

The 5,000,000 Children

By DICK OWEN

SCATTERED throughout the U. S. are five million mentally retarded children, and there'll be thousands more. Approximately 3% of all children born fall into the category, says the National Association for Retarded Children.

These children range from hopeless imbeciles to high grade morons. They are little known. They are hidden from the public. Their case, at the moment, is well-nigh hopeless. Medicine hasn't a single cure for this terrible scourge of the innocent.

Mentally retarded children are born to rich and poor alike. Their parents may be college professors or ditch diggers. The affliction knows no class or distinction. It hits all races. It is as democratic as death.

Not only are these children born with permanent brain damage, many of them are terribly deformed. Some have huge heads due to hydrocephalism (commonly called water on the brain), or tiny heads—microcephalism.

Some are contorted by spasticity which locks their legs together or causes them to clench their fists so that their finger nails pierce their palms. They throw their limbs about in uncontrolled thrashings.

Thousands are complete cripples; have cerebral palsy or twisted spines that bend them forward or backward. Many are born deaf, dumb, blind. Some have no hands or feet, just fleshy growths at their extremities.

These children top the list of the permanently afflicted in our nation. Look at these figures:

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| Mental retardation (of each 100,000 population) | 3,000 |
| Rheumatic heart | 700 |
| Cerebral palsy | 750 |
| Polio (permanent) | 300 |
| Blindness | 200 |

Before this vast and terrifying problem medicine is practically helpless. Research is almost nil. The public is indifferent or unaware. Yet more than 10 million relatives and friends of these children are directly affected by the problem.

State Patient's Care Costs \$2,000 a Year

The cost of looking after these children from infancy to old age is met by the taxpayer in most cases. (It can cost \$50,000 per patient. It runs a little less than \$2,000 per year for each patient in the state schools and hospitals in New York.) They get minimal education (there are no trained teachers for the job) and few of them—very few—can be equipped to take jobs and become self-supporting.

Empty Joy

This happy 3-year-old will mercifully never know that she is one of the nation's five million mentally retarded children, for behind her appealing smile is a mind that will retain little. There is no cure for mental retardation, which afflicts about 3% of all children born in this country.



has been greatly reduced by modern treatment and laws requiring blood tests for men and women who apply for marriage licenses.

At Letchworth Village, N. Y., where there are about 5,000 mentally retarded patients, Dr. George A. Jervis, director of the laboratory and one of the country's leading specialists in this field of medicine, says he has not encountered a single case of mental retardation due to syphilis during his 22 years at that school.

In cases of blood incompatibility between mother and infant, doctors frequently can avert danger with preventative treatment by giving the newly-born baby total blood transfusion.

But when it comes to cures for the mentally retarded, the picture is discouraging. The brain damage is beyond any kind of repair. Nothing that has been tried so far has accomplished anything.

TO begin with, many of the brain damages among mentally defective children cannot be diagnosed. In fact, the brain of the defective child many times shows no difference whatsoever, grossly or microscopically, from that of a so-called normal child.

Too little is known about the human brain. For example the causes of sleep are still a mystery.

Mysteries of Brain Still Baffle Science

How much physical damage can a brain sustain and still function almost normally? What happens to an injured brain? What effect does an injury produce on the functions of the brain?

In the hydrocephalic child the skull appears to be abnormally large and is filled with cerebral spinal fluid to the extent that the brain itself is compressed to tissue-paper thinness. Dr. Leon Roizin, pathologist for the New York State Department of Mental Hygiene at the New York Psychiatric Institute, established

that this paper-thin tissue can still function to its limited capacity.

The motor areas in the brain have been pretty well defined. But where are memories retained? What gives us the ability to recall those memories? What gives us the ability to compare certain related memories so that we exercise reason and judgment? Where are our powers of discrimination located?

All of these questions are vital to the understanding of normal brain functions and are a part of the overall problem of dealing with brain damage in retarded children.

At the autopsy table where the corpse of a mentally defective is examined, the surgeon and pathologist might well think they have entered a world of utter madness. Brains in some of these children are upside down in the skull. There may be only a

single hemisphere. The medulla may be absent entirely. Large masses of bone, completely unrelated to normal cranium structure, may be found in the center of gray matter.

