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S E R V I N G M I N N E A P O L I S A N D H E N N E P I N C O U N T Y

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SECTION ONE

A STATEMENT OF PHILOSOPHY

As a matter of basic social philosophy, we are opposed to charges leveled against parents for the care and treatment of the Mentally Retarded in State Institutions.

Why?

THE GIVE AND TAKE OF MODERN LIVING

Today we are living in a complex, highly integrated society. Our constitutions, state and federal, are designed to give each of us the maximum amount of personal liberty. Our laws, however, enacted mainly to solve the complex problems of highly integrated society, require all of us to restrict our liberties for the common good.

There was a time, within our memories and almost within our lifetimes, when each American family operated largely on the "self sufficiency" system. The family built its own house, grew and preserved its own food, and made its own clothing. The inefficiencies of this system, plus lack of concern for restricting traditions gave great impetus to science and invention and motivated Americans to convert to more efficient methods for supplying their needs and wants.

Today, each wage earner is primarily a specialist with, on the average, a \$10,000 investment in equipment and buildings backing up his job. His job is a vital element in an extremely complicated, technical operation that ends up providing him and his family with a standard of living judged to be the highest ever attained any time or anywhere.

Along with this specialization has come a greater dependence of one man to another, of one factory to another, of all of us to one another, from the North to the South, from the East to the West. In short, it has created our present day, highly integrated society.

This ever growing trend to specialization has made it almost mandatory for people to preoccupy themselves largely with intricacies of education, training, and earning a living. The complex problems springing out of our highly integrated society have been left in the hands of other, highly trained specialists - the social planners and our elected officials.

The growth and development of social planning and social legislation has paralleled the growth and development of the materialistic aspects of our society. We all know of the spectacular materialistic growth that has taken place in our country in the last twenty five years. The growth in social planning and social legislation has been just as dramatic and just as spectacular.

() Today - the State is "our brother's keeper", our good Samaritan!

This fact may be repugnant to the rugged individualist, but the great depression of the thirties taught people once and for all, apparently, that health and welfare must be the primary responsibility of the state.

() Today, as the social planners advance solutions to our problems, the people, through their legislators, accept them and pay for them in the form of taxation.

TAXATION AND GOVERNMENT SERVICES

The changing times, as described above, now find the people subjected to the highest level of taxation in history. The percent of income now paid out in taxes is so high as to even exceed the percent of income formerly reserved for savings intended for emergencies and old age.

These tax monies pay for such people-generated needs as:

- The armed forces
- Police and fire protection
- Governmental bodies-legislative, executive, judicial
- Health and Welfare
- Education
- Recreation in the form of parks, forests, wildlife conservation
- Roads and Highways
- The acquisition and dissemination of technology
- Old Age assistance
- Social Security
- And so on

17 These services are paid for by the taxation of all. No attempt is made to tax on the basis of specific use of services.

No attempt is made to make such services appreciably or totally self supporting on the basis of fees charged to those who use the services.

When charges are made for services, they constitute merely token payments.

In return, the people feel entitled to these services when their need for them arises. Farmers, businessmen, veterans, the aged and infirm, sportsmen, students - literally everyone has his hand in the public till, one way or the other.

CHILDREN, HANDICAPS, THE MENTALLY RETARDED

Children are the raw material out of which society perpetuates itself. The children of today inherit the country of tomorrow. The billions we spend today for national defense is money wasted unless we have children to become tomorrow's soldiers.

A nation with children is a nation with a future. A nation with an ever declining birth rate is a nation doomed to extinction or subservience.

Society has a tremendous stake in its children. Communistic and Fascist governments take complete charge of their children. Even the Western world places many restrictions on parents as they raise their children. If we in America ignore these restrictions, we become delinquent parents and our children are taken from us.

This point is raised to dispel the idea that children are the exclusive responsibility of their parents, and that it is a matter of no moment to anyone else whether or not parents have children, and whether or not they raise them to become conforming members of society. Society takes a considerable interest in its children and inflicts itself upon parents and their children in many ways.

