The business of outlining the problem of mental health in Montgomery County has a strange and eerie quality about it. The trouble is, you can't see it with the naked eye.

Take a look at this pleasantly landscaped county -- with the highest median income in the Continental United States: where the $40,000 - $50,000 house has become commonplace; where the Cadillac and Continental are catching up to the Chevy. The school children, ranked in the upper percentiles in the nation, are scrubbed and well-dressed. The lawns are manicured and industrial buildings are clean and flower trimmed.

Why all the fuss about mental health, where is the fire?

General Custer, the story goes, peered over the wild flowers at the Little Big Horn, and insisted that there were no Sioux in sight. The few wisps of smoke on the June horizon could have been a mirage.
The wisps of smoke in our affluent county are equally elusive, but they are there smouldering in the dry and dull pages of the police report, the offices of our clergy, in the judges' chambers, in the classrooms, and most of all, in the cramped and outmoded rooms of the handful of facilities which care for the mentally ill as best they can.

First, let us consider the children. Your recent Montgomery Mental Health Survey shows that each of our shining classrooms has one to two children with marked emotional problems. Their symptoms range from learning difficulties to delinquency. Some vandalize school property, others range farther afield into deluxe homes when the owners are away, and into the stores -- where typewriters, TV's and other portable items are chained down -- to steal and to damage.

According to the latest county police report, more than half the serious crime in the county is conducted by its children. Their thefts alone amounted to more than half a million dollars last year.

Even more tragic, the number of attempted suicides by children rose more than 50 percent -- from 22 in 1963 to 37 in 1964. Many of these could have been checked if anyone had noticed "the youths' emotional distress", the report reads.

The School Board admits that virtually all the emotionally handicapped children remain in regular classes for their education -- 5,600 of them intermixed with normal children. There are only two special classes for these handