

CONNECTIONS

A PUBLICATION OF THE MENTAL HEALTH ASSOCIATION IN LOS ANGELES COUNTY C-98 APRIL, 1981

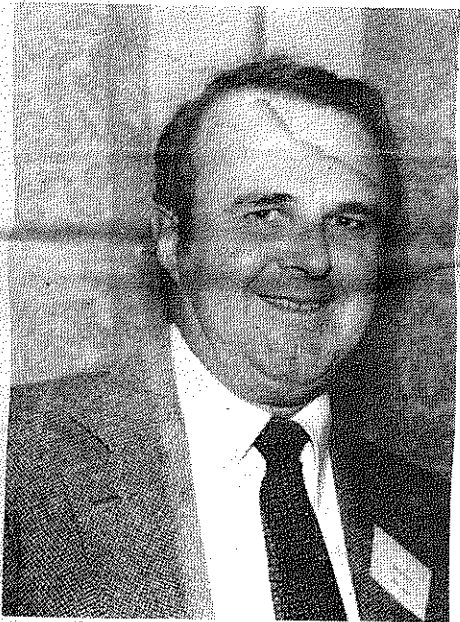
Reagan proposes 25 percent reduction in funding for Health Services Block Grant for '82.

MENTAL HEALTH: ARE WE WILLING TO PAY FOR IT?

INTERVIEW:

DEANE DANA

L.A. County Supervisor



"I'm positive about the whole mental health program in Los Angeles County. It's an upbeat situation. The staff, under the direction of Dr. Richard Elpers, is dedicated. You can tell they are into it, interested. It's obviously a part of their lives."

Newly elected Los Angeles County Supervisor Deane Dana spoke enthusiastically about this, his supervisory assignment: the L.A. County Department of Mental Health.

"I would fight any efforts by the state to cut back funds."

Dana expressed appreciation for a structure that includes community participation through the Mental Health Advisory Board, chaired by Dr. Frances Meehan. At the annual meeting of the advisory board, Supervisor Dana introduced the state legislators from Los Angeles County.

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President Reagan's budget cuts of 25 percent in Health and Human Services will, if enacted, impact mental health systems across the country.

Reagan's plan would repeal essential portions of the Mental Health Systems Act and would provide Federal funds (reduced 25 percent) to the states in block grants.

The Health Services Block Grant allows decisions to be made at the state level where the needs are best known but would include mental health along with a dozen other programs all competing for the reduced funds.

These were the issues addressed by Allan R. Moltzen before Public Affairs Chairpersons representing Mental Health Association chapters, meeting in Los Angeles, March 21.

"It could be a real fight over who will get what in some states. The Reagan cuts even include 40 percent cut in mental health research training funds," said Moltzen.

The cut, in combination with a proposed "cap" on Federal participation in Medicaid, could lead to serious reductions in community mental health services.

It has become very clear that those interested in mental health will have to work at the grass roots to let their legislators know the need for services in the

local community, he concluded. While the proposed cutbacks refer to Federal money, mental health services receive the bulk of their support at the state level, where budget hearings are now in process.

Connections Exclusive

ESCAPEE FREE

Donald Wachtel, who escaped from a Colorado mental hospital, has been released from jail after the state of Colorado dropped the warrant for his extradition.

The Mental Health Association in Los Angeles, which provided support to Wachtel, negotiated with the state of Colorado to have the extradition order dropped.

Wachtel escaped from the Colorado State Hospital in Pueblo, Colo. on January 2, 1981, after spending nearly two years in the institution.

Wachtel was arraigned on an extradition warrant on March 3 at the Los Angeles Criminal

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PHYSICALLY DISABLED PG. 4-5

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CONNECTIONS

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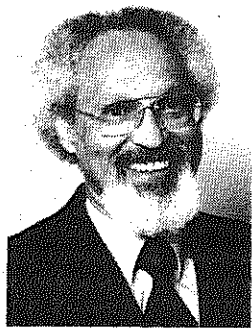
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ESSAY

A TIME FOR CHANGE

Written by
Harold Mavritte, M.D.



By Harold E. Mavritte, M.D.
Assistant Director of Programs
County of Los Angeles
Department of Mental Health

During the last several years civil commitment systems and the mental health community have been attacked by the public and in the courts, not only in California, but throughout the nation. Recent legal decisions have caused confusion and uncertainty regarding the responsibilities of those providing treatment, on the one hand, and the rights of those receiving treatment on the other.

Although the fundamental ideas and intent of Lanterman-Petris-Short Act were and are noble, there is no doubt in the minds of many persons that the civil commitment system as it exists in California and most states today should be reformed.

Many in the mental health community have concluded that the major problems result from the current statutory language and our misconceptualization of several significant mental health issues. These problems are legally difficult and must be clarified before our system can be modified.

Civil commitment laws focus on establishing a mechanism for involuntarily detaining people who are dangerous to themselves or to others or who are unable to provide for their own needs. These laws are founded on either the state's (society) *parens patriae* power or police power.

The police power is that power possessed by the state which enables the state (society) to act to protect persons from harm from others. Criminal statutes and mandatory vaccination requirements are often cited as examples of the state's police power. The authority of the state to civilly detain persons who are determined to be mentally ill and dangerous to others is pursuant to the police power.

On the other hand, the *parens patriae* power is the power possessed by the state (society) to protect and care for those who are considered not capable of caring for themselves. Statutes relating to the care and protection of children are the most cited examples of the state's *parens patriae* power.

Much of our present confusion and disenchantment with the current system comes about because we do not understand these two powers and the differences in interpretation among the patients, parents, legal professionals and clinicians.

Under current California statutes the only criteria for civil commitment pursuant to the police power are the existence of mental illness or mental disorder and the fact that the mental disorder causes the person to be a "danger to others." The statutes do not address "treatability."

This fact, in itself, represents a major point of difference between the legal system and the mental health system. As it currently stands, "treatability" does not appear to be applicable to commitments based upon the concept of "danger to

others." This is true because the purpose behind such commitments is not to care for and treat the person committed, but to protect others from the person detained.

As long as commitments under the police power are done without consideration for the treatability of, or benefit to, the patient, it is simply turning the mental health system into another jail system. Mental health professionals must have the option of avoiding responsibility for those persons who have no business being their responsibility.

