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An Experiential Survey of a Comprehensive Community Mental Health Program

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AN EXPERIENTIAL SURVEY OF A
COMPREHENSIVE COMMUNITY
MENTAL HEALTH PROGRAM

by

Gordon J. Dahm

A Project Report
Submitted to the
Faculty of The Graduate College
in partial fulfillment
of the
Specialist in Education Degree

Western Michigan University
Kalamazoo, Michigan
December 1975
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I wish to express my appreciation to Dr. Kenneth Engle for his valuable suggestions, encouragement and genuine concern during the completion of this project which enabled me to make it a genuine learning experience relevant to my learning needs. My sincere thanks to Mr. Robert Tollaksen and the staff members of the Riverwood Mental Health Clinic, as well as the many other community agency leaders whose unselfish contributions of time have made this invaluable internship possible.

I also feel a debt of gratitude to Dr. Robert L. Betz and Dr. Thelma Urbick who have contributed greatly to my development.

Gordon J. Dahm
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CHAPTER ONE

INTRODUCTION

General Introduction

This field experience was planned to provide a genuine learning experience in an area of the author's felt needs. As such, the primary purpose was not to conduct research, nor to contribute significantly to literature in the counseling field, but rather to provide for an organized set of learning experiences which would enrich the author's background and promote his more effective functioning in his counseling position.

Rationale for the Experience

Before accepting my present position as counselor at Lake Michigan Community College, I served as a Vocational Rehabilitation Coordinator with the Division of Rehabilitation, Michigan State Department of Education, for two years. As a former employee for Vocational Rehabilitation, I have a much better picture of the real functions of the agency; who they can best serve and who they cannot really serve, what sort of referrals are appropriate, what sort of service can be expected in regards to depth, time, and financial outlay. I know the professional staff to whom I can refer and have an idea of their working conditions as a result of my experience.
This experience has given me an appreciation of the difference in knowing a social agency superficially and in knowing it as a participant and inside observer. The purpose of this project was to enable me to gain that type of understanding of most of the agencies which make up the comprehensive community mental health service in the immediate service area of Lake Michigan College.

General Objectives

The author had felt over a long period of time that an experiential understanding of all the community mental health programs and services offered in the community would be professionally and personally beneficial in several ways:

1. To facilitate correct, accurate and less time-consuming referral.
2. To facilitate professional dialogue and consultation with other mental health professionals in the community.
3. To provide an experiential understanding of the variety of job settings within community mental health to enable the author to make a better decision regarding a possible change in vocational direction.
4. To enable the author to write a small counselor handbook describing some of the more important mental health services located in the community.

There are indications that the first three objectives are becoming increasingly important to the community college counselor.
Terry O'Banion (1971), in describing one of the "historical models" of student personnel workers, states:

One historical model of the student personnel worker is that of therapist. In this model the student personnel worker behaves as if he were a psychotherapist or a counseling psychologist. His contribution to the educational program is to provide therapy for a few selected students who have intense personal problems. He is often disdainful of other student personnel functions such as academic advising and student activities.

In this model counselors become isolated in their counseling cubicles which students eventually come to perceive as places to go only when they have serious problems. (p. 8)

In contrast, O'Banion describes the emerging model of the counselor as "counselor as catalyst," "counselor as change agent," and "counselor as student development specialist." He goes on to state:

A term that may more accurately reflect some of the special dimensions of the emerging model is that of the human development facilitator. Facilitate is an encountering verb which means to free, to make way for, to open the door to. The human development facilitator does not limit his encounter to students; instead he is interested in facilitating the development of all groups in the educational community. (p. 9)

He elaborates further:

If the student personnel program is to have a major impact on the institution, counselors certainly are going to have to move out from the comfort and isolation of the counseling center. The student personnel program must be thrust into the heart of the institution—the curriculum, the decision making processes, and the community. If the organization and administration of the student personnel program is calculated to maintain a separation program, often housed in a separate building, student personnel work is in danger of even further isolation; perhaps isolation that may lead to obsolescence. (p. 15)

As community college counseling moves in the direction in which O'Banion is pointing, there will be less counselor time devoted to
the therapy model and a greater need for correct, immediate, accurate referral. In fact, some community colleges have already moved in this direction.

While I was spending one of several days on the campus of Kalamazoo Valley Community College preparing and observing for this project, I asked College President, Dr. Dale Lake, the question, "How much counseling for personal problems is being done on campus?" He replied, "None." "Our counselors do not do any personal counseling." When I asked what they would do with a student who was failing because of emotional adjustment difficulties with his parents and home life, his reply was, "Our staff makes a referral!"

General Plan

Herbert Goldenberg (1973) defines the practice of community mental health as including programs which promote the mental health of the whole community. He places a greater emphasis upon programs for education and prevention rather than limiting the concept of community mental health to those programs which only provide treatment. The author used this broader conception of community mental health in his selection of community agencies for inclusion in this study.

In order to meet the objectives of this project as stated earlier, it was planned that the author would experientially survey many of the elements in the comprehensive community mental health program using one or several of the following techniques depending upon the setting and opportunities within that setting.

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1. Personal interview with the head or director of each agency or unit.

2. Personal interview with each mental health professional working within that setting.

3. Personal interview with each mental health paraprofessional and clerical support personnel within that setting.

4. Accompaniment of the mental health personnel while carrying out their regular duties, observing and participating to the degree possible in a particular setting.

5. Personal interview with a recipient of the mental health service being rendered.

The nature of this experiential survey demanded that enough flexibility be provided to allow for greater depth of study where the opportunity, availability and amount of student interest is present. Since the author, at the beginning of this study, was naturally not aware of where this might occur, he simply proceeded by selecting a relevant agency and then pursuing every opportunity for growth, experience and knowledge which presented itself. This pursuit was conditioned only by the objectives of the study, the realities of the nature of time and schedules, and the relative importance which the author placed upon various opportunities when the author was forced to choose between alternative experiences. In scheduling his time, the author followed the general rule of thumb that one credit hour should involve forty clock hours including readings and preparation.
Community Mental Health Agencies
Included in Internship Project

1. Community Information and Referral Service
2. Berrien County Youth Services and Assistance Bureau
3. Planned Parenthood Association of Southwestern Michigan
4. Riverwood Community Mental Health Center
5. Harbert Outpatient Clinic
6. Mental Retardation Services
7. Day Treatment Services
8. Substance Abuse Program
9. Consultation and Education Service
10. Benton Harbor Outpatient Clinic
11. Niles Outpatient Clinic
12. The Link Crisis Intervention Center
13. Alcoholics Anonymous of Southwestern Michigan
14. Parents Without Partners
15. The Samaritan Center
CHAPTER TWO

THE GROWING NEED FOR CLIENT REFERRAL IN STUDENT PERSONNEL WORK

Introduction

The gradually increasing pressure upon the author to refer students to obtain Mental Health services rather than to automatically provide those services was the basis for his felt needs which led to the selection of this project. The completion of the project will certainly facilitate intelligent referral. A review of the selected literature provides some answers to the "why" of increased use of the referral process for the college counselor.

Review of Selected Literature

It is characteristic of American education that each school system enjoys a certain degree of local autonomy, a provision which allows for the development of a program which is especially well-suited to the needs of a particular community. During the last several decades, counseling programs have been developed in virtually every school system. The nature of these programs and the methods by which they are carried out in part reflects the concerns of the populace being served, and in part the larger environment to which this group relates.

It is understandable that there is more than one opinion among counselor educators, counseling professionals, college
officials and school critics over the way in which students should be served by counselors. The understandable difference of opinion produced by natural differences between particular communities has recently become complicated by rapid changes in the concerns of the populace being served and in the larger environment to which this group relates. Clark Kerr (1974) has noted some major changes in the nature of the student population, and in social conditions which is having a major impact upon higher education. The studies he quotes predict that enrollment increases among traditional students will slow down in the 1970's and will turn into decreases in the 1980's. Public support for education will continue to be below historical levels. Since total enrollments of traditional students will drop by about one million by 1990, many institutions will be faced with reducing expenses leading to reductions in staff and services. It is reasonable to predict that these forces will create pressures upon counseling centers to provide more services for more students with less money. These new demands will require some major changes for many counseling centers.

Even without the extreme pressure placed upon higher education by rising costs and decreasing support it is likely that pressures for change would have come from still another source. The disruptions of the 1960's have sensitized educators to the necessity to attend to affective as well as cognitive factors in the lives of students. The major efforts by educational institutions to inject personalization into the educational process have been through provision of
counseling services. However, Tollefson (1975) asserts that "colleges and universities are never going to provide enough formally trained counselors and psychologists to serve the needs of a major proportion of students, especially if the knowledge and skills of those individuals are used in the time-consuming therapy model which has been the standard pattern for at least three decades" (p. 58).

