

Potential cuts "a devastating series of reductions, none of which are . . . desirable or even acceptable."

\$9.7 MILLION IN CUTS WILL MEAN 31,230 UNSERVED

INTERVIEW:

JACQUELINE BOUHOUTSOS, PH.D.

President, Association for Media Psychology



Dr. Jacqueline Bouhoutsos is "convinced" that the media can be helpful to mental health professionals.

As proof of her conviction, she is a founder and president of the Association for Media Psychology (AMP) an interdisciplinary organization "that we hope will allow all fields to utilize the media."

At the 1981 American

"Implicit in the creation of AMP is the belief that media can be a positive force."

Psychological Association (APA) convention, Bouhoutsos chaired a panel discussion with media psychologists Toni Grant and Lee Salk.

"This was the first time media psychologists had to speak together and ask ethical

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The list of anticipated mental health budget curtailments has been made public and, according to Dr. J. Richard Elpers, director of the Los Angeles County Department of Mental Health, the list of potential cuts contains "a devastating series of reductions, none of which are seen by the department or the various advisory bodies as desirable or even acceptable."

The potential cuts will amount to \$9.7 million, a 9 percent reduction of program and an estimated 31,230 patients not served in 1983-84.

If the state budget is accepted in its present form, the \$9.7 million cuts added to the reductions taken each year since 1978-79 will total a nearly \$25 million curtailment for mental health services in Los Angeles County alone.

According to Richard Van Horn, executive director of the Mental Health Association in Los Angeles County, a citizen volunteer organization, there is still time for the legislature to change the budget allocation for mental health.

Budget hearings are held this month in the Assembly Ways and Means and the Senate Finance Committees.

Van Horn said, "We are sharing the details of these mammoth cuts early this year because changes can still be made if various groups and individuals

press their legislators in Sacramento."

The potential cutbacks eliminating services for an estimated 31,230 Los Angeles County residents are in programs that include administration, 24-hour inpatient services, residential inpatient, emergency room/short term crisis, day treatment and outpatient programs.

Included among the projected 31 programs to be curtailed is the elimination of a program at

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John Davis, Los Angeles County Department of Mental Health budget director, and Kathleen H. Snook, the department's assistant director, administration.

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Connections is two years old.



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RCLCS TO HOST LEGISLATORS

Regional legislative meetings will replace the countywide legislative luncheon hosted by the Mental Health Advisory Board.

The meetings will be hosted by the Regional Community Liaison Committees (RCLCs) to the five Los Angeles County Department of Mental Health regions.

State legislators representing the local communities in each region are invited to the meetings. The meetings are for "education and information sharing between the community and legislators about the needs of mental health in each of the regions," according to Dr. Karen Gunn, executive assistant to the Mental Health Advisory Board.

Gunn said that the meetings "allow the RCLCs and other people to express concerns about budget matters and to let them (legislators) know about the kinds of things the department has accomplished despite the fiscal constraints."

For the past three years, the Mental Health Advisory Board hosted a single countywide legislative luncheon and invited the entire Los Angeles County legislative delegation.

Under this new format, the meetings will be "done at a level closer to constituency" enabling the hosts to "concentrate on just those people representing their particular region," said Gunn.

The legislative meetings will be co-sponsored by the RCLCs, the Mental Health Advisory Board and the Mental Health Association in Los Angeles County. Funding in part is from the Mental Health Advisory Board, which has divided the money available in its legislative luncheon fund.

The RCLCs are citizens groups providing input to the five regions. The Mental Health Advisory Board is the advisory group to the Los Angeles County Board of Supervisors.

Attendance to the legislative meetings is by invitation. For more information, contact the RCLC staff coordinator in each of the regions.

San Fernando/Antelope Valley Region

The San Fernando/Antelope Valley Region RCLC will hold a reception with refreshments on Friday, April 8, from 4 to 5:30 p.m. in the San Fernando Valley Child Guidance Clinic community room, 9650 Zelzah Ave., Northridge. Contact RCLC staff coordinator Kathy Tasugi at 508-7800 for more information.

Coastal Region

A reception with refreshments will be hosted by the Coastal Region RCLC on April 22 from 1 to 6 p.m. at the Harbor-UCLA Medical Center, 1000 W. Carson, Torrance. For more information, call RCLC staff coordinator Joanne Cryso at 533-3154.

Central Region

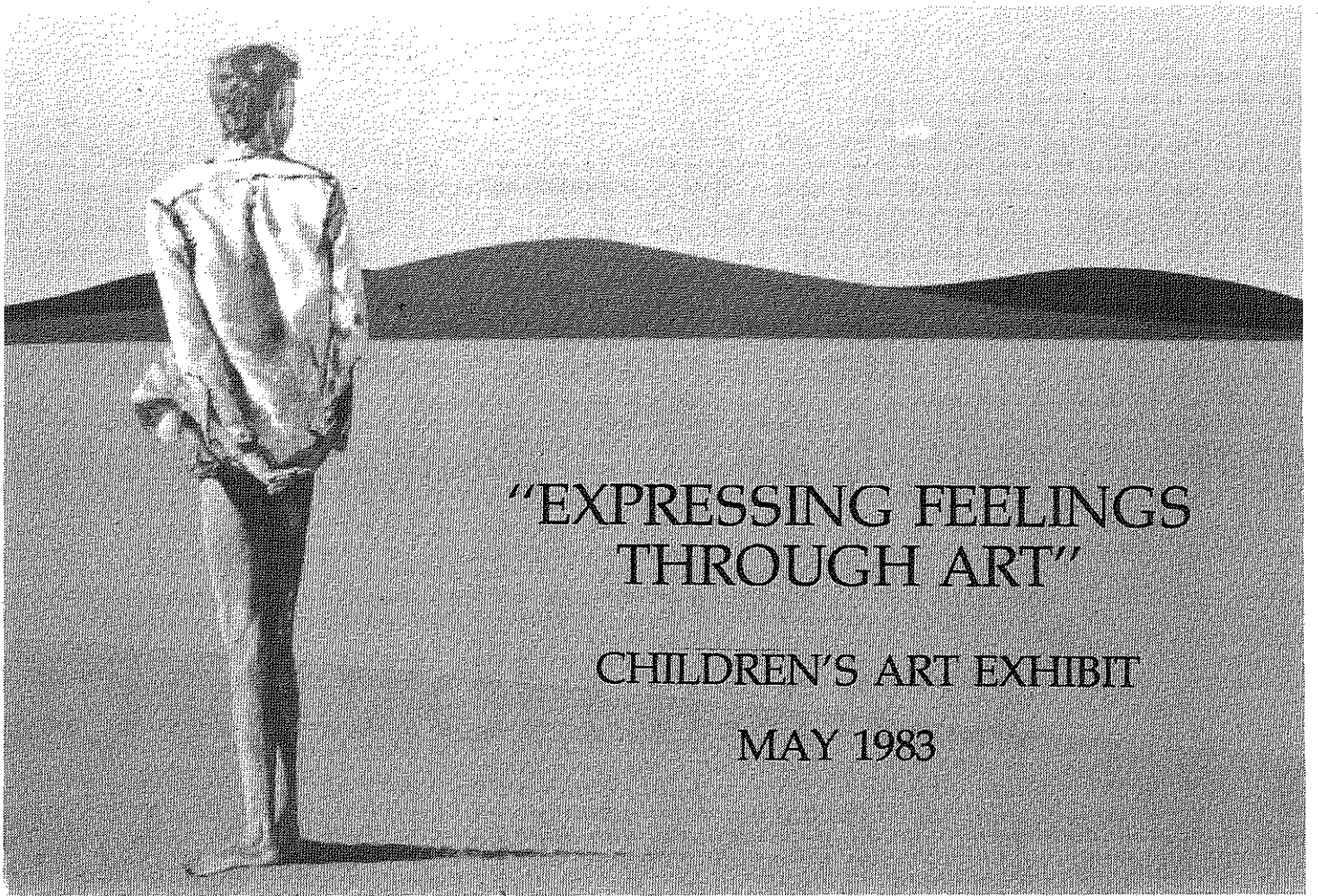
Also on Friday, April 22, the Central Region RCLC will hold a legislative breakfast from 9 a.m. to noon at El Rey Hotel, 515 E. Sixth St., Los Angeles. Call RCLC staff coordinator Pearl Coleman, 226-6424 for information.

Southeast Region

The Southeast Region RCLC will have a legislative luncheon on Friday, April 29, from noon to 4 p.m. at the Lynwood Civic Center, 3798 Century Blvd., Lynwood. For information, contact Shirley Richardson at 603-4884. The Southeast Region RCLC held a legislative luncheon last year.

San Gabriel Valley Region

On Friday, June 3, a legislative breakfast hosted by the San Gabriel Valley Region RCLC will be held from 8 a.m. to 10 a.m. at the Industry Hills Sheraton Resort, 1 Industry Hills Parkway, City of Industry. Call Paul O'Leary, 960-6411 for information.



