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favorite sights. She can move around at ease in her wheel chair, and though her arms and legs still flail aimlessly sometimes, Elizabeth has learned to use them to her advantage, showing a remarkable talent in communicating by gesture. And perhaps most importantly, especially to her mother for whom she once cried constantly, Elizabeth no longer recoils at the thought or act of touching.

"She is really a perfect example of what we can and need to accomplish," Stein says. "We are not looking to prove something to Willowbrook, and we're not looking at the improvements in terms of miracles. Sometimes they can be measured in feet, and sometimes only in inches. But they do happen."

The palsy residence, which operates with Medicaid money and costs approximately \$29,000 a year for each client (Willowbrook costs \$35,000), points to some hard-line data, which indicate that nearly all of the Eaton residents have improved markedly since moving away from Willowbrook.

Many of the center's clients, all diagnosed at the state institution as having some form of cerebral palsy, were discovered not to be retarded or mentally deficient at all. Elizabeth, for example, was measured to have an intelligence quotient of 16 on a standardized test administered at Willowbrook. "Our tests showed her to be in the normal bracket," insists Stein. And she certainly wasn't 'self-abusive.'"

In addition, statistics provided by UCP show more than half of the center's clients, who range in age from 21 to 50, today need only minimal or no assistance in daily living skills, compared with zero in the same category two years ago.

The program's success, heralded by both proponents and foes of institutionalization, now has led to a second precedent-setting project, larger in scope than anything like it ever attempted by a private organization.

Last March, following years of broken promises and bureaucratic delays preventing adequate care for their children, parents turned to UCP and asked the private group to take over part of Willowbrook from the state.

An agreement to do just that is in the

works, and Robert Schonhorn, executive director of UCP, says his privately-hired staff will be ready to begin operation at Willowbrook soon, taking over the treatment of 641 individuals with a host of physical and mental disorders.

"If it works," Schonhorn said recently, "it may change the nature of public institutions for good."

"We're using Nina Eaton as the model, and we think we're going to be able to show we can do a much better job than the state," Schonhorn added. "And then, I think we'll see more" private operation of formerly public facilities.

Although most mental health experts familiar with Willowbrook won't say so publicly, they confide that the major difference between a public and private Willowbrook would be the quality of the staff.

"Good treatment," contends one attorney involved in the Willowbrook case, "comes from interested and caring workers, and the state employees at Willowbrook have shown they're neither."

The workers, on the other hand, argue that budget cuts have destroyed the possibility of effective programs, and say the Department of Mental Hygiene bureaucracy is so vast that it is impossible to know what to expect, when to expect it, or whom to expect it from. Willowbrook, they charge, has been run by an administrator sitting at an Albany desk for years now, ever since the scandal about conditions there unfolded.

What seems clear is that no one — not the state administrators, the parents or the Willowbrook Review Panel members — is completely happy about the prospect of a UCP takeover of seven buildings at Willowbrook.

Jerry Gavin, a spokesman for the court-appointed review panel, charged with overseeing conditions at the state institution, admits the major concern is that "UCP has not proved it can get large numbers of retarded persons back into the community," which is seen as the way to reduce Willowbrook's population, now at 2,500 to 250 by 1981.

The Nina Eaton Center, according to Gavin, has graduated only two young women, including Elizabeth, to an independent-living or group-home environ-

ment. "That certainly isn't conclusive," he says.

Another question raised by parents is whether the private organization, which in the past has worked exclusively with a cerebral palsy population, will be able to adapt its specific mode of treatment to fit the needs of 641 persons with a variety of physical and mental disabilities.

Finally, in addition to the questions concerning 600 civil servants' role after the takeover, there remains the moral dilemma raised by the prospect of giving private groups control over governmental functions. Could that mean more of the same for the future? Or could such an eventuality lead to the state's complete abandonment of the handicapped?

Stein may offer the key to the answer, when he says that "the only regret I have is that we didn't get the (50 Willowbrook residents) when they were younger. Maybe we could have done even more."

For now, the state, in concert with the private group, has chosen what will be the UCP-run buildings at Willowbrook. And among them are the baby complex, representing the heart of Willowbrook's future.