Dr. E. J. Engberg  
Minnesota School and Colony  
Faribault, Minn.

Dear Dr. Engberg:

The Hospital Recreation Section of the American Recreation Society is composed of professional specialists in recreation representing private, city, county, state, military, U. S. Public Health Service, and Veterans Administration hospitals. As one phase of its professional activities, the Section is conducting studies of the value of patient participation in both active and passive aspects of hospital recreation programs. Although the program content varies with hospitals, the recreation activities generally included are motion pictures, music, dramatics, adapted sports, radio, group social activities, hobby clubs, crafts, and the like.

At the annual meeting held in October, 1950, at Cleveland, Ohio, the stimulating and provocative comments of the medical and professional recreational personnel in attendance served to emphasize the need for a study to determine a generally acceptable concept of the role of recreation in hospitals and similar institutions. It was evident that guidance from leaders in the medical profession as well as those in recreation would be needed in arriving at such a determination.

The Section is extending to you an earnest request to give it the benefit of your thinking and experience concerning the function of recreation in hospitals and similar institutions.

While we will be extremely interested in any observations you may care to make on this subject, we hope that you will indicate wherein your remarks may be applicable only to certain types of patients, and that you will include comments on the following points:

1. Your definition of recreation.
2. The application of your definition to a recreation program in a hospital.
3. The place of a recreation program in a hospital.
4. Your opinion of the use of medical prescription in relation to the participation of patients in the recreation program.
5. The function of the doctor in relation to determining the activities to be included in the recreation program. For diagnostic groups. For individual patients.
Dr. E. J, Engberg

It will be greatly appreciated if you could provide us with whatever information you may care to offer at your earliest convenience in order that a report of our findings may be made at the next annual meeting of the Hospital Recreation Section.

Sincerely yours,

G. C, BREAM, JR.
Chairman, Committee on Basic Concepts of Hospital Recreation
Hospital Recreation Section

Please address reply to:
C. C. Bream, Jr.
Chief, Recreation Division
Veterans Administration
Room 4232 Munitions Bldg.
Washington 25, D. C.
August 27, 1951

C. C. Bream, Jr.
Chief, Recreation Division
Veterans Administration
Room 4232 Munitions building
Washington 25, D.C.

Dear Mr. Bream:

We desire to acknowledge the receipt of your letter of July 26, have given it careful consideration, and desire to make the following comments with reference to the points mentioned in your letter.

1. Recreation is a frame of mind with each individual interpreting various recreational activities differently according to his own needs.
2. Each patient is different, is an individual, is a separate unit that has to be treated as such. Group activities are excellent as long as they still cater to the individual. Distinct individual patient activities are still held to a minimum at this institution which is one for all grades and ages of mental defectives. Naturally, our goal still remains to meet the needs of each one of 2,900 patients by providing an individual program for each patient.
3. Recreation, most assuredly, is a definite cog in the hospital recovery wheel. It is no more important nor no less important however than any of the other services offered to patients. Physician, Psychologist, Teacher, Aide, Chaplain, Social Worker, Truck Driver, or Farmer, are all on an equal level in that each is doing his part toward helping the patient.
4. We here at the Minnesota School and Colony very definitely favor a prescription plan for all patients-not only for recreation, but for patients' work assignments and in general, the entire individual patients' program.
5. The doctor in our symbolism, would be the axle of our Patient Recovery Wheel; all activities and services revolve around him, his judgment, and his prescription.

Very truly yours,

E. J. Engberg, M.D.
Superintendent

EJE:MMH:dp
cc: Milt M. Hustad