These anomalies offer the researcher a starting place for his correlation of the anatomical findings with the adjustment to everyday life.

Dr. Jervis of Letchworth has established the fact that there is need for hundreds of studies to isolate metabolic changes that are found in mental deficiencies. Biochemists are required in such research.

Jervis is using isotopes in an attempt to find out what particular foods, acids, chemicals, etc., are needed for the proper functioning of the body's organs. He hopes to learn what nourishment the brain needs for its development and perhaps find a chemical that may repair brain damage.

AT Willowbrook a significant and hopeful program is now being carried out by Dr. Berman and his associates. His treatment of spastic mental defectives has already attracted wide attention. He treats patients with high frequency electric current.

This is electroshock therapy via a Reiter-Sedac electro stimulator. The Sedac attachment filters out all low frequency current so that only high frequency waves pass through. They have a frequency of one million cycles and over. They cause no pain.

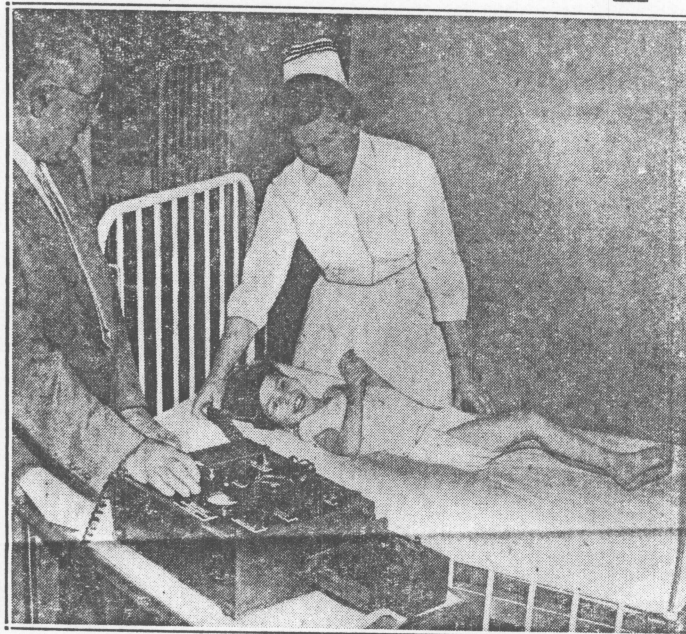
The electrodes are connected to the patient, the current is turned on slowly and gradually increased until movement is produced in muscles of the eyebrows. At this point the current is lowered slightly. The treatment lasts about 30 minutes.

In the April issue of Diseases of the Nervous System, Berman reported how his treatment has

One of the players in this amazing orchestra is a congenital idiot. Another cannot speak a word and all are mentally deficient in various ways. Yet, under the patient direction of instructors at the Willowbrook State School on Staten Island, music is entering their limited lives.



Who'll Never Grow Up



(NEWS fotos by Jim Romano)

Moving Sight

These pictures capture a medical miracle. At left, head nurse Florence Goodfield of Willowbrook State School readies patient for electro-stimulation treatment. The little girl is a spastic whose scissors-crossed legs and clenched fists are immobile. At right, when Dr. Harold H. Berman sends high frequency electric current pulsing through her contracted muscles, her legs uncross and her hands open. Now the child even smiles.

affection and understanding they are easily duped.

EDUCCABLE children get schooling, but it is too limited. It will improve when teachers are available. Simple reading, writing and arithmetic are the basic courses.

Girls are taught social sciences, housekeeping, cooking, sewing and so on. Some boys do woodworking or shoe repairing. In occupational therapy there are the usual ceramics and sewing classes.

But major criticism is directed at the fact that the youngsters sit around the wards for long periods with nothing to do. That's where they get into mischief, fight among themselves and get hurt.

Private Funds Used To Form Boys' Band

At Willowbrook, the Benevolent Society for Retarded Children, which is composed mostly of relatives and friends of the youngsters, put up cash to buy musical instruments for the boys' band. The attendants there raised the cash for the uniforms.

State funds cannot provide such minor luxuries as TV sets and radios in the wards. Currently the parents' group is raising

\$40,000 for a huge carousel for the children.

