

*Report focuses on county's process used
in selecting and negotiating contracts*

COUNTY GRAND JURY REVIEWS MENTAL HEALTH DEPARTMENT

INTERVIEW:

BARBARA LURIE

Patients' Rights Program Chief



"We are not ombudsmen, really, because that implies neutrality, and we are not neutral fact finders. We are actually the client's advocate, so we try to resolve the problems to the client's satisfaction, when and if possible, and that's not always possible," said Barbara Demming Lurie.

Lurie is chief of the Los Angeles County Patients' Rights

"Patients don't leave their rights at the door when they walk into a psychiatric facility... too often hospital staff confuse patients' rights with privileges."

Program. As its function, her office "is charged with protecting the patients' rights, consumer rights, human rights of all recipients of psychiatric services," according to Lurie.

This function translates into a list of numerous sub-functions, including handling client complaints; monitoring and reviewing inpatient facilities;

continued on page 4

The Audit Committee of the Los Angeles County Grand Jury has completed its review of the Los Angeles County Department of Mental Health private sector contracting.

The audit review was accomplished with the services of Peat, Marwick, Mitchell and Co. Certified Public Accountants.

An audit report in November 1981 concluded that "the department is managing its funds in a satisfactory manner, and is aggressively pursuing additional state funding." At this time, a full scale review revealed several advantages and disadvantages to Los Angeles County associated with contracting out services to private providers.

One of the major findings was that program costs between private and public services do not appear to be directly comparable. The report stated, "Private providers tend to treat less ill, more manageable patients. These patients require less staff-intensive programs and cause fewer management problems than county patients. The county is the provider of last resort, and thus tends to treat the acutely ill who require higher staff to patient ratios, more professional and medical staff, and enriched programs. Comparing the cost of a day treatment program run by the

continued on page 6

ELPERS OUTLINES EFFECTS OF CUTS

(See Chart Page 2)

Cuts that estimate as many as 51,000 patients less will be served in '82-'83 were outlined by Dr. J. Richard Elpers, director, Los Angeles County Department of Mental Health.

It is not yet certain the magnitude of the cuts necessary in the mental health budget because several proposals have been

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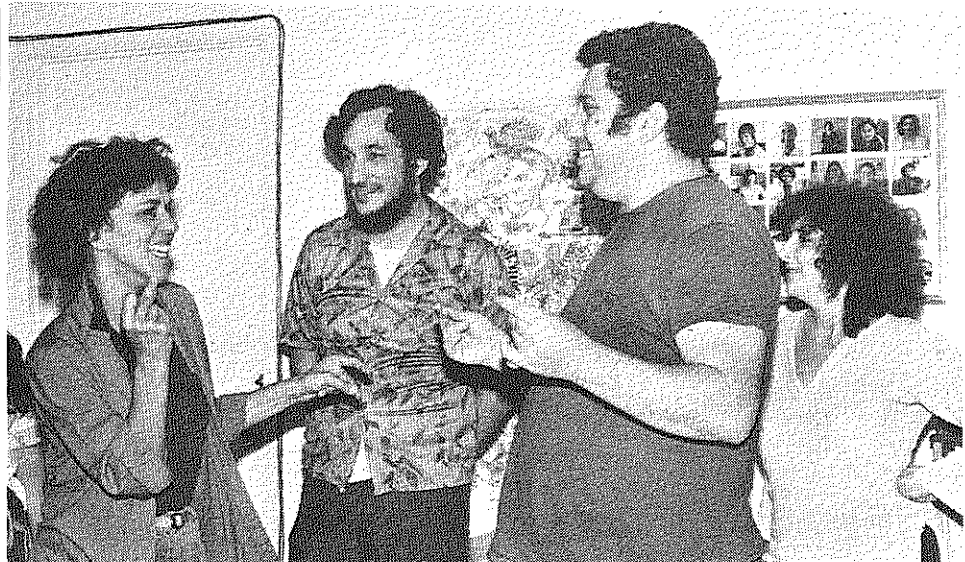
INSIDE:

**"BAG LADIES"
HELPED
PG. 5**

**PORTALS
OPENS DOORS
PG. 7**



Employees Sharon McClendon, Patrick Smith, John Olmsted, Roberta Lovelace and Pearl Scherr are among committee members preparing for the June 4-5 Metropolitan State Hospital open house. (story on page 6)



Project Return Players, an improvisational theater group, will make its debut at the June 10 conference. The public is welcome.

PROJECT RETURN CONFERENCE FOCUSES ON SELF-HELP ROLE

Self-help groups have proven to be a successful adjunct to traditional health and mental health services, according to Rhoda Zusman, director of Project Return, a Mental Health Association in Los Angeles County federation of self-help clubs for recovering mentally ill adults.

An exploration of the role of these groups and their relationship to the mental health delivery system will be the focus of "Self-Help Networking: Direction for the '80's," the second annual Project Return conference, held June 10, 12:30-4:30 p.m., at Patriotic Hall, 1816 S. Figueroa St., Los Angeles.

"The purpose of the conference is to educate the public and professionals about the role of self-help groups in meeting the needs of people who share common problems and concerns," said Zusman.

Part of the program will be a panel discussion with representatives from Alcoholics Anonymous, Co-counseling, Overeaters Anonymous and Project Return self-help groups. They will be discussing how self-help works and will answer questions from the audience.

Preceding the panel will be speakers addressing different areas of self-help. Allan Rawland, MSW, director of the Los Angeles County Department of Mental Health San Gabriel Valley Region, will speak on the interface of self-help groups and mental health services. Project Return director Rhoda Zusman and Co-director John Siegel will give a historical overview of the self-help movement.

The conference will close with the debut performance of the Project Return Players, an improvisational theater group. Directed by Carrie Bray, the group is made up of 10-15 Project Return club members from throughout Los Angeles County.

"We're hoping this group will become a permanent group that will have the opportunity to perform before community groups and agencies," said Zusman. Additional mental health improvisational groups are planned in Los Angeles County under Bray's direction.

Admission to the conference is free, but donations will be accepted. For information, call the Mental Health Association at 629-1527.

BUDGET CUTBACKS - COMPUTATION OF POSSIBLE ALTERNATIVES

The following chart is a detail of the impact of several alternative cutback possibilities developed by the Los Angeles County Department of Mental Health in response to the various legislative proposals. (see story page 1).

Alternative	Curtailment Required**	Estimated Patients Not Served
1. 3.75% COLA* from State (7.0% actual COLA)	\$ 4.4 million	7,691
2. 5% cut in base	\$ 5.4 million	9,415
3. No COLA* from State (7.0% actual COLA*)	\$ 8.7 million	15,269
4. 5% cut in base plus no COLA* from State (7.0% actual COLA*)	\$13.7 million	24,073
5. S/D Medi-Cal consolidation requires diversion of current Short-Doyle funding to match federal funds	\$16.3 million	27,070
6. Medi-Cal consolidation plus 3.75% COLA* (7.0% actual COLA*)	\$20.7 million	34,761
7. Medi-Cal consolidation plus 5% cut in base	\$21.7 million	36,485
8. Medi-Cal consolidation plus no COLA* (7.0% actual COLA*)	\$25.0 million	42,339
9. Medi-Cal consolidation plus 5% cut in base plus no COLA* (7.0% actual COLA*)	\$30.0 million	51,143

* COLA-cost of living adjustment

** These curtailment options are not cumulative. Each must be calculated separately, so must not be added together.

MHA LONG BEACH COUNCIL CONFERENCE ATTENDED BY 200

"Community Awareness: Catalyst for Change," a conference sponsored by the Long Beach Council of the Mental Health Association in Los Angeles County (MHA), attracted 200 mental health professionals, students and community members.

Held at Long Beach City College on May 1, it featured two sessions of workshops.

The film, "The Other Side of Hell," was shown, followed by discussion with MHA President Bill Thomas. The film depicts Thomas' ordeal at Farview State Hospital in Pennsylvania.

Dr. David Burcham, pastor of Covenant Presbyterian Church in Long Beach, was luncheon speaker.

Workshop faculty included professors from California State University at Long Beach and Long Beach City College, community mental health professionals and professionals in private practice.