"EXPRESSING FEELINGS THROUGH ART"

CHILDREN'S ART EXHIBIT

MAY 1983

"Feelings through Art" 1982 winning art work, submitted by Kim Gagliano of Reseda High School

EXHIBIT CELEBRATES "MAY IS MENTAL HEALTH MONTH"

For the second year, the Children's Citizens Advisory Committee (CCAC) will sponsor a "Feelings Through Art" youth art exhibit in May.

This year, paintings and drawings by students will be on display throughout May at the Exploratorium Gallery in the Student Union Building at California State University, Los Angeles.

The purpose of the free exhibit is to call public attention to the mental health needs of children and youth and to celebrate "May is Mental Health Month."

"Children are not necessarily the most articulate in terms of verbal feelings. Art is one of the major media children use to express what they feel," said Dr. Rose Jenkins, director of the Los Angeles County Department of Mental Health Children and Youth Services Bureau.

"What we've done is take this medium and highlight for children that they are indeed expressing their feelings through drawings and that is OK," she continued.

"We're using the products the children have exhibited and presenting them to the public so the public can become aware that children have feelings, that they have mental health needs and that the public should be attuned to these needs," she said.

CCAC, chaired by LaRue Wright, is the advisory group to the Children and Youth Services Bureau.

A total of 25 persons are serving on the "Expressing Feelings Through Art" committee, chaired by Ola Browning, and subcommittees.

The idea for the project came from CCAC member Dr. Stephen Howard of the San Fernando Valley Child Guidance Clinic.

This year's exhibit is expected to be an expansion over last year's project, according to Ada Jones, project coordinator and child abuse services coordinator for the bureau, because this year Los Angeles County Schools were included in addition to the Los Angeles Unified School District, which was involved last year as well. Also, there is an awareness generated by last year's event, and

a larger gallery is being used this year.

In the project, students, using the theme "Expressing Feelings Through Art," submit drawings or paintings to their art teachers. The teachers, in turn, choose and submit art work to be judged by a three-member panel, which makes the final selection of work to be displayed. Judging will be done on April 12.

Robert Roman, associate educator at the county Museum of Art, and Robert Fiedler, California State University, Los Angeles, art professor, are two of the judges. The third judge is yet to be confirmed.

CCAC, Los Angeles Unified School District and the Los Angeles County Schools each choose one judge.

Art coordinators are Polly James and Fara Wexler for the Los Angeles Unified School District and John Stillion for Los Angeles County Schools.

Cash prizes will be awarded to first and second place and five honorable mention winners. Additionally, the first place art work will be used in promotional materials for next year's event.

Last year's winning art work, by

Kim Gagliano of Reseda High School, is being used on this year's invitations, flyers and posters.

On April 29, the CCAC will host a reception at 5:30 p.m. in the Exploratorium Gallery.

Reception speaker will be psychiatrist Dr. Gerald Jampolsky. He is the founder of the Center for Attitudinal Healing in Tiburon, Calif., and, according to Jones, "works almost exclusively with children and their art, helping them deal with serious illness."

A drawing was held to help raise funds for the project, and winners were announced on March 15. Kathy Tasugi of the county's San Fernando/Antelope Valley Region, was first place winner of a trip to Mexico City.

CCAC sponsored this drawing, and all prizes were donated by local businesses.

Mental Health Association in Los Angeles County (MHA) is serving as the fiscal intermediary for the project. Persons interested in making a contribution to the project may do so to the MHA Art Project, 930 Georgia St., Los Angeles, CA 90015.

For more information, contact Jones at 738-4633 or Pam Davis, bureau secretary, at 738-4600.

MENTAL HEALTH INSURANCE BOOK AVAILABLE

A handbook on improving insurance coverage for mental illness is available on a limited basis.

"For Ayes Only—Legislating Mental Health Insurance Coverage in Your State" written by John D. Corrigan, Ph.D., and Chris Koyanagi may be obtained for \$3.50 from the National Mental Health Association public policy department, 1800 N. Kent St., Arlington, VA 22209.

The handbook was published in September 1982 by the Association of Mental Health Administrators, National Association of State Mental Health Program Directors, National Council of Community Mental Health Centers and the National Mental Health Association.

The book is described as "the product of four national organizations working together to produce a long-needed handbook for advocates of insurance coverage for mental illness."

According to the preface, the title "For Ayes Only" is a "strong clue that the authors believe improvement is

best guaranteed through a legislative mandate.

"We have chosen legislative action as the first recommendation for improving insurance coverage because the stigma against people with mental illness is too great to allow substantial improvement in any other way," the book states. "It seems unlikely to the authors that the federal government will increase its regulatory authority over insurers, or that national health insurance will be enacted in the near future."

As the book states, "Insurance coverage accounts for only 15 percent of the total expenditures for mental illness, compared with 25 percent for general health," and "public funding sources provided 51 percent of the funds for mental health services, compared to only 42 percent of the funds for general health care."

The book is divided into three sections. The first section relates history and background, the second covers designing the legislation, and the final section deals with passing the bill.

SOUTHLAND HOSTS INTERNATIONAL IAPSRs CONFERENCE MAY 19-21

Nearly 100 psychosocial rehabilitation programs will be presented at the eighth annual International Association of Psychosocial Rehabilitation Services (IAPSRs) conference.

The conference, with the theme "Psychosocial Rehabilitation: The State of the Art," will be held May 19-21 at the Miramar Sheraton Hotel in Santa Monica.

Portals House is the hosting agency, in cooperation with Community Counseling Service and Transitional House of Central City Community Mental Health Center, according to Marvin Weinstein, L.C.S.W., conference chairperson and Portals House executive director.

"I know from the standpoint of program and attendance, it's going to be successful," said Weinstein. He said that he is expecting 400 to 500 people to attend.

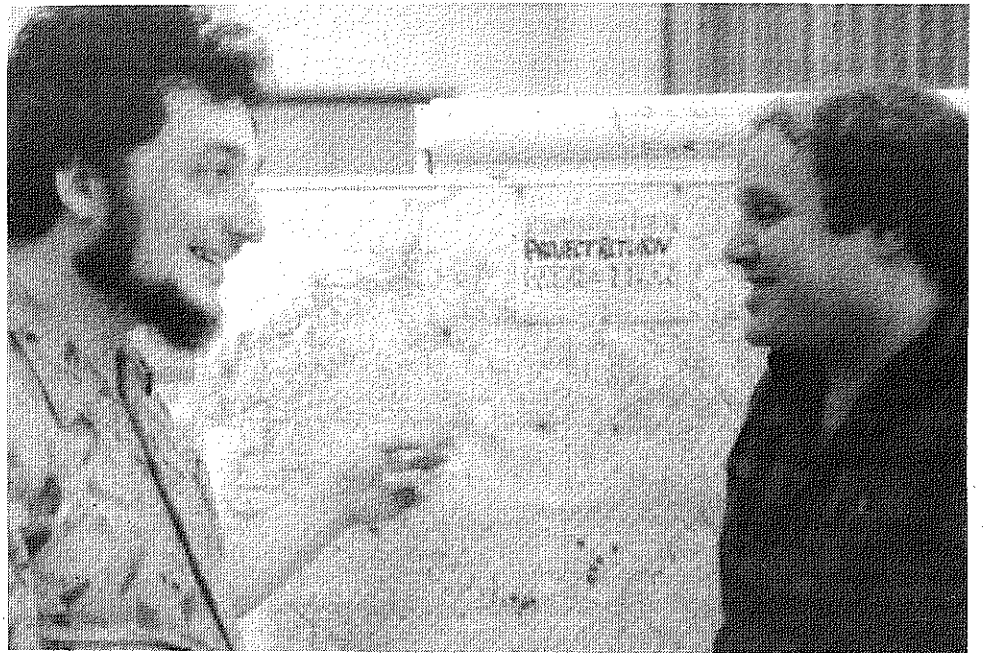
Program Chairperson George Wolkon, Ph.D., Quality Support Bureau director for the Los Angeles County Department of Mental Health, said the programs will be of a "great variety not only from all over the country but internationally" and will include

rehabilitation developed standards for community treatment and will introduce psychosocial agencies to these standards to apply for accreditation, said Weinstein.

He said that in California and other states, agencies need accreditation, licensing or both in order for the Department of Rehabilitation to purchase services for an individual.

A preconference institute on "Community Residential Treatment System: An Idea Long Overdue," co-sponsored by IAPSRs and California Association of Social Rehabilitation Agencies, will be held May 18 from 9 a.m. to 4 p.m. at the First Presbyterian Church, 1220 Second St., Santa Monica, one block from the conference site. Enrollment is \$15, and those IAPSRs non-members attending will receive a \$10 reduction to the conference.

Clients at Portals, Community Counseling Services and the Transitional House will be involved "in every aspect of this" conference, according to Weinstein, including some planning, hosting, information and the social activities.



Project Return Activities Director Mark Karmatz and Project Return News editor John Marabella (l-r) discuss plans for the May 21 walk-a-thon.

