ESTHER MIDDLEWOOD: ADULT EDUCATOR AND AMBASSADOR FOR MENTAL HEALTH

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This is to certify that the

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ABSTRACT

ESTHER MIDDLEWOOD: ADULT EDUCATOR AND AMBASSADOR FOR MENTAL HEALTH

by John W. Hanks

Louise Middlewood and includes an historical-descriptive account of the Mental Health Education Section, Michigan State Department of Mental Health. Miss Middlewood was born in Detroit, Michigan, on May 23, 1908. She attended Michigan public schools and in 1929 received her bachelor of arts degree from the University of Michigan, where she also received her master of arts degree in 1937. She has headed the Michigan mental health education program since its inception in 1947, and in nearly forty years as an educator, has also served as a secondary school teacher, counselor, and guidance director.

The biographical profile develops the history of personality attributes from Miss Middlewood's childhood and family background which suggest significant connections with her educational career. Her relationships to her family, friends, and neighbors are explored, showing the consistency of her personal, religious, and educational values



as these are expressed in both her non-professional and professional activities.

The Michigan program is known nationally for its direct teaching of positive mental health concepts to key groups, especially parents, but also to other significant groups such as teachers, public health nurses, workers in children's institutions, and the clergy. Miss Middlewood has been widely recognized for her leadership in the use of mental health films as an integral part of adult educational efforts on a state-wide basis. She also has had a major responsibility in the production of five mental health documentary films. Several of her pamphlets have been extensively reprinted, and she is widely recognized for her outstanding capacity to articulate mental health concepts for laymen through her numerous articles and extensive public addresses and discussion leadership.

An outstanding Michigan project has been the Parent Education Associates' three-year lay leadership training program in mental health education. As local leadership has been stimulated and become effective, the direct teaching role of the state staff has diminished. Consultation for long-range program planning and community organization with local and state groups has become increasingly important.

The Michigan program is reviewed in terms of criteria for adult education and is judged to be within the

mainstream of this movement. An appendix also surveys historical and sociological aspects which are relevant for mental health education.

Sources for the study include: Miss Middlewood's speeches, professional writings, and special taped interviews for this study; personal papers; time logs of her professional activities; official reports and office records; interviews with twenty-one selected informants, and letters from twenty-two correspondents, primarily having professional backgrounds.

ESTHER MIDDLEWOOD: ADULT EDUCATOR AND AMBASSADOR FOR MENTAL HEALTH

By
John W. Hanks

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To Esther Louise Middlewood, whose biographical profile forms a central part of this study, very deep and special appreciation is felt for her patience, understanding, and generous gift of her time and interest during many hours of conversation.

To forty-three individuals who contributed through interviews or by letters, often long and detailed, and to Mr. Solan Weeks, Michigan Historical Commission Museum Director, and the Michigan State Library staff, for assistance with historical background—much thanks is due.

To my wife, Marion C. Hanks, and our sons—John E. and Gardner C. Hanks—for their steady patience, forbear—ance, and unfailing encouragement, deepest gratitude is acknowledged. Finally, to my parents, Mr. and Mrs. J. Earl

¹Individual names of those individuals who were interviewed or who provided letters will be found in the Bibliography.

Hanks, and a long and honored succession of educators, very warm thankfulness is expressed. They provided a heritage of intellectual curiosity and stimulation, as well as personal concern, which helped make this endeavor possible.

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CHAPTER I

INTRODUCTION

This study has two inter-related purposes: (1) to trace the career of Esther Louise Middlewood, mental health adult educator, and (2) to give an historical-descriptive account of the Mental Health Education Section, Michigan State Department of Mental Health, which she has headed since its inception in 1947. One assumption implicit in this study is that there is a significant interaction between the personality of an influential individual in an adult educational project and the larger sociological forces present in the culture in which the project operates. A second assumption is that the work of the mental health educator, as represented by Miss Middlewood and the Mental Health Education Section, is basically a part of the larger adult education movement. Hopefully, this study may serve, then, to emphasize and strengthen this assumption.

The biographical material regarding Miss Middlewood appropriately might be labelled as a biographical "profile," a name in keeping with the modest purposes which are involved. Limited resources in terms of time, money, and literary skill precluded writing a complete biography in depth, although an attempt has been made to incorporate

material of psychological importance and of human interest. However, the primary objective has been to highlight in an impressionistic way some of the personality variables which contribute to the social psychological background of the Mental Health Education Section.

Obviously, these personality variables—either as to their selection or interpretation—are not presently verifiable by rigorous scientific research; rather, they reflect not only the biographical personality—Miss Middle—wood—but the background of the biographer, especially as a psychiatric social worker with additional perspectives from both sociology and psychology. It should be added quickly, however, that this biographical sketch was in no sense approached as a clinical study.

In dealing with a living subject and informants who were currently involved in a network of relationships to Miss Middlewood, there were necessarily certain constraints. Clearly, informants tend to volunteer favorable information and to omit less favorable observations. In addition, certain self-imposed limitations were exercised out of respect for the privacy of either Miss Middlewood or of the informants. At the same time, however, it should be pointed out emphatically that Miss Middlewood herself was entirely cooperative. If anything, she bent over backward to suggest either documentary materials or informants who might give balanced, including negative, accounts.

Within the limitation of his own perspectives, each informant was cooperative and helpful. Many informants were apologetic for their incapacity to recall materials in more detail or with more significance or relevance. Some informants were known personally, and from interviewing skills developed over twenty years in social casework, some material of depth and intimacy was developed. Discretion was necessary in the use of such information.

Occasionally there were conflicting comments. These conflicts were resolved either by accepting what was the more unanimous interpretation, or lacking that basis, in favor of the informant who appeared to be more competent through being closer to a first-hand knowledge of the facts. Where the conflict seemed important, the reader has been presented with varying interpretations. In no instance did it appear that informants were consciously or deliberately distorting facts. However, the process of the entire study was a fairly constant confirmation of the fact that psychologically each individual views reality through the screen of his own needs and perceptions.

Materials for the study were gathered by personal interviews, by letters, and by the examination of an abundant supply of publications, office materials, and records freely supplied by Miss Middlewood and her staff. Miss Middlewood also contributed personal items, such as newspaper clippings, photographs, and diary excerpts, as well as some tape recordings made particularly for this study.

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Many of the informants' names were suggested by Miss Middle-wood. However, she freely signed a blanket consent form for information to be obtained from any available source.

A number of such sources, not suggested by her, were used with absolutely no evidence of reluctance on her part. Many hours, of course, were spent with Miss Middlewood herself, who was extraordinarily generous with her time. This generosity was especially notable in view of her highly demanding schedule of professional responsibilities at a period when her office was under-staffed.

An attempt was made to make a fair and dispassionate study, but it would be naive to think that personal biases were totally excluded. The historical-descriptive accounts of the Mental Health Education Section have been made as objective as was possible within the limits of the types of data that were available. In attempting to highlight the personal contribution of a dedicated, resourceful adult educator through a biographical approach, it was inevitable and appropriate that some subjective, impressionistic, and interpretative materials should be incorporated. The need for rigorous, scientific studies of mental health education--indeed, of all education--is fully recognized. With the further growth and influence of mental health education, such research will increasingly be incorporated as a necessary and ongoing part of that program. At this time of early development in mental health education, a more descriptive account has its own value.

The organization of this study combines a chronological and topical approach. A quick and personal impression of Miss Middlewood is first given through the use of her own verbatim, but slightly edited, responses to a series of queries relevant to the purposes of the study. Next to follow is a chronological account of her family background and early life, with some emphasis on events and relationships which seemed to shape fundamental personality tendencies. Subsequent chapters deal successively with her professional development and the work of the Mental Health Education Section, with her religious growth and attitudes, and with her relationships to neighbors and friends.

The detail and elaboration devoted to Miss Middle—wood's personality development and attitudes is a deliberate aspect of this study. To be an adult educator in mental health education calls for some special, and probably more deeply personal, qualities in forming relationships to other people. To a significant extent, the mental health educator not only must be able to talk about mental health, but also to exemplify it in important respects. The consistency of personal attitudes, as these are expressed outside the strictly professional realm, similarly seemed to be uniquely significant for an adult educator in mental health education. For this reason, the development of Miss Middlewood's biography in the areas of religion and in personal, non-professional relationships, seemed relevant.

This study is primarily biographical, but there is

pes pes a recognition of the social perspective in which Miss
Middlewood and the Mental Health Education Section operate.

For the reader who has some further interest in this social perspective, reference can be made to the Appendix, "Social Backgrounds of Mental Health Education."

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CHAPTER II

SOUNDINGS

Anyone who knows Esther Louise Middlewood very long is likely to call her, "Esther." Her relationships to people are typically warm and direct, which helps to account for the informal title, "Ambassador for mental health." Officially, however, she is Chief, Mental Health Education Section, Michigan Department of Mental Health. Esther is the kind of comfortable person who frequently has visitors "drop in" at her home. If visitors were interested in adult education, mental health education, and some of Esther's personal perspectives, excerpts from a conversation at her home might go something like this... 1

Query: "How is mental health education related to
the adult education movement?"

Response: It is intricately involved with the adult education movement. For a long time I have

The following queries and replies are selected and edited from tape recordings Esther prepared for use in this initial chapter of Esther's biography. Rather than a conventional chronological approach, the opportunity was taken to make some "soundings" (hence, the title of this chapter) of Esther's convictions and attitudes as a means of obtaining a more personal, immediate and relevant glimpse of her as a person. For the reader who prefers to read a chronological account first, this initial chapter could be skipped for later reference, and reading could start with Chapter III, "Life Time Lines."

made every effort to tie my work in more closely with adult education, but for too long a time adult education programs were closely structured as a traditional academic curriculum. Of course, the adult education program was rooted in the early efforts to improve English literacy and to offer courses in business practices, home economics courses such as cooking and sewing, and courses for rather specific skills that could be taught in a set period of weeks corresponding to a semester. These courses were of great interest to individuals because of a rather immediate need, such as the immigrant who wanted to learn English in a course of a definite length with specific assignments and routine lessons.

Mental health education is in the area of the humanities. This area of the curriculum has never fared as well in the formal adult education program, and adult education has been slow in adapting its design to the more casual forms of education, such as courses which initially were not in great demand, which could be taught in smaller groups, which were not specific, but were conducted through the medium of discussions in a variety of settings—church basements, community halls and settlement centers.

As forward-thinking adult educators began to see the need for modifications of traditional teaching methods, mental health education has moved in and found a niche within the larger framework. However, even then, mental health education courses have been somewhat tied to formal psychology courses (which can be extremely dry and uninteresting to the non-professional laymen) and to home management techniques (rather than home and family living courses) which were not concerned with the dynamic personal aspects of the family. Ultimately, my hope is that adult education will move more and more toward casual teaching experiences designed specifically to meet the needs of people in any given setting and taught by personnel who are not preoccupied with traditional academic procedures, such as homework, grades, and examinations. It is questionable as to just how much the total field of mental health education will ever fall into more conventional adult education sponsorship. Much of mental health education must be done through mass media, hospital tours, social agencies and other sponsors or media not tied to the usual schoolcentered program.

Query: "Some people have said that mental health education is too superficial and either arouses unfortunate anxiety or makes for a pseudo-understanding on a primarily intellectual basis. What does your experience in mental health education suggest?"

Response: In the first place I think that much of mental health education is much too superficial in that we simply learn glib responses, and we come to feel that there are easy answers for the far-from-easy problems. Perhaps our approach to the untutored person has been partly responsible. We have taught mechanisms of behavior. We have taught categories of mental illness—things of this sort which really are not of great concern to people. And the participants, like many professional people from whom they learned, have become very sophomoric in their information and have been able to sling words around without having any idea as to their meaning.

I think that it is true that mental health education arouses anxiety. I think anxiety is aroused in any field in which we begin to learn more after we had known little. Certainly this is true of physical illness. When we learn about cancer there is horrible anxiety until one knows enough to be comfortable about it. The same is true with mental health concepts. When parents begin to learn that children, for instance, can be damaged by the experiences of their childhood and youth, there is greater parental concern. If we were to leave the situation at this point, it would be very unfortunate. Because there is anxiety, we have to put mental health education on a positive basis so that we support parents and support human beings generally to help them understand their strengths and capacities to manage their own problems and to do whatever is needed for their children or others of concern to them.

We need to help people know that they are not bound by some mechanical processes that are going to take over their lives. It is possible to do this. It is possible if we avoid cliches, avoid hiding behind words that are not clearly understood, and avoid terminology which is appropriate technical shorthand for a clinician, but has an entirely different meaning to the person who is not professionally oriented. I am referring, for instance, to such words as "hostility." "Hostility" to most people does not mean what "hostility" means to a clinician. Most people immediately think only of angry, fighting, overtly expressed feelings, whereas many times the clinician refers to something quite different.

As for pseudo-understanding and intellectualizing, we had these problems long before we had mental health education. We have always had people who like to have a very glib, facile understanding of things that are very difficult to understand. We see this need expressed in many fields of knowledge. Unfortunately, when it gets tied to fields such as mental health, we get people who can diagnose everybody else and the ills of the world in a very intellectual, detached basis that has little practical meaning or personal significance. It is my experience, however, in mental health education that people are very capable of understanding many of the principles of mental health which can apply to them and their children. For instance, the basic concept of individual differences in human beings in itself allows for a great deal of comfort and for a creative individuality as soon as people honestly accept this idea. If parents honestly believe this concept they can allow for individual growth in their children. They can also allow for patterns of parenthood within their own family style of living which may be different from those of another family--patterns which may be more conducive to stability and health and happiness within their particular family than a pattern imitated after someone else's style of living.

Query: "What are some of the other mental health concepts that you believe are most important?"

Response: There is the concept that aggressive feelings are not only a natural part of man's life, but that they form a basis for the sturdy, driving forces that are creative and productive later in life when they are channeled and when the individual is not afraid of the management of his inner feelings of anger. We need to help individuals understand that there are times when, by the nature of man, he protects himself in certain ways—psychological ways. They need some understanding of the methods that might be used to avoid unbearable

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pain and pressure. These concepts certainly strengthen, rather than weaken, an individual.

The concept that we are all in need of love as well as capable of giving love is not a concept which can just be intellectually passed along. People must understand this concept with a recognition that they may have an infant's hunger for love which is being disguised in many ways. They will be at their best when they come to grips with this need and either find a solution by reaching out themselves or by simply accepting the need and making the most of their lives in the very best ways that they can.

There are a lot of other general principles which we ought to know and which can be used to the individual's advantage. For instance, there is the person who has been scapegoating because of his own feelings of inadequacy. If he can become comfortable and understand that this is the way he feels, he may not have to have a scapegoat in a racial prejudice or some other prejudice that is crippling his life. So I think that mental health education can be done well, but it cannot be done if we are just going to do it on a slogan basis or on a mass information approach. It will have to be done in small, intimate groups of people who can talk together, share honestly with one another, come to know and accept one another and respect one another. To me, this last method is necessary in a sound program of mental health education. I think one of the reasons that formal school-based adult education programs found it difficult to incorporate sturdy mental health education in its [sic] curriculum was because it has not been designed with the idea that deep, basic attitudes have to be modified over a long period of time and in rather small groups. Such attitudes are not going to be changed drastically by an intellectual understanding of the symptoms or by learning facts only.

Query: "What are the main changes in the concerns expressed by mothers regarding their children during the past twenty-five years in which you have worked with parents?"

Response: Initially, much of the concern of mothers was about toilet training, when weaning should take place, what to do about thumb sucking, how to keep a child from wetting the bed and how to make him into a nice, tidy individual. These

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questions have literally disappeared--even as has much of the concern which came next for food habits as mothers learned more about health and vitamins. We find more casualness in mothers about feeding processes as they realize now that children more or less balance off food as they go along. we had the movement into concerns about discipline. This concern has been rather chronic, but there was a period when it was almost paramount. Now we are moving into the need to make the child compete and get ahead, which is changing with growing concerns about pressures on children. There are pressures for social precociousness and acceptance as well as for academic learning. There is still only an intellectual understanding of this problem. There is a great need on the part of parents to exert pressures despite the fact that they think they should not do so.

Within the last two years I would say that even the parents of pre-schoolers are expressing the concern: "How can we keep him from being an adolescent like the adolescents of today?" We hear this comment all the time from parents of adolescents who are concerned about their kids today. The "lawlessness," the abandon, the lack of moral values, that we hear much about today are sources of concern. There is some trend, slight as it may be, to easing off on educational pressures in spite of the tremendous social push toward education. It will be interesting to see if we can come to a more relaxed attitude toward the learning process in children in the next ten or fifteen years. would be willing to predict that this trend might At least the trend could be toward being more relaxed and realistic in terms of individual children.

Query: "Some authorities believe that there are basic changes in family life which indicate a growing tendency toward basic character defects in children as evidenced by more disrespect for authority, tendencies to be more egocentric and impulsive, and the breakdown of traditional moral values. What are your observations?"

Response: My observations are purely observations, not scientifically founded and not to be

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accepted as bona fide facts. I think that there has been too much said about some of these factors without having a clear knowledge of any of them. I have a contention that most of the research in this area is too limited and too specific, but that we make broad generalizations from it. There are not very many bona fide long-term research studies that have been made about family design.

Off the cuff and by observation, I think we have done an injustice to children by allowing the authority of the family to switch, first of all, from the father to the mother. The mother, in most instances, does not like to be the crucial authority within the family and has allowed it to slip to the children. Frightened by lack of certainty, the mother feels restless and cannot find support for her own authority. It is my feeling that most women would prefer to have some kind of strength behind them in family organization. This desire is one reason for their having pulled away from the responsibility of really disciplining children and helping them feel that the world does not rotate about their impulsive whims.

I also think that there are some problems which are emerging because families are small nuclear families instead of large kinship families. Certainly the impulse-ridden portion of our society is of great concern to most people who are in positions of leadership. We see this behavior expressed in crime, delinquency, vandalism, irresponsible behavior in marriage, the neglect of children and irresponsible buying and management in families. Certainly a lot of our current concerns have to do with the nature of the family. I am not saying that I want to go back to traditional moral values. I think that there is nothing older than an outmoded value which applied to a society which no longer exists. But such a thing as integrity, it would seem, would not change in its importance in a society. I think that people hunger for a greater degree of integrity today and they appreciate and enjoy it wherever it is found. Certainly the capacity for robust responsibility toward the family, the job or to other human beings is a good quality, and maybe we need to assess it in a new light. designs which had value in the past are outmoded, we ought to look at them, garner from them the strengths that are applicable today, and turn to new designs that have strength for tomorrow. doubt if the day will ever come when we can have

in the world the same large kinship base we had in the past. To simply and nostalgically hope for the kissin' cousin group to be together and functioning is ridiculous, but we can look toward the nuclear family. The kissin' cousin strength, perhaps, can come from neighbors, friends and the kinds of human relationships that we have to establish with people who are not related by blood. There are ways of doing this if we think it is important.

Query: "What do you think the primary contribution of religious values can be to child development in family life?"

Response: First of all, it depends basically on what religious values we are talking about. Some religious values can be detrimental. If we are talking about a value system which would enable the child to feel some stability and direction in his life and will give him a yardstick for his own value system, then it is almost essential to his development. Children who are always uncertain about order in the world, who have no positive feelings about what is good and what is bad, who feel no certainty in the minds of their parents about certain issues, are usually very frightened children. The knowledge of a benevolent being, the certainty of being loved, the feeling that there are things which are acceptable and others that are not acceptable, the certainty that there is a certain place in the universe as a whole and some responsibilities within it-all these values stand a child in good stead. However, if the religious values are frightening, threatening, or negative, they could be damaging, and we have seen much of that in the history of religions.

I think we have a great deal to do in revamping some concepts of sturdy, moral family life, as defined by the church, to become significant to people living in today's world. Undoubtedly, religious values of a broader nature—the respect for the integrity of other people, the fact that we do not exploit others, the values of love and tenderness—all should add tremendously to the stability and happiness of the family. I think, though, that some religious emphases produce problems. For example: we sometimes teach a religious value that all parents should automatically love children. This vague, sentimentalized value comes from many of our religious doctrines. Often it is pronounced

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in the church that somehow children are God's blessings and that we all ought to want to have them. So parents who find themselves in the position of very understandably and reasonably not wanting children—sometimes helplessly not wanting children—are thrown into great stress because no one helps them understand their situation more realistically. Perhaps we do not give enough time to honest understanding and counseling with people.

Query: "What do you believe to be the primary needs and problems in family life today as indicated in your contacts with parents?"

Response: The needs of families vary as much as the needs of individuals. We might have to take the needs and say that in certain kinds of families this is true and in certain kinds of other families something else is true. I do know that in many suburban area homes and in upper suburbia, if you will, there is a tremendous need for more concise, directive power, call it what you will--discipline, authority--in the family. Children are hungry for it. The parents themselves feel that they are failing in many instances. But they don't know how to attack the issue and manage the situation without becoming arbitrary in a way that they feel is wrong because of the various types of concepts popularly presented to them. Interestingly enough, there are almost as many articles that point to a need for sturdier discipline as there are that point the way to permissiveness. Yet because parents are so uncertain, many of them turn toward the permissive. It is hard to manage children in a world where children are outspoken, a world which has become somewhat too much child-centered, certainly adolescent-centered.

In another area we need to define much more adequately the place of women in the family and in the world generally. Helping them to enter into a stable family position in which they can feel proud in their child-bearing years, in the early child-rearing years, and then pave the way for reentry into productive involvement in society as their children move out of the home. This problem is fairly new in our society due to a combination of factors. The more advanced education of women prior to marriage, the fact that many women help support the young husband in the early ventures

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in education or training and the beginning of business, and the fact that women have more years to live after child-bearing years and child-rearing years--all these factors enter in. This problem of women's role runs almost throughout the whole society, from the very low economy to the upper economy. However, the lower-income woman has the rationale of a real economic need by which she can evade the home if she feels the need to do so. Women in the upper-income brackets have no such rationale. In many instances they feel great quilt if they move out of the home into the working world. I think that we need a redefinition, at least a thinking through, of the relationships within the family and an establishment of better patterns of communication. Somehow, the old, authoritative pattern which was effective in many ways, has broken down. Somehow, the husband cannot tell the wife what to do, and the wife and husband don't demand obedience of the children as in the past. Yet we have never set up a new pattern in any clear way, and a lot of people are confused and upset about the shifting sands within their own family.

In the years ahead families are going to have to take an honest look at the tremendous stresses under which we place ourselves by choice. hard enough to contend with the Russians, but in many instances we also impose pressures by virtue of our own selection of goals. It may be that we can't amass untold wealth and still have all of the kind of leisurely family relationships which we'd like to have. You can't have all of your youngsters go to college and still have a tremendously secure financial future for yourself. are balances that we may have to weigh and then decide which values are most important to us as human beings. We can't be all things to all people as individuals, and we can't have all things in family groups. The pressures for upward mobility and for perfection in terms of learning academic knowledge are tremendous. In many instances these goals are not even realistically harnessed to capabilities or anything except fantasy. There are also large numbers of families who simply need a decent, respectable opportunity to live.

Query: "Some people believe that the roles of fathers and mothers are rapidly changing. Do you agree, and if so, what do you believe to be the main changes over the past twenty or thirty years?"

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Response: Yes, roles are changing, but I think that one of the mistakes we make is that we are talking about a reversal of roles, and I don't think this is valid. I don't think fathers can become mothers, and I don't think mothers can become fathers. By their very nature they serve different purposes to the child. The father obviously is not going to be able to bear and breast-feed children. The mother is not going to spend full time at supporting the family when she has to bear and rear children.

It used to be that women simply didn't talk to men, share ideas with them or enjoy them unless it was in a seductive relationship. Today men and women can do many things together and enjoy one another in many, many ways without involving necessarily a seductive relationship. There is a possibility of richness in the relationship between men and women, and we have opened the way for much more fun as fathers and as mothers because each individual can define his role more nearly according to his liking. If a father enjoys playing with the kids in the bath, he's free to do this. If a mother likes to go out and play baseball with the youngsters, she is free to do this. I think it is too bad when we try to define a specific role too rigidly. This rigidity takes away a great deal of individuality and the wonder of relationships founded upon individual choice.

I think one big problem is in the strength which the father manifests to his family. The father has always brought into the home the wonder of the outside world, the physical strength and magnitude of his being. In homes where the father is reduced to an undignified position, both boys and girls become confused in terms of sex roles. However, such a development is more frequently founded upon deviation and sickness within the family rather than a shift in the social concept of what mothers and fathers ought to do. Mothers are playing a greater role as breadwinners, but this change is not new to me as an individual. This pattern was part of my family for many years. In no way did this outside work detract from my mother and her relationships to us at home, except that perhaps we did experience more need to be involved in the family functioning and, perhaps, some moments of loneliness when she was involved in work and unavailable for us at the moments we wanted her. Good family planning, however, means that the mother's working increases the children's independence, and I am

1::0 ---** C1 C1 C1 C1 C1 C2 C3 C3 C4 sure that this is happening in many homes today. So changes are not necessarily bad. I think the changing woman's position today is bad only if it has produced uncertainties for them. The father can change to a much more exciting role if we take away the old autocratic position and help him redefine himself in a new, purposeful relationship to the family. I think we have failed to do this. When we fail to help people into a richer concept of self and their role in their families and just strip them of old roles and old patterns, we are doing them an injustice.

Query: "Do you see the mental health educator as a growing new professional discipline or as a specialization within one or more other disciplines of the future?"

Response: Education related to mental health is accomplished by people in many different disciplines and in varied settings. Such education can be done, if it is done well, within Christian education in the church. Education related to mental health has to be done by the classroom teacher. It is done in prenatal and well-baby clinics. We can never see the time when it will all be done by a specialist. On the other hand, we do need the responsible leadership of the specialist to lead the way in areas where we need to have a large, overall program established, to give leadership to other groups or to institute programs to help people understand more about principles of mental health.

The mental health educator, as a specialist, can well be drawn from many fields: psychiatric social worker, psychiatrist, health educator, from general education with a counseling background, or from work in child growth and development. it would be necessary for him to supplement whatever form his first basic education took. As an example, if it were a person who had first specialized in the human growth and development field with primary emphasis on early childhood education, he would certainly need to move into study of the dynamics of general and abnormal adult behavior and an understanding of the adolescent. He would need to broaden his knowledge because the mental health education job is much broader than simply family life education or human growth and development. He would also need some understanding and skill in the area of group processes.

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In her own words, Esther has entered into a dialogue which helps more vividly and accurately to know her attitudes and beliefs about mental health education as it is related to adult education, to family life, and to religion. In water-borne navigation before the era of radar, a lead plummet—with a line marked off in fathoms of six feet—was dropped over the side of a ship to measure the depth of the channel. The sailor with the line then called out the depth to guide the helmsman and captain in navigating the vessel. The sailor's calls were dubbed "soundings." By analogy, the queries of the dialogue in this chapter were plummets to elicit Esther's own "soundings" about mental health education. From this simulated visit with Esther, an interpretative chronology of her life and work follows.

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CHAPTER III

LIFE TIME LINES

SOME DATES IN THE LIFE OF ESTHER MIDDLEWOOD

- 1908 May 23. Esther Louise Middlewood, born at home on Hyde Street, Detroit, Michigan, the second child of Burdette George Middlewood and Ethel Bromley Middlewood. (Ada, an older sister, was born on November 28, 1906.)
- 1909 December 31. Brother, Howard, born in Detroit at family home.
- 1911 October 11. Brother, George, born in Detroit at family home.
- 1913 January 2. Brother, Homer, born in Detroit at family home.
- 1914 Family moves to Redford, Michigan, where Esther attended the first and second grades in a one-room school.
- 1916 Family moves to Farmington, Michigan, where Esther continues the elementary grades in a one-room school.
- 1917 April 10. Sister, Barbara, born in Farmington at family home.
- 1917 <u>Ca. May.</u> Father enlists in U.S. Army during World War I.
- 1918 October 18. Father died in Florida from severe flu epidemic of 1918 while still in military service.
- 1925 Esther is graduated from Farmington, Michigan, High School.
- 1925 Esther enters the University of Michigan, Ann Arbor.
- 1929 Esther is graduated from University of Michigan with A.B. degree in Education and Psychology.
- 1929 Esther teaches English and Mathematics at Caro High School, Caro, Michigan, for next six years.
- 1935 Esther re-enters the University of Michigan.
- 1936 Esther obtains M.A. degree in counseling and guidance.
- 1937 Esther teaches Mental Hygiene, English and Sociology at Benton Harbor High School, Benton Harbor, Michigan, for next three years.
- 1938 December 2, Esther's mother, Mrs. Ethel ("Middy") Middlewood, is killed in an auto accident.
- 1940 Esther becomes Director of Guidance, Junior High School, in Benton Harbor, Michigan.

- 1944 Esther is psychiatric social work trainee, Kalamazoo Child Guidance Clinic, Kalamazoo, Michigan.
- 1945 Esther is psychiatric social worker, Children's Center, Muskegon, Michigan, for two years.
- 1947 September 1. Esther is appointed as first Mental Health Education Consultant, Michigan State Department of Mental Health, Lansing, Michigan.
- 1948 September 1. Esther is appointed Chief, Mental Health Education Division, Michigan State Department of Mental Health.
- 1952 Sister, Ada, dies.