"It was successful in terms of attendance and the way people responded to the programming," said conference coordinator Morgan Miller. "We seem to have met a community need."



The Rev. H. David Burcham, keynote speaker with MHA Long Beach District Council Chairperson Mildred Snider (l-r).



MHA staff coordinator for the event Morgan Miller helps with registration.



Aurelito Agundez, the youngest participant with his father Auerlio Agundez.



Ted Sykes and MHA board members Steve Simon and Tom Pritchard (l-r).

discussed in the Legislature. Proposed cuts range from \$4.4 million to \$30 million. The curtailments are based on the assumption in the governor's budget of a 5 percent cost of living, not effective until Oct. 1. This would translate to an annual cost of living of only 3.75 percent and will be inadequate, according to Elpers, because the county will have increased operating cost of approximately 7 percent as of July 1.

"Unfortunately, we do not anticipate that the \$4.4 million reflected in this initial curtailment list will be sufficient to meet our actual budget reduction requirements on July 1. There are a number of other potential budget problems facing mental health in '82-'83," said Elpers.

"The Senate Finance Subcommittee, which handles the mental health budget, has already voted to cut 5 percent from the Short-Doyle base budget. We understand that they have also completely eliminated the cost-of-living adjustment. If sustained, these two losses would require a total curtailment of \$13.7 million or 12.8 percent of our base," said Elpers.

The Legislature is currently considering major Medi-Cal realignments and reductions which will impact the Department of Mental Health. One proposal is to transfer all Medi-Cal fee-for-service funding for mental health care from the private sector to the Short-Doyle/Medi-Cal system to be administered by the counties.

"As we understand the plan, the state would 'save' the state portion of this funding and only make the federal matching funds available to the counties. A large, new patient load would become the responsibility of the county. In order to obtain the federal funds to treat this new population, the county would be forced to utilize existing Short-Doyle funds to match the federal Medicaid funds," said Elpers.

"Los Angeles County would have to divert an additional \$16.3 million from existing programs to match this federal money. This would require a major reduction in existing services. These reductions would have to come from our new, most cost-effective residential treatment or hospital alternative programs which are not eligible for federal funding or through the elimination of services to non-Medi-Cal eligible patients, many of whom are children or are severely and chronically disabled adults formerly treated in state hospitals," Elpers said.

Another proposal is to transfer the Medically Indigent Adult (MIA) programs to the counties — again after imposing a large curtailment.

"Although the implementation of the transfer of the MIA programs to the counties would give us some infusion of cash, the funds received under the current proposal would be quite inadequate to treat the huge increase in the number of patients to be treated by the county system," Elpers explained.

"It is, of course, difficult to estimate the impact of these potential legislative actions. If even a portion of them were to be implemented, the situation would be so drastic that we could no longer carry out our responsibility to provide basic, essential services to the mentally ill in Los Angeles County," said Elpers.

"This would necessitate the state's resuming its responsibility for care of the mentally ill by greatly increasing its state hospital services to our patients," he said.

CITIZENS ADVISORY COUNCIL HEARS OUTCRY ON CUTS

Central to all the reports and discussion at the quarterly meeting of the Citizens Advisory Council (CAC) was the issue of cutbacks in funding, along with consolidation of services, Block Grants, possible Medi-Cal realignments and reductions.

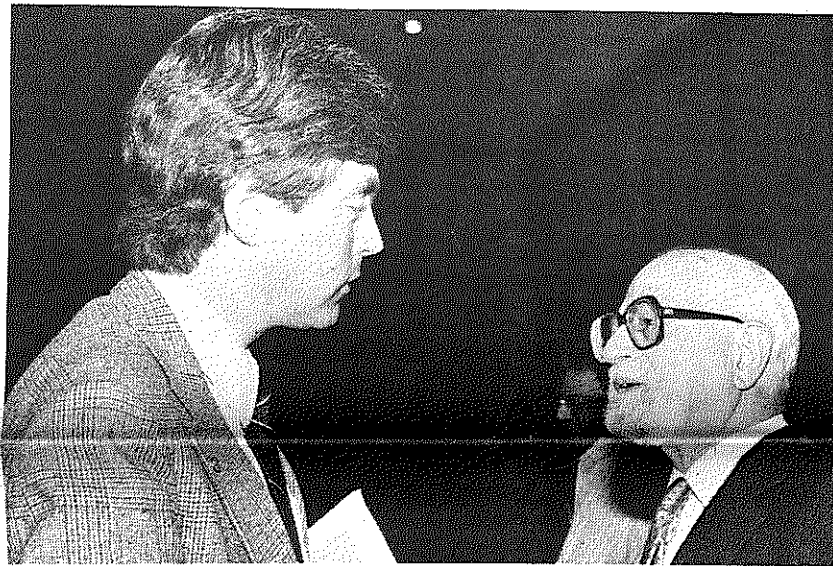
The (CAC) listened for two days in Los Angeles to reports on mental health issues in California.

The council membership has representatives from across the state and is chaired by Lila Berman. Of the 15 members, nine are appointed by the governor, three by the chairperson of the Senate Rules Committee and three by the Speaker of the Assembly. They are a citizens group formed by law to advise and assist the governor, the Legislature and the State Department of Mental Health.

The meetings were open to the public. Marcia Buck, CAC project director, reported on the CAC Mental Health Advisory Project. Barbara Lurie, Patients' Rights chief; Tony Hoffman, California Association, Families of the Mentally Disabled; and Charles Scott, mental health consumer, were part of a panel on legislation. Kenneth Wagstaff, director, California Department of Mental Health, reported on the status of the '82-'83 budget. Peter DuBois, chief of Revenue Management for Los Angeles County Department of Mental Health, helped the CAC with questions of budget process and strategies. Susan Mandel, Ph.D., chairperson, California Council of Community Mental Health Centers, and Claude Martinez, J.D., member, State Block Grants Task Force, reported on the Mental Health Block Grants for California.



With Lila Berman, chairperson of the Citizens Advisory Council (seated) are Ruth Ann Terry, R.N., M.P.H., and Sheldon Brown (l-r), members of the council.



Kenneth Wagstaff, director of the State Department of Mental Health, answers questions put to him by H. Rogosin, member of the Los Angeles County Psychological Association.

H. Rogosin: "How do we get our input into the situation?"

Kenneth Wagstaff, director, California Department of Mental Health: "The thing to do is ask legislators who are on the finance or ways and means (legislative committees), talk to them . . . There is no substitute for hand written letters or personal visits (to legislators). The Mental Health Association is heard up there, the CAC . . ."

"I'm going to refrain from giving you strategies. I think that is inappropriate to my role. But it is important to realize (what is coming)." (Wagstaff)

"One thing about California politics — they may try to operate behind the scenes, but they feel bad about it." (Wagstaff)

Susan Mandel, Ph.D., on Block Grants: "Anytime mental health services are subsumed with other services, mental health loses. To further subsume that with Block Grants is an absolute disaster."

Eva Mapes of Hope Community Mental Health Center questioned the block grants: "We lost our community mental health center grant and we wonder are we going to go down the tubes? What is to happen?"

Peter DuBois: "Yes, it is possible (to go down the tubes). Underscore again, if you cut 200 million, something will go down the tubes."

Wagstaff: "The thing we have to do is have the Short/Doyle system embrace the system (community mental health centers)."

"We are dedicated to see that the consolidation happens. What we have to do together is look to the future when there will be no block grants."

