

# Communication for Child Mental Health

## 1973 NIMH Information Interchange

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THE THIRD Information Interchange, sponsored by the National Institute of Mental Health's Office of Communications, was held in Washington, D.C., February 4-7, 1973. The theme for this year's conference was "Communication for Child Mental Health."

Nearly 175 participants from more than 30 States around the country met for 4 days to exchange ideas on how to communicate better about child mental health. The diverse group consisted of representatives from private industry, State departments of mental health, national associations, film and television producers, publishing companies, community action agencies, community mental health centers, foundations, and other Federal agencies.

From its initial planning session in the fall of 1972, the interchange was structured around ideas and in a format that potential conference partici-

pants believed would be the most useful and comprehensive in content. In addition to sending questionnaires around the country to solicit ideas, a preplanning conference was held in December. Participants at this conference consisted of a cross-section sample of the general interchange participants. Thus, from the very beginning, this conference was to be a true interchange of ideas, experiences, plans, and goals. Within this environment, the interchange began.

The following synopses of the workshops provide a flavor and a sense of the issues that were raised more often than resolved. Instead of merely providing neat, simple solutions for the problems in communication for child mental health, the workshops served as a springboard for stimulating further discussion.

### **Bill of Rights Workshop**

How can the Child's Bill of Rights, developed by the Joint Commission on the Mental Health of Children in 1970, be used to promote child mental health? This question seemed foremost in everyone's mind as the Bill of Rights Workshop opened.

The participants began by expressing their ex-

pectations for determining mutual concerns of the group. These were some of the concerns:

1. How best to utilize communication resources to facilitate community awareness of the bill of rights and bring about attitudinal examination?
2. What does the Child's Bill of Rights mean in terms of legislation and legal action?
3. Should a clearinghouse be established in the area of children's mental health and emotional development? If so, how can this be accomplished?
4. How can children be helped to understand their rights?
5. What is the role of the school system in the issue of child advocacy?
6. Where is the money for programs in this area?
7. What are the responsibilities of children and adults that accompany these rights?

One workshop member mentioned that because the interchange was concerned with communication, the group should focus on how best to utilize communication resources to bring the message of child advocacy to the public. To grasp the idea of resource utilization, the suggestion was made to look at the problem by using a communication model which dealt with source, message, channel, receiver, and effect as its major components.

The initial issue chosen for consideration was legislation. Discussion centered on what child advocacy messages should be disseminated, what groups would be an appropriate source for each, what groups could be influenced positively by each message, what channel or vehicle would be most appropriate for each each group, and what kinds of results could be expected from this effort.

The group also decided to focus on violations of the Child's Bill of Rights as a means of identifying issues which the messages of the communication effort should involve. Each right was considered separately, and violations of it were identified.

Additionally, the group strongly recommended the establishment of a national clearinghouse for child advocacy that would develop informational materials and plan and administer a coordinated dissemination program for these materials. Preferably, this clearinghouse would be independent of governmental agencies or organizations.

### **Children as Communicators Workshop**

One of the stimulating aspects of the interchange was the participation by a group of students (ages 6–15) from California, New York,

and Texas. In the Children as Communicators Workshop, some of the children expressed important and candid comments which they believed deserved consideration. Two young brothers from San Diego, Calif., expounded on the benefits of computers as teachers. They said that there are not enough teachers to give personal attention to students. "They're never there when you want to know something. You could ask a computer anything, anytime," said Shannon Smith.

The group decided that this attitude was evidence of the need for more communication between children and adults. Speakers believed that school should have an atmosphere which encourages children to dare to say what they think, rather than to repeat rote learning.

Also discussed were the needs for affective education in the schools, curriculum relevancy, dealing with parents when trying to get open classrooms into the school curriculum, involving parents in the school setup, and using every available means for communication.

Final recommendations from the workshop included these:

1. That children be allowed and encouraged to communicate.
2. That peer instruction programs and older children tutoring younger children be encouraged.
3. That children should be listened to in every way, no matter what means they use to communicate, be it paper, puppets, video, music, and so forth.
4. That children be encouraged early in life to make their own choices and live by them, that they be given the opportunity to make mistakes within our school system, and that they be given room for experimentation.
5. That workshops between parents and children be promoted for the purpose of inter-generational communicating, in order to produce an understanding of each other's culture.

### **Mentally Ill Child Workshop**

This was a small, intense workshop that was supposed to concentrate on communication activities needed for the mentally ill child, but instead focused on problems of neglect and lack of research. There was general agreement, however, that a public consciousness about the mentally ill had to be established.