OK, baby, this is the world,
So inhale and exhale,
And be with us awhile
--William Saroyan

It was late spring--May 23, to be exact--when Esther was born to her parents, Ethel Bromley Middlewood and Burdette George Middlewood. The delivery was at home, not unusual for the time, and the baby was healthy. Mother, too, did well, and no one remembers just how father fared that day.

The year was 1908. Ex-President Grover Cleveland died on June 24th. President-elect Taft beat the Democratic nominee, William Jennings Bryan, that fall as President Teddy Roosevelt was completing his term of office. Only a few months after Esther's birth Orville Wright was seriously injured, and Lieutenant Thomas E. Selfridge was killed, while testing a Wright aeroplane (sic) attempting to pass these government specifications: carry two persons with combined weight of at least 350 pounds for 125 miles and a "speed of at least 40 miles in still air."

Press Publishing Company, 1909), p. 465.

Current literature, it was reported, reflected the "appalling extravagance and extreme poverty of the present day, the wild craze for excitement of the idle rich, the looseness of the ties of matrimony and the looseness of business honor."

The race question was described as "one of the cruel questions the United States must face."

A serious race riot, accompanied by the lynching of negroes (sic), occurred that year at the home community of the Great Emancipator, Abraham Lincoln—Springfield, Illinois.

A best seller in 1908 was the book, <u>Together</u>, dealing with married life in the United States. Some five thousand troops continued the third year of the military occupation of Cuba started by the United States in 1906. Both the Emperor and the Dowager Empress of China died within one month of one another in 1908. H. G. Wells' new book, <u>The War in the Air</u>, describing airships which attack the United States in a world war, was published. The publication of <u>Psychotherapy in its Relationship to Religion</u>, by Dr. Cabot, was an example of the current interest in "mind over matter" and the connections between disease and various forms of religion. <u>The Cry of the Children</u>, publication on child labor, coincided that year with Congress' passage of a model child labor act for the District of Columbia.³

¹<u>Ibid.</u>, p. 360.

²<u>Ibid</u>., p. 361.

^{3&}lt;u>Ibid</u>., pp. 361-363, 465, 617, for data in this paragraph.

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In Chicago Dr. William Healy held his first meetings in preparation for the operation in 1909 of the Juvenile Psychopathic Institute, first child guidance clinic in the United States. Only two years before the University of Michigan had opened the first psychopathic hospital in the U.S., and that same year—1908—Massachusetts was following up with the first such hospital to be operated within a state hospital system. Clark University in Massachusetts was preparing to receive a visitor the following summer whose publications, recently translated into English, were starting to create heated controversy. The visitor's name was Dr. Sigmund Freud.

"Lunacy," "lunatic asylum," and "insane asylum"
were still accepted terms, and psychiatrists were widely
known as "alienists" who dealt with "alienated minds."

[Today sociologists talk again of alienation.] And in that
very city where Esther was born, the technological revolution which was becoming so much a part of American culture—
with its consequences for alienation, mental illness, and
mental health—was well illustrated in the budding automo—
tive industry. Ford produced the first Model T in 1908,
but horses were still competing with motorized buses in
Detroit's famous park on Belle Isle. That fall, only a

Nina Ridenour, Mental Health in the United States (Cambridge, Massachusetts: Harvard University Press, 1961), pp. 1-2.

²M. M. Quaife and William White (ed.), <u>This Is Detroit</u> (Detroit: Wayne University Press, 1951), p. 126.

few months after Esther was born, W. C. Durant combined the Buick and Olds organizations into his first components of the new General Motors Corporation, later to add some twenty auto and parts companies in just two years.

So it was, that among the flux of many events later to become "historic" with the passage of time, the Middle-woods celebrated the birth of their second child, Esther.

And there was one more rather special incident that year, as little publicized as Esther's own birth. An episode just seventeen days before Esther's birth was to become the earmark of another birth, the meeting of a group who came to be known as the founders of the national mental health movement.

That other birth is described by Nina Ridenour, historian of the mental health movement, as follows:

It was the afternoon of May 6, 1908, that a little knot of people sat down together in a residence in New Haven, Connecticut, upon the invitation of Clifford Whittingham Beers--a young man with a remarkable history--to organize the Connecticut Society for Mental Hygiene, the first state association of its kind and the beginning of the organized mental health movement in America. The objectives of this pioneering little group have a familiar ring today: "To work for the conservation of mental defects; to help raise the standards of care . . .; to secure and disseminate reliable information . . "--phrases which in the years since 1908 have, with minor variations, been repeated in the charters and by-laws of hundreds of mental health associations all over the world. History does not tell us the extent to which the New Haven group shared the high sense of destiny

Arthur Pound, <u>Detroit</u> (New York: D. Appleton-Century, 1940), pp. 293-294.

of their young founder (he had just turned 32) but Clifford Beers for one had no doubts about how he intended to proceed. According to his plan the Connecticut Society was not only to be the first in a long line of societies to follow, but also to serve as a pilot effort to provide experience in organizing. As soon as feasible he proposed to organize a national society—a plan he carried out to the letter nine months later, when on February 19, 1909, he invited a similar group of a dozen people to come together in New York City's Manhattan Hotel for the purpose of creating the National Committee for Mental Hygiene (now the National Association for Mental Health).1

It was to be some years before the events in Connecticut and New York came to have any special relevance for Esther Louise Middlewood, that other newborn infant of 1908. Certainly no one could have predicted then what was to become her significant role in the mental health movement that Clifford Beers and his colleagues started in 1908.

Relationships with Grandparents

On a more personal level, too, Esther was to find another significance regarding her birth—the irony of especially being named after her paternal grandmother. She recalls:

On both sides my parents' families were English. My paternal grandfather was from a so-so family, and he was employed in a modest job for the Detroit News Company, a distributor of magazines and newspapers. I was fond of him, and he was rather quiet and unassuming. My grandmother apparently was quite sensitive about her family background as compared to my mother's family, which had a somewhat distinguished history. In fact, my grandmother found it

Ridenour, op. cit.

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necessary to get up a family genealogy and discovered a cousin, a Bishop Wesley of South America, who added some distinction, but there were no outstanding heroes. My grandmother was a very strong person, somewhat artistic. I didn't like my grandmother, and I don't think she liked me, even though I was named after her. I don't think she thought my mother should have had me. My older sister, Ada, was like my grandmother, and my grandmother obviously preferred her.

Esther recalls how her paternal grandmother would bring gifts, such as two dolls on one occasion, and would show preference to Ada. The dolls, one dressed in pink and one in blue, were first presented to Ada. The remaining one, which happened to be blue and was far from Esther's choice, was given to her. Similarly, the grandmother usually gave Ada her first choice of hair ribbons and dress materials. The grandmother also teased Esther in such a way as to make her feel less attractive in comparison to her sister. Again referring to her own birth, Esther comments:

I have the impression that my mother was very happy when she first married and prior to my birth. My father travelled for the Burroughs Company, and she accompanied him. When she became pregnant with me she could no longer be with him and had to go live with my father's parents. (There was a stepmother in her own home with whom she was not particularly comfortable.) She and my grandmother did not hit it off, and she felt she always had to be on her good behavior because my grandmother tended to be so critical. I am sure the controls placed on me very early were quite strong in an effort to keep peace with my grandmother. My mother later told me that this was one of the unhappiest periods of her whole life. I am not sure that she was very glad that I came along at that time. I think, too, that both my mother and my father really wanted a boy.

Esther's maternal grandfather Bromley was an engineer-surveyor who did some of Detroit's early city planning. He was of English stock, with connections to minor aristocaracy and the town of Bromley, in Sussex, England. Esther's maternal grandmother died in childbirth, and Esther never knew her. However, she did know her grandfather's second wife, her stepgrandmother, whom she describes as a beautiful, proud, and haughty, aristocratic woman of German extraction. Rather than "grandmother," she was known as "Aunt Rose" and was very meticulous, rigid, and proper.

Aunt Rose's independence and pride were such that once when she broke her hip she disdained the use of canes. She was a fascinating, although somewhat distant, figure in Esther's childhood. Visits to the grandparent's home, although not conducive to free play or warm and intimate feelings, were always something of an occasion and were a glimpse into a more privileged, sedate, and mannerly world. Esther, too, had a special—if not close—feeling to grand—father Bromley, despite whatever feelings the grandparents had about Esther's mother having married "out of her class" to Esther's father.

Relationship to Father

Of a different class or not, her father is remembered by Esther in her own words:

He was genial, loved people, and was a friend of everyone. He was very outgoing and loved to play with his children. I can remember him putting me

on his shoulder when I was four or five. He was everything wrapped into one for me then. I was so impressed with his strength. He was a fairly rigorous disciplinarian and had a flashy temper. I was his favorite.

She recalls her father as loving to talk, but not being especially athletic or interested in outdoors activities.

"He was more of a reader," she believes. He loved to cook

(as did his father) and more often than not, would cook

Sunday dinners. After his earlier travelling job when he

was first married, he became a motorman on the Detroit street

car system. Esther recalls the pleasurable experience of

riding immediately behind him as he operated the trolley

out to the "turnaround" and back on the round trip. "It

was wonderful," she says, "just to see the back of his head

and his shoulders." Sometimes she and the entire family

took their lunch and made a special occasion by eating at

the park near the "turnaround."

Although Esther believes that in some ways her mother was the stronger personality, her mother definitely showed deference to the father and fostered this attitude in the children. There were the subtle, but definite, actions such as father's prerogative of opening and reading the daily newspaper first before anyone else. It was also something of a family ritual that all the children got cleaned up in the afternoon just before their father arrived home

The "turnaround" at the end of the street car line was a circular loop of track which enabled the motorman to reverse the trolley car for the return trip to go downtown.

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Esther's recollections of her father are not so rhapsodic as to blur all memories of either her own pranks or his discipline. When she was five there was the occasion when he became so angry because he thought the children had started swimming too early in the season at the nearby river, and he was afraid that they would catch cold. At least that's what her father said, but Esther wonders now if what really bothered her father so much was that the swim was in the nude. For the record, none of the children caught cold.

On another occasion during a winter blizzard it
was necessary to get supplies at the store, and Esther had
volunteered to walk the two-and-one-half-mile trek with
her father. The snow was still knee-high, and the temperatures were near zero. When her father hastened home, half
frozen, he was very upset when he realized that Esther was
not at his side and apparently had dropped off only a few
steps from the door. Going back with apprehension that
she might have frozen or wandered further and gotten lost,

he found her "making angels in the snow." She was quite unconcerned and seemingly oblivious to the tree-cracking temperatures. Meantime, her father's ears were quite frost-bitten. Esther leaves out a description of her father's discipline upon this occasion, but suffice it to say, she pictures her father's temper as "flashy."

Esther depicts her younger brother, Howard, and herself as possessed with an intense curiosity as children. She thinks their curiosity was sometimes misinterpreted as mischievousness. If this misinterpretation took place, it surely was not the first instance—nor is it likely to be the last—that parents have done so. Be it curiosity or mischievousness, Esther describes these examples.

Esther loved the horses that pulled the fire company rigs and would follow them on their runs. Once she got lost and had to be brought home by the police. Was she really running away from home? Esther says not, but she is not sure her parents understood about these jaunts. On another occasion she and Howard hid under the tarpaulin of some farmers who had stopped at a store operated by Esther's parents. The farmers were on their way to the farmer's market in Detroit. Curiosity or mischievousness?

Still another time she and Howard were exploring a large doll house which was up on a hayrack or wagon.

Apparently unaware of the two children in the doll house, some gypsies hitched their car to the hayrack in an attempt

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to steal it. However, the local constable—with the unlikely name of "Daddy Lightfoot"—managed to apprehend the gypsies before they had gotten very far. The two Middlewood child—ren were rescued—only to have the two motives of curiosity versus mischievousness weighed again in the parental scales of justice.

When Esther was six and her brother, Howard (that pair again!), was four and one-half, they went to "find" their father at his work as street car motorman. On their walk they buried their sweaters and shoes because of the heat and somehow ended up in their underpants. They finally "found" their father, who up to that moment was unaware that he was "lost." Perhaps father Middlewood never quite understood, for he was either so angry or so embarrassed that he tied his curious (mischievous?) urchins on the back platform of his streetcar, where they were temporarily disowned by paternal edict and exiled from the main passenger section.

Once Esther and Howard, that ubiquitous duo, set the house on fire. A friend, Esther claims, had accidentally spilled a five-gallon can of gas off the back porch. The ground was so hard that the gasoline formed a puddle on the surface. How could the evidence of the "crime" be eliminated? Esther struck on the idea of burning the puddle away. Her parents, unknowing, were in the front of the house. The only trouble was that the porch itself began

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to burn. Whether her parents were summoned by the scent of burning wood or the panicky yells of their miscreant offspring remains as fuzzy as the wisps of accumulating wood smoke, but they arrived. Hastily, a carpet was saturated with water, and the fire was felicitously smothered before there was any serious damage. Less fuzzy in Esther's recollections was the discipline administered via father's razor strap that day.

Counterpoint to memories of occasionally sharp punishment at the hands of her father is the happier narrative of his protectiveness and reassurance. Her father was particularly pleased on one occasion to obtain a ride for the family in a special launch going to Detroit's well-known Belle Isle recreation area. The launch, of shallow draft, rode low in the water. To a child it almost seemed as if the waves would engulf the craft and swamp it. Sensing her anxiousness, Esther's father reassured her and showed her how pleasing it was to hold her hand down into the water to enjoy the flow around her fingers. There was also the instance when her father allowed the children to go sit on the rocks in the river just off the Belle Isle shoreline. Caught suddenly by an unexpectedly large wave, Esther fell backward off her perch. Again standing by with tender reassurance, her father helped her recover her equilibrium, her breath, and her confidence. Elaborating, she describes her father's attitude:

He was willing to let us do things, yet was protective and reassuring, too. He was generally more permitting—"ing," that is, not permissive—than my mother. I will always remember his happiness in making fun for us on those picnics.

Plain, almost everyday, events in the life of a young child, these were, to be sure, but from such recaptured incidents did Esther draw the main contours of her relationship to her father.

When her father was still at home during her early childhood, the family often went out for picnics and took trips to Palmer Park or Bob-Lo Island or Put-In Bay on excursion boats. Among many happy memories, Esther recalls the canoeing on Belle Isle where people listened to current records on the early gramophones while they paddled. There were the willow trees along the shore, too, that made wonderful places for children to climb, play, and devise makebelieve games.

There were a few long-remembered anxious moments, too. Such was the time of panic when on the way to a boat for a picnic, Esther dropped a jar of pickled pig's feet, glass and contents to be broken and splashed in the middle of Woodward Avenue, even then one of the most heavily-trafficked main boulevards in downtown Detroit. Or what does a little girl do to quell the worry of getting separated in line waiting for the Bob-Lo island boat trip, with the result that she and her brother embark on a different boat than the rest of the family? Esther well remembers the

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shouted instructions from her parents, "Wait for us at the dock at the other end!" Not the least of her concern was the fact that she was carrying the basket of chicken and sandwiches which the family ordinarily ate during the boat ride.

Father's Enlistment and Death

It was into this warp and woof of everyday moments, some to be remembered longer than others, that the shock of her father's enlistment in the army during World War I took place. The excitement, even patriotic fervor, of those days is difficult for more recent generations to comprehend. Disillusioned, even cynical, about nationalistic motives in wars, the present-day population is more likely to regard military service as a job to be done and gotten over with a minimum of "hoopla" and unmarked by any surge of enthusiasm or high moral aspirations. By contrast, the mood of the times in the days of her father's enlistment, was a considerable measure of belief that the world was indeed to be "saved for democracy." The Yanks were quickly to deliver the coup de grace to what had come to be regarded as the forces of the "Horrible Hun" under the direction of an evil Kaiser.

Depths of understanding might come to Esther in later, more mature years regarding her father's enlistment in military service—including the fervor and patriotism of the times. However, at the age of nine she could only

31. inte. 12. :: e:: 727 De o 100 112 ·11 11 ٠.٠ ... ÷-_ : .: react to his action as an emotional desertion. She was joined in this feeling by her mother, to be left with the care of six small children. Many of her relatives were to express condemnation of her father as being irresponsible. Esther recalls seeing her father once while he was on leave and in uniform. His death, when she was ten, came less than one month before Armistice Day, when in the course of events, it might soon be expected that he would be discharged and return home again.

Her father's death was the ultimate confirmation of his desertion. Esther's reaction was so strong that she had to fantasy that he died as a war hero when the truth was that he was one of many victims of that era's historic and deadly flu epidemic. Even at the age of 22 she was still preoccupied with her father's desertion and death and wrote to his old army buddy about him. One of her favorite high school teachers, too, was to be entwined in this fantasy, for she also thought that Burdette Middlewood had died in World War I combat. What were the influences that led to her father's enlistment? Somewhere the answers lie hidden in the complexities of his own nature, his marriage, and the social forces of his times. Maturity would bring to Esther a fuller understanding of his impulsive nature, even an awareness that her father never quite assumed the essential responsibilities of being a husband and father. But even for a ten-year old daughter, now grown

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up, there would always be a certain mystery about the inner drives that propelled her father into the fateful course culminating in his death far from home and family.

A Family Without a Father

For Ethel ("Middy") Middlewood, wartime widow with six children, ranging from babe-in-bassinet to eleven-going-on-twelve, there was precious little time to dwell on her husband's demise. That winter all six of the Middlewood children were in the Detroit Children's Hospital at one time or another. By all odds, the winter of 1918-19 was one of the most trying, demanding periods in the life of this thirty-two year old mother.

That illness could sweep through a family of young children is not remarkable even now—much less then in an era of less developed preventative medical care. Even so, for those who are impressed with the interaction—the "one—ness," in fact—of psyche and soma, the illness of the six children swiftly accompanying the bereavement of a husband's and father's death, seems striking. Esther herself devel—oped pneumonia while her brother, Homer, had something like today's strept throat, and Barbara was diagnosed as a dip—theria carrier. Ada, Howard, and George had influenza. One of the symbols of that very miserable hospitalization for Esther came to be a very simple object—her mother's jaunty brown beaver hat. For it was this hat that Esther first spotted out the window, down the hall, or at the door

to let her know that "mom" had come to visit and break the lonely monotony of sterile hospitalization.

In the years to follow, the kind of woman "Middy" Middlewood was, showed in many varied facets. No matter how much disappointment or bitterness she may have felt about her husband, Esther never once remembers her mother saying anything against him. The only time that ever verged on this possibility was once when Esther whined about some task her mother assigned her and cried out, "If my daddy were here, I wouldn't have to do it!" "Middy" burst out bitterly, "Oh, your daddy..." with whatever thoughts that would have followed being left unsaid and choked back in controlled anger. Esther says she could seem to sense that her mother would have said something negative about the father. A chastened little girl lost no haste in settling down to do the chore with no further complaint, for she is sure she would not have wanted her mother to say anything derogatory about the father at that time.

Regardless, then, of her own mixed feelings about her husband, "Middy" was mindful of what it meant to her children to have as positive a picture of their father as possible. Moreover, she knew it was important to do whatever she could to make up to them for his loss. Esther comments:

I cannot help feeling just how much wisdom mother had about this. She was always inviting male relatives and their families over to the house. Then there was "Uncle" Fred and "Aunt" Matey. They

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were not really our relatives, but "Uncle" Fred was very close to us, as close as any real uncle could ever be.

Years later, in the depression of the 1930's, Esther was to reciprocate the emotional gift she had received from "Uncle" Fred by taking him and "Aunt" Matey into her home for nearly a year when he had suffered some severe economic reverses.

Along with being mindful of her children's needs for relationships to older men, from the very beginning of her widowhood "Middy" was very proud and would not seek help from more affluent relatives. "She would rarely accept anything from anybody," her youngest daughter, Barbara, was to say many years later, and some of her children occasionally felt "Middy" was overly independent. She managed for several years on a veteran's widow's pension or a mother's pension—the early forerunner of Aid to Dependent Children, as this assistance is more currently named. Esther remembers that it was something of a family occasion when the monthly checks arrived. At one time the amount was \$52.50 per month for a mother and six children.

The family continued to live in what Esther's cousin called the "children coop." Esther, though, describes her family's home as a simple, not-so-small frame green farm

lof this name, Esther comments: "Dad had originally designed the building as a chicken coop because he had intended to have a chicken farm. However, it was finished as a house, and a sun porch was added in front. In those days it might have seemed small to others, but to me it was wonderful and our own. According to today's homes it was not really small--42' by 26'--without bath and porch.

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house with clapboard siding, a large combination living—dining room, a kitchen, and two bedrooms. It was not quite "two rooms and a path," as the saying goes, but "Chic Sale" supplied the outhouse bathroom facilities, and water was drawn from a well. No luxuries of inside plumbing, electric lights, or a telephone for the Middlewoods in 1918!

Through the years, both inside water and an inside bathroom were to be added as finances permitted. Esther remembers the whole family working on putting in additional wallboard partitions and adding on a room. To this day, Esther enjoys wood crafts, wood finishing, and tinkering with mechanical objects, such as the power lawnmower. Perhaps time adds a romantic glow, but she truly remembers those early construction projects as pleasurable rather than as arduous. Her mother typically added gaiety and lightheartedness to family work projects.

The family--and "family" is used here advisedly-tilled the five acres where the Middlewoods lived on the
outskirts of Farmington, Michigan. There was always a large
vegetable and flower garden. With her six children, "Middy"
ran an assembly line of vegetable processing to prepare
food for canning. Even Barbara, as a pre-schooler, had
a part--such as picking the silk off the ears of corn.
Vegetable soup, home-canned, was a family favorite all winter. The ingredients varied according to the seasonal variation of ripening crops. Each jar, then, had an element

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of surprise as it was opened and sampled. Not only vegetables and flowers took root and thrived in the Middlewood five acres. For Esther was to relate later that every one of her brothers and sisters were to have cultivated in them a love of growing things, shown either in their vocation directly, or indirectly in home gardening.

It is not accidental, either, that Esther's yard and garden have a very special meaning for her. informants have commented upon her fine photographic skill. and her still pictures of flowers from travels in the Caribbean and in Mexico reveal once again that deep ground of appreciation for what she herself would call God's handiwork, that awe for the creative potentialities in one small, and seemingly ever-so-unlikely seed. "Middy," it seems, was to bequeath to each of her children this legacy from what could have been an onerous chore, performed by reluctant hands and dragging feet of resistant children. a few parents would marvel at the capacity of this mother to imbue her children with a transforming pleasure which colored duty with a kind of joy. It is small wonder that Esther's neighbors and friends show a mighty respect for her prodigious energy in many endeavors, not to mention

Regarding her interest in photography, Esther notes: "Dad loved photography, too, and was rather good at it. Of course, he used glass plates with the camera that you hunched behind with a cloth draped over your head and shoulders. He developed his own pictures, but I was too young to share in that at the time."

her proclivity for work in her garden at 5:30 a.m. in summer dawn's early light.

If straitened finances were a goad to hard work at home, the slim family pocketbook was equally effective to-ward "working out" in nearby farmers' fields. Except for periods at summer camps, Esther recalls how the older children toiled at picking beans, harvesting pickles, or picking up potatoes from early morning until late at night by moon-light during summers.

They were able to earn more than \$5 per day apiece—a pay greater than the noted \$5 minimum wage offered by

Henry Ford in his auto plants. (This \$5 daily rate caused great controversy among those nation's employers who thought he was overpaying his workers and creating unfair competition in the labor market.) Regarding finances and personal attitudes, Esther says:

There was never a time when I "felt poor," although we were considered to be poor, and objectively we certainly had a financial struggle. We dressed in "hand-me-down" clothing. My mother also made much of our clothing, and she had a knack for adding something attractive or styling the clothes so that I never felt that I lacked in personal appearance. My first "purchased" dress came when I was a sophomore in high school. There was one thing that my mother insisted upon. We always had new shoes, and no one was ever permitted to wear someone else's shoes. Sometimes we had to do without new shoes for awhile longer because one of the other children had his turn for new shoes that month. We always had adequate food, shelter and clothing. and mother had a knack for turning our hardships into fun.

Along with raising garden crops, the family built a small

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barn for two milk cows, "Bessie" and "Betsy." Wood was chopped from trees on the home acres to provide fuel for cooking and heating until later years when an electric stove was installed in the kitchen and an oil furnace was put in for heating.

Mother Becomes a "Lady Postman"

With the added financial needs of a growing family and her own sense of independence, it was inevitable that "Middy" would think of ways to work toward self-support beyond the self-help projects of home gardening and dress-making. Until Barbara, however, was old enough to enter school, she took only shorter term jobs, such as helping at someone's home, where she could take Barbara with her.

As Barbara approached her fifth birthday, "Middy" thought more specifically about more regular full-time employment. When she was Ethel Bromley, prior to her marriage, she had worked for the Burton Abstract Company in Detroit. She had made mechanical drawings and blueprints, as well as attending to other tasks in the office. She was especially captivated with architectural drawings and details, with their intricacy and artistry. Perhaps there was just a touch of her father's eye for engineering and surveying, and she felt drawn to return to her old job, which she had been assured was still open to her.

Ultimately, though, the decision was made on the basis both of a new opportunity and especially her desire

to be away from her family as little as possible. "Middy" later was to say:

I thought wistfully of my old work. I loved it and I had to make a living for those children... six of them...But I knew that would take us into the city. They loved the country...and it was for them. I hadn't the heart to crowd them into a tiny apartment where the din and scuffle of city streets would replace the sweetness and the sun-soaked beauty of the countryside.1

Esther's mother was given an opportunity to try operating a rural mail route for an official trial period of six months. (Unofficially, people around town said things like "I give her about two months," or "She won't last two months," according to what Esther heard her mother say later.)

"Middy" herself was not altogether sure she could last on what she described later as "a rough, storm or shine, day-in, day-out job on the country roads." To complicate matters further:

I had never touched the wheel of a car until I set out in one the first morning on Rural Route 2. For several days I had driven with another carrier, and watched him handle the car. That was all. No one knew I had never learned to drive, and they never did know, I guess.3

From then on she bought a new car every year, which had the incidental, but important, advantage of assuring

¹Esther McIntyre, "'Lady Postman' While Wearing Out 10 Cars on Job as Rural Carrier Finds Time to Raise Six Children and Take Lead in Club Work," The Detroit News, July 30, 1933, Feature Section, pp. 2, 8.

²<u>Ibid.</u>, p. 2.

³ Ibid.

mobility and greater opportunity to travel and take part in cultural activities for her children in later years. Her new job was also to reinforce for her children that image of diligence, efficiency, and careful planning—combined with a warm interest in people and a desire to be helpful—which impressed both her children and others who came to know "Middy." Speaking of her job, she was to say:

It's a human interest job, this business of delivering mail to people. You find "sob" stories, comedy, and tragedy all along the line. I've been "Middy" to everyone on my route all these years, and I've done everything for the folks I serve from lending a woman 50 cents to buy gas so her husband could go to work, to rushing for the doctor when a new baby was coming. You almost make their troubles your own, so intimate are the glimpses you get into the lives of the village people and their rural neighbors.1

Esther's Relationship to her Mother

The time is more than thirty years ago. The indirect quotations are from Middy in a feature story in the <u>Detroit</u>

News, but they could have been uttered by Esther in 1965:

She thinks women make their big mistakes in taking life and their ambitions too seriously. In being "perfectionists," they miss the casual, easy assurance that they envy in men. They strain their nerves and ruin their figures and dispositions.²

Her constructive criticism of a women's group, too, is almost an exact duplicate of Esther's own comment many years later regarding the tendency of a P.T.A. group to scatter

l Ibid.

²<u>Ibid</u>., p. 8.

its program emphases too widely and not concentrate with more depth on a few significant projects.

There is a touch, perhaps, of the lingering sentiments of women's suffrage movement in one of Middy's other
comments, but the problems of women's equality and male
chauvinism are not so completely resolved to completely
date this observation regarding the efforts of her Business
and Professional Women's Club to help younger women:

We hope to help these girls facing the future to avoid the difficulties we older women have had in bucking a "man's" world. We can point the way that will help them to keep their eyes open to the political maneuvers that discriminate against women while pretending to benefit them. We try to help them also to the individual adjustment that means successful, wholesome, happy living. The younger generation is well able to work out its own problems if we elders will give them intelligent cooperation and learn when to let them alone.

The last two sentences might have been lifted, almost word for word, from comments Esther has made and written. "Middy's" openness to new knowledge about human behavior was expressed, too, as she voiced the desire, had she had the time, to take "a course with a good psychologist" and her willingness to consult a psychiatrist when one of her children was manifesting behavior that concerned Middy.

"Middy" had an avid interest in books and considered reading to be one of her main interests when she could work time for it into her busy schedule. Even when times were hardest financially, she scrimped to save enough money

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for theater tickets so that she and the children might go to one or two plays each year. She was the first President of the local Parent-Teachers' Association and Worthy Matron of the local Order of Eastern Star.