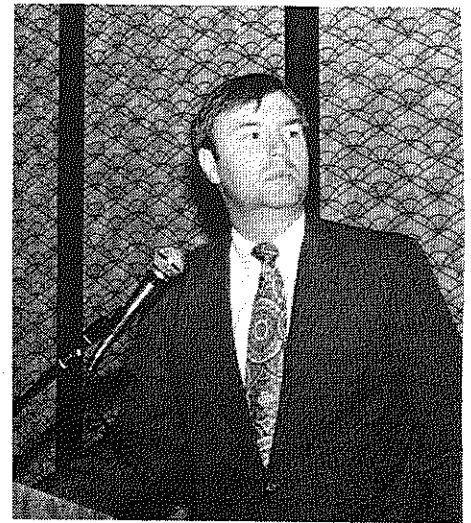
"We cannot let where we have been dictate where we are going." (Wagstaff)

One participant asked: "Can't our legislators see that it costs more to deal with people in the jails than in mental health treatment?" (Wagstaff)

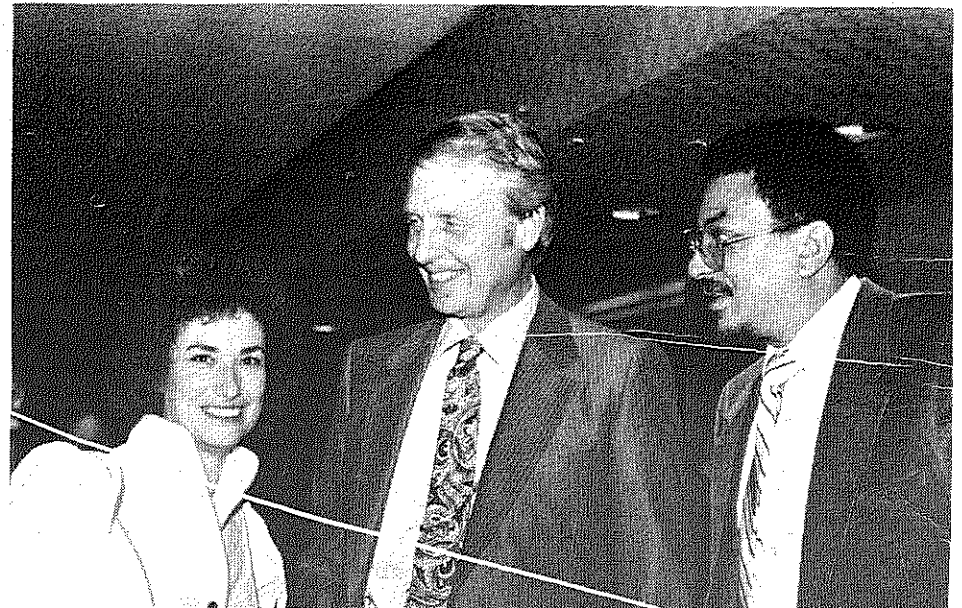
Peter DuBois: "We don't hire our legislators to make decisions like mindless 5 or 10 percent across the board cuts. We could hire a computer to make those kinds of decisions."

"The boys in the back room, and I think that is not sexist but accurate, they know we are tired. They are counting on it." (DuBois)

Citizen input is what we are about here today. But if we let this (cuts) happen, there won't be a need for this council (CAC); there will be little to decide." (DuBois)



Peter DuBois, chief of Revenue Management for Los Angeles County Department of Mental Health.



A panel discussion, "Interface Between Mental Health and the Criminal Justice Systems," included Diane Serber, chief, Forensics Division, State Department of Mental Health; Hank Schoenlein, Health Services administrator, State Department of Mental Health; and Sid Herndon, executive director, Atascadero State Hospital (l-r).

RECOMMENDATIONS FROM MEETING PROVIDED TO LEGISLATURE

The Senate Health and Welfare Committee, chaired by Senator Diane Watson, and the California Coalition for Mental Health, chaired by Suzanne Dworak-Peck co-sponsored a one day conference on "Putting Mental Health Back on Track" at the West Los Angeles College.

Those attending spent time in small discussion groups around the issues

of: underserved populations (children, elderly, minorities); community care, private and public sector partnership; criminal justice and mental health interface; depopulation vs. deinstitutionalization.

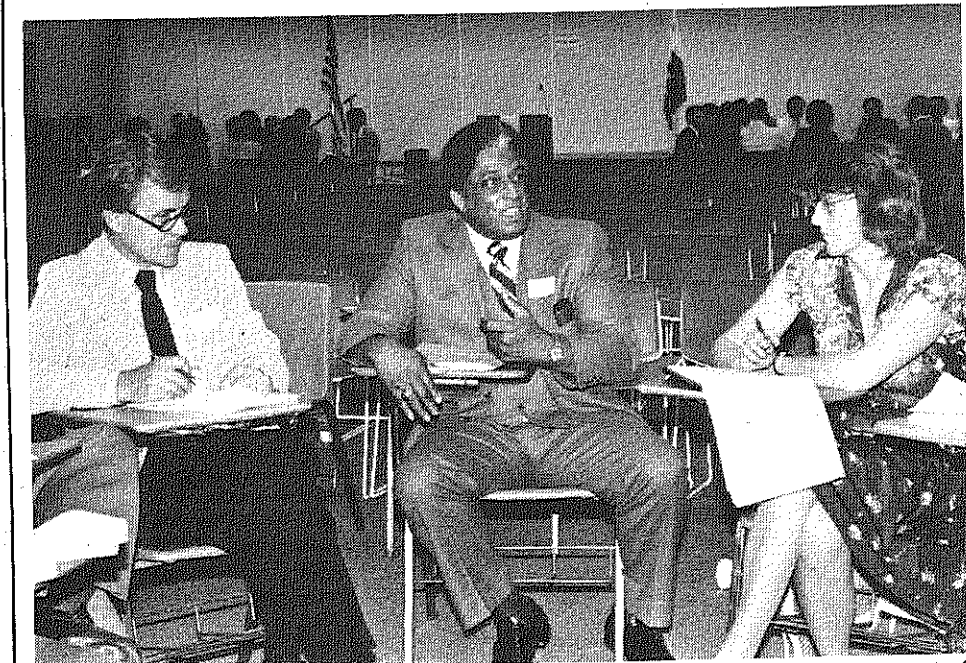
Recommendations evolving from the conference will be provided to the legislature, according to Dworak-Peck.



Reed Brockbank, founder of the California Mental Health Coalition; Suzanne Dworak-Peck, chairperson of the State Mental Health Council; Linda Hoche; Richard Van Horn, MHA executive director; Dr. Jacqueline Bouhoutos, past president of State Psychological Association; and Teresa DeLuca, president, California Conference of Local Mental Health Directors (l-r).



Alisa Dunn, chairperson of the Mental Health Council of NASW; Dr. Wm. Schwartzman; Domino Cheung; and Jane Utti, consultant to Senate Health and Welfare Committee (l-r).



Jim Karls; Edwin Gipson, deputy director for Community Programs, Department of Aging; and Nan Servantes (l-r).

LURIE continued from page 1

serving as consultants to staff of facilities; monitoring all pending and proposed legislation having an impact on the area of patients' rights and working on the formulation of bills; providing training for staff of facilities and consumers; collecting statistics on denial of patients' rights, and shock treatment and psychosurgery; making recommendations to the mental health director on placement of physicians on review panels; and, as the need arises, ad hoc projects, such as bringing absentee voting ballots to clients and responding to unfair representation of the mentally disabled by the media.

Lurie, who has a master's degree in clinical psychology, has been with the Patients' Rights Program since 1977. Prior to that, she worked in program evaluation for the county, where she developed an interest in patients' rights. As part of her responsibilities in that position, she evaluated facilities to make sure they were following the law, and some of the laws involved patients' rights.

In 1976, when a regulation requiring every county to have a patients' rights advocate went into effect, Dr. Roger Schock was appointed for Los Angeles County. However, with Schock running the Forensic Bureau, another employee took over the job part time. Then Lurie "was asked to come on board." She took the job, working initially under Schock.

At the outset, Lurie was the sole advocate. She developed the program, procedure and policy manual for the office. Later in 1977, a suit was brought against the county, charging it did not have a sufficient amount of advocates, and the staff was enlarged. Lurie did a lot of the training of the staff.

"We did role playing. I went over the law line by line and the regulations line by line," she said, "because they really have to be experts in it."

Lurie is assistant clinical professor of psychiatry in the USC advocacy training program, a graduate level program run by Dr. Jack Zusman and Dr. Martha Lyon. As part of this program, the students are placed in Lurie's office to do field work.

"Patients don't leave their rights at the door when they walk into a psychiatric facility," Lurie said when asked what she thought persons should know about patients' rights. "These are not privileges to be doled out by hospital staff. These are basic rights that they are to enjoy, unless there's some exceptional circumstance that would cause their denial. Too often hospital staff confuse patients' rights with privileges."

