MH MR SERVICES

# DIRECTIONS

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DEEP EAST TEXAS REGIONAL MHMR SERVICES

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## PARTIAL HOSPITALIZATION .... A PROGRAM ON THE MOVE

The Partial Hospitalization Program serving Angelina County is alive and well and on the move. The program itself has been in existence since 1976 and is now located in the Day Treatment-Central Administration building on Medford Drive in Lufkin.

The Partial Hospitalization Program is designed to serve two groups of citizens. It serves those who have long histories of emotional disturbances, who no longer need hospitalization but who do need a supervised environment. It also serves those who have never been hospitalized, yet need the structured care that partial hospitalization provides.

"Our general goals are basically simple," says Nell Newton, Unit Director for the program. "The whole philosophy of treatment is centered around fostering independence within each client."

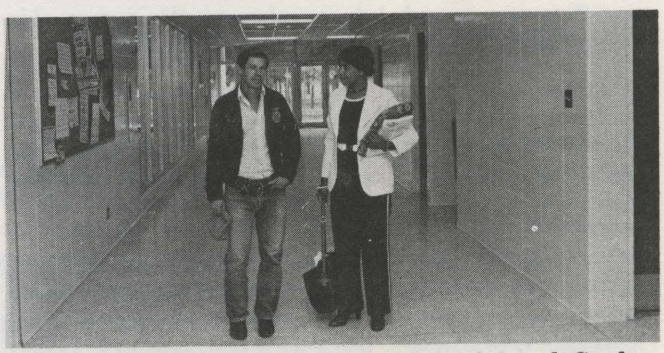
To achieve this independence, Mrs. Newton focuses on six program areas: personal and social adjustment training, work orientation, socialization groups, community field trips, job placement and adult education leading to the Graduate Equivalency Diploma. The personal and social adjustment training and work orientation classes are certified by the Texas Rehabilitation Commission. These classes are regularly conducted at the Medford Drive location.

Personal and social adjustment training consists of specific classroom instruction in social skills, designed to improve the clients current level of functioning. This instruction includes making personal budgets, studying basic nutrition and meal planning, learning about consumer issues, learning good grooming habits and studying community resources. Work orientation also consists of specific classes designed to aid the client in securing a job. These classes include: learning to complete job applications, exploring job expectations and preparing for an actual job interview. Practical work experience is made available through the Lufkin Workshop and Opportunity Center and the Nacogdoches Sheltered Workshop.

*Students and teachers participate in classroom discussion.*

The Partial Hospitalization Program continually makes use of educational opportunities available within the community and is constantly searching for new ways to involve clients in local projects.

The program has recently embarked on a joint project with Angelina College, a local educational institution. Mr. Jim Twohig, Coordinator of the Community Services Division at Angelina College, was instrumental in making services available to the Partial Hospitalization Program. Currently, classes are conducted at Angelina College twice a week. In addition to these classes, library services, film services and other educational programs are made available to the program participants.



*Field Placement student Billie Lamb [right] and Gordon Elliot going to class.*

"The regular trips to Angelina College have become a vital part of our treatment program," Mrs. Newton says. "Participation in community programs like the one at Angelina College goes along with our agency's overall philosophy of treating clients in the least restrictive environment," adds Mrs. Newton. "Besides, it seems to speed the process of re-integration into community life and allows the community the opportunity to contribute to the rehabilitation of some of its own members."

In addition to making facilities available, Angelina College supports the program by providing field placement students from the Human Services Division. Those students and other field placement students from Stephen F. Austin State University in Nacogdoches assist in leading group discussions and in supervising work training at the sheltered workshops and volunteer training at a local nursing home.

"They are in the unique position of being able to interact on a student to student basis with our clients," Nell Newton commented, "and I feel they make an outstanding contribution to our program."

The Partial Hospitalization Program allows many of its participants to take the role of a helper through the Center's volunteer services program. Participants visit a local nursing home regularly, conducting bingo games and visiting with many of the nursing home residents. Being a helper has a positive effect on self esteem and gives individuals a better perspective on their own problems.

