

## POINT OF VIEW

The policy of placing the mentally handicapped into the community—although taking pride of place in many recent utterances and publications—is by no means a novelty.

Quite a number of homes and hostels have in the past been set up in urban areas, and although this was often dictated by circumstances of an exclusively financial or domestic character, the process did represent a phase of integration. Unfortunately, it was not accompanied by any meaningful progress worth speaking of.

What seems to be imperfectly appreciated is that whereas there are a variety of factors, no matter where the home is placed, which contributes to the difficulty of administration and lack of progress, there are also some positive factors which definitely favour those homes which are sited in rural—or to use the misnomer—“isolated” areas.

The question we often fail to ask is whether those responsible for the setting up and for the running of these establishments are aware of the need to integrate irrespective of where they are sited.

This factor of “awareness” is basic to the problem of integration, and so much is this the case that one comes across homes within urban, at times densely populated areas, whose residents are, and probably feel, sadly isolated; certainly not as free and socially accepted as is the case in some homes in outlying districts.

The writer can speak with some personal knowledge of one residential village in Berkshire. It started over twenty years ago with a small group of children sheltered in an old mansion in rather solitary surroundings, some miles away from any urban area of any magnitude.

The neighbours—the few there were within walking distance—were neither friendly nor particularly unfriendly.

But one ruling laid down in the earliest days was religiously carried out. It was to be an “open” home, later on an “open village,” and members of the staff and everyone else concerned was to encourage “communication” with the surrounding world.

This was by no means an easy or straightforward task—especially so in the early years—when that mysterious thing labelled “climate of public opinion” was nothing like as favourable as it is today.

But even in those early days this policy brought its rewards, meagre to start with but steadily increasing—and it was this policy that was to a great extent responsible for the development of a feeling of “belonging.”

The process has been greatly accelerated and intensified during the last five or six years, and it is fair to say that nowadays the children, adolescents, adults, staff and all of us having anything to do with this residential village feel, and justifiably so, part of the locality—socially as well as geographically.

Not only do the residents have a full life within the village, but there is a continuous flow from and to the village of parents, students, social workers, visitors and friends, as well as professionals of the various disciplines—all of whom get a friendly reception, not least from the resident population.

The cross-fertilisation of ideas this brings in its train cannot be exaggerated, nor for that matter can one fail to notice the sense of importance it affords to the adolescents and adults living in the village.

No one would wish to quarrel with the view that mentally handicapped people could achieve a lot more than generally acknowledged, if only they were not shel-

tered from many of life's experiences. Often it is the village rather than the urban conglomeration that affords the better, the more practical means for assimilating these experiences.

Maybe one should add that the strength of the argument depends a great deal on what we consider "experience." There is a lot to be said in favour of facing life—in promoting the good and in discouraging the evil, i.e., the sort of experiences damaging to the social fabric.

Unfortunately the mentally handicapped is often unable, even after long and careful training and preparation, to distinguish between the socially good on the one hand and the damaging on the other, and it is not fair to place him in a situation which could in the normal run of events compel him to have to do so.

There is of course a lot to be said for the view that one of the ways to make our world aware of its responsibilities is not to hide the facts but to be frank about them. It is sound doctrine, always providing the process of making the world wake up is not inextricably bound up with injury, mental or physical or both, to those least able to fend for themselves.

On the other hand it has proven practicable and, given a modicum of good will and imagination, far easier to obtain all round progress when away from some of the strident and less acceptable features of town life.

The Adult Training Centre, an important factor in the life of the adult mentally handicapped, is coming in for a great deal of criticism. Some of it is unfair, if for no other reason than that it must take time for the several agencies involved—education, medical and social services—to find ways and means of blending their respective routines into one harmonious and meaningful operation. It is good to know that the Hester Adrian Research Centre is investigating, and no doubt in due course fresh light will be shed on the subject. Meanwhile it is, I believe, fair to say that the training and adult education obtainable in the "residential village" is at least equal to that of the progressive Adult Training Centre and well ahead of most of them.

There has admittedly been a change of heart in the community, and the position today is a long cry from what it was some thirty years ago when the writer first became interested in the subject. But all the same, we are only just beginning to get to grips with the problem in its many facets and—so far at any rate—many of these facets have been handled to better purpose away from the madding crowd.

In fact we are continually reminded by the endless succession of incidents as mirrored in the press, broadcasting and television, that before the mentally handicapped could blend happily into the community the latter would need to undergo considerable change for the better.

One can think of a number of topics, all of them closely related to the problem of mental handicap, which assume a different dimension when related to groups of children or adults living in a village. For instance—

1. The problem of giving practical help to the families of the handicapped is much simplified in the case of parents of the child in a residential village, and particularly so when—as does at times happen—the arrangement is for life-long care.
2. The task—often a strenuous one—of the educational authorities supplying links to the family and to the social services is easier in the setting of a "village community."
3. The irritations and the wastage of resources caused by the overlapping of major agencies, of which one hears so much, are also substantially reduced.

One does of course at times meet situations of conflict in the "village" as between various disciplines—but I am convinced that the defining of terms and the explaining of roles is less of a problem there than is generally the case, and this must mean a higher degree of interdisciplinary co-operation.

In this connection I would like to refer to the thesis so ably put forward by Dr. Gunzburg that the problem of mental retardation is essentially a problem of multiple handicaps and could best be handled by the multidisciplinary practitioner.(1)

I may be sticking my neck out, but it is my opinion that this thesis could, and probably will, be put to its most effective and searching test in the "residential village."

And here I would also like to put in a word for that rather neglected and somewhat bewildered individual, the voluntary worker. There is considerable goodwill and sympathy available in the community, but it is common knowledge that for a variety of reasons only a minor share of this great source has been called upon by the services.

In the village the process of fitting voluntary effort into the fields of the several disciplines is proving less of a stumbling block than is the case in the outside world.

Much has been written and said about the effects of environmental conditions on the mentally handicapped. It is not the purpose of these few remarks to delve deeply into this very important subject, except to claim that the negative features, i.e., environmental conditions injurious to the well-being of the handicapped, are more readily at hand in the urban areas than in the "residential village."

On the positive aspect of this topic, let it be said that a great deal is being done, and even more can be done, to make the village supportive and stimulating. Furthermore, I am convinced that environmental manipulations are essential in the village as in the outside world, only they are more quickly attained in the former, and far more effectively tested for efficiency and social value.

It would, of course, be an illusion to assume that in the village all is for the best in the best of all possible worlds. Bearing in mind that advances are being made simultaneously in many fields of mental handicap, it would be rash to claim that any residential community, no matter how efficiently run, could take advantage of all the innovations and methods which are steadily coming forward as a result of research and experimental work carried out in many countries.

Nevertheless, the village affords the better potential for effective testing.

We may as well face it. A good many of us believe that a good many things in the "normal" world are far from helpful to the mentally handicapped. Right now, therefore, and I am afraid for many years to come, it will be the residential village with its many advantages already apparent and many more still to come, that seems to be the answer to integration. It is admittedly only a partial answer. A full answer is just not available, and it would be sadly unrealistic to expect one in the foreseeable future.

To sum it all up. For some decades now it has been proven that conditions obtaining in the "residential village" enable the mentally handicapped to live dignified, useful and happy lives.

This, I feel, is a pretty firm foundation upon which to build for steady progress.

SUHAR DAVID.

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(1) H. C. Gunzburg (1975). "New Perspectives in Mental Retardation." Inaugural Address, Nat. Spring Conference on Mental Retardation, N.S.M.H.C., South-West Region.