Since society needs children, it must also accept the liabilities that go with the birth of people. The U. S. Department of Education estimates that 8.0% of all children born are defective. A breakdown of this, according to types, follows:

Mentally Retarded	2-3%
Speech Defective	2.0%
Deaf and Hard of Hearing	1.5%
Crippled	1.0%
Blind and Partially Seeing	.3%
Epileptic	.2%
	<hr/> 8.0%

In addition, these following types of children present special short and long term problems:

The Mentally Gifted	2.0%
Emotionally disturbed	2.5%
Police victims	0.3%
Cerebral Palsied	0.3%
Rheumatic Heart victims	0.7%
	<hr/> 5.8%

The mentally gifted are mentioned only to-emphasize that they represent the most priceless treasure society has, if only society will make the most of its opportunity with them.

Except for relatively rare and isolated instances, the birth of these defective children is in no way predictable. They are born to the rich and the poor, the weak and the strong, the bright and the dull. They show no difference for race, creed, or color.

Most of these children, with proper training and with necessary allowances being made for their defects, can become productive members of society. The mentally retarded, however, by definition, are destined to become the least capable members of society.

Society in general, and especially in Minnesota, has accepted its responsibility for her defective children. Minnesota is helping the blind, the deaf, the crippled, the delinquent, and the mentally retarded. Minnesota has shown the compassion and understanding that stems from Western civilization's code of ethics. The people of Minnesota are truly practicing great works of charity as their Bibles direct them to do.

To date, these rather considerable works of charity, these enlightened public services, the various measures taken to protect society are all being paid for largely out of tax monies. This policy is consistently taken with people who benefit from the services furnished by our governments.

We hold, therefore, that it would be grossly inconsistent, and hence, grossly unfair, if the governmental services given to the mentally retarded were subject to considerable charges.

Why Charge Only the Retarded?

X4 If charges must be made for these services, why not for others? Why not for children attending school? For services provided for the other handicapped? Why shouldn't hunters and fishermen pay for the cost of fish and wildlife services? Why not the veterans? Why not a charge for using the parks? Why not a fee whenever a squad car is called? Or the Fire Department? Why not a statement when a child is checked over in school by a public health nurse or doctor? Shouldn't the farmers be assessed for maintaining the U of M farm school? For the research done there on seed development, animal feeding, disease prevention? Many other examples could be given.

But why only the mentally retarded? It is costing the state \$5,000,000. per year to care for the retarded. This amounts to \$1.67 per year for each man, woman, and child in the state. Is this \$1.67 per year per capita cost the reason for our high taxes? Is this \$5,000,000. the straw that is breaking the back of the \$337,000,000. expenditure it takes each year to provide our state services?

WHO BENEFITS BY INSTITUTIONALIZING THE MENTALLY RETARDED?

In our discussions so far, we have freely admitted that the people of Minnesota, by providing institutional space for the mentally retarded in need of such care, are showing a high degree of social responsibility and Christian charity.

However, since our discussions relate to "charges" it is pertinent to examine the question:

Who Benefits by institutionalizing the mentally retarded?

Three groups do:

- The mentally retarded
- Their families
- Society, in general.

The Retarded Benefit

The retarded benefit because they receive humane, understanding, custodial care, and sometimes, a little bit more than that. The care they receive in Minnesota institutions ranges from what we describe as humane, minimum standard custodial care, in most cases, to a level of care, in some circumstances, which is about as good as could be given anywhere. In addition, the retarded benefit by association with their own kind. Many find it frustrating and confusing to live under conditions normal for the rest of us.

The Family Benefits

Their families benefit physically and psychologically. Many of the retarded are of such low mentality that they simply cannot do anything for themselves. Caring for them is a perpetual burden. Others are quite active, and not knowing right from wrong, safety from danger, propriety from impropriety, are literally "Bulls in China Shops." They have to be watched continually. In time they wear their families down, especially the mothers. Society loses, if in order to keep one retarded person out of an institution, one or more normal people are converted into physical and mental wrecks.

The Family Benefits (Continued)

Double standards of behavior must be established in the family. One for normal children, and literally none for the retarded child. The brothers and sisters suffer from neglect or become resentful because of the disproportionate amount of care given to the retarded child.