Tollefson is suggesting that the student needs which are the basis for institutions valuing counseling services cannot possibly be met by the traditional approach. Tollefson suggests an alternative: "Counselors should be used to make the entire educational system more effective rather than devoting their time directly to rehabilitative and remedial efforts" (p. 59).

Warnath and Associates (1973) are even more emphatic. "The college counselor must change his service orientation or he will no longer have a place on campus. Some counseling centers are literally fighting for existance. Some have already lost their fight and been dismantled or their staff scattered to other departments" (p. 1). Warnath points out that the clients have changed. Women, adults, minority groups, new students with different orientations now make up a significant proportion of the student population. He argues that the traditional approach is rejected by this new group of students.

Financial pressures and demands for accountability are forcing college administrations to retain only those services which fit clearly into the goals, purposes and the image of the institution.
Counselors following the medical model serving only a limited number of serious cases are likely to be discarded first as being more expendable than those services which are more integrated with the central purposes of the institution.

Brown (1972) reinforces this general theme for college student personnel workers in general and suggests, "The counselor role is the last touchstone and it, too, is being questioned in terms of its effectiveness with individual students and its impact on student life in terms of sheer numbers" (p. 37). He states, "Even the best staffed counseling centers see only a very limited percentage of students on campus and, in most instances, students go to counseling centers with academic problems and minor crises rather than personal-emotional problems" (p. 37). Brown's prescription for survival is an increasingly familiar one: "The student personnel profession must not fail to make its purposes and functions meaningful and operational in a variety of settings, with a variety of students, and to all students on a particular campus" (p. 36). He suggests some alternative roles for the student personnel worker of Diagnostician, Consultant, Programmer, College Professor, Administrator, Behavior Scientist, Researcher, and Unemployment. It is the last alternative role listed which most college counselors appear to be struggling to avoid and provides much of the motivation for change.

As college counselors do change in their orientation and provide less in-depth therapy to a select group of students, it becomes increasingly important that they be more aware of mental
health agencies available in the community which might provide services to this particular group of students so that appropriate referral can be made.
CHAPTER THREE

LOG OF EXPERIENCES

Introduction

This log of experiences restricts itself to those internship aspects which were more experiential in nature and does not include preparation, study, research, data collection, and readings which were also a valuable part of the total project.

Time Periods

January 5, 1974 - August 28, 1974

Originally, the author had conceived the scope of this project to be much broader. In retrospect, the original plan now appears to the author to have been quite unrealistic and perhaps grandiose. After several frustrating attempts which proved to the author that the limitations of time and money would preclude success, Dr. Engle was very helpful in assisting the author to develop and plan a modification of the project which could realistically be carried through to fruition. I mention this effort in the log since it did represent much time, effort and learning as a part of this internship experience which otherwise would go unmentioned.
September 2, 1975 - October 2, 1975

During this period, I made arrangements with my advisor, Dr. Engle, and my supervisor, Mr. Tollaksen, regarding specific details of the nature, purpose and scope of the project. I made interview appointments and began to collect information about specific agencies.

October 3, 1975 Morning

Mr. Robert Tollaksen, social worker at the Riverwood Mental Health Center who had agreed to act as my supervisor during this project, led me on a brief tour of the clinic facilities. Mr. Tollaksen has gone out of his way to make me feel welcome. He informed me that he had used a letter of introduction which I had supplied to him earlier (Appendix A) to formulate a memo about my project to all the other staff members.

October 3, 1975 Afternoon

One of the main objectives of my internship is to become more familiar with the services of many different social agencies in the local area. I believed that the best way to approach this task was by starting with the Community Information and Referral Service. I began this undertaking today by interviewing Mrs. Jane Anderson, the Administrative Assistant. She was very receptive to my inquiries and although the nature of her position required that she could only talk with me when she was not occupied on the telephone, I found the
afternoon to be very informative and worthwhile. I was very impressed by the worth of this service and its value to the community. I had to rather ashamedly confess that although I have been an active counselor during the five years that this service has been established, I had never personally used the service or referred anyone else to it. I wondered how many of my referrals might have been improved through the use of this service and resolved to make use of it in the future. Mrs. Anderson invited me to return to study her agency records, meet Mr. Miller, the Director, and her co-worker, Mrs. Vanderbeck.

October 8, 1975 Morning

This morning I spent three hours reviewing all the case records of the Community Information and Referral Service for the entire year of 1974. For each telephone call or walk-in request, a rather complete one page form is completed. I found that by reading each form, I developed a real feel for the types of requests the agency received and the disposition of each one. It was interesting to note that during the entire year, only one school counselor utilized the service. Since I am the past president of the Berrien-Cass Counselor Association, I made a mental note to include a special recommendation of this service in the next newsletter.
October 8, 1975 Afternoon

This afternoon I spent some time familiarizing myself with the Berrien County Youth Service and Assistance Bureau. While I was there, one of the case workers mentioned that Planned Parenthood of Southwestern Michigan was running a film festival in its office as part of National Family Sex Education Week from 4:00 p.m. to 10:00 p.m. I made arrangements to attend since Planned Parenthood was one of the agencies I had planned to study.

October 8, 1975 Evening

I attended the film showings from 4:00 p.m. until 10:00 p.m. All of the films shown were from the agency's library which loans films to individuals, groups and schools. I was one of only seven or eight persons who attended and I used the time between films to meet and talk with two staff members, Mrs. Gretchen Schalm and Mrs. Justine Wisler who also gave me a tour of their office facilities. Films which I viewed were: "I'm Seventeen," 28 minutes, "Growing Up Together" Part 1 and Part 2, 28 minutes each, "Too Soon Blues" 24 minutes, "The Day Before Tomorrow" 28 minutes, "Menstruation" 20 minutes, "About Sex" 23 minutes, "When Love Needs Care" 13 minutes, "A Matter of Choice" 20 minutes, and "Vasectomy" 17 minutes.

This was the first time I had been in the building or viewed these films and I found the experience to be very rewarding. I was able to judge the value and suitability of the films for future use.
and referral. I left at 10:00 p.m. feeling eager to learn more about the services of this agency.

October 9, 1975 Morning

This morning I conducted an interview with Mr. Robert L. Crounse, Director, Berrien County Youth Service and Assistance Bureau. I found him to be extremely helpful and he spent more than two hours talking with me during which time he supplied me with textbooks, statistical reports, survey and planning study reports, and pamphlets. Since yesterday afternoon was the first occasion I had ever been in the office, I think it is going to take me awhile to digest all this material. This agency is a division of the Berrien County Probate Court and offers services to youths ages six through eighteen with the prime target being any youths who have had a first encounter with law enforcement. They have a staff of eight counselors and Mr. Crounse invited me to arrange to spend some time with each one of them during the next several weeks.

October 9, 1975 Afternoon

This afternoon I drove to Kalamazoo to talk with Dr. William Martinson, Chairman of the Department of Counseling and Personnel at Western Michigan University, regarding my program of study. Although I have been attending classes in the department since 1966, this was the first occasion I had to talk with Dr. Martinson. He was very warm and showed genuine concern for me and my work. He
made several constructive suggestions which I believe will be helpful to me in the future.

October 10, 1975

I spent today at the office of the Information and Referral Service. The major portion of my time was devoted to studying the resource files which they maintain to assist them in making referrals. Much of the material in the files starts with the most recent information and then goes back four or five years. Although this may reflect a need for updating of the files, it was very educational for me to trace the developments which have occurred in many of the agencies over the last five years.

I also had the opportunity to interview Mr. James Miller, Director of the agency. He started in his present position last May and believes that he still has a lot to learn. Since the agency is funded almost completely by the Blossomland United Way and falls under their direct supervision, he is spending most of his time assisting with the current campaign. After the campaign is over he hopes to become more familiar with the community agencies as I am presently doing as part of this project.

October 15, 1975 Morning

I spent this morning in the office of the Information and Referral Service. Both Mrs. Jane Anderson and Mr. James Miller are beginning to treat me like an old acquaintance. Their response is
encouraging and should help me in the future when I utilize the
services of this agency. I studied the files of the agencies which
I plan to visit and telephoned to arrange for personal interviews
with various agency personnel.

The contrast in the reception I am getting from various
agencies is striking. Some persons are almost impossible to reach.
Others only make their own appointments, still others are either on
their day off, out in the field, attending a conference, will not
be in until next week or otherwise unable to make a firm appointment
to see me.

October 15, 1975  Afternoon

I spent this afternoon with Ms. Donna Sickels, volunteer
coordinator for the Youth Services Bureau. Ms. Sickels initiated
the Volunteer Program in September of 1974 and has built it into the
functioning program which exists today. Ms. Sickels received her
B.A. degree in Psychology and since she was unable to find
immediate employment, she served as a volunteer with the court
system in Detroit before obtaining her present position. She out­
lined how she began the program, relating her failures as well as her
successes. She showed me the elements in her present program, in­
cluding the nature of the training session for new volunteers, the
inservice training sessions for current volunteers, the film strips
and movies which she uses to interest volunteers, and the methods she
uses to match volunteers with clients of the Youth Service Bureau.
I found the case histories of the clients who were matched with volunteers to be very informative and interesting. I believe that I have developed an understanding of the special kind of skills required to coordinate a volunteer service.

