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Focus on Education

Eight months changed lives of 10 at Willowbrook

By JUDITH HOLMES

Loretta, age 21, and mentally retarded, spent five years of her life locked in a small windowless room somewhere in the bowels of Willowbrook State School.

Violent toward other patients and attendants, she was put into seclusion at the age of 15 because, quite simply, no one knew what to do with her. She spent most of her days crouched on a single mattress on the floor.

Today she roams the fifth floor hall of Building 2 with other patients. She sleeps in a gaily decorated room with only a dutch door separating her from the other patients in the ward. She has learned to make her own bed. And last week, at lunchtime, she fed herself.

Loretta is one of 10 patients who were taken out of seclusion last September and placed in a new behavioral modification program at Willowbrook.

Ranging in age from 20 to 35, these five men and five women had lived in solitary rooms from 2 to 11 years. Some were violent toward others. Some were self-abusive.

In a period of eight months, all of them have changed from an almost vegetable-like existence to become more self-sufficient human beings.

Dr. Lanny Fields, assistant professor of psychology at Richmond College and a consultant to the program, anticipates the time when the patients "will be able to leave Willowbrook and enter foster homes or other non-institutional arrangements."

Is this a reasonable goal? Dr. Fields thinks it is. "Remember, the patients we are dealing with are the same ones that nobody could do anything about. They are the ones who were put into seclusion for that reason," he said.

Funded through the State Department of Mental Hygiene, the program is supervised by Michael DeRespinis of Willowbrook. Dr. Fields and Dr. Lawrence Dana, director of mental health services at the Eleanor Roosevelt Development Service Center, Schoharie, N.Y., are visiting consultants.

The daily operation of the program is run by trained Willowbrook attendants and nine psychology students from Richmond College who spend four hours a day, four days a week with the patients.

Basically, the behavioral modification program works to change the behavior of the patients using principles of reinforcement developed by Harvard behavioral psychologist B.F. Skinner. The most basic of these principles is that behavior is affected by its consequences.

If Alice, let us say, has never dressed herself, the attendants and students will work toward changing that behavior by making the act of dressing herself worthwhile.

If everytime Alice puts her own socks on, she is hugged by an attandant or given a piece candy, she is more apt to repeat that behavior. The hug and candy are called reinforcers.

REWARD THEORY

All the treatment programs in the behavioral modification unit are based on reinforcements.

"Reinforcement is more effective than punishment in changing a person's behavior" according to Dr. Fields. "For one thing, in punishment, the punisher assumes an aversive role. It prompts the patient to avoid the punisher, or, in short, encourages anti-social behavior. In addition, punishment promotes aggressive behavior."

The behavioral modification program uses a treatment-team approach. Each student works with one Willowbrook attendant (called a therapist) on one patient. The student supplies the theoretical background in behavioral psychology while the therapist supplies a knowledge of the patient and his behavior.

The team develops a special rehabilitation program for its patient. First, the team establishes what a patient can do already (called the baseline measurement). Second, the team establishes goals for the patient consisting of behaviors that will make him more self-sufficient and able to cope with other people.

Some of the patients are learning to feed themselves. Others are learning to recognize words or letters. Still others are making their own coffee, serving themselves meals, or working on motor tasks such as puzzles.

In the beginning, the desired behaviors or goals are heavily reinforced by the team. For example, a hug is given everytime Alice dresses herself. Eventually, once the behavior has reached a certain level, the reinforcement will be more intermittent.

Later, the reinforcing hug will be replaced by the more subtle and complex reinforcers found in the community.

There are many methods used by the team to teach behavior. Let us assume John is going to learn how to drink from a cup. The team may apply a technique called "chaining" in which the act of drinking from a cup is taught as a sequence of events.

In this case, the sequence may consist of three events: grasping the cup, lifting it to the mouth and finally drinking from it.

Some patients are working with a token-economy system of reinforcement. Everytime Joan identifies a letter correctly, she is given a poker chip (token) with which she can purchase candy.

Eventually, she will collect the tokens and use them when she wants to engage in other activities. For example, she may "pay" for the privilege of coloring.

The candy and coloring book are primary reinforcers. But she is now willing to work for tokens alone which will buy her the candy etc. The tokens, in short, have become conditioned reinforcers.

Judging by the behavioral improvements of these patients in the past eight months, Dr. Fields and DeRespinis call the program a success. "We've made some significent gains with an extremely difficult group of patients," DeRespinis said.

This summer there are plans to provide a more formal training in behavioral psychology to the Willowbrook therapists in the program. Other than a few introductory sessions, the therapists are learning mostly from experience and work with the students. Fifty-five Willowbrook attendants are working in three shifts.

Working as full-time assistants in the program ase Essa Jallad, a former Richmond College student, and Lenny Rosenberg.

Richmond College psychology students active in the program are Alex Zissu, Lynn Marcus, Richard Zuccarelli, Lou Caiazzo, Peter Ferry, Dori Dehn, Jay Schnabolk, Sue Herrero, and John Baldamente.