Other families just cannot take the emotional blow which results with the birth of ^{the} retarded child. In this they are sometimes influenced by a certain segment of the medical profession that strongly advises parents to institutionalize the child and never take it into the home. "Just forget about ever having such a child" is about the gist of such advice.

Society Benefits

And last, but not least, we know that society benefits by having certain of the retarded in institutions.

Indeed, institutions came into being in the modern sense, less than 100 years ago, as the result of certain elements of society recognizing the need for withdrawing and insulating the low grade retarded from the whirl of everyday living.

The Social Problems

In 1904, a British Royal Commission was appointed to consider methods of dealing with imbeciles, feeble-minded or defective persons not certified under the Lunacy Laws. In 1908 the commission reported that there existed in the community large numbers of mentally defective persons whose training was neglected and over whom insufficient control was exercised. Many were committed to prisons for repeated offences; many who did not require careful hospital treatment were to be found crowding the lunatic asylums; and also many were at large, both adults and children, who, in one way or another, were incapable of self-control and therefore exposed to constant moral danger. The Commission recommended the creation of a system whereby these mentally defective persons could, at an early age, be brought into touch with some friendly authority, trained as far as need be, supervised during their lives in co-operation with their relatives, or detained and treated as wards of the state. (See Penrose, The Biology of Mental Defect page 7)

The Social Conscience

"Especially pitiable is the case of the large number of feeble-minded persons in our State, over 1000 in number, who are not supported by its bounty. A large portion of these are scattered among our almshouses, filthy, diseased, untaught, and in many cases treated with shocking indifference, and in others with more shocking cruelty.

"Others are in the nominal care of ignorant, poor, or heartless relatives, to whom they are a burden and a shame, and by whom they are permitted to descend to a level lower than that of a beast.

"The whole are a blot upon civilization, a reproach against our enlightenment and Christianity, an indignity upon the race, and a shame to our State and people.

The Social Conscience (Continued)

"Those sightless eyes, deaf ears, mute tongues, and vacant minds are a perpetual witness against us before God and man; and hereafter we cannot escape our responsibility by pleading ignorance of the facts."

From: Report of the Commissioners of the
Deaf and Dumb, Blind and Feeble-minded
in the State of New Jersey, for the year 1873

Other societies, including the State of Minnesota, have taken the same approach.

It is interesting to note that in the development of institutions governments took over this responsibility from philanthropists and Church groups who pioneered in segregating and caring for the low grade retarded. The case loads and the high degree of charity required for such work was too heavy for the all too few people willing to engage in it.

So, for the good of all, governments had to step in and fill the unmet needs.

Social Pressures

In addition to lofty humanitarianism and the social problems presented by certain of the retarded, social pressures also drive some of the retarded into institutions.

Why? Because, as indicated above, the nature of the low grade retarded, is such as to offend and displease normal people.

As one visits a typical state institution, it can be seen that while many of the retarded show no outward signs of their mental condition, at least half of the inmates are ugly people to behold. Many suffer multiple handicaps and are grossly deformed, physically. Many have reprehensible personal habits. Many first time visitors to such institutions are profoundly shocked when they see these retarded. Some of these visitors become nauseated and cannot continue the "inspection" trip.

Retarded people, as described above, are not, for the most part, tolerated in normal neighborhoods. If their parents expose them to public view, the neighbors rebel and vent their displeasures in many ways. Many pressures, direct and indirect, subtle and blunt, are brought to bear on the parents to remove the offending retarded child, or adult.

And so we know that many of the retarded are in institutions because people other than parents want them there.

To conclude, it is interesting to note that in Minnesota, the following restricting laws affecting the retarded have been passed:

1. A retarded person under guardianship cannot marry.
2. A retarded person cannot hold a driver's license
3. A retarded person under guardianship can be sterilized
4. The law allows any reputable person to petition for commitment.

SECTION TWO

THE MOTIVATION BEHIND CHARGES LEGISLATION

WHO WANTS TO CHARGE THE PARENTS

WHY?

SUMMARY

1. Based on our experiences with the 1953 and 1955 charges legislation, it is not clear to us who wants charges legislation and why.
2. We recommend, therefore, that the current Public Welfare Legislative Interim Commission clear up this point and mention in its report those who want this legislation, and the reasons for so wanting.
3. There is no evidence that parents are using state institutions as places in which to dump their "unwanted" mentally retarded children.

