

Doubt persists, but good Willowbrook programs shown

By ROBERT MIRALDI

James A. Forde had his back against the wall — literally and figuratively — as members of the New Brighton and surrounding communities hammered away with questions about a proposed halfway house at a recent community board meeting.

No one trusted the state Department of Mental Hygiene. No one believed what the department's spokesmen had to say. No one believed that anything concerning Willowbrook Developmental Center could ever be good.

Forde, the acting director of the institution for mentally retarded, held out his hands pleadingly. "The public doesn't know," he said, his voice rising. "The public just doesn't know. We do have good programs at Willowbrook."

No one was convinced.

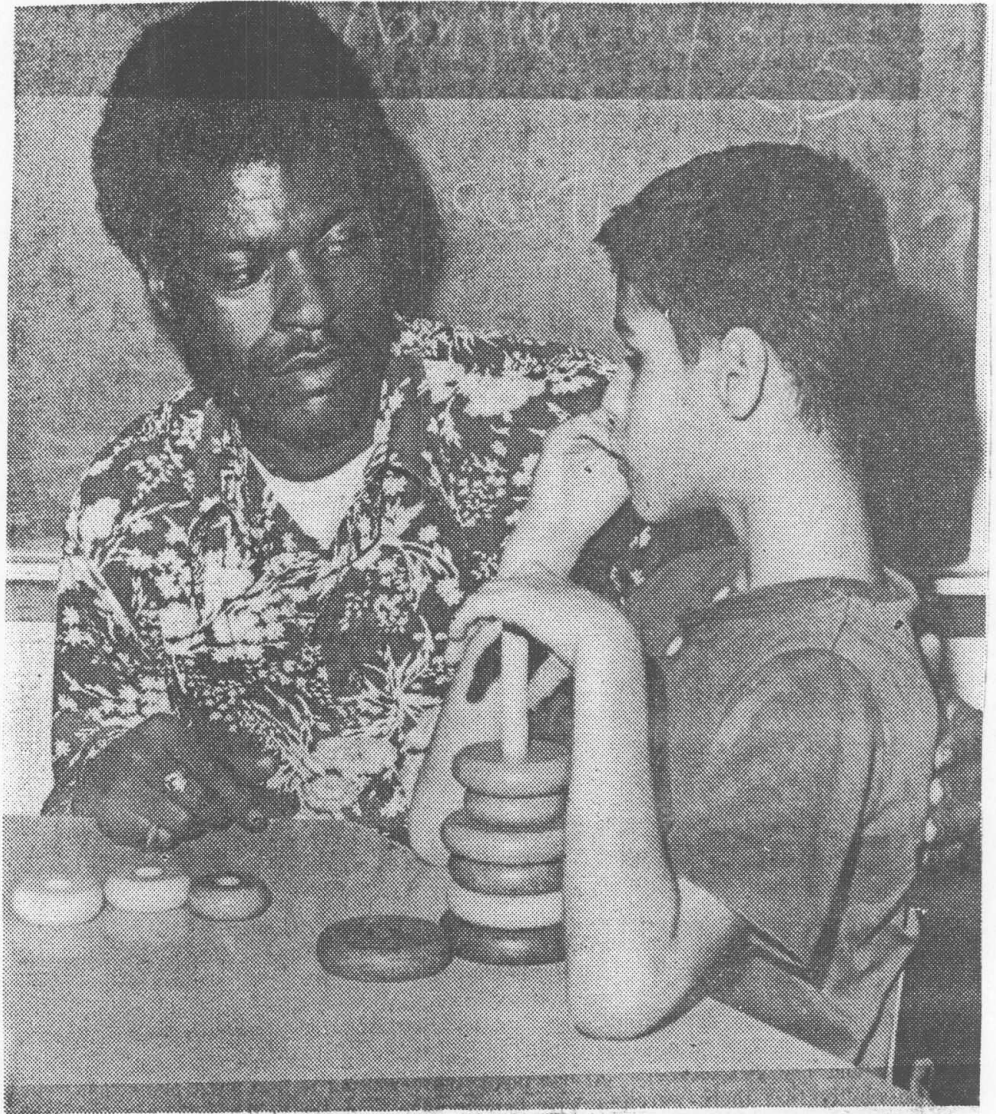
Enter Building 28 on the Willowbrook campus. Walk down a corridor cluttered with wheelchairs. Standing outside a therapy room are four aides, smiling. They are holding the hands of three profoundly retarded deaf-blind residents.

The aides are communicating

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**It's good news!**  
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with children who, not too long ago, were unserved, unloved, virtually untouched. Today these retarded children, with IQs ranging from four to 21, have a chance.

They have a chance to make



Therapeutic aide Robert Charles helps a deaf-blind Willowbrook resident improve finger dexterity.

S.I. Advance Photos by Irving Silverstein



Teacher Mrs. Linda Seaberg helps this child improve his gross motor skills by learning to climb over and under a board.

S.I. Advance Photos by Irving Silverstein

known their needs — like hunger and thirst, like pain and happiness. They have a chance to leave Willowbrook and return to the community.

"We can help make these children better human beings," says Mrs. Dolores Mason, supervisor of the federal-state funded program.

"When they just pick up a fork it can just make you so happy," says Rebecca Nicholas, a teacher who has been with the program from its outset two years ago.

In 1972, 12 multi-handicapped

children entered the program. All were 9 years old. None was mobile. Two years later, all 12 were graduated from the program. Seven are scheduled to enter community programs and will be placed with their natural or foster parents.

Two additional children were evaluated and found ready for placement, but could not be accommodated in an appropriate program. Another child has been placed in a day program. Two children did not make sufficient progress to be

placed in more advanced programs.

In effect, 10 of the 12 children made significant — if not remarkable — progress. "You can help all of them," Mrs. Mason says. That may not seem such an important statement, except that for so many years the deaf-blind retarded child was unserved.

According to Dr. Manny Sternlicht, chief clinical psychologist at Willowbrook, all of the children have increased their level of functioning, have



Aide Ann Marie Edwards has a smile and a tug of the pants for this Willowbrook youngster who needs a belt and some loving attention to keep up his trousers.

displayed fewer discipline problems and have developed limited independence.

All of the children know sign language, Dr. Sternlicht reported in an 83-page, detailed description of the training program. One child responds to seven signs; most respond to the sign for "eat" and "give me." All understand the sign for toileting.

Socially, the report said, the children all now relate to adults, and each spontaneously reacts with affection to total strangers, a fact that is obvious watching the children interact with aides Robert Charles, Ann Marie Edwards and Andre Hause and teacher Linda Seaberg.

The children were taught their skills in five-day, classroom-type situations. At 3:30 p.m. each day, however, the children were sent back to their wards.

A lack of carryover training in the wards, Dr. Sternlicht reported and Mrs. Mason agreed, was the big weakness of the program the wards tend to foster a "dependency philosophy," while the classroom supports a more independent outlook for the children.

The lack of carryover slows the progress of the children. It is a minor flaw, however, compared with having no program at all. Mrs. Mason stressed that the ward attendants have tried to cooperate, but that overcrowding in the wards make for a near-impossible situation.

Flaws aside, 12 different deaf-blind retarded children are enrolled in the program today, growing, learning and becoming "better human beings."

Willowbrook Developmental Center gave them that chance.

That, director Forde would say, is good news.