October 15, 1975  Evening

I have referred many persons to Parents Without Partners, Inc., but I had not become personally familiar with the organization. Tonight I attended the monthly meeting of the Twin City chapter. It is held in a large meeting room of the St. Joseph YWCA. When I entered the room shortly before 8:00 p.m., I was greeted at the door and asked to sign the guest sheet, fill out a guest name tag and make a donation of fifty cents. When the meeting started, every person in turn was asked to stand up and introduce themselves. I noted that there were twenty-nine persons present, eight men and twenty-one women. The lady seated next to me explained that there were over one hundred members, many of them my age, but that there was a very poor showing tonight. There were many business matters regarding a host of social events and activities to be decided upon. After these matters were dealt with, a speaker from the Sarret Nature Center showed films illustrating the educational services of the center available to families and children. When he concluded at about 10:15 p.m., all prospective members were invited to stay for about five minutes to ask any questions they might have. I found the atmosphere to be very friendly, supportive and social in nature. Although the organization is devoted to the welfare of children of single parents, I
received the distinct impression that many of the activities center on meeting the social needs of the parents.

October 17, 1975  Morning

This morning I met with Mr. Robert Tollaksen, Head of the Consultation and Educational Services of the Riverwood Community Mental Health Center. Mr. Tollaksen is serving as the supervisor of my project and we reviewed my progress to date. I am discovering that Mr. Tollaksen is an extremely active person and that the mention of his name does wonders when I am making appointments to interview Mental Health Agency personnel. He made several suggestions as to future avenues of inquiry and also spent some time orientating me to the organization of the Riverwood Community Mental Health Center.

October 17, 1975  Afternoon

I spent this afternoon with Miss Kelly Kellog who is the Educational Consultant of the Community Outreach Division of the Substance Abuse Services. After taking some time to decide whether it was worth her effort to spend some time with me, she launched into a three hour presentation of all the services of the Community Outreach Program and the Help Line program including a tour of both facilities. The only break in this conversation came when she had to spend about 20 minutes on the telephone with an anonymous caller who had many questions about a drug his wife was addicted to. I found it very interesting to observe her technique in handling this question.
I know that it is going to take me awhile to integrate all the information I received this afternoon.

October 22, 1975

Today I visited the Benton Harbor location of the Samaritan Center and interviewed Rev. Paul Kuntzman, Assistant Pastor of the First Congregational Church and Ms. Barbara Henderson, Chief Administrator of the Samaritan Center. Until today, I knew very little about the Samaritan Center and its operation.

The purpose of the Samaritan Center is to help people under stress through the provision of counseling services. The center was founded in February, 1974, by the Special Programs Committee of the Benton Harbor Congregational Church, where it is presently housed.

I was very interested to learn as much as I could about the center because one of the main objectives of this project was to discover and explore more alternative services to which I might refer clients. Rev. Kuntzman gave me a very complete picture of the founding and original implementation of the center. Mrs. Henderson spent most of the afternoon providing me with all the details of the administration of the center.

Since the four counselors who comprise the professional staff work only on a part-time basis in addition to the full-time positions which they hold, I anticipate some difficulty in arranging to talk with each one of them. Consequently, I interviewed Mrs. Henderson in some depth. Mrs. Henderson admitted that if Mr. Robert Tollaksen,
my supervisor on this project, had not recommended me to her, she would be far less candid in her answers to my questions. I am becoming sensitive to the fact that most of the services I am studying have been subject to criticism from various sources and as a result, the staff often are very defensive and almost secretive about divulging information. I believe that today's effort was extremely valuable to me.

October 23 and 24, 1975

I spent yesterday and today in a variety of activities with Mr. Robert Tollaksen, Director of Consultation and Education Services at Riverwood Community Mental Health Center. He addressed the registrants of a two day Parent Advocacy Training Workshop on both days. The topics of his talks were Problem Solving and Values Clarification. While accompanying Mr. Tollaksen, hearing him speak and meeting some of the other speakers, I was able to gain a real insight into the multifaceted nature of his role with the Riverwood Center. I also met and talked with one of his paraprofessional staff members, Mrs. Neldine Watson. Mr. Tollaksen spent several hours with me talking exclusively about his position with Riverwood and provided me with many materials which will probably take me several days to digest and develop the overall picture of Riverwood Community Mental Health Center.
October 29, 1975 Morning

This morning I attempted to keep an appointment with Mrs. Sosey, Executive Director of the Planned Parenthood Association of Southwestern Michigan which I had made several weeks ago. Since attending the open house, I have been very eager to learn more about the services which they offer. When I had initially tried to make an appointment, I was put off in a variety of ways. When I persisted, I was given an appointment for this morning. At that time I suggested that I would be willing to make arrangements to talk with various staff members as an alternative but was informed that they would not speak with me and that I must interview with Mrs. Sosey. This morning I was informed that she was too busy and was given an appointment for tomorrow at 9:00 a.m. I am describing these events in the log since they represent a fairly typical experience which I have had with some agencies during this project. These problems are easily overcome with persistence, but do suggest a reason why school counselors in general are not very familiar with many of these community agencies. There is just enough resistance to overcome which makes it probable that the average school counselor will never quite get around to establishing closer relationships with these agencies.

October 29, 1975 Afternoon

I spent this afternoon at the Link Crisis Intervention Center in St. Joseph. The director, Mr. Richard Freer was not free to
spend much time with me so he provided me with copies of annual reports, evaluation reports, and descriptive information to read while I observed the general activity at the center from the vantage point of the recreation room. The agency provides temporary food and shelter for runaways age twelve to sixteen years of age and immediate crisis counseling to those youths twenty-four hours a day. The center is housed in a pleasant, two story brick building located in a good residential neighborhood in St. Joseph. I spoke casually with several of the youth who were staying at the center. It was a pleasant day and they were dividing their time between reading, watching television, sitting outside and circulating around the building. I felt reluctant to talk with any of them in depth at this point but found Ms. Pat Crow, a house supervisor, to be an interesting source of information about the day to day operation of the center. I spent a good deal of time studying the materials and made arrangements to return tomorrow.

October 30, 1975 Morning

This morning I kept my 9:00 a.m. appointment with Mrs. Sosey, Executive Director of the Planned Parenthood Association of Southwestern Michigan. I was met by her secretary and referred to her bookkeeper. I was informed that Mrs. Sosey would probably not be in until much later but that I was welcome to wait. I suggested that I would like to talk with each one of them as they did not appear to be busy. I was told that I could not speak with them until
I had talked with Mrs. Sosey. I chose not to wait for Mrs. Sosey, but resolved to persist in my attempt to see her especially as my curiosity about this agency has been aroused by this strange run-around I have been getting.

October 30, 1975  Afternoon

I spent this afternoon with Mr. Richard Freer, Director of the Link Crisis Intervention Center. I was very favorably impressed by him and the program he is responsible for developing. The center has been in operation since August 27, 1973. Its goal is to provide aid to runaways and their families in their time of crisis and to divert runaways from the judicial process.

Mr. Freer was occasionally interrupted by staff concerns, client requests, and telephone calls and it was educational for me to observe the nature and disposition of these matters. This work setting appears to be stimulating and interesting to me.

Mr. Freer stressed that runaways in themselves are not viewed as bad, but in most cases are a sign of good mental health on the part of the youth who is taking action to deal with a stressful situation. The center then tries to insure that the runaway develops into a positive resolution of the problem rather than many of the problematic situations which could evolve from the runaway.

It is worth noting that it has been Mr. Freer's experience that young people and their families are reluctant to accept a mental health referral because of the stigma which is still attached to seeking help from a mental health center. He believes that young
people in particular seem to reject the concept of psychotherapy
and the medical model employed by many mental health centers.