The parallels, then, between Esther's lifelong attitudes and interests and those of her mother, provide a striking example of the process of "identification" (Esther might call it "emulation" or "imitation" as she spoke to laymen) which seems such a significant part of family life. Efficiency with tenderness, intellectual drive and curiosity, diligence with a sense of fun and lightheartedness, a love of the good earth, a concern for people without oversentimentality, a desire to be helpful in a practical way, but with an awareness of the problems of overdependency—such were the qualities that "Middy" represented to her daughter. And there were other attitudes, too, which might be best illustrated anecdotally.

Esther remembers well an early episode in which, at age four or five, she "stole" an apple from an A. and P. store and came home with it. She hid the apple to eat it in bed that night. For some reason the "crunch" of the bites into the apple, not to speak of chewing it, seemed horribly noisy that evening under the covers. [She was not aware of it then, but could the noise have been partly the growing voice of a child's dimly emerging conscience?]
"Middy" was not to be fooled, and somehow she became aware

of the apple, although saying nothing about it until the following morning.

Esther's confession was quick to emerge. "Middy" talked at length about how long it took to grow an apple and get it to market, the hard work of all the people involved, and how these people had to be paid. She then took Esther back to the store with the now half-eaten apple which Esther had not finished for fear of making too much noise. After being apprised of the situation, the store manager agreed with "Middy" to place the apple in front of a large Big Ben clock. Esther was assigned a small job of carrying oranges from a crate to a bin in her diminutive apron until an agreed-upon period had elapsed. Time did pass, and Esther was awarded the apple. Whether it was the apple or the experience—or both—that tasted bitter, she cannot recall, but she knows that somehow that apple had lost its savor.

Christmas Eve in the life of a lady rural postwoman and her children is well-remembered. "Middy" was not required to deliver every last-minute Christmas package that arrived at the post office. She had a deep feeling, though, about what some of those packages might mean to parents and children along her route, as well as what it would mean for the packages to arrive too late for Christmas. So, unlike some of the other rural mail carriers, she resolved always to deliver every single package to her route patrons by Christmas Eve. Sometimes it required two cars, and very

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early she involved the older children as "runners" to speed up the process of delivery and make sure that the boxes got right to the door. As her children helped in what became a traditional family project, the excitement mounted. The route was 40 miles and had 600 stops. Many of "Middy's" friends along the route had prepared gifts for her and her family. These presents made a growingly impressive pile, not to be opened until later, which contrasted with the dwindling stack of patron's mail, as yet undelivered. Ordinarily, "Middy's" mail run was completed by 4 p.m., but on Christmas eve, the work was seldom done before 8 p.m. Then it was home for a traditional oyster stew and the opening of the patron's gifts.

Relationships with Sisters

Esther thinks that mostly she was happy to have her new baby sister, Barbara, born a few months before the father's enlistment. She used to walk the new baby in a fine English "pram" and cover her with a beautiful afghan. At night, when Esther was only nine years old, she had the particular responsibility of getting up to heat peppermint water for Barbara's colicky spells. How cold those floors seemed on a sharp wintry night! Her father was working on a night shift at Ford Motor Company, and her mother was running a combination bake shop and restaurant for a few months before her father enlisted in military service and after the family's move to the small acreage in Farmington.

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Esther, then, was assigned the task of helping with Barbara's care, especially at night when her mother needed her rest before arising early to bake apple crisp. Farmers who stopped at the restaurant very early in the morning on their way to the Detroit farmer's market especially relished "Middy's" apple crisp.

Although Esther was "the little mother" for Barbara, there was pain in this relationship. The pain was doubly difficult for Esther because of the earlier feelings about Ada, her older sister, and the paternal grandmother's preferential treatment. Both Ada and, now, the new baby, Barbara, were considered to be more attractive physically than Esther. "My folks," Esther comments, were proud of me, but they cherished Ada." At home there were numerous professional photographs of Ada, but Esther can recall only one of herself. A childhood photograph of Esther reveals her to be a round-faced pre-schooler with a rather happy-appearing demeanor—by no means unattractive. It makes little difference whatever the objective facts were, though, for it is Esther's feeling that she was the Cinderella between two attractive sisters that really counts.

Problems of Adolescence and Maturity

As early as seven or eight years old, Esther was also aware that she had excessive weight. The awareness in elementary school grew into a deep—and perhaps in an adolescent, exaggerated way, even desperate—anguish.

"Middy," then, was presented with the tears of Esther, age fourteen, wanting to please the boys and struggling with new-found feelings of puberty. She recalls her mother saying:

You will just have to do things well, or even better than others, when you do them. I know you are heavy. If you play basketball, you will just have to play harder. You won't take any beauty contests, and you may not be able to dance the "Big Apple" or the "Black Bottom," but you can still learn to dance and to dance well.

There was no denial, no avoidance, no false reassurance, and no wishful thinking in "Middy's" direct, practical-minded approach to the problem of her daughter's weight. Esther knows that her mother also tried to stress diet control, but to no avail.

At the University of Michigan, when she was only seventeen, she was placed on a rigid diet in a special diet kitchen and dining facility. The health service doctor cruelly admonished her: "If you don't lose weight, no one will like you!" Various doctors through the University years appraised Esther for endocrine imbalance and thyroid malfunctioning—all without success. She consulted a psychiatrist at the University who did not encourage her to continue interviews for reasons of obesity. In 1959 Esther entered the Mayo Clinic, where diabetes was confirmed. As for obesity, she so poignantly remembers one warm—hearted Mayo doctor's comment as he put his arm around her shoulder and said: "You were born a chubby, and you will die a chubby. We will just try to help you live as long as possible."

Through the years Esther's friends have sometimes contributed well-intentioned, but not too subtle, hints--such as offering a calorie counter book. Others, though, have said: "Well, Esther, if you were to lose weight, it really would not be you. You just would not be the same person."

Obviously, for her friends and colleagues, the "real Esther, the you," has many facets, many dimensions in which her weight is only one aspect of many attributes. Within the bounds of being circumspect, it is not inappropriate to say that there have been romantic interests at various times in Esther's life. The details are scarcely important, nor were they sought from her. She seems to relate comfortably to men, includes both men and women in her circle of friends, and has been known to speak with particular effectiveness to men's service clubs, such as Rotary and Kiwanis.

Esther, too, has some convictions about marriage and the single life. She describes eloquently the plight of some married women today who are torn between family and career. Perhaps she has become more conscious of these conflicts among individual mothers and wives who have sought her out to air their feelings. Esther can reel off the names of numerous single women of her own acquaintance whose lives are fruitful, productive, and happy. She can even cite a study which suggests that single men are the group which is most unhappy as a group in our present society,

while the next most unhappy group is married women, with married men ranking as the happiest, and single women as next most happy.

It would be a mistake to believe that Esther would not have enjoyed marriage and children, for she believes very much that she would. She also likes to clean house and to cook. When she had an occasion in 1965 to care for her brother, Homer, during an extended convalescent period at her home, she had real satisfaction in "keeping house," although the nursing care in the early stages was very demanding and arduous. Esther can be sharp about what sometimes appears to be parental neglect or rejection of children; part of the force behind her sharpness is that she considers that rearing children is a privilege, as she has intimated in some of her articles.

Nor would Esther soft-pedal the loneliness that can come in the single life. One can lavish attention on a black cocker spaniel, and the clatter of a TV set can shatter the solitary stillness of one's home, but there is still something of pathos in Esther's comment in one of her lectures: "I seldom cry, for after all, who would be around to hear me." By no means feeling sorry for hereself as a single person, Esther is too honest to minimize the disadvantages of the unmarried adult. She believes,

¹Esther interprets that this comment was made in explaining the expression of feelings.

though, that the more talented, perhaps more educated, woman faces a dilemma in American society. The more aggressive marriage-minded adolescent girls [Esther has stronger language for them!] push early marriages, often with the pressure of their mothers behind them. The most eligible men are often propelled into early marriages as well. A girl who wishes to be creative and have the adventure of developing her capacities in a career for a while may face the prospect that marriageable men later, as a group, may be among the least capable of entering marriage. Esther has no pat or ready-made answers for this dilemma, but she raises serious questions about current tendencies to overemphasize early marriage.

There are the pro's and con's of marriage, early or late, and of the single life. Whatever these values might be, the more mature years for Esther brought a mixture of the quiet, ongoing flow of experience punctuated by times of a more-than-average abundance of happiness and satisfaction together with moments of heavy responsibility and sorrow. For Esther, with her rather calm, generally optimistic, perspective of her life and world, there is no doubt that happiness has generally outweighed hurt while satisfaction displaced sorrow.

And if this generalization holds true, perhaps it dates as far back as when "Middy's" nickname for young Esther was "Pudge," surely a name of endearment, while tacitly

acknowledging that her daughter was something of a "butter-ball" at the time. When Esther would become disconsolate or upset, even whine or weep a bit, her mother had a way of putting her finger to Esther's nose, giving it a gentle prod, as if to suggest a literal turning aside to put a new face, even a smile, toward the situation. She would say: "Now, Pudge, you know we Middlewoods can do anything, and everything will be all right." That emphasis on "we Middlewoods," with all its firm undertones of family pride and solidarity, became a lifelong foundation for Esther and her family.

We Middlewoods...The Close-knit Family

Most certainly out of necessity—in part—and perhaps by reasons of her own strong individualistic traits, "Middy" stressed self—sufficiency, sharing, and close—knit family cooperation not only while Esther was growing up, but far beyond into maturity itself. Linked with this no—tion as well was a stubborn refusal to be defeated by hard—ships, perhaps an almost Horatio Alger—like accent on over—coming obstacles with hard work and assiduous motivation.

The sustenance and support of these attitudes for Esther can scarcely be denied, but at the same time her mother's nurture of mutual responsibility and sharing among family members has probably fallen most heavily on Esther's shoulders. Perhaps, of all the children, Esther most deeply took to heart her mother's values. For years, also, "Middy"

seemed to assume that because Esther was single, she could more easily help other members of the family than could the married brothers or sisters who were struggling with the multiple problems of early married life. Although younger chronologically than her sister, Ada, the mantle of "oldest sister," emotionally speaking, seems to have been worn by Esther through the years. Ada was strong physically, but less gifted emotionally and intellectually and very preoccupied with the concerns of marriage and raising a family. For these, and perhaps still other reasons as well, it was Esther who frequently extended material and less tangible assistance to other family members.

The two-edged quality of sharing and mutual concern in the family was to crop up in a poignant and upsetting incident for Esther just before her mother's death in 1938. From a \$900 annual salary at Caro High School in her previous job, Esther had jumped to an \$1800 salary at Benton Harbor. It was the years of the Great Depression, but with such new affluence, Esther decided to splurge in a rare spree of spending. She bought her first fur coat and a velour hat of which she was extremely proud. (A friend had recently chided her for her self-denial and suggested that she should feel a little freer to spend something on herself.) She wrote her mother that on the next visit there would be a surprise to anticipate. To her utter shock, her mother's first comment upon Esther's arrival was: "Oh,

Esther, how could you spend all this money when your brother's children need orange juice!"

With this misunderstanding marring the visit, Esther returned to Benton Harbor and soon received two letters from her mother. The first letter, sent along with a second, but very different in tone, confirmed the mother's disapproval and deepened the misunderstanding. The second letter—written later and amounting to a retraction—recognized that at the particular time almost all of Esther's brothers and sisters owed her money and that she had, indeed, been self—denying for many years in offering help to others.

Esther saved the second letter, which also expressed her mother's more considered belief that she had been unfair to Esther, and the misunderstanding was resolved. However, she has never since purchased a fur coat and rarely wore the original coat and hat after this episode.

This incident took place only a few months before her mother's tragic death. On December 2, 1938, "Middy" Middlewood had stopped her car on her rural mail route and gotten out to deliver a package too large to put in the box. Her car slid sideways on the ice when she was reentering, one foot on the ground and one in the car. Middy was fatally injured when the car pinned her to a tree. Visitors at Esther's home today will find a picture of "Middy" on her coffee table. It is not at all unusual for Esther to point the picture out to a visitor, often

seeming to connect something that came up in the conversation with some quality or attitude or comment of her mother.

Maturity also brought changes in Esther's relationship to her older sister, Ada. Changed circumstances--perhaps the less intense feelings which come as contacts lessen and lives become more independent of one another -- brought a muting, a softening, to the harsh, bitter feelings of childhood rivalry and envy. Into this somewhat mellowed acceptance of one another's strengths and liabilities came the diagnosis of Ada's last illness: cancer. Ada came to Esther's home, where she remained two years until she died, with Esther giving much of the nursing attention in the most critical weeks. Later, too, as well as all along, Esther gave of herself to her sister's children. of great solace, she said, just after her sister died, when from the hospital window she saw her brothers and her sister, Barbara, walking together toward the entrance. Again, it was her mother's words: "We Middlewoods..."

In 1965 the sense of mutual responsibility was to be demonstrated repeatedly. Esther's brother, Howard, suffered a heart attack, and the family rallied to his needs devotedly. Her brother, Homer, was stricken with a cerebral thrombosis while alone in Florida. Esther left forthwith, was later joined by her sister, Barbara, and remained with him for weeks. She eventually brought him home with her during an extended partial recovery requiring the most

intensive and demanding attention. Esther rarely accepted offers of help during the most critical weeks during the long, slow months of recovery until he could be cared for in a convalescent home and resume work at his office in Detroit on a limited basis. On still another occasion, when a brother needed to appear in court under trying circumstances, Esther and her sister and brothers were there, too, to give support and encouragement. Again, "We Middle-woods..."

That close-knit network of "We Middlewoods" comprised the earliest, innermost heartwood of Esther's life. Sur-rounding this vital core were to come other concentric circles, each a layer of growth and experience, a new dimension. Esther would be among the first to say that the vital juices of family life shape the tree of individual growth. For it is said:

"As the twig is bent...
...So grows the tree."

CHAPTER IV

SO GROWS THE TREE

A man is a bundle of relations, a knot of roots, Whose flower and fruitage is the world.

--Emerson

Out of the matrix of her family, Esther found strong motives for achievement in school and in work. She might be "in the middle" both chronologically and emotionally between two sisters she regarded as more attractive than herself, but if she could "shine" academically or in applying herself to a job, she could gain recognition, too. The deep-rooted affiliation with her competent, hardworking, and intellectually alert mother provided incentives for marked striving in scholastic and vocational tasks. Again, we see the mutual resonance of mother and daughter.

Early Education

Esther first attended school in Redford, Michigan.

The family moved to Farmington, Michigan, after she completed the second grade, and she finished her elementary and secondary education there. Through the first eight grades, she attended a one-room school, which was conducive for a bright child to absorb the work of the students reciting in the higher grades above her. Recalling her one-room

school experience, she recounts:

I always did extra spelling and arithmetic. I would do the extra problems at the end of a chapter. Sometimes I did not even turn in the extra problems. I wasn't a "grade-hound," but rather saw learning as a kind of challenge. That seemed to be the way my mother saw things, too. I really was an "over-achiever" who must have appeared brighter than I really was. I was comely, and I was verbal, and I think the teachers liked my disposition in school. I had only four different teachers in elementary school. My mother knew them all, and they had been invited to our house for meals.

Esther recalled that when she did well in school, her parents just took her accomplishments "for granted."

On the other hand, her sister, Ada, was not as academically competent. Of this situation, Esther comments:

My folks handled this problem poorly. They paid Ada a dollar for a good report card, but I received nothing for my good card. My mother simply would say, "But, honey, mother expects it of you," if I felt badly. When my folks were away working, and we were supposed to share the household responsibilities, Ada would neglect her part of the work. I would feel troubled that my mother would come home from work and find the dishes undone. I would go ahead and do them. It was easier for me to do the dishes than to see my mother be unhappy.

Ada, in intellectual striving when an unusual circumstance arose in elementary school. Esther was double promoted in the fifth grade to the seventh grade. She now was in class with her own elder sister. She became especially upset during that year when it turned out that she had excelled Ada on an important examination, and everyone saw the discrepancy when the results were published. There

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were limits to competition, and remorse set in when she knew that she had publicly surpassed her own older sister in school.

High School Education

In high school Esther was an outstanding student, making the honor roll in citizenship and scholarship most of the time, although she was not the valedictorian or salutatorian in the small class of twenty-five graduates. She is remembered by her high school history and Latin teacher as a serious, conscientious girl "who always had the answer," while Esther herself characterized her relationships to teachers generally as "pleasingly impudent." Her teacher, Mrs. Dan Veazy, commented:

I can still remember Esther sitting right up front in my class. She always put her school work first. She was well-liked, but not an outstandingly popular student socially. I remember once that I gave her a "D" on a paper. I met her mother downtown later at the post office and told her about it. I commented that the content was good, but that Esther had been careless about spelling. Esther was upset, but her mother said: "Good, I have just been waiting for someone to pull her up short on that!" Her sister, Ada, was a terrible student, and I never thought she was attractive at all. Everyone knew that Esther was very concerned to be able to go to college.1

Esther was especially affected by four school-related individuals during her high school years. Of the four, three were faculty members and one was a fellow student. Archie Leonard was the superintendent of the small

¹Statement by Mrs. Dan Veazy, personal interview.

school system, as well as the girls' basketball coach and the literature teacher. Esther made the basketball team because she was hard-driving, skillful and light on her feet despite her chunkiness. She had what she describes as a high school girl's "crush" on Mr. Leonard, whose characteristics seemed to fulfill some of the needs for the paternal interest which she no longer had from her own father. Mr. Leonard loved poetry and had what Esther considered to be a high level of appreciation for literature, which he conveyed to Esther and other class members. He later became a lawyer in Pontiac, and fifteen years later acted as the executor for the estate of Esther's mother, having remained a friend of the family all through Esther's high school, college, and early work careers. Mr. Leonard was demanding and set high standards, which Esther learned to appreciate, especially since he could also be gentle and understanding when the occasion warranted it. Adapting the contemporary 'teen-age vernacular, Esther says that her high school French teacher, Mrs. Harold Wescott, really "turned me on" as a highly stimulating instructor.

Another influential person in high school was Harmon Boice, her classmate through the ninth to the twelfth grades and on into the University of Michigan for the first two years. They found mutual interests in literature and enjoyed

As based on an interview with Harmon Boice, Esther's classmate and longtime friend, as well as Esther's own comments.

doing things together socially. They visited back and forth in one another's homes, and Esther was very fond of Dr. Boice, Harmon's father, who also was a physician for the Middlewood family. Harmon greatly admired Esther's mother, "Middy" Middlewood, and enjoyed his visits to her lively family.

Perhaps the admiring relationship with Dr. Boice had some influence on Esther's desire to become a doctor when she was in high school. Several reasons eventually deterred her from this profession. The limited family finances played a prominent part. The rarity of women doctors and her hazy impression that women in medicine were rather "odd" made it hard for her to see herself as fitting into that profession. She considered missionary work, but wanted to do, not just preach. Esther felt that she must acquire some definite background in another service profession--such as medicine, teaching, or social work--before she could even consider becoming a missionary. She weighed the possibilities of social work and even went so far as to visit the renowned Chicago settlement, "Hull House," to inquire about the social work profession. She learned that the salaries of social workers were especially low at that time. She even got the mistaken impression that wealthy women principally were the only individuals who could afford to work in such an underpaid profession.

Esther Attends the University of Michigan

Esther was graduated from Farmington High School in 1925, having just had her seventeenth birthday. She entered the University of Michigan that fall with Harmon Boice, the only other class member to attend the University. A few classmates, she recalls, also entered the state teachers' college at Ypsilanti. Concerned townspeople had raised money to help Esther go to college, but she also worked very hard at a wide variety of jobs while attending the University.

She was employed in a private home, where she received her room and board, during her first year. At various times during her undergraduate career, she had a cleaning job in a rooming house and frosted cakes at the Poll Parrot Tea Room for pastries catered to fraternities and sororities. She ushered in a theatre, did housework for a physical education instructor, waited on table at the Martha Cook dormitory, operated a dormitory switchboard, and taught swimming at the University pool.

She never considered herself to be especially talented or assiduous in practicing the piano, but she had
taken lessons for years in grade school and high school.
She became sufficiently proficient so that she taught piano
for seventy-five cents a lesson for a time during high school.
This music training, plus her long-time experience in church
choirs, became the basis of her membership in the University

Glee Club and Choral Union. She never soloed, but laughingly recalls that she sang in an octet as background for
someone who did sing a solo. Later Esther was to learn
to play the trumpet and clarinet in the Interlochen Music
Camp, where she spent eight years as summer swimming and
waterfront instructor beginning in her senior year in college.

Esther's participation in sports at the University was also a continuation of earlier childhood experience and training. From informal swimming nearly as soon as she was able to walk, Esther had further development in swimming, including formal instruction, every summer at Girl Scout camps beginning at the age of twelve. tually qualified as a lifequard, and by the time she went to Interlochen as a college senior, was a lifeguard instructor. She was on the University women's swimming team and the women's hockey team for three years. In addition to the very active involvement in sports, Esther had parts in plays and also was on the debate team. In retrospect, she wonders how she ever managed to work so many hours, engage in so many extracurricular activities, and maintain a good scholastic record. She remembers, for example, getting up and swimming a mile each morning for three years while she was on the swimming team. She was the top swimmer at the 440-yard and 880-yard distances.

Esther took as many psychology courses as she could

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at the University, but she gradually began to see that her focus in psychology was not in working with animals in the experimental work that was so strongly emphasized in the Psychology Department at that time. Clinical psychology—closer to her interests—then tended to emphasize what she regarded as rather routine psychological testing. She wanted to work with people to be helpful, and testing in itself seemed dull. She was captivated by courses in sociology and anthropology, but always on the applied level rather than research.

Her academic advisor encouraged her to move toward teaching. The field seemed to offer security, which was important with respect to her family's limited financial resources. Then, too, her long work with youth in summer camps as a counselor seemed to fit the teaching interest.

Furthermore, she had the abundant family experience of being an older sister with a younger sister and three younger brothers. The common denominator of her wish to serve people had undergirded all of her evolving thoughts about medicine, missionary work, social work and, finally, teaching. Does this theme reflect echoes of her mother's attitudes which "Middy" voiced?

It's a human interest job...We try to help them also to the individual adjustment that means successful, wholesome, happy living. The younger generation is well able to work out its own problems if we elders will give them intelligent cooperation and learn when to let them alone...1

¹Esther McIntyre, op. cit., pp. 2, 8.

A Teaching Career Is Started

After obtaining her A.B. degree in psychology and education in 1929, Esther had a summer at Interlochen and then took her first teaching position at Caro High School, Caro. Michigan. Her practice teaching at the University of Michigan was at the University High School, where generally the students were of high academic background and intellectual ability. When she got to Caro, she realized how artificial the practice teaching had been. Like most beginning teachers, she was apprehensive about this first teaching experience. Her doubts were heightened by several factors. She found that in one class she had two male students who were older than she was. In a very large room used for a study hall she was to witness many students rhythmically clomp their feet as a particularly heavy-footed older woman teacher walked down an aisle in an unfortunately characteristic gait. Esther determined that she would not be caught by these two circumstances, being mindful that her heavier figure might become a butt of ridicule in some way. As for class discipline and the older boys, she exercised a firm, but friendly, approach. She is pleased that never once in her teaching career did she have to send a student to the principal's office, and the two older boys were no exception. She bought some crepe-soled shoes to avoid any particularly audible tread in the large study hall and was never subjected to student hazing.

In addition to the usual hazards of the new teacher, Esther had the special circumstance that her younger sister, Barbara, had come to live with her. "Middy," her mother, was not particularly well and did not feel quite up to coping with the vagaries of adolescence in her sixth and final child. Perhaps most important, though, was that "Middy" felt Barbara needed a better education than that rather narrow, strictly academic curriculum approach in the local home high school. Barbara completed high school while living with Esther, and the experience was both rewarding and trying for both.

Years later, Barbara recalls:

Once I was at the blackboard and Esther corrected me. I turned around and said: "Oh, Esther, I did too!" I had a class with Esther, and she had always insisted that I call her "Miss Middle-wood." I suppose she was conscious of being a beginning teacher and the need for respect from all pupils, even her own sister. I know I "heard about it" from her when I slipped—in my irritation at being corrected—and forgot to use the right name. I will say, though, that Esther was the best teacher I ever had. She was strict in class and she was strict with me when I lived with her, too, but I think I learned more from her than any other teacher.

On her side, Esther had her qualms about assuming the responsibilities of mothering her younger sister. She believes she bent over backward to be strict because of her own insecurity. She has wondered often how perplexing it must have been for Barbara to have her older sister be

¹Statement by Mrs. Barbara Oldenberg, personal interview.

a mother to her as well. She never wanted to be in the position of overshadowing Barbara as she felt in limited respects her own older sister, Ada, had overshadowed her. She knew that for years Barbara had heard of the academic and related accomplishments of which "Middy" was understandably proud with regard to Esther. Barbara did very well in high school, too, but both Barbara and Esther concur that having your older sister try to be your sister, mother, and teacher was confusing at times. Jokingly, Barbara adds:
"Not only that, when I went to camp, Esther was my counselor there, too. It seems I couldn't get away from her anywhere!"

Although a middle-sized class B high school of about four hundred students, as Esther recalls it, Caro High School then had no visiting teachers or counseling services. This deficiency was not unique for the time nor for the size of school, but it meant that the family-related or personal problems of students had to be handled entirely by the class-room teachers and administrators, to the extent that they were dealt with at all. For Esther this deficiency presented an opportunity rather than a problem. She coached debating and sponsored plays, which developed avenues for knowing many students on a more informal basis. Her individual interest was conveyed to both the students and the community. Evidence of this was to come on one occasion strikingly

l Ibid.

when a letter came to the town post office addressed, "Miss Goodfellow," and seeking help for a personal problem. The post office delivered the letter to Esther because of her repute, by then, of being committed to aiding individuals.

While she was at Caro she assisted an amputee in one farm family who at the age of eight had never attended school. She was able to help him get medical care, including prostheses and vocational rehabilitation services. reward for giving this assistance was to come some years later when he had completed work in chemical engineering and held a responsible position for a Michigan chemical Similarly, she was to help another family arrange firm. for the placement of their retarded child. Federal social services, such as the Social Security programs, were nonexistent then, and even the state services were minimal. Local responsibility centered largely in voluntary services, with the exception of very limited financial assistance rendered through politically-oriented township officials acting as relief dispensers. With such gaps in both school counseling services and community facilities, Esther recalls that many problems of children and families were simply neglected. However, with her interest and awareness of the limited services that were available, Esther became a kind of volunteer visiting teacher and social worker at Caro long before the school formally had such a service.

On a more personal level, Esther also reacted

Somewhat differently than other teachers. Her behavior at Caro was to be the forerunner of a consistent life style where she attempted to avoid stereotyped professional attitudes and contentment with routine, hackneyed approaches. She found that the teachers in Caro tended to be in a small, isolated clique. They had their own bridge club and music club and did not mix much with the townspeople. Many of the teachers, particularly the large number that was single, tended to leave the community on weekends and to be uninvolved in the Caro community generally.

Esther is not sure that the Caro townspeople would have welcomed more involvement on the part of the teachers, although she herself had no problem in getting into church-related activities such as the choir. However, she found that she also tended to go home for weekends, and certainly this pattern was rather understandable, considering her attachments to her mother and family. She is not sure that she would have stayed at Caro as long as she did were it not for the fact that her sister, Barbara, was there with her. Barbara, normally enough, preferred to remain with her classmates rather than having to shift schools in the middle of her high school career.

Esther Specializes in Counseling and Guidance

In the six years at Caro, Esther's interest in the emotional and family adjustment of her students grew. She sensed that personal conflicts often seemed to get in the

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way of learning and was intrigued with the notion of how such learning inhibitions might be reduced or avoided.

From this gradually maturing focus, she decided to return to the University of Michigan to obtain her M.A. degree in counseling and guidance. Her master's program focussed on her thesis: Satisfactions and Annoyances of Junior and Senior High Students, an unpublished study of 2,000 students. After obtaining her degree she at first intended to enroll for a term at Wayne University to prepare for teaching in the Detroit school system, where certain courses from the city university were required as prerequisites. However, she received a good offer to teach at Benton Harbor, beginning in January, 1937, and decided to accept it after completing some additional child development courses at Wayne University.

At Benton Harbor High School, Esther taught courses in English and sociology, with the latter course emphasizing mental hygiene concepts for one of two semesters. She understands that her course in mental hygiene was the first one to be given accreditation by the University of Michigan, which was the statewide secondary education accrediting body at that time. Her sociology course emphasized knowledge of the community and community resources, such as the social agencies and courts.

More traditional-minded teachers looked askance at her project-centered approach with the use of student

..... ; 300 :::::: E P i te ;=<u>=</u>= ::12 ie v iiie ii va --; à Esta ii († 330 ŧ. ::: `::· ia; committees. Committee chairmen arranged outside visits to social agencies and brought in reports, sometimes being excused from traditional attendance at class to engage in these projects. However, she had the complete support of her principal in what was then a fairly radical approach in teaching for that particular high school. During another year she deliberately took a widely heterogeneous group of students for a core course of English and social studies. She wanted to test the concept of teaching for individual differences and used small group methods to help students of varying abilities to operate at their own level of learning and experience. The class, although somewhat experimental in nature, was deliberately kept at the same size as other teachers' classes.