The data indicates that fewer parents than ever, on a comparative basis, are choosing to place their children in the institutions.

4. The population of the institutes is slowly rising because:

The patients are living longer
The patients are being admitted younger

5. The History of Minnesota laws pertaining to the Mentally Retarded indicates:
 - a. An early philosophy of free care for the blind, the deaf, the dumb, and the feeble-minded. \$40 per year was to be furnished to cover the expense of clothing, postage, and transportation.
 - b. Restrictions placed on the retarded "for the good of society"

The Mentally Retarded cannot marry
They cannot be granted a driver's license
They can be excluded from Public Schools
They can be sterilized
Any reputable person can petition for their commitment.
 - c. A philosophy of including the retarded as part of an overall approach for dealing with defectives.
6. The philosophy, motivations and practicalities, attendant to the 1953 charges legislation, and especially the 1955 proposed legislation suggests an abandonment of the earlier legislative philosophies, in place of new ones which:
 - a. Place great stress on service being rendered by the State to those in institutions.

The fact, as developed in Section One - that institutions also render a great service to society, is minimized by omission
 - b. Evidence an unexplained concern for County Welfare Boards
 - c. ~~Tend to be punitive in nature, rather than plans for raising money for the State~~
 - d. Show little concern for fair and workable plans for assessing and collecting the monies.
7. In view of "alleged" experiences with gentlemen of The Department of Public Welfare writing charges bills, we recommend that:

Hereafter, charges legislation and the writing of the bills pertaining thereto, be left in the hands of the elected representatives of the people, the legislators.

THE MOTIVATION BEHIND CHARGES LEGISLATION

Who Wants to Charge Parents and Why?

Since the subject of this study is "Charges Legislation" it is pertinent to inquire into the motivation behind such legislation. Who is it that wants such legislation, and why is such legislation desired?

Strangely enough, the answer to these questions cannot be given with objective accuracy. Most people we talk to about this tell us that "the other people" want this legislation, not they.

For example, during the 1955 session, when a new charges bill was introduced, some of the bill's authors told us they just signed the bill as a favor to the Division of Public Welfare, who really wanted the bill. The gentleman in the Division of Public Welfare, who had the bill drawn up, said he did so only as a favor to the legislators who wanted such a bill.

Hence our questions. Would it not be ironical if no one really wanted a charges bill, and yet one were passed because everyone assumed everyone else wanted it?

WE SUGGEST, THEREFORE, THAT YOUR LEGISLATIVE INTERIM COMMISSION CLEAR UP THIS POINT AND DESIGNATE IN YOUR REPORT THOSE WHO SO EARNESTLY DESIRE THIS LEGISLATION.

However, we aren't so naive as to believe that there is no interest in any quarter for charges legislation. Those who want this legislation may not want to come out in public and say so but this doesn't lessen their interest in it.

So, we shall now examine some of the reasons why some people want this legislation. By so doing, we shall gain further perspective and enlightenment.

DUMPING - BUILDING UP THE INSTITUTION POPULATION

Some of our friends in and out of the legislature have told us that there is some concern that parents are using the institutions as a place to dump their unwanted children.

If the charges for institutional care were made stiff enough, this practice would be greatly reduced, so it is said.

Others have suggested that it would be to the bureaucratic interests of the county welfare boards and the Division of Public Institutions to increase the number of people undergoing commitment and being admitted to the institutions. The more business, as it were, the larger the bureaucracy! The easier to justify more buildings and another institution!

If there were any truth to these accusations, then the easiest and most effective way to remedy the situation would be to tighten up on the commitment and admission requirements.

We shall now answer the dumping accusation.

In table I and figure I we submit figures showing the number of births and the number of commitments, by year, since 1930. Since we teach that mental retardation is a population characteristic of unvarying magnitude, unrelated to time, it follows that the number of mentally retarded people found in any society is dependant upon the numbers of people in the society. Also, since most cases of mental retardation are already predetermined at birth, it follows that the number of people seeking institutional space will depend upon the number of people being born.

