48-S-00-P-MRV
State inst. OM 10\m
Owatonna State School

The Minnesota State Public School was created by the Legislature in 1885 and was opened at Owatonna in 1886. Provisions of law provided that dependent, neglected and ill-treated children under fifteen years of age, who were of normal mentality and free from disease, were eligible to admission on the order of the Probate and Juvenile Courts of the State. In the legislative session of 1945 a bill was introduced, passed and signed by the Governor, which provided for a change in the services of the State Public School on a two-year trial basis. The provisions of this law designated that high-grade feeble-minded children, who had been so committed by the Probate Courts of the State, were to be admitted for the purpose of providing academic, educational and vocational training. It was the intention of the Legislature that this training should point toward the eventual release of as many of these children as possible so that these individuals could be given a trial in making a successful economic and social adjustment in community living. The dependent and neglected children in residence were transferred to the care and supervision of the Division of Social Welfare. All of the physical facilities at the State Public School thereby became available for use in providing training and care for the new population. The 1947 session of the Legislature passed the necessary laws to make the temporary change permanent and the Minnesota State Public School is now known as the Owatonna State School.

Mendus R. Vevle _______________________________ Superintendent
John R. Schwirz _______________________________ Case Work Supervisor
Harold W. Isackson _______________________________ Steward
Dorothy M. Eidem _______________________________ Principal of School
Dr. Grace Arthur _______________________________ Part-time Consulting Psychologist
Maethel Deeg _______________________________ Part-time Psychologist
C. T. McEnaney, M. D. _______________________________ Part-time Physician
C. W. Lundquist, M. D. _______________________________ Part-time Ophthalmologist
N. E. Jensen, D. D. S. _______________________________ Part-time Dentist
Dorthea Putter, R. N. _______________________________ Nurse

Capacity of institution _______________________________ 435
Area of grounds, acres _______________________________ 330
Number of patients June 30, 1948 _______________________________ 411
Acreage under cultivation _______________________________ 270

Expenditures:

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<thead>
<tr>
<th></th>
<th>1946-47</th>
<th>Per Capita</th>
<th>1947-48</th>
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<tr>
<td>Salaries</td>
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<td>Total operating expense</td>
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To the Director, Division of Public Institutions:

I respectfully submit the following report for the years beginning July 1st, 1946 and ending June 30th, 1948:

**Population**

At the beginning of the biennium, July 1st, 1946, our population was 350 and at the end of the biennium, June 30th, 1948, our population was 411. There were 142 new admissions, 4 re-admissions and 9 received by transfer from other institutions. The average population for these years was 365. There were 95 discharges—9 of whom were under age of self-support (18 years); 18 capable of self-support; 1 capable of partial self-support; 4 incapable of productive work; 8 escapes dropped from the rolls, one of whom was readmitted; and 55 transferred to other institutions.

In this report I wish to discuss certain phases of our program rather than to describe the organizational set-up. Our approach to the educational problem of the children we serve is essentially as follows:

Our major responsibility is to train the children for eventual return to society so they will be able to make a successful economic and social adjustment. Our first responsibility is to give each child as much academic training as it is possible for him to accept and absorb. It is our feeling that he must learn enough of reading so that he will be able to interpret written orders and to follow their directions. He should also be able to read communications from others, to read and understand news reports and to do recreational reading. Likewise, he should be able to write with sufficient skill so that he can communicate his ideas to someone who is not present. He should know enough about arithmetic so that he can solve the problems that arise on the job and so that he can successfully handle money that he has earned. In conjunction with an academic program, a sufficient number of craft classes should be made available so that the child will learn to use a well-defined group of skills, each one of which may later become a part of his vocational adjustment. When he is old enough and has made a satisfactory advancement in his previous training, there should be a concentration on the training of the skills required in the work field preferred by the child and chosen by the staff as a result of known ability.
At times it has been disturbing to learn that a child, provided with placement, has not been working in the field of his training. We fully realize that it is not always possible for the workers in the county, in which the child has been a resident, to find the type of work that we recommend. Recent developments have convinced us that it is not of as much consequence as we had previously thought. The skills that have been learned can effectively be used in other areas of employment so that the success of the child in placement has been assured through the well-rounded program of training that has been provided.

It is very evident, that every activity the child enters into during the period of his working day, has training value so that the success of our program is not dependent entirely upon the concentration of work that is given to him in the school department during the school day. I would like to enumerate and briefly discuss some of these activities.