In addition, the current law makes the mental health professional the person who is to detain mentally disordered persons on the basis of their dangerousness or grave disability. The health professionals are thus placed in the role of being agents of police power as well as agents of treatment. This is not a proper role assignment for health professionals.

Another issue that often causes confusion in the civil commitment process is that of a person's competency to make proper decisions relating to care and treatment. Under the *parens patriae* commitments the requirement that the person be incapable of making proper decisions relating to care and treatment is a necessary criterion. Such a finding, however, is not necessary prior to authorizing involuntary commitment pursuant to the police power. However, it does appear from recent court decisions that such a finding of "incompetency" is necessary if the state wishes to commit and forcibly treat the person committed. Because the California Legislature did not specifically deal with the issue of incompetency, we have further confusion and misconceptions.

"Health professionals are thus placed in the role of being agents of police power as well as agents of treatment."

California's current civil commitment system specifically provides for involuntary detention based upon a finding that a person is, as a result of mental disorder, a danger to others, or to himself, or gravely disabled. The concept of "dangerousness" has been recognized by the courts as a necessary element to both police power commitments and *parens patriae* commitments. This concern regarding "dangerousness" has, however, led to confusion of the different purposes behind the two powers.

The term "dangerousness" usually has connotations which lead us to think in terms of "dangerousness" to others. This is the very essence of civil commitments based upon the police power and *there is no doubt that society has the right to exercise this power.* However, thinking in terms of "dangerousness to others" often leads us away from the concept that persons can be "dangerous" to themselves, not only by affirmatively acting to harm themselves, but also through neglect or inability to care for themselves.

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ESCAPEE

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Court Building. MHA President Bill Thomas argued orally on Wachtel's behalf at the hearing, pointing out that Wachtel had undergone psychiatric testing and was not found to have a definable diagnosis, and that the MHA was totally supportive of Wachtel. He also presented the judge with two letters, one from the Mental Health Association and the other from a firm with a job offer.

Presiding Judge Patti McKay denied Wachtel's request to be released on his own recognizance and set bail at \$25,000. Unable to post bail, Wachtel was sent to the Los Angeles County Jail.



Bill Thomas and Donald Wachtel (l-r)

"I was totally shocked at the amount of bail set. I feel it was excessive in light of the mitigating circumstances," said Thomas.

Wachtel surrendered to Los Angeles police officers on Feb. 27 at the MHA central office in Los Angeles, on the advice of Thomas, who "felt the best thing was for him to get this cleared up as soon as possible."

Wachtel said that it would have been necessary for him to forge identification to gain employment in order to remain in Los Angeles.

"I resolved within myself that if I have to commit a crime, I would give myself up," Wachtel told KABC-TV reporter Angela Black, who was present when Wachtel turned himself in.

Following his arrival in Los Angeles, Wachtel contacted the MHA and asked to speak with Thomas. Wachtel had read a newspaper article on Thomas, who himself escaped from Farview State Hospital in Pennsylvania 11 years ago.

"When we talked over the phone he seemed oriented, and I didn't think he was dangerous, so I agreed to meet him," said Thomas.

Before Wachtel placed himself in police custody, Thomas arranged for Wachtel to undergo a psychiatric examination by a L.A. County psychiatrist, who, according to Thomas, did not find a definable psychiatric diagnosis.

Thomas said he discovered several similarities between Wachtel and himself as they talked. Both were natives of Pennsylvania, both had escaped from mental hospitals and both had traveled to Los Angeles after their escapes.

Thomas' ordeal was recounted in the best-selling biography, "The Shoe Leather Treatment," by S.L. Stebel, and in a NBC television movie, "The Other Side of Hell," starring Alan Arkin.

"The Mental Health Association is dedicated to human rights, specifically in this field of advocacy," Thomas said. "In this circumstance, all the right ingredients were there to gain our support. He wasn't mentally ill, and just taking his freedom away wasn't the right thing to do to this man."

Wachtel intends to remain in Los Angeles, according to Thomas.

"When he was released, he told me that the first thing he wanted to do was to go down and get valid identification at the Department of Motor Vehicles," said Thomas.

WORD PIECES

M.H.A. — Mental Health Association in Los Angeles County. County chapter of a non-profit, nation-wide, voluntary, non-governmental organization dedicated to the promotion of mental health, the prevention of mental illness and the improved care and treatment of the mentally ill.

COMMUNITY MENTAL HEALTH SERVICES ACT —

1968 law comprised of two acts: the Lanterman-Petris-Short Act and a revised version of the Short-Doyle Act of 1957.

L.P.S. — Lanterman-Petris-Short Act. This California state legislative act details the procedures by which the counties' rights are protected; also provides the administrative and legal mechanics which enable the provision of treatment services; part of the Community Mental Health Services Act.

5150 — Article I of the Lanterman-Petris-Short Act. Provides for involuntary detention for a person who is either (1) a danger to self or others, or (2) gravely disabled (unable to provide for one's basic need for food, clothing and shelter).

SHORT-DOYLE — Short-Doyle Act. This California legislative act details the procedures by which the counties are reimbursed for direct or contract services for those individuals requiring mental health services; second part of the Community Mental Health Services Act.

R.C.L.C. — Regional Community Liaison Committee. Concerned citizens advisory committee comprised of at least 24 members whose purpose is to provide input to the planning process of a region; committee meets at least 10 times a year with its meetings open to the public; committee members are appointed by the regional director of the Department of Mental Health to three-year terms and may serve two terms; members must represent the community served and be a resident of the region served.

MHA HONORS BRADBURY

by Julia Scalise

Recognizing his "continued and rewarding contributions to the promotion of good mental health," the Mental Health Association is honoring famed author/playwright Ray Bradbury at a benefit testimonial dinner on May 26 at 8 p.m. at the Ambassador Hotel in Los Angeles.

At the dinner, Bradbury will receive the Mental Health Association Performance Award.



Ray Bradbury

An array of long-time Bradbury friends and entertainment personalities will be on hand to participate in the evening's ceremony. Actor/dancer Gene Kelly is scheduled to present the award to Bradbury. His film schedule permitting, Academy Award-winning actor Charlton Heston will read selected excerpts from Bradbury's works. Prominent people from the fantasy and science fiction community are invited to attend.

Gene Roddenberry, creator/producer of the "Star Trek" television series and motion picture, is serving as chairperson of the event.