Group discussion included the stigma of mental illness, distribution of communication services, direct service for the acutely mentally ill, and

definition of target groups to receive information about mentally ill children.

Ruth Sullivan of the Society for Autistic Children vigorously defended the needs of the autistic child and repeatedly lamented the lack of research into the physiological causes of mental illness. She believed that communication about this dearth of research was needed to inform the public and to spur legislatures toward positive action.

Irving Jacoby, a New York documentary filmmaker, posed the question of whether films about emotionally disturbed children destroyed these children's right to privacy. The workshop consensus was that such films, if properly distributed, could significantly contribute to reducing the stigma attached to the mentally ill.

A major recommendation of the workshop called for increased communication to legislators and other audiences about the lack of research into the physiological causes of mental illness in an effort to promote awareness of the need for additional research in this neglected area.

### **Research Workshop**

As members of the Mentally Ill Child Workshop had concluded, additional research, dissemination of information on research, and utilization of research results are very real needs. Awareness of these needs was stimulated and expanded in the Research Workshop.

The first problem this group defined was the definition of the term "mental health" itself. How can a mental health communicator or educator speak positively of mental health when, to many people, the term negatively connotes "mental illness?"

It was suggested that the concept of mental health would be better understood and more successfully acted upon if an expression like "human growth and development" were used instead. At the same time, mental health information should be more concrete, dealing specifically with one child, one parent, one teacher, and a specific situation which may focus on such issues as drugs and delinquency. Removing the association of abnormality from mental health furthers the aim of primary prevention, the group agreed.

Primary prevention, it was noted, is harder to describe with statistics than the kinds of problems that receive research attention and money. The Head Start Program, for example, is an instance of unplanned primary prevention in that it brought parents together and taught them to organize for

better housing and community action in areas that strongly affect their lives. The program, however, was evaluated only for how well it readied children for school—an assessment derived through standardized measurement devices.

The group agreed on the need for applied rather than pure mental health research and stressed that local participation should be built into such applied projects. Because reporting the results of such experiments is often neglected—in facts and in fund allotments—it was suggested that National Institute of Mental Health (NIMH) include in every research grant the provision for evaluation and communication, either by publishing the outcome or by calling a conference to discuss its implications. Such a conference could be an occasion for mental health researchers and educators to meet with professional communicators who would use their technical expertise to plan sound information campaigns.

### **Private Industry Workshop**

Industry's most valuable resources and assets are its employees. Operating on this premise, participants in the Private Industry Workshop attempted to define the mutual needs and contributions of the mental health professional and the profit-seeking corporation.

Although child mental health per se never became a focal point of the workshop, participants saw the need for simple, straightforward communication between local mental health resource persons and local corporate officials.

One participant noted that the 1960s marked an era of consciousness-raising among corporate management in the wake of industry's inattention to mental health concerns. When the fires from the riots were extinguished in the cities, corporate officialdom had a clear view of the extent of its social, economic, and political involvement in communities. Employees—and potential employees—began to be seen as capital investments that had to be maintained, and public affairs offices began seeking new ways to bridge the gap between corporate and community needs.

The group agreed that during the 1960s the mental health sector, from the local volunteer associations to State and Federal agencies, gained wide-open access to collaboration with industry. Yet in many instances this access remained unused for the following reasons:

1. Businessmen are trained to begin a project, carry it out, and evaluate its results. It was seen



*Interchange participants assemble for informal conversation before the opening morning session. Below: Small group discussions in each of the workshops formed an integral part of the interchange.*



as the duty of the mental health professional to approach industrial representatives with specific objectives in mind and to lay these goals on the line.

2. "Mental health" is an ambiguous concept. Business is most directly affected, and therefore concerned, with mental illness. Professionals should assist in identifying these problems—"What causes absenteeism?" and "How can management be educated about mental and emotional problems?"

Industry doesn't need an esoteric problem like child development dropped into its lap. Instead mental health workers might approach industry about the more realistic problem of day-care programs to free mothers for work.

### Drug Workshop

Participants in the Drug Workshop discussed drug abuse among children, the need for improved methods of drug education, and communications techniques effective in preventing drug abuse. Both adults and children in this workshop focused on the issues of why people use, and abuse, drugs. Some suggested reasons were relationship and image problems, failure at school, and trust problems. The group decided that drug abuse was not the problem, but rather the symptoms of problems such as emotional instability, boredom, feelings of inadequacy, and family problems.