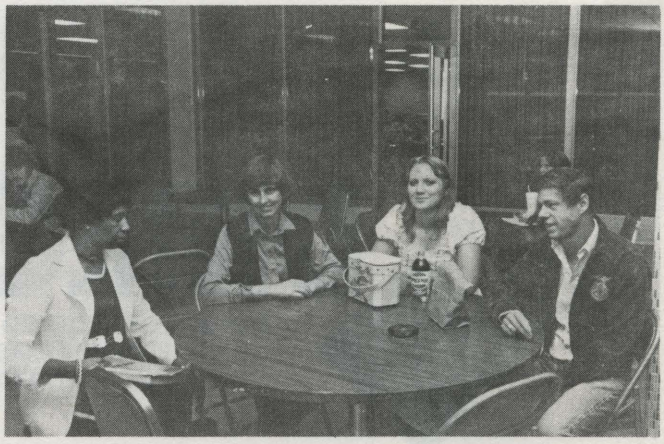
Community resources play a vital part in the Partial Hospitalization Program. Besides Angelina College, the program makes use of other agencies and resources such as the Texas Rehabilitation Commission, the Department of Human Resources, the Adult Learning Center, the Angelina County Senior Citizens Center, the Lufkin Workshop and Opportunity Center and the Kurth Memorial Library.

These agencies, in combination with Partial Hospitalization's own fine facilities, make for a very productive and useful program. The success of one recent participant is an excellent example.

Barbara Peterson was referred to the Partial Hospitalization Program by the Texas Rehabilitation Commission for personal and social adjustment training and work orientation. This was intended to supplement the nurses aide training Barbara was receiving at Angelina College.

"Barbara participated enthusiastically and took a great interest in helping others," Nell Newton remembers. "She also became quite involved in our nursing home volunteer program."

In December Barbara received a Certificate signifying her completion of this joint program with Angelina College. Now Barbara is employed as a full time nurses aide at a local hospital.



*Lunch time in the Student lounge*

Barbara is not the first person to successfully participate in the Partial Hospitalization Program. Many others have improved the quality of their lives by experiencing a significant change in self image. This change has been a direct result of the Partial Hospitalization Program, a unique program designed to encourage progress and success.

*Barbara Peterson [left] receives certificate of completion from Nell Newton*

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**CLIENTS RIGHTS**

Any client or representative of a client is invited to submit questions or complaints regarding services to the Public Responsibility Committee, P.O. Box 935 Lufkin, TX. 75901. This committee is independent and impartial. No members are employees of this center.

*Sally Navarre with friends Jesse Calhoun [left] and Judy Hayles [right].*

# EMPLOYEE OF THE QUARTER

Sally Navarre has been named Employee of the Quarter for the first quarter of FY 1982. Mrs. Navarre currently serves as the Unit Director of the Newton County Infant Training Program and is also Acting Unit Director at the Kirbyville Developmental Center. Sally worked as the Unit Director of the Kirbyville Development Center for almost seven years. Currently, she splits her time between the two units, being responsible for the general operation of both.

Mr. Larry Heaton, Director of Mental Retardation and Sally's supervisor, is quite proud of her work. "Sally is loyal to this agency and is well respected in the community," Mr. Heaton said. "She is an outstanding representative for this agency in Newton and Jasper Counties," he added.

When asked about the secret of her success, Sally will quickly place the credit elsewhere. "Obviously, I enjoy working with kids. I think you have to like it or you could not stay," Sally said. "Our relationship with the community is fantastic and that makes my job easier," she added. Sally emphasized the importance of the local groups that regularly help out by donating time and money. "The local Mental Health Association and the Mother's Club have been especially helpful," Sally commented. "Of course, there are many other volunteers that help with the kids and we appreciate them all."

There are two fine programs existing in Kirbyville and Newton, due in part to Sally Navarre's skills and dedication.

Thank you, Sally, and congratulations!

**TOLL FREE CRISIS LINE**

**1-800-392-8343**

# TEST YOUR ENERGY I.Q.

**Fill in the Blanks**

1. _____% of the energy used in the United States goes into running electrical home appliances.
2. Toasting bread in an oven as opposed to a toaster uses _____ times more energy.
3. _____% of the heat in your oven is used in cooking the food.
4. The average American uses _____ gallons of water per day.