Another comment she made is that "although patients' rights advocacy sometimes forces us to take an adversarial posture vis-a-vis the facility, in many cases we can be a valuable resource for the facility. Many facilities use us as consultants; we supply them with information, both written materials and consultation." Lurie said that almost half the calls her office receives are from staff at facilities.

"If the facility is denying patients' rights and repeatedly doing it, then we will take an adversarial posture, but certainly we don't in the begin-

ning," she continued. "I hope that facilities don't see us as the enemy and they don't see patients' rights as the enemy. Patients' rights are something that all persons, not just patients, should enjoy. They're just basic human rights, and we're there to make sure they do."

Patients' rights should, said Lurie, "be taking on an increased importance, given all the cutbacks that are going on. As the services get more cut back, there's an increasing need for patients' rights advocates, especially when you talk about funding. We're finding now that patients are left and right getting cut off SSI (Supplemental Security Income), and so our

"I hope that facilities don't see us as the enemy and they don't see patients' rights as the enemy."

office is moving more into that area, representing clients at SSI hearings . . . because we see a huge need now."

While she does not believe that there is an "adverse climate to patients' rights" now, she is "kind of pessimistic" about what the future is going to hold, and she cited a few reasons for this.

"You've got an increasing law and order mentality in the community, and I'm not saying that's wrong, but unfortunately, dangerousness is viewed synonymously with mental disorder in the minds of a lot of the public. Combine this with a law and order mentality and they just want to get these people off the streets. They don't care if they go into prisons or the mental health system," she said.

"There is an increasing resistance about government intrusion and regulations. Patients' rights, at least in the private sector, could be seen as that," she continued. "Also, you've got a real economic conservatism now, when . . . anything that is going to cost extra money is held in disrepute, and patients' rights sometimes costs money, especially their legal rights."

"So, with all these factors working together, it's not the best time now for patients' rights. I think the flowering days were in the late '60's and '70's. I don't know that the '80's are going to hold."

Lurie said that "for the most part" she enjoys her work.

"It's always challenging, and it's always exciting. You never know what the next day is going to bring, what new crisis, what new complaints, what new amendment to a bill, so it's always in a flux," she said. "Occasionally, you can get gratification in handling a person's complaint to a favorable completion. Often though, you get very frustrated . . . there's a high burnout, too."

Away from her role as patients' rights advocate, Lurie writes a restaurant column for the Easy Reader newspaper. She belongs to the Restaurant Writers' Association and teaches a gourmet dining course. She draws and sketches "when I have the time" and travels "not as much as I'd like to, but probably more than the average person." She has just returned from her sixth trip to Europe.

The Los Angeles County Patients Rights Office can be reached 24 hours a day, seven days a week by calling 738-4888. After hours call should be of an emergency nature.

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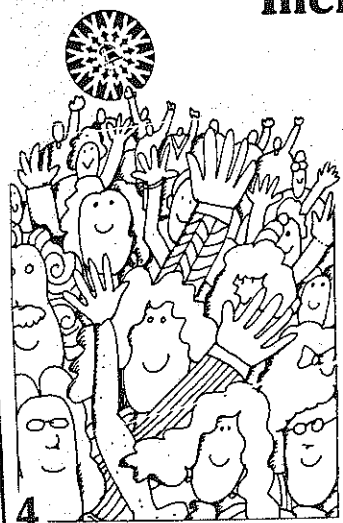
Mental Health action and effectiveness happens in direct proportion to your participation.

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PROVIDERS GROUP ADDRESSES UNIQUE CONCERNS

In the San Fernando Valley, there are more than 100 residential care homes serving the mentally ill.

The San Fernando Valley Community Care Providers Group is where residential care operators from about 25 of these homes "come together and share their common concerns," according to Beverly Hopson, Mental Health Association in Los Angeles County (MHA) San Fernando Valley Region director. The group began approximately three and a half years ago as the San Fernando Valley Coalition of Concerned Care Providers. It was started by a sub-committee of the San Fernando Valley Interagency Committee.

Earlier this year, the group was reorganized and restructured, with the agencies involved taking an organizational role and responsibility for arranging meetings, planning programs and providing resources. All residential care providers were invited to join the group.

The agencies currently involved with the group are East Valley Office of Mental Health Social Services (OMHSS), West Valley OMHSS, MHA, Los Angeles County Department of Mental Health San Fernando/Antelope Valley Region, San Fernando Valley Community Living Resource Center, Hope Community Mental Health Center, Northridge Hospital and Verdugo Mental Health Center.

"We are actively involved and supportive of the providers group," said Kathy Tasugi, consultation and education coordinator of the Los Angeles County Department of Mental Health San Fernando/Antelope Valley Region. "To be able to provide a supportive base to these providers and their mentally disabled residents and to develop an active community support network with the providers and agency representatives are strong commitments of the County Department of Mental Health."

According to MHA's Hopson, the group has four purposes: to bring providers together, to share common problems of providers, to solve problems and to present programs that can be useful and informative to providers.

"They are a part of the mental health system, but they are isolated. Each provider is an independent businessperson, and they don't necessarily have any contact with each other," said Hopson. "We see this as a place where we can present programs that are useful and are addressing the unique concerns of providers."

For example, at the April meeting, Doris Jones and Paulette Givens of the county's Psychiatric Emergency Team discussed dealing with psychiatric emergencies. The meeting was held at Northridge Royale, a residential care home with Pat Keleti as provider.

The May 19 meeting was held at Autonomy Residential Treatment Center, located on a ranch in Shadow Hills. Its clinical director, John Muller, gave a tour of the facility and described its program.

Topics for future programs include psychiatric medication issues, dealing with assaultive residents, dealing with depressed or suicidal residents, providers' rights, social and care providers' rights, Social Service issues and Licensing issues.

Also planned for the meetings are brief presentations from community and health services agencies, during which representatives will discuss services available at their agencies.

The San Fernando Valley Providers Group is open to all providers serving the mentally ill in San Fernando Valley. For information about joining the group, contact Hopson at 780-1931.



"Scenes from the Downtown Women's Center," a mural, © Ann Alexandra Wolken and the Downtown Women's Center.

photo by Julia Scalise

WOMEN'S CENTER SERVES "BAG LADIES"

by Jean Griffith

A mural is beginning to blossom over the cement expanse of Skid Row.

According to Jill Halverson, director of the Downtown Women's Center, four years of dreaming, planning and perseverance have gone into this project.

Four years ago, Halverson used her own savings to open the first daytime haven for Skid Row women.

Unlike most downtown facilities, the center is not a detoxification house.

"Very few of these women have alcohol and drug problems . . . maybe less than 10 percent," said Halverson. "About 90 percent of them are mentally disabled. Many are 'bag ladies.'"

The population of women in Skid Row has never been documented accurately. One rough estimate puts the figure near 1,000, while the total Skid Row population is believed to fluctuate between 8,000 and 15,000 people at any given time.

"Some of the women have lived here twenty years, but you'd never see them," said Halverson. The Downtown Women's Center serves about 50 women each day.

Inside the center, hanging plants line the window and block out the drabness of Los Angeles Street. Halverson's tour leads through a "living room," a partitioned bedroom where three women are sleeping, a library of donated books, showers and toilets, and a "salon" where a beautician donates time cutting the women's hair. In the kitchen, volunteers prepare one of the meals of the day. The women who use the center sit together around tables, talking and watching.

The center is a model family, said Halverson. They can come for meals or sleep, showers, friendship or protection from Skid Row's criminal elements.

Once a week, they can meet with psychiatrist Rodger K. Farr, M.D., from the Los Angeles County Department of Mental Health Community Services Development Division, who runs a drop-in rap group.

This is not a traditional therapy group, according to Farr. "The focus is on survival and safety, how to avoid being raped, where to sleep."

The rap group provides a support system for many of the homeless and friendless women, according to Halverson. "Holiday times are especially hard, and there are lots of feelings of isolation, alienation. We provide them with a place to learn to support each other and to develop healthy relationships," she said.

Both Farr and Halverson, in separate interviews, noted that many of the women have spent time in mental institutions. Some arrived on Skid Row as a result of the closures of hospital beds, others as a result of the trend toward community care.

"Some of them, their families will give them money not to contact home," said Farr.