PROJECT RETURN SETS WALK-A-THON TO BENEFIT ACTIVITIES, CENTER

A 5 1/2-mile walk-a-thon, set for Saturday, May 21, will benefit Project Return activities.

According to John Siegel, director of Project Return, "The Federation is making a commitment; if enough money is raised, then some will be contributed to opening the first Project Return center on the Westside of Los Angeles."

Project Return is a federation of self-help clubs for recovering mentally ill people, sponsored by the Mental Health Association in Los Angeles County (MHA).

Project Return members are currently soliciting sponsors for the walk, from the Federal Building, 11000 Wilshire Blvd., Westwood to Palisades Park, Ocean Avenue and San Vicente Boulevard, Santa Monica.

The fundraiser, from noon to 3 p.m. will celebrate "May is Mental Health Month."

"The walk is also open to physical education enthusiasts on all levels," says Siegel. "It is along a bus route so people can vary their length of walking and jump on the bus if they need to."

With a goal of \$10,000, walkers are soliciting sponsorships "up front." Sponsors decide how much they want to contribute and pay the walkers before the event. All donations are tax-deductible.

"The walk is open to anyone," says Siegel, "and we need walkers and volunteers."

He is currently working to attract sponsors to donate prizes for Project Return members who walk. "And there is, of course, the need for sponsors."

The event ends with a picnic in Palisades Park (donations are sought for this also) and coincides with the ending of the IAPSRs Conference.

Further planning for the walk-a-thon will take place at the Project Return General Assembly, April 9 from 2 to 4:30 p.m. at the Brentwood VA Medical Center on Wilshire Boulevard.

For further information on the walk-a-thon, to sponsor a walker or make a donation, call MHA, 629-1527.



International Association of Psychosocial Rehabilitation Services Conference Committee members Linda Connery, L.C.S.W., Central City Community Mental Health Center Transitional House assistant chairperson; Susan Reilly, Ph.D., Portals House clinical practices director; Clyde Reynolds, San Fernando Valley Community Mental Health Centers Inc. community support services director; Marvin Weinstein, L.C.S.W., Portals House executive director and conference chairperson; George Wolkon, Ph.D., Los Angeles County Department of Mental Health Quality Support Bureau director and conference program chairperson; and Cecil Hoffman, Ph.D., Community Counseling Service executive director (l-r)

"new techniques utilizing the best of past traditional practice and the incorporation of newly developed psychosocial techniques to help chronically mentally ill persons make the most of their capabilities and become contributing citizens of society."

In addition to three plenary sessions, the conference will have 93 presentations divided into workshops, roundtables and poster sessions and offered in concurrent sessions. Among these, 24 involve Los Angeles County programs or professionals.

John K. Wing, M.D., Ph.D., D.P.M., will deliver the keynote address at the first plenary meeting and will speak on "Psychosocial Rehabilitation: The State of the Art." Wing is director and professor of social psychiatry at the Institute of Psychiatry in London, England.

At the second plenary session, Sue Estroff, Ph.D., will speak on "How Social is Psychosocial Rehabilitation?" Estroff is assistant professor of the department of social and administrative medicine at the University of North Carolina. She is the author of "Making it Crazy," a book which accounts the two years she spent living in the world of the mentally ill in Madison, Wis.

Robert Liberman, M.D., chief of Rehabilitation Services at the Brentwood Veterans Administration Hospital and professor of psychiatry at UCLA, will speak on "Interaction of Psychotropic Drugs and Psychosocial Treatment in Schizophrenia" at the final plenary meeting.

The Commission on Accreditation of Rehabilitation Facilities will be at the conference. Last year, the commis-

IAPSRs is an "association of psychosocial agencies through the U.S." which "promotes self-help psychosocial programs throughout the world," according to Weinstein.

While membership is essentially in the United States, there are members from France, Israel, Yugoslavia and Canada, according to Weinstein.

IAPSRs was founded in 1975, with charter members including Portals House, Fountain House in New York, Thresholds in Chicago, Horizons House in Philadelphia and Hill House in Cleveland, among others. Wolkon formerly was research director at Hill House.

"These kinds of programs have been at the forefront of providing alternatives to hospitalization and community care for the chronically mentally ill," said Weinstein.

Of the charter members, Portals House is the only one located west of Chicago.

"California, for whatever reason, in the past — that's changing now — was not as financially supportive of non-medical community treatment programs as the East," said Weinstein.

"It's beginning to change in Los Angeles County under the local mental health administration."

The IAPSRs conference has been approved for 18 hours continuing education credit for physicians, nurses, psychologists and social workers.

Cost for the conference is \$75 for non-IAPSRs members and \$65 for IAPSRs organization or individual members. A late fee of \$10 will be added after May 1.

For registration information, contact Francine Amster, Portals House secretary, 386-5393.

**PROJECT RETURN
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MONTH
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INSANITY DEFENSE AND JUSTICE — MY

NATIONAL COMMISSION ON THE INSANITY DEFENSE, RE

Report Excerpts

The National Commission on the Insanity Defense is an independent Commission established by the National Mental Health Association to broaden the public debate on the insanity defense and to make recommendations on how the insanity defense should be changed, if change is warranted.

Through its investigation, public hearings and supplemental analysis the Commission discovered that much of the clamor for change in the insanity defense is based on myths and misplaced frustration in the wake of the Hinckley verdict.

These myths characterize the insanity defense as an overused plea, used for easy acquittal and to escape punishment, and causing major problems for the criminal justice system. These myths characterize all insanity defendants as dangerous criminals who commit random acts of violence and repeat those crimes after being in treatment for only a short period of time.

The Commission unanimously concludes that these myths have no basis in fact; they cannot serve as a justification for elimination of the insanity defense or for the formulation of a new public policy toward insanity defendants.



The Commission also learned about the realities of the insanity defense. This report contains, for the first time, a synthesis of available data which can begin to form a factual basis for understanding the insanity defense and insanity defendants.

This data documents that the insanity defense is rarely used and plays a minor role in the total criminal justice system. However, the report documents that the insanity defense has an important historical presence in Western jurisprudence that must be retained for the moral integrity of the law.

This data documents that the insanity defendant is usually poor, suffering from severe forms of mental illness, and confined for significant periods of time, at times exceeding the time they would have spent under a different verdict. Only 14 percent of insanity defendants commit violent crimes.

Based on these realities, the Commission has made 11 specific recommendations that preserve and strengthen the workings and public understanding of the insanity defense.

It is the hope of the Commission that the private debates on the insanity defense will become a public dialogue on how society treats the mentally ill in general, and the insanity defendant in particular.

The Commission found it necessary to dispel myths about the mentally ill as a basis for understanding the insanity defense and those who plead insanity.

MYTH: Many criminal defendants plead insanity and most are acquitted.

REALITY: The insanity plea is rarely used; acquittals are extremely rare.

The prevalence of the insanity defense in the criminal justice system is often overestimated both by the public at large and even by public officials.

None of the witnesses before the Commission disputed the fact that the number of insanity defense cases is small compared with the total number of criminal cases.

The American Bar Association's study of the frequency of use of the defense to date has apparently found no data which would challenge the conclusion that the "overuse" of the defense is a widely held myth.

The Commission concludes that despite

the exaggerated attention insanity acquittals receive in the media, in legislatures, and in the legal and psychiatric literature, the consensus of the experts in the field is that the insanity defense trial is an extremely rare event and a successful insanity defense is even more rare.

MYTH: The insanity defense causes major problems for the criminal justice system.

REALITY: The insanity defense has a minor practical role in the criminal justice system but a very important moral role.

It is difficult to imagine how a defense which is invoked so infrequently can be largely responsible for the problems which exist in our criminal justice system. While it is painfully obvious to many Americans that our criminal justice system suffers from various major problems, it should also be apparent that the existence and use of the insanity defense is not one of them.

As Professor Phillip Resnick, Case Western Reserve University, testifying before the Commission, said, "Attacks on the insanity defense obscure the real problem, namely the collapse of the criminal justice system in our society. Paraphrasing what Dr. Alan Stone has written, when one arrest in one hundred ends in a prison sentence, when first offenders convicted of armed robbery are given suspended sentences in New York, and when judges are forced to release convicted felons because prisons are so overcrowded, then insanity acquittals are not the problem."

The Commission believes that the insanity defense plays an important role in the American system of jurisprudence, and that, in practical terms, the defense does not create havoc for the criminal justice system. It is, to paraphrase Stone, a pock mark on the nose of justice, while the patient is dying of congestive heart failure.

The Commission believes that the fact that the insanity defense does not constitute a major burden or flaw in our system should not prevent us from exploring ways in which we can improve on whatever problems might exist in that area.

MYTH: Mentally ill people are dangerous and are capable of violent behavior at any time.

REALITY: The overwhelming majority of the 35 million mentally ill people in this country are neither dangerous nor unpredictable; they are victims of stigma.

Many of the characterizations of mentally ill people in newspapers, television drama and other media forms perpetuate myths that reinforce the public's negative stereotypes of the mentally ill.

