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Expenditure of the taxpayers' money

The generally encouraging progress made during the year resulted from prudent use of money designated by the citizens of the Commonwealth for the purpose of bettering their mental health. The funds were spent as follows (to the nearest thousand):

Operations:	
Area Mental Health Centers	\$340,000
Services to Courts	40,000
Hospital-Schools	9,602,000
Facilities for the Aged	54,000
Mental Hospitals	31,792,000
Building and Maintenance:	2,087,000
Administration:	1,107,000

Total for Year \$45,022,000

Income to the Commonwealth from paying in-patients and their families was \$3,536,000, an increase of \$767,000 (22 per cent) from the preceding year. The amount charged for in-patient care was increased during the middle of the preceding year.

Acknowledgement

Unfortunately there is not enough space to describe each individual's separate contribution to the work and achievements of this department. I am grateful to every volunteer and every paid worker for the advances that have been made.



Jack R. Ewalt, M.D.,
Commissioner

More detailed information on the department's activities may be obtained by addressing your inquiry to:

Massachusetts Dept. of Mental Health
15 Ashburton Place, Boston

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MASSACHUSETTS
"Mass." DEPARTMENT OF MENTAL HEALTH

ANNUAL REPORT

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The primary goal of the department is the treatment of the mentally ill or handicapped, with the expectation that those who are hospitalized may be restored to productive community life and that those who are in the community may be restored without recourse to hospitalization.

Two segments of the population of the Commonwealth are undergoing an unprecedented increase in size: the young, because of very high birth rates; and the old, because of longer life expectancy among people who are now in their middle years. Present trends indicate that Massachusetts will have the following numbers of people (in millions) in three broad age groups by the years specified:

	1960	1965	1970
Under 25	2.1	2.3	2.5
25-64	2.5	2.5	2.5
65 years and older	0.7	0.8	0.9
Total	5.3	5.6	5.9

During the coming decade the department must continue to pay special attention to furthering the growth of existing mental health services and the development of new ones for children and young adults and for men and women past 65.

Services to Children in the Community

Five area mental health centers were added to the 10 already in operation. The five new communities aided by state funds and personnel are Cambridge, Greater Framingham, Northern Berkshire County, Franklin County, and South Boston. The West End Guidance Center (Boston) became a special facility to provide consultative, diagnostic and treatment services to the Massachusetts Division of Child Guardianship.

Services to Courts

Groundwork was laid to provide more psychiatric help to courts and correctional facilities in assessing and rehabilitating persons coming to their attention. Work in the Cambridge District Court and the Concord Reformatory for Men gave useful experience in this field. Increased legislative appropriation for the coming year has allowed planning for expansion of this program.

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Care of patients in hospital-schools
Opening of the Myles Standish State School in 1952 and additions to the other three hospital-schools since then have provided in-patient care to infants and children with retarded mental development (often associated with serious physical handicap). The added facilities have barely been able to cope with the pressure for admission resulting from 6 consecutive years with births numbering over 100,000 per year, the highest number in the Commonwealth's history. Further physical crowding and reduced standards of care are real dangers if all possible resources, in the community as well as in the institutions, are not progressively mobilized in the years immediately ahead for this group of patients. The Department of Education's program of special education is given as an example of an important community resource.

Facilities for the aged

The highest rate of hospitalization for mental disorders occurs among people 65 years of age and over (300 new admissions per 100,000 population of that age per year). Other alternatives than admission to mental hospital would be possible for a large number of these people if other types of facilities existed. Walnut Lodge, which opened this year at Foxborough, and Cushing Hospital, expected to open in 1957, are but one type of a rather formal alternative for providing the type of attention needed by the aged. Local provision of housing opportunity to elderly citizens is another type of alternative which can be expected to do much in reducing the unnecessarily high rate of admission of this group to mental hospital.

Shortage of professional personnel

Of the many problems confronting operators of mental health programs the most urgent is the shortage of trained personnel relative to the needs of the population served. Lack of enough psychiatrists, nurses, psychologists, social service and occupational therapy workers retards growth of mental health services in the community and handicaps efficient hospital operation. The gains made in staffing during the year were modest but contribution to professional education was substantial. At the end of the year 38 physicians were receiving resident psychiatric training in the department's in-patient facilities. During the year short-term psychiatric

training by affiliation in departmental activities was given 1313 student nurses from more than 40 general hospitals, 36 students from 6 schools of occupational therapy, and 24 students from 4 schools of social work.

Effectiveness of hospital care

Such gains as have been made in recent years in staffing of the department's 12 hospitals for mental illnesses have been associated with a decline in the average daily census of patients occupying beds in these hospitals. The decrease occurred in spite of continuing large numbers of admissions of all age groups. This year the decline included female as well as male patients. The patients affected have been 25-54 years old. No previous decline of this kind is to be found in our records.

	Admissions	Census
1952	7640	22455
1953	8046	22604
1954	7769	22597
1955	7867	22313
1956	7594	21832

The availability of more Veterans Administration facilities, improved employment opportunities in the community, increased efficiency of billing patients and their families, and the introduction of tranquillizing drugs (1955) are suspected of aiding the larger professional staffs in shortening the patients' length of stay in these hospitals. These staffs, however, are still too small by all standards.

Research

Understanding of factors important in determining mental illness and mental health is still pitifully inadequate, and no state is more active than Massachusetts in seeking better understanding. Three current research projects illustrate the depths of our ignorance: search for practical ways of identifying first grade children coming from emotionally disturbed households; establishment of base lines of the amount of time spent on in-patient care for patients of different age-sex-diagnostic categories; identification of biochemical factors influencing behavioral manifestations. Financial support comes from tax-supported agencies, including this department, and private foundations. Recognition must also be given to the many workers who carry on clinical research of great value without formal financial aid.