"For many," Halverson said, "the bus station (located two blocks from the center) is the end of the road." Many of the women report that they were given one-way tickets to Los Angeles, she added. Supposedly, they were to arrive at community care facilities, but many "fell through the grate" of existing social service systems. Those with money live in downtown's day-rate housing. Most subsist day-to-day.

Despite this dilemma, said Farr, institutionalization doesn't hold the answer either.

"However terrible it (Skid Row) is . . . they prefer that to being put in our institutions. It's a terrible incrimination of our ability to help them . . . and it shows how dearly they value their freedom. We need to redefine how to understand and treat people in the context of our new community care thinking," he said.

"We are looking at Jill's model-family approach as a composite for other programs," said Farr. "You cannot use our medical-psychiatric models (in Skid Row)."

Most of the chronically ill women will never return to mainstream society, he said. They will remain in Skid Row because they know that their behavior or bizarre appearance will get them arrested or in trouble elsewhere in the city.

"Our goal is to improve the quality of their lives . . . in degrees . . . and to help them develop feelings of self-esteem," said Farr.

Self-esteem is also the plan behind the Women's Center mural. The design depicts daily events and people who frequent the center. Artist Ann Alexandra Wolken, who joined the project through the California Arts Council "Artists in Communities"

Program, spent two months observing the women and the center.

"This is all participatory," a paint-speckled Wolken said from her scaffold perch. "I sketched the women in the center, the activities and the whole family life. The birthday parties, bingo, the ladies . . . they are all here."

From about 100 sketches, Wolken designed the mural. Under her direction, the Skid Row women are painting the mural, scheduled for completion in mid-June.

"I see the art project as a promotion of mental health, too," said Halverson. "Art appeals to the healthy parts of people. The mural is about teamwork, about the center. And they are receiving real positive reinforcement from other street people. They recognize the women in the mural. They stop by to talk, to see our progress."

The population of women in Skid Row is growing, according to Halverson. Condo conversions and escalating housing costs are forcing more women to move into the downtown area. Younger women with children have been seen in the Skid Row area.

"They find us by word of mouth," said Halverson, who often must refer these new residents to other organizations.

Aid for the disabled of Skid Row was originally the domain of charitable and private groups. More recently, the county, private business and these organizations have begun to network. The Skid Row Development Corporation, the County Mental Health Department's Skid Row Project, CAMLA (Concerned Agencies of Metropolitan L.A.) and others are joining together to investigate the needs of Skid Row residents.

"It has taken strong leadership to begin to build a network," said Farr, who is affiliated with the Skid Row Project. Farr hopes that the future will bring a "fabric of community support" to downtown by joining volunteers, agencies, services and professional input.

"It hasn't been easy," said Halverson, who is active in the Skid Row Development Corporation. "I am pleased that they have begun to pay attention to the needs of women on Skid Row."



Ballet Folklórico Estudiantil performed at "Fiesta '82."

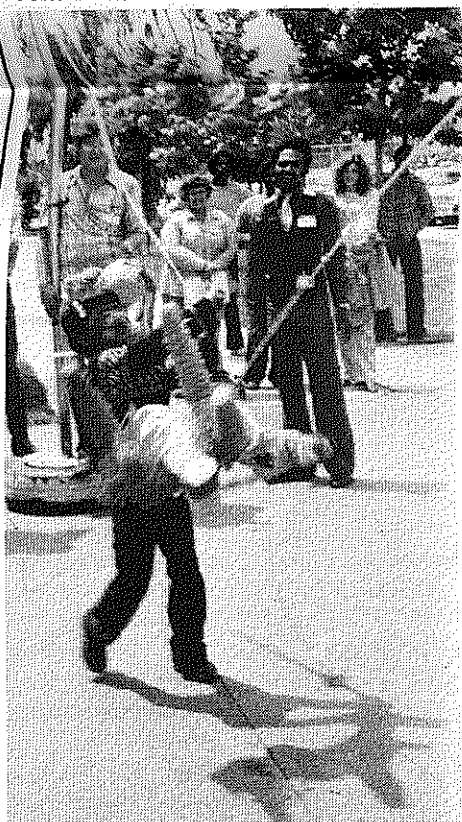
Photo by Julia Scalise

CENTRAL CITY HOSTS "FIESTA '82" WITH SOUTHEAST, CENTRAL RCLCs

It was the first combined effort of two Regional Community Liaison Committees (RCLCs) and a community mental health center. It was a day to celebrate Cinco de Mayo and an opportunity for community members to learn more about services available at mental health and health agencies in the Central and Southeast Regions.

These were all elements of "Fiesta '82," held on May 5 at Central City Community Mental Health Center and sponsored by the Central and Southeast RCLCs for the Los Angeles County Department of Mental Health and the center.

"We're trying to bring people out to celebrate Cinco de Mayo and to inform them on programs that will benefit them," said Southeast RCLC Chairperson James Walker at the fiesta. "Not too many people realize how many agencies are there to benefit them."



What would a Cinco de Mayo celebration be without a piñata?



The Central City Combo participated in the day's activities.

"That's one of the functions of the RCLC, to be a liaison between the mental health (agencies) and communities," he continued.

Another purpose of the fiesta is to gain community support, according to Walker. "That is one of the things we need, their support," he said. "You can't ask for community support if the community doesn't know what it's supporting."

Bands, dancers and piñatas were among the festivities of the day long celebration. The Ballet Folklórico Estudiantil performed traditional Mexican dances, and one member told the history of Cinco de Mayo. Las Generalas, an all-female mariachi band; the Black and Brown Brotherhood Band; and the Central City Combo, made up of Central City staff, entertained throughout the day. Several piñatas were available for children from the neighborhood and in Central City programs to break open.

Other activities included showings of "Friends Can Be Good Medicine" films and a tour of the Central City facility.

Representatives of mental health and health services agencies located in both regions were on hand to give information on services.

According to Walker, this type of joint venture has "been needed for quite some time. We need to become united, keeping our individuality, but keeping our common cause of mental health."

Walker said there are plans to continue combined RCLC efforts.



The Black and Brown Brotherhood Band was among the groups entertaining community members and clients.

GRAND JURY

cont from page 1
county versus a similar program operated by a private provider may yield superficial information due to patient and program differences. Thus, it may indeed be more cost-effective to contract out services rather than provide them through county-run programs. Such a conclusion cannot be effectively supported without a true cost comparison among like programs, which was beyond the scope of our review."

The report gave statistics about private providers' selective admissions (do not admit or prefer not to admit in the following categories) non-English speaking, 60 percent; violent, 70 percent; Geriatric, 60 percent; anti-social, 75 percent; battered women, 78 percent; mentally ill offenders, 87 percent; acting out, 70 percent; medically and mentally ill, 78 percent; children, 85 percent; adolescents, 85 percent; and developmentally disabled and mentally ill, 78 percent.

When interviewing the private providers for the audit review, the providers identified several concerns, including: a cumbersome contracting process, excessive monitoring requirements, unfamiliarity with zoning health and licensing requirements, personnel considerations and management problems caused by county patients.

The overall objective of the review was to outline steps that the Department of Mental Health could take to increase and improve the effectiveness of private sector involvement, according to Jennifer Clark of the Grand Jury. She and Cresia Green were credited by Peat, Marwick with assuming major tasks in the review.

Among the advantages to Los Angeles County associated with contracting stated in the report are: potential cost savings, reduction of county staff, increased time available for legislative review to assure regulatory compliance and reallocation of resources to a uniform case management system.

Disadvantages listed are: potential lower quality of care among contractors compared to county programs, limited control over private providers, selective admissions by contractors, discontinuity of care within the mental health system, increased monitoring requirements, difficulty in terminating contracts and contractor ability to terminate contracts at will.

A significant majority of the contractors surveyed were interested in providing additional services to the county if the current contracting and monitoring requirements were relaxed or modified to reduce the work load on their administrative and professional staffs. There appear to be several incentives available to the county to encourage existing and potential contractors to provide additional services. These incentives would require: reallocation of Department of Mental Health personnel to assist contractors in preparing responsive bids to provide services and in achieving compliance with county and state monitoring requirements; development of a countywide case management system and referral network to track chronic patients' locations and progress of treatment; and further analysis by the department of other potential patient service resources in the community such as board and care and skilled nursing facilities to assess the potential benefits and problems involved in integrating these types of providers into the county mental health service delivery network.