From the research and media analysis of Professor Sander Gilman at Cornell University, and Professor George Gerbner of the Annenberg School of Communications at the University of Pennsylvania, the Commission has learned that these stereotypes are deeply embedded in the public's consciousness and the "need" for these characterizations is based on society's fears and apprehensions.

It is clear from existing research and analysis that society has assigned certain characteristics to the mentally ill that exacerbate the reporting problem. These characteristics include labelling mentally ill people as *deviant*, seeing them as *unpredictable*, with an element of *danger*, and having a "touch of evil."

Gerbner pinpoints the media characterization by asking, "How often have we read in the newspaper that Mr. John Smith, ex-mental patient, was elected president of the local Rotary Club last night?" He suggests that such an event is "much more frequent" than the myth-laden "outburst of seemingly irrational violence."

Professor Gilman adds: "We have a pattern in 20th century America of evident public surprise when the mad bomber turns out to be a retired, meek little man living on a pension, or the Son of Sam turns out to work for the Post Office and live in a highrise apartment. This isn't appropriate for the 'mad-dog' killer."

"The banality of real mental illness comes in conflict with our need to have the madman be identifiable, be different from our-

selves. Our shock is always that he is really just like us. The moment when we say 'he's just like us,' is most upsetting. At that moment we no longer know where the line lies which divides our normal, reliable world, a world which minimizes our fears, from that world in which lurks the fearful, the terrifying, the aggressive.

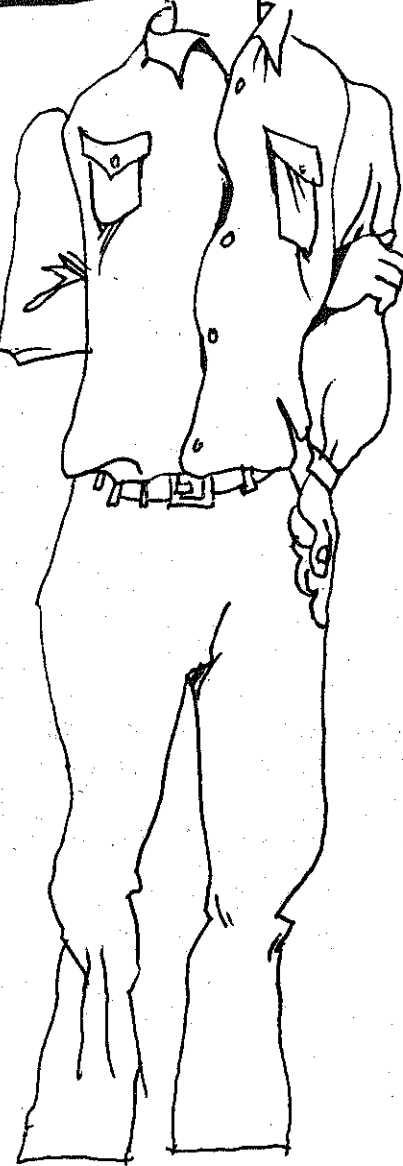
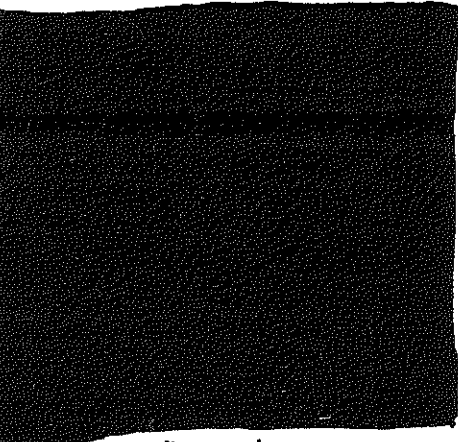
"We want — no, we need — the madman to be different, and so we create out of the stuff of his reality myths which make him different."

MYTH: The insanity defense allows defendants to fool juries and escape punishment.

REALITY: The overwhelming majority of acquittees suffer from the most serious forms of mental illness.

The Commission took note of the perception by some that the use of the insanity defense was more often than not a baseless trial tactic whereby perfectly "healthy" defendants would feign mental illness and thereby avoid incarceration or punishment.

Although the data which exists clearly indicates that juries are not particularly gullible when considering an insanity defense compared to all other criminal defense, it should also be noted that defenses such as self-defense or alibi defense are also open to possible erroneous application by a jury. The fact that a jury may from time to time mistakenly accept one of the criminal defenses available to the criminal defendant has never led to the conclusion that a defense should be abolished.



GRAPHICS BY JESUS PEREZ

MYTH: The insanity defense is a rich man's defense.

REALITY: Most insanity defendants are likely to be poor, just as are most other criminal defendants.

The highly publicized Hinckley trial has reinforced the myth that wealthy defendants retain the best lawyers and the best psychiatrists who will testify on their behalf and help them "beat the rap." While in fact the Hinckley case was expensive,



the great majority of insanity acquittees are poor.

The Commission finds that there is no evidence that wealthy defendants succeeded in gaining an insanity acquittal more often than their less advantaged peers.

MYTH: Insanity trials are a "circus" of conflicting expert testimony that confuses the jury.

REALITY: Most insanity cases reflect agreement among the experts, the defense and the prosecution. Few go to trial and even fewer go to a jury. The celebrated cases are the exception and not the rule.

This myth reflects two common misconceptions about insanity defense cases. First, it implies that all or most insanity defense cases go to trial before juries, and second, that the mental health experts generally cannot agree on the defendant's condition. Neither of these is borne out by the evidence.

NATIONAL COMMISSION ON THE INSANITY DEFENSE MEMBERS

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Allan Moltzen, J.D.

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

David Wexler, J.D.

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

Rev. Cecil Williams

Pastor, Glide Memorial Church, San Francisco.

MYTHS & REALITIES

RELEASES REPORT FINDINGS

The Commission notes that the fact that witnesses and expert witnesses disagree occasionally should not lead to the conclusion that this disagreement should be banished from the courtroom. The Commission notes that trials, especially jury trials, have been developed by our legal system precisely to resolve differences among witnesses. That, in fact, is the basis for our system of trial by jury.

MYTH: Most insanity acquittees go free immediately or within a short period of time following their trial.

REALITY: The majority of acquittees are confined for significant periods of time.

Comparisons between time served by similar convicted felons to time spent in hospitals by insanity acquittees is relevant to community concerns about safety. Figures must be reviewed with close scrutiny because the range of variables in individual cases is so great.

The Commission finds no consistent evidence that acquittees will



courtroom free. While the public may feel that the time spent in incarceration is short, it is certainly comparable to time served by similar felons.

MYTH: Insanity acquittees repeat the same crime when they are released.

REALITY: Crimes committed by insanity acquittees upon release tend to be less violent in nature. Recidivism rates are no higher than for convicted felons.

Data on recidivism is difficult to obtain. However, the best evidence available suggests that the recidivism rate for those found "not guilty by reason of insanity" is the same as for felons who have been found guilty of crimes. Only 14 percent of those mentally ill charged with crimes committed acts of violence.

MYTH: The "guilty but mentally ill" verdict means that the defendant will receive mental health treatment.

REALITY: A "guilty but mentally ill" verdict does not guarantee treatment beyond what a convicted felon would receive.

Generally it is assumed that a finding of mental illness will lead to treatment rather than punishment. Indeed this is often cited as part of the public's frustration with the insanity defense. The Commission finds that many of those who favor the "guilty but mentally ill" verdict do so with the belief that this verdict assures treatment.

Testimony at the Commission hearings and subsequent submitted documents clearly show that mental health treatment is no more available for those found "guilty but mentally ill" than for other convicted persons.

RECOMMENDATIONS

The National Commission on the Insanity Defense recommends:

1. That the insanity defense be retained in all jurisdictions.
2. That an alternative verdict of "guilty but mentally ill" not be adopted in any jurisdiction.
3. That the term "not responsible by reason of insanity" be substituted for the term "not guilty by reason of insanity."
4. That the insanity defense be an affirmative defense, placing the burden of proof on the defendant to prove that defense by a preponderance of the evidence.
5. The adoption of a special statute to address the disposition of the acquittee after a finding of "not responsible by reason of insanity" of a violent crime.
6. That the media make a conscientious effort to eliminate the pejorative intermediary organization, convene a national task force appropriate intermediary organization, convene a national commission
7. That the National Mental Health Association, or another appropriate intermediary organization, convene a National Task Force to develop and disseminate recommendations on appropriate media portrayals of the mentally ill.
8. That mental health experts in proceedings involving the insanity defense not be permitted to testify on the ultimate legal issues.
9. That any legislature considering changes in the criminal justice mental health system appropriate the necessary funds to insure adequate facilities and services for the mental health care of those convicted of crimes as well as those acquitted by reason of insanity.
10. That the National Mental Health Association, or another appropriate intermediary organization, convene a National Commission on mental health treatment in correctional facilities.
11. That federal and state governments initiate and appropriate funds for research on the use and operation of the insanity defense, especially prior to changes in the law.

LEGISLATIVE ANALYSIS

AB 2100 TO AFFECT HUMAN SERVICES

Introduced into the legislature March 7, AB 2100 is an important bill affecting nearly all of the human services in the state of California.