The data given in table I quite dramatically dispels the accusation that people are dumping the retarded in our state institutions.

ALTHOUGH THE NUMBER OF BIRTHS HAS INCREASED FROM 47,500 IN 1930 TO AROUND 80,000 IN RECENT YEARS, THE NUMBER OF COMMITMENTS HAS REMAINED ALMOST THE SAME.

The truth of the matter is that although the quality of care being given in state institutions is better now than it ever has been, fewer parents, on a comparative basis, are choosing to place their children in the institutions.

It is evident that the love parents have for their defective children is, if anything, greater today than in the past.

WE PARENTS ARE ALSO FULLY AWARE THAT TODAY IT IS ECONOMICALLY IMPOSSIBLE AND SOCIALLY INADVISABLE TO BUILD ELABORATE INSTITUTIONS TO CARE FOR EVERY MENTALLY DEFICIENT PERSON.

WE RECOMMEND THAT ONLY THOSE PERSONS WHO CANNOT BE CARED FOR OR TRAINED IN THEIR OWN COMMUNITIES SHOULD BE INSTITUTIONALIZED.

Before leaving this subject, we want to point out that the total institution population is slowly growing even though the per capita rate of commitment is not increasing.

The retarded in the institutions are living longer, thanks to the improved care they are receiving, and due to the advances in medical science which have also increased the life span of all normal people.

Parents are also committing their children at a younger age than was the case formerly. Part of the reason for this is due to the advice given parents by some segments of the medical profession. The favorable publicity given to state institutions in recent years also is a factor. Parents no longer fear committing their children to state guardianship.

Another change is occurring in the institutions population. A larger proportion of those admitted are now the low grade types, the types for which institutionalization represents the optimum solution for their care.

THE HISTORY OF SELECTED LAWS RELATING TO THE MENTALLY DEFICIENT

In order to throw further light on charges legislation, we shall review herein, very briefly, the History of certain laws relating to the mentally deficient.

In the review, we have concentrated on laws which

- a. relate to charges
- b. place restrictions on the retarded
- c. include the retarded as part of an overall approach for dealing with defectives

For our purposes, this is proper. But lest we appear to be biased, and unappreciative of the very wholesome approach the legislators have taken over the years to the mentally retarded, we would like to include the following summary of a review of laws of Minnesota relating to the mentally deficient and epileptic, prepared by Minnesota Division of Public Institutions, Bureau for The Mentally Deficient and Epileptic, November, 1952.

"1851 through 1951 - 100 years - is a long enough period of time to make possible some perspective in seeking for the underlying thought which has caused changes in the laws of Minnesota. Looking for this it seems there has been almost continuous progress through most of the time in recognizing feeble-minded persons as individuals with differences from one another, as well as from those who are not feeble-minded even though they may have other mental or physical handicaps. Also there has been a continuing recognition of the needs of the epileptic person. The responsibility of the state to the individual and the community has been increasingly accepted. A quick review will indicate this, and in general the same changes will be found in other states who began to recognize their responsibility at the same early date.

"In the earliest days, incompetents were recognized and all classed together as "insane". Then followed institutional care for all of them as one group. Next there was a differentiation with the "imbeciles" sent home from the institution. Then came institutional training for them with children having physical defects. Finally a separate institution for the feeble-minded was built in 1905.

"Social aspects were also recognized. A drastic marriage law was passed in 1901 but modified in 1905. As far back as 1907 recognition was given to the fact that some feeble-minded may be in need of a rather permanent plan of institutionalization because of delinquency.

"With the growth of the public school system and recognition of the possibility of training, classes for the feeble-minded in the public schools were made possible by law in 1913. These, however, could be organized only in a fairly large community. Nevertheless, the law was a further indication of an enlarged conception of the State's responsibility for the feeble-minded not in an institution. Following the provision of special training in the public schools came recognition of the dependence of subnormal persons upon a good environment. This was to be provided by supervision for an indefinite time in accordance with the 1917 guardianship laws. In 1925 an increased consciousness of the eugenic aspect resulted in the sterilization law. In this same year more adequate care for epileptic patients was made possible by opening a new institution. By the amendment of 1927 with specific provisions for the establishment of "homes" or "club houses" for wards who could support themselves in whole or in part, recognition was given of the possibilities of plans outside the institution. In 1935 the guardianship law was enlarged to include the epileptic.