Other invited guests include Calif. Gov. Edmund G. Brown Jr. and Los Angeles Mayor Tom Bradley.

The Mental Health Association Performance Award is given for outstanding achievement in the area(s) of 1.) prevention of mental illness, 2.) promotion of good mental health, or 3.) advocacy on behalf of the mentally ill. Bradbury was selected in recognition of his continuous promotion of human dignity in both his personal and professional endeavors.

"When you say, 'look at me, look at my loves and fears,' someone will read that and say, 'I'm not crazy after all.'"

"Through his creative endeavors, he has spontaneously promoted good mental health," Lynn Bohart, M.H.A. coordinator of special events, said of Bradbury. "His stories are a creative outlet and usually contain a moral element."

Bohart's statement is reaffirmed in a recent *Wall Street Journal* review which states that Bradbury writes "stories of the mind in space rather than of machines, (stories which) are more about Earth than Mars."

Another review, appearing in *Time* magazine last October further stressed the point in stating, "Bradbury

saves his praise for the fragile fabric of civilization and extols the basic virtues of common sense and human affection."

While widely known as a science fiction writer, Bradbury's works extend beyond the science fiction classification, and the writer considers himself an author/playwright.

Among the best known of Bradbury's works are *Fahrenheit 451*, *The Illustrated Man* and *The Martian Chronicles*, which adapted into a television mini-series last year.

Additionally, he scripted the screenplay for the 1954 film version of "Moby Dick," starring Gregory Peck, as well as teleplays for "Alfred Hitchcock Presents."

His plays include "The Wonderful Ice Cream Suit" and "Any Friend of Nicholas Nickleby's is a Friend of Mine." A collection of his poetry was published as "Where Robot Mice and Robot Men Run Round in Robot Towns."

Interwoven among Bradbury's plots is his personal message for maintaining one's well-being through doing; particularly doing what one enjoys.

"People should try to do things they love, so they can stay healthy. Half the trouble with the world is with people doing jobs they shouldn't be doing," he said.

Bradbury expanded his feelings on the subject in a poem he wrote recently, appropriately titled, "Doing is Being," in which he states, in part:

So then practise and rehearse
To find heart-soul's universe,
Knowing that by moving/seeing
Proves for all time: Doing's being!

Bradbury recognizes the therapeutic value of writing, not only to the author, but to his readership as well.

"If you write honestly, they (the readers) will benefit as you do," he said. "When you show a similar fear or nightmare or show that others share an identical concept, it should be some sort of relaxation to people," he continued. "When you say, 'look at me, look at my loves and fears,' someone will read that and say 'I'm not crazy after all.'"

"... People say I've helped them; I've summoned up the past or laid a ghost to rest for them."

Bradbury said that writing has "helped stabilize my life," but added that "works of art can't do the complete job.

"You have to make sure you have good friends and a healthy marriage. Personal relationships come first, artistic endeavors second."

Among the 100-300 letters Bradbury receives weekly are recurring messages from his fans about the help he has given them.

"I have a wonderful affection with my readers, and people say I've helped them; I've summoned up the past or laid a ghost to rest for them," he said.

The May 26 event reinforces the MHA goal to "reverse the public's indifference to mental illness and to change the stigma attached to mental health so that along with one's physical health, one's mental health becomes of primary concern," according to Richard Van Horn, MHA executive director.

Proceeds from the testimonial dinner will benefit the Mental Health Association in Los Angeles County, a non-profit, voluntary organization dedicated to the promotion of mental health and the prevention of mental illness. Those interested in purchasing tickets or tables or obtaining further information regarding this event may do so by contacting Lynn Bohart at 930 Georgia St., Los Angeles, Calif. 90015 or at (213) 629-1527.

LEGISLATIVE ANALYSIS

CALIFORNIA LEGISLATURE ACTS

Newly Enacted Bills

Effective Jan. 1, 1981

AB 2144 (BATES)

Under Welfare and Institutions Code Section 5328.1 a mental health facility may release to a member of the patient's family information that the patient is there, or is seriously physically ill or dead, if the person in charge of the facility determines that the release of such information is in the best interest of the family.

This bill amends this section so that now the facility is required, upon request of a member of the patient's family or other person designated by the patient, to notify such family member or the designee of the patient's presence in the facility, his or her transfer, diagnosis, prescribed medications (including side effects), progress, and serious illness, if, after notification that the information is requested, the patient authorizes such disclosure. If the patient is unable to authorize the release of such information, the bill requires the facility to give notification of the patient's presence in the facility to the patient's immediate family. The bill also requires a facility to notify a family member or the designee of the release or death of a patient, upon request of the family member or the designee.

Bills Now in Progress

CA SB 114 (DOOLITTLE) Insanity

LAST ACT DATE 2/26/81

LAST ACTION: Set for hearing March 31, 1981

Would redefine "insanity" in the law to mean a diseased or deranged condition of the mind which makes a person incapable of knowing or understanding the nature and quality of his act or makes a person incapable of knowing or understanding that his act was wrong, in conformity with the definitions applied by the courts prior to recent decisions. Would provide that the test for idiocy is the same as that for insanity. Version: 2/1/81

CA AB 553 (BERMAN) Mental health

LAST ACT DATE 3/3/81

Would appropriate an unspecified amount from the unencumbered balance of the \$15 million appropriation by the Budget Act of 1980 for alternatives to state hospital services, to the State Department of Mental Health to be allocated to Short-Doyle programs during the 1980-81 fiscal year for the purpose of developing in each local mental health program an interdisciplinary peer review system of the quality of patient care and medication monitoring system for Short-Doyle clients as required by prescribed provisions of the Welfare and Institutions Code. Urgency. Version: 2/19/81

AB 610 (Berman-Moorhead-Rosenthal-Torres) Access to Records

LAST ACT DATE 2/23/81

LAST ACTION: To be heard in Health Committee April 6

AB 610 is this year's version of last year's AB 157, a bill to give patients access to their records.

Mental health records are treated in the following manner: When providers determine that a patient's access to his/her own records could be detrimental, they may decline to show them. However, the providers must document the request in the chart along with reasons for refusal (including the specific detrimental consequences). Further, they must inform the patient that he/she may designate a licensed physician, surgeon, psychologist or clinical social worker to see the records and must give that designated person access. There is nothing in the bill to limit what the designated professional may share with the patient.