The review included a summary of recommendations made by the Grand Jury for the Department of Mental Health.

It stated that the Department of Mental Health should formally examine the program-by-program financial feasibility of increased private sector involvement in the Short-Doyle Program and contracting

out building maintenance and hospital auxiliary services to private-sector businesses; the location, capabilities, quality, number and availability of board and care providers and skilled nursing facilities; and the desirability of establishing a formal patient referral network.

Also, it should modify its current approach to administration of the Short-Doyle Program by streamlining the contracting and monitoring process; establishing a countrywide technical assistance program, including monthly regional contractor meetings in all five regions; modifying existing reimbursement policies; and locating and/or providing resources to contractors for remodeling of facilities.

Finally the department should alter the mental health system of the county by developing a uniform case management system and creating a formal relationship the department, board and care providers and skilled nursing facilities.

The report commended the County Department of Mental Health for actively pursuing the contracting of services with private sector providers. The report stated, "Major reductions in funds available to the department have inspired county officials to seek out opportunities to maintain service levels at reduced cost."

Peat, Marwick, Mitchell and Co. acknowledged the assistance provided to the review team by Dr. J. Richard Elpers, director of the Department of Mental Health, and his staff, citing that "their valuable insights contributed significantly to our review."

METROPOLITAN OPENS DOORS

"Fact vs. Fiction" is the theme for the June 4-5 Metropolitan State Hospital Open House, held 1-5 p.m. on June 4 and 9 a.m.-4:30 p.m. on June 5 in the hospital's James Hall. The hospital is located at 11400 S. Norwalk Blvd., just north of Imperial Highway, in the city of Norwalk.

"We'll be here, our doors will be open, and we'll be expecting and waiting," said open house committee chairperson Sharon McClendon, patients' rights advocate at Metropolitan.

The open house is designed for persons in the mental health field and the public, according to McClendon. Its purpose is to give "facts that dispel the myths about mental illness" and to describe "what happens to the patient while the patient is here (at Metropolitan)," said McClendon.

"We especially hope that people from professional agencies and organizations associated with mental health will come," she said. "We hope they will gain a greater understanding of the treatment program at Metropolitan, so they can share that with those who need to know."

McClendon cited as also a "primary aim . . . to involve the public and to give information to the public at large."

The open house will include tours; a panel discussion; slide show; the film, "Angel Death," about the drug PCP; information tables; and a flow chart that depicts a patient's movement through the hospital.

The open house preparation has received "total hospital involvement," said McClendon. The committee is made up of 13 staff persons from all classifications.

Dr. Ernest Klatte, hospital director, will officially open the days' activities.

PORTALS FINDS JOBS AND SELF ESTEEM

Portals House was founded in 1955, one of the first agencies to provide rehabilitation for emotionally handicapped adults — halfway houses — in the country, according to Marvin Weinstein, LCSW, executive director.

Located in three buildings at 269 S. Mariposa, Los Angeles, Portals is a non-profit agency, a member of United Way and receives Short/Doyle funds.

Weinstein explained two of the most successful programs at Portals are Transitional Employment Placements (TEP) and the Satellite Housing Program.

The Housing Program helps adults whose emotional problems prevent them from living alone in the community. With assistance and support, clients are encouraged to live independently with minimum supervision.

Those clients who meet the requirements may be placed in one of Portals' apartments, duplexes or houses. Clients pay their part of the rent and expenses. Portals holds all original leases, furnishes the dwellings and provides training and services.

Each client has a case manager who provides a link with community services. Clients must be involved in vocationally oriented programs, work, school, volunteer work placement or rehabilitation.

Supportive counseling is part of the program, along with weekly counseling sessions for family members. Weinstein said, "There is nothing between crisis houses and apartment living; we provide that link."

The Transitional Employment Placements (TEP) program involves businesses where work can be performed by persons trained by Portals. A tax credit is allowed the business, and it proves profitable to hire, at entry level, persons trained and qualified to do the job.

The transitional employment period lasts from four to six months, during which time the worker receives the salary and benefits to which employees of equal status are entitled.

Many times the employer retains the worker or Portals helps locate another placement.

By providing employment, adults are given the opportunity to become productive and independent community members.

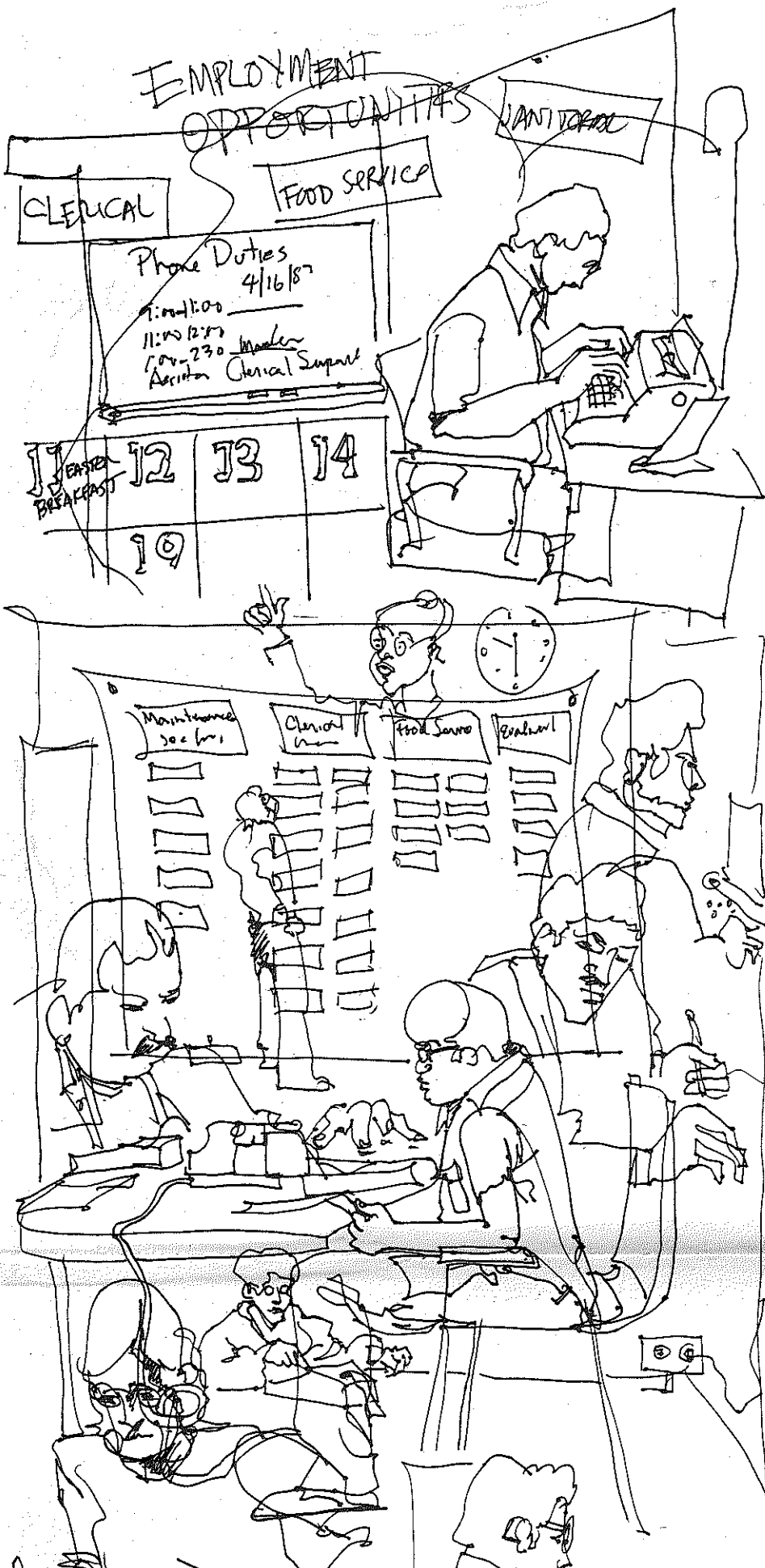


Weinstein added, "We are interested in getting them to 'act as if.'" According to Weinstein, Portals has a high success rate. Seldom do people go back to the hospital.