Esther wanted to combat the notion that anyone could teach for individual differences if their classes were smaller. She kept accurate records of scholastic achievement, compared with testing norms, for each student. She believes that she demonstrated that if teachers will be creative and diligent enough, allowances can be made for individual variations in students, and that they also make very satisfactory academic progress. A few of the other more flexible, forward-looking teachers adopted her methods, but somewhat to Esther's regret, many teachers seemed very content to teach in routinized, standardized, uncreative ways.

Esther felt that not only professionally, but

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On the personal level, Esther found that teachers had a set route for proceeding from the school to their residences and seemed to follow the route unvaryingly. Their life outside school hours, as well as in, seemed to be routinized to a high degree. To Esther, this kind of regimen was most distasteful. She also had a growing impatience with the lock-step, subject-centered, traditional curriculum and teaching staff which seemed to teach students as automatons who had no feelings, no families, and no freedom to be creative or different—in other words, not as human beings, but machines.

During 1940-1944 Esther became a guidance counselor and director of guidance at the Benton Harbor Junior High School, where she could try to use her interest and talents for more individuation of students as complete, living personalities. This work, as well as her previous work in

::: 2 <u>::</u>1 . . :.: ke: ter : i: 1 • ::: -:: ï.ê . V 4. **:** i Ç .::/ :: : ; . . . ÷ ; 32 ₹, 3 teaching the sociology and mental hygiene courses, brought her into ever-greater communication with the social agencies and community facilities of the community. She was active in community organization committees, particularly the Social Planning Council, the Twin Cities Girl Scout Council, American Cancer Society, and American Association of University Women.

Esther found her growing concern for the individual student and for wider community implications was throttled by demands for schedules of standardized testing programs. Too often, the tests had to be given routinely and limitations of time, teacher interest, or teacher competence left the results to be unused or misused. Again, the routinized, bureaucratic demands of the school testing program seemed to overshadow really individual concern for the student as a person.

Esther's Work in Child Guidance Clinics

Coinciding with these feelings, Esther met Dr. Clyde Simpson, first head of the Kalamazoo Child Guidance Clinic, a psychiatric clinic for children which was one of the early public clinics established by the State Hospital Commission, to be changed in 1945 to the newly created State Department of Mental Health. Prior to taking the position at the Kalamazoo Clinic, Dr. Simpson had been associated with the famous Dr. William Healy of the Judge Baker Foundation, Boston. It was this identical Dr. William Healy who, in 1908, that

same year that Esther was born, had been preparing to establish the first child guidance clinic in the United States at Chicago. Only a few years later he had moved to Boston to set up the Judge Baker Foundation, one of the most famous treatment centers in the country, with emphasis on the scientific treatment of juvenile delinquency.

Through Dr. Simpson, then, Esther was to feel still further the influence of the mental health movement through one of its very early leaders, Dr. Healy. Dr. Simpson correctly saw Esther's growing interest in individual considerations for children and encouraged her to take a training position in psychiatric social work at his Kalamazoo clinic. There had been some expectation that she would gain credit for field work training in social work at the University of Michigan, but this accreditation never developed. However, Esther had the benefit of careful, individual staffing of all of her individual treatment cases by Dr. Simpson, whom she found to be an excellent, painstaking teacher, who was not content with careless thinking and demanded the best from her.

Again, Esther was to receive the indirect influence of Dr. William Healy through still another member of the Judge Baker Foundation staff who had worked with Dr. Healy in the 1920's. Dr. Samuel Hartwell, Assistant Director of

Harry L. Lurie (ed.), Encyclopedia of Social Work (New York: National Association of Social Work, 1965), p. 99.

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the Department of Mental Health, was in charge of all community services—mainly child guidance clinics at that time—for the Department. Dr. Healy had written the foreword to Dr. Hartwell's well-known book of that era, Fifty—Five "Bad" Boys, recounting Dr. Hartwell's work with delinquent boys at the Judge Baker Foundation. Dr. Hartwell, a fellow of the American Psychiatric Association and the American Orthopsychiatric Association, had been President of the latter organization in 1940, just as Dr. Healy had been its first President in 1923. Prior to coming to Michigan in 1945, Dr. Hartwell had been the head of child guidance clinics in Worcester, Massachusetts, and in Buffalo, New York. Under his leadership, his clinic in Massachusetts had been cited as one of the outstanding clinics in the United States by the National Committee for Mental Hygiene.

In his speaking, writing and other professional communications, Dr. Hartwell placed a strong emphasis on the educational function of the child guidance clinic. ²
His concept was that a strong element of the clinic program

¹ From Dr. Hartwell's obituary in the <u>Buffalo</u>, <u>New York</u>, <u>Evening News</u>, July 31, 1951, as found in the newspaper scrapbook, <u>Michigan Department of Mental Health</u>, page number unspecified.

²As evidenced in personal interview with Charles Wagg, long-time leader of the Michigan Department of Mental Health and a close professional colleague of Dr. Hartwell in the years 1945-1951. Dr. Hartwell's views are also indicated in his Fifty-Five "Bad" Boys (New York: Knopf, 1931, pp. 1-8), and in his "Presidential Address," in the Journal of American Orthopsychiatry, X (April, 1940), pp. 207-215.

should be a teaching function for the community's caretaking groups and professions—such as social workers, workers in children's institutions, parents, clergy, teachers, nurses, and doctors. Through case conferences, as well as study and discussion groups, he saw the clinic staff as taking leadership to improve the care of children in the community.

It was almost inevitable, then, that a congruence of interests would bring Esther and Dr. Hartwell together. Following her one-year training period, Esther went to the new Western Children's Center, Muskegon, Michigan, where she was temporary Acting Director until a new psychiatrist came in to replace a Director who had left earlier. At Muskegon she carried on individual treatment cases of children, but also met with groups of community caretakers in the Hartwell tradition--more often than not, in late afternoon or evening sessions. Dr. Hartwell and Esther were committed very early and very clearly to the concept of education for positive mental health, and emphasis which came to be somewhat controversial in ensuing years. They both believed that with special skills of communication, the principles of living for emotionally healthy and satisfying lives could be learned and put into practice. were certain that there were not enough psychiatricallyoriented therapists to treat all the individuals in need

See Appendix, pp. 193-195.

of help. Furthermore, they were convinced that many families and individuals could be helped on a supportive educational level in groups—effectively and more economically than suggesting intensive individual therapy for everyone with emotional problems.

Somewhat fortuitous with the converging interests of Dr. Hartwell and Esther in the area of education for mental health was the passage of the National Mental Health Act of 1946. Through the National Institute of Mental Health newly organized within the U.S. Public Health Service, funds were made available to states for programs in research, training and education. Dr. Hartwell recognized the value of Esther's work in Muskegon and employed her as the first mental health education consultant for the state of Michigan in August, 1947. For Esther, this new work was a culmination of many years' growth and professional development. Now her deep interest in children and family life could be implemented by the widest possible outreach into many communities.

The very fall that Esther was appointed to her new position, Michigan experienced one of its periodic "exposes" of its mental hospital services. "Crackdown Due in Asylum Quiz" was to be one of the headlines in the <u>Detroit Free</u>

Ruth I. Knee and Warren C. Lamson, "Mental Health and Mental Illness," <u>Encyclopedia of Social Work</u>, ed. Harry L. Lurie (New York: National Association of Social Workers, 1965), pp. 495-496.

::-:: .: :: :: :: :x ;; • **;**; <u>:</u> ٠, 20 ... :: .../.: <u>Press</u> on <u>September 26</u>, 1947. One month later, on October 25th, the <u>Detroit Times</u> printed an article headed, "Sigler to Ask Millions for Mentally Sick," describing the current Michigan Governor's new state program.

"Asylum," which the Free Press headline writer had used, suggested the outmoded nomenclature more in voque forty years earlier when Esther was born, even though it may have been used because of technical needs for a shorter term than the more modern and humane word, "Hospital." The expose also was in keeping with the wave of such episodes occurring in the immediate post-World War II period. 2 when there was a greatly renewed interest in mental illness. So it was that Esther began her new assignment to see that along with the great swell of interest and concern for those individuals who were seriously ill with emotional problems, there was also a program of preventative emphases. For both Dr. Hartwell and Esther, their program of pioneering innovation at the state governmental level was to become a concrete expression of Sigmund Freud's cautious belief in the power of reason, or education -- in human affairs:

The voice of the intellect is a soft one,
But it does not rest until it has gained a hearing.

--Sigmund Freud

¹From news clipping scrapbook, Michigan Department of Mental Health.

²See Appendix, pp. 183-184.

Psychiatry (New York: Grune and Stratton, 1964), Introduction, p. x.

Department of Mental Health Background

The efforts of Dr. Hartwell and Esther in mental health education were predicated partly on historical developments leading to the establishment of a Department of Mental Health in the State of Michigan. During the nineteenth century Michigan followed the fairly typical state pattern of care for the mentally ill. Its first hospital for the mentally ill was opened as the "Wayne County Pest House" in 1832. Direct state responsibility was to come in 1859, with the opening of Kalamazoo State Hospital under the name, "Michigan Asylum for the Insane." The various "asylums" or "homes" to follow were operated autonomously by local boards of trustees without central coordination until 1923. However, beginning in 1911 the institutions were more typically called "hospitals," signifying the newer trends of the first and second psychiatric revolutions. In 1923 the first nominal step toward centralized direction occurred when the state legislature created the State Hospital Commission, meeting once a month and, having no staff of its own, at one of the state hospitals. The board was

This background material is based on The Development and Growth of Michigan's Mental Health Programs: A History of 125 Years of Transition and Progress (Lansing, Michigan: Michigan Department of Mental Health, 1962), pp. 1-39, and upon a personal interview with Charles F. Wagg, associated with the state hospital system and State Department of Mental Health for nearly thirty years in an executive capacity and for most of this period serving as either the Director or Acting Director.

The Development and Growth of Michigan's Mental Health Programs, op. cit., p. 33.

wholly advisory and operated as a commission within the large state welfare department.

From this abortive early centralization a further step was taken in the period 1937-45, by which a central staff on the state level was employed with complete authority and responsibility for the operation of the formerly independent hospitals. The new State Hospital Commission of seven members was appointed by the Governor with Senate approval and was independent in the sense that it was no longer a part of the state welfare department. In the early years, 1939-1942, there were problems connected with the lack of legislative appropriations and vagueness of job definitions, but by 1942, the appointment of two professional staff members plus stenographic help, based on more generous appropriations, had been effected.

In 1945 the legislature created the Michigan Department of Mental Health as a major cabinet department in the executive branch. Thus, in about forty-five years, the state had moved quite remarkably. Rather than the mere confinement of the "insane" in "asylums" loosely organized under local boards, Michigan had progressed to the goal, largely unrealized as yet, of a much more complete program with enlightened hospital care, treatment facilities within the community, and preventative emphases.

The legislative act of 1945 used such phrases as "prevention of mental illness," but even more important

for the mental health education function, charged the newly created state department specifically to: "conduct a state-wide mental hygiene program with emphasis upon the promotion of mental health..." Even under the State Hospital Commission of 1937-1945, the position of Director of Mental Hygiene as an additional position beyond the post of Executive Secretary, strongly pointed to the new interest in prevention and education. While the post of Director of Mental Hygiene was not defined specifically by the legislature and not budgeted until 1941, proponents of the position were mindful of the need for the development of mental hygiene clinics and other corollary services, including the specific functions of mental health education. 2

In 1946—just one year after the new state department was authorized—Congress passed the National Mental Health Act, recognizing mental health as a major national public health program. In part, this legislation reflected the growing national concern based on the records of the Selective Service Administration, the military services, the Veteran's Administration, and other public and private organizations reporting the incidence of mental illness in the U.S. revealed during World War II and the immediate post—war period.

¹Ibid., p. 18.

²This statement is based on a personal interview with Charles F. Wagg, who had been both Administrative Assistant and Executive Secretary during this period.

The entrance of the federal government more actively into the mental health field added new leadership and financial resources to the infant State Department of Mental Health. As part of a federal grant, the Department officials decided to use funds to establish a mental health consultant service in the central office of the State Department in 1947. This grant was made under the authority of the federal government through the National Institute of Mental Health, U.S. Public Health Service, to encourage community mental health services along with research and training programs. Under the leadership of Charles Wagg and Dr. Samuel W. Hartwell, Assistant Director for Mental Hygiene, the concept of mental health education becoming a primary function of the newly developing child guidance clinics in the state, was developed. "Unfortunately," according to Mr. Wagg, "this original approach was lost because of the tremendous pressures for individual treatment of very disturbed children in the local communities."1

From the outset, a clear distinction was made between mental health education and the public relations or promotional efforts of the Department. The purposes of the Mental Health Education Section have been defined as:

There is need for the continual improvement of social conditions, for sturdy family life, educational planning that concerns itself with the whole child, preventive services for children in schools such as counseling and diagnostic services,

l Ibid.

marriage and family counseling, etc. A community will supply these services in proportion to its appreciation and understanding of the needs for The Michigan Department of Mental Health has long believed that it has a responsibility to aid in the reaching of these goals, and it was under this concept that it established a mental health education section as a part of its functions in 1947. The section is not and has never been conceived as a public relations or promotional arm of the Department. The educational staff is rarely involved in public support programs for more care and treatment facilities. Rather, it has been their assignment to serve as consultants to school groups. as advisers to boards of organizations which are concerned with people, as trainers of leaders in parent education, and to carry out other similar activities. Many mental health films, pamphlets and teaching aids of various types are utilized, some of which have been developed by the Department and are widely used. 1

The promotion of positive mental health, rather than education about mental illness, was determined rather early to be the principal focus of the new mental health education effort. In part, education about mental illness was handled informally through staff members of state hospitals and community clinics. Additionally, however, the existence of the active Michigan Society for Mental Hygiene, later the Michigan Society for Mental Health, also made it less necessary to provide information about mental illness. For many years both the National Association for Mental Health and the Michigan Society had seen education about mental illness as one of their major functions.²

The Development and Growth of Michigan's Mental Health Programs, op. cit., p. 29.

²For a discussion of the issues involved in education for positive mental health, education about mental illness, and problems of defining mental health, see Appendix B, pp.

The Early Years of Mental Health Education

With this background, Esther was named as Mental Health Education Consultant to the Michigan State Department of Mental Health in September, 1947. To her knowledge, Esther was the first person to hold such a position in a state mental health agency in the United States. Since this program was a pioneering effort with no particular precedents to follow either in Michigan or from other states, it was Esther's responsibility to explore the possibilities and to begin a sharper definition of the functions of the educational efforts.

Several factors converged to set the direction of the first projects toward mental health education in the state's schools. Esther herself had an extensive background in education, both as a teacher and counselor, giving her a familiarity with problems in the schools and acquaintance—ship with the roles of teaching and administrative personnel. In many Michigan school systems in the late 1940's there was little or no emphasis on mental health other than what—ever straightforward classroom teaching would bring. Many schools lacked counseling and guidance programs, as well as special education and school social work facilities.

Clearly, too, in most communities—as is still true today—the school system provided the most pervasive, all—encompassing social institution affecting children and parents at critical stress periods. The logic, therefore, for schools

as a target group for mental health education efforts was quite overwhelming.

Esther's early months in the field--with long, arduous trips throughout the state--were spent mainly in interpreting this new educational service of the Department of Mental Health, particularly with individuals in the community who might be interested and influential in the acceptance of the program. Along with these wide-ranging exploratory trips came two school-based major efforts in Port Huron and Dearborn. James Lewis, new superintendent of schools in Dearborn, requested Esther's help in fostering a stronger mental health orientation in that school system. A nucleus of interested school nurses formed a beginning group with whom she could work, but Esther also met with the schools' administrators, parents, community groups, and in-service teacher's training groups. Esther modestly discounts her own role and credited a progressive school administrator, but points out that after she spent eight weeks in Dearborn, both psychological services and visiting teacher services were soon instituted. Within eighteen months after her leadership, Mr. Lewis reported to her that nearly ninety teachers were sufficiently stimulated to undertake further in-service training in mental health aspects of education in Detroit courses.

A somewhat similar concentrated effort occurred in Port Huron, where she worked particularly with visiting

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teachers and parents' groups. For a time there she even had her own temporary desk directly in the school system. The report of her visit was reflected in a news clipping from a Port Huron newspaper, dated November 23, 1947, only three months after she started on her new job. Headed "Mental Health Consultant Closes Educational Visit," the article went on to quote the Port Huron Superintendent of Schools, Howard D. Crull. Describing Esther's visit as "very successful," Mr. Crull said that she "has been praised by all the groups of professional and laymen with whom she has worked and to whom she has spoken." He went on to comment that: "Port Huron is large enough to support a full-time worker in the field of mental health. It is hoped that Miss Middlewood's visit has shown the value to the community of such a service."

Esther's visit in Port Huron included three weeks' lectures and consultations. She had spoken to five service clubs, teachers' groups, PTA's, the PTA Council, junior college psychology classes, child study groups, church organizations, and Boy Scout leaders. In addition, she also had participated in two radio broadcasts and conducted classes for parents two nights a week, with a growing attendance which reached about one hundred individuals at the maximum,

¹From a clipping in the files of the Michigan State Department of Mental Health central administrative office. The name of the paper was not indicated, nor was the author mentioned in a by-line. All other quotations in this paragraph are from the same source.

::: ÷ ... --ŧχ • :: ŧx, 1 ;; : . according to the news report. Very early, then, Esther's role as the catalytic agent to focus community interest in mental health and needed resources is seen in these two concentrated community efforts.

Interspersed with the wider ranging interpretive efforts throughout the state, Esther regarded these two concentrated efforts in single communities as good initial investments of her time. Both visits had resulted from direct requests for help and gave her more intensive and extensive knowledge of the problems of two Michigan communities and school systems than would have been possible in briefer visits. However, she realized that such intensive efforts gave undue attention to a few communities at the expense of a broader approach in keeping with the state—wide responsibility of the Department of Mental Health. Furthermore, other state and local agencies—such as the State Department of Health, local health departments, and the State Department of Public Instruction—began to ask for service.

From the outset, Esther determined that "one-night stands," which were too often requested for entertainment value, were inappropriate. It was inevitable, though, that some of these types of engagements were accepted more frequently in the early months when the need was urgent to inform people about the services to be offered by the Mental Health Education program. However, Esther consistently

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encouraged a <u>planned series</u> of meetings to promote greater group involvement and more educational scope and depth.

From the beginning, too, visual aids were used, but with discrimination and a focus on their use as an educational tool for discussion and study rather than being an end in themselves.

"Mental Health Takes Wings" was to be the title of a report of her first year's activities when Esther was the only professional staff member in mental health education. One of the initial activities in the first year was a cooperative plan with the Michigan Department of Public Instruction to establish three-week mental health institutes in seven communities, scattered widely over both the upper and lower peninsulas of Michigan at an overall distance larger than the distance between Detroit and New York City. In addition to the Port Huron program, institutes were held in Iron Mountain, Wakefield, St. Joseph, Alpena, Big Rapids, and Ironwood. Emphasis in all these institutes was placed on cooperative planning at the community level between Esther and a representative group.

The emphases in the various communities varied.

Some communities asked mainly for work with teachers in the schools. Adult education, wider in scope than teachers' groups only, was emphasized in other communities. For

¹Esther L. Middlewood, "Mental Health Takes Wings," Mental Hygiene Bulletin, Michigan Society for Mental Hygiene, 6 (November, 1948), pp. 10-11.

example, in every community a six or eight-session course in mental health was held, on a non-credit basis, for all interested adults. In the seven communities 1,420 individuals were enrolled in the courses. Shorter units, or individual lecture-discussion programs, were also presented to parent study groups, church groups, ministerial associations, luncheon and service clubs, teachers' groups, and social work groups.

One of the more productive programs that year was in Waterford Township, where the schools had recently been consolidated. Several half-day in-service training sessions for teachers on understanding child behavior were held. Enthusiasm for a high school guidance program, for planning for atypical children, and for follow-up study during the following year was generated. Parents, including groups in the outer county area, also asked for mental health education programs. That year thirty Farm Bureau women's groups expressed interest in programs in mental health education. Plans were made for study groups with ministers, social workers, and for youth leaders—especially for those communities further removed from mental health facilities.

In the area of media that first year, two series of mental health radio programs were purchased and programmed cooperatively with the Michigan Mental Hygiene Society.

Bibliographies for books and pamphlets were prepared for distribution, and mental health films were deposited in

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the Audio-Visual Education Center, Ann Arbor, for distribution at minimal costs for use throughout the state. Approximately fifty books on mental health and child development were placed in Children's Centers (child guidance clinics) for use in parent education in the communities served by the centers.

In the second year of the program, September 1, 1948-September 1, 1949, Esther was named as Director of the Mental Health Education Division. With increased funds, partly because of federal financing, Esther was able to employ three additional field consultants and one clerical assistant. Initially there was some consideration given to placing individual consultants in regional assignments. However, for reasons of coordination and mutual sharing of experiences with a new staff, it was decided to assign consultants on the basis of the specialized experience which they offered by virtue of different professional backgrounds. The division of work and the individual backgrounds included: (1) school-related emphases by a consultant with a bachelor's degree in education and a master's degree in psychiatric social work, with work experience in both school social work and child guidance clinic case work; (2) programs with the aged and work with public relations media by a consultant with training in clinical psychology and secondary education; (3) programs related to religion, child guidance clinics and juvenile courts and parent groups by a consultant

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with training in religious education and psychiatric social work; (4) for Esther herself, work with parent groups and teachers, with special emphasis on conferences, workshops, and institutes because of her longer experience and background in schools and child guidance clinics. The backgrounds of her staff members reflect Esther's conviction that mental health educators need not have a single pattern of professional training. In fact, she sees no profession alone as providing all of the skills and knowledge needed, but tends to emphasize backgrounds in child development and child guidance, education, psychology and social work.

Along with the expansion of consultation, a number of special projects were implemented during the second year. The <u>Pierre the Pelican</u> pamphlet series for parents of first-born children were distributed in thirteen counties through local departments of health to a variety of parent target groups and with different types of follow-up approaches. The pamphlets had been developed and used by the Louisiana Society for Mental Health through its director, Loyd W. Rowland. The project was experimental and designed for evaluation in cooperation with the Research Division of the State Department of Mental Health.

The use of media, such as radio, films, pamphlets

Loyd W. Rowland et al., "A First Evaluation of the Pierre the Pelican Mental Health Pamphlets," The Louisiana Mental Health Studies, No. 1 (New Orleans, Louisiana: The Louisiana Society for Mental Health, 1948).

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and books, was continued, but supplemented and extended with book and pamphlet bibliographies and a new annotated film bibliography and guide. Esther wrote a number of articles for state and national publications, and conference displays were arranged. A notable publication that year was These, Our Children, written by Esther and since reprinted in many states and widely used.

In this second year the beginnings of what was later to become the highly successful Parent Education Associates program were on the horizon. Two workshops sponsored by the Mental Health Education Division were held in the Upper Peninsula and Lower Peninsula of Michigan for lay people doing mental health-related work with parent-teacher groups, child study groups, and the Department of Health. From both workshops, requests came for follow-up programs, including additional workshops. In one workshop requests came in two communities to set up lay leadership training programs for former social workers, teachers, and nurses with some experience in child growth and development who might serve to provide additional leadership in mental health-related discussion groups.

The Division consultants also served in workshops

Ralph Daniel, one-time mental health consultant, Michigan State Department of Mental Health, presently the Executive Director, Michigan State Board of Alcoholism, described These, Our Children as the best publication of its kind that he knows. See Bibliography for complete citation.

sponsored by other groups, such as Department of Public Instruction Curriculum Committees, a county health committee, a conservation workshop, public health nurses, fourteen Michigan Education Association Conferences, Home and Family Living Workshops of the Parent-Teachers' Association, and an institute of the Michigan Mental Hygiene Society.

Cooperative planning with other agencies and state departments included: planning with the Department of Public Instruction for implementation in the schools of the new state law regarding sex education; planning with the same Department's Health Education Committee for incorporation of mental health materials along with physical health elements in school curricula; development of a child study quide for local child study groups as a joint project with the Department of Public Instruction; planning with the State Library for depositing and distributing mental health publications among relevant state agencies; intensive work with three local health departments for strengthening their mental health activities through consultation and demonstration approaches. One of the consultants chaired a statewide committee on mental health practices in colleges, which included both major state colleges and universities and one private college.

Annual Report of the Division of Education, September 1, 1948, to September 1, 1949 (Lansing, Michigan: Michigan Department of Mental Health, 1949), pp. 1-19, together with interviews with Miss Esther Middlewood, Mr.

Sixteen county programs described as of a more intensive nature were carried out during this second year of the Division's program. Initial contacts were made with forty-four other counties in which at least one community program was set up, and in many of these counties, community committees were set up. Staff members also served as program leaders in fifty-five widely varying kinds of conference, such as the State Health Education Conference, the State Rehabilitation Conference, the Governor's Conference on Child Welfare, the State Welfare Conference, the State Probation and Parole Conference, and a number of other conferences largely centering in either general education, nursing, or health education.

The second year's annual report described sixteen objectives for the Division's program. These objectives could be grouped more succinctly into six major purposes:

(1) To acquaint the public with patterns of mental health, to encourage popular acceptance of a preventative psychiatric program, and to initiate programs of mental health education and curriculum planning with key groups such as teachers, parents, youth workers, religious educators, and individuals in industry; (2) To decrease misconceptions of mental illness

Ralph Daniel (former Mental Health Education Consultant) and Mrs. Julia Doxstader (secretary, Mental Health Education Division, later re-named Section) for seventeen years, 1947-1964, are the sources of the report of the second year.

<u>:</u>.; :00 :0: ::: ï. :: :: .÷ ī ē :: : : :: . . ξ. : . ÷ :: and increase public understanding of mental illness; ¹ To coordinate mental health education work and to act as a consultant with various other state departments, such as the Department of Public Instruction and Department of Health; (4) To participate in intra-staff groups and committees of the Association of Michigan State Child Guidance Clinics within the State Department of Mental Health; (5) To encourage and promote various mental health media—including films, books and pamphlets with some original productions—and lay leadership training; (6) To promote child growth and development research and relevant teacher training in schools and colleges.

The Early 1950's

From the early exploratory period and expansion of staff leading to a still more comprehensive program during the first two years, the early 1950's brought sharper definitions of function, increases in local participation and leadership, renewed efforts toward program evaluation, and more intensive efforts toward the original production of mass media, such as films and radio programs. Many of the program emphases similar to those reported during the second year were continued, and larger office facilities made it possible to provide more adequately for film and

Although stated as an objective at this time, in practice this goal was, as previously indicated, given low priority compared to the other objectives. The reasons for this de-emphasis have been noted previously on page 85.

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pamphlet distribution and usage. At times in the early 1950's there were staff vacancies, and the more typical staff was three professional staff members and one secretary rather than four professional staff members, as in the second year of the Division.

The joint evaluation of the Pierre the Pelican pamphlet series distribution previously noted was completed with the Research Division during 1950-51. Cooperative planning of sex education programming with the Department of Health and the Department of Public Instruction was reported that same year. In 1951-52 increased cooperative programming with the State Department of Social Welfare was described. Success in increasing local participation and leadership in community-based programs was attained, along with building up "community files" in the Division offices which gave pertinent chronological reports regarding those communities in which the Division had worked. In 1950-51 there had been planning with twenty-three counties on a county-wide basis. Considerable work had also been accomplished in ten additional counties without complete county-wide programming. In thirteen counties that year no contacts had yet been made.

Lesther's policy on film, book and pamphlet usage is that while they are useful educational instruments, they should be used discriminatingly, geared to ongoing educational efforts planfully, and not distributed "cafeteria style" to all comers. Among other factors, she cites the high economic cost of indiscriminate usage.

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For the broader objective of mass education, the production of the film, Angry Boy, was accomplished in 1950 and distributed nationally under the auspices of the National Mental Health Film Board, with showings in England and Europe as well as domestically. The film was well received at the 1950 White House Conference on Children and was nationally televised with an estimated audience of 100,000. The Division owned 183 films placed in six distributing centers throughout the state, and the total audience reached in film showings in 1950-51 (exclusive of the TV audience for Angry Boy) was approximately 116,000.

Other singular advances made in 1950-51 included the preparation of numerous articles, including some directed to mass public media and others to professional groups. Radio was used more widely that year with eleven live programs, and thirty-two courses of instruction, such as work-shops and seminars, were conducted. In addition, consult-ants participated in 667 meetings reaching 55,165 individuals as speakers and leaders. The largest single group consisted of PTA meetings reaching 16,605 individuals.

The report of 1950-51 noted that there had been a change from the first year's emphasis upon work "on an individual community basis without much being done to coordinate programs." After pointing out the reasons for

Annual Report of the Division of Education, July 1, 1950, to July 1, 1951 (Lansing, Michigan: Michigan State Department of Mental Health, 1951), p. 1.

the individual community approach, the <u>Annual Report</u> pointed out that while a state-wide approach was now possible, much direct teaching was still required in those areas lacking in resource people in mental health. Despite this continuing need, however, an increase in consultative community planning and leadership training was noted. Greater need of leadership workshop and training programs was anticipated for future development.