MENTAL HEALTH SERVICES FOR PERSONS PHYSICALLY DISABLED

"By proclaiming 1981 as the International Year of Disabled Persons, the General Assembly of the United Nations aimed at focusing attention on the enjoyment by disabled persons of rights and opportunities in order to ensure their full participation and integration into society.

Kurt Waldheim

Secretary-General of the United Nations



FOR USE AS A POSTER

Mental Health Association

in Los Angeles County

930 Georgia St.,

Los Angeles, CA 90015

Mental Health Services for persons with physical disabilities are available throughout the county. The following is a list of services that have wheelchair access or other special features.

Los Angeles County Information and Referral for Mental Health Services (213) 738-4961

Los Angeles County Commission on Disabilities Hall of Administration L.A.

Marian Mulrone (213) 974-1053

Olive View Hospital Sherman Way and Van Nuys Blvd. Van Nuys, CA 91405 (213) 997-1800

County U.S.C. Outpatient 1237 N. Mission Rd. Los Angeles, CA 90033 (213) 226-5334 adults (213) 226-5303 children

La Puente Community Mental Health Center 160 S. Seventh La Puente, CA. 91744 (213) 961-8971

Long Beach Mental Health Center 455 W. 14th St. Long Beach, CA 90831 (213) 599-9280

Santa Clarita Valley Mental Health Services 25050 Peachland Ave. Newhall, CA 91321 (805) 225-7822

Rio Hondo Mental Health Center 12000 Firestone Norwalk, CA 90650 (213) 864-2751

San Antonio Mental Health Center 6343 Eastern Bell Gardens, CA 90201 (213) 771-7761

San Gabriel Valley Mental Health Center 330 E. Live Oak Arcadia, CA 91006 (213) 445-4350

San Pedro Mental Health Center 769 W. Third St. San Pedro, CA 90731 (213) 519-6101

Santa Monica West Mental Health Services 1525 Euclid St. Santa Monica, CA 90404 (213) 451-8731



South East Mental Health Center 1600 E. Compton Blvd. Los Angeles, CA 90220 (213) 603-7078

St. John's Hospital Mental Health Services for the Deaf 1328 22nd St. Santa Monica, CA 90404 (213) 829-8537

Central City Community Mental Health Center 4211 S. Avalon Blvd. Los Angeles, CA 90011 (213) 232-4111

Adaptive Recreation Unit Recreation and Parks Department City of Los Angeles 3191 W. Fourth St. Los Angeles, CA 90020 (213) 485-4876

Wright Institute 1100 S. Robertson Blvd. Los Angeles, CA 90035 (213) 550-0571

Westside Community for Independent Living 11687 National Blvd. Los Angeles, CA 90024 (213) 473-8421

South East Center for Independent Living 12458 Rives Downey, CA 90242 (213) 862-6531

Good Shepherd Center for Independent Living 4323 Leimert Blvd. Los Angeles, CA 90008 (213) 295-8366

Darryl McDaniel Center for Independent Living 14354 Haynes St. Van Nuys, CA 91401 (213) 873-7300

Homebound Program — Community Resource Center of Van Nuys San Fernando Valley Community Mental Health Center 16930 Sherman Way Van Nuys, CA 91406 (213) 988-8050 Counseling for homebound

GLAD (Greater Los Angeles Council on Deafness) 616 S. Westmoreland Los Angeles, CA. 90005 (213) 383-2220 TTY or voice Peer counseling

Center for the Partially Sighted Santa Monica Hospital 1225 15th St. Santa Monica, Ca. 90404 (213) 451-1511 ext. 2393

Braille Institute 741 N. Vermont Los Angeles, CA. 90029 (213) 663-1111

Gateways Hospital Older Persons Day Treatment Program 1891 Effie St. Los Angeles, CA. 90026 (213) 666-0171

UCLA-Multiple Sclerosis Counseling Reed Neurological Research Center 710 Westwood Plaza Los Angeles, CA. 90024 (213) 473-1639

Self Actualization Institute for the Deaf (SAID) 5768 W. Pico Blvd. Los Angeles, CA. 90019 (213) 931-1291

Disability-Substance Abuse Resource Research and Information Center Cal State Long Beach 1250 Bellflower Blvd. Long Beach, CA 90840 (213) 498-5005

Veteran's Mental Health Services for the Physically Disabled

Long Beach VA Hospital 5901 E. Seventh St. Long Beach, CA 90822 (213) 498-6834

Sepulveda V.A. Hospital Hospital 16111 Plummer St. Sepulveda, CA 91343 (213) 894-8271

Brentwood V.A. Hospital Mental Health Services Wilshire and Sawtelle Los Angeles, CA 90073 (213) 478-3711

Outpatient Clinic 425 S. Hill Los Angeles, CA 90013 (213) 688-4075

Vet Outreach 251 W. 85th Pl. Los Angeles, CA 90003 (213) 753-1391

Vet Outreach 7222 Van Nuys Blvd. Van Nuys, CA 91406 (213) 988-6904

Vet Outreach 1406 Pacific Ave. Venice, CA 90291 (213) 392-4125

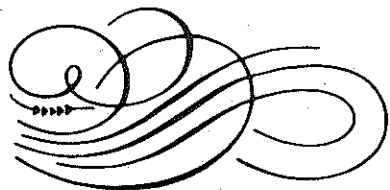
Vet Center 2449 W. Beverly Montebello, CA 90640 (213) 728-9966

Our Plac 1816 S. Figueroa 4th Floor (Patriotic Hall) Los Angeles, CA 90015 (213) 747-5345

East L.A. V.A. Clinic 915 N. Bonnie Beach Pl. Los Angeles, CA 90063 (213) 263-9301