It is the result of a study conducted through the Assembly Office of Research and is designed to restructure human services so that state and local costs are more fairly balanced and program control is closer to the people affected.

If AB 2100 were to be passed as written, the effect on the mental health programs in this state would be massive and unpredictable, according to Richard Van Horn, convener of the Coalition.

The Los Angeles Mental Health Coalition is in the process of analyzing the bill and will be prepared to offer position and action recommendations at the Coalition general meeting on April 12. Between now and then, the Coalition urges each mental health group to obtain copies of the bill and examine it from its perspective.

TWO STATE BILLS INTRODUCE CHANGE IN INSANITY PLEA

Introduced in the California State Legislature in January were two bills, SB 141 and AB 295, each proposing a change in the insanity plea.

The bills, with similar intent, have each been assigned to a committee, but hearing dates have yet to be scheduled for either one.

As written, both bills would abolish the not guilty by reason of insanity plea and replace it with "guilty but insane" in SB 141 and "guilty and insane" in AB 295.

Both bills state that the accused person has the burden of proving legal insanity.

SB 141 further states that a person convicted under the proposed plea would be sentenced to the Department of Corrections and then be transferred to the Department of Mental Health for treatment.

According to the bill, upon restoration of sanity, defined as "when the person no longer has the mental disease, defect or disorder which caused the insanity," the person would be returned to serve the remainder of the sentence or be released on parole.

SB 141 has been assigned to the Senate Judiciary Committee, chaired by Senator Barry Keene. Los Angeles County senators on the committee are Senators Ed Davis, Robert Beverly, Art Torres and Diane Watson.

AB 295, introduced by Bill Leonard, R-San Bernardino, will be heard in the Assembly Criminal Law and Public Safety Committee, chaired by Bryon Sher. Members of the Assembly from Los Angeles County on this committee are Burt Margolin and Marian La Follette.

California Alliance for the Mentally Ill (CAMI), statewide organization of groups of parents of mentally ill persons, is "strongly opposed" to both bills, according to CAMI office manager Grace McAndrews, and has communicated its position to both Roberti and Leonard's offices.

It has released a position paper stating its opposition to changing the plea of not guilty by reason of insanity to guilty but insane.

"It is our position that the mentally ill person does not belong in the prison system. We are, as a society, criminalizing the mentally ill. Recent legislative decisions have seemed to push health care into the background while pushing penal approaches to

the foreground . . . We do not believe honest health care can ever be replaced by barbed wire fences and armed guards," the paper states.

SB 141 was drafted by the Joint Committee for Revision of the Penal Code, which has received letters in support of the bill from the Police Officers Research Association of California and California Police Officers Association.

MENTAL HEALTH WINS ONE IN LEGISLATURE

The section of a state Assembly bill giving the state mental health director the power to reduce mental health funds during the year without going through the Legislature has been deleted.

AB 36X, an urgency bill on fiscal matters introduced by Bill Leonard, R-Redlands, contained one section pertaining to mental health, which would have changed the Welfare and Institution Code, adding section 5707.5.

Among the groups who were opposed to the section and waged a campaign to have it deleted were the Mental Health Association, Citizens Advisory Council, Conference of Local Mental Health Directors, Mental Health Coalition in Los Angeles County, Los Angeles County Mental Health Advisory Board and California Alliance for the Mentally Ill (CAMI).

For example, CAMI was opposed to the section because it took control away from the elected Legislature and bypassed the hearing and debate process.

"There were things in that bill that were detrimental to mental health that we objected to," said Grace McAndrews, manager of the CAMI Sacramento office.

CAMI is a statewide organization of families and friends of the mentally ill affiliate groups. McAndrews said family members in the different affiliates contacted their local legislators with their opposition to the section.

As originally written, section 14 of AB 36X read, "During the course of the fiscal year, the (State Department of Mental Health) director may reduce funds initially allocated for approved Short-Doyle plans in such amounts as the director determines is reasonably necessary because of the fiscal needs or priorities of the state."

CONNECTIONS

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Executive Director: Richard Van Horn

BOUHOUTSOS

CONTINUED FROM PAGE ONE

and legal questions for utilizing the media — press, radio and television — in psychology.

"Many messages came out of that meeting; the need for quality services, a standard way to help and work with organizations and institutions and ways to look after and prevent mental and emotional illness.

"People want information on how to keep healthy and how to be responsible for their own welfare. We in the AMP can be the link between professionals and those wanting information.

"With the 'Friends Can Be Good Medicine' program, we saw that for better health, a support group is necessary. In a sense, radio hosts do the same thing.

"There is a feeling of community among the listeners. Audience members call in with experiences similar to the caller or tell what they have done in the same circumstances."

With Patti Keith-Spiegel, Ph.D., chair of the Cal State, Northridge psychology department and Jacqueline Goodchilds, adjunct associate professor of social psychology at UCLA, Bouhoutsos is conducting a study of the effects of radio and television psychologists on audiences and participants.

"We want to know why they watch, what kinds of information they get and want; can such programs be harmful or beneficial, and if so, in what ways." She expects to have results on the study by August.

"There are many criticisms of radio and television psychologists; are they helpful or harmful? I don't think we'll find that such programs are damaging, but if we do we've got to stop. These are the concerns we have."

One researcher conducted a study on the theory that callers were isolated, lonely people. She found the reverse to be true. "If they are calling they are trying to reach out; they have a support network," says Bouhoutsos.

A New York radio psychologist kept files on all her callers and one of Bouhoutsos' team members will do follow-ups to see if the referrals were taken, if the agencies were consulted and how they handled the cases. "The responses are vital to us in determining how successful media psychology is.

"When someone calls into a show they have taken the first step and established a patient relationship. The psychologist then has the responsibility to see the person is cared for."

According to Bouhoutsos, the AMP grew out of the needs of media psychologists who had no contact with each other.

They asked for guidelines and standards and the AMP has published its code of ethics for psychology over the airwaves and dealing with the public.

The guidelines for media usage, printed in the AMP newsletter and "Behavior Today" include:

1) "Consideration for the welfare of the public is the primary goal. Whatever is done must result in public benefit."

2) "Only those qualified will give information or advice." The person should come from one of the four psychological disciplines.

3) "Psychotherapy is not done on the air; and there is a delay device so the subject does not tell their last name or information that could reveal their identity."

Some problems are beyond the scope of a half-hour show, says Bouhoutsos, and the psychologist must recognize that the problem is too complicated for a television or radio time allotment and make referrals.

In the late 1960s, Bouhoutsos took part in a radio program, Gil Henry's "Private Line" where panel members listened to problems and made refer-

als. "We sat in the studio from 9 p.m. to 1 a.m. and answered questions. When KLAC became a music station that was end of the line."

She became the resident fellow in psychology and Walter Brackmanns, now of the KTLA television program "Couples," was the fellow in psychiatry at the Center for Training in Community Psychology.

When the Motion Picture Association changed the rating system in 1969, from a censorship kind of system to the G, GP, M and X system, Bouhoutsos was named to the code and rating board.

"Jack Valenti (president of the association) had promised to appoint a woman and a behavioral scientist, so I wore both hats as the first woman on the board."

Since her term, which lasted through 1974, there have been other psychologists and women on the board. She also helped initiate an internship program for students.

"I put in a lot of time traveling, speaking and translating studies and issues, like the effects of violence, to other board members."

Bouhoutsos sought to raise awareness of other issues in evaluating film besides sex and violence. "In an informal survey I took, people remembered movies where they were terrified or upset, as when Bambi's mother is shot.

"Parents need to be aware of issues and go to movies with their children. They need to deal with problems rationally. The Sorcerer's Apprentice section of 'Fantasia' upset many children; so films affect people in different ways."

Bouhoutsos estimates that she saw 5,000 films during her term. "I used to wonder how people could make such awful films. But there is never any one person in charge; sometimes it clicks and sometimes it doesn't."

"But when a film does work it can be something we never forget and talk about years later. We remember films when they show us self-revelation and speak to the common thread that runs through all of us."

The APA gives out media awards for outstanding programming and she expects the AMP will do something similar, giving its imprimatur, like the Good Housekeeping Seal of Approval, when a radio or television station, magazine or newspaper submits something that lives up to our standards.

"Implicit in the creation of the AMP is the belief that media can be a positive force."

Bouhoutsos is involved in numerous professional organizations and is ending her three-year commitment to the California State Psychological Association as president, past president and president elect, and she still serves on the board of directors. She has maintained her private practice through all of her other commitments.