"Since 1935 there have been some laws showing increasing social consciousness though many have been chiefly for the purpose of clarification or to make it possible to secure better administration. In 1947 the term mental deficiency was substituted for feeble-minded, apparently in response to a feeling of hopefulness of accomplishments which could be brought about by care, education and training. The continuing emphasis on better care in the institutions and the recognition of the need for more space are both indications of the continuing growth of social consciousness in the community and the legislature." (End - Review of Laws)

THE HISTORY

In 1822 a commission to examine patients was established. The commission was given authority to transfer "idiots" and "feeble-minded" children to the asylum for the deaf, dumb, and blind at Faribault.

In 1881 an act was passed to organize a school for "idiots" and "imbeciles" to be established in conjunction with the Minnesota institute for the Deaf, Dumb, and Blind, at Faribault. The department was styled "The Minnesota Institute for Idiots and Imbeciles". It also provided that relatives were responsible for an amount not to exceed \$40 per year. If indigent, the county would pay.

In 1887 was passed an Act for The Better Regulation of The Minnesota Institute for the Deaf, Blind, and Feeble-minded. The name of the institution was changed to "The Minnesota Institute for Defectives" with three separate departments, School for the Deaf, School for the Blind, and School for the Feeble-minded. All inmates must be state residents.

CARE OF ALL WAS TO BE FREE, but relatives must furnish clothing, postage, and transportation and county charges not to exceed \$40.00 per year was to be paid to cover these expenses.

(Note how the retarded were being considered in a parallel manner with the blind, the deaf, and the dumb.)

In 1905 a separate institution for the feeble-minded and epileptic was created. The same entrance requirements and instructions contained in the 1887 law were continued, including the \$40.00 charge.

In 1901 was passed the first law prohibiting the marriage of people who were epileptic, imbecilic, feeble-minded, or insane. The Board of Control was also established.

In 1907 a Judge of the District Court was permitted to send a person under indictment, "but found to be insane, an idiot or an imbecile," to the proper state hospital or asylum for safekeeping and treatment.

The Board of Control was also authorized to employ parole agents.

(Note, as mentioned in SECTION ONE, how society interferes with the rights of individuals if it is to her best interests.)

Along the same line, in 1914 the attorney general ruled that a feeble-minded child could be excluded from the public school by the school board. In 1915 because of this, and the fact that teachers were being trained at Faribault, the legislature provided for special classes for subnormal children. Certain conditions were established. If met, the state would pay \$100 for each pupil.

In 1917 the law defined as feeble-minded as any person, minor or adult, other than an insane person, who is so mentally defective as (to be incapable of managing himself and his affairs and) to require supervision, control and care for his own or the public welfare.

In 1917 also, the law provided that the feeble-minded were to be committed to the personal guardianship of the State Board of Control. Specific authority was given for the placement in any appropriate institution or for supervision outside.

In 1917, provision was also made for the establishment of County Child Welfare Boards.

Also in 1917, the law permitted any reputable persons to file a petition in the probate court asking for a commitment hearing.

In 1925 was passed a law permitting sterilization. Definite restrictions and provisions were included.

In 1931 the county was made liable for the \$40 payment if the family failed to pay. Action by the county to recover the payment was made possible.

In 1935 the legislature passed a new probate code. Epileptic persons were committed, for the first time, to the care and custody of the Board of Control. The new laws also provided that "any reputable citizen may file in the court of the patient's settlement a petition for commitment. Previously, county residence or relationship was required for the petitioner.

(Note that such a law made it possible for any citizen to petition | that a retarded person be made a ward of the state.)

These laws also defined the details of the commitment court hearing and provided the retarded person with safeguards and adequate representation to protect his interests.

Many other laws were passed up to 1953. These laws added to and clarified the policies established by the earlier laws. The spirit and intent of these laws were admirable and had both the interests of society and the retarded clearly in mind.