SAN GABRIEL VALLEY REGION



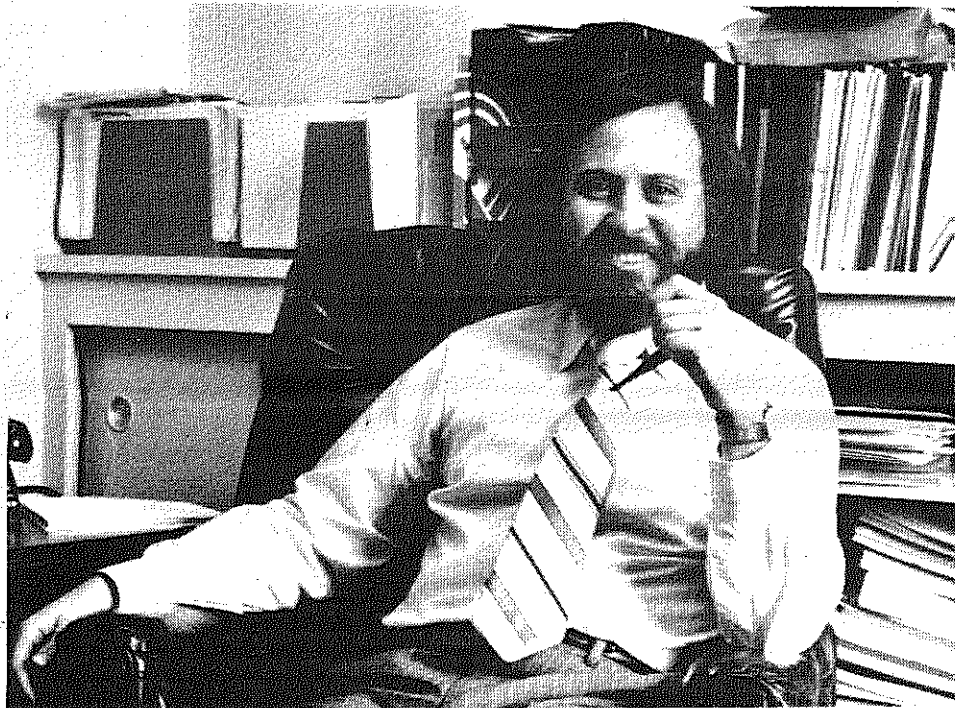
The first in a series of articles focusing on one of the five Department of Mental Health, Los Angeles County, regions.

Use of a multidisciplinary approach and the establishment and implementation of a community-based treatment program are the primary concerns of the San Gabriel Valley Region, according to Director Allan Rawland, M.S.W.

"Community mental health means incorporating all the various professionals, para-professionals and volunteers as part of the treatment program," said Rawland. "It's integrated in the sense that all systems are working together with the common goal of providing services to the client. Everyone is important to the system."

The Region is divided into the Arcadia Mental Health Center, which is the largest district, serving nearly 40 percent of the region's population; Sierra Vista Mental Health Center; La Puente Valley Mental Health Center; El Camino Mental Health Center, which has a new facility; and the independent Tri-City Mental Health Authority, serving the La Verne, Claremont and Pomona communities, which will be merged with the County.

"The idea of community-based treatment is to incorporate all aspects of the community in the treatment of the individual. The community is where we eat, sleep, love and socialize. If we are serious about 'normalization,' we have to incorporate the community," Rawland said.



Allan Rawland

photo by Julia Scalise

Rawland compared his role in this approach to that of a symphony orchestra conductor; having the responsibility of blending the many disciplines together much the same way the conductor blends the various musicians.

"If we are serious about 'normalization,' we have to incorporate the community."

He is also proud of the development of districts, each with a district director, and volunteer district councils, within his region. Contained within the structural design is the philosophy of the community oriented program. Clients are able to receive mental health services within their community. This type of composition enables the region to provide "services based on the needs of the client, not the needs of the program," said Rawland.

The region has received "tremendous support" from the community, law enforcement agencies and Supervisor Pete Schabarum, according to Rawland. He said that the supervisor's office provides support and assistance and stays involved with the development of the region.

Future Plans and Goals

Rawland has several plans for expansion and development of San Gabriel Valley Region programs he would like to see actualized during the next few years, depending upon the availability of funding.

He would like to see funding increased to help compliment the planning process "so we get the most to least restrictive programs with the most options available to utilize on behalf of the clients," he said.

Making the region and the community more aware of the

problems of mental illness is another area which Rawland plans to develop.

The development of a local acute care program is another of Rawland's goals.

"The ideal would be where each district has 25-30 acute care beds as part of its system. It would incorporate the needs of the chronic disabled. They are the first priority. They, and those most dependent, need our care first," he said.

More specialized, culturally developed programs for seniors and minorities is still another of Rawland's proposed projects.

Finally, from an administrative standpoint, Rawland said he wants to "increase our quality and effectiveness," and "fine tune our system and work out the rough edges."

PARTNERS IN INTERVENTION

Partnership is the word Regional Director Allan Rawland used to describe the relationship between the San Gabriel Valley Region Psychiatric Emergency Team (P.E.T.) and the 33 law enforcement agencies contained within the Region's boundary.

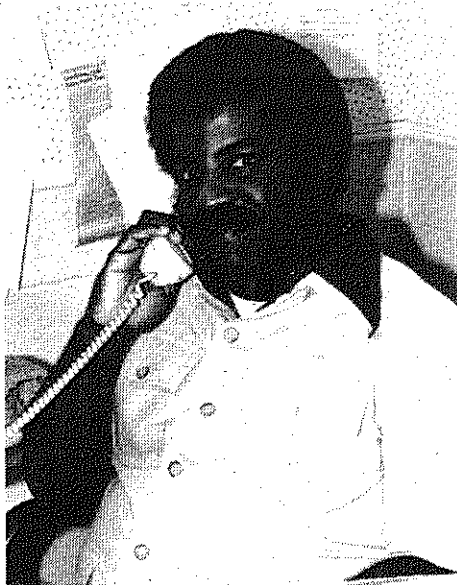
The Psychiatric Emergency Team provides short term crisis intervention. Its function is to "evaluate people who present themselves in crisis and need to be seen or assisted," said John Key, chairperson of the district P.E.T. coordinators. Each district within the region has a psychiatric evaluation team.

"The focus is to provide crisis intervention; to provide the least restrictive alternative to hospitalization," said Rawland.

The partnership is evidenced by the Law Enforcement Task Force formed by the law enforcement agencies and the regional mental health services districts. It is a "unique" committee which "addresses the interface between law enforcement and mental health," said Key, task force chairperson.

"We are trying to have a continual forum to discuss operational procedures," Key said, adding that the goal of the committee is to develop an on-going relationship between the two groups.

The committee is comprised of 40-50 members, representing each of the law enforcement agencies and each mental health services district within the region.



John Key

A committee of this nature was formed because the region "has the largest number of independent law enforcement agencies," said Rawland.

Contained within the area served by the region are 27 police departments, five sheriff substations and the California Highway Patrol.