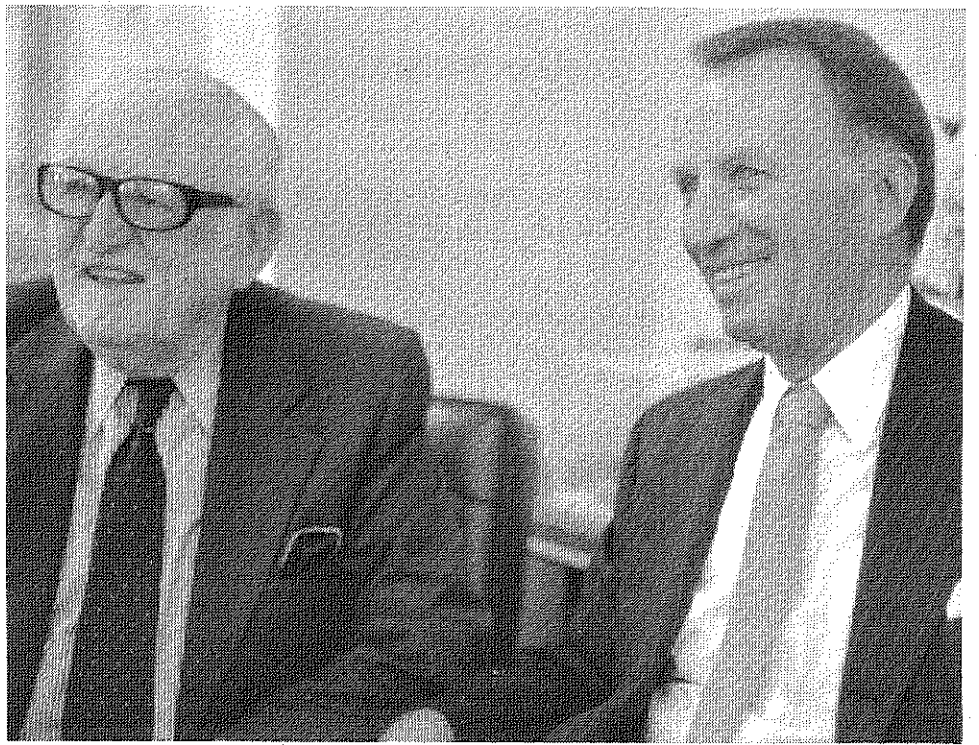
She is a professor of clinical psychology at UCLA and with Kenneth Pope is working training third and fourth year graduate students who will lead groups of mostly women who became sexually involved with their therapists.

Bouhoutsos is also a member of the Mental Health Advisory Board.

She is pleased with the inroads psychologists are making in the media. "Newstime is being devoted to reporting on human behavior. The number of topics is unlimited and we know the public appreciates and uses the information."

Bouhoutsos lists her interests as clinical and community psychology, ethics and standards, media psychology, training of psychologists and paraprofessionals and administration, program planning, consultation, program evaluation and supervision in mental health.

With her many involvements and commitments her schedule is often hectic. Her speaking schedule already takes her into next year but she doesn't seem to mind. "My work is fun; I love it."



Philanthropist Seniel Ostrow will receive the Mental Health Association's Performance Award at a benefit Saturday, June 4 at the Beverly Wilshire Hotel. Honorary dinner chairperson is Ben Winters (right). The MHA board of directors chose Ostrow as award recipient. Tickets for the benefit are \$125. For information on hosting a table or purchasing tickets, call the MHA benefit office, 476-9661.

GROUND BREAKING CEREMONIES



On Feb. 28, San Fernando Valley Community Mental Health Centers Inc. held a ground breaking ceremony for its Housing and Urban Development (HUD) Independent Living Center Complex. It is part of a National Deinstitutionalization Demonstration Program for the Chronically Mentally Ill, with funding through HUD Section 202/8 Program and also through Los Angeles City Community Redevelopment Agency. Through this, 10 two-bedroom apartments, with a subsidy for low-cost housing, will be constructed. Among those taking part in the ceremony were Terry Zellhart, HUD deputy director; Richard Dawson, architect; Don Flair, architect; Jan Claypool, board of directors president; and Ian Hunter, Ph.D., executive director (l-r).



El Centro Community Mental Health Center in East Los Angeles held a ground-breaking ceremony for its Independent Living Center on Friday, March 11. Funding for the 10-unit apartment complex project, scheduled to open in September 1983, is from El Centro Human Services Corp. through a \$400,000 low interest loan from the Department of Housing and Urban Development (HUD). This is the second such project in Southern California to be funded by HUD's 202 Demonstration Housing Program. The ceremony was attended by Henry Lozana, assistant to Congressman Edward Roybal; Bob Gomez, El Centro board chairperson; Eleanor Martinez, El Centro board member; Claude Martinez, El Centro president; Maria Chacon, El Centro board member; Assemblyman Richard Alatorre; Juana Soria, El Centro board member; Dr. J.R. Elpers, director, county Department of Mental Health; and Fred Stillions, HUD (l-r).

BUDGET CUTS

CONTINUED FROM PAGE ONE

Centinela Child Guidance that provided outpatient services to 285 children and their families.

- Another program to be eliminated is Hathaway Home residential services (Children's Village), a loss of services to 1,147 children.

- A program that trains and recruits foster parents to provide family settings for emotionally disturbed children will be eliminated with 5,475 units of service lost.

- Elimination of Gateways outpatient services to 200 adults will disrupt the continuity of care in the transition from hospitalization to independent living.

- Hollywood Mental Health will be curtailed \$198,850 and estimates are 462 patients will not be served. This affects day treatment and outreach services to the adult chronically mentally ill.

- Augustus F. Hawkins will have an entire ward closed. This will mean 365 persons not served. This intensive inpatient (acute care program) diverts a number of persons from the more expensive state hospitals. The average stay in a state hos-



Kathleen H. Snook, Los Angeles County Department of Mental Health assistant director, administration

pital is 27 days compared to the average stay of eight or nine days at Augustus Hawkins.

- It is estimated that 47 percent curtailment at Harbor/UCLA Crisis Resolution Unit would result in 395 persons not served. Another potential cut at Harbor would mean an additional 203 persons not served in outpatient services.

And the potential cuts go on to list program after program reduced or eliminated.

Elpers said in a memo to the Mental Health Advisory Board, these cuts are distributed among the regions and bureaus "in a manner that each region sustains its fair share of budget cuts . . . and must be seen as a preliminary proposal," until final state budget figures are decided.

According to Kathleen Snook, assistant director, administration, Department of Mental Health, the projected curtailment list was done "with a great deal of citizen input in each region. It was a joint process involving regions and bureaus working together."

Thirty percent of the cuts are with private sector contract providers. The remaining 70 percent are from county departments and could require the layoff of more than 214 county employees.

Elpers said, "We have been unable after reviewing the entire program to find program reductions that will entail less service reductions or be less painful to the system as a whole."

VIEW:

The proposed budget for the state for 1983-84 has been out and around for some time. Its impact on the mental health program in Los Angeles County has now been assessed and a curtailment list prepared.

In the course of perusing this list we were forced to realize that the proposed budget will damage care for the mentally ill in our county almost beyond belief. There are cuts of \$9.7 million from the budget, leaving over 31,000 persons without help in their struggle against mental illness. People affected will cry out in pain and rage against a government that can behave so callously toward the terror and pain of disabling mental illness.

The needs of thousands of seriously ill children and adults will be ignored if this travesty is allowed to proceed unchecked through the halls and conference rooms of our legislature, if it is allowed to become the fiscal law of our state on the first of July.

All persons of good will must unite against this inhumanity. Actions taken under the banner of fiscal responsibility turn sour when they injure and harm living children and adults, real human beings who are your neighbors and mine.

Both the governor and the Legislature have stated that they do not wish to cut services to the seriously mentally ill. The governor's staff in Sacramento feels that the savings in the budget are administrative savings made possible through more rigorous collection of patient share of costs and cost control on services offered.

We know here in Los Angeles that the savings they project are just not available. There are in fact a fiction.

Each of us who cares what happens to the mentally ill must let our own legislators know early and often that the cuts in the proposed budget are real and will hurt people that they have repeatedly said they do not wish to harm.

Bette Caraway,
President, Board of Directors
Mental Health Association
In Los Angeles County (MHA)

Richard Van Horn,
Executive Director, MHA

Editors note: In the last issue of Connections was a list of current state legislators representing Los Angeles County to be used as a resource in contacting them, or you can address mail to your legislator at the State Capitol, Sacramento, CA 95814.

COALITION TO MEET

On Tuesday, April 12, the Mental Health Coalition in Los Angeles County will hold an open general constituency meeting.

It will be held from 7:30 to 9:30 p.m. in the Los Angeles County Department of Mental Health first floor conference rooms, 2415 W. Sixth St., Los Angeles.

The meeting will cover the 1983-84 state budget, impact of AB 2100, overview of the mental health situation and suggestions for impacting the Legislature in the spring session.

For more information on the meeting or the Coalition, call the Mental Health Association in Los Angeles County at 629-1527.

CLINIC AT COUNTY/USC OFFERS SPANISH-SPEAKING SERVICES

"For Spanish-speaking people, mental health services are a foreign phenomenon and seeking therapy is not a casual thing. We don't get people who say they've been in therapy before in Mexico or Central America."

These are the words of Frank Acosta, Ph.D., director of the Spanish-Speaking Clinic at the Adult Psychiatric Clinic of the County-USC Medical Center.

