. Kaplan, from state Senator David A. Roberti's office, to share AMI's perspective on mental health issues. AMI is an advocacy, education and support group for families and friends of mentally ill persons. The Legislative Coordinating Committee is made up of representatives of each of the 10 AMI chapters in Los Angeles County. Each committee member is assigned to liaison with a legislator representing Los Angeles County. Stella March of AMI-Los Angeles is chairperson of this committee.

BUDGET CONTINUED FROM PAGE ONE

able for county or non-profit agency employees," said Richard Van Horn, Mental Health Association in Los Angeles County executive director.

"This is particularly difficult to understand when it is the governor's desire that counties and non-profit agencies assume more of the service load in mental health," Van Horn said.

"I am extremely disappointed in the governor's lack of support for mental health, after claiming this was one of his priorities, and in the cosmetic appearance he gives of supporting mental health," said Don Richardson.

Richardson is a member of the Los Angeles County Mental Health Advisory Board and president of the Alliance for the Mentally Ill—Los Angeles, a support, education and advocacy group for parents of mentally ill persons.

"Through the action of his veto," Richardson said, "the governor has reduced the \$35 million in augmentation funds to less than \$28 million in actual dollars.

"Also, at a time when there is deep concern throughout the country regarding abused children and their need for treatment, it is hard to comprehend the governor's veto of \$10.4 million for children's services."

About the children's services veto, Susan Mandel, Ph.D., executive director of the Pasadena Guidance Clinics and chairperson of the Mental Health Contractors Association of Los Angeles County, said, "With all the reports about child abuse and all the children that are on waiting lists for mental health services at clinics, the fact that the governor felt he could veto this \$10.4 million indicates that he didn't feel there was much of a mental health constituency that would be concerned and outraged, as we are.

"We think the governor should ask the Legislature to restore that \$10.4 million in the summer session."

Tom Ledwith, president and chief executive officer of the Los Angeles Child Guidance Clinic, said, "It is always troubling that the most politically powerless, our children, are often the first to suffer curtailments."

The share for Los Angeles County of the \$35 million augmentation funds is \$11.8 million, a combination of \$10.6 million from the state and the required 10 percent match from the county.

This \$11.8 million is the amount before the reduction of \$1.7 million the county will have to make because of the smaller cost of living in the governor's final budget. The Los Angeles County Board of Supervisors decided not to fund the difference.

The \$35 million augmentation was proposed for local mental health programs in the counties.

In April, the Los Angeles County Department of Mental Health announced its priorities for local distribution of the augmentation funds.

It identified as its service priorities children and adolescents, mentally disordered offenders-jail programs, emergency crisis intervention, community support programs and residential care.

This decision was made based on areas of high need and gaps in services, using the California Model of comprehensive mental health services as a resource guide.

"The regional allocation has been worked out using department-wide priorities and the index of relative need. Through the regional planning process, the regions have determined what kinds of services will be purchased with their allocation," said J.R. Elpers, M.D., director of the Department of Mental Health.

"The agencies which will deliver the services will be determined through the RFP (Request for Proposal) process," he said. The RFP process is occurring at the present time.

TASK FORCE CONTINUED FROM PAGE ONE

each supervisor was to "appoint one member to the task force to study the administration and organization of the Department of Mental Health."

Bob Hughes, district manager of Beltone Hearing Aid Center, was appointed by Supervisor Deane Dana. Hughes is a member of the Alliance for the Mentally Ill, a family and friends advocacy group.

Herb McRoy, of St. John's Hospital and Health Center, a contract agency with the Department of Mental Health, is a former employee of the Department of Mental Health and was appointed by Supervisor Peter Scharum.

Gloria Nabrit, M.P.A., the executive director of Kedren Community Mental Health Center, a contract agency with the Department of Mental Health, was appointed by Supervisor Kenneth Hahn.

Kay Slavkin is field representative for Congressman Anthony Beilenson and was appointed by Supervisor Edmund Edelman. She is a former member of the Los Angeles County Mental Health Advisory Board.