The Law Enforcement Task Force also has a subcommittee which is working on an informal standing agreement between the region and the local law enforcement, which will place in writing agreements which are currently just verbal.

"It will clarify how each agency responds, and what its responsibilities and expectations are," said Key.

He said that the P.E.T. has a "good relationship" with law enforcement and "they rely on us for consultation, evaluation and collaboration."

P.E.T. is a much-used service in the San Gabriel Valley Region. In the Arcadia office alone, more than 700 phone calls were received during January. The team made 111 field visits and received 180 walk-in visits during the month.

The team receives walk-in visits and has persons brought in by the various law enforcement agencies, but receives most of its contacts by phone calls from law enforcement agencies, families or a person in crisis. The phone call is assessed and the person is invited to come in for an evaluation, if possible. If the person is unable to come in, the P.E.T. goes out into the field. Key himself has even given crisis intervention counseling on the freeway.

Some sort of disposition is made, and the person is given a referral for further counseling. P.E.T. involvement does not end at the point, however. The team makes follow-up home visits.

The team is not just a psychiatric emergency team, but rather a crisis intervention and emergency service evaluation team.

"We've broadened its scope of services," said Key, who added that many have the impression that the function is only suicidal or homicidal intervention.

"We will see anybody that needs to be seen or is in crisis," he said.

SAN GABRIEL VALLEY REGION IS:

- 840 square miles
- 1.8 million people
- 32 cities and unincorporated County areas
- 27 police departments
- 5 sheriff substations
- 242 L.A. County Department of Mental Health staff members, including clerical, administrative support, management and clinical

a wide diversity of socio-economic and demographic features

5 mental health districts:

Arcadia Mental Health Center
330 E. Live Oak Ave., Arcadia

El Camino Mental Health Center
11721-A Telegraph Rd.,
Santa Fe Springs

La Puente Valley Community
Mental Health Center
160 S. Seventh Ave.,
La Puente

Sierra Vista Mental Health Center
4640 N. Maine Ave., Suite 12
Baldwin Park

Tri-City Mental Health Authority
1149 N. Garey Ave., Pomona

PEOPLE CONNECTION

"HANDS" HELP BRIGHTEN CENTER

by Julia Scalise

The San Gabriel Valley Vocational/Socialization Center has a new look. A fresh coat of paint covers the walls in three of the six rooms. The wooden furniture is newly repainted as well. In the near future, the Center will be the recipient of new curtains.

These improvements have become possible with the assistance of "Helping Hands."

"Helping Hands" is an Allstate Insurance Company-wide program which "matches volunteers with needy community agencies," according to Patty Overstreet, Allstate Insurance Company regional public affairs manager.

The Vocational/Socialization Center, located in the United First Methodist Church at 3903 N. Tyler in El Monte, provides direct services with persons who have been in a mental hospital.

On Saturday, February 21, nearly 70 pairs of Allstate "Helping Hands" participated in "Allstate Paint Day," which resulted in the Center's revised look.

As Mental Health Association coordinator of volunteer services for the Center, Diane Cox is responsible for recruiting volunteers to assist in Center programs. As part of her recruitment search, Cox was referred to the Volunteer Action Center. However, Cox did not have a painting project specifically in mind when she began her recruitment search.



Allstate "Helping Hands"

It was at the VAC that Cox was placed in contact with Overstreet. Overstreet, too, had contacted the VAC; however, her situation was opposite from that of Cox. She was in the process of finding a project in which to involve the regional "Helping Hands" volunteers.

Allstate was "looking for a group project that would yield tangible results," said Overstreet. "We wanted both the employees and the agency to see the accomplishments.

"We think that individual volunteers are important, too, but (this way) the employees get the chance to work together, and what they learn about the community and themselves is invaluable."

Cox and Overstreet met to discuss initiating a "mutually beneficial program," according to Cox. During their discussion, Cox remarked that the County was in the

process of painting portions of three of the rooms.

"When Diane mentioned that they were involved with painting, I jumped at that," said Overstreet, who had previous experience with similar painting day projects in another Allstate Company region.

While starting time for the "Allstate Paint Day" on February 21 was scheduled for 8:30 a.m., many Allstate employees began arriving earlier. The crew of nearly 70 finished at 12:30 p.m., well ahead of the 3 p.m. scheduled completion time.

"We were so enthusiastic we got there early," Overstreet said. "It was incredibly easy to get the employees involved. The Mental Health Association is well-understood and well-respected. Our employees were able to see something good they've done for the community, particularly for an agency like the Mental Health Association."

"We want the client to recognize that this is a place where we don't stress illness."

The majority of the painters are employed at the regional Allstate Insurance Company office located in Pasadena, but two groups of volunteers came from the Allstate district claim offices in Arcadia and West Covina.

In addition, Allstate donated all the paint and painting supplies, such as brushes and dropcloths. Allstate also provided coffee, doughnuts, orange juice, soft drinks and chicken lunches for the workers.

Cox is pleased with the turnout for "Allstate Paint Day" and its subsequent success.

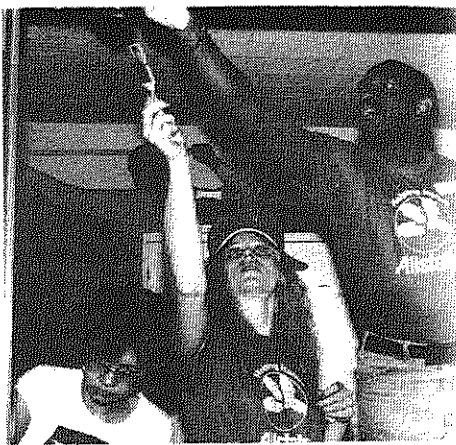
"I couldn't have asked for better," she said. "Their attitudes were super, and they were enthusiastic."

Both Cox and Overstreet are talking about a possible continuation of the newly formed relationship between the Center and the insurance company.

"We hope it's going to be an on-going relationship. We particularly enjoy working with them," said Overstreet.

"They made it easy for us," she said. "Diane (Cox), Glenn (Hymer, Los Angeles County Department of Mental Health), and Lucie (James, Mental Health Association San Gabriel Valley Regional Director) really put in a lot of effort."

Officially opened in January, 1981, the Vocational/Socialization Center provides direct services with clients who have been in a mental hospital and provides activities that build the social and vocational skills of the client.