1953 INTERIM COMMISSION REPORT

The Interim Commission on youth conservation and mental health problems recommended in 1953 that a charge of 25% of the average per capita cost of the Minnesota School and Colony and Fairbridge hospital be assessed against relatives or if the responsible persons cannot pay that the charge be paid by the County of legal settlement.

The Commission cited these factors as relevant for consideration:

1. "The value of \$40 per year compared to the operating costs in 1885 and 1952 defies comparison"

(Note: The original laws state that the care was to be free, and the \$40 was for clothing, postage and transportation.)

2. "\$40 per year is considerably less than the cost of supporting the normal child in an average home. The quality of care (in Minnesota Institutions) is good."
3. "The high per capita cost at Owatonna reflects the cost of education of educable retarded children."

(Note: Very true if done in institutions. Not true if done in special Public School classes.)

Since the per capita costs were running around \$925. per year, say \$1000, 25% would amount to \$250. a year. The county liability, in 1954 would have been increased from $\$40 \times 4,727$ or \$189,080 to $\$250 \times 4,727$, or \$1,180,000.

This proposed increase in county liability produced an immediate uproar from the County Boards who induced the Commission of Public Welfare to do something about it.

The net result was a new Bill which established:

(a) 52% of the per capita costs (then running around \$925 per year) as the maximum parent liability.

(b) But only \$80 per year as the maximum county liability.

Therefore, the county liability was increased from \$189,080 to \$378,160 per year instead of the proposed \$1,180,000.

(c) The bill indicated that the maximum of 52% should be paid according to "ability to pay" but no schedule was suggested. If parents refused to pay the 52%, then the counties could collect \$80. from the parents.

NO ONE ADMITS TO WRITING THIS BILL. THE AUTHORS CLAIM THE ONLY BILL THEY KNOW ABOUT WAS THE OFFERING OF THE PEOPLE. SOME SAY THAT THE COMMISSIONER OF PUBLIC WELFARE DRAFTED THE BILL. THE COMMISSIONER DISCOUNTS ANY KNOWLEDGE OF SO BEING.

Since no procedure for determining "ability to pay" was established, an employee of the Division of Public Welfare compiled a schedule which was submitted to the County Welfare Boards for their guidance.

Each county welfare board, however, is free to interpret the ability to pay provision as it sees fit to do so.

X Thus parents in one county have no assurance that they are being treated the same way as are parents in another county.

An example of the suggested schedule, and the wording of law follows:

A family of 4, with an income of \$5,280. would be asked to pay \$480. If their income was \$1 less, or \$5,279. they would be asked to pay only \$80. Such a pay schedule, inherent with the wording of the law, is hardly fair or realistic.

This is the law which is now in effect.

1955 New Charges Law Proposed

In 1955 a new charges law was drawn up for legislative consideration. Its authors were former members of the 1953 Interim Commission.

As stated in the beginning of this Section TWO, some of the authors told us that they signed the bill as a favor to the Division of Public Welfare, as "they" were pushing for such legislation. Actually the bill was being pushed by one gentleman of the Division. This man is no longer with the Division. He claimed, publicly, that he had written the bill, only as a favor to the legislators.

Privately, he admitted he was strongly in favor of the bill, feeling that parents ought to pay for the care being given their children.

As will be explained shortly, this bill was even more poorly written than the 1953 bill. In addition it was punitive in nature, and would have subjected parents to some fairly rough and arbitrary treatment not at all in keeping with the considerate relationships normally in effect between the citizens of Minnesota and their State and County government.

In view of both the 1953 and 1955 "alleged" experiences with gentlemen of the Division of Public Welfare writing bills, and in view of the basic philosophy of government which holds that elected legislative officials enact legislation and that the executive branch of the government (and the non elected civil service employees hired therein) administer the laws, WE HUMBLY RECOMMEND THAT:

HEREAFTER, CHARGES LEGISLATION AND THE WRITING OF THE BILLS PERTAINING THERE TO BE LEFT IN THE HANDS OF THE ELECTED REPRESENTATIVES OF THE PEOPLE, THE LEGISLATORS

The 1955 bill proposed:

1. The charges for the mentally retarded be set at 52% of the per capita cost. For the mentally ill, the charge was to be 100% - the per capita charge.