Still in the early 1950's, but now in the sixth year of the program, special emphasis was placed on program evaluation. Some of the difficulties of using specific criteria, such as divorce rates or mental hospital commitments, as indexes of disorganization (or relative health with improved rates) were pointed out. Evaluation by the consumer, evidenced by requests for service and letters of either commendation or criticism, was cited as one measure of relative effectiveness. Demands for the service of the Division continued at a level which required rejection of many requests for assistance.

However, for a more thoroughgoing approach to evaluation a state-wide advisory committee was set up for the first time. The committee met three times during the program year, and the subcommittee on program evaluation met

The source for the description of the sixth year is the Annual Report for the Year July 1, 1952, to June 30, 1953, Education Division (Lansing, Michigan: Michigan State Department of Mental Health, 1953), 23 pp.

:00 --7 ;3. :06 Ç... \$23 ... Iŧ, će :: ů. Ĵ. 30 • . . four times. The larger committee consisted of representatives from the fields of health, education, community organization and social welfare, religion, psychiatric services, and mental health, and sociology. The subcommittee on evaluation was headed by Dr. Howard Y. McClusky, Professor, School of Education, University of Michigan, and prominent leader in the field of adult education. A formal report was prepared, and the Division also took steps to develop additional evaluatory measures with the Department of Mental Health Research Division.

A statistical report on mental health film usage that year disclosed that the consultant staff had used films on 421 occasions, reaching a total audience of 19,631 persons. In addition, five film libraries throughout the state where the Division had placed films reported 2,598 showings reaching a total audience of 127,784. A total of 10,664 pamphlets were also distributed on a selective basis that year.

A breakdown of the work of the consultants in direct service showed the following:

Type of Meeting		Number
Lectures		373
Lay leadership training		89
Study groups (series)	(continued)	125

This informal table is from the Annual Report, 1952-1953, op. cit., p. 15.

Type of Meeting	(continued)	Number
State committee meetings		62
Consultation Health Departments Educators Community planning Child guidance clinic Other state agencies	53 46 48 16 28	191
Conferences, institutes,	conventions	52
Workshops (two days or mo	re)	40
Radio and television prog	rams	39
Total meetings held		969
Total meetings unable	to accept	309

As part of the evaluatory procedure with the Research Division, the study of the effects of the <u>Pierre the Pelican</u> pamphlet series was completed, and reports were distributed. This study showed that readers of the pamphlets learned factual information. However, the point that many authorities question the value of learning factual information per se in terms of improved behavior, was reported in the interpretation of the study.

The desirability of defining Division goals more specifically led to a study between the Research and Education Divisions regarding the objectives of mental health education. This study essentially was an opinion survey from one hundred authorities in six relevant fields: (1) psychiatry, (2) psychology, (3) psychiatric social work, (4) mental health education, (5) public health and (6)

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education. The opinion survey defined five major goals, with a number of sub-goals under each major purpose. The five goals were:

I. Disseminate knowledge about and develop understanding of the underlying principles of mental health (with emphasis on the aspects related to the individual adult); II. Promote the development and maintenance of good mental health in children; III. Create informed public interest in the problem of mental illness; IV. Develop the community aspects of the mental health program; V. Promote the training of personnel.1

In the light of the five major objectives, a program review of the Division was then undertaken. In addition, experimental studies were taken with the Research Division to test the effectiveness of various types of programs with variable leadership. In the light of the five major objectives, the program review indicated substantial work was being accomplished in all areas except the third goal.

Again, the deliberate omission of this program objective was pointed out in terms of the substantial job in this program area being accomplished under the Michigan Society for Mental Health, formerly the Society for Mental Hygiene.²

¹Ibid., pp. 16-18.

The sources of data for the section, "The Early 1950's," comes from the Annual Reports, 1950-1951, and 1952-1953, as previously cited, and from personal interviews with Miss Esther Middlewood and Mrs. Julia Doxstader, Division secretary.

CHAPTER V

THE TREE GROWS TO MATURITY, 1953-1965

Maturity need not mean inflexibility, and throughout the earlier formative years of the program, Esther reiterated a desire to change the program to meet changing needs. One of the main emphases of the mature years, for which there had been forerunners in lay leadership workshops earlier, came to fruition in the Parent Education Associates, known more familiarly among its members as "PEA." In 1965

PEA members numbered about 1,800 individuals in forty Michigan communities. The program became known as PEA in 1950, and in 1960 a written manual was produced by Esther and a committee of the PEA. The Manual defines the purposes of PEA as follows:

The Parent Education Associates are a group of leaders who are willing to devote time for training in principles of both child growth and development and group process, and also to give time for subsequent group leadership. They do not profess to be authorities nor do they pretend to offer therapeutic service. They work primarily with parents who are essentially healthy but who are also interested in doing the best job possible as parents in light of current knowledge and available sources of help.²

¹Esther L. Middlewood et al., Parent Education Association Manual (Lansing, Michigan: Michigan Department of Mental Health, 1960), 29 pp.

²Ib<u>id</u>., p. 5.

Esther believes that there are many reasons for having lay leadership development in parent education. She also believes that self-led groups under unskilled leadership can become destructive when the leader "has a yen for being an authority" or lacks ability to use group processes productively. Citing the lack of enough professional persons to meet the felt demands of parents, she also points out that many professional persons do not have the interest or particular attributes to make good group leaders. With their basic training and concern for work with individuals, where their services are also desperately needed, she does not anticipate that professional group leaders will be available in sufficient numbers to meet demands in the future.

Where a professional person is pressed all too often for specific answers about symptoms or more serious clinical types of problems, lay leaders are less apt to be pushed into this role. Esther believes lay leaders can be trained to know their limits in this respect and that other laymen do not expect a lay leader to give professional advice. She cites also the fact that laymen talk in everyday language understandable to other parents and are less apt to fall into professional cliches or terminology that is either confusing or anxiety-provoking to laymen. As compared to professional leadership, lay leaders are far more available at morning and afternoon or evening hours in small neighborhood

groups at times when parents themselves are free and can meet in familiar settings at homes or other neighborhood facilities. The possibility of lay leadership from all ranges of socio-economic groupings, as compared to the largely middle class origins of professional leaders, is cited as an advantage of lay leadership.

ent education for mental health is not universally accepted, particularly by some members of the professional disciplines—psychiatry, psychology, and psychiatric social work. In general, the criticism of these disciplines would be along the vein, "A little knowledge is a dangerous thing," that lay leadership promotes harmful intellectualizing and introspection, can disseminate erroneous or misleading information and become a destructive vehicle for a domineering lay leader. Esther believes that each of these criticisms can be countered by the ways lay leaders are selected and trained.

Esther does not stand alone in her support of parent education for mental health purposes. Public health leaders particularly have given lay leadership in parent

See the speeches of William G. Hollister, M.D., M.P.H., Consultant, Mental Health in Education, Community Services Branch, National Institute of Mental Health, U.S. Department of Health, Education, and Welfare; of Roger M. Howell, M.D., Associate Professor, Department of Health Development, School of Public Health, University of Michigan, Ann Arbor, Michigan; of Margery J. Mack, Ph.D., Mental Health Consultant in Social Science, Mental Health

education their strong support. Like Esther, they cite the many advantages of lay leadership and discount the presumed drawbacks. 1

By 1962 there had been sufficient experience with lay leadership in Michigan that Esther worked out a workshop to be jointly sponsored by the Mental Health Education Section (formerly Division) of the Michigan Department of Mental Health and the National Institute of Mental Health. In addition to the roster of eleven workshop leaders and Education Section staff members, forty-four lay and professional leaders in parent education from twenty-seven Michigan communities were participants.

A critical issue at this conference was the consideration of ways in which experienced lay leaders might now themselves become trainers of other lay leaders. The growing, tested capacity of lay leadership, Esther believed, had come to the point that lay leaders might become trainers rather than relying on the very small state professional staff. From the beginning Esther had encouraged local

Section, Public Health Service, U.S. Department of Health, Education, and Welfare, Chicago Regional Office; and of J. Wilbert Edgerton, Ph.D., Regional Program Director, Mental Health Section, Public Health Service, U.S. Department of Health, Education, and Welfare, Chicago Regional Office in Workshop Report (Program Development Through Lay Leadership in Parent Education), Lansing, Michigan: Michigan Department of Mental Health, 1962, pp. 19-25, 65-69, 70, 43-45.

Carl F. Hereford, Changing Parental Attitudes Through Group Discussion (Austin, Texas: Hogg Foundation for Mental Health, 1963), is a report of a four-year study which strongly supports parent education.

community participants to draw in local or nearby resource people as much as possible. In part, this emphasis was a practical necessity because of the limited state staff, but it was also the deliberate focus based on a philosophy of encouraging local initiative and avoiding undue dependence on a charismatic "outside" leadership. The lay leadership workshop, held in Lansing, Michigan, on September 17-21, 1962, brought to a focal point a growing trend to disperse leadership to citizens in the community.

As it has developed since its inception, PEA has typically been a three-year program of leadership training. The areas of study have been partly structured, but Esther and her co-workers have deliberately built in informality and flexibility to meet the particular needs of individual groups. However, the first year had suggested areas of study such as the basic needs of children and adults, understanding behavior in terms of normal and atypical patterns, and development of healthy sex attitudes. Film and pamphlet resources were suggested, but emphasis was placed primarily on providing informal participation which might be an example of good discussion group processes.

The second year was planned primarily to deepen areas of study, to explore areas which might have been omitted in the first year, and to add group process skills.

In the third year, practice and evaluation of group process was stressed, with the group taking over responsibility for

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its own leadership and getting ready as alumni to give leadership to new groups in the community such as PTA's or Child Study clubs. The alumni group following the third year was designed as a lay leadership resource group for interested groups in the community. During the three-year training program, groups were encouraged to meet from September through May on a monthly basis. A state council consisting of one delegate for every ten members, plus group chairmen in local groups, meets not more than four times yearly. Two of these meetings consist of a state-wide fall workshop open to all PEA members and a two-day spring workshop open only to council members or alternates.

Generally, PEA was designed to be a supplementary service group for existing organizations in the community. Rather than being totally independent and autonomous, the PEA groups have typically been sponsored by some local agency, such as the visiting teachers, the PTA, or the school system's director of family life education. In communities where more than one PEA group operates, efforts have been made to have some local professional person assume responsibility for coordination and professional leadership as a resource person. Throughout the life of the PEA program one of Esther's consistent concerns has been to avoid duplication and competition with local programs and to encourage local responsibility and initiative within the very informal structure of coordination through a state PEA council

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and the services of the Mental Health Education Section.

Reviews of "community files" for PEA groups kept in the Education Section office confirmed a strong degree of local responsibility and leadership taken by PEA groups. The experience of the Lansing PEA groups, reported in a personal interview with Mrs. Dale Granger, Director of Family Life Education, Lansing Board of Education, also provided confirmation. Mrs. Granger said:

Esther has tried to keep contact with the PEA groups enough so that they know she is interested and available when needed, but not in a way that they become too dependent. I know that she has been concerned about keeping a good balance between providing help as a resource person without encouraging too much reliance upon her.1

Mrs. Granger commented that occasionally a member will say that one of the main reasons they belong to PEA is because of the opportunity to meet occasionally with Esther. However, this comment is balanced by a few other more aggressive leaders who will comment that they would like to take more personal initiative in state meetings where Esther has had a professional responsibility for planning. For nearly ten years the Lansing group has had at least one group operating at each of the three-year levels, and Mrs. Granger takes local responsibility for the PEA operations. She has interpreted the PEA program to school principals, who in turn take responsibility for referring and selecting Parents from the local schools who might be interested in

¹Statement by Mrs. Dale Granger, personal interview.

joining a PEA group. An attempt has been made to select parents who were primarily interested in becoming lay leaders rather than in solving some personal or family problem.

Still another appraisal of Esther's role in the local PEA movement was given by Mrs. Angus Miller, a certified social worker and long-time leader in a volunteer professional capacity of PEA groups in Waterford, Michigan, one of the more successful PEA community areas. In a personal communication to the author, Mrs. Miller writes:

I feel that Esther has been unique in the mental health education field with her positive, challenging, responsive approach to human beings of the adolescent and adult age range. With warmth and a sensitivity for the cultural context and age-experience interest from which they speak, she explores with them the beliefs and doubts, the expectations and disappointments, the confusing theories and practices of family life. Many young, middle-aged and elderly persons, either male or female, wind up with being more comfortable, adequate human beings with some assimilation of why they or those related to them behaved as they did and what some possibilities might be for fostering healthy emotional growth. This is in sharp contrast to some other mental health educators that I have observed who, in their extremes, are condescending, shocking, bullying, authoritative, confusing and disturbing. I am trying to say that Esther is well aware of her audience's feelings and aspirations, as well as being brilliant in her communication in lay terms of dynamic psychology. 1

Mrs. Miller points up an additional facet of the PEA in pointing out that the groups "investigate and reflect on social programming, based on their increased understanding of children's basic needs." While the PEA manual strikes

Letter from Mrs. Angus Miller, September 6, 1965.

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an impartial stance regarding social action, neither negating or encouraging it, Esther herself reports that as parents meet together community facilities related to children's and family's needs quite typically come into discussions.

She has also observed quite informally that some of the PEA leaders also grow into greater interest in community leadership more broadly than parent education interest alone. While the PEA program is not designed to promote support for community resources or programs, the increased interest and mutual support gained in the group involvement tends to foster moves on the part of individual members in this direction.

An example of this kind of development was provided by Dr. Frances Martin, Professor of Education at Central Michigan University. She writes about a PEA member, whose name is omitted in this account to preserve privacy:

One of these PEA members, Mrs. recruited me as a volunteer [for a local Job Training Center]. It has been my pleasure to see the intelligent way in which she is handling the public relations aspect of this project. She says that she started her community work as a result of her contacts with PEA some ten years ago. She says that this group experience of three years' duration of study and discussion saved her sanity as it helped her understand herself and her family. She is now a very sensitive yet poised individual. She is not hurt by rebuffs and questions concerning this new federal program. She listens to problems of the trainees with sympathy and helps relieve small individual frustrations and grievances... Mrs. admits that the training in PEA was very difficult at times as she had many problems to face in understanding herself and often felt discouraged. However, the groups and Esther supported her and

she found herself gaining in mental health over the years. 1

Dr. Martin suggests that other PEA members would have similar experiences to report. She also related that Mrs. _____ mentioned her appreciation for the enrichment experiences at PEA workshops. One experience was that of hearing a young Nigerian couple present their indigenous music, and Mrs. _____ told Dr. Martin that Esther frequently arranged informative experiences which "lifted their sights."

Services to Caretakers' Groups

One of the substantial contributions made by Esther and the Mental Health Education Section in the mature years of the late 1950's and early 1960's has been the way in which other programs have been sparked and fanned into independent entities. In her own 'teens Esther had worked with groups of children at the Methodist Children's Home in Detroit. Under her leadership, the Education Section has had a continuing interest in the so-called "caretaker" groups—all those individuals who are either natural parents or serve children in some quasi-parental capacity. Having been a half-orphan herself, it was natural that Esther would have a special feeling for children who were temporarily deprived of parental care and were placed in institutions or other programs which substitute for parents.

¹Letter from Dr. Frances Martin, September 30, 1965.

With this background Esther accepted an opportunity in 1957 to work with the house mothers of children at the Methodist Children's Home. Catholic nuns holding similar positions in a nearby Catholic children's institution heard of this new in-service training program and asked that they be included. In her own words, Esther describes further developments:

Workers from other institutions asked to join the regular study sessions. Ultimately the group became so very large and workers were driving so far to come that they had to leave at 5:30 or 6 a.m. to get to the meetings by 9 a.m. Four area meetings were established, and finally a structure was developed to provide in-service training in the four regions.

For some years now the Educational Section has only needed to provide some materials for the sessions, occasionally serving as a guest resource person. The Education Section staff was able to withdraw from continuous leadership as the State Department of Social Welfare was able to see the program as having proved itself and warranting their staff attention as a permanent part of their program for children's institutions in the state.

On an individual institutional level Esther performed a similar service at the Starr Commonwealth for Boys, a Michigan children's institution. Wallace Watt, consultant with the Mental Health Education Section for eleven years until September 1, 1965, describes Esther's contribution:

The personnel in such institutions can be quite rigid and not especially open to new approaches.

 They tend to accept outside leadership rather skeptically. Esther has the knack of coming in and drawing out from them what they considered to be their problems in caring for children, what they did about it, and why they handled things as they did. Only after finding these things out and helping the staff members know that she could understand and sympathize with them, did she begin to help them consider other alternatives for handling children's difficulties in the light of sound mental health principles.1

Watt related further that the Starr Commonwealth group, including the administration, was converted to genuine acceptance, asked for Esther to return for planned annual series of meetings, and then moved to their own independent in-service training program. He pointed out that Esther typically encourages such groups to draw increasingly upon other professional resources while she gradually withdraws from more active leadership. Because of the relative prominence given to Esther's leadership in the parent education field, Watt stated that he thought her contribution to institutional workers was sometimes overlooked.

As another example of work with a caretaker group, Esther relates the following:

For many years a well-planned workshop was held in conjunction with Houghton college for rural pastors. The leadership was provided by the Michigan Department of Mental Health. Gradually more and more of the responsibility was taken by the members themselves. This was true also of the rural pastors' training program at Michigan State University. Initially we asked for and were granted permission to teach a course on basic mental health needs of children and adults. For several years we provided leadership, films, and materials. The people

¹Statement by Wallace Watt, personal interview.

involved wanted more, so a second year course was added on psychiatric principles.

Esther recruited psychiatrists from the Department of Mental Health for the second-year course. Ultimately, she states, a third year was added as a course in pastoral counseling. As the program became better established the Education Section first withdrew materials, then leadership at the planning stage, and last as a teacher. By this time all of these elements were regularly provided for through the regular continuing education structure of the University.

Auxiliary Services

Although Esther's primary responsibilities have been in person-to-person involvement in direct service or in planning and consultation for indirect service, her work in auxiliary programs is not inconsequential. Following her first task as the technical consultant for the production of Angry Boy, she served as a consultant for five other films. The Lonely Night depicts the role of the psychiatrist in assisting a neurotic girl with unresolved conflicts and hostility which make it difficult for her to consider marriage. The film, In Times of Trouble, develops the role of the minister in assisting the wife of an alcoholic husband. The third film, The Bright Side, shows the

Referring to a film series produced by the National Mental Health Film Board for educational use, Nina Ridenour writes: "The first film of the series, and probably the best, was 'Angry Boy'. . . " From Nina Ridenour, op. cit., p. 112.

contribution of healthy family life to the development of children. The film, It's a Big Problem, describes the mental hospital program of the Michigan State Department of Health. The fifth film, The Broken Dream, is concerned with the needs of retarded children. In some of these productions, Esther wrote the entire script. She also showed her interest in the film media by serving on the National Mental Health Film Board in 1956-60, and she was a consultant for a film workshop for the Board in 1962.

Esther has also shown an interest in research. With the technical assistance of the late John Paul Sibilio, psychologist of the Michigan Department of Mental Health, she developed a project pertaining to children as they enter kindergarten. A principal objective of the project was to determine if a modified, projective story-telling approach might be used for children of kindergarten age to identify distorted self-concepts. With an adaptation of the Michigan Picture Test for this age level, she found that kindergarten enrollees could verbalize significant stories. Furthermore, she found significant correlations of the test evaluations with some "blind" evaluations of the children by teachers. Esther believes this study, as Yet unpublished, holds promise for detecting early potentialities for problems of children at the significant stress period--entrance into school.

Where Esther was very active in 1948-1951 in writing

. .. :: :: --• :: . articles for laymen, she has had less time for this activity in later years. In part, she was preoccupied with film production, and at other times shortages of staff made her direct and indirect service responsibilities occupy most of her time. However, she began the production of a manual for mental health education under a grant of the National Institute of Mental Health and completed five chapters of this work by mid-1965.

Professional Relationships with Outstanding Leaders

In addition to Esther's versatile services and capacity to work with clientele of various backgrounds, her rapport with professional leaders from different, although related, disciplines is important. This capacity is substantiated through letters written by professional leaders regarding Esther and her contributions through the Michigan program and service at the national level.

From the area of family life education and child growth and development, Dr. Evelyn Millis Duvall writes that in working with Esther, she was impressed on how well-focussed and well-designed the Michigan programs were. She comments further: "I personally have been especially impressed with the significance of the program with young homemakers," referring to the Parent Education Associates

¹Evelyn Millis Duvall, Ph.D., is a widely known family life education leader and the author of numerous books on child growth and development and on family life. Quotations are from her letter, August 9, 1965.

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project, and commends Esther "for the leadership she gave at the International Conference on the Family in 1960."

David R. Mace, Ph.D., Executive Director, American Association of Marriage Counselors, writes regarding Esther:

I know that she is a family life specialist who is held in the highest esteem among her colleagues at the national level. Her sound judgment, wide knowledge, and warm humanity have made her many friends, and in any professional group she is always listened to with deep respect.

Muriel W. Brown, Ph.D., long-time family life education specialist, U.S. Department of Health, Education, and Welfare, describes Esther's contribution, as follows: "It is her work in parent education that I know best, and the state program to which she has given leadership is, in my opinion, the best of its kind in the country."²

From the perspective of psychiatry, Esther's contribution is reported by Robert H. Felix, M.D., President,

American Psychiatric Association, 1960-61, former Director,

National Institute of Mental Health, and presently Dean,

School of Medicine, Saint Louis University, Saint Louis,

Missouri. Dr. Felix describes how he tried to recruit

Esther for work at the national level, but points out that

work at the state level would not have progressed as rapidly
in this country if she had left Michigan. Continuing, he

writes: "Always I have found her ingenious, full of ideas,

Letter from David R. Mace, September 14, 1965.

²Letter from Muriel W. Brown, August 11, 1965.

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Several health education leaders comment especially on Esther's contribution in combining skills and interests from different disciplines. Mabel E. Rugen, Professor of Health Education, University of Michigan, describes Esther's leadership in combining public health, health education, general education, and mental health aspects in her work.² Wallace Fulton, M.P.H., Associate Director, Office of Community Services and Health Education. The Equitable Life Assurance Society of the United States, New York City, stresses how Esther has coordinated a public agency mental health program with the family life field, especially by her use of volunteer interest and participation at the local level. Stressing that too few people know the significance of Esther's contribution, he declares: "I cannot help but feel that she has come closer to developing a thoroughly realistic mental health program than anyone else I know operating at the state level in the United States."3

Esther's high degree of skill in the area of films as a mental health medium, as well as her ability to work with a film producer, is reflected in the observations of

Letter from Robert H. Felix, September 7, 1965.

²Letter from Mabel E. Rugen, September 15, 1965.

³Letter from Wallace Fulton, September 16, 1965.

Irving Jacoby, President of Affiliated Film Producers, New York City, maker of documentary films in mental health and other fields. First, Jacoby pays a marked tribute to Esther's public speaking ability on mental health topics before wide ranges of audiences. Describing her contributions to film production, he writes:

How nice, then, in a person so skilled and gifted, for me to find a most practical and sensitive critic of the medium I work in. Miss Middle-wood never misses the slightest nuance of writing, acting, or film technique that helps get a psychological message over to the public... She has been one of the most effective users of film and one of the first to integrate motion picture into a statewide program of mental health education. She was also one of the first in her field to take an active interest in the production of such films and was of invaluable assistance to the writers and directors that she worked with.

Michigan's ex-First Lady, Mrs. G. Mennen (Nancy)
Williams, followed the work of the state's mental health
education program closely during the 1950's. She writes,
"Miss Middlewood's personality, her interest, and her drive,
were a great force and I know her well. . . ."

From the field of education at the local level, an enthusiastic and detailed letter was written by James Ten Brink, Superintendent, Intermediate School District, Muskegon, Michigan. Ten Brink describes Esther's faculty of "meeting people on their level, in their environment, and in their

Letter from Irving Jacoby, August 26, 1965.

²Statement by Charles Wagg, personal interview.

³Letter from Mrs. G. Mennen Williams, August 24, 1965.

cultural pattern. He especially stresses her willingness to serve and her ability to help groups face problems and to overcome apathy to obtain solutions. Further describing her work with groups, he comments, "She is fluent in communication, versatile in her understanding of problems, and extremely flexible in approaching situations."

The view of a mental health educator at the national level comes from Nina Ridenour, long-time educational director of the National Association of Mental Health, who writes:

I have always regarded Miss Middlewood as know-ledgeable, experienced, and having a wealth of back-ground in mental health education, able to mobilize her experience and bring it to bear on the immediate problem at hand.²

The growing interest of the federal government in mental health education, as well as Esther's relationships with federal officials, was reflected in personal communications at the national and regional levels. J. Wilbert Edgerton, Regional Program Director, Mental Health Service, U.S. Public Health Service, confirmed that the Michigan program is the only one in the Midwest which has full-time staff service for direct education in mental health beyond providing distribution of films and literature. Edgerton especially stresses the value of lay leadership, as follows:

Letter from James Ten Brink, August 27, 1965, is the source of all quotations in this paragraph.

²Letter from Nina Ridenour, Ph.D., September 16, 1965.

"I was impressed with the dedication and obvious capacity of these lay mental health educators to carry out a program under the training and direction of Miss Middlewood and her staff."

Catherine S. Chilman, Ph.D., Social Science Analyst in the Welfare Administration, U.S. Department of Health, Education, and Welfare, Washington, writes that Esther's "professional competence and depth of knowledge are remarkable." She sums up her evaluation with this commendation: "I know few people in the parent education field who have combined the many gifts that she has shown in the development and perpetuation of a statewide program with national implications."

Administration

When Esther started in the state central office of the Michigan Department of Mental Health, she was the third professional staff member in addition to the Department Director and the Assistant Director. Including secretaries and other non-professional personnel, the staff of eight persons in 1947 at the central office has grown by September, 1965, to include eighty-two employees, with

Letter from J. Wilbert Edgerton, September 13, 1965.

²This paragraph's quotations are from letter of Catherine S. Chilman, August 30, 1965.

³Statement in personal interview with Esther.

thirty-three classified as secretarial personnel. From that early small group, where there was easy, quick access to the top policy-makers, the growth to the present size has required more levels of authority and the use of channels in keeping with customary bureaucratic development.

For most of her tenure, however, Esther has had direct access to the top administrator of the Department, as well as her immediate supervisor, who usually occupied a post as an immediate assistant to the Director. Although noting the more formalized trends, generally Esther describes the Department administration as not overly rigid. The growth of the Department has also brought an increased emphasis on business management within a Department expending approximately one hundred million dollars annually and ranking as one of the two largest departments in expenditures in Michigan state government.

On balance, Esther believes that she has had marked freedom in determining the policies of her own Section.

Civil service pay scales or rigidities in the hiring process have made for some difficulty. So also did the retrenchments in overall departmental budgets during Michigan's governmental financial crisis of the late 1950's and early 1960's. Both factors contributed to cut-backs in her staff and difficulties in filling those vacancies that were authorized.

¹ Statement in personal interview, Joseph McCall, Department Director of Information Services.

At present the Mental Health Education Section is a part of the Community Services Division, one of five operating divisions of the State Department of Mental Health. In addition to the Education Section, a major program of the Community Services Division is the operation of combined state—local sponsored psychiatric clinics. Other major Divisions are concerned with services to the mentally ill and to the mentally retarded, administrative services, and research and development. The Assistant Directors of the five operating divisions are directly responsible to the Director of Mental Health, who, in turn, is responsible to the Governor. A report of a separate budget for the Mental Health Education Section is not available, since its items are included as part of a larger budget category. 1

At the request of the current Departmental Director, Dr. Robert Kimmich, Esther was engaged in September, 1965, in drawing up a proposal to define the functions of her Section in the future and to spell out the needs for staffing. In terms of personnel, the peak period of the Section was in the early 1950's when as many as five professional staff members were employed, and as of late 1965 two professional staff members are authorized.

To restore the Education Section to a more complete

¹Statement in a personal interview with Charles F. Wagg, Deputy Director.

service in the next few years, Esther is recommending that there be a Chief, who would be responsible for overall administration; representing the Section of the State Department with national programs of common concern; representing the Department in the educational programs of other state agencies, such as the Department of Health or Department of Public Instruction; mutual programming with related nongovernmental groups such as the Michigan Council of Cooperative Nurseries, the Child Study Association and School Health Association; determining program priorities and emphases.

She recommends an assistant to the Chief who would act as field work supervisor. In addition to being a liaison between the field staff and Chief, this worker would do a limited amount of field work near the central office in Lansing and be a special resource person to regional staff members. There would be one mental health educator as a field worker in each of the four regional offices of the Department of Mental Health. At the central office, to perform a staff function for the field staff, an audio-visual aids specialist is proposed. This staff member would be used to provide graphic arts for displays and would also supervise the film and pamphlet distribution program of the Education Section.