The young people in the workshop cited scare techniques and professional lecturers as ineffective ways to educate their peers about drug abuse. Instead, they suggested that teachers should handle drug education because they usually have greater credibility with the students.

Among the techniques suggested to implement more effective communication to children about drug abuse were these:

1. Using research findings to convince teachers that time spent in affective "human development training" will enhance learning.
2. Introduce environmental education for teachers.
3. Continue the development of education/interchange sessions with both children and parents.
4. Produce television and radio spot messages conveying the idea that drugs are not the problem, but symptoms of other problems.
5. Eliminate drug abuse as a label or focal point for messages. Instead, list drug abuse as one issue on a list of problems such as alcoholism.



*Joanne Kotowski explains the "Say It With Puppets" project to a Port Washington interviewer following her Show and Tell presentation*

## **Mental Health in the Schools Workshop**

This workshop delved into the problem of teachers' needs for supportive services, showing them how to implement mental health education in the schools. Participants then discussed the wisdom of getting school superintendents to support a mental health curriculum before approaching teachers.

The group was also concerned about the problems of relating to children's feelings, diagnosing teachers' relationships with students in mental health terms, addressing mental health concepts in the classroom, and involving parents in developing school curriculums.

These specific action recommendations for NIMH were outlined by the group.

1. To provide more mental health materials for children for use in the schools.
2. To provide materials for parents and teachers on how to deal with children.
3. To develop a plan to educate parents on what to expect from schools.
4. To assemble studies and use mass communications to demonstrate the influence of affective training to increase cognitive learning.

## **News Media and Mental Health Workshop**

Workshop participants were involved with the problems they were having with news coverage. The difficulties were much the same for each member—scandal-type material is always publicized; child mental health on the State level is not emphasized enough and input from other States is scarce; few knew how to use media to generate interest and public support and develop programs, including where to put the news—the use of spot news versus feature news—and how to get the media interested in mental health news.

Some recommendations for these problems follow.

1. Hold regional and local seminars involving press, media people, State and local mental health information people, and public information officers who are concerned with providing mental health news to the press.
2. Correct the deficiency mental health people in the field sense concerning what the child mental health program is all about. They would like to see information that is tailored to information personnel coming out of NIMH on a regular basis.
3. Attract newsmen to report about a particular program or development by enlisting the aid



*Coffee mixed well with conversation following the workshop sessions*



*Two Port Washington students interview an interchange participant on his views of the conference. Below: Gary Schlosser of the UCLA Media Center answers questions following presentation of new NIMH film series.*



and support of locally organized community citizen groups.

4. Gain the cooperation and support of the Governor, mayor, city council, and other authorities to proclaim a special week for child mental health and take similar attention-getting actions.

### **Television Workshop**

Representatives from education, mental health, and television cited changes needed in programming and suggested how mental health agencies could help make these changes. Discussion ranged from complaints about irresponsibility in existing shows to tactics for planning, producing, and airing effective programs by mental health agencies.

It was recognized that while broadcasters tend to dodge responsibility because of their dependency on programs that sell, they are gradually becoming more concerned about the demand for improvement and enrichment of programs for children.

Group members claimed that family interactions are so stereotyped on television that children are seriously harmed emotionally. It was suggested that children could be trained to evaluate television materials so that they could better compare what they saw with their own life experiences.

The ultimate value of any TV program depends on its subsequent effectiveness. Workshop members believed that television programs produced by mental health agencies should make something happen "outside of the television set." Thus, participants stressed that the audience should be viewed as a part of an active process rather than as passive recipients of a one-way communication.

### **Film Workshop**

Films were an integral part of the interchange and participants in the workshop had a great deal to say, much of it controversial. Focus was on the nature of the medium and how it should be used, especially in a classroom setting.

The group agreed that discussion-starting films are only as good as the facilitator, the setting, and the written materials that accompany them. Documentary film-maker Jacoby said that a film should be close-ended "with seeds in it that give direction to the audience." This position was accepted by most of the group who, on the other hand, believed that, for classroom use, open-ended films were most effective.

Dr. Robert Abramovitz of the Yale Child Study Center, New Haven, Conn., added that a film should "get people to think for themselves, not tell them what to think as advertising does."

"A film-maker has to look at what the educator-sponsor is saying," Jan Skrentny of Annandale, Va., station WNVN-TV, added. "He can't let his aesthetic vision get in the way."