Xenia Minjoot, Jan Leopky and Charles Graham (l-r)

"It's based on the theory that those out of a hospital know how to deal with institutions, but their skills for dealing with community life have been depleted, if they ever existed," said Cox.

"Our primary goal is to keep the client out of the hospital by providing both social and vocational training, programs and support within the community," said James.

Primarily a county program supported by Short-Doyle funds, the Center is staffed by one rehabilitation counselor, two recreational therapists, a program director and a secretary/receptionist. All are L.A. County Department of Mental Health employees. Additionally, the Mental Health Association provides a coordinator of volunteer services (Cox), who is responsible for recruiting volunteers for the Center.

Clients served by the program are referred from a variety of sources, such as County therapists, O.H.M.S.S., private parties, or are self-referrals. Participation in the program is completely voluntary.

When a person enters the Center, he undergoes an intake evaluation with a staff member. Clients must be 18 years old or older, must have been hospitalized at least once, must have a primary therapist, must have no current substance abuse and no aggressive behavior, must be able to provide their own transportation to and from the center, must be a resident of the San Gabriel Valley Region and must express some kind of motivation for the program.

"Volunteers are helpful in terms of advocacy. We are able to develop a constituency on behalf of the mentally disabled."

The Center provides a therapeutic setting, but "we do not offer classical therapy," James said. "We want the clients to recognize that this is a place where we don't stress illness. We stress the positive things."

A "fairly structured program" is offered by the Center, incorporating both individual leisure time counseling and group counseling, according to James. The counseling consists of two elements, vocational and socialization.

Larry Pincus, the rehabilitation counselor, works with clients on vocational and pre-vocational skills, helping the clients to identify that they would like to work, either for pay or as volunteers and to put that into action.

The recreational therapists, Margo Chapman and Mitzi

Yamamoto, work with the clients in developing independent living skills, which encompass daily activities such as cooking, grooming and budgeting, "all the things you need to know if you are going to live in an unsheltered, constructive atmosphere," said James.

Community volunteers are an integral part of the day-to-day operation of the Center. The role of the volunteer is to teach the use of the community, bring the community into the Center to the client (through the use of films and speakers), model appropriate behavior, introduce and reinforce appropriate work behavior and attitudes, help develop job skills, develop friendships and provide client advocacy.

Approximately 15 volunteers are active on a weekly basis and "provide a lot of the human element," James said.

Allan Rawland, L.A. County Department of Mental Health San Gabriel Valley Regional Director is "strongly committed to the use of volunteers in community related programs."



Don Berry

"Volunteers bring new attitudes and new ideas. They help to neutralize the professional jargon and bias," he said. "Volunteers are helpful in terms of advocacy. We are able to develop a constituency on behalf of the mentally disabled."

James credits Rawland with "giving a lot of support to the Center" and for "pulling it all together" when the development of the Center was in the planning stages.

"Allan recognized that this type of community services for the chronic client was vital and he helped us identify funding we could use to provide services," she said.

Although the Center opened only a few months ago, plans began more than two years ago.

At that time, James and County recreational therapist Coyo Burciata were working together, and with County rehabilitation counselor Glenn Hymer, who shared their beliefs.

Burciata located the building and set up series of meetings with the United First Methodist Church minister and congregation to discuss the use of the second-floor rooms.

According to the Reverend Don Bommarito, his congregation "really appreciated being able to do this. Our congregation got tired of hand-out ministry. This is not a hand-out, but rehabilitation. As long as the church has activity and life, it is a benefit to the community."

Each region is involved with the development or utilization of similar vocational/socialization programs.

ESSAY continued from page 2

The "danger to self" concept in our current civil commitment laws has been specifically set out, if not in opposition to, along side and separate from the concept of "gravely disabled." This separation of concepts has been a major source of confusion surrounding the general concept of "dangerousness" and how it relates to *parens patriae* civil commitment criteria. Needless to say, it has caused uncertainty among patients, clinicians, administrators and attorneys regarding the difference between those two criteria.

These problems are indeed most difficult. They involve legal, medical and ethical considerations and can only be resolved by a good faith interdisciplinary approach between law and medicine. This approach must constantly be cognizant of broader societal values and considerations relating to the concepts of freedom, detention and the right of medical care and treatment.

In order to resolve the current confusion that exists, we would recommend that first, California's statutory definition of "grave disability" and the concept of "danger to self" be modified to clearly reflect the fact that it is one concept we are talking about when we address civil commitments pursuant to the *parens patriae* power. That concept is "danger to self" and it necessarily includes the notion of "grave disability."

Second, the concept of incapacity to make treatment decisions must be considered since the entire idea behind the *parens patriae* power is to give the state (society) the power to take action to protect and care for persons thought incapable of making decisions regarding their own care and treatment. It should be obvious that the fact that a person is incapable of making decisions relating to his or her own care and treatment should be specifically determined as a condition to such civil commitments. Thirdly, the procedures employed to civilly commit those considered mentally ill and dangerous to others under the police power should be similar to those employed to civilly commit pursuant to the *parens patriae* power. A system which determined upon commitment the capacity of a person to make decisions regarding his or her own care and treatment (as proposed for *parens patriae* commitments) would solve the legal and clinical problems presented here.

Should incompetency determinations become a part of the commitment procedures in both the *parens patriae* and police power commitments, those determined to be incompetent to make treatment decisions can be identified and can properly be made the responsibility of the mental health system. In addition, if the mentally ill and dangerous person is competent to make treatment decisions, two more options would be available. If that competent person consented to treatment, he could also be the responsibility of the mental health system for treatment of the mental illness. If that dangerous person determined to be competent refused treatment, then that person should simply be committed into the custody of someone who could confine him and this should not be the mental health clinician.

Our legislature must determine whatever substantive commitment standards, whether pursuant to the *parens patriae* or police power, are adopted. Whatever the standards ultimately adopted, I strongly feel must result in statutory language which is pragmatically precise, i.e., which describes with particularity the types of conditions and behaviors, if any, that can lead to loss of personal liberty. Only if this is done will there be any confidence that the commitment criteria are being administered in a fair and even-handed fashion.

The opinions expressed in ESSAY are those of the author.

PROJECT RETURN PARTNERS IN RECOVERY

Advocacy and Rehabilitation: Partners in Recovery, is the subject of a one-day conference spearheaded by Project Return, a program of the Mental Health Association in Los Angeles County. Project Return is a federation of self help clubs for emotionally handicapped adults.