The separation of the mentally deficient children from the low-grades, who require only custodial services, and from infirmary and locked cottage cases is a definite advantage. The awareness of the presence of these cases on the same campus has the effect of creating a feeling of hopelessness in the minds of some children who otherwise could be expected, with proper attitude and stimulation, to absorb enough of what is taught to render them eligible for consideration for return to normal community living. The presence of individuals, for whom there is no hope for return to society, can and very often does develop in the minds of the higher grade individuals what may constitute a prognosis of their own future. It seems to be safe to assume that this situation may effect the attitudes of teachers and other employees as well as the children. The establishment of an institution with a campus of its own for the education of the high-grade mentally deficient therefore in itself constitutes a stimulation and should make it easier to establish a feeling in the mind of the child that he is in an educational institution geared to his particular needs. It has already been demonstrated after three years of work with the group of children, that we are privileged to serve, that they are beginning to think of us more as a boarding school than as a place for punishment or segregation.

Most of the institutions that provide training for the type of child we are serving at the Owatonna State School, provide for rather complete segregation of the sexes. Literature in the field was read and a thorough discussion of the problem was carried out. We could not escape the thought that if our children were to be trained for placement back into society that the relationship between boys and girls would have to be part of our over-all training program. Consequently, with some
apprehension, we set up our services on a complete co-educational basis. There was to be no segregation in the class-rooms and boys and girls were to have the opportunity to appear together in programs, in social functions and in such activities of the institution where it was logical and practical to have boys and girls together. Necessary safe-guards and restrictions were imposed. After three years of experience, it is our opinion that this phase of our training has definitely contributed to success in placement. We expected to have situations develop that would need very careful and intelligent handling. However, there has been a reduction in the number of problems and we are now convinced that our boys and girls are better prepared to meet the problems inherent in the relationship of men and women after placement back into their respective communities. It is interesting to note that girls, in conferences with their houseparents, teachers and social worker, will now do the perfectly natural thing by speaking rather freely and without embarrassment or hesitation about their boy friends and the boys likewise will speak about their girl friends. In the school department boys and girls will discuss their lesson assignments and work together in their preparation with a very small amount of silly type of reaction that was evident at the beginning of this program. There has been a noticeable reduction in the reported number of homo-sexual episodes. Dancing has become a real social experience, normally operated with better decorum than is sometimes found in supervised high school dances. Smutty and suggestive conversation has seemed to disappear when normal associations between sexes is provided for. Our greatest problem at this time seems to be with new admissions, but I believe it is safe to say that an exposure of this wholesome atmosphere has rather rapid effect in securing conformity. A simple statement of facts seems to be that decent conduct seems to be necessary for the enjoyment of accepted social relationship.

Our new children very frequently have very poor table manners. Often we observe that they do not know how to use the knife, fork or spoon and are not accustomed to eating without soiling the tablecloth around the plate. Conversation is often boisterous and loud and the throwing of food is participated in. Our dining rooms have become very important areas of training. We believe in using table linen with napkins. We not only allow but encourage conversation. Supervisors are present to help teach good table manners, the proper use of tableware, how to serve the children seated at the table and how to ask for additional helpings of food. The result of this training program has been very encouraging. This program of service is as basic as any other phase of our educational program. A better adjustment back to society is the inevitable result.
We often speak of the value of recreation and play in the full development of the child. These are important and should never be lost sight of. Our recommendations for appropriations include this field of activity and our resources in this area should be further improved. However, we often lose sight of and seldom speak of the necessity of teaching children how to work. The children we serve will of necessity be employed in the unskilled field. Some of the literature in this field seems to over-emphasize the training of the mentally deficient for work in fields that require greater skill than they are able to acquire. It is our feeling that one of our greatest responsibilities is to give our students a feeling of success that comes when the simple tasks have been well done. We must create a desire and a willingness to work as well as ability to perform in a rather restricted field. Cottage training and work outside of the cottage all serve a useful purpose. We must develop a sense of responsibility so that the child will feel that it is his duty to keep his bed made, his floors and bathroom clean and the doing of many odd jobs that become a part of the all-inclusive cottage program. When a child becomes old enough he is given assignments to work outside of the cottage. Care is taken to keep these assignments within the ability of the child to perform. This work includes giving help with the preparation and the serving of food; work in the laundry and hospital; the care of the grounds, flower beds, trees and shrubbery; the planting, weeding and harvesting of garden crops; assisting with farm work; the cleaning of the school house and gymnasium and many other duties that are required in the successful operation of an institution. Those who supervise and direct the work of these children are often called into conference so as to insure the intelligent assignment of work, proper supervision and are advised of limitations and restrictions as they become necessary. We have seen a noticeable effect on the attitude of the children in relationship to work assignments. Success makes for both pleasure and enthusiasm.