October 31, 1975

I spent today with Mr. Bud Shuler, Counselor for the Youth Service and Assistance Bureau. He and one other counselor, Ms. Kathy Salbenblatt, are responsible for the entire southern part of the county including Niles, Buchanan, and New Buffalo. Their responsibilities demand a great deal of traveling around the county which is necessary, but very time consuming. Although his official title is Counselor, it soon became apparent to me that he actually functioned similarly to an enlightened Juvenile Officer or case-worker. The majority of his referrals appear to come from the liaison person in each school, others come from the police or through the courts. A majority of the problems are school related with a number of truancy, curfew, and runaway problems as well. The usual approach includes contacting the youth involved to discuss the problem, contacting the parents to make recommendations, follow up during a period of about three months and reporting back to referral source with a report of accomplishments and recommendations for the future. Since the funding for the agency comes from a combination of local, state, and federal money, a very complete set of records is kept which facilitated my study but represents a major task to Mr. Shuler. I spent a part of the day reading through records and other reference materials which were very useful in helping me gain insight into the total service rendered.
November 3, 1975  Morning

I spent this morning at the Riverwood Outpatient Clinic in Benton Harbor with Mrs. Lilly Curry, Mental Health Technician. The clinic is housed in a renovated church building near the center of what was designated to be a Model Cities area. Mrs. Curry was called out on an emergency call shortly after I arrived but I found the receptionist, Ms. Deborah Gilespie to be a valuable source of information while I waited. Mrs. Curry described her position, her duties, allowed me to see the record keeping procedures and gave me a valuable insight into the type of service the clinic was providing. She also led me on a tour of the building and described the variety of programs which were carried on there. Since the clinic and its services were completely new to me, I found this morning to be very rewarding.

November 3, 1975  Afternoon

This afternoon I drove to Niles to meet with the Director and staff of the Riverwood Mental Health Outpatient Clinic located there. It took awhile to find the clinic since the published address led me to a vacant area near a newly completed street routing project. After inquiring at the Chamber of Commerce, I learned that the location had been changed over a year ago.

I spent the remainder of the afternoon with Mr. Thomas Glass, Director of Outpatient Services in the south county area. He gave me a short tour of the building and introduced me to other staff members.
who were available. It was interesting to see how recent changes in the laws guaranteeing individual rights had demanded changes in approach to the treatment of the mentally ill. Every patient must be advised of their rights, and have signed a form in their record attesting to this. The law requires the preparation and current updating of a complete record of a person's condition and treatments. Other legal changes have made it virtually mandatory that all clients are seen only on a voluntary basis, and no clients can be required to keep appointments under threat of the law. Mr. Glass stated he did not encourage direct referral from other agencies or really want any records from another agency except in unusual cases. He stated that a person should be instructed how to self-refer and whether or not he followed through should be left up to him. Mr. Glass believes that the pendulum has swung very far in the direction of protecting the client's rights, but that public opinion will eventually force it to swing back. Mr. Glass was very helpful in describing typical cases, how they usually progressed, group rap sessions which were being developed, and providing me with new insights into the current practice of mental health services as contrasted to only a few years ago.

November 3, 1975  Evening

This evening I attended the Riverwood Family Workshop which is conducted every Monday night, 7:30 to 9:00 p.m., by Mr. Robert Tollaksen. Since I have already had a great deal of experience in leading groups, I had requested that I be treated as a client and not as a co-therapist so that I could better observe and experience
the group from the client's perspective. When I arrived, Mr. Tollaksen
handed me an information sheet and a short questionnaire to be filled
out. The group is described as a place where family stresses and the
options to resolve them are explored. The group consisted of Mr.
Tollaksen, a young couple, two young women, myself, a middle-aged man,
a twenty year old girl, and a middle-aged couple with a nine year old
daughter.

The young couple volunteered that they needed help because the
boy's Jewish parents were insisting that they no longer see each
other. They received the focus of attention for a while until the
twenty year old girl caused the attention of the group to swing to
her situation. She had just been dropped by her boyfriend whom she
still wanted, but now was filled with uncontrollable rage toward
him, men in general, and herself. This was complicated by the fact
that about a year ago she had been raped by a previous boyfriend.
The group and Mr. Tollaksen responded by exploring some alternative
means of releasing this anger. Then Mr. Tollaksen suggested that the
group move to the gym where there was a punching bag. Here, he
encouraged the girl to release that anger against the bag. It was
dramatic to watch her start while feeling hesitant and self-conscious
and then really get down to some basic feelings while releasing
torrent after torrent of anger through her physical and verbal behavior.
When her anger had been released and she was feeling some emotional
tears, Mr. Tollaksen held her, made a few suggestions for seeking
further help and the group disbanded since it was after 9:00 p.m.
November 4, 1975   Morning

This morning I spent some time with Mr. Tollaksen discussing his group approach and other questions regarding the group. He has conducted the family workshop on a weekly basis since September of 1970. Since that time, he has had a variety of co-therapists who meet fairly regularly with him and who are able to conduct the group in his absence. People are referred to the group by other staff members at Riverwood, previous group members, and other community agencies. The group provides an opportunity for people to begin therapy while waiting to begin individual therapy or to join some other group. There is no charge for the first session and it is $2.00 per family thereafter. However, no records are kept and no bills are sent so it becomes a voluntary matter whether anyone wishes to pay. The goal of the workshop is to make family members aware of who is doing what and how, and to help them develop understanding and techniques which will allow them to cope with their situation.

I confronted Mr. Tollaksen with a lot of questions regarding why he chose certain techniques last night, what he was thinking at various times during the group, what his impressions were at various times as compared to mine, when he was feeling good about the group process and when he was not. I found his candor and willingness to share these thoughts with me to be a valuable learning experience for me this morning.
November 5, 1975 Afternoon

This afternoon I spent with Ms. Mary McLean, Clinical Social Worker in the Harbert Outpatient Clinic of the Riverwood Mental Health Service. She had reserved an hour for me, but since her three and four o'clock appointments had cancelled, she was free for the afternoon. As it turned out, I did not leave until after six o'clock. Ms. Mary McLean is a very experienced social worker with over twenty-five years of experience and was in the mood to talk a great deal about her past and present employment. She led me on a brief tour of the building, shared how it had been acquired, described the operation of the center, the duties of other workers, the types of clients she worked with, the procedures involved, her own therapy approach, and recent certification requirements. She provided me with a great deal of written information and displayed a genuine interest in me and my duties at Lake Michigan College. I found this afternoon to be very rewarding and I hope to find the opportunity to renew our acquaintance in the future.

November 6, 1975 Afternoon

I spent most of this afternoon with Mrs. Dorothy L. Sosey, Executive Director of the Planned Parenthood Association. After she understood who I was and what I represented, she was very apologetic about the treatment I had been receiving at the center. Apparently, she had gotten the notion that I represented some investigative body who would create problems for the agency. She
explained that the agency was currently embroiled in a controversy with the local poverty program over who was to receive certain federal funding, the outcome of which had grave implications for their continued existence. The rest of the afternoon was very profitable since she went to the other extreme to help me understand all the programs, services and opportunities which the agency offered. She displayed a genuine interest in my project and asked me to include her in the future mailings of the Berrien-Cass County Counselor's Newsletter.

November 8, 1975 Evening

This evening I attended a meeting of Alcoholics Anonymous of Southwestern Michigan. I had already contacted several leaders in the organization and collected a great deal of information, but I wished to experience the group in the way that a potential member might experience it.

This evening's experience marks the end of my internship project. As I was driving to attend the meeting, I wondered if the anxiety and apprehension I was feeling was the cause of my putting off this part of the project until the very end. My apprehension was really unfounded. When I entered the building shortly before 8:00 p.m., I was greeted by the sight of about ninety persons in the building. In one corner was a pool table, in another was a pin ball machine. Coffee was available for ten cents at one end of the room. Men, women and children were seated around long tables in a very informal atmosphere.
with the children moving around the room quite freely. The content of the meeting for tonight was a panel of five members led by a moderator who arranged to have each panel member share what each of the twelve steps of A.A. meant to him. A great deal of emphasis was placed upon relating personal experiences.

Near the end of the meeting, a collection was taken and then all present stood up to recite the "Lord's Prayer." After the meeting almost everyone stayed for a Bingo game. During this time I was approached by a member who had identified me as a stranger. He greeted me and asked if I had any questions. I spent about a half hour with him satisfying my curiosity about many aspects of the conduct of the organization. As I was preparing to leave he asked if I would be interested in coming again. When I explained why I was there, he gave me a knowing look, and suggested that regardless of why I had come this time I would be welcome to return in the future.

I left with some very positive feelings about this organization. I have learned a great deal this evening and will be able to refer persons in a much more knowledgeable fashion in the future.

Conclusions and Recommendations

I have spent a minimum of three days per week for the past ten weeks devoted to the completion of this project. The narrative in the log only details those days when I was able to arrange a complete morning or afternoon experience which lent itself to a log description. For reasons of brevity, readability, and practicality, I did not
relate all the experiences and time spent arranging for appointments, talking briefly with various professionals, traveling, or many of the half hour or one hour interviews which I conducted but did not lead into an experience worth relating. These experiences, when added up as I am looking back upon them, do represent a challenging portion of my total learning experience.

My experience in this internship has demonstrated that there is a need for greater communication, sharing, and openness among mental health professionals in this community. My feeling of isolation from other community agencies which led to the design of this project is not unique. I discovered that many mental health professionals in the same agency were not familiar with the activities of a colleague. Similarly, I have become aware that the mental health agencies do a very poor job of informing the community at large of their services through the media. The lack of written pamphlets, brochures, job descriptions, or delineation of roles and functions was surprising. I believe that there is a fear among many mental health professionals of letting anyone find out what they really do! I believe that the mental health agencies must begin to make far greater use of all available media to inform and educate the community of the services which are available.