Portals has been awarded a contract to provide a transition program between the crisis hospital and the TED program. As of July 1, six clients at a time will be served in stays of 120 days.

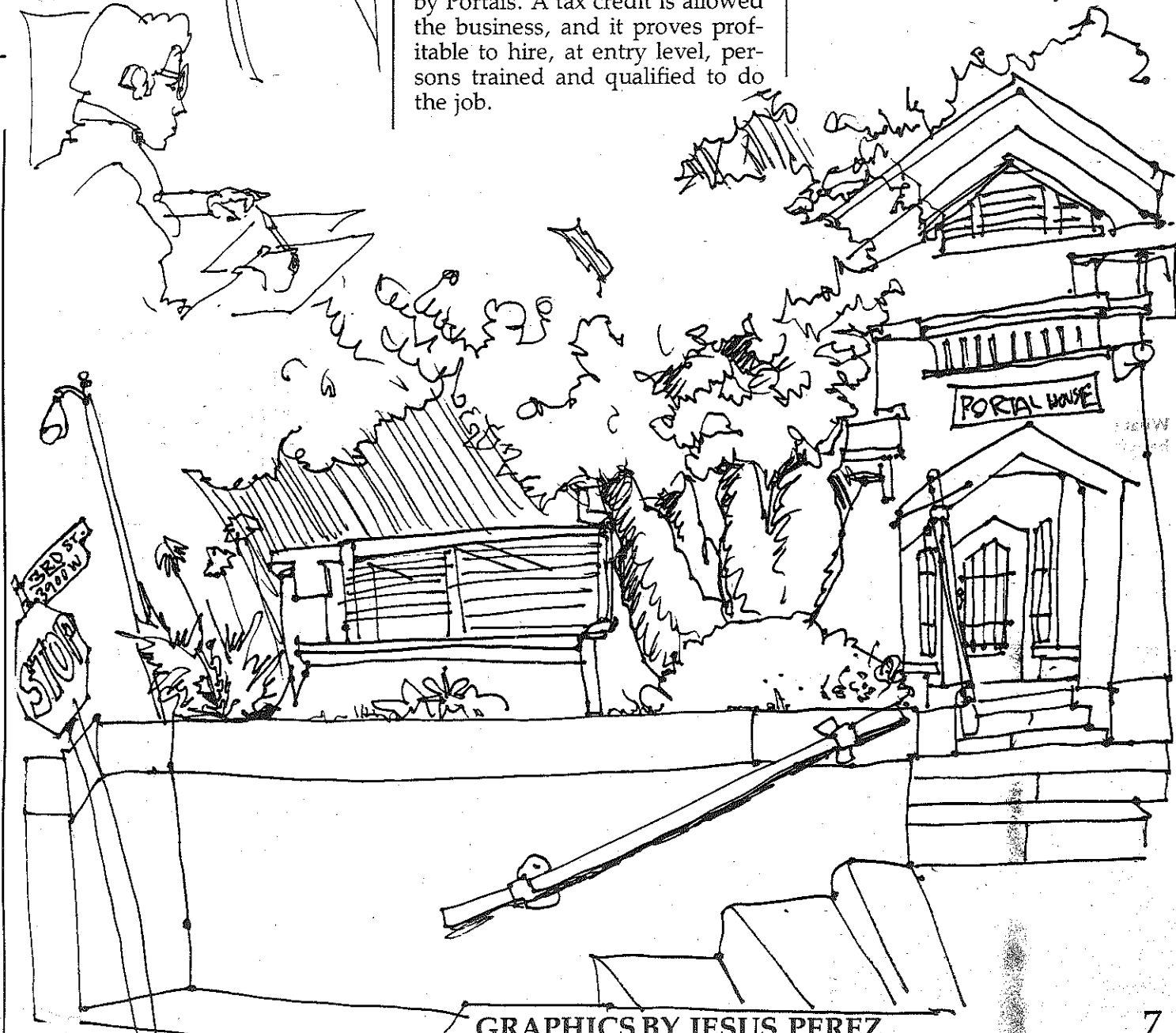
The program will involve the third building and will train in independent living skills, according to Joyce Levine, program development specialist.

"We are pleased the proposal we wrote for the Bates money has been granted," she said. The grant is from money returned to the state from Placer County.



PORTALS BASIC PREMISES

- All human beings have the capacity to change.
- Most behavior, attitudes and belief are learned and can be altered.
- All behavior is purposive and occurs in a behavioral field.
- Behavior is a manifestation of attitudes, beliefs and experiences.
- The ultimate responsibility of our behavior lies within ourselves.
- The individual has the responsibility for taking the action to change his or her behavior.
- Man/woman is a social being and is socially interdependent.
- There is inherent worth in each individual.
- A basic premise is mutual acceptance of each individual's right to be!
- People are more alike than different.
- People have impact upon one another which can affect the quality of life; the individual's interpretation determines the meaningfulness of the impact.
- An environment of love, care and hope which promotes changes in the direction of increased self worth and assumption of greater personal responsibility has the potential of Improving The Quality Of Life!



CALENDAR

June

Los Angeles County Department of Mental Health Children and Youth Services Bureau: "Expressing Feelings Through Art," an exhibit of drawings and paintings by L.A. Unified School District students and oil paintings by Lucille Berkowitz, continues through June 30. It is on display 10 a.m.-5 p.m. at the California Museum of Science and Industry Science Wing Hall, 700 State Drive, Exposition Park, Los Angeles. Admission is free.

June

UCLA Spanish Speaking Mental Health Research Center: A free copy of Proposal Writing Strategies, a publication on the preparation of grant proposals, is available by writing to the center, Clearinghouse Division, Franz Hall, University of California, Los Angeles, CA 90024. After June 15, or to order more than one copy, the cost is \$4.95 each.

June 2

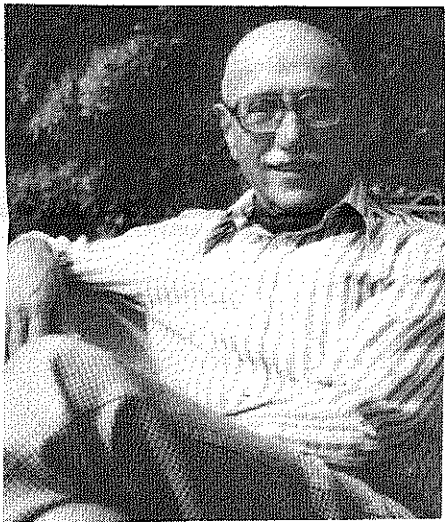
Coastal Community Mental Health Center: The center's open house, with Los Angeles County Supervisor Kenneth Hahn participating in the dedication ceremonies, will be held 1-4:30 p.m. at 747 E. 223rd St., Carson.

Call 518-6870 for information.

June 2

El Nido Services: "Who will Speak for Our Children?" is the subject of the Annual Meeting and Luncheon, held at 11:30 a.m. at the Assistance League Tea Room, 1370 N. St. Andrews Place, Los Angeles. Judge William P. Hogoboom will discuss the impact of the cutbacks on children.

Call 651-2780 for information.



Dr. Judd Marmor

JUDD MARMOR TO RECEIVE MHA AWARD

"It is deeply meaningful to me to be honored by the Los Angeles County Mental Health Association, whose work is in the great tradition of the 'mental hygiene' movement created by Clifford Beers almost 75 years ago. As our lives become more difficult and complicated, the mental health problems of our community and nation take an incalculable toll in human suffering. The Association is in the forefront of the battle against mental illness and deserves our fullest support," said psychiatrist Dr. Judd Marmor.

Marmor will receive the Mental Health Association in Los Angeles County (MHA) Performance Award at a benefit testimonial dinner dance on Sunday, June 6 at 7 p.m. in the Beverly Wilshire Hotel Grand Ballroom.

Columist Abigail Van Buren ("Dear Abby") will present the award to Marmor, and Los Angeles County Supervisor Deane Dana will present a resolution from the Board of Supervisors to Marmor. The Nelson Riddle Orchestra will perform throughout the evening.