Most patients in the clinic, funded by the county Department of Mental Health, come through referrals. Says Acosta, "A small percentage are self-referred and some come from medical clinics and public and private social welfare agencies."

"Mostly we get people through word of mouth; people tell their friends."

Acosta estimates there are about 10 Spanish-speaking clinics in the county. "We cover this catchment (geographic) area; the northeast end of the county. We do advise patients to take advantage of local clinics if they can."

"Much of the program's success depends on the patient's ability to continue therapy; it becomes difficult if they have to travel long distances."

The Spanish-speaking clinic offers out-patient programs. Each of the four therapists arranges his schedule of treatment which includes individual and group therapy, psychotherapy and sometimes family and couple counseling.

Concurrent with his work as a clinical psychologist, Acosta is heading a clinical research study on "the impact of special preparation and educational programs for Spanish-speaking patients entering psychotherapy and mental health services."

"We are trying to show that if patients are educated," says Acosta, "they can get a better start understanding mental health and treatment, and we can do a better job following the treatment and measuring effects."

The research project, with a staff of seven, including Acosta, is headed by Margo Hurwicz, Ph.D. The project is funded by the Center of Prevention Research, a division of the Prevention and Special Mental Health Program at the National Institute of Mental Health.

Acosta is a principal investigator, along with Joe Yamamoto, M.D., professor of psychiatry, UCLA and Leonard A. Evans, Ph.D., associate professor of clinical medical education, USC.

The researchers have developed a 12-minute audio-visual, "with a forceful impact, designed to give patients unfamiliar with the topic a picture of the behavior that occurs and the possibility and richness of treatment." The film, with vignettes and an explanation of psychotherapy, is narrated by Hispanic actor Richardo Montalban.

"A major problem for researchers and clinicians," says Acosta, is the development and use of assessment tools that are meaningful for Spanish-speaking patients.

"Many of the tools are not easily translated and in adapting them we must be careful we are measuring the same phenomena."

Spanish-Speaking Clinic's staff is bilingual and interdisciplinary. There are two psychiatrists, two clinical psychologists, three residents in training and three interns. "Not everyone is Spanish-speaking, but we are multicultural."

There are team conferences every Wednesday in which all 10 team members discuss treatment and problems. "We stress that a therapist must try hard to understand the patient's cultural background and values."

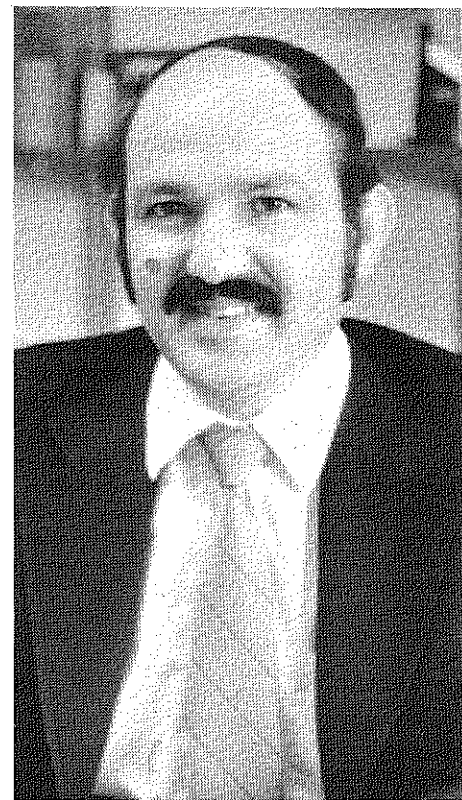
"In our team discussions we take into account such areas as the patient's religious affiliation and if the patient has a viable family network."

"Many of our patients don't fit the Hispanic stereotype of the strong, close-knit family. Often there is strife and conflict. We have to ask if there is a support group of family and friends and if they can be included in treatment."

In his work, Acosta stresses short-term therapy, about six sessions, with targeted goals, "that have been defined and that the patient understands."

"We have seen with Spanish-speaking patients that the response is better with a time limit."

Longer terms are sometimes necessary, and the team advises patients to continue individual and group therapy. "We are still experimenting. We have no special technique with Spanish-speaking patients; we borrow heavily from known ap-



Frank Acosta, Ph.D.

proaches."

The major difference, explains Acosta, is that the therapist explains the treatments, goals and approach in detail with the patient. "No treatments can conflict with a patient's belief structure. There is room for modification and change, but we are wasting time if the approach does not harmonize with patient needs."

"When many of our patients explain their problems they ask, 'Am I crazy?' We have to explain mental illness, psychology and treatment and leave room for negotiation, or we could lose them. With lower income minorities, treatment drop outs are high."

"How the client is moving in the job market is also a factor. The majority of people the clinic sees are unemployed, which makes our job harder. The people don't have control of their lives, and we have to be realistic and consider environmental factors."

Spanish-Speaking Clinic patients make up about 40 percent of the patients at the LAC-USC Medical Center psychiatric clinic. Acosta estimates the clinic sees about 500 patients a year with a wide range of problems — adjustment problems, schizophrenia, depression, adjustment problems, anxiousness and culture shock. "We are also seeing an increase in the number of more severe diagnostic disorders," says Acosta.

Clinic admissions make up about 40 percent of the hospital's total, says Acosta, with most being Mexican-Americans.

Cooperation is coming from the East Los Angeles Mental Health Center where research workers can follow patients through orientation, treatment and follow-up.

Acosta has been with the program for eight years. He and fellow researchers Yamamoto and Evans, have recently published "Effective Psychotherapy for Low-Income and Minority Patients," which is an alternate in the Behavioral Science Book Series.

"The field is burgeoning," says Acosta. "Many people are taking an interest in cross-cultural therapy. This is an exciting era."

He points out that from 1920 to 1970, 500 articles of scientific merit were written on Hispanic problems and treatment.

"In the past eight years, 1,500 pieces have been written. There is a lot of interest and we are only scratching the surface."

"With our research and work in the clinic we are on the edge of knocking down notions. With mass education about what exists, we believe there will be a higher use of services."

"We believe clinics across the state and county will be over-subscribed instead of under-subscribed as they are today. With greater encouragement, people respond and get information and help."

For information on the Spanish-Speaking Clinic call Acosta, 226-5350, the Adult Psychiatric Clinic, LAC-USC Medical Center.

CALENDAR

April 4, 18

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

Call 558-0444 for more information.

April 4, 11, 18, 25

Counseling Center of Westwood United Methodist Church: Two weekly, ongoing groups will meet Mondays at the center, 10497 Wilshire Blvd., Los Angeles.

An adult group, led by Claire Ollstein, M.F.C.C., will meet from 7 to 8:30 p.m. A group for older persons, led by Richard Bright, M.F.C.C., will meet at 2 p.m.

For further details call 474-3501.

April 4, 18, 25

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

Call 326-2763, 6-8 p.m., for information.

April 4

United Methodist Church of San Fernando: A six-week support group for women will meet Mondays from 7:30 to 9 p.m. in the library of the church, 1525 Glenoaks Blvd., San Fernando.

C. Margaret Schram, M.F.C.C., will lead the group. Cost for the six-week series is \$60.

For details call 368-8950 or 365-3156.

April 4, 11, 18

Manos de Esperanza, San Fernando Valley Community Mental Health Centers Inc.: Topics of the in-service training sessions, all held from 10 a.m. to noon at 6740 Kester Ave., Van Nuys and open to mental health professionals, will be "Pseudohomosexuality" on April 4, "Use of the Espejo" on April 11 and "Alcoholism and the Latino Client" on April 18.

Call 988-8050, ext. 249, for details.

April 5

Central Valley Mental Health and Advocates for the Mentally Ill: A parents support group will meet from 6 to 8 p.m. in the Central Valley Mental Health conference room, 8101 Sepulveda Blvd., Van Nuys.

Call Vivian Isenberg, 901-0327, for information.

April 5, 12, 19, 26

Ups and Downs: This self-help group for persons with depression and manic-depressive illnesses will meet from 7:30 to 9:30 p.m. at 6740 Kester, Van Nuys. There will be a speaker on April 26.

Call Carol Frye, 988-8050, for details.

April 6, 13, 20, 27

East Compton Park: A family outreach program will meet at 1 p.m. at the park, 5116 S. Atlantic Blvd., Compton.

Call Barbara Taylor at 639-4080 for details.

April 6

Countywide Interagency Committee on Mental Health: The 9:30 a.m. meeting will take place at the Los Angeles County Department of Mental Health, first floor conference rooms, 2415 W. Sixth St., Los Angeles.

April 6

California Hispanic Psychological Association: Dr. Augusto Britton, professor at Cal State University, Northridge, will present "Self-disclosure in Therapy Among Chicanos and Mexicans" from 7 to 9:30 p.m. in UCLA's Neuropsychiatric Institute sixth floor conference room 68-236, 760 Westwood Plaza, Westwood.

For information call 665-1730.

