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Programs for the HANDICAPPED

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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Office of the Assistant Secretary for Human Development
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PENNSYLVANIA'S FAMILY RESOURCES SERVICE PROGRAM

A revolutionary concept in the treatment of mentally retarded persons has emerged in Pennsylvania, according to State Welfare Secretary Helene Wohlgemuth.

The new approach involves providing a variety of supportive services to families in order to assist them in caring for retarded members at home.

"For years, authorities in mental retardation and related fields have agreed that the best place for retarded persons is with their families, or in close proximity," Mrs. Wohlgemuth said. "But until very recently, we have given families few alternatives to institutionalization.

"Lacking skills or otherwise unable to care for retarded children, parents turned them over to the State or private agencies for institutionalization.

"We now know that institutions are not the best or the only answer and that many residents could have remained with their families if sufficient supportive services had been given to the family," Secretary Wohlgemuth said.

She pointed out that the Department of Public Welfare has developed a Family Resource Services Program, in which families of retarded persons are assisted financially and in other ways. The program is administered through the county Mental Health/Mental Retardation Programs.

Deputy Secretary for Mental Retardation Stanley Meyers referred to the Family Resources Services Program as "secondary prevention" because it eliminates the need for institutionalizing many mentally retarded persons by giving family support and relief. "Secondarily," Meyers said, "these services could be significant to families who would consider bringing a retarded person, such as a family member, out of a residential school and into their home."

The deputy secretary said the program concentrates on the needs of the family rather than on the retarded person.

Types of services offered include:

1. Respite Care—This service makes a temporary residence available to a retarded person when his family is experiencing stress, personal crisis, illness or a need for a vacation.
2. Family Aid—This service is offered to parents who need a person to care for their retarded family member for a few hours at a time. This will allow the family an opportunity to participate in normal activities, such as shopping, socializing and attending business meetings.

3. Homemaker Services—Homemakers are available to perform essential household duties when family members are unable to manage effectively. This type of service could be to maintain continuity of care within the home during a family illness or to provide instruction in proper home management.
4. Recreation—Recreation programs allow the retarded person to experience regular community leisure-time activities and increase his ability to participate in these activities independently. The family will benefit by having periods of relief while knowing that the retarded family member is well supervised and is engaging in recreational activities.
5. Transportation—This service is offered to families who need assistance in transporting their child or adult family member to regular day programs or activity programs. Transportation services provide family relief, as well as increasing the likelihood that the retarded person will be able to attend programs.
6. In-Home Therapy—This resource insures that the retarded family member will receive important treatment or therapy even when he is homebound. Therapies include physical and occupational therapy, speech and language training.
7. Parent Training—Programs will be offered to assist parents and other members of the family to deal appropriately with the retarded family member. This may include training in behavior management or other types of programs which would help maintain the family as a cohesive unit.

Linda Tarrant, Director of the Family Resource Services Program in the Department of Public Welfare Office of Mental Retardation, explained that the program is already operational in varying stages in all 41 county MH/MR programs. Some counties may be paying for transportation or homemaker services. Others may be providing all services in the program, she said. The program is not necessarily a "package deal," but is geared to individual needs.

Approximately \$2.3 million has been earmarked to the county MH/MR programs by the Public Welfare Department for these services and it is projected that 22,000 persons will be served by the program during the current fiscal year, an average of 96 cents per person per day.