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## Minnesota Bedlam Revisited

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### The Unsung Heroes of Mental Program

#### CHAPTER 9

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Volunteer workers head the list of unsung heroes in the new Minnesota mental health program.

They are the citizens who, overcoming fear and prejudice, are giving their time and interest freely to help the mentally ill patient.

Two years ago, there were no volunteer workers.

Today, there are at least 350 volunteers. Most of these persons are members of groups which spend some time every week at only two of the mental hospitals. But all except one or two of the hospitals have some volunteer help.

What do these volunteers do?

Arthur Hager, Minneapolis Tribune photographer, and I saw a group in action at one hospital. They were helping regular hospital workers put on a dance for patients. They danced with patients and sat talking with them.

One patient announced that he preferred to dance with the volunteer worker.

"You don't have to do this," he explained to the volunteer. "You come here because you're interested. You don't get paid."

Volunteers also do many jobs that hospital employees haven't the time to do. They write letters for patients, read to them, play cards and checkers. Patients, who seldom get outdoors for a walk because hospital employees are busy with other tasks, greet the volunteer with welcoming smiles.

Patients, who have had neither letters nor visitors for long years, seek out a friend among the volunteers—someone who will be their "special" visitor and write to them occasionally.

Some volunteers have skills which the hospitals are putting to good use. For example, one member of a group of Red Cross Gray Ladies writes letters for and talks with patients who speak only Finnish.

In still another instance, a group of state employees—who sing, dance and do magic tricks visit the hospitals periodically to do a "stage show" for an appreciative audience of patients.

ONE WOMAN volunteer described her visit with a group of patients:

"Here (in a particular ward) women were, for the most part, friendly, docile and therefore ignored. They evidently didn't take walks or go to the auditorium daily."

"The long afternoons must be interminable for them. I was allowed to spend the afternoon just chatting with the patients. The women seemed so happy to have a new person to listen to them."

“They asked many questions about me, about St. Paul. We talked of Mr. Truman and Youngdahl and the burning of restraints. I didn’t ask but they volunteered how much more sensible it is not to tie people down.”

“If just one person could lighten their day,” the volunteer added, “I’m convinced that volunteer visitors, musicians, song leaders could be very helpful.”

DR. RALPH ROSSEN, state mental health commissioner, has emphasized at least two reasons why volunteers are needed.

No state hospital system, he said—no matter how much money it has to spend — will have enough workers to do all the small things which, added to the bigger jobs, turn a cold, efficient hospital into a warm, healing center. Volunteers can make the difference.

Equally important, Dr. Rossen said, volunteers are one of the best means of linking the mental hospital to the community.

In the past, mental hospitals were isolated because of their geographic location and because of community attitudes of fear and ignorance. They existed behind an “iron curtain” of superstitions.

Today the volunteer worker is helping to penetrate that “iron curtain.”

NOT ALL the state hospitals, however, have welcomed the interest of volunteers. At least one hospital superintendent refused to have any volunteer workers in his hospital until about two months ago.

His attitude got a cold reaction from officials in the mental health program.

In a book he is writing, called “One Mentally Ill Patient,” Dr. Rossen said: “Resistance, continued or periodical, is often encountered (by volunteers) from some employees and even from the ‘little tin god’ type of superintendent.”

“This can be combatted by careful education and persistence. It should be noted that any hospital system that does not co-operate with willing, eager volunteers usually represents a decadent hospital system and is one partial reason for the present status of state hospitals.”

THERE ARE some justifications, however, for a superintendent’s unwillingness to accept the services of volunteers at this time.

Volunteers are, in most cases, completely unfamiliar with the routine of a mental hospital and the problems that might arise. To train them requires valuable time of hospital workers.

Some men and women who want to be volunteers probably are not suited to working with mental patients and may upset themselves and the mentally ill.

A truly effective volunteer program must be a steady one. Some volunteers could do more harm than good by paying irregular visits or being generally unreliable.

One hospital employee who works with volunteers said there should be some policy on volunteer workers at the state level. “There should be screening of volunteers,” he said, and some spelling out of the kinds of activities these willing workers should be permitted to do.

THERE IS NO such policy at this time. There is talk, however, of forming a volunteer coordinating team that would establish statewide policies.

Dr. Rossen has suggested that each hospital organize volunteer councils made up of representatives of volunteer groups and certain hospital workers. These councils would work toward better co-operation among volunteers and the hospital staff.

No hospital has organized this type of council. But several have appointed one staff member to work with the volunteers. Two hospitals try to give their volunteers some training, but more training is needed.

Volunteer groups—and they include church, civic and professional organizations—have tried to make themselves more valuable through thoughtful discussion of their mistakes and accomplishments.

ONE OF THE MOST diligent volunteer groups, the Unitarians, publishes a monthly paper, "Tips for Volunteers," which it makes available to all. One of its members, a trained social worker, also has written a helpful handbook for volunteer workers.

Some of the "don'ts" in the handbook are:

Don't repeat things you have learned about him from someone else.

Don't try to correct a patient's delusions.

Don't be "too encouraging" about the patient's recovery.

The most important "do" is:

Do forget the "confusion of terms—schizophrenic, paranoid, manic depressive." These are medical terms of value only to the psychiatrist whose job it is to treat the patient.

"But the volunteer's job is to be a friend to a person."