Although my survey did not intend to encompass every mental health service in the community, I learned that all the basic elements of a comprehensive community mental health program do exist in our community. However, there is a need for a greater emphasis upon programs for
education and prevention to promote the mental health of the whole community.

I believe that I have succeeded in accomplishing the objectives of the internship and as a result, I am much more knowledgeable about the mental health programs, much more able and willing to refer students, and more self-confident about continuing dialogue and consultation with other mental health professionals in the future.
APPENDIX A

LETTER OF INTRODUCTION

Hi!

My name is Gordon Dahm and during the next several weeks I hope to have the opportunity of meeting and talking with each one of you. I have met some of you during the past several years, but let me introduce myself now.

I have served as a counselor at Lake Michigan College for the past seven years. Prior to that time, I worked as a Vocational Rehabilitation Coordinator with DVR for two years in the Benton Harbor Office. I am 31 years old, married, have an eight year old daughter, reside in St. Joseph, and I am an avid recreational sailor.

Presently, I am completing the requirements for a Specialist Degree in Education at Western Michigan University which includes a Specialist Project. I hope to use this project as a method for gaining a clearer understanding of most of the community mental health services in the local area. The purpose of this project is to facilitate a closer working relationship, more effective referral, more professional dialog and consultation between myself and other mental health professionals in the community.

I realize that you have busy schedules and limited time so I will be grateful for whatever time you may be able to give to me when I will be visiting you.

Mr. Robert Tollaksen has graciously consented to take a little extra time to supervise me in this project.

Sincerely,

Gordon J. Dahm
This booklet was developed out of a survey which I conducted as a part of a graduate project I was engaged in at Western Michigan University. Any errors or misinformation contained in this handbook are my own. The information listed in this booklet represents my best attempt at accuracy within the limitations of time and energy. It should not be regarded as a complete listing of services, rather, it includes only those with which I chose to become familiar.

If I were to attempt to produce an error-free and comprehensive handbook, the magnitude of the task would preclude my attempting it. Instead, the following information is being shared with you in the hope that it will aid you as it has helped me to refer and seek assistance for students. I am hopeful that this handbook may serve as a working draft from which a more complete, revised and updated version may be produced each year, much the same as the current BCCA School Counselor Directory has evolved over the years.

Again, my sincere apologies to any agency or individual whom I may have inadvertently omitted or misrepresented.

Gordon J. Dahm
December 1975
Community Information and Referral Service

Address

305 Lake Boulevard, St. Joseph, Michigan, 49085

Telephone

983-3511

Hours

Monday through Friday, 8:30 a.m. to 5:00 p.m.

Services

This service is set up to provide you with assistance in finding the right agency to help solve your human service need. It is a confidential service providing information to the caller about a variety of social services.

Director

Mr. James Miller

Staff

Mrs. Jane Anderson
Monday, 8:30 to 5:00
Wednesday, 8:30 to 12:00
Friday, 8:30 to 5:00

Mrs. Vanderbeck
Tuesday, 8:30 to 5:00
Wednesday, 12:00 to 5:00
Thursday, 8:30 to 5:00

Comments

This very useful service is funded by the Michigan Heart Fund and the United Fund. It operates with two offices, a telephone and several file cabinets.

A file of current information on public and private agencies, organizations, and individuals providing services of health, education, social service, public assistance, and recreation is maintained and utilized to provide answers to your questions. No follow-up services or questions are conducted.
In my opinion, a counselor thinking about making any kind of referral should first make a quick call to this agency to verify and confirm the services available to a particular problem situation.

Parents Without Partners
Twin Cities Chapter 151

Address
YWCA, St. Joseph, Michigan, 49085

Eligibility for Membership
1. A member must be a single parent by reason of death, divorce, separation, or being unmarried.
2. One professional reference is required for membership.
3. Dues are fifteen dollars per year which includes YWCA membership, subscription to the Single Parent magazine, and the chapter newsletter.

How to Join the Organization
1. Call the President, Don Plyman, 695-6406
or
2. Attend the monthly meeting held at the St. Joseph YWCA on the 3rd Wednesday of the month at 8:00 p.m.

History of the Organization
It is an international nonprofit, nonsectarian educational organization devoted to the welfare and interests of single parents and their children. It was incorporated in the State of New York in 1958 and now has chapters in every state of the Union, in Canada, and in Australia. Its program and activities are entirely the volunteer work of its members.

Chapter Advisory Board
Dr. Frederick Bell - psychologist - Riverwood Mental Health Center
Attorney Joseph Chabot - St. Joseph
Rev. William Pearson - St. Marks Lutheran Church
Purpose of the Organization

The preamble to the constitution states, "as conscientious single parents, it is our primary endeavor to bring our children to health, maturity, with the full sense of being loved and accepted as persons, and with the same prospects for normal adulthood as children who mature with their two parents together."

Types of Activities

Family swimming activities, TGIF meetings, a tours series, dance class for adults and teens, family hayrides, sports and cookout activities, personal growth group series, youth rap sessions, bridge and house parties, adult theater group, discussion series, etc.

Comments

There are currently over 100 members and a balance of over $800 in the treasury. An average of forty members attend the monthly meetings with the rest of the membership keeping closely in touch through the newsletter and social activities. Many of the activities are designed to help a member to socialize and participate in family activities in an economical fashion while also providing moral support for the special problems of being a single parent.

The Samaritan Center

Two Locations

First Congregational Church
Pipestone at Bellview
Benton Harbor, Michigan

Stevensville United Methodist Church
5506 Ridge Road
Stevensville, Michigan

Center Telephone

925-0697

Purpose

The purpose of the Samaritan Center is to provide counseling for people who have stress caused by marriage, family, identity, grief, single parenthood, adolescence, and personal crisis. It is a non-profit organization whose principal unique value is that it offers counseling services to those who feel comfortable in a church setting.
Although it is an ecumenical program, in situations where the individual views part of his problem as theological, the therapist will work within the context of the individual’s beliefs.

History

The Center was founded in February, 1974, by the Special Programs Committee of the Benton Harbor Congregational Church, which has provided the financial support for the program. The churches where the counseling is conducted are donating the use of their facilities to the Center. In order to provide quality services at a low cost, the Center is staffed completely by part-time personnel.

Board of Trustees

Atty. Theodore E. Troff - President
Rabbi Harold Berman
Dr. Stanley Mesirow
Dr. Samuel Gould
Mr. Robert Tollaksen
Mrs. Mary Wilhelmsen
Mr. Lloyd Sanborn
Mr. Donald Ladrow
Dr. W. C. Donald
Dr. W. G. Murdoch
Father George Ross
Rev. Lloyd Phillips

The Board members represent all the main religious faiths in the community.

Staff – (all part-time)

Mrs. Barbara Henderson, Chief Administrator
Mrs. Joan Ernst, secretary-receptionist
Mrs. Sherrie Curtiss, secretary-receptionist
Mr. Ralph Datema, counselor
Rev. Theodore Kennedy, counselor
Mrs. Adrienne Rosenberg, counselor
Mr. Kevin Hawse, counselor

Hours

For an appointment at either location, a person may call any weekday between 8:30 a.m. and 5:00 p.m. Actual counseling sessions are provided on an appointment basis on Monday between 9:00 a.m. to 8:00 p.m.; Tuesday, 1:00 p.m. to 10:00 p.m.; and Thursday, 1:00 p.m. to 5:00 p.m.

Cost

The complete fee is $10.00 per appointment. Part of the fee may be paid by working as a volunteer in one of the area’s public service agencies. Volunteer time is credited toward the bill at the rate of $2.00 per hour.
Comments

This counseling service appears to be conducted in a very professional and ethical manner. The counselors and the board members do represent a real cross section of theological backgrounds and are available to consult with one another when needed.

Although some records are kept (in locked files at all times), it is the client who determines the limits of confidence and his records are not released without his consent. Clients are encouraged to pay the regular fee since this is a major source of revenue for the Center. However, clients during the past year have opted to do over 300 hours of volunteer work for the YWCA, Planned Parenthood, Mercy and Memorial Hospitals, and various church programs. The largest percentage of clients are referred by personal recommendation or self-referral. Other sources of referrals are medical doctors, clergy, lawyers, and social service agencies.