The conference will take place on Saturday, May 9, at Patriotic Hall in Los Angeles and will bring together people from many existing community programs interested in sharing ideas, information, resources and creating communication networks. A goal of the event is to create a core of task forces in five areas of concern: advocacy, rehabilitation, legislation, stigma and housing with an emphasis on people becoming involved in their own rehabilitation process.

Participants include Richard Elpers, M.D., director, L.A. County Department of Mental Health; Robert Liberman, M.D., chief of rehabilitation medicine services, Brentwood V.A. Medical Center; William Wiedner, patients' rights specialist, State Department of Mental Health; Richard Van

Horn, executive director, Mental Health Association in Los Angeles County; Andrew Posner, club liaison, Project Return; and Parents and Friends of the Mentally Ill.

Luncheon speaker will be Joan Amundson, legislative consultant.

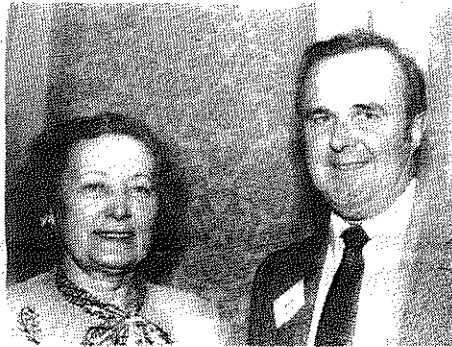
Off-The-Wall, a professional comedy improvisation troupe will perform around the workshops and panel discussions courtesy of Thursday's Child Productions and DeVera Marcus.

Rhoda Zusman, director of Project Return states, "This is the first time consumers of mental health services, professionals, agencies' staff, parents and concerned citizens will have come together in a major conference to work for the welfare of persons recovering from mental illness."

A brochure with registration information is available by contacting either the Mental Health Association in Los Angeles County, 930 Georgia Street, Los Angeles, CA 90015, 213/629-1527; or Julie Birke at the Project Return program office, 213/478-3711, extension 4190.

DANA continued from page 1

The attitude and cooperation of our legislators in Sacramento is vital, he said, and that meeting provided an opportunity to tell our representatives of the absolute need to upgrade the funding for mental health services in this county.



Dr. Frances Meehan and Supervisor Dana

"I would fight any efforts by the state to cut back funds," he added, explaining that mental health services are provided through Short-Doyle state funds.

In other levels of government, Dana told of meeting with Attorney General Deukmejian and representatives from 23 cities, the L.A.P.D. and of the Sheriff to discuss the need for mental health services.

Dana turned to concern for the rising crime rate and the need for family mental health services. He cited one example: battered children, he said, are more apt to be violent themselves in later life.

"We need to meet these problems in the beginning and shut them off," he said.

In addition to battered children, the supervisor has been working jointly with the city and the YWCA to provide a battered women's counseling center in the fourth district.

"We have been planning with the 'Y' and Councilman John Gibson's office. This is what is needed, different levels of government and the private sector working together," he said.

Dana's interest in the private sector and mental health go back a long way. His wife, Doris, served for many years on the Mental Health Association board in Long Beach.

"Doris made a contribution as a volunteer and had a rewarding experience visiting the people in Norwalk (Metropolitan State) hospital," Dana said.

When asked about business and industry participation in mental health services, Dana said he did not favor additional "unreasonable demands" by government on industry. He spoke of insurance plans to help defray the cost of mental health services as a trend in business.

"Really, business has been so loaded down by government requirements it is asking too much to add anything else," said Dana.

"This is what is needed, different levels of government and the private sector working together."

Dana obviously is enjoying his new level of responsibility. This involves relating to 11 departments, commissions and committees in a county with a population larger than 42 states.

His fourth supervisorial district includes 23 cities and Malibu. To attend to all this diversity, Dana has a small staff. Mary Grey has been assigned as his deputy to the Department of Mental Health. She is a professional in the field, and, the supervisor states, has the respect of her peers.

Still and all, the responsibility is on Supervisor Dana's desk. One of the blessings, he smiled, is that, unlike his experience in a large corporation where a plan must go through several levels only to be returned for revision, in the supervisor's office "it can get done."

CALENDAR

APRIL 2

The Los Angeles City and County Survival Rally will be held Thursday, April 2 at 9:30 a.m. outside the state office building at 107 S. Broadway. The speaker for the event will be Assemblyman Mel Levine and Senator Diane Watson. The purpose of the rally is to show support for the fight against cuts in the SSI/SSP/AFDC/CETA programs.

APRIL 7 AND 9

The San Fernando Valley Child Guidance Clinic is offering two ten-week parent training workshops to be held at the Clinic, 9650 Zelzah Avenue, Northridge.

Parents will learn techniques to deal with their children, including building self-esteem, setting limits, understanding behavior and misbehavior, communicating ideas and feelings to children and improving communication by becoming an effective listener. For enrollment information, call 993-9311 and ask for the "Parent Training Program."

APRIL 9

Dr. Robert Liberman, professor of psychiatry, N.P.I., UCLA director of the Research and Rehabilitation Test Center for Chronic Schizophrenia, Brentwood VA Medical Center, will speak on "Problem Solving Therapy in Schizophrenia-Motivating the Patient to Obtain Treatment." Dr. Liberman will talk about some of his findings from long term and ongoing research on the treatment, and particularly community treatment, of schizophrenia. The meeting will be held in the V.A. Brentwood Theatre. Time is allowed for questions and discussion.

The meeting is sponsored by Westside and Coastal Friends, a group of parents and friends in the Santa Monica and Western Los Angeles area joining together to develop new possibilities for "outreach" help, for structured aftercare, and for social and vocational rehabilitation of young adults who have suffered from mental illness.

For information about the group, call (213) 393-7038.

APRIL 24

"Prevention of Sexual Assaults for Parents and Children" is a Continuing Education program introducing a primary prevention approach to dealing with child and adolescent molestation. Primarily for mental health practitioners, crime prevention specialists and educators, the course will be held on four Friday sessions April 24, May 1, 8, and 15 at 10:30 a.m. to 1 p.m. at the Didi Hirsch Community Mental Health Center in Culver City. Registration fee is \$50 — call 390-6612.

CONNECTIONS

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