1. 8%
2. three times
3. 50%
4. 150

# UNDERSTANDING WHAT WE DO AT DEEP EAST TEXAS MHMR

Keeping our readers in touch with what we do at Deep East Texas MHMR is a primary concern of this newsletter. Toward that end, articles written by our direct care staff will appear here on a regular basis.

This is the first in a series of articles by Nell Newton, M.Ed., Unit Director of the Angelina County Partial Hospitalization Program. This series will deal with her experiences in working with chronic mental health clients and their families.

. . . . . .

As treatment modalities for mental health problems continue to improve, treatment emphasis shifts from the hospital to the community setting. Due to the greater availability of outpatient care, many patients who would have been hospitalized not long ago may remain at home with their families. This can create a situation in which the patient and his family must make adjustments and deal with many complicated feelings. Unfortunately, many families tend to follow the line of least resistance, adjusting in a manner that causes the least disruption to their lifestyle.

Depending upon the severity of the symptoms, the patient may become the focus of attention and the family can develop a lifestyle that essentially revolves around him.

Out of love and concern, the family's natural tendency is to shield their loved one from tension and stress. They may be afraid to upset him for fear of risking a psychotic episode or hospitalization. Consequently, an artificial stress-free environment is created that shields him from decision making and dealing with stressful problems. As the patient is not consulted in matters that affect him, he may develop feelings of isolation and sense a loss of control over his life.

[*continued on page 4*]

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Wayne Lawrence, PH.D, Executive Director
Mark Severns, Editor

A product of the Consultation and Education Services Program.


## TDMHMR News

AUSTIN--Jon D. Hannum, Ph.D. has announced his resignation as deputy commissioner for community services with the Texas Department of Mental Health and Mental Retardation (TDMHMR).

The resignation submitted to TDMHMR Acting Commissioner James A. Adkins is effective January 4.

Dr. Hannum, 43, a clinical psychologist, has been the deputy commissioner for community services since 1976, supervising 30 community mental health and mental retardation centers, four state centers for human development and the Rio Grande State Center for MHMR.

He said he plans to enter the management field in private business.

Before joining TDMHMR, Dr. Hannum was associated with the Dallas County Community MHMR Center for seven years, including two years as the acting director of that facility.

AUSTIN--The new commissioner of the Texas Department of Mental Health and Mental Retardation (TDMHMR) is Gary E. Miller, M. D. He was appointed to the post by the Texas Board of MHMR at its Dec. 14 meeting.

Dr. Miller, a psychiatrist certified by the American Board of Psychiatry and Neurology, presently is the director of the New Hampshire Mental Health and Developmental Services Agency.

He is expected to assume his duties in Texas about February 22, 1982.

[*Understanding.....continued*]

As a result of this shielding process, the patient may respond by losing confidence in his own abilities. He may become afraid to exert control in a constructive manner and express this by reacting passively to control by others or exhibiting erratic acting-out behavior. Families may be willing to adjust to any behavior rather than risk confrontation and may begin to "tiptoe around" the patient and develop a set of expectations for him that differ from other family members. It may become acceptable for him to become a non-contributing member of the family who is not expected to follow family rules. This serves to reinforce the original fears of the family members and creates a cycle of continual negative reinforcement.

Thus, out of a natural love and concern for their loved one and a desire to preserve the family structure, a pattern may develop that places the patient in a passive dependent role, reinforcing his sense of helplessness. Consequently, he may become "institutionalized" within the family setting.

The family and community can begin to impact this pattern by recognizing it and understanding how it develops. Families can begin by expecting all family members to contribute in a meaningful way. Placing positive expectations on someone is a way of communicating self-worth to him. The patient needs to be supported in handling his own affairs. He will know his opinion is valued when he is consulted in matters that affect him and is included in family decisions. It is important for the patient to be treated normally and encouraged to become as productive as possible.

The community can contribute by showing support for the family through community resources. It is important for the family and the community to work together to break this cycle and aid in promoting good mental health.

The types of resources available to the family will be explored in the next article.