April 6

American Red Cross, Los Angeles Chapter: The Western District will offer a free four-week parent support group Tuesdays, April 6 through 27 from 9 a.m. to noon at 1140 Veteran Ave., Westwood. Ruth Sukloff, M.A., will lead the group. For details call 478-0231.

April 6

UCLA Continuing Education in Health Sciences: "Asthma Support Group Leadership Training," a six-week course, will be offered Wednesdays from 7 to 10 p.m. on the UCLA campus.

For details call 275-6469 or 825-9832.

April 8

Gabriel Valley: "Medi-Cal Consolidation," with speakers Tom Kruliski, M.D., and Wanda B. Olsen, M.D., both with the Southern California Psychiatric Society, will be the topic of the meeting, held at 7:30 p.m. at the San Marino Community Church, 1750 Virginia Road, San Marino.

Call 797-3562 or 449-4217 for details.

April 9

Portals House: The S.O.S. (Socials on Saturdays) Dance will be held from 6:30 to 9:30 p.m. at Wilshire Christian Church, 634 S. Normandie, Los Angeles. Admission is 25 cents.

Hosted by the S.O.S. Club of Portals members, the dance is open to board and care home residents and community mental health program clients.

Call 386-5393 for information.

RCLC

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

April 8

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

For information call 508-7800.

April 12

San Gabriel Valley Region RCLC will meet at 7 p.m. at La Puente Valley Community Mental Health Center, 160 S. Seventh Ave., La Puente.

For information call 960-6411.

April 14

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

For information call 533-3154.

April 20

Central Region RCLC will meet at 7:30 p.m. at the LAC/USC Medical Center Psychiatric Hospital, room 2C18, 1934 Hospital Place, Los Angeles.

For information call 226-6424.

Southeast Region RCLC will not have its regular meeting in April.

These meetings are open to the public. See page 2 for RCLC legislative meetings.

April 9

Southern California Psychiatric Society: The annual spring meeting will be held at the Biltmore Hotel, Los Angeles.

Call 477-1041 for more information.

April 11

South Bay Board and Care Operators Group: The group will meet at 2 p.m. at Torrance First Christian Church, 2930 El Dorado, Torrance.

Call 518-6873 for more information.

April 11

Help Anorexia: Edward Piken, M.D., gastroenterologist, will speak on "Effects of Anorexia and Bulimia on the Gastrointestinal System" at the 7:30 p.m. family support group meeting, held at Glendale Federal Savings and Loan community room, 3812 Sepulveda Blvd., Torrance.

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

April 12

Alliance for the Mentally Ill — Norwalk: The relatives and friends group will meet at 7 p.m. in the Norwalk-La Mirada Unified School District office, 12820 S. Pioneer Blvd., Norwalk.

Call 864-4412 for information.

April 13

Relatives and Friends of the Mentally Disabled, Redondo Beach: The group will meet from 10 a.m. to noon at the Office of Mental Health Social Service, 2810 Artesia Blvd., suite D, Redondo Beach.

Call 772-2188 for more information.

April 13, 27

Augustus F. Hawkins Mental Health Center and Mental Health Association in Los Angeles County: A family and friends support group will meet at 5:30 p.m. in the center's room 1119, 1720 E. 120th St., Los Angeles.

Call 629-1527 for more information.

April 13

Southeast Mental Health Region, Los Angeles County Department of Mental Health: Child Abuse Services will offer "The Prevention and Treatment of Child Abuse and Neglect — Techniques and Strategies" as its annual seminar from 9:30 a.m. to 4 p.m. at Augustus F. Hawkins Mental Health Center, 1720 E. 120th St., Los Angeles.

For information call Julius I. Fuller, 603-4885.

April 13, 27

Help Anorexia: The North Hollywood-San Fernando Valley chapter self-help and support group will meet at 7:30 p.m. at 6240 Laurel Canyon Blvd., suite 202, North Hollywood.

The group is led by Abbe Goodman, M.A., psychotherapist.

For further details call 766-5663.

April 14

Advocates for the Mentally Ill: AMI will meet at 7:30 p.m. at Thaliens Community Mental Health Center, 8730 Alden Drive, Los Angeles. Topic will be "Help Us Find the Way to Project Return Center."

April 14

South Bay Adult School: "Reaching the Hard to Reach," a four-week lecture series for those taking on responsibility for care of the chronically mentally ill will be offered from 7:30 to 9 p.m. each Monday in Redondo High School's room 803, at Diamond and Francisca Streets, Redondo Beach.

Gary Rusth, M.S., rehabilitation consultant, will present the lectures. Fee for the series is \$10.

For details call Rusth at 857-8424.

April 15-16

Divorce Mediators Inc.: The corporation will hold its second annual training in divorce mediation for family lawyers and mental health professionals Friday evening and all day Saturday in the conference room of the Sea Colony condominium, Neilson Way at Pier Avenue, Santa Monica.

For information or registration call 477-9595.

April 15

Mental Health Association in Los Angeles County, Westside and Coastal Friends and Advocates for the Mentally Ill: A second fund-raising party to benefit the Project Return Center featuring "That Other Woman's Child-A 'Legit' Country Musical" will be held at 8 p.m. at the Callboard Theatre, 8451 Melrose Place, Los Angeles.

Advance purchase of tickets at \$15 each is necessary. Tickets will be held at the door.

For details call 472-4926 or 472-0834.

April 17

Southeast Mental Health Region, Los Angeles County Department of Mental Health: "Teen Sexuality" will be the topic of the "A Healthy Mind: For You and Your Family" radio program, hosted by Julius I. Fuller, the region's child abuse/children's services coordinator. It will air at 8 p.m. on KACE, 103.9 FM.

Guest speakers will be Arlene Mayo and Miriam Thomas, both from Central City Community Mental Health Center, and two teen parents.

April 17

California Family Study Center: "Rachel, Rachel" starring Joanne Woodward and directed by Paul Newman will be shown at 10:30 a.m. at Brentwood Theaters, 2425 Wilshire Blvd., Santa Monica. Cost is \$5.

This showing is part of the center's "Human Relationship" film festival.

Call 843-0711 for more information.

April 18

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

Call 518-6873 for more information.

April 20

El Centro Community Mental Health Center: "Spring Pot Luck and Film" is the title of the 6:30 p.m. Family Night meeting, held at the center, 972 S. Goodrich Blvd., Los Angeles.

Call 725-1337 for more information.

April 21

Hollywood Human Services Project Mental Health Task Force: Pat Aulicino, program planning and evaluation director at Lanterman Regional Center, will speak on "Developmental Disabilities and Mental Health" at the noon meeting at Handcraft, 7351 Santa Monica Blvd., Hollywood.

Call 467-3605 for more information.

April 23

UCLA Extension Department of Continuing Education in Health Sciences: "Freud: The Misinterpreted Humanist," a day with Bruno Bettelheim exploring the controversy over perceptions of Freud, will be held from 9 a.m. to 4 p.m. in Dodd Hall's room 147, UCLA.

For information call 825-6701.

April 23

West Central Family Mental Health Advisory Council: "Crisis in Mental Health Services" a community conference, will be held from 8:30 a.m. to 4:30 p.m. The morning session will be at Consolidated Realty, 3725 Don Felipe Drive, Los Angeles, and the afternoon session at West Central Mental Health Center, 2751 Stocker St., Los Angeles. Fee is \$12.50.

Call Renee Woodruff at 299-3680 for more information.

April 23, 24

Mental Health Association in Los Angeles County: A rummage sale will be held at Antioch University, 300 Rose Ave., Venice, from 10 a.m. to 3 p.m. Proceeds will benefit the proposed Project Return Center.

New and used clothing, furniture and collectibles will be offered for sale.

For information or to make donations call 472-3163 or 472-4926.

April 23, 30

Cedars-Sinai Medical Center: The Center for the Study of Young People in Groups will begin a training program in adolescent group psychotherapy for mental health professionals from 9 a.m. to noon April 23 and 30, held at Thaliens Mental Health Center at Cedars-Sinai, 8730 Alden Drive, Los Angeles. Cost for the training session is \$225 per person.

For information call 855-3401.

April 27

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

Call Suzy Green, Ph.D., at 343-9105 for more information.

April 28

Westside and Coastal Friends: This relatives and friends of the mentally ill group will meet from 7 to 10 p.m. in the Brentwood Veterans Administration Medical Center theater, 16311 Wilshire Blvd., building 211, Los Angeles.

April 28

Mental Health Advisory Board: The board will meet at noon in the Hall of Administration's room 739, 500 W. Temple St., Los Angeles.

For information call 738-4772.

April 28

UCLA Department of Pediatrics: The Network for Families with Asthmatic Children will hold its monthly support meeting at 7:30 p.m. at the UCLA Sunset Canyon Recreation Center.

For details call 275-6469 or 825-9832.

April 29

Hispanic Caucus, USC School of Social Work: The annual Hispanic scholarship-library fund-raiser will be held at 5 p.m. at Rudy's Pasta House, 6047 E. Olympic Blvd., Los Angeles.

Tickets are \$12.50 and \$7.50 for students and senior citizens.

For tickets and details call 743-2711.