Youth Service and Assistance Bureau

Location

89 West Main Street, Benton Harbor, Michigan

Telephone

927-4427

County Toll Free Lines

<table>
<thead>
<tr>
<th>From</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niles, Buchanan, Galien</td>
<td>695-3887 Ext. 330</td>
</tr>
<tr>
<td>Bridgman, New Troy, Sawyer</td>
<td>465-5370 Ext. 330</td>
</tr>
<tr>
<td>Lakeside, Three Oaks, New Buffalo, Union Pier</td>
<td>756-9571 Ext. 330</td>
</tr>
</tbody>
</table>

Background Information

This agency was established as a division of the Juvenile Court in 1973 through a special Federal grant and local county support. Its purpose is to divert young people from the Juvenile Justice System because it was found that once a young person becomes involved with the Juvenile Justice System, he or she is much more likely to continue to be involved with it in later life. Its offices are housed in a renovated store-front building in the downtown section of Benton Harbor.
Services

The Bureau attempts to identify the delinquency-prone youngster and the youth who have had a first encounter with law enforcement at the earliest possible point in time so that intervention services can be rendered. These include: emergency short term counseling, consultation and advice to parents, school personnel and caseworkers of youth, coordinated referrals to the Mental Health Clinic, Child and Family Services, Y-Uncles, churches and other community agencies, and a volunteer program to guide the efforts of interested volunteers to help clients avoid delinquent behavior. The Bureau also attempts to divert youth from the justice system by mobilizing communities to solve youth problems by strengthening existing services and developing programs to remedy delinquency-breeding conditions.

Special Note

A youth does not have to be referred by the police or the school to receive services from the Bureau. Any youth is encouraged to drop in at the center to voice his or her concerns and help may be provided.

Staff

Robert L. Crounse, Director
Fred B. Watson, Assistant Director
Donna Sickels, Volunteer Coordinator

D. O. Spence, Counselor
Fred Moore, Counselor
Marilyn Smith, Counselor

Kathy Salbenblatt, Counselor
Bud Shuler, Counselor

Connie Fausak, Secretary-Receptionist
Brenda Butler, Secretary-Receptionist

Planned Parenthood Association
of Southwestern Michigan

Location

785 Pipestone Street, Benton Harbor, Michigan

Telephone

925-1025 or 925-1306
Background Information

This is a nonprofit organization funded by contributions from individuals, foundations and organization. It is the local certified medical affiliate of Planned Parenthood Federation of America. The center is housed in a renovated large residence which was provided by the Berrien County Board of Commissioners and individual contributions. The house provides functional headquarters for administrative, outreach, and educational staff and volunteers. It also provides a warm and informal atmosphere for teen raps, education, and training sessions.

Purpose

This agency is dedicated to providing leadership in the movement to bring about universal acceptance of family planning as an essential element of responsible parenthood, stable family life, and social harmony.

Services

This agency provides educational promotional, and outreach aspects of a family planning program in cooperation with the Berrien County Health Department. It provides the general public with information through programs, speakers, literature, and films. It provides a vasectomy clinic for Berrien, Cass, and Van Buren Counties. Weekly rap sessions are conducted at the center to help teens better understand their developing sexuality and make mature decisions.

Staff

Dorothy L. Sosey, Executive Director—Administers and directs the Program and functions as Administrative Assistant for the Family Planning Program in Berrien and Cass Counties.

Justine Wisler, Information and Education Coordinator—Directs education activities in the community, including patient education, family planning education for other agencies. She is in charge of the film library and other resource materials. She shows films, speaks at schools, women’s groups, other agencies and conducts teen rap sessions once a week at the Planned Parenthood Center.

Elaine Gordon, Outreach Secretary and Receptionist—She handles the general secretarial work, all outreach records, payrolls, and participates in teen raps.

Pat Kibler, Office Manager and Bookkeeper—She provides general secretarial assistance, and does all the bookkeeping. She is responsible for office supplies and coordinates activities of volunteer workers.
Gretchen Schalon, Outreach Coordinator—Supervises two full-time and 8 part-time Outreach Consultants in Berrien and Cass Counties, and conducts family planning training sessions for personnel of other agencies and contributes to education activities of the affiliate.

Outreach Consultants:
Lydia Clark, full-time, Benton Harbor
Jeanie Hager, full-time, Benton Harbor
Judie Sanders, part-time, Benton Harbor
Virginia Inglaright, part-time, Southern Berrien County and Cass County
Darlene Crocker, part-time, Southern Berrien County
Carolyn Kasischke, part-time, Baroda, Sawyer, Watervliet
JoAnn Mackling, part-time Cass County
Bertha Hilton, part-time Cass County
Lynn Iliff, part-time, Southern Berrien County
Lowell Dunham, part-time Vasectomy Consultant, Berrien, Cass and Van Buren Counties

These consultants do recruitment, follow-up, work in clinics as assistants, clerks, conduct maternity ward programs at three Berrien County hospitals, and participate in educational activities including teen raps.

The vasectomy consultant provides male family planning programs and does counseling for those interested in vasectomy whether for the Vasectomy Clinic or seeking service from private doctors.

Film Resources

The association has many films which might be particularly useful for use in the school setting. These films can be checked out of the center by any responsible person or group free of charge. The films available for use are listed below.

16 mm Sound Films

"I'm 17, I'm Pregnant . . . and I Don't Know What to Do"
One out of eleven U.S. children is born to unmarried mothers. This film brings to life the problems of pregnant single women and their babies, by documenting the true story of one girl who sought help. 28 minutes, color.

"Growing Up Together: Four Teen Mothers and Their Babies"
A sequel to "I'm 17, I'm Pregnant . . . and I Don't Know What to Do." Four young mothers—not actresses—tell about themselves in their own words, not a script. The film provides an excellent vehicle for discussion of the realities of life for young unmarried mothers, their children, and their families. Film is accompanied by a well developed guide.
"Each Child Loved"
Illegal abortion in sordid realism is contrasted with medical, safe abortion in a documentary filmed in an authentic clinic. Film star Candice Bergen narrates. Authorities briefly explain medical and legal aspects of abortion. 40 minutes, color.

"A Single Step"
On a U.S. college campus, students probe how population stress affects the environment. Voluntary family planning's benefits are shown and the camera visits college birth control clinics. 28 minutes, color.

"The Day Before Tomorrow"
Vividly documents population pressures around the globe, capturing the impact on economy and ecology. Features the comments of world leaders and population authorities. It gives evidence that unwanted pregnancies intensify individual and societal problems, here as well as abroad, and shows what contributions voluntary family planning programs make toward improving family life and significantly reducing the rate of population growth. Suitable for all ages. 28 minutes, color.

"Five Million Women"
Dramatic profile of the five million impoverished U.S. women dependent on subsidized services for birth control, presented through a real-life picture of a day in the life of one family. Dynamic, factual, and surprising—a refutation of long-held stereotypes about the poor. Derived from a special U.S. Census Bureau tabulation. 10 minutes, black and white.

"Population and the American Future"
Two parts—each about 30 minutes. This film, exploring the American population problem, uses beautiful color, and is narrated by television star Hugh Downs. Excellent for high school use. The first part is suitable for junior high use.

"Too Soon Blues"
A young inner-city couple is followed through the early stages of their relationship. Problems of their sexual relationship, pregnancy and contraception are explored. Interviews with other young people expressing their opinions are included.

"A Chance of Love"
A sequel to "Too Soon Blues," the same inner-city couple struggles to work out a more mature relationship. Contraception and its effect upon their relationship is probed more deeply. Interviews with other young people expressing their opinions are presented in a semi-documentary style. 23 minutes, color.
"Old Enough to Know"
Filmed mainly in a day care center in Seattle, this is designed to help parents grow more comfortable with their young children's developing sexuality, and especially to encourage straight answers to straight questions. This film is intended to deal with attitudes rather than impart information. It establishes a direct, comfortable atmosphere for the viewer and is a good tool to spark discussion.

"For Your Pleasure"
A mini film for general audience. Suitable for any age group from nursery school through adults, this can give focus to almost any kind of ecology-emphasis program. It is especially appropriate to stimulate discussion of population. 4 minutes, color.

Color Cartridges

"Hope is Not a Method"
Straight facts on what college-age students want to know about methods of contraception. Pre-tested with some 800 college students for relevance and acceptability. 15 minutes.

"To Plan Your Family"
Happy mothers present persuasive reasons for planning families, and discuss their experiences with various contraceptive methods. Animation used to explain reproductive physiology, and how birth control methods work. (Stress on pill and IUD) Excellent introductory film for women's groups and for clinic and hospital use. 14 minutes.

"A Matter of Choice"
An accurate discussion of all methods. Excellent diagrams let the viewer understand how and where foam is used, exactly where IUDs go, the right way to use a condom. Voices of men and women explain why they plan their families. 20 minutes.

"Family Planning"
Donald Duck stars in this animated cartoon made by the Walt Disney Studio for the Opulation Council. The accent here is on population problems in the developing nations and the role of family planning in solving these problems, and in making individual family life better. 10 minutes, suitable for all ages.