Gordon Yanz, an attorney and board president of the Verdugo Mental Health Center, a contract agency with the Department of Mental Health, was appointed by Supervisor Michael Antonovich.

At each meeting of the task force there is an opportunity for citizen involvement. Observers have included contract providers of the Mental Health Contractors Association of Los Angeles County, Alliance for the Mentally Ill, Mental Health Association in Los Angeles County board members, and interested citizens.

The task force has provided time to listen to concerns at the end of each meeting and shares correspondence.

An open letter to the task force from the Los Angeles County Alliance for the Mentally Ill stated:

"Over the past forty years, the problems of mental health care have been repeatedly 'studied', 'task forced', 'analyzed'.

"Each time, recommendations are made, programs proposed, legislation enacted. What follows are some new or different structures of services and administration but the same problems remain.

"Now, the Board of Supervisors has created another task force on Mental Health 'with the objective of identifying inefficiencies and developing recommendations.' This is an awesome task, for five people to do in 90 days.

"One thing we don't need is another management audit of the department. With no claim to being clairvoyant, we predict that the task force will agree that mental health must have more adequate resources and more effective ways must be found to implement solutions we know about, or find new solutions that will work better ...

"From the family point of view we have defined many times the needs of our ill members ...

"We hope the task force will accept the recommendations of the recent (Feb. 29, 1984) management audit by the Chief Administrative Officer and focus on the desperate needs of the mentally ill in the community."

The County Administrative office in its management audit stated, "We found the Mental Health Department to be a well-managed organization with a commitment to accomplishing the Board of Supervisor's approved goals and objectives."

In a letter to the task force the Contractors Association stated:

"The Mental Health System in Los Angeles County is composed of the County operated services, State operated services, and private and contracted mental health services.

"The Los Angeles County Mental

Health Contractors Association represents 28 distinct agencies all of whom contract with the county Department of Mental Health for provision of mental health services.

"During the past several years the private, non-profit, contract agencies have attempted to work diligently with the Department of Mental Health, state, citizens, and constituent groups to form an alliance that would allow us to speak with one voice about the needs of the Mental Health System in Los Angeles County.

"We think we have been successful in working with all forces to develop a clear and single message. We wish, in the spirit of working together, to improve the System, to make ourselves available to members of the task force as we do routinely to the Department and citizens and State officials to advise you of our perspective on different issues as they effect community mental health in Los Angeles.

"We are aware that there are a great many things good about the System and that there are a great many people in both the publically operated and private side who work very hard and very diligently to provide services to patients and facilitate the work of the mental health programs. We believe that your task force has been charged with looking at some of the problem areas.

"It is with this spirit in mind that we highlight some of the concerns that have come to the attention of various members of our association. This is not to say that we believe this is the whole picture of the important issues effecting delivery of mental health in Los Angeles County. These are ones that we feel are appropriate and fit within the charges to your task force:

1. Communication 2. Contracting Processes and Concerns 3. Issues around Regionalization 4. Planning 5. Service Delivery Problems 6. Role of the County Hospital 7. Role of Mental Health Advisory Bd. and Regional Citizen Liaison Committee."

"I never want to see a vigilante group," said Susan Mandel, Ph.D., chairperson of the Mental Health Contractors Association.

"If the task force tries to open the process, then that's good. If the task force looks at the system that has been torn to shreds (with budget cutbacks) and just says 'that's awful', looking for a scapegoat, then I would be appalled," she said.

"We need more debate and dialogue with the supervisors (on this issue). When budget cutbacks come, there isn't enough concern. Only 10 rows of the meeting are filled.

"Mental health is not something that has a high priority with the supervisors. It does not have the appeal of fire, police, parks, libraries - the things that make their constituents lives more comfortable.

"Plus, for the Supervisors, they don't have that much freedom to say where the money goes (services for mental health are mandated by the state), unlike when they vote for roads, buildings, senior centers. All get more attention and praise for the supervisors," said Mandel.