A similar parents' group helps the children at Letchworth Village, where expensive research equipment has been supplied to Dr. Jervis by the organization.

Finally, what chance do these children have of getting out of the state schools and becoming self-supporting?

Under proper supervision a good percentage might do simple jobs, such as car washing, helpers to workers in trades, messengers, janitors, etc. But if they get married (some do and have normal children) they may need economic assistance.

Most of them are reasonably pappy in the schools. The tempo is geared to their level and the programs allow them to taste the rewards of accomplishment.

But the majority of them will have to spend their lives in institutions unless science breaks through the barrier that isolates them.

They can expect little more than custodial care, a modicum of education and what love and care the attendants, nurses and physicians can give them. Only public action can help. Money for research, once found, will attract research workers. Until this is done, the mentally retarded must remain America's forgotten children.

been used to help spastics unlock their hands and uncross their legs, which up to the time of electro-stimulation had failed to respond to any kind of treatment.

In the case of the child whose photo appears with this article, the scissors-crossed legs became uncrossed and relaxed and the clenched hands opened during a treatment witnessed by this writer.

The importance of this news lies in the statement by Berman that some of these idiot class patients who appeared completely unaware of their existence were in better contact with their environment after the shock treatment. Willowbrook is continuing a greatly enlarged and intensive program to corroborate or disprove the findings to date.

Special research is being done at Columbia University's Psychiatric Center where a special study of the malformed mental defective is currently under way. But apparently there is no coordinated research program anywhere in this country which is set up primarily to come to the aid of these tragic children.

"Probably the greatest contribution of hospitals for the retarded will come from the energetic pursuit of research," says Dr. George Tarjan, director of the Pacific State Hospital in Pomona, Calif. "These hospitals are ready-made clinical laboratories with substantial case material and with personnel who have the needed clinical knowledge and interest."

"A successful research program, however, also needs a basic research team within each hospital, composed of people with research experience. This group must have security or continued financial support, freedom from other obligations and opportunity to investigate all promising leads."

SINCE there are no cures, what happens to these children? What are the state schools like? Are they good places to send a mentally defective child?

First: The problem is basically medical. The environment in which the retarded child is cared for requires coordination possible only under medical direction. It is not impossible to think of treatments similar to those which have been produced in other fields of mental disorders. At one time it was believed that treatment in the psychoses was also hopeless.

The children get excellent medical care. The finest drugs, vitamins and antibiotics are available in generous quantities. Excellent surgeons and doctors minister to these patients. Social service keeps up liaison between children and their homes as well as aiding children when they are discharged.

At Willowbrook (there are approximately 5,000 inmates there and a current building program is intended to provide space for an additional 1,000) the children get the best care possible. This is due largely to the ward attendants.

These patients are not only mentally defective but many are most unprepossessing in appearance and habits. In wards for older imbeciles, young men of 150 pounds, for example, must be dressed, undressed, taken to the toilet, fed, washed and put to bed. They frequently soil themselves. They are incapable of understanding simple orders. Yet the attendants serve their needs and give them affection that has to be seen to be believed.

Few Attendants for Too Many Children

Are the children neglected? Hardly ever. It does happen that because of overcrowding and shortage of help one attendant may have as many as 60 children to look after at a time. But the doctors are on an around the clock schedule and the children are examined every day in the showers for any signs of body sores, and also watched for the outbreak of childhood sicknesses.

Are the children ever beaten? Rarely. An attendant who would beat a child would probably find himself set upon by other attendants. If convicted of hitting a patient, the attendant faces almost certain imprisonment.

What about the sex problem in the state schools?

It is pretty much the same as in other institutions. There is homosexuality among the older groups and some of the younger

Woodworking class at Willowbrook is about the most advanced training boys can receive. Girls are taught simple housekeeping subjects, but the entire educational system is hampered by lack of special teachers.

children. They are watched carefully and when a sex deviate is found he is separated from other patients.

Mentally retarded children are not oversexed. Many of them are extremely innocent of sexual matters. But as they reach puberty their sex appetites develop just as do those of normal children. They cannot be permitted to mix indiscriminately with the opposite sex, but they have weekly dances and parties under supervision.

The girls present the gravest problem, particularly those who are released to the outside for employment. Mentally retarded girls and boys are so hungry for

