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an address on
THE RETARDED CHILD
by
GOVERNOR LUTHER W. YOUNGDAHL
at the first national convention of
Parents & Friends of the Retarded
Radisson Hotel, Minneapolis, Minnesota
8 p. m., September 30, 1950

I feel very good about being here tonight..to welcome those of you who are visitors to Minnesota - and to pay tribute to all of you who are taking part in this movement...this long over-due movement...to build a strong nation-wide body in behalf of the retarded child.

I think you will find the country ready for this movement. I think that you will find that during this period of international tension...during this period of apprehension about the future of civilization...that people are re-examining all of their values...and realizing that only observance of human values will save the day.

The conflict in the world today is over the manner in which two different ways of life express their values of human life.

The totalitarians believe that unless the individual fits into a common mold of "same-ness", the individual is meaningless. And that the individual who can not serve the purpose of the state must be discarded.

To us the term, "human being", has a different meaning. And the human being has a different purpose. To us the human being is an individual whose values cannot be measured adequately in terms of materialism, usefulness to the state, physical fitness, or mental capacity. To us that individual has a meaning that can only be measured in terms divine.

The conflict in the world today is over what "we" and "they" think of the human being. However, for us the problem sometimes is that there is a great deal of difference between what we believe and how we evidence...or how we practice...what we say we believe.

The retarded child is a case in point - a painful personal case in point to many of you. And an equally painful moral case in point to a society that must meet its obligations to this child, as well as to others, if we are to have the moral strength to win out against an opposing way of life.

The point is this: the retarded child is a human being. Above and beyond being, he is a child. And for reasons for which neither he nor his family are responsible, he is retarded.

He has the same rights that children everywhere have. He has the right to happiness, the right to play, the right to companionship, the right to be respected, the right to develop to the fullest extent within his capacity, and the right to love and affection.

He has these rights for one simple reason.

He is a child.

And we cannot discriminate against this child...deny to this child the rights other children have because of the one thing that neither he nor his family can help... because he is retarded.

Whether he is in Minnesota...whether he is in any other state in the country...or in any other country in the world...he is still a child.

And we have forgotten this. And with rare exception throughout the country the provisions we have made for him are barbaric.

The retarded child has the right to social assistance in a world in which he cannot possibly compete on equal footing. Where required, he has the right to special education...and to special institutions.

For the retarded child who cannot be taken care of at home, he has the right to be provided with the most modern training institution possible; to an institution marked not only by the pleasantness of its brick-and-mortar, and lawns, and play areas, and educational services, and child specialty and medical services...but by an atmosphere and by a group of people in attendance who will not only give that child patient understanding, but the love and affection that other children get at home.

He has a right to these things. And his parents have a right to know that he has these rights. For they, too, are entitled to peace of mind about what is happening to a retarded child separated from them. For, you see, there is such a thing as the rights of parents that we have to observe, too.

I know many parents of retarded children. And my mail is heavy with correspondence from them. I have seen them go from doctor to doctor...from school to school...from person to person...exhausting their resources...devoting themselves endlessly in the ever-eluding hope that something could be done short of institutionalization.

I have seen their conflict over sending that child to an overcrowded state institution. And, on the other hand I have seen and felt the despair...the anguish and the strain...of parents of emergency cases for whom there was no room in the institution and who must wait in many instances even years for admission.

I believe in groups of parents of retarded children getting together, for it provides a parent with access to perhaps the only group in the world whose members have had the experience to understand what this is about.

Above and beyond this, however, through the group there is a method of getting concrete action on legislation to make up the short-comings that have marked our system of care and training for the retarded child.

In forming a national body you have provided yourselves - and us - with hope that has never been there before. Hope for the building and staffing of better institutions and schools; hope for the encouragement and development of research into the nature of mental deficiency, and through this research not only improved treatment techniques, but the possibility of prevention for generations in the future.

We in Minnesota share with you in these hopeful developments and pledge our efforts in the crusade to provide public friendship and support for the retarded child.

I would like to tell you something of our own plans and hopes for this child.

At the moment we are engaged in the first step of building a modern mental health program. Prior to the last session of our legislature we examined our institutions. And then we examined our conscience.

The result was that we came out of the legislative session with almost doubled appropriations for our institutions for the mentally ill, the mentally retarded, and for those with convulsive disorders. In addition, we sponsored legislation for an expanded building program, including a new building for the mentally retarded.

At no point, either during the session or since, has this program ever been referred to as anything but the "first step", for it still requires refinements.

Our first step - the current step - is based on introducing into our various institutions the things they require in common. The same ratio of increase for our institutions for patients with convulsive disorders and children with mental deficiency was used as in our hospitals for the mentally ill.

In essence this is, increase in personnel, higher salaries, changes in classifications, improved clothing, more therapists, more recreation, more training, and a

single standard of diet that protects the patients' diet by legally requiring it to be the equivalent of the employees.

Unfortunately, a dispute arose in the closing days of the legislature as to where the new institution for the mentally retarded was to be located. Too many communities wanted it. As a result, the legislature adjourned before it had a chance to appropriate the monies.

Those of you familiar with Faribault know of the progress that has been made there in the past year under Dr. Engberg. And you may know of the progress at Cambridge where Dr. Gully has a number of children who have a convulsive disorder in addition to mental deficiency.

As a result of cooperation between these superintendents and our Commissioner of Mental Health, Dr. Ralph Rossen, we are introducing pediatric and neurological services to all children, which services are tied in with the residency training programs of the Medical School of the University of Minnesota.