"Happy Family Planning"
This charming witty animated cartoon explains in pictures and musical accompaniment the benefits of family planning and methods. Wordless except for the names of the contraceptives shown in seven languages. "Happy" is the word for this film designed especially for hospital family planning clinics and is useful in many different national settings. 6 minutes.
"Vasectomy"
Men who have chosen vasectomy (and their wives) describe this method of sterilization and explain its benefits. 17 minutes.

"About Sex"
A group of teenagers discuss their feelings about human sexuality. The second part of the film covers sexual fantasy, body growth, homosexuality, birth control methods, etc. 23 minutes.

Alcoholics Anonymous of Southwestern Michigan

Location
4162 Red Arrow Highway, Stevensville, Michigan, 49127

Telephone
429-9153 Evenings, or 983-4164 24 hours a day.

Background Information
This organization is housed in a large white frame house known as the Alano House. This building provides meeting facilities for over one hundred persons and served as a drop-in center with telephone, kitchen and office facilities. It has a warm, cozy clubhouse atmosphere which is conducive to the activities which are conducted here. This house also serves as head-quarters for Al-Anon which is a separate entity from A.A. Al-Anon is an organization designed to help spouses, friends, and relatives understand and cope with Alcoholics.

Purpose
Alcoholics Anonymous is dedicated to helping men and women, whose lives have become unmanageable as a result of drinking, to return to a normal life without alcohol.

Description
Alcoholics Anonymous is a non-profit, self-supporting corporation. It is not affiliated with any sect, religion or denomination. It does not seek or accept contributions outside its membership. The only qualification for membership is that there be a problem of uncontrolled drinking involved.

Alcoholics Anonymous meets every evening of the week. In the groups, a person shares a fellowship with people who have similar problems but are trying to find a better life for themselves.
The daily meetings are closed, but every Saturday night the meetings are open to everyone. The organization adheres very closely to a format that has proven to be successful over the years.

Joining the Organization

Any call or inquiry will be followed up by a member. The member will go to the person's home or any place the prospective client wishes to meet with him. However, A.A. is not interested in sobering up drunks who are not sincere in their desire to remain completely sober for all time. If a person is genuinely sincere in his desire to refrain from alcohol, members will go to great lengths and spend days of their time to help that person.

Comments

Although A.A. does help many people, it helps only those who are willing to completely refrain from drinking. A.A. believes that if an alcoholic takes one drink, he is gone! Consequently, when most A.A. alcoholics take one drink, they are gone!

In this sense A.A. has never dealt with the underlying factors that caused the excessive drinking in the first place and avoids the issue of educating for occasions of social drinking for the recovered alcoholic.

The Link Crisis Intervention Center

Location

2002 South State Street, St. Joseph, Michigan

Telephone

983-6351

Agency Goals

1. To divert runaways from the judicial process through the provision of a voluntary alternative.

2. To aid runaways and their families in their time of crisis.

Staff

Director - Richard Freer
Sec./Bookkeeper - Mary Plomann
Counselors - Cap Ross  
Ann Granquist  
Prevention - Dee Kirby  
Outreach - Kevin Gill  
House Manager - Dorothy Knauff  
House Supervisors - Pat Crow  
   JoAnn Crow  
   Elizabeth Johnson  
   David Wazdatskey  
   Carolyn Fothergill

Board Members

President - Muriel Learned  
Vice President - Richard Bermen  
Secretary - Dorothy Bosket  
Treasurer - Peg Crishal

Ronald Allen  
Paula Andrasi  
Marion Avery  
Debra Young  
Richard Berman  
Dorothy Bosket  
Mary Calsbeek  
Peg Crishal  
Mary DeFoe  
Mildred DeHorn  
Dr. Harold Habenicht  
Liz Hudnutt  
Judy Jones  
Tim Fenderbosch  
Willis Koontz  
Muriel Learned  
Bela Lindenfeld  
Joyce Schurr  
Catheryn Sirk  
Harry Stephens  
James Tiscornia  
Ruth Wood

Background Information

The Link was formed in August, 1973, by a group of citizens concerned about the lack of positive alternatives in Berrien County for troubled teenagers and runaways. Five to six hundred runaways and missing juveniles are reported to the Police Department in Berrien County annually. It was felt that many more were never reported to authorities.

The Link is housed in a brick, two-story building in a good residential neighborhood in St. Joseph. It has the capacity to house ten youths on an overnight basis.

Services

1. Provides immediate assistance to young people and their families in times of crisis including 24 hour drop-in crisis counseling seven days a week, free food and shelter, and family conferences.
2. Facilitate reconciliation in the case of runaways or help in finding alternative living arrangements in situations where reconciliation is not possible.

3. Daily rap groups, physical exams for residents of more than three days, follow-up counseling on a short term basis, and outreach and prevention.

Comments

I think it is important to note that a youth does not have to run away to receive help from the Link. Any youth in trouble should feel free to approach the Link with his or her problems and may receive assistance in resolving the problem situation.

Riverwood Community Mental Health Center

Main Office Location

2611 Morton Avenue, St. Joseph, Michigan, 49085

Telephone

983-7781

County Toll Free Lines

<table>
<thead>
<tr>
<th>From</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niles, Buchanan, Galien</td>
<td>695-3887</td>
</tr>
<tr>
<td>New Buffalo, Three Oaks, Lakeside, Union Pier</td>
<td>756-9571</td>
</tr>
<tr>
<td>Bridgman, New Troy, Sawyer</td>
<td>465-5373</td>
</tr>
</tbody>
</table>

Brief History

In February, 1953, the Twin City Child Guidance Clinic was officially opened. In 1966, the clinic signed a contract with the Berrien County Community Mental Health Services Board which made it possible to add enough staff to provide psychiatric services to adults as well as children. This expanded facility was named the St. Joseph River Valley Mental Health Center. The use of services at Memorial Hospital was begun on January 1, 1969, but new facilities at the hospital to house the center were not completed until March, 1970. In January 1971, the name was changed to Riverwood Community Mental Health Center. The Center occupies a three-story, 42,000 square foot building adjacent to Memorial Hospital in St. Joseph. The building is
owned and operated by the hospital. Operating expenses of the Center are met through contributions, United Fund allocations, charges to patients, and County Funds allocated through Public Act 258.

Obtaining Services

Anyone who needs psychiatric help may apply to the Center for assistance by calling or stopping in for an appointment. A person can receive 24 hour emergency service by going to the emergency room of Memorial Hospital.

Admission to outpatient service is made by the staff of the Center. Admission to inpatient services may be made only by a psychiatrist who is a member of the Memorial Hospital medical staff.

Fees

Outpatient services are rendered on a fee basis with a sliding scale based upon the client's previous year's income. The rate per hour is calculated at 2% of what the person paid in income tax the previous year. However, no one is turned away because of an inability to pay, and the maximum charge in most cases is $25 per hour.

Staff

Center Director - Martin F. Abbert, M.D.
Clinic Psychiatrists - Shen Chen, M.D.
Carole Hunter, M.D.
Charles E. Payne, M.D.
K. Thabolingam, M.D.

Board Members

Chairman - David Upton
Vice-chairman - Mrs. L. E. Speidel
Treasurer - Frank Poorman
Secretary - Patricia M. Steimle

Mary Camp
Doyle Barkmeier
Berryl Dominy
Mary Lou Duncan
Margaret Nowlen
George Westfield
Ann White
Rev. Mark Graham
Harbert Outpatient Clinic

Location

Prairie Road, Harbert, Michigan, 49115

Telephone

469-4520

Comments

This clinic is housed in a renovated two room school house located in Harbert just off Red Arrow Highway on Prairie Road. It is staffed on a full-time basis by a clinical social worker, Ms. Mary McLean and a receptionist-typist, Ms. Arlene Myers. They are assisted on a regular basis by a psychiatrist, an alcohol counselor, and two clinical social workers one day per week and as needed. This center provides outpatient services for children and adults and consultation to the community. Its main advantage is that it extends the services of Riverwood into the county, making them more available because of proximity and its facility is less threatening to many people since it is not physically connected to the hospital.

Niles Outpatient Clinic

Location

25 South 5th Street, Niles, Michigan, 49120

Telephone

684-4270

Comments

This clinic is located in a converted large house in the down-town section of Niles. The clinic provides outpatient services for children and adults and consultation to the community. A psychiatrist visits the branch one full day a week.

Staff

Thomas Glass, A.C.S.W. - Director, Outpatient Services - South County
Ronald Neff, A.C.S.W. - Coordinator, Niles Clinic
Carol Bagley, MSW - Clinical Social Worker
George P. Eckes, MSW - Clinical Social Worker
Juanita Gill - Secretary-Receptionist
Benton Harbor Outpatient Clinic

Location
809 Territorial Avenue, Benton Harbor, Michigan

Telephone
926-7149

Comments
This branch office is housed in a converted church building located in a rather concentrated low-income area with many family and social problems. The objective of this center is to bring mental health services closer to the residents of this area. Direct treatment services are offered with psychological and psychiatric services available when necessary. An effort is made to provide early intervention and consultation with other agencies who also deal with disadvantaged families.