Time studies of current staff services, as compared

¹This description of the proposed staffing of the Section is from an unpublished initial draft written by Esther in September, 1965.

to the early 1950's, suggest the continuing trend observed from the beginning years of the Section program. This trend is from direct teaching to more consultative work. Mainly, the consultation is planning with interested groups toward defining yearly program goals and suggesting methods, materials, and program resources. Typical examples of this form of consultation would be Esther's service on the board of the Michigan Council of Cooperative Nurseries, her work with community PEA leaders, or her work with a YWCA in planning a parent education series. A somewhat similar type of consultation is Esther's work in helping a local public health department plan its year of in-service training sessions for public health nurses.

Another level of service is that rendered to other state departments, such as being a member of the Curriculum Committee in Home and Family Living of the State Department of Public Instruction. As compared to a decade ago, there are far fewer single speeches, although in one fairly representative month of 1965, Esther was the principal speaker at an area child guidance clinic meeting and at a church men's group meeting. As a major project, the Parent Education Associates consultation with lay leaders occupies about one-fifth of Esther's professional time. With the introduction of new federal programs in education and toward

¹This paragraph is based on time logs provided by Esther.

the attack on poverty in 1965, more demands are being placed on Esther for consultation regarding planning of new programs and the evaluation of newly-completed programs, such as the "Head Start" pre-school projects of the summer of 1965.

For the future, Esther projects a continuation of the emphasis on lay leadership for direct teaching in mental health along with emphasis on long-range program planning consultation with local groups, particularly in communities where professional resources are not highly developed.

Liaison and Leadership Functions

During the late 1950's and early 1960's Esther has served on a number of boards for organizations which have relationships to mental health education purposes. She was President of the Michigan Council on Family Relations, 1955-1958, and a member of the Board of Directors, National Council on Family Relations, 1957-1961. She served as a consultant to the State Board of Managers, Michigan Congress of Parents and Teachers, 1954-1958, and in 1958 was given the Distinguished Service Award of the Michigan Congress. She serves as an advisor to the American Council of Parent Cooperatives and during 1957-1962 was a member of the Executive Board, Michigan Council of Cooperative Nurseries. Esther's international interests have been expressed as a member of the International Liaison Committee, National Council on Family Relations, and by conducting workshops in Puerto Rico and the Virgin Islands. Her special interest in children and children's institutions has been expressed by service on the boards of the American Legion Children's Home, Otter Lake, Michigan, and the Methodist Children's Home, Farmington, Michigan. Similarly, her continuing interest in the Girl Scout movement has been expressed through unremitting service as a leader, Council member, or advisor to Councils through the years since she herself was a Girl Scout. She further expresses her professional interests through memberships in the Michigan and American School Health Associations, the Michigan and American Public Health Associations, and the Welfare League, Association for Retarded Children, Society for Mental Health and Adult Education Association as state organizations. Esther also is an associate member of the World Federation for Mental Health.

Esther's Educational Philosophy

The diversity and magnitude of Esther's professional activities are undergirded by her educational values and philosophy. Esther is not especially susceptible to placing individuals in stereotyped categories, and she repeatedly stresses the significance of individual differences. For this reason, she would resist any alignment of her own educational approaches in such categories as "progressive" or "essentialist" or "reconstructionist." In this light, it would be more appropriate to delineate some features of her educational philosophy which she has either stated explicitly or which are shown implicitly in her leadership

and program emphases. From the outset of her first teaching job, she saw the school and community as inextricably intertwined. The community school concept was one she welcomed. While not utopian about how much the school, as an institution, might "reconstruct" the community, much less the world, her own work as a social studies teacher clearly suggests her conviction that the school has a vital role to play in influencing the community. While working in the schools as a teacher or counselor, she obviously saw her own function as providing a link between the school and community.

Wherever possible, Esther tries to elicit from groups their conception of their problems as the background for her leadership. To this background she brings to bear a problem-centered, life-oriented emphasis with a strong encouragement toward democratic problem-solving processes. Thus, she is not the authoritarian "expert." In the same vein, she views people as rounded, three-dimensional human beings with bodies and feelings, not brains alone. However, she does not believe an educational program can be conducted without intellectual content, and her own sister, as her

In one community where she taught her class made a survey of community resources and problems which was reported to the local Council of Social Agencies. It was a matter of considerable interest in the community when the small committee investigating housing reported that some of the worst slum housing in the community was owned by a prominent local philanthropist, and that the rents were disproportionately large.

when she taught in high school. She is aware that learning takes place within an emotional context and that the feeling of rapport and mutuality between the teacher and the learner is crucial. While the main lines of Esther's teaching concepts could rather easily be placed in a general area of one educational philosophy, out of respect for her own convictions against stereotyping, the reader is left to draw his own conclusions at this point. Enough has been described so that it should not be too difficult.

Mental Health Education as Adult Education

Multiple criteria can be used to determine whether mental health education, as found in the Michigan program, is a part of the larger adult education movement. On the basis of clientele served, the program clearly and primarily serves the adult population, although occasionally students in secondary schools have been involved in direct service and teaching. The educational focus of the program is clear from both positive and delimiting vantage points. On the delimiting side, the program has ruled out functions which are primarily of a public relations or publicity emphasis. That is, the Educational Section is not seen as a way of promoting the Department of Mental Health itself as an institution. The far-ranging efforts of the Section, together

¹Statement by Mrs. Barbara Oldenberg, personal interview.

with the large number of people who are touched by its efforts, inevitably has public relations implications for the larger Department in which the Section operates. In some areas of the state, the work of the Department most directly comes to the attention of citizens through the educational programs of the Section. Similarly, the news coverage of the Section's many programs throughout the state causes its work to be better known in certain respects than the less publicized ongoing functions of the Department's clinics and hospitals. 1

Notwithstanding these public relations sidelights, the Section's defined and programmatic objectives are educational. From the outset, the personnel of the Section have stressed the value of a series of meetings with planned educational objectives. These objectives included the full range from information-giving on through attitude change and behavioral change. As with most educational efforts, the Michigan program is geared toward the healthy personality rather than the more pathological, unconscious levels. The Parent Education Associates lay leadership training has

In a personal interview Ralph Daniel, former Mental Health Consultant, reported that informal hand counts in meetings of the Upper Peninsula of Michigan consistently showed that the audience knew the work of the Department of Mental Health most personally through programs of the Education Section, particularly through Esther's own many appearances there over the years. Similarly, Joseph McCall, the Department's Director of Public Information, reported in a personal interview that informal counts of news clippings of the Department received from a news clipping service showed the overwhelming number of news stories had emanated from the Education Section.

particularly stressed this aspect, but the work of the professional staff members has also been toward this objective.

Esther's own formal professional training was in education at both the undergraduate and graduate levels. The overwhelming part of her employment experience prior to her work in mental health education was in the traditional secondary school educational setting. For Esther and the Michigan program there has necessarily been a "bridging function" between education and a number of related disciplines, such as psychiatry, psychology, child development, health education, and social work. While having some multiple identifications, Esther has consistently held membership in the Adult Education Association of Michigan and has attended its meetings. Thus, her own professional identification with adult education is substantiated.

Historically, the adult education movement has long recognized that its educational scope encompassed many settings beyond the traditional school— or university—based programs. Many of the programs in which Esther and the Education Section personnel have participated have, in fact, occurred in school settings and under traditional auspices in public education. The circumstance that many of the Michigan program's projects occur in a church or some other community center by no means rules the program out as an appropriate segment of the adult education movement. Rather, the versatility of the settings in which the Education Section

conducts projects helps establish it as a part of the growing edge by which adult education is brought to people where they are, rather than being limited to a traditional school environment. Homer Kempfer, adult education leader and author, substantiates this conclusion by his observation that adult education programs "are breaking beyond institutional walls and providing services in many locations. ** further points out the importance of understanding group processes in adult education, which has long been an emphasis of the Michigan program in both professional and lay leadership levels. Where the Michigan program has served in the capacity of facilitating community organization or the strengthening of social resources through group efforts. this function is quite consonant with the broader view of adult education as going beyond the traditional, narrowly didactic emphasis on subject-matter learning. The informality, the emphasis on discussion methods, the tendencies toward goal-setting by the group, the problem-solving approach, the emphasis on life mastery for developmental tasks appropriate to adult levels, the lack of prescribed course lengths, grades, and tests--all these attributes are quite compatible with the kind of adult education conceived by

Homer Kempfer, Adult Education (New York: McGraw-Hill, 1955), p. 31.

^{2&}lt;sub>Ibid</sub>.

leaders in the movement. 1

Quite specifically, too, in the areas in which mental health education so closely parallels family life education and parent education particularly, there is both historical and contemporary evidence for this subject-matter area being included in the broad scope of adult education. Kempfer traces the history of various adult organizations, such as the National Congress of Parents and Teachers and the Child Study Association of America, which initiated programs for adult education for parents. 2 Beyond these and other historical aspects, there also is reason to include mental health education within two of the four major program areas for adult education which are serviced from an analysis of adult developmental tasks. These four program areas include: self-realization, human relationships, economic efficiency, and citizenship responsibility. Mental health education bears directly on both self-realization and problems of human relationships. In addition, Michigan's program also has some relevance to citizenship education, although this aspect is not a direct goal of its efforts.

All of these attributes are covered in Kempfer, op. cit., Chapter 2, "The Kind of Adult Education Needed," pp. 17-39.

²See Appendix for a further development of this historical background.

As found in Educational Policies Commission of the NEA, The Purposes of Education in American Democracy (Washington, D.C.: National Education Association, 1938), as found in Kempfer, op. cit., p. 42.

Michigan's mental health education efforts clearly fall within the scope of adult education. The clientele group, for all practical purposes, consists of adults. The educational processes and objectives are shared with other adult educational programs. Esther's own professional training and identification are from the general field of education. The settings in which the Michigan program operates are quite compatible with the settings used by other types of adult education programs.

Issues in Mental Health Education--A National Study

Louis D. Cohen, Ph.D., Special Consultant to the Community Services Branch, National Institute of Mental Health, reported in 1961 on a brief field study of nine programs conducted by state governments in mental health education. The survey was not intended to be either representative of all state programs nor intensive. However, Cohen raised significant issues on which the Michigan program, and Esther personally, have clearly taken stands.

Early in the program, as previously discussed, the Michigan program aligned its efforts toward education for positive mental health, one of Cohen's major "unresolved questions." Although not personally predisposed to labor over definitions of mental health, Esther accepts broadly

Louis D. Cohen, State Activities in Mental Health Education (Washington, D.C.: U.S. Government Printing Office, 1961), 37 pp.

the definition of Marie Jahoda, which includes three dimen-(1) an active mastery of the environment, not merely passive adjustment; (2) unity of personality, including concepts of self-realization and self-consistency with relative freedom from inner conflicts: (3) correct perception of reality, including one's own self. Operationally, Esther tries to help individuals and groups move toward the use of what she regards as sound mental health principles. Examples of these principles would be the appropriate release of feelings, appreciation of individual differences, acceptance of sexuality, the development of ethical standards, and the flexibility of defining one's role without losing what might be considered the most essential or fundamental masculine or feminine values. Esther is not terribly concerned as to whether the mental health principles have been completely validated at this point of time by rigorous scientific research. She is content to base her efforts on her own experience, drawing also upon whatever help scientific studies and exchanges with respected professional colleagues may also contribute. She does not disavow the need for continuing research, but as a practitioner concerned with the ongoing needs of the Mental Health Education Section program, simply does not believe that all educational efforts

¹Marie Jahoda, "Toward a Social Psychology of Mental Health," in <u>Mental Health and Mental Disorder</u>, Edward Rose, Editor (New York: Norton, 1955), pp. 561-565. See Appendix for a further brief discussion of this definitional problem.

must be held up pending "the final word" of some scientific validation. To a degree, then, her work does become an "act of faith," as is probably true of most educational programs.

Some mental health educators become preoccupied with the validity of specific factual information they pass on to the various groups with which they work. Through professional reading, taking course work related to her field over many years, and active participation in related professional conferences, Esther is reasonably secure about the data—as related, for example, to child growth and development—that she utilizes. Again, however, her approach relies less heavily on information—giving than many mental health educators, and perhaps she is relieved of excessive concern over this "unresolved question."

Another issue has been the degree to which a state-wide program should rely on volunteer, non-professional personnel. Esther has taken leadership on this issue by her development of Parent Education Associates. This approach, too, is in keeping with Esther's belief that the role of the state staff more and more should move toward training local leadership, along with community organization and group consultation, rather than direct teaching and prime service to the health education consumer group.

The ramifications and multiplicity of effort in the Michigan Mental Health Education program—and especially Esther's own personal contribution—have been far-reaching.

The requests for service have consistently been higher than the section staff could meet. Esther has characteristically not tried to inflate the esteem for her program in the estimate or regard of other people, and she has been criticized for this. The fruit of the tree of her life work has not been self-aggrandizement. Her work, instead, has been a kind of career-long dialogue speaking to the needs of people. For Esther, this dialogue not only is a reflection from her early family, educational and social backgrounds, but also is interwoven with her religious values. Here, then a new and different dimension is introduced concerning Esther's relationship to God and neighbor.

My country is the world;
My countrymen are mankind.
--William Lloyd Garrison

lin a letter, Wallace C. Fulton, M.P.H., Associate Director, Office of Community Services and Health Education, The Equitable Life Assurance Society of the United States, commented on this point. He believes that she should have described "her program as it developed by seeking exposure in professional publications." He blames this "failure" for the fact that "too few people, as a result, have a clear notion of how significant her contribution is."

CHAPTER VI

I-THOU

Existence will remain meaningless for you if you do not penetrate into it with active love and if you do not in this way discover its meaning for yourself. Everything is waiting to be hallowed by you; it is waiting to be disclosed in its meaning and to be realized in it by you. For the sake of this your beginning, God created the world. He has drawn it out of Himself so that you may bring it closer to Him. Meet the world with the fullness of your being and you shall meet Him. That He Himself accepts from your hands what you have to give to the world, is His mercy. If you wish to believe, love!

Esther strives to practice her faith, but is not inclined to preaching. Rather than exploring theological concepts in depth, she much prefers to plumb the depths of human relationships. She shares much of modern man's dilemma in questioning religious institutions—churches—as to their relevance and meaningfulness. In some respects she tends to state more about what she dislikes in contemporary

From Martin Buber's <u>Turning</u>, p. 44, as quoted in Jacob Trapp (ed.), <u>To Hallow This Life</u>, <u>An Anthology of Martin Buber</u> (New York: Harpers, 1958), p. 38. Martin Buber, the renowned Jewish theologian and philosopher, speaks of the "Eternal Thou" as God. His concept of "Thou" is that divine spirit in every man, including oneself. Man's relationship to God, or in the deepest spiritual and personal sense, to another man, is expressed by the symbol of dialogue or relationship, "I-Thou." By contrast, when a man relates to an object, or treats another living as an object, the symbol of that type of relationship is "I-It."

religion than what she herself believes. And yet there are beliefs, too, expressed more in acts than words.

There has never been any real doubt in my mind about the existence of God, even when I experienced the most serious questioning. I have moved away from literal interpretations of the Bible. I believe the story of the Virgin Birth, for example, is a beautiful story which helped the people of that time to emphasize the Divine aspects of Jesus. The story had meaning and significance for its day. I believe Jesus came closer to representing the Divine of any personality we know.

The evolution of Esther's religious growth is not marked by any extraordinary event. She has had no "conversion" experience; indeed, she would be dubious about any such sudden transformation in her own religious evolution, but is not prone to expressing skepticism about the religious values of others. A married couple of mixed Christian and Jewish heritages commented as her friends on Esther's ability to relate to people of different religious backgrounds. Typically, though, this respect for religious differences is not at the expense of becoming a wish-washy "tolerance" in which she either would deny her own beliefs or accept the views of others with an inward condescension.

She is not out to proselyte anyone, in the unfortunate zealous sense of that word. If she senses that friends are rigid or defensive about their religious beliefs, she would be the last person to try to undermine or shake those friends' convictions. Again, this is not to say that there is a kind of bloodless lack of commitment on her part; to the contrary, privately she may feel a

certain sadness, even irritation, with the burden of religious misconceptions she feels some acquaintances may carry.

The derivation of Esther's beliefs is more typical than remarkable. There was the childhood naivete and blind acceptance of authority, the passionate and personalized commitment during early adolescence, the rebellion in late adolescence, and the growing resolution into more stable beliefs in maturity.

On both sides of my family there was a Methodist heritage. My father's cousin was Bishop Arthur Wesley, who served in South America. I recall vividly the religious differences between my paternal grandmother and my Great-Aunt Lou. It was an odd thing. My grandmother was more liberal in belief, but because I did not like her personally, I always sided with Aunt Lou in my religious loyalty as a child. I well remember my Aunt Lou, who was a strict fundamentalist. If she came in the house and someone was playing cards, she would sweep the cards off the table with one commanding wave of her hand, saying, "There will be no card playing here!" I really was indoctrinated with fundamentalism quite early.

Despite the history of Methodist affiliation in their early years, both Esther's father and mother had joined the Episcopal church prior to Esther's birth. She recalls her father's singing in the choir at St. Paul's Episcopal Church, Detroit, during her early childhood. Her mother appreciated the formality, ritual, and symbolism associated with the Episcopalian traditions.

I, too, like the richness of ceremony and symbolism when I step into a Catholic cathedral, but my appreciation is more from an aesthetic viewpoint. These aspects are not essential to my religious experience itself. Interestingly enough, my sister,

Barbara, is a convert to Episcopalianism after an earlier tradition of Methodism, and my sister, Ada, became a very devout Catholic convert.

Esther understands her sister's need for Episcopalianism, but for herself prefers a less involved expression
of faith. Similarly, she readily saw the support provided
to her sister, Ada, with the authority and specificity for
ethical behavior provided in the Catholic tradition. One
of the more meaningful objects in Esther's living room is
a ceramic statue of St. Francis of Assisi created by Barbara,
her younger sister.

When the family moved to the Redford and Farmington, Michigan, areas from Detroit, the ties with the Episcopal faith were broken. There was no easily accessible Episcopal church, and it was too far to continue attendance at St.

Paul's in Detroit. Esther's younger brothers were baptized in the Methodist church in Redford, and when the family moved to Farmington, they attended the First Methodist church there. Esther recalls, too, having attended the revivalist meeting of the then-noted evangelist, "Billy" Sunday; the occasions were special meetings for children, and she simply joined with a number of neighbor children who were attending. However, this experience was of little permanent impact and was neither fostered nor discouraged by her parents.

As is not infrequent, Esther's deeper religious commitment came in early adolescence after she became a church member formally at the age of eleven. As a high

school junior and senior, Esther was a volunteer worker with the Methodist Children's Village of Detroit. She worked closely with Aileen Davis in recreation leadership. This experience helped stimulate thoughts of a vocation as a missionary or as a social worker. Unfortunate experiences in meeting missionaries, however, made her recoil from that calling.

They seemed too zealous, even peculiar. They did not seem to be the kind of person I wanted to be—a person who had life, who could do things, who could feel and experience. Missionaries seemed to miss so many things in life.

Whatever doubts had been planted about missionaries did not prevent Esther from attending church regularly.

I did not miss a Sunday all during high school. I was in the youth group and sang in the choir. I was devoted to the choir director, Mrs. Ernestine Pierce. She was so joyful and happy in her faith, and I emulated her. She was the exact opposite of Aunt Lou, who was dour in her Christianity.

The Reverend Sidney Eva was her minister, and he, too, represented a new kind of Christian to Esther. He was a jolly, round, and plump Welshman who had stuttered as a child. Like Demosthenes, he also had put pebbles in his mouth to try to overcome his speech defect, and he described dramatically how he stood on a shore in Wales sounding out words with stones almost blocking his throat.

He was never somber or sanctimonious. He was very forward looking for his time. He almost got in trouble with some of the adult members because he got a movie projector for the church youth when there was no other entertainment in the town for young people. He was especially interested in youth, and he re-directed me from a conventional, punishing

Christian attitude where everyone acts the martyr, as if they were thinking, "I am so good, why is the rest of the world so wicked?" Sidney Eva was just the opposite. Nothing ever seemed to get him down, and he always seemed to be happy and optimistic. He taught us that it is not pious attitudes or beliefs, but rather the way we did things and what we felt about life in a more truly Christian attitude of living that was important.

Esther felt that the Methodist church youth group was the core and center of the town high school group. Certainly in terms of numbers alone, this was the case, for twenty of the twenty-five members of Esther's graduating class in high school were youth group members. The relationship to the Reverend Eva, fostered by his leadership of the youth group, was to be one which lasted for many years with Esther. So, too, was her relationship to her Sunday School teacher, now Mrs. Dan Veazy (née Natalie Knapp) with whom Esther continues a relationship through occasional telephone calls.

Entering the University of Michigan at the age of seventeen, Esther almost had a complete turnabout in religious conviction. She did not attend church that first year, except on vacations or weekends when she could attend at home and see the Reverend Eva. She felt that if people were "so stupid" to think that card playing was so wicked, she wanted nothing further to do with their kind of Christianity. Similarly, she felt that it was not drinking in itself that was so bad, but the use to which drinking in excess was put. She began in many ways to discriminate

between an outright condemnation of "cards" or "liquor" versus a selective judgment of the ways an individual might react to these activities. Like many an adolescent, too, she more generally questioned the creeds and rituals of the church.

Again, personal relationships strongly affected her faith, pro and con. In high school she had become rather fond of a couple who, as it turned out, may have been more hypocritically pious than genuinely devout. At least, that was the way she began to feel about it in a fit of disillusionment. It seems that this very couple had given her \$100 toward her college expense, a much needed and appreciated gift at the time. She was terribly shocked a short time later in her college freshman year to learn that the husband had been supporting another woman downtown in Detroit for years and that the wife appeared to know all about it and to tolerate it. Of this episode, Esther related: "I was very judgmental and found it hard to accept either the husband's or the wife's behavior then."

Esther's mother typically took her daughter's religious meanderings in stride. They had extensive discussions together, and she found that her mother, surprisingly to Esther, shared some of her own questionings. As a freshman, she wrote a long letter from college to the Reverend Eva. He replied in the most effective way possible, she thought, expressing his confidence in her and her ability

to resolve her doubts. There was no reproof or scolding.

She still recalls the most important things he had to say:

Life without faith is meaningless and purposeless; the primary thing is to have faith in God and in oneself to strive to be Godlike; each person has his own divinity to live out. It is up to you to take this responsibility to realize your own divine spark, but if you lose faith in this spark, you will cease to grow.

Esther has consistently questioned the piety, in the sense of false religiosity, of seemingly devout Christians. She had shrunk back from joining religious organizations in her freshman year when she saw the rather isolated, sad, even odd members who seemed to constitute a sizable portion of the group. She enjoyed life, wanted to have fun, and could not conceive of these group members as being able to be free, outgoing, and joyous. For some members, the religious group seemed to be the only interest or affiliation they had. For a few others, it seemed to be a place where they could lead when they could not have been respected as leaders in any other group. A harsh judgment to make? Perhaps, but nevertheless, this was how Esther felt that first year in college.

After receiving the Reverend Eva's letter and further discussions with him on home visits, she did affiliate with several religious groups among her many other activities in the University. She belonged to the Wesleyan Guild and to Kappa Phi, a Methodist girls' sorority. Especially significant to her, though, was the membership in the

Cosmopolitan Club, where a number of YWCA members belonged, although the club itself was not an exclusively religious organization. She recalls: "It was not like it is today, where getting to know foreign students is more acceptable. Then it was rather frowned upon, and it took more independence to belong to this group."

In her junior year at the University she took a course in the Bible from Dean Humphrey of the College of Liberal Arts. She came to understand the Bible in three semesters of study which became the foundation of her approach today. Dean Humphrey made the Bible "come alive" for her. She had entered the course with marked intellectual doubts. There were too many contradictions in the Scriptures, and too often the interpretations she had heard violated "good common sense." She came to see the Bible as having depths of religious insight and beauties of literary form and style; she moved still further from the religious fundamentalism and Biblical literalism exemplified in her Great-Aunt Lou and her very early childhood heritage. Again, she talked with her mother and pleasurably found their mutuality in the interplay of religious doubt and affirmation as she grew in her faith.

Music and nature are also special expressions of Esther's religious identity. Handel's <u>Messiah</u> is a cherished musical experience for her. She has sung in church choirs from high school to the present and has always found

hymns to provide the intangible, but significant, depth which aesthetic expression can offer. She recalls being moved to tears when she heard her idol, Ernestine Pierce, soprano, and Mrs. Fred Cook, contralto, sing "I Come to the Garden Alone" in her high school years. She has been known to sing gospel hymns in her car. Singing in the church choir is the active, participative religious involvement which far more fits her energetic personality than passively drinking in a sermon as a regular church member in the pews. She thinks that proponents of modern church music would frown on some of her preferences, such as "Day Is Dying in the West" or "I Would Be True, For There Are Those Who Trust Me." Nevertheless, she likes the quiet, melodic lines, even if they do not have the depth of more intellectual, religious insight contemporary religious musicians prefer.

Esther's devotion to nature and to gardening has religious overtones, too. When she speaks of her flowers, even the tone of voice connotes reverence for God's creations. She is quick, too, to point to flowers here which came originally from her mother's garden, flowers there that were from this friend or that, and this bush that was the gift of a parent group which appropriately detected her devotion to gardening. The landscaping of her present garden was lovingly contrived by her brother, Homer. Incorporating the various species representing cherished human relationships, Esther's backyard manages to connect her

love of nature with her affection for people.

In keeping with other sympathetic critics of the present-day church, Esther questions the increasing bureaucratization of the church as an institution. She openly rebels at the church's employment of professional money raisers, whose techniques become "demands which take all the joy out of giving." She questions clergy and members who begin to think of the ministry in terms of a bureaucratic employee who works a forty-hour week, with "fringe benefits" and time off for "overtime." She is repelled by the large city church where impersonality and alienation set in as the presence or absence of members, as individuals, is hardly There is, perhaps, a bit of the nostalgic yearning for the close-knit small church congregation where more lasting, significant personal relationships were the pattern. Shades of Farmington First Methodist Church, Ernestine Pierce, and the Reverend Sidney Eva?

And so, within a core of basic religious values, there are signs of the modern tension between a commitment to Christianity as a faith, but with very substantial doubts about the contemporary church as a developing institution.

She says in her own words:

I know the church needs support, and yet I believe sometimes that I might better give of myself in everyday living with my friends and neighbors. I hope the church will not lose sight of its role in teaching and its concern for the individual as it takes on other responsibilities.

Along with more traditional Christian ethics, Esther frequently is sustained by a homely moral precept enunciated by her mother: "Any human being who touches life at any point has a responsibility of leaving that person or that place better than when he found them." Her mother similarly inculcated the value that the greater one's personal gifts, the greater the responsibility to give of that gift to others. As an example, Esther mentions that God seems to have given her a gift of listening to others. For this reason she cannot turn aside friends or neighbors who need the solace of attentive, sympathetic listening.

When she visits parks, she admittedly has been overly scrupulous about her mother's admonition. She not only picks up whatever papers she may have brought to the site, but canvasses the site for other litter which she cleans up as well. For years she found herself resenting the carelessness of others and harboring an exaggerated sense of ill-will. Was the earlier resentment partly a restlessness with her own over-conscientious attitude and her mother's earlier admonition? Possibly, but in any event, the mellowing of more recent years has left her with a calmer acceptance of her own needs "to clean up" the park site and less inner animosity toward the "litter bugs."

The story of Esther's spiritual pilgrimage by no means compares with a St. Augustine, a Dag Hammarskjold, or a St. Francis. She would be the last person to claim

any saintliness, and her surroundings were far more commonplace than the international vortex where Hammarskjold found
his identity in both politics and in contemplation. Of
human foibles and shortcomings, Esther has her share, and
she strives for some self-understanding and self-discipline
in dealing with them.

Superficially, then, Esther's religious experience might be regarded as fairly uncomplicated, even mundane. What is the quality, then, that lifts her out of this conceivably ordinary religious faith? Expressed most directly, the remarkable quality is that she does, in fact, strive with some success to live out that precept of religious stewardship enunciated by her mother, but also familiar to all who wish to emulate Jesus as the "man for others."

In struggling against human weakness and frailties to express concern for others wherever she is, Esther does clearly express the meaning of religious faith at a high level. Her "love of God" does not always manifest itself in ritual and traditional, institutionalized religious expressions. However, it is demonstrated deeply in both her profession and in her ongoing relationships with her family, friends, and neighbors—often quite unobtrusively. And if, as Martin Buber has underlined, love of God is shown by human affection, then indeed Esther is striving to obey the First Great Commandment by practicing the Second: Love Thy Neighbor.

Spirit in its human manifestation is a response of man to his <u>Thou</u>. Man speaks with many tongues, tongues of language, of art, of action; but the spirit is one, the response to the <u>Thou</u> which appears and addresses him out of the <u>mystery</u>. (<u>I</u> and <u>Thou</u>, 39).1

l<u>Ibid</u>., p. 1.

CHAPTER VII

THE SECOND COMMANDMENT: THY NEIGHBOR?