Early in the development of this new program it seemed necessary to agree upon a strict separation from the local community. This was a new venture and local residents were apprehensive and concerned. Little by little the restrictions were modified and reports of tolerance and acceptance were received. Permission to attend the local theatre under the supervision of a worker was allowed. Going down town for shopping or just for recreation was allowed. Groups appeared in churches on Sunday programs and children were taken in as associate members. Boy Scouts participated on an equal basis with the boys about town and were accepted without question. Attendance at high school athletic events became a rather common practice. The community acceptance of our children has
produced values that cannot be discounted. Participation in the affairs of the community has almost entirely eliminated the feeling of segregation and will very materially assist our students in participating in acceptable community activities after placement.

As we view our program at the present time, we can find many areas in which our services are not complete. We should have more psychological services. We should have a speech clinician. Our over-all medical services should be improved with the addition of certain consultants and specialists. Some of these improvements have already been provided for but adequate and satisfactory personnel cannot be secured. We should improve our diagnostic services so that the exact diagnosis of the child's deficiency will be known. More teachers, both in the vocational as well as the academic field, must be added, as soon as room and other facilities are available.

The physical needs of the institution have been reported to the Director and have been given his careful examination. Careful consideration must be given to the replacement of old and obsolete housing units and the construction of a vocational building. It also appears at this time that the present capacity of the Owatonna State School will not be adequate to take care of the demands that will be made upon it by the State. Consideration, therefore, should be given to an enlargement program. At the present time we urgently need more space for girls. If at all possible we should maintain the services of the Owatonna State School without setting up a waiting list. A much better job of training can be done if these children are entered at as early an age as possible, and not placed on a waiting list for some future admission. All of our recommendations are in the hands of the Director of the Division of Public Institutions.

I should be remiss indeed in fulfilling my duties if I did not at this time express a word of sincere appreciation for the faithful and intelligent service rendered by those employed at the State School. I am deeply indebted to each one of them. Likewise, I wish to sincerely thank Mr. Carl H. Swanson, former director, and Mr. Carl J. Jackson, present director of the Division of Public Institutions, and the entire staff of the St. Paul office for the very high type of cooperation that has been given to us during the period covered by this report.

MENDUS R. VEVLE
Superintendent
Owatonna State School
Owatonna, Minnesota
The Colony for Epileptics is located in Cambridge Township about one and a half miles southwest of the Village of Cambridge in Isanti County.

Authorization was granted by the 1919 Legislature for the selection of a site for a colony for epileptics from state owned lands. In 1923 the Legislature amended its law authorizing the purchase of land for this purpose resulting in the present location.

The institution was opened in 1925. At that time it consisted of one self-maintaining cottage. The institution has grown from this one cottage to its present size. We now have an administration building, which houses the main offices, wards for children, the hospital wards, one for girls and one for boys, the kitchen, bakery and laundry. In addition to this building there are ten outlying cottages with approximately one hundred beds each, a power plant, auditorium and farm buildings.

J. Gully, M. D. ___________________________ Acting Superintendent
J. T. Sherman, M. D. ___________________________ Physician
D. H. Mesker, M. D. ___________________________ Physician
D. Eitel, M. D. _______________________________ Consulting Surgeon
F. Wipperman, M. D. __________________________ Consulting Oculist & Aurist
R. M. Curran, D. D. S. ___________________________ Dentist
E. F. Gregory ________________ Retiring Steward
E. Bang ___________________________ Present Steward
Miss Helen Weld ___________________________ Principal

Capacity of institution ___________________________ 1,108
Number of patients June 30, 1948 ___________________________ 1,107
Area of grounds, acres ___________________________ 359
Cleared, acres ___________________________ 23
Creage under cultivation ___________________________ 164

Expenditures:

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<tr>
<th>Description</th>
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<th>1947-48</th>
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Total expenditures $388,334.85 $388.44 $490,622.81 $461.54