Staff
Deborah Gillispie - Receptionist
JoAnn Reed - Secretary
Sandra Herndon - Coordinator
Lilly Curry - Mental Health Technician
Bill Kobza - Mental Health Specialist
Thelma Johnson - Mental Health Technician

Substance Abuse Program

Location
127 East Napier Avenue, Benton Harbor, Michigan

Telephone
926-7271

Comments
This program, formerly called the Drug Treatment Program, has been merged with Riverwood for the past year. It is housed in a former medical doctor's office in Benton Harbor—which serves largely as an administrative center, although clients and many telephone requests are handled here also. It should be noted this program is
currently conducted in a substantially different manner from the drug program which has received so much publicity over the previous four years. This program provides the schools and the community at large with substance abuse information. The staff are on call 24 hours a day to handle any emergency involving drug overdose. Counseling is provided on an individual, group and family basis. Detoxification for heroin, barbiturates and other physically addictive drugs is coordinated through the program. This program also provides the 24 hour, seven days per week Helpline telephone program offering its assistance to any problem area. The alcoholism program is now a component of the Substance Abuse Program. This program coordinates the detoxification services, and offers inpatient and outpatient services in individual, group and family counseling.

Staff

Paula Andrasi - Director, Substance Abuse
Karen Rinker - Coordinator, Outpatient Services
Marty LaCombe - Specialist, Opiate Addiction
Tom Turtorello - Specialist, Non-opiate Drugs
Joyce Nurrie - Coordinator, Alcoholism Program
Earnie Norton - Alcohol Counselor
Lindy Lane - Staff Counselor
Dennis Schuh - Community Outreach Coordinator
Debora Coleman - Helpline Coordinator
Kelly Kellog - Educational Consultant
Jean Reaves - Sexual Assault Services
Skip Miller - Public Relations
Barb Tansey - Information Specialist
Harriet Jansma - Community Training

Mental Retardation Services

Location

2611 Morton Ave., St. Joseph, Michigan, 49085

Telephone

983-7781

Staff

Marsha Kennedy - Director
Gloria Gillespie - Social Worker
Bob Blalock - Social Worker

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Comments

This division is concerned with overall delivery of services to clients previously returned from state institutions, as well as mentally retarded persons residing in the county. They provide consultation to the Intermediate School District's Trainable Mentally Impaired Program, serve Gateway clients on a tuition basis, provide supportive services to parents and guardians of the mentally retarded and are involved in pre-admission and discharge from state institutions.

Day Treatment Services

Location

2611 Morton Ave., St. Joseph, Michigan, 49085

Telephone

983-7781

Staff

Joseph Opalski, MSW - Director
Don Johnson, CSW
M. Bowers, MSW
J. Koprowski, MSW

Comments

The day treatment program is utilized as an alternative to inpatient hospitalization. For those who have been hospitalized, it serves as a transitional experience as they move back into the community. Specific activities are included in the program to enhance opportunities of self-discovery, mastery of various tasks, social interaction and problem solving. A modified day treatment approach is being used with troubled adolescents at the Benton Harbor Clinic location to improve their functioning at home, work, school and community.

Outpatient Services

Location

2611 Morton Ave., St. Joseph, Michigan, 49085

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Telephone

983-7781

Staff

Fred Bell, Ph.D. - Director, North County Outpatient Services
Charles Rubel, ACSW - Director, Clinic Outpatient Services

Psychologists: J. Goy, M.A.
G. Maler, M.A.
R. Simia, M.A.
Q. Wagoner, Ph.D.

Social Workers: R. Berman, DSW
L. Elwell, MSW
D. Sawyer, B.A.
E. Williams, MSW
F. Carter, M.S. - Intake
J. Stewart - Intake

The outpatient clinic provides a wide and flexible range of direct clinical services. These services tend to be short term and include individual, family and group therapies, chemotherapy, crisis intervention, and services to prevent rehospitalization.

Early Identification and Treatment Services

Location

2611 Morton Ave., St. Joseph, Michigan, 49085

Telephone

983-7781

Staff

Elizabeth Bell, M.A. - Coordinator
S. Holme, MSW - Social Worker
C. Roessler, B.A. - Teacher
Robin Zollar, M.A. - Teacher

Para-Professionals and Aides:

C. Bushong  M. Pielemeier
A. Iannelli  U. Savich
M. Kuschel  J. Sullivan
R. Matson

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Comments

This program offers five day a week, two hours per day, direct treatment service to emotionally disturbed, minimally brain damaged and/or socially maladjusted children ages 2 through 6 years.

Consultation and Education Services

Location

2611 Morton Ave., St. Joseph, Michigan, 49085

Telephone

983-7781

Staff

Robert Tollaksen, M.A. - Director
Neldine Watson, MHT
Richard Peterson, MSW

Comments

This division provides case and program consultation with schools, communities, public health nurses, Youth Service Bureau, Sheriff's Department, Samaritan Center, Council of Churches, Helpline, Sexual Abuse Intervention, and the Link.

It also provides student field work supervision for students from Andrews University and Western Michigan University

A long standing feature of this division is the Family Workshop, meeting for about five years every Monday evening, 7:30 to 9:00 p.m. It is an open, anonymous group essentially for adolescents and their parents. There is no charge for the first time and a fee of $2.00 per family thereafter if it can be afforded.
Date: November 19, 1975

712 SUPERVISOR'S EVALUATION, FORM A

(Supervisor: Please complete and return to the Faculty Sponsor by the beginning of the final week of the semester/session.)

Name of Student: Gordon J. Duhm
Semester: Fall 1975

Interning Organization: Riverwood Community Mental Health Center

1. Description of student's job activities and training. Gordon's internship project was planned and carried out at three days a week for ten weeks. Gordon came to this internship project with seven years of extensive individual and group counseling experience within the educational setting. His objectives included gaining a survey knowledge of the relevant community mental health programs and professionals to whom he could refer students and relate to in his professional activities in the future. Another objective was to develop a critical appreciation of these programs through participation, observation, interviewing, studying records, and writing reports of these activities. A third objective was to use his experiences to write a descriptive handbook which could be utilized by other professionals in familiarizing themselves with mental health services. Accordingly, I guided and assisted him in making appointments, arranging experiences, and helping him conceptualize the framework of the various mental health programs as well as arranging to have him accompany me during some of my various activities.

2. Evaluation of the student's performance on the job and training activities.

Gordon has spent approximately thirty hours with me personally during the ten week period of the internship project. During this period, I have been pleased to watch Gordon pursue knowledge and experiences while demonstrating a great deal of motivation, personal initiative, and self-direction.

Gordon diligently carried out every suggestion I made to him during the internship. It has been rewarding to me to see him develop a clear insight and familiarity with all of the mental health programs he worked with. I feel that his performance in this internship has been outstanding. It is my judgment that he learned a great deal, that he performed extremely well, and that he has made a contribution to the development of mental health services. I might add that I sense that this internship project has served as the beginning of a good professional relationship between Gordon and myself.

3. Performance:
   Satisfactory
   Unatisfactory

   Organization Supervisor's signature
   Director, Consultation & Education Services

For the Faculty Sponsor:
Grade: Credit
No Credit
Incomplete
Credit hrs. completed

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Faculty Sponsor
Faculty Advisor
The Graduate College

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Date: November 10, 1975

712 STUDENT’S EVALUATION, FORM B

Please complete and return to the Faculty Sponsor by the beginning of the final week of the semester/session.

Name of Student  Gordon J. Dahm  Semester  Fall  1975

Interning Organization  Riverwood Mental Health Center

Organizational Supervisor  Robert Tollaksen, Director - Consultation & Education Services

1. Evaluation of the 712 experience. (Positive and negative)

This internship experience has had a very positive effect on me. It has made me very aware of the current state of the practice of community mental health in our locality in a way which could not be accomplished in any other manner. The objectives for the study were formulated to meet my personal learning needs. I have accomplished these objectives. One of the more positive aspects of my internship project was the supervision I received from Robert Tollaksen. He was in a unique position to arrange for me exactly the type of learning experience which I needed. As a result I was able to grow personally and professionally.

2. Suggestions for the improvement of the 712 experience.

I feel that my internship experience was very good in all respects. Specific difficulties I had in arranging appointments and collecting information were part of the total learning process. Overcoming these difficulties gave me greater self-confidence and has left me better able to overcome agency resistance in the future. One of the greatest aspects of this experience was that it allowed me to pursue knowledge in areas where I needed it most. I will be able to use this knowledge in my current position to great advantage for the students I serve and for my continued professional growth as well.

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Faculty Advisor  [Signature]

Student’s signature  [Signature]

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