The task force is chaired by McRoy with vice-chair Yanz and members serving on subcommittees: Administration, Nabrit and Yanz; Finance, McRoy and Nabrit; Programs and Delivery System, Slavkin and Hughes; Planning, Research, Development and Evaluation, Yanz and Slavkin; State, County, Regional Relationships and Contracting, Hughes and McRoy.

The next meeting of the task force is July 26, at 2 p.m., room 836 Hall of Administration, 500 W. Temple St., Los Angeles.

CALENDAR

Families' Meetings

Alliance for the Mentally Ill (AMI) chapters for families of mentally ill persons and other family support groups will meet as follows:

Pomona AMI will meet on July 3 at 7:30 p.m. at Laurel Park, 1495 W. Laurel, Pomona.
Call (818) 576-0784 for information.

AMI Glendale will meet on July 3 at 7 p.m. at Verdugo Mental Health Center, 417 Arden, Glendale. Caring and sharing sessions will be held every Tuesday at 6 p.m. at the center.
Call (818) 842-5378 for information.

Rio Hondo Mental Health Services Relatives Group will meet on July 5, 12, 19, and 26 from 6 to 7:30 p.m. at 12000 E. Firestone Blvd., Norwalk.
Call (213) 864-2751 for information.

AMI Norwalk will meet on July 10 at 7:30 p.m. at the Norwalk-La Mirada Unified School District Administration Building, 12820 S. Pioneer Blvd., Norwalk. James Croxton, Santa Monica City College psychology professor, will speak on "The Orthomolecular View of Dopamine Hypothesis."
Call (213) 864-4412 for information.

Beach Cities AMI will meet on July 11 from 10 a.m. to noon at the South Bay Office of Mental Health Social Services, 19000 Hawthorne Blvd., Suite 302, Torrance.
Call (213) 772-2188 for information.

AMI Long Beach will meet on July 11 at 7:30 p.m. at the First Church of the Brethren, 3332 Magnolia, Long Beach.
Call (213) 430-4298 for information.

AMI Van Nuys will meet on July 11, 18 and 25 at San Fernando Valley Community Mental Health Center, 6740 Kester Ave., Van Nuys. The speaker on July 18 will be Diana Harrison, Ph.D., psychologist with the Sepulveda Veterans Administration Medical Center and in private practice.
Call (818) 988-8050 for information.

Relatives and Friends of the Mentally Ill will meet on July 11 and 25 at Augustus F. Hawkins Mental Health Center, room 1119, 1720 E. 120th St., Los Angeles.
Call (213) 321-3799 for information.

AMI San Gabriel Valley will meet on July 13 at 7:30 p.m. at San Marino Community Church, 1750 Virginia Road, San Marino.
Call (818) 797-3562 for information.

South Bay AMI will meet on July 16 at 7 p.m. at Torrance First Christian Church, 2930 El Dorado, Torrance.
Call (213) 412-2291 for information.

Westside and Coastal Friends will meet on July 19 at the Brentwood Veterans Administration Medical Center theater, building 211, 11301 Willshire Blvd., Los Angeles. Planning for Project Return Center will be discussed. Members of family groups interested in the center are invited to attend.
Call (213) 472-0834 for information.

AMI East San Gabriel Valley will meet on July 26 at 7:30 p.m. at the First United Methodist Church, 15701 E. Hill St., La Puente. Dr. Michael Zimmerman of the Anne Sippel Mental Health Clinic will discuss "Innovative Treatment Methods."
Call (818) 337-7439 for information.

AMI Los Angeles will not meet in July.

July 1

PIRATES of Pasadena Mental Health Center: An old fashioned fair and ice cream social with rides, games, prizes and food will begin at 1 p.m. at the center, 66 Hurlbut St., Pasadena. Admission is \$1, and children under six are free. Proceeds will be used for funding a child abuse prevention program.
Call (818) 795-8471 for information.

July 2, 9, 16, 23, 30

El Centro Community Mental Health Center: "You and Your Baby," a program for parents on the ups and downs of parenting and growth of their babies, will be presented from 10 to 11:30 a.m. at Royal Comprehensive Health Center, 245 S. Fetterly Ave., Los Angeles. Registration is necessary.
Call (213) 725-1337 for information.