I am very gratified, of course, with the progress being made. I do not wish to imply that we have corrected all shortcomings, but considerable improvement has been made in the past year.

However, we are confronted with an overcrowding so serious that it defies description. Although we lost a new institution for the retarded child, we did obtain monies for a 300 bed unit at Faribault, which when completed, will not do more than relieve some of the existing overcrowding.

We have a waiting list of more than 800 cases. In this waiting list are several hundred cases that constitute serious emergencies.

When the legislature meets in January the number one plank in the mental health program will be a new institution for the retarded child. We will give this project priority over every other refinement of the program.

But we cannot wait until the legislature meets. The situation with the waiting list becomes more serious with the passing of each day.

The wait is taking its toll of both parents and children. It is causing hardships so severe that many families can not hold out much longer.

Therefore, I wish to report to you a major emergency step that we are now in the process of taking to relieve some of the waiting list. This step is being taken in consultation with Dr. Rossen and other advisors to the program.

This step is based on the fact that among the retarded children at Faribault there are a number who in addition to their retardation have an emotional problem requiring psychiatric attention. The step involves moving a number of these children from Faribault to other facilities in order to replace them with children on the waiting list.

Here is what is happening.

1. The population at Faribault is now being screened for retarded children with an emotional problem.
2. Eighty of these children will be temporarily moved to space that will be available in special sections of state hospitals, where they will receive psychiatric treatment for their emotional disorders. This group will comprise children of advanced chronological age.
3. A center for the emotionally disturbed child is under organization at the Hastings State Hospital. A cottage here will be made available to younger retarded children who have emotional disorders.

4. Other facilities at the Hastings center will be made available for temporary care of children now at home who require prompt psychiatric attention.

5. Out-patient clinics are now available at Minneapolis and St. Paul where parents and children on the list may consult with psychiatrists and child specialists.

So far, I have referred to this problem mainly in terms of institutional care. This is very important and the most pressing, but if we confine ourselves to that, it seems to me that we miss the best.

Whether in an institution or at home, the important thing seems to me to be that these children receive training. For under proper training I am sure they can be developed to the point at which they can function better socially and, in many instances, live usefully and productively.

Many children, we know, will not require being in an institution if their training and education can be supplied within the public school system. Others in the institution, if their training is increased, will either make a better adjustment there or in some cases be able to live in the community.

This involves the right of the retarded child to receive education - not education on the higher academic level - or education on any academic or theoretical level... but, education, nevertheless, to develop, learn, and function with such ability as they have.

In the past, Minnesota in common with other states, has observed the rule-of-thumb that an I.Q. of 50 or more makes a child educable...and that an I.Q. of below 50 makes him uneducable.

This is an important point. First, it determines whether or not state aid for education is available. For several thousand retarded children above this point and not in an institution, state aid has been provided. But for those below this point or in an institution such aid has not been provided.

Even more serious to me than the question of financial aid is the significance that such a blanket rule means for a group of children who require very individualized training and education.

Therefore, I am very pleased to report to you that Dean Schweickhard, State Commissioner of Education, has just reported to me that he is initiating a recommendation on this to the State Board of Education. The recommendation is to eliminate from requirements for state educational services or assistance any reference to the intelligence quotient.

Dr. Schweickhard expressed himself to me that as time has gone by concepts of education have broadened. And as they have broadened, so have our acknowledged responsibility in this field to the retarded child.

Dr. Schweickhard agrees that while the Department of Education cannot assume any function relating to the care or custody of retarded children, he will recommend and join with us in attempts to utilize the resources of the State Department of Education in the planning, supervision, and possible direction of education program for retarded children, both in the public school system and in institutions.

This step, you understand, is not yet an accomplished fact. It is only a direction in which we are moving. Considerable detail has to be worked out, with possible legislation to consider. Nevertheless, I feel that it marks a significant milestone, for which Dr. Schweickhard and his colleagues are due high recognition.

Social programs cannot be accomplished by administrative steps alone. They depend for execution on public understanding and enlightenment. In this case, they depend on public friendship for our retarded children.

This friendship, this understanding is not difficult to obtain, as those who have worked in the Minnesota mental health drive know. And as those who will attend the mental health friendship conference at the Anoka State Hospital on October 4th will find out.

The public is basically friendly. People are rapidly discarding the foolish notions they once had about the mentally ill, or the mentally retarded, or those with convulsive disorders.

I think Mr. Landh will bear this out. For he and other members and officers of the Association of Friends of the Mentally Retarded have done a magnificent job during the past several years in calling this problem to public attention and bringing the public into contact with the retarded child. As a result of this, no retarded child in our institutions last Christmas suffered for lack of presents and remembrance. In fact, I believe that one Christmas every child at Faribault as a result of efforts of the Association received twelve to fifteen presents - apiece.

The job of public education is a joint one. There is only so far that we connected with state programs can go. The major job of public education belongs to you. For no one, unless he has experienced this problem, can fully feel it. And no one, unless he has experienced it, can convey the sorrow that exists on one hand, or the happiness that on the other hand is ours to give.

Through increased public education and constructive organization you will bring about - sooner than you think, for we are on the eve of it already - you will bring about a period when the retarded child will stop being a symbol of social forgetfulness...and instead become an object of that compassion and help that a warm-hearted society can give.

You are doing one of the most important educational jobs in America today. A job not only for the retarded child, but a job for all of us...in helping us to think through the values we place on human life - and the place we hold the child - retarded or otherwise - in our society.