Last year's recipient, author Ray Bradbury, is serving as honorary chairperson.

Proceeds from the dinner will be used to hire a person to coordinate and facilitate the public policy efforts of MHA and the Mental Health Coalition in Los Angeles County, according to MHA Executive Director Richard Van Horn.

Tickets for the benefit are \$125. If anyone has not received an invitation or is interested in purchasing a ticket, contact dinner coordinator Lois Betz at 476-9661.

June 2

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

June 2, 9, 16, 23, 30

Forte Foundation: Batterers Anonymous, a free confidential self-help program for men who physically abuse women, meets every Wednesday at 7:30 p.m. at 17277 Ventura Blvd., suite 201, Encino.

Call 788-6800 for information.

June 3, 10, 17, 24

Help Anorexia: A self-help group for persons with eating disorders meets every Thursday, 7-9 p.m., at 11826 Kiowa Ave., West Los Angeles.

Call Bonnie at 820-2719 or Steve at 558-0444 for information.

June 4

San Gabriel Valley Recreation Coalition: The coalition is holding its bimonthly dance for clients of nine San Gabriel Valley mental health programs 6-9 p.m. at San Marino Community Church, 1750 Virginia Rd., San Marino.

Call 576-0784 for information.

June 5, 12, 19, 26

Forte Foundation: A free support group for victims of rape and attempted rape is held every Saturday morning at Forte Foundation, a non-profit, tax exempt community mental health clinic, 17277 Ventura Blvd., suite 201, Encino.

Call 788-6800 for information.

June 7, 14, 21, 28

Help Anorexia: A family support groups meets every Monday, 7-9 p.m., in the Federal Building cafeteria, 11000 Wilshire Blvd., Los Angeles. The June 21 meeting features Dr. Barbara Cadow, clinical psychologist, speaking on "Better Understanding of Eating Disorders."

Call 558-0444 for information.

June 8

Relatives and Friends of the Mentally Disabled in Norwalk: Lucie Rivera, Los Angeles County Department of Mental Health Patients' Rights Division, will show slides and speak on how to appeal SSI (Supplemental Security Income) cuts at the 7 p.m. meeting, held at the Norwalk-La Mirada Unified School District administration building, 12820 S. Pioneer Blvd., Norwalk.

Call 864-4412 for information.

June 10

Mental Health Association in Los Angeles County: The Children and Youth Committee meets noon-2 p.m. at the Children's Bureau Family Crisis Center.

Call the MHA office at 629-1527 for address and information.

June 10

Project Return: "Self-Help Networking: Direction for the '80's," the second annual Project Return conference, will feature speakers, a panel discussion and an improvisational theater group. It will be held 12:30-4:30 p.m. at Patriotic Hall, 1816 S. Figueroa St., Los Angeles. Admission is free.

Call 629-1527 for information.

June 10

Advocates for the Mentally III: "Following the Path to Wellness," a panel presentation where patients will share how they cope with mental illness, will be the topic of the 7:30 p.m. AMI meeting, held at Thaliens Community Mental Health Center, 8730 Alden Dr., Los Angeles.

June 11

Relatives and Friends of the Mentally Disabled in Pasadena: "Encountering the Mentally III, A View from the Police Department," with a panel of law enforcement personnel from Pasadena, Arcadia and Temple City will be discussed at the 7 p.m. meeting, held at San Marino Community church, 1750 Virginia Rd., San Marino.

Call 797-3562 or 449-4217 for information.

June 12-13

San Fernando Valley Child Guidance Clinic: A family Mardi Gras to benefit the clinic will feature carnival rides, game booths, clowns, magicians and entertainment. It will be held 10 a.m.-10 p.m. on June 12 and 10 a.m.-6 p.m. on June 13 at the clinic, 9650 Zelzah Ave., Northridge. It is open to the public.

Call 993-9311 for information.

RCLC

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

June 8

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

Call 960-6411 for information.

June 9

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

Call 533-3120 for information.

June 11

San Fernando/Antelope Valley Region RCLC meets at 10 a.m. at regional headquarters, 5077 Lankershim, suite 400, North Hollywood.

Call 508-7800 for information.

June 16

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

Call 226-6424 for information.

June 17

Southeast Region RCLC meets at 1:30 p.m. at St. Mathias Church, 3075 E. Florence Ave., Huntington Park.

Call 603-7061 for information.

These meetings are open to the public.

June 12-13

Southern California Coalition on Battered Women: "Children of Violence: Facing the Impact of Domestic Violence," a two-day conference focusing on children from homes where domestic violence or child abuse has occurred, will be held 8:30 a.m.-5 p.m. on June 12 and 9:15 a.m.-5 p.m. on June 13 at the USC Davidson Conference Center, Los Angeles. It will feature workshops on topics such as legal issues and rights of children and parenting education and discipline options and panel discussions on education options for battered women's shelters and management and planning of children's programs, among other topics. Preregistration is requested. Fee is \$30.

Call 396-7744 for information.

June 15

San Gabriel Valley Providers Coalition: The coalition meets at 9:30 a.m. at San Marino Community Church, 1750 Virginia Rd., San Marino.

Call 993-9311, ext. 319, for lunch reservations or information.

June 15

San Fernando Valley Child Guidance Clinic: The clinic's Community Relations Council meeting will feature Leslie Ellen Shear, family law attorney, speaking on "Planning for the Care of Children Following Divorce or Separation." The meeting is held at noon at the clinic, 9650 Zelzah Ave., Northridge, and is open to all. Those attending may purchase lunch or bring a sack lunch.

Call 993-9311, ext. 319 for lunch reservations or information.

June 17

Advocates for the Quiet Minority: Barbara Bennett of Mental Health Advocacy Services Inc. will give a presentation on SSI (Supplemental Security Income) at 2 p.m. at San Marino Community Church, 1750 Virginia Rd., San Marino.

Call 576-0784 for information.

June 19

USC School of Social Work and College of Continuing Education: Irvin D. Yalom, M.D., professor of psychiatry at Stanford University School of Medicine, will conduct a one-day symposium on "Group Treatment and Work with Acute Inpatient Groups," held 9 a.m.-4:30 p.m. at USC. General fee is \$75, with a \$60 fee for students. Preregistration is recommended.

Call 743-8285 for information.

June 19, 20

Pasadena Counseling Group: "MFCC Orals Prep Workshop," a one-day workshop for marriage, family and child counselor applicants preparing for the state BBSE oral exam will be offered 8:30 a.m.-6 p.m. at 711 E. Walnut St., Pasadena. Fee is \$100. Preregistration is required.

Call Steve Bass, MFCC, at 795-7722 for information.

June 24

Mental Health Advisory Board: The board meets at noon at the Hall of Administration, room 739, 500 W. Temple St., Los Angeles.

June 25

Mental Health Association in Los Angeles County and Los Angeles County Department of Mental Health: Orientation for new volunteers of the San Gabriel Valley Volunteers in Service to the Mentally Ill will be held at 1 p.m. at Arcadia Mental Health, 330 E. Live Oak, Arcadia.

Call 576-0784 for information.

June 25

National Association of Social Workers Peace and Social Action Council: A showing of the film, "The Last Epidemic," followed by a panel discussion on the responsibilities, fears and possibilities for action for the multi-ethnic social work community will be presented at 7 p.m. at Lecture Hall 1 (King Hall) of California State University, Los Angeles.

Call Alan at 392-6901 or Nancy at 396-1752 for information.

June 28

El Centro Community Mental Health Center: The monthly meeting of Family Night, a family support group, will feature "Techniques to Motivate Depressed Persons," by Dr. Marilyn Sloan and Sarah Hipolito. The meeting is held at the center, room 237, 972 S. Goodrich, Los Angeles.

Call 725-1337 for information.

June 30

A Touch of Care: Richard B. Cohen, MFCC, facilities a free monthly Parents Skills Training Group at the organization's social rehabilitation center, 11552 W. Pico Blvd., West Los Angeles.

Call 473-6525 for information.

June 30

Anorexia Nervosa and Associated Disorders: A self-help group for persons with eating disorders meets at 8 p.m. at 18345 Ventura Blvd., suite 414, Tarzana.

Call Suzy Green at 343-9105 for information.

CONNECTIONS

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