July 2, 9, 16, 23, 30

Help Anorexia: The South Bay self-help chapter will meet on July 2, 16, 23 and 30 at 7:30 p.m. at St. Margaret Mary Church, classrooms 5 and 6, 25429 Eshelman Ave., Lomita. Dr. Edward Piken will speak on the effects of anorexia and bulimia on the gastrointestinal system at the July 9 speaker meeting, held from 7:30 to 9 p.m. in the Torrance Memorial Hospital auditorium, 3330 Lomita, Torrance.
Call (213) 326-3763, from 6 to 8 p.m., for information.

July 2, 11

YWCA WomenShelter: Drop-in support groups for women who are emotionally and/or physically abused by their partners will be offered on Tuesdays from 7 to 8:30 p.m. and on Wednesdays from 10 to 11:30 a.m. Counseling fee is on a sliding scale based on ability to pay.
Call (213) 437-4663 for location and information.

July 3, 11

Westminster Center for Personal Development: "Women in Transition," support groups for discussion of issues such as relationships, communication, career exploration and self-esteem, will meet on Tuesdays from 9:30 to 11 a.m. or 7 to 8:30 p.m., or on Wednesdays, except July 4, from 7:30 to 9 p.m., at the center, 867 E. Atchison, Pasadena. Fee is \$50 per month. Preregistration is necessary.
Call (818) 798-0915 for information.

July 3, 10, 17, 24, 31

Forto Foundation: A rap and therapy group for adolescents will meet on Tuesdays from 4:30 to 6 p.m. at 17277 Ventura Blvd., Suite 201, Encino. Fee is based on a sliding scale.
Call (818) 788-6800 for information.

July 5-8

National Alliance for the Mentally Ill: "Surviving the Mental Illnesses: Families Face the Challenges," the 1984 annual conference, will be held at the University of California, Irvine. The conference, with research as its focus, will be hosted by the California Alliance for the Mentally Ill and will have neuroscientists, physicians and researchers as speakers. Fee is \$40 for NAMI members and \$50 for non-members.
Call (714) 544-8488 for information.

July 6, 11

YWCA of Long Beach: Support groups for men who are emotionally and/or physically abusive in their relationships will be held on Wednesdays from 6:30 to 8 p.m. An intake interview prior to attending the group is required. Counseling fee is on a sliding scale based on ability to pay.
Call (213) 422-8585 for location and information.

July 6, 13, 20, 27

Bay Cities Center for Human Development: A continuing group for men who have abused children sexually will meet at 6 p.m. at the center, 9100 S. Sepulveda Blvd., Suite 102, Los Angeles. Fee is \$50 per month.
Call (213) 670-8255 for information.

RCLC

The Regional Community Liaison Committees (RCLCs), the citizens' groups presenting mental health concerns to the Los Angeles County Department of Mental Health regions, will meet as follows:

San Gabriel Valley Region RCLC will meet on July 10 at 5:30 p.m. at Arcadia Mental Health Center, 330 E. Live Oak, Arcadia.
Call (818) 960-6411 for information.

Coastal Region RCLC will meet on July 12 at 6:45 p.m. at Harbor-UCLA Medical Center, conference room eight-east, 1000 W. Carson St., Torrance.
Call (213) 533-3154 for information.

San Fernando Antelope Valley Region RCLC will meet on July 13 from 9:30 a.m. to noon in the Northridge Hospital community education room, 18300 Roscoe Blvd., Northridge.
Call (818) 508-7800 for information.

Central Region RCLC will meet on July 18 at 7:30 p.m. at LAC-USC Medical Center Psychiatric Hospital, room 2C18, 1934 Hospital Place, Los Angeles.
Call (213) 226-5726 for information.

Southeast Region RCLC's July meeting will be announced.
Call (213) 603-4874 for date, time and location.

RCLC meetings are open to the public.