Go put your creed into your deed...
--Emerson

Who is my neighbor? This question was the one the young lawyer asked Jesus, who then responded with the story of the Good Samaritan. For someone like Esther, the query, "Who is my neighbor?" does not seem to occur, for her "neighbor" becomes whatever person whose life touches hers. Her neighbors, her family, her professional colleagues, her friends, readily attest to her kindliness, generosity and thoughtfulness. In 1934 her mother was to express her basic attitude as, "You almost make their troubles your own..." in regard to her neighbors and patrons on her postal route. 2

While there is testimony³ about her material largess for those in need, equally significant is the open-hearted, open-door feeling which she manages to convey regarding her willingness to be the good listener and friend. There is a special affinity for children, perhaps best expressed by one neighbor who commented: "All children are her children."

¹Luke 10: 25-37.

²Detroit News, Feature Section, July 30, 1933, p. 8.

³Statement by Dr. Leonard Price, personal interview.

Even the most casual visitor in her home will soon learn that "Aunt Esther" has a kind of special relationship with the children in her neighborhood.

Her need for assistance with her yard work becomes a vehicle for getting acquainted with any number of young-sters. Rather than having one particular helper, she deliberately calls on children from various homes. Moreover, she appears to know many children by their first name and in some detail. She is observant of them in a particularly perceptive way, and has a forthright, benign, but firm, attitude as she directs them in their work. She is intrigued with individual differences among her helpers and readily uses spontaneous opportunities to be helpful to them.

Among three helpers one day, one fibbed to Esther about how much time he had worked. Quite indirectly, and with sensitive tact for the feelings of all three boys, she managed to let the prevaricator know that she realized he was being dishonest. [Interestingly, one of the other helpers had very covertly indicated the discrepancy in the times of work.] Later in Esther's home the same boy came to her door to complete a job she assigned. He volunteered not to charge her for some extra work which had to be completed. He clearly had begun to learn from the way she handled the earlier experience that he must have some integrity in his work.

Esther enjoys playing games with children and has

a readily-available store of games for children visiting in her home. With a boy who was being made too conscious of his foreign heritage among his classmates, she passed on some beautiful pictures of his native land as a concrete expression of her acceptance and admiration of his antecedents. A neighbor's child frequently joins her early in the morning while she does garden work, and she will often prepare a special breakfast for him. Among members of a family, she will enjoy giving attention—one by one—to each child over a period of time. By individual visits in her home, each child becomes better known to her as a distinct person in his own right and comes to feel her particularly distinct affection for him.

She has taken numerous trips, long and short, with 'teen agers as her guests. The mother of one such girl commented upon how much it had meant to her daughter to have this opportunity to make even a short trip. The parents of adolescents who some years earlier had enjoyed extensive trips with her to Mexico or the West Coast stressed their gratitude for this substantial and meaningful contribution to their children's growth. One mother laughingly commented upon Esther's venture with two 'teen age girls who dressed themselves in Mexican shawls and sauntered flirtatiously near the young Don Juans of a Mexican town square. Just an apprehensive interlude in the life of a

¹Statement by Mrs. Clarence Spawr, personal interview.

chaperone for some 'teen agers in a strange town.

Esther enjoys the yearly holidays with special significance for children. She joins enthusiastically in the fun of "Tricks and Treats" on Halloween. At Christmas she has been known to hold an open house for both parents and youth. As one neighbor voiced it: "What other single person would even think of doing something like that?" As an advisor for youth in her church, she has looked forward cordially to entertaining the group in her home for planning sessions.

In 1963 Esther got "caught up" with the idea of a neighborhood carnival for the benefit of the Muscular Dystrophy Fund. Neighbors who participated in this event in her back yard report that every nearby neighborhood youngster had a part in the various carnival activities. The carnival was a highlight for the neighborhood that summer. When he learned of the event, a Muscular Dystrophy official expressed his amazement: "Now, if you had sponsored a carnival for the mental health, we could have understood that, but whatever possessed you to do some money raising for muscular dystrophy?" Esther had no friend or relative suffering from this disease, unlike many individuals who become imbued with a money raising endeavor. She simply

¹Statement by Mrs. Craig Britton, personal interview.

²Statement by Mrs. Leonard Price, personal interview.

³Statement by Mrs. Craig Britton, personal interview.

saw a cause in need and was not so narrowly focussed that she would raise money only for some self-seeking purpose which touched her personally.

One neighbor marvelled at Esther's capacity for refraining from giving advice or being intrusive about how parents were raising their children. She seldom spontane—ously comments to parents about their children, except in a positive way, and otherwise waits to be asked. A young mother volunteered that she could see ways in which Esther could be even more perceptive about children in some respects as compared to the parents. Being more detached from the everyday pressures of raising a family, she could also be more reflective about the interaction between children and adults.

Esther's neighbors could give specific details concerning her thoughtfulness and readiness to help. One neighbor had a child with croup who had literally "turned blue" when short of breath about midnight. Along with calling the doctor, this anxious young mother called Esther, then asleep. Within minutes Esther was up, out of bed, and in this young mother's home. Still another neighbor commented upon Esther's intuitive sense of another person's needs and her ability to offer the right kind of help at the right moment. 1

Her gregariousness and conviviality extends to the

¹Statement by Mrs. Clarence Spawr, personal interview.

families of her neighbors as well, and she has gotten to know their parents, for example, by extending her hospital—ity to them. One neighbor volunteered that sometimes she has had a personal concern and without even voicing the worry, just a chat with Esther has left her feeling better—even if they did not directly discuss what was bothering her at the time! Esther's neighborliness continues even after neighbors move. Former neighbors feel quite free to drop in on her in visits back in the community. In her own travels, Esther makes a practice of keeping in touch with former neighbors.

While not necessarily a "soft touch," Esther's material generosity is well known to her friends. Not a few friends think that individuals take advantage of her with their demands on either her time or other resources. Esther herself confesses an occasional irritation with individuals who are either demanding, thoughtless or presumptious, but typically she would not convey these feelings to the offending person. She has helped college students with their expenses and has assisted neighbors whose needs ran ahead of their current income.

Esther's concern for others is expressed also with her colleagues. Her long-time secretary of fifteen years in the Mental Health Education Section commented on their lasting friendship and the freedom of staff members to discuss

¹ Ibid.

their personal concerns with Esther as the need arose. Still another dimension of Esther's feelings is reflected in her fondness for her pet dogs. Presently there is "Tammy II," preceded by "Tammy I" and "Cindy"——all black cockers. Some casual observers have thought Esther treated her pets as one would care for a child, but Esther herself draws a sharp distinction. She thinks adults who dote on pets are "silly," and she cites examples. She would never keep her dog if Tammy bit a child. She was appalled when someone suggested that she have a tombstone made for a previous dog that died. When a dog had a brain tumor, she did not hesitate unduly to take the dog to the veterinarian to relieve the dog's pain with measures for final disposal. "My dog has her place as a dog and is treated on that level, not as I would treat a child," Esther points out.

Esther has the motels of the state well canvassed as to which ones accept dogs as guests, and the motel managers have learned to know that Tammy II is a distinguished and respectable canine guest. Even when Tammy was a pup, she accompanied Esther, and on a cold day when she could not be left in the car, was placed under the lectern at one of her speeches. The audience generally was never aware of Tammy's well-behaved presence. Even if the pup had whined or barked at the inopportune moment, Esther would have managed the situation with humor and grace which would have

¹Statement by Mrs. Julia Doxstader, personal interview.

enhanced, rather than disrupted, her presentation at the time.

Repeatedly, Esther's profound capacity to appreciate people from any walk of life is stressed. She fully enjoys the stimulation and friendship of friends or professional colleagues [with Esther, colleagues are apt to become friends, too!] at state and national levels, but she likes individuals and families whose work or backgrounds may be less outstanding from certain points of view. A long-time friend described the comment of an acquaintance who learned that Esther frequently visited in the friend's home: "Miss Middlewood is so well educated, what do you ever find to talk about to her?" Esther laughed when the comment was repeated to her and said: "I come because you and your husband have such a normal home life."

In 1962 and 1963 Esther was the sponsor of a Wilberforce Echezona family attending Michigan State University
from Nigeria. For many sponsors of foreign visitors, a
kind of nominal obligation is met by serving an occasional
meal or a few evening's hospitality. For Esther, the sponsorship of the Echezonas was to become a major project.

After their arrival in the United States, Mrs. Echezona
became ill in what was later to become her terminal illness.
For weeks Esther kept the young Echezona baby in her home,

¹Statement by Mrs. Craig Britton, personal interview.

²Statement by Mrs. Todd Lunsford, personal interview.

hired help for the child's care while she worked, and provided home cooked meals for the father and remaining older children still living in University student housing. While caring for this Negro child, she spontaneously commented to the minister's wife, having brought the child to a church function. Holding the baby tenderly, Esther turned to Mrs. Erickson and said: "How could anyone hate this child?"

Esther described with uncontained amusement how she had taken the baby to a local well known pediatrician who had a number of patients from upper socio-economic levels. The looks of incredulity, puzzlement, and extreme curiosity upon the part of the other patients upon seeing her (sans wedding ring) and the Negro child in the reception room, should have been captured for posterity. Their expressions seemed to be conveying such questions as: "Could she be the child's mother?" "Or is she the grandmother?" "How do you suppose an older white woman ever brought in a Negro baby to see the doctor?"

Esther entertains guests of different races and nationalities out of sheer enjoyment of individuals as friends. She is by no means sure that she could ever join a picket line for civil rights. Yet she resents the disapproval of anyone who is so prejudiced as to resent her entertainment of guests, regardless of skin color. She sees her work with

¹Statement by Mrs. Charles Erickson, personal interview.

mental health in many perspectives, but at least one dimension is to work toward reducing the emotional needs for scapegoating and other expressions of bigotry toward minorities. 1

Esther also feels regret, resentment, too, concerning the dehumanizing practices in some of our organized facilities for assisting people. While recognizing the need for such programs as Aid to Dependent Children, she says:

When ADC came in I was hopeful that mothers could then go to a store and purchase articles just like anyone else with a sense of personal dignity. Instead, I find that they are treated in the old "welfare" sense of getting aid with red tape, waiting in lines at shabby offices and generally being treated in ways that are degrading.

She contrasts the way in which she was treated at the Mayo Clinic with the clinic of another large hospital with which she was familiar:

At Mayo's, you are known by individual name. Your folder is ready when you come for care, and you have an appointment. Whether you are paying the lowest or highest fee, you are treated with respect and as a person. At _____ clinic, you sit interminably on a long bench. When you fall off the bench at the far end, then it's your time to go in. All the procedures are cold and impersonal.

Esther believes that more of our social ingenuity and resources should be devoted to devising ways of humanizing

In a personal interview, Mrs. Clarence Spawr described how Esther reproved a member of her family for telling a "Polack" joke in her presence. Mrs. Spawr stressed Esther's sensitivity regarding bigotry, even as expressed humorously in jokes about minority groups.

and individualizing our provisions for socially-organized assistance to people. Rather than degrading the individual, we need to do everything we can to enhance his self-respect and initiative.

Generally, I believe that change has to come from inside out rather than from outside in. We can pass laws requiring people to clean up their neighborhood, or we can send in a crew to provide such cleaning socially. Wouldn't it be better, though, to create in the individual and group such a sense of self-respect and pride that they themselves would take the responsibility to live in a clean home and yard because this type of living was an expression of the kind of person they wanted to be?

Despite some repute for being "generous to a fault,"
Esther is sensitive to the problems of creating undue dependence in the process of helping others. In any close relationship there are gains which run certain risks. This two-edged quality is the very reason that some people flee into anonymity, detachment and aloofness. For them, to confide runs the risk of a confidence being violated. To be dependent runs the risk of rebuff or disappointment.

To encourage closeness or neighborliness runs the risk of privacy being intruded upon. To be involved invites too strong a need to consider "what the neighbors will think."

Such are the fears of personal relationships.

With the multiple facets of a mass society comes an evolution away from the more simple, tight-knit, inti-mate, and consistent network of relationships in a rural or small town community. Urbanization, suburbia, specialization,

bureaucratization, large-scale organizations, and escalating technology have brought isolation and alienation to greater or lesser extent to many individuals. Esther, and many other contemporary observers, see the need for a new design of family life, religious institutions, work relationships, leisure time pursuits, and neighborhood relationships to meet deep human needs for supportive, interdependent relationships. For other persons already too damaged by unfulfilled expectations in their relationships to other people, many facets of mass society merely provide a ready reason for avoiding intimate ties to other people.

Any attempt to assess Esther's responsiveness and mutuality in friendships cannot fail to recognize her background in a close-knit family in a small town community. The virtues of individual initiative, independence, and self-help, combined with mutual aid and group support in the small community certainly are a part of Esther's child-hood middle-class legacy. Similarly, a certain skepticism about large-scale organizations, bureaucracy, and institutionalized programs to solve the problems of individuals is the counterpart of this heritage.

If Esther emphasizes relationships within neighborhood and friendship circles, primarily it is because she
enjoys people. If she freely uses the telephone to maintain relationships despite geographical separation, primarily it is because she enjoys long-term ties to friends and

family. It is true that her practices suggest a direction to replace some of the human values previously emanating from relationships in the extended family; likewise, her approach both enriches and relieves the heavy emotional burden we now place on the restricted nuclear family. These sociological considerations may be of professional interest to Esther, but they are scarcely an important element in her genuine appreciation of other people. One neighbor summed up Esther's concern for others thus: "The thing that is different about Esther is that she does what many of us think would be the nice thing to do, but never get around to carrying out."

Suit the action to the word, the word to the action.

--Shakespeare's Hamlet, Act iii, Scene 2

¹Statement by Mrs. Craig Britton, personal interview.

CHAPTER VIII

CONCLUSION

From a social psychological perspective, the mental health education program can be perceived as the resultant of two sets of forces. There are the forces which might be described as personality tendencies. For the purpose of this study, the personal predispositions of Esther Louise Middlewood were considered to be crucial. In part, Esther's central role was due to her leadership, and, to some degree, it was also because she is the only staff member whose tenure has encompassed the entire eighteen-year span of the Michigan Mental Health Education Section program from its inception to the present.

The Contribution of the Unique Individual

Although by no means comprehensive or in depth, Esther's biographical profile highlights certain facets which seem to show considerable influence in the direction the Michigan program has taken. The loss of her father, to whom she had a very positive attachment, appears to have sensitized Esther to the particular importance of the paternal role in family life. Her mother—a strong, competent individual, by all available accounts—became the hub

of the family after the father's death. She became doubly significant to Esther as an object of emulation. Not only, then, was Esther sensitized to the importance of the father in family life, but she was also made very much aware of the significance of the mother. Her rivalry, too, with her two sisters seems to have intensified her intellectual drive, already stimulated by her admiration of her mother's concern for learning and cultural stimulation. Thus, the idiosyncratic circumstances of her own family appear to have contributed both to her needs to achieve generally and to her special interest and activity in the fields of family life and parent education. Had her own relationships to her parents been more routine and uneventful—even taken for granted—one might speculate if her devotion to mental health education would have been quite so keen.

Still other themes in Esther's development have relevance to Michigan mental health education as she has led and participated in it. The Michigan program has characteristically been brought to groups at far corners of the state with an unstinting outreach. Such an outreach has required an indefatigable energy, long hours of travel, and a boundless interest in meeting with people of widely varied concerns and backgrounds.

Esther is blessed with an abundant physical vitality, despite lifelong obesity. She clearly loves to travel
and has a cosmopolitan range of interests in individuals

without regard to race, nationality, religion or socio-economic status. Esther's deep vein of altruism and profound
willingness to give of herself is attested to by an examination of her personal, as well as professional, relationships. In each of these attributes there are strong hints
of the strong and meaningful example set by her mother.

Some state mental health education programs consist of impersonal, second-hand contact with people through the dispersal of informational materials, the issuance of news releases, or publication of bulletins and articles. For Esther this type of desk-bound, detached program would be nothing less than a bore and would deny some fundamental expressions of her own special being.

Michigan's program has not given any overriding emphasis to research, although this element has not been completely lacking. Esther is not a theoretician nor especially prone to deep philosophical speculation and preoccupation with statistical manipulations. Rather, she is a "do-er," a practitioner, who would prefer to bring the knowledge of scientific studies to groups as a translator, or "middleman," of ideas. She is conceded to have a special forte in the ability to make understandable to the layman those concepts—either psychiatric or sociological—which are often obscured in technical language.

Esther's fundamental background professionally is education, and she has a strong commitment to the educational

method. She believes in more than information-giving as education and is committed to changes of attitude and behavior. In this sense, Esther moves from that end of the spectrum which is fact-feeding to changes in attitudes and behavior. Such changes, at their extreme, approach therapeutic changes of a deep and extensive nature. This emphasis undoubtedly provided both cause and effect associated with her on-the-job training as a psychiatric case worker, which tends to weight her educational methodology toward the more personal involvement of individuals in groups. This set of personal predispositions, then, help to explain further why the Michigan program is not solely the information-giving, public relations type of service found in other states.

Michigan's program, unlike others, has given great weight to the positive mental health approach. Here, again, Esther's own individual predisposition becomes a factor.

The reiterated example and admonition of her mother, "Middy" Middlewood, was in the direction of denying obstacles and overcoming them by prodigious effort, enthusiasm, and drive. Tendencies to be preoccupied with either the more neurotic or handicapping attributes of personal limitations, much less mental illness, are rather foreign to Esther's heritage and personal outlook.

Esther characteristically dislikes routine, repetitive ways of doing things. The Michigan program is not narrowly conceived nor limited to a single segment of the

population or a constricted range of educational approaches. Esther's functions have been multiple—direct teaching, consultation for group planning and for community organization, speaker and interpreter, coordinator, and group discussion leader. The range of groups in which she has involvement is diversified—various racial and religious groups, both men's and women's groups, varying age levels, different socio—economic statuses, and varied professional groups. The range of geographic coverage over a large state—plus involvement in regional, national, and international activ—ity—have given Esther a wide scope of activities quite in keeping with her own strong need to have variety in her everyday life. Other types of state programs, more narrowly conceived and developed, would be quite incompatible with Esther's heterogeneous interests.

Mental Health Education as Adult Education

Proceeding beyond the more biographical aspect of Michigan's mental health education program, its function as a segment of adult education has been examined. The program was viewed briefly in terms of the historical background of family life and parent education. Such criteria as educational aims and methodology, Esther's background and identification as an educator generally and adult educator in particular, nature of clientele, and settings were reviewed. On the basis of such an examination, the assessment of this program as a part of the broader adult education

program seems incontrovertible.

The Influences of Social Backgrounds

The contribution of cultural or social values, beyond the more individualized predispositions of Esther's leadership and participation, have been surveyed in the Appendix. These values become translated into certain role expectations which impinge on any mental health educator like Esther. To the extent that the mental health educator suggests the consideration of a new set of values, at least partly accepted on the basis of authority and faith, the program does provide a form of secularized religion in a society which has seen a loss of religious values and increased secularization. In an American society which continues to put heavy emphasis on practical-mindedness and optimism, mental health education--particularly positive mental health education--finds a high compatibility. Similarly, where American values tend to repudiate tradition and the past for emphasis on the future and scientism, mental health education provides a substitute, hopefully as scientific as possible, for what are considered to be the outmoded, tradition-ridden values of earlier parental or grandparental generations. Mental health education encourages self-examination and introspection, processes which are more apt to be cultivated in times of cultural change where individuals are subjected to role conflicts and are, consequently, forced to greater self-consciousness about their own functioning. Where social change is relatively slow, roles are well defined and relatively complementary or congruent with one another—as in a more traditional, simplistic culture—and the need for self—consciousness and introspection becomes less urgent. Altogether, mental health education is necessarily a part of the warp and woof of society, which limits and prescribes the functioning and participation of mental health educators, however gifted or unique their particular contributions may be.

Giving due recognition to the societal presses upon mental health education, the particular concern of this study has been to focus on the unique contribution of an educational practitioner to the Michigan mental health education program. In a culture where large scale organization, automation, depersonalization, and alienation are increasingly becoming more significant, recognition and encouragement for the idiosyncratic contribution of an individual becomes especially important. With this fundamental purpose this study was initiated, and on the note of highlighting the influence of Esther Middlewood—adult educator and Michigan's ambassador for mental health—this study closes.

APPENDIX

SOCIAL BACKGROUNDS OF MENTAL HEALTH EDUCATION

Along with the personal contribution of Esther
Middlewood as an educator, the social backgrounds of the
Mental Health Education Section are revealing. To some
degree, these backgrounds may be viewed from the standpoint
of the history of psychiatry and the mental health movement.
Still another significant dimension is related to the more
strictly sociological factors in mental health education.

History of Psychiatry

Two major "revolutions" may be described in the history of psychiatry prior to the contemporary period. Currently there are references to a third revolution which reflects modern changes in efforts to maintain mental health and treat the mentally ill. 2

With the Age of Reason developing out of the European

l See Gregory Zilboorg, A History of Medical Psychology (New York: Norton, 1941), a definitive historical work, and the outstanding and highly readable history of American psychiatry: Albert Deutsch, The Mentally Ill in America (New York: Columbia University Press, 1945).

Nicholas Hobbs, "Mental Health's Third Revolution,"

American Journal of Psychiatry, XXXIV (March, 1964), pp.

199-200, and Leopold Bellak, Handbook of Community Psychiatry (New York: Grune and Stratton, 1964), pp. 3-5.

Renaissance, there came increased interest and concern for the mentally ill. This interest was expressed by more rational efforts to understand the causes and possible forms of treatment for mental patients. Where demonology and notions of witchcraft previously accounted for mental deviations, forerunners for theories of psychogenic factors in illness were advanced. Various forms of physical treatment, however crude, became visible expressions of these efforts to treat patients more rationally.

Zilboorg describes Juan Luis Vives (1492-1540), a Spaniard from Valencia, as the intellectual leader of the first revolution. Vives thinking moved away from religious and metaphysical concepts related to man's psychological functioning. He viewed the human mind as distinct from the soul, linked psychology with physics, and tried to find the properties of the human mind in the activities of the human body. He recognized the interplay of the emotions and intellect, was interested in empirical observations of man's thinking and feeling, and even had some awareness of broader sociological implications.

Philippe Pinel (1745-1826), French physician-inchief of the Bicetre and Salpetriere institutions under the Revolution and the Terror, as well as the Napoleonic

¹Zilboorg, <u>op. cit.</u>, pp. 180-195. The description of the first two psychiatric revolutions is drawn from Zilboorg.

regime, is cited by Zilboorg¹ and Deutsch² as the most outstanding practitioner of the philosophical ideology developed by Vives. When appointed to head the Bicetre institution, one of Pinel's early actions was literally to remove the chains and fetters commonly placed on mental patients at the time. Pinel was to earn the title, "Father of nineteenth century psychiatry," with his more humanitarian, rational care for the mentally ill.

Pinel's action to remove the chains occurred on September 11, 1793, and nearly one hundred years later Dr. Sigmund Freud was to become the leader of the second revolution in psychiatry. Freud's contributions included his theories of the influences of early relationships within the family upon adult behavior, the concept of the "unconscious"—as shown in dreams, "accidents," forgetting and "slips of the tongue"—and the first well—rounded rational treatment method, known as psychoanalysis. The fertile ideas of psychoanalysis were to contribute not only to the treatment of the mentally ill directly, but also to provide provocative stimulation in the fields of literature, education, art, physical medicine, drama, and the behavioral sciences. For both mental health education purposes and the broader field of the mental health movement, Freudian

¹<u>Ibid</u>., p. 322.

²Deutsch, <u>op. cit.</u>, pp. 89-91.

concepts were to find wide usage in early educational and preventative efforts which went far beyond the narrower functions of treating the mentally ill.

The third revolution in psychiatry is now well underway in the United States, is taking a variety of forms, and is not yet clearly defined. For want of a better name, this revolution has been characterized as "community psychiatry," which has been defined as "the resolve to view the individual's psychiatric problems within the frame of reference of the community and vice versa. Dunham pinpoints the new developments with suggestions that the distinctive elements concern the growth in psychiatry of a subspecialty in which the psychiatrist assumes a new role as a community organizer and consultant to groups and agencies in an attempt to re-structure them. The goal is to promote a community framework which is conducive to mental health and cares more adequately for the mentally ill at the community level.

¹See the following references for descriptions of the growing developments in community psychiatry: H. Warren Dunham, "Community Psychiatry," Archives of General Psychiatry, 12 (March, 1965), pp. 303-313; Hobbs, op. cit.; Pollak, op. cit; Bryant Wedge, "Changing Perceptions of Mental Health," Mental Hygiene, 48 (January, 1964), pp. 22-31.

²Pollak, <u>op. cit</u>., pp. 3-5.

Dunham, op. cit., pp. 303-306. Dunham believes these changes in psychiatric emphases are assuming what he describes as a "bandwagon" phase, and he raises some very searching, constructively critical questions about whether the profession of psychiatry is adequately prepared to assume these new responsibilities.

Although this revolution has been most clearly seen since World War II, forerunners of these changes were seen between World War I and World War II. In the 1930's, for example, such psychiatrists as Karen Horney and Harry Stack Sullivan showed increasing awareness of cultural factors in mental illness. The collaboration of anthropologists with psychiatrists—and the resultant cross—fertilization of the two fields—also provided a backdrop for the increasing interrelationships seen in social psychology and the more extensive interchange between all of the other behavioral sciences with psychiatry and psychology.

Two developments especially contributed to the third revolution of community psychiatry. With the dispersal of individuals to all corners of the globe during World War II, there came an increasingly enlightened awareness of cultural differences and the effects of different cultures upon the individual. The incidence of psychiatric problems among men in military service came into sharp public focus. This increased awareness was deepened as needs were seen to provide for the adjustment of psychiatric military casualties in the immediate post—war era. There were strong desires to avoid or lessen personal and family hardship, severe losses of manpower, and heavy economic losses which were associated with mental illness.

Such developments regarding the relationship of the mentally ill individual to his community would have been provocative enough for the new revolution. However, still another dimension was added when the production of psychotropic drugs which made possible some radical changes in the management of patients. Within mental hospitals the staffs were freed of the excessive preoccupation with the sheer burdens of routine custodial care for assaultive or otherwise highly disturbed patients. Patients could be discharged earlier into the community by the use of the new medications. Many patients could remain in the community and not be admitted to the hospital. Sociologists became interested in social systems theory and the application of these concepts to research in mental hospitals where the interactions of small groups of patients, patients with the staff, or the staff as a group could be studied. 1

Similarly, the increased awareness of the family group as a social system and the insights of group dynamics added by social psychologists added still another dimension to community psychiatry. Finally, better understanding of the community's social structure and the dynamics of forces within the community, as contributed by sociologists and social psychologists, helped to define more clearly some of the problems of the larger community in relation—ship to the planning of mental hospitals and psychiatric

Morris S. Schwartz, "Social Research in the Mental Hospital," in Mental Health and Mental Disorder: A Sociological Approach, ed. by Arnold M. Rose (New York: Norton, 1955), pp. 190-202.

clinics, after-care services of patients discharged from the hospital, cooperative planning among community agencies for a preventative and total treatment approach for the more effective treatment of the mentally ill, and the promotion of mental health.

History of Mental Health Movement

All three of the revolutions in psychiatry contribute to the history of the mental health movement, which may be regarded as a segment of psychiatry. In some aspects, though, its scope also goes into other disciplines and areas of concern. As founder of the movement, Clifford Beers emphatically shared the deep motive of the first psychiatric revolution to promote more rational, humane treatment of the mentally ill. He himself experienced at first-hand the still inadequate and cruel treatment of the mentally ill as a patient in the Connecticut State Hospital and other hospitals during 1900-1903. Beers could profoundly testify that even the revolution dating back to Pinel more than one hundred years earlier had by no means taken full effect. A fundamental purpose of the original founders of the mental health movement, meeting for the first time in Beers' Connecticut home in 1908, was to carry out the still unfinished tasks of the first revolution.

This history is drawn from Nina Ridenour, Mental Health in the United States (Cambridge, Massachusetts: Harvard University Press, 1961), and Deutsch, op. cit., pp. 300-330.

