

October 20, 1948

# Widespread Aid Needed For Youthful Defectives

By JOSEPH KAHN

Mrs. R. is desperate. After having had three normal children, she gave birth four years ago to a Mongoloid idiot. And like hundreds of other such children in the city, the little unfortunate is bundled away into a far-off room out of sight of everyone.

For three years Mrs. R. has been trying to place the youngster in a public institution. Private care is too expensive. The words "no room" ring in her ears. There is "no room" because precious years were lost while the city and state argued over which had the responsibility for caring for under-five mentally defectives. Not until two years ago did the state acknowledge its responsibility.

Like Mrs. R.'s baby, most of these children (there are hundreds of them) awaiting placement are wasting away in their own homes, for distressed parents simply can't give them the specialized care they need.

## Never See the Sun

Many of them are lying in "strait jackets" in city hospitals, where they never see the sun, never play, never exercise.

"We cannot give them the training and care essential for their development," confesses Hospital Commissioner Bernecker. "We haven't the staff and facilities, and our hospitals are set up for the care of physically sick babies. Mentally defectives are the state's responsibility, and it must provide for them."

There is a ray of hope for Mrs. R.—Willowbrook State School on Staten Island. This institution

became Halloran Hospital during the war. A year ago, 1,000 beds (about 40 per cent of the hospital) were returned to the state, and since July, 40 under-five defectives have been admitted

## Lack Equipment, Personnel

Willowbrook consists of nine spacious red-brick buildings surrounded by giant trees and sprawling lawns, but only one is being used for the defective children.

"We would like to be able to

open all the buildings immediately," said Dr. Frank B. Glasser, Willowbrook's acting director. "But we haven't the equipment, and more important, we can't get the trained personnel. It is far better to care for a few than to take more than we can handle."

It is almost impossible to hire registered nurses, Dr. Glasser said, and experienced attendants are difficult to find. Sixty adult mentally deficient patients are used for almost every purpose.

*Continued on Page 32*

# Youthful Defectives Need Aid

*Continued from Page 15*

including the feeding of the babies.

The visitor to the children's building is first impressed by its cleanliness, especially when reminded of the cramped quarters in the city hospitals. New, white cribs stand six feet apart in several connecting rooms. Large windows face a patio where the cribs are rolled in good weather, and where walking youngsters romp on a giant play-pen.

## Stress Therapeutic Care

Dr. Glasser doesn't believe in "strait jackets," but prefers the use of heavy netting over the heads of a child from

falling out, and permits space for exercise.

The accent is on therapeutic care rather than custodial care. A child is watched and studied, and, when physically fit, an attempt is made to teach walking and self-feeding. There is a playroom for eight "walkers," where an attendant helps the children keep busy.

Willowbrook is a good beginning, but only a beginning, and a great deal of wonderful space is still going to waste there. Even opening up all of it to the under-five mentally defectives with a proper staff would not fully solve the problem. Experts believe the state should conduct extra-institutional programs.

"First, social workers from the state schools should be assigned to make a thorough study of cases on the waiting lists," sug-

gests Stanley P. Davies, executive director of the Community Service Society and vice-chairman of the New York Committee on Mental Hygiene. "This should be done to insure the admission to the institutions of the most urgent cases first."

"Secondly, special teachers from the institutions should be assigned to work with children and their families in the community. This kind of program has been successfully carried on in other states, and has resulted sometimes in the child being kept in the home instead of going to an institution."

## Public Understanding

Wider public understanding of mental cases is recommended by Dr. Helen Thompson, director of the Pre-School Child Development Clinic at the New York Post-Graduate Medical School and Hospital.

"The more you face it, the more you help other people," Dr. Thompson said in discussing the impulse to conceal a mentally defective child. "If we all hide it, everyone else will feel that there is something to hide."

The idea that heredity always accounts for mental deficiency, the doctor explained, is a common misconception. While inheritance may play some part, it is only one of many possible causes.

At the clinic, Dr. Thompson tells parents that there is no more "disgrace" attached to a case of mental deficiency than to a case of tuberculosis. She feels that more retarded children eventually should be cared for away from home. However, with loving care and unforced education, many of the less retarded can become happy, successful

people, and fill their "real place in society."  
10/20/48