The group also expressed the belief that teachers need to be trained to perceive young people, to use resources carefully, and to offer a choice of ways for children to express themselves.

A pilot program could be established in one region, with communications people who would travel from one community to another with a sample library of available films. These traveling salesmen could conduct short interdisciplinary conferences in the communities, covering information needed by mental health personnel. Primarily, they could teach how to make maximum use of available resources.

The workshop recommended that this traveling project become local, rather than national, in character. Participants looked to the establishment of community resource centers with much person-to-person communication.

In conclusion, group members emphasized the need to make existing film resources easier to use, rather than to create new films.

### **Resources Workshop**

During this workshop's sessions, participants agreed that there is often a gap in communication between NIMH, State and local mental health agencies, and the lay public. They expressed the hope that some system of coding or compiling a list of available materials, resource (information and funding) persons, and agencies could be developed. Mental health agencies need a central source of reference to resources in mental health. They need some kind of manageable mechanism for tapping existing, but inaccessible, materials.

The group made several recommendations for methods of identifying, utilizing, and sharing available resources:

1. Develop a reference list of all Federal programs and agency resources (materials, information, people, funding ability) and what they are able to contribute to health educators, parents, and people involved in mental health.

2. Compile a selective reference list of authoritative educational materials in child mental health.



This publication should describe Federal and non-Federal agencies and their capabilities in terms of providing materials, staff, and funding.

3. Establish a resource center in communications and mental health. This center, which would be outside of the Federal Government, would be available to State mental health authorities who would, in turn, inform those involved in community mental health programs. The main responsibility of such a resource center would be to identify existing community resources, Federal agencies, and funding resources and what they are capable of contributing to child mental health programs. The resource center would also facilitate the development of a bibliography on authoritative educational materials on child mental health.

The main thrust of the recommendations proposed by this workshop was a recognition that a significant volume and range of available resources to advance child mental health programs were not being used to maximum effectiveness because information about them was not reaching those who could use them. There emerged a clear mandate that the effective delivery of available resources could only be achieved by an independently funded center expressly organized to advance this goal.

### **Communications Network Workshop**

Participants in the Mental Health Communications Network Workshop were concerned with two questions:

1. Who would be the target audience for a mental health communications network—mental health communicators or their respective communities?

2. Which is more important to consider, the process of communication or the resources themselves?

Judi Funkhouser, group facilitator from the NIMH Office of Communications, suggested that the formation of a model communications network could act as a catalyst or beginning for a national network. Interest then turned to the possibility of producing an actual model involving a list of resources and contacts represented at the interchange. Such a network would involve an actual system of advertising tools and resources, and the effectiveness of the communication would be expected to aid participants in promoting their programs.

Eight mental health information graduate

students from the University of Texas at Austin drew up questionnaires which were distributed to conference participants, asking them what information they wanted and what resources they could offer to others. The students then classified responses according to what each one had to give, for example, audiovisuals, education, programs, publications, and miscellaneous responses. Lists of these resources were printed as supplements to a daily interchange newspaper which the Texas students also prepared.

Further discussion, prompted by talk about films, stressed the need for a communications network between mental health agencies and special education offices, particularly on a local level. Workshop members also agreed that the increasing emphasis on the prevention of mental illness would necessitate increased involvement by the public schools to promote mental health programs for students.

### **Conclusion**

In addition to the interchange workshops, there were a number of general "Show and Tell" meetings, relating information of interest to the entire group and also stimulating discussion in many of the workshops.

For example, several "Show and Tells" were devoted to films and videotape used to communicate about child mental health. Gary Schlosser, UCLA Media Center, and Robert Fox, National Instructional Television Center, presented films which were devoted to stimulating discussion by both teachers and students about interpersonal relationships.

The possibilities of videotape as a means of expression by children and as a medium for stimulating community discussion groups were presented by Walter Dale, Al Whitney, and Ms. Barbara Dolan, all of the Instructional Center, Port Washington, N.Y. The benefit of videotape as a creative, yet inexpensive method of allowing people to communicate their ideas to other people was aptly demonstrated in several presentations by both children and adults.

Finally, the interchange participants exchanged thoughts and ideas during the daily sessions of Curbside Conversation. During these periods, participants roamed through a maze of 24 displays and demonstrations, ranging from a display of Louisiana's "Pierre the Pelican" child-rearing pamphlets to a Harvard Medical School film presentation on child mental health.