The promotion of better laws, more adequate facilities, and the application of rational methods of treatment
has consistently been a major purpose of the national mental
health movement. The cruelties and inhumanity for which
the first psychiatric revolution was intended were still
prevalent in the early years of the founding of the movement, not to speak of the much publicized "snake pits" still
later in the 1940's. From an early field trip in 1913 the
contemporary director of the National Committee for Mental
Hygiene (now the National Association for Mental Health),
Dr. Thomas Salmon, described:

. . . conditions reminiscent of the worst horrors depicted throughout history: iron cages with
sheetmetal backs and sides, stone floors, no light,
no heat, no furniture except iron cots, forty-odd
"inmates" in charge of a "yard man," never allowed
outside their cages even when mortally ill.1

The second psychiatric revolution, too, was an integral part of the mental health movement. Chronologically, the second revolution and the founding of the movement in the United States closely paralleled and complemented one another. The promotion of support for early treatment in special "psychopathic" hospitals, where research into the new psychoanalytic insights regarding psychogenic factors in illness was also undertaken, definitely correlated with the second revolution. Similarly, the encouragement of child guidance clinics clearly underlined the Freudian

Ridenour, op. cit., p. 12.

contribution which accented the significance of early parentchild relationships. The mental hygiene movement, through
its local chapters and national leadership in the National
Committee for Mental Hygiene, strongly supported the child
guidance approach. The Committee and its local chapters
were also at the forefront of spreading psychoanalytic insights into general medicine, social work, education, and
the behavioral sciences during the past fifty years. 1

The mental health movement has also reflected and implemented the third psychiatric revolution. In keeping with these contemporary changes, Nina Ridenour, the historian of the movement, refers to the new community psychiatry, which includes:

• • Psychiatric services in general hospitals; In mental hospitals, more flexible patterns such as "open-door" hospitals, day hospitals, night hospitals, small regional hospitals, voluntary commitments; family care and nursing homes; rehabilitation programs to serve the needs of convalescent and discharged patients; Community facilities of many kinds including the full range of outpatient clinical services for children and adults, and the steady development of responsibility at the level of the local community; Earlier and more effective work by related professions.²

With more direct reference to "the history of public education in mental health" as reflected in the national mental health movement, two periods of about twenty-five

¹<u>Ibid</u>., pp. 28-44, 81-92.

²<u>Ibid</u>., p. 135.

³<u>Ibid</u>., p. 93.

years' length occurred in the first fifty years. Ridenour writes that " . . . the most significant characteristic of the early period was the lack of public interest." She recounts how local chapters had to be satisfied if only mere handfuls of people attended public meetings, and in inclement weather, were lucky to fill two front rows of a room. Opinion leaders--such as governmental and civic officials, writers, reporters, and educators--attended meetings infrequently. Mental Hygiene, official publication of the National Committee for Mental Hygiene, pioneered in 1917 when it was founded, for few other professional or public journals then printed mental hygiene articles. From 1908 until the 1930's the chief sources of reading in the field were pamphlets produced by the National Committee. These pamphlets would now be regarded as poorly produced and unattractive.

By the late 1930's, when the second phase of mental health education in the national movement began, there was a growing interest among both laymen and professional groups in mental hygiene. Meetings became more crowded, and more and more professional and civic groups included at least one item related to mental hygiene more frequently in their agenda. In the 1940's the era of mass media usage for public education took more prominence. In this period also

¹Ibid., p. 94.

the exposes of conditions in mental hospitals coincided with growing concern about mental illness related to Selective Service rejection rates and military psychiatric casualties. Articles in Life and the Reader's Digest, as well as series of stories in prominent metropolitan newspapers, characterized the early post-war period. The first hourlong nation-wide radio program occurred in 1949, and one of the more outstanding ninety-minute TV documentaries was produced in 1956. Commercial films, as well as educational documentary films, became prominent in the field of mental health beginning in the late 1940's. Plays for small casts were developed for use by amateur theatrical groups and local mental health society chapters during the same period. My Name Is Legion, which dramatized Clifford Beers' autobiography, was produced with a Broadway cast in 1952 and later went on tour in both 1952 and 1953 in sixty cities in twenty-one states through the sponsorship of state and local mental health groups. The needs for organized approaches to media led to the establishment of the National Mental Health Film Board and the Mental Health Materials Center in the 1950's. The establishment of National Mental Health Week beginning in 1950, while having educational aspects in its use of mass media, also began to move the national mental health movement in a major way into the related areas of fund-raising and public relations. From a small group meeting in Clifford Beers' living room in 1908, the national

mental health movement has assumed some proportions of a bandwagon mass involvement of thousands of volunteers and growing full-time professional leadership at the local level.

History of Family Life and Parent Education 1

Mental health education is closely related to the fields of family life education and parent education. Brim² has made useful distinctions between mental health education as compared to the two other fields. Family life education is directed toward shaping the roles of child, husband-and-wife, parent-and-child, and siblings. Family life education includes youth as well as adults, especially with reference to sibling, child-parent, and pre-marital foci. Parent education more typically does not include pre-marital objectives, since it is directed to individuals who are already parents. Parent education, then, may be regarded as being focussed on one role, parenthood, among the multiple roles emphasized in family life education. In this sense, parent education becomes a specialization within the broader

The sources for this section are: Orville Brim,

Education for Child Rearing (New York: Russell Sage, 1959),

362 pp.; Muriel Brown, "Organizational Programs to Strengthen
the Family," in Handbook of Marriage and the Family, ed.
by Harold T. Christenson (Chicago: Rand McNally, 1964),
pp. 823-880; Richard K. Kerckhoff, "Family Life Education
in America," in Handbook of Marriage and the Family, op.
cit., pp. 881-911; Ridenour, op. cit., pp. 97-99; Luther
Woodward, "Family Life Education," in Social Work Yearbook,
1954, ed. by Russell H. Kurtz (New York: American Association of Social Workers, 1954), pp. 197-202.

²Brim, <u>op. cit</u>., pp. 23-27.

field of family life education.

Parent education may overlap with mental health education in its objectives of improving the mental health of both the parent and, indirectly, the child. Parent education, however, can include objectives which are less directly related to mental health, such as citizenship training, home management, or safety education. As distinguished from family life and parent education, mental health education has the common end, mental health. Like family life education, but unlike parent education, mental health education can also be used with a variety of groups, both adult and youth.

Mental health education is not confined to individuals functioning in a limited role, such as parents. Rather, it can focus on any of the family roles, as well as major vocational roles, such as teachers, police, clergy, nurses, businessmen, doctors, and social workers. While these distinctions between the three fields are valid, in practice there is marked overlap between the various approaches.

The history of family life education (which will now be regarded as the generic form for all three types) dates back to 1888, when a parent education forerunner of the Child Study Association of America was formed in New York City. Similarly, the forerunner of the National Congress of Parents and Teachers began in 1897. With antecedents in the nineteenth century, the American Home Economics

Association was formed in 1908. The influence of home economics particularly has been felt through the Extension Service of the Department of Agriculture and through the training of various types of family-oriented specialists in land-grant colleges.

Within home economics, child development as a specialty became recognized beginning in the 1920's, encouraged by a national Child Research Center being funded through a Rockefeller Memorial grant in 1928. The post World War I period also brought the sociologists' interest to the family life field. Major contributions were historical and sociological studies of the family as an institution, founding and leading the National Council on Family Relations, and establishing a professional Journal of Marriage and the Family. Acute concern with sex education arose in the World War I era, and the American Social Health Association has had a continuing, strong family life education program as an outgrowth of its traditional functions regarding venereal disease and prostitution.

The parent cooperative nursery movement, beginning in 1916, has been a growing organization, culminating in a national council formed in 1960. Among a variety of peripheral programs to strengthen families, the federal government also shows direct interest in family life education through parent education publications and professional leadership in the Children's Bureau. The federal Office of

Education, along with state departments of education, has provided consultation for school-based family life education efforts. Various types of voluntary social agencies, such as YMCA's, YWCA's, and family service agencies, have been actively involved in family life education since World War II. Similarly, voluntary visiting nurse associations and public health nurses have taken an interest in the education of expectant parents. Programs of a more specific mental health education focus have been fostered primarily through local societies for mental health, mental health clinics, health departments or agencies, universities, and foundations. 1

Sociological Aspects of Mental Health Education

For a more comprehensive perspective on mental health education, which goes beyond historical and organizational considerations, a variety of sociological considerations are significant. These factors include: problems of social change and disorganization; social class relationships;

American values and mental health; role theory, mental health, and mental illness; institutional aspects of family life related to mental health; the mental health movement as a secular religion; problems of definition of mental health. This survey, necessarily brief, will not be

Ruth Kotinsky and Helen L. Witmer, <u>Community Programs for Mental Health</u> (Cambridge, Massachusetts: Harvard University Press, 1955), pp. 46-157.

comprehensive or systematic, but simply suggest some of the sociological complexities which are relevant to any consideration of mental health education.

Social Change and Disorganization.—The popular belief that social change tends to be causally related to mental illness is generally reflected in sociological literature. However, there is no rigorous research substantiating this belief, and Krapf suggests that social change is not necessarily negative for mental health. He points out that social change can bring benefits, and points to the need for a more refined knowledge of social change and mental illness, with finer differentials in linking types of change with types of illness. Still another author, Seeley, describes the elusiveness of social change as a concept, stressing the fact that whether social change is labelled as disorganization, reorganization, or growth is the subjective judgment of the evaluator.

lJerome K. Myers, "The Study of Mental Illness," in Applied Sociology, ed. by Alvin W. Gouldner and S. M. Miller (New York: Free Press, 1965), pp. 329-338; Herbert Blumer, "Social Disorganization and Individual Disorganization," in Analyzing Social Problems, ed. by John Eric Nordskog, Edward C. McDonagh, and Melvin J. Vincent (New York: Dryden Press, 1950), pp. 217-221.

²E. E. Krapf, "Social Change in the Genesis of Mental Disorder and Health," in <u>Population and Mental Health</u>, ed. by Henry P. David (New York: Springer, 1964), pp. 97-103.

³John R. Seeley, "Social Values, the Mental Health Movement, and Mental Health," in Rose, <u>op. cit.</u>, pp. 599-612.

Role Concepts and Mental Health.--Myers and Warren 2 tie social disorganization to problems in role behavior. Significant aspects of their discussion include the problems of conflicting roles, where the behaviors of ego and alter are not compatible; the problems of role clusters which incorporate conflicting expectations, such as the business man whose role expectations at work conflict with those of his paternal role at home; the problem of continuity, or lack of it, in role sequences, such as moving through courtship to marriage; the problems of lack of clarity or definition in role expectations, as well as the problems of excessive rigidity in role expectations; the problems of the degree to which the opportunities for achieved roles are available within a social structure emphasizing achieved roles (competition in our society), and the degree to which role expectations place excessive demands upon biological capacities or personality tendencies. Role concepts are important to the mental health educator in the sense that not only is the educator himself fulfilling role expectancies, but he is attempting to influence role behaviors of individuals and groups. In one way or another, his educational function leads to supporting some role expectancies,

¹Myers, <u>op. cit.</u>, pp. 329-338.

²Roland W. Warren, "Social Disorganization and the Interrelationship of Cultural Roles," in <u>Social Perspectives</u> on Behavior, ed. by Herman D. Stein and Richard Cloward (Glencoe, Illinois: Free Press, 1958), pp. 191-200.

modifying still others, or relieving the effects of role conflicts and incongruency as manifested by anxiety behaviors.

Value Systems—American and Class.—Williams has discussed major value orientations of American society.

Without undertaking a thoroughgoing analysis, the possibil—
ity of viewing mental health education through the prism of these values can be raised. For example, through content analysis of films, speeches, and discussion group comments, a determination could be made regarding the degree to which mental health education efforts are neutral, supportive, or oppositional in the light of dominant values. Concrete illustrations of this approach would be the degree to which mental health education content reflects such values as faith in science and rationality, faith in education, and needs for efficiency and practicality.

Since middle-class values tend to be dominant generally and since the professional practitioners of mental health education are more likely to be members of the middle class, a similar content analysis might be made regarding the degree to which mental health education reflects middle-class orientations. No value judgment need be made at this point as to whether mental health education should support middle-class values. On the basis of limited content analysis and evaluation of personnel in the mental health movement

Robin Williams, American Society: A Sociological Interpretation (New York: Knopf, 1958), pp. 388-442.

as a whole (not just educators), Davis strongly states the case that the movement is middle-class-bound in its value orientation.

The relationship of value systems for social organization and control—as well as disorganization and, potentially, mental illness or mental health—needs to be recognized. To the extent that either dominant American values or middle—class values serve as binding agents for the cohesiveness of the social structure, support of such values can be interpreted as promoting socially necessary norms. Still another interpretation is that to the extent mental health education relieves some of the more severe role conflict problems—through re—definition, modification of role expectancies, or relief of feelings resulting from role conflict—such education is a necessary safety valve, an agent for modifying the effects of social change, or even an agent for promoting new values and role expectancies.

Sociological Studies of the Family.—The implications of the family institution for mental health education are both detailed and exhaustive. Parsons' analysis of age and sex as dimensions for role behavior in family life

¹Kingsley Davis, "Mental Hygiene and the Class Structure," in Rose, op. cit., pp. 578-598.

²Talcott Parsons, "Age and Sex in the Social Structure of the United States," in <u>Social Perspectives on Behavior</u>, ed. by Herman D. Stein and Richard Cloward (Glencoe, Illinois: Free Press, 1958), pp. 191-200.

is an example which is replete with provocative concepts for the mental health educator. In the microcosm of the family unit, the effects of social change are readily seen. Similarly, the family as the agent of socialization in the social structure is clear. In addition to class-oriented studies of families and socialization, another approach has been studies of family integration related to entrepreneurial and bureaucratic relationships in the social structure. Studies of mobility, a special aspect of class in the social structure, are still another phase related to family life and mental health. These examples, of course, are simply suggestive of numerous applications of the sociological study of the family which are pertinent to the concerns of the mental health educator.

Definition of Mental Health.—The problem of defining mental health has been dealt with rather comprehensively by Jahoda. She perceptively points out the difficulty of defining mental health as the absence of mental disease. The necessity of defining mental health in such a way that it does not exclude all individuals except the "average"

Daniel R. Miller and Guy E. Swanson, The Changing American Parent (New York: Wiley, 1958), 302 pp.

²Kingsley Davis, op. cit., pp. 581-583.

Marie Jahoda, "Toward a Social Psychology of Mental Health," in Mental Health and Mental Disorder, ed. by Arnold Rose (New York: Norton, 1955), pp. 556-577.

person is suggested. Similarly, she warns against defining mental health merely as "adjustment," which may be merely passive and not necessarily positive for mental health.

Jahoda finally settles on three main criteria, which still leave unresolved some operational applications: (1) Correct perception of reality, including oneself; (2) Active mastery of the environment; (3) Unity of personality, manifested by self-consistency and self-realization according to consistent inner regulation with relative freedom from internal conflicts.

The definition of this global concept, mental health, is extremely difficult. Still other writers have suggested such terms as "high level wellness" and "optimum mental health." The cultural relativity of definitions of mental

¹Margaret A. Kaufman, "High Level Wellness, A Pertinent Concept for the Health Professions," Mental Hygiene, 47 (January, 1963), pp. 57-62. This article attempts to use "wellness" in relationship to the potentiality of the individual and the environment in which he is functioning. Wellness, in the sense of the handicapped person who has surmounted his handicap, can exist in the absence of health as commonly defined. Health can be stagnant without the wellness which suggests maximum realization of individual potentials within the context of personal handicaps and environmental limitations.

Mental Health in International Perspective: A
Review Made in 1961 by An International and Interprofessional Study Group (London: World Federation of Mental Health, 1961), pp. 25-44. "Optimum mental health" is suggested to counteract the notion that if there is positive mental health there must also be negative mental health. Optimum mental health, somewhat like high level wellness, includes the idea that health is not an absolute state, but is relative to the particular circumstances.

health and mental illness is widely recognized. Such relativity is not confined to different cultures across national borders, but also includes class-bound differences which affect diagnoses of mental illness. One example of a cross-cultural approach to mental health was edited by Soddy. This report raises many questions regarding mental health and cultural value systems with respect to ideas of individual responsibility, identity, flexibility, ethical concepts, attitudes toward suffering and death, concepts of guilt, and attitudes toward mental illness.

The Mental Health Movement as a Secular Religion.—
Seeley² suggests that the mental health movement, like other movements, competes with the church, whose dominance in the middle ages has declined. Social change causes individual distress, resulting in introspection. Many new physical and social inventions need to be interpreted and mediated. Psychological stress related to social change needs to be relieved. The mental health movement encourages introspection and thrives upon it, acts as a mediator between the behavioral sciences and laymen, and relieves stress in group processes. Seeley sees parallels with the church in that both movements have a universal appeal, bring professionals and laymen together in service of the laymen, have a

¹Kenneth Soddy (ed.), <u>Cross-Cultural Studies in Men-</u>tal <u>Health</u> (Chicago: Quadrangle Books, 1962).

²John **R. Seeley, op. cit.,** pp. 599-612.

transcendence of faith and belief, differentiate followers from skeptics or unbelievers, and promote certain values relative to morals, such as marriage and divorce. Each has a sense of mission and zeal, often with certain orthodox beliefs. Significant differences from the church are along secular lines: worldliness rather than other-worldly and supernatural, man-centered rather than God-centered, relatively less dogmatic or even anti-dogmatic rather than dogmatic, and a liberating objective rather than a restraining, controlling function.

Conclusion

The idiosyncratic influences of the unique individual upon the Michigan mental health education program have been suggested in broad outline through the biographical study of Esther Middlewood. Important as this contribution has been, her work has not been accomplished in a vacuum. The social backgrounds of mental health education have been highlighted in this broad survey. The purpose of this "Appendix" was to give more explicit recognition to some of the major environmental factors bearing upon the Michigan program.

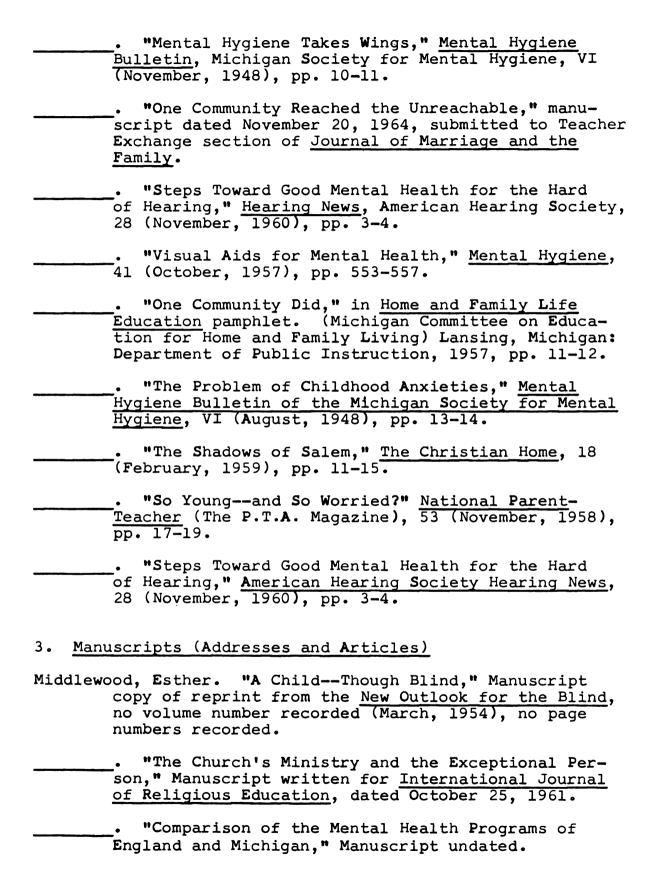
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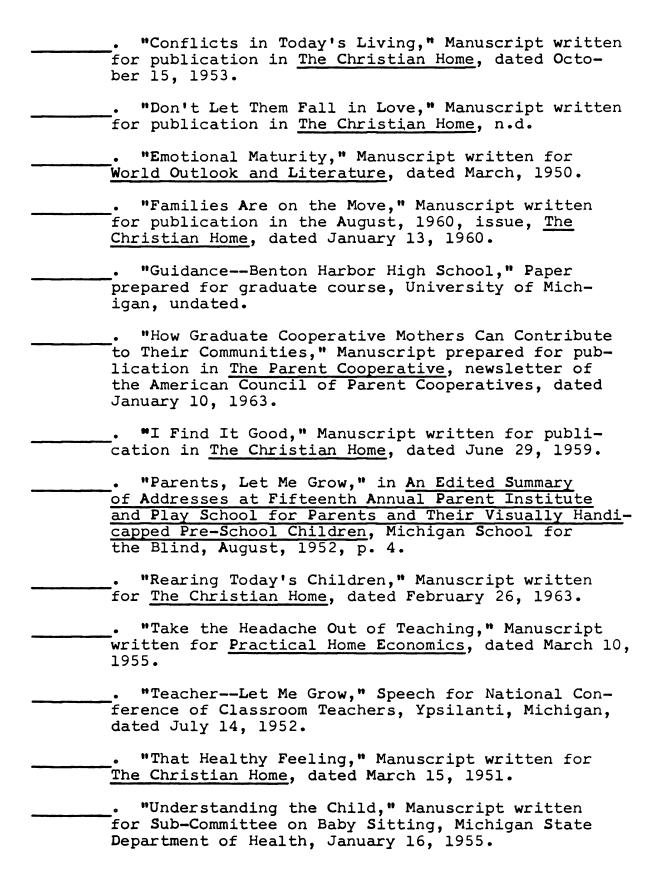
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4. Tape Recordings

Middlewood, Esther. Series of Three Tape Recordings Made in Response to Series of Questions from John W. Hanks, August, 1965.

5. <u>Interviews</u>

- Gwen Andrew, Ph.D., Chief, Operations Research and Program Development, Michigan State Department of Mental Health, Lansing, Michigan, September 9, 1965.
- Harmon Boice, high school and college classmate of Miss Middlewood, and long-time friend, Ann Arbor, Michigan, August 23, 1965.
- Mrs. Marilyn Britton, neighbor of Miss Middlewood, Haslett, Michigan, August 23, 1965.
- Ralph Daniel, Executive Director, Michigan State Board of Alcoholism, and former Mental Health Consultant, Michigan State Department of Mental Health, Lansing, Michigan, July 12, 1965.
- Mrs. Julia Doxstader, secretary to Miss Middlewood for fifteen years, Lansing, Michigan, August 24, 1965.
- Charles Erickson, Miss Middlewood's minister, Haslett, Michigan, August 24, 1965.
- Mrs. Charles Erickson, wife of Miss Middlewood's minister, Haslett, Michigan, August 26, 1965.

- Mrs. Dale Granger, Director, Family Life Education, Lansing Public Schools, Lansing, Michigan, September 8, 1965.
- Bruce Gribbell, cousin of Miss Middlewood, Grand Rapids, Michigan, August 25, 1965.
- Mrs. Todd Lunsford, friend of Miss Middlewood, Haslett, Michigan, September 7, 1965.
- Joseph McCall, Director of Public Information, Michigan State Department of Mental Health, Lansing, Michigan, September 10, 1965.
- Esther L. Middlewood, Chief, Mental Health Education Section, Michigan Department of Mental Health, eighteen conferences, Haslett, Michigan, July 21, 1965, through October 2, 1965.
- Leonard Price, M.D., Mrs. Leonard Price, and daughter, Miss Gail Price, neighbors of Miss Middlewood, Haslett, Michigan, July 27, 1965.
- Mr. and Mrs. Clarence Spawr, and daughter, Lucy, neighbors, Haslett, Michigan, July 26, 1965.
- Mrs. Dan Veazy, former high school teacher of Miss Middle-wood, Pontiac, Michigan, August 23, 1965.
- Charles Wagg, Deputy Director, Michigan State Department of Mental Health, and either Director or Acting Director almost continuously from 1947 to 1963, Lansing, Michigan, August 30, 1965.
- Wallace Watt, Mental Health Consultant, Michigan State Department of Mental Health, 1954-1955, Lansing, Michigan, August 26, 1965, and September 22, 1965.
- Mrs. Rex Todd Withers, Chief, Homemaking and Family Life Education Service, Department of Public Instruction, Lansing, Michigan, August 30, 1965.

6. <u>Letters</u>

- Mrs. Harold Banta, 'Teen Program Director, Young Women's Christian Association, Muskegon, Michigan, October 7, 1965.
- Muriel W. Brown, Ph.D., Family Life Education Specialist (retired), U.S. Department of Health, Education, and Welfare, Washington, D.C., August 11, 1965.

- Catherine S. Chilman, Ph.D., Social Science Analyst, Division of Research, Welfare Administration, U.S. Department of Health, Education, and Welfare, Washington, D.C., August 30, 1965.
- Miss Marjorie Dickieson, long-time personal friend of Miss Middlewood, Detroit, Michigan, August 30, 1965.
- Evelyn Millis Duvall, Ph.D., author of books on child development and family life education, Chicago, Illinois, August 9, 1965.
- J. Wilbert Edgerton, Ph.D., Regional Program Director, Mental Health Service, Public Health Service, U.S. Department of Health, Education, and Welfare, Chicago, Illinois, September 13, 1965.
- Robert H. Felix, M.D., Dean, Saint Louis University School of Medicine, Saint Louis, Missouri, and former Director, National Institute of Mental Health, Washington, D.C., September 7, 1965.
- Mrs. Elizabeth S. Force, Director of Family Life Education, American Social Health Association, New York, New York, August 3, 1965.
- Wallace C. Fulton, M.P.H., Associate Director, Office of Community Services and Health Education, The Equitable Life Assurance Society of the United States, New York, New York, September 16, 1965.
- Irving Jacoby, President, Affiliated Film Producers, New York, New York, August 26, 1965.
- Mrs. Todd Lunsford, Jr., personal friend of Miss Middlewood, North Muskegon, Michigan, August 24, 1965.
- David R. Mace, Ph.D., Executive Director, American Association of Marriage Counselors, Madison, New Jersey, September 14, 1965.
- Francis Martin, Ph.D., Professor of Psychology, Central Michigan University, Mount Pleasant, Michigan, September 30, 1965.
- Mrs. Angus M. Miller, A.C.S.W., social worker and regional volunteer leader in the Parent Education Associates groups, Waterford, Michigan, September 1, 1965.
- Mrs. Helen Parks, Senior Consultant, Nursery School and Day Centers, Children's Services, Michigan State Department of Social Welfare, Detroit, Michigan, September 13, 1965.

- Nina Ridenour, Ph.D., Secretary, Ittleson Family Foundation, and former Educational Director, National Association for Mental Health, New York, New York, September 16, 1965.
- Mabel E. Rugen, Professor of Health Education, School of Public Health, University of Michigan, Ann Arbor, Michigan, September 15, 1965.
- Alex Sareyan, Executive Director, National Mental Health Materials Center, New York, New York, October 12, 1965.
- Mrs. Alma E. Stewart, Miss Middlewood's aunt, Detroit, Michigan, August 27, 1965.
- James Ten Brink, Superintendent, Muskegon Area Intermediate School District, Muskegon, Michigan, August 27, 1965.
- Mrs. G. Mennen (Nancy) Williams, social worker and wife of former Governor of Michigan, Grosse Pointe Farms, August 24, 1965.
- Mrs. Virginia Woods, high school classmate and long-time friend of Miss Middlewood, Miami, Florida, August 11, 1965.

7. Newspapers

"Mental Health Consultant Closes Educational Visit," news clipping dated November 23, 1947, from an unnamed Port Huron, Michigan, newspaper [Article thought to be from Port Huron Times Herald and found in newspaper scrapbook, Michigan Department of Mental Health].

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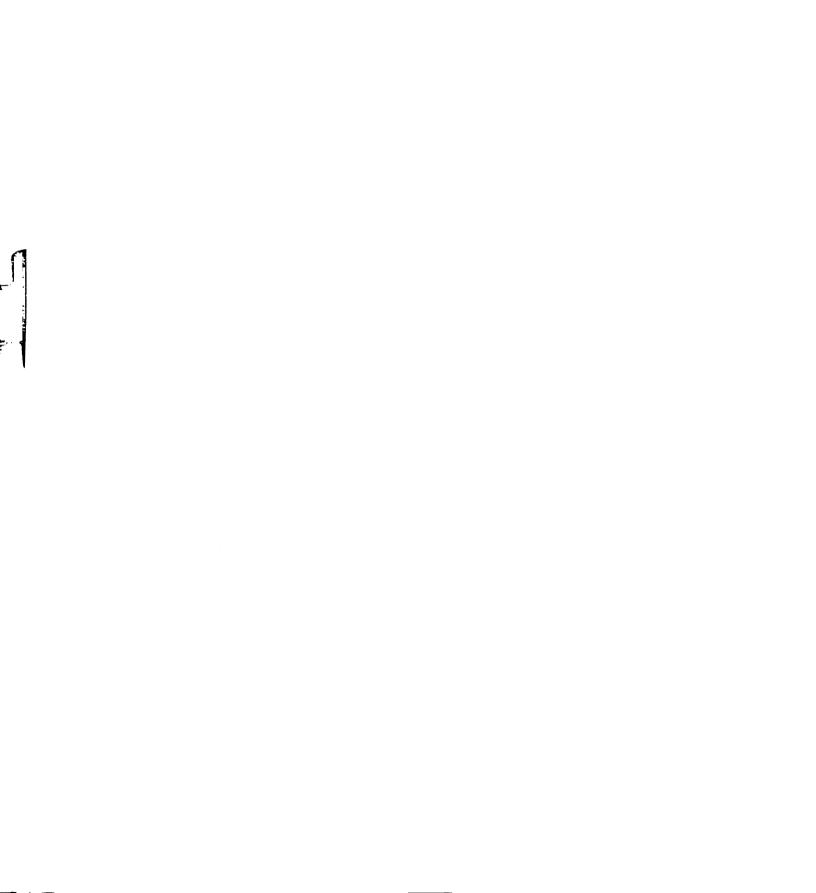
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