July 7, 14, 21, 28

Teen Talk: This show hosted by Joseph Feinstein and featuring teenagers will air on KHJ-TV Channel 9. Topics will be "Teens on Parole" at 6 a.m. and "Women's Rights" at 9 a.m. on July 7, "Working Parents" at 6 a.m. and "First Love" at 9 a.m. on July 14, "Contraception" at 6 a.m. and "Phobias" at 9 a.m. on July 21 and "High Tech" at 6 a.m. and "Television" at 9 a.m. on July 28.

July 7-9

Center for Skill Development: A three-day "Life Skills" seminar on building skills and personal growth will be conducted by Gary Applegate, Ph.D., founder of the center. It will be held from 9 a.m. to 4 p.m. each day at 15335 Morrison St., Suite 100, Sherman Oaks. Fee is \$250. Continuing education credit is available for nurses.
Call (818) 990-1700 for information.

July 9, 16

Mano de Esperanza, San Fernando Valley Community Mental Health Center: "Prevention Services for the Latino Community—A Developmental Perspective," a two-part program, will be presented by Alberto Valdez, psychologist with the Community Service Organization of Los Angeles. Topics will include alcoholism, counseling and consumer advocacy services. It will be held from 10:30 a.m. to noon at the clinic, 6740 Kester Ave., Van Nuys.
Call (818) 988-8050 for information.

July 11, 18

El Centro Community Mental Health Center: "The Task of Parenting," a free class designed to provide guidance and learning opportunities to parents, will be offered from 6:30 to 8 p.m. at the center, 972 S. Goodrich Blvd., Los Angeles. The July 11 class will be in English and the July 18 class will be in Spanish.
Call (213) 725-1337 for information.

July 14

Portals House: The SOS dance will be held from 6 to 9 p.m. at Wilshire Christian Church, 634 S. Normandie, Los Angeles. It is open to board and care home residents and community mental health program clients. Admissions is 25 cents.
Call (213) 386-5393 for information.

July 18

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

July 18

Help Anorexia: The North Hollywood/San Fernando Valley self-help chapter will meet at 7:45 p.m. at 6240 Laurel Canyon Blvd., Suite 202, North Hollywood.
Call (818) 766-5663 for information.

July 18

El Centro Community Mental Health Center: Women United, a continuing support group for physically and/or emotionally abused women, will meet from 10:30 a.m. to noon at the center, 972 S. Goodrich Blvd., Los Angeles.
Call (213) 725-1337 for information.

July 19

Mental Health Advisory Board: The MHAB, an advisory group to the Los Angeles County Board of Supervisors, will meet at noon in the Hall of Administration basement, 500 W. Temple St., Los Angeles.
Call (213) 738-4772 for information.

July 19

Hollywood Human Services Mental Health Task Force: "Information and Referral Services in Los Angeles County" with speaker Linda Lewis, Info Line executive director, will be the topic of the free task force meeting, held from noon to 1:30 p.m.
Call Wendy Somerfield at (213) 467-3605 for location and information.

July 25

Anorexia Nervosa and Associated Disorders: ANAD, a self-help group for persons with eating disorders, will meet at 8 p.m. at 18345 Victory Blvd., Suite 414, Tarzana.
Call Suzy Green, Ph.D., at (818) 343-9105 for information.

Recovery Inc.

Recovery Inc., a self-help association of "nervous and former mental patients" will hold free weekly meetings in most areas of the county. For a meeting list, call (213) 651-2170. In the Los Angeles/Foothill communities and Santa Fe Springs, meetings will be held as follows:
Sundays at 10 a.m. at Westside Jewish Community Center, 5870 W. Olympic, Los Angeles.
Mondays at 6 p.m. at the Eagle Rock Library, 5027 Caspar Ave., Eagle Rock.
Wednesdays at 6 p.m. at Hollywood Mental Health Services, 4759 Hollywood Blvd., Hollywood.
Wednesdays and Thursdays at 7 p.m. at the Santa Fe Springs Town Center Hall, room 2, 11740 Telegraph Road, Santa Fe Springs.
Thursdays at 8 p.m. at Youth House, 4469 Chevy Chase, La Canada.

CONNECTIONS

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