2. Counties would only be liable for 25% of the per capita charge
3. The counties "shall" collect and retain up to the full amount certified, from the patient, his estate, his spouse, children, or parents in that order.

X (Note: If the intent of charges legislation is to help the state pay for the services it renders thru its institutions, why are the counties to keep more than the 25% which represents their liability?)

The commissioner (of Public Welfare?) shall establish interpretive regulations to encourage (not require?) uniform policy amongst the counties, and may (not require?) prescribe uniform records to be kept by all counties.

5. A County Welfare Board may administer oaths, take affidavits and testimony, examine public records, subpoena witnesses and the production of books, papers, records and documents in determining ability to pay and conditions affecting collections.
6. The county shall collect the amount due the state, and to cover its expenses, may retain 50% of the amount collected.

THIS PROPOSED BILL SHOWED GREAT CONCERN AND CONSIDERATION FOR THE COUNTIES. IT SHOWED VERY LITTLE CONCERN FOR THE STATE AND MORE FOR THE CITIZENS OF THE STATE AGAINST WHOM IT WAS DIRECTED. THE ONLY POSSIBLE JUSTIFICATION FOR A CHARGES BILL WOULD BE TO RAISE MONEY FOR THE STATE WHO FINANCES THE INSTITUTIONS. THE BILL FAILS MISERABLY AS A PLAN TO RAISE MONEY FOR THE STATE.

Once these matters were brought to the attention of the legislators, and the so called authors of the bill, the bill was rejected by them as a grossly unjust piece of proposed legislation.

SECTION THREE

SPECIFIC RECOMMENDATIONS FOR CHARGES LEGISLATION

RECOMMENDATIONS FOR CHARGES LEGISLATION

It should be clear from sections One and Two, that The Minneapolis Association for Retarded Children is opposed to Charges being leveled by the State or Counties for the care of the Mentally Retarded in State Institutions because:

- (1) It is against the present day philosophy of public services and policies of taxation
- (2) It is discriminatory
- (3) Society also derives many tangible benefits from institutionalizing the low grade mentally retarded.

However, if charges legislation is to be forthcoming in spite of our objections, we would recommend a bill embodying the following measures:

- (1) Responsibility for payment be limited to Parents
- (2) Parent responsibility be limited to such time as the child is institutionalized before its 21st birthday.
- (3) Minimum charges be established at \$60.
- (4) Maximum charges be established at \$250. as recommended by the report of the 1953 Legislative Interim Commission Relating to Mental Health Programs.
- (5) The State shall be the exclusive collection agency.
- (6) The Counties shall be liable to the State for an additional amount of \$80. per patient, per year. The Counties are presently paying this amount for approximately 65-70% of the total institutional load.
- (7) The amount to be collected, as between the minimum of \$60. and the maximum of \$250. shall be determined as an amount equal to the total state income tax paid by the parents

This is a fair, equitable, time tested method of determining a payment based on ability to pay. The mechanics for setting up both the computation, enforcement, and collection of the amount due, is already in being.

Such a system will protect the parents from unnecessary prying into their affairs, and will keep county social workers free to do social work.

- (8) The counties can not collect their charge of \$80. from the parents.

TABLE I.

NUMBER OF NEW COMMITMENTS AND NUMBER OF BIRTHS
IN MINNESOTA - - - BY YEARS

<u>NO. OF COMMITMENTS</u>	<u>NUMBER OF BIRTHS</u>	<u>YEAR</u>
400	47,500	1930
485	46,900	1931
450	46,400	1932
510	44,540	1933
490	45,900	1934
600	46,000	1935
550	47,600	1936
550	48,000	1937
650	50,000	1938
660	50,200	1939
510	53,180	1940
500	54,540	1941
400	58,870	1942
340	38,360	1943
350	35,750	1944
360	53,140	1945
370	67,300	1946
370	75,470	1947
370	72,660	1948
370	74,020	1949
370	75,290	1950
480	80,000	1952
440	79,170	1953
420	80,620	1954
450	* 60,098	1955

* 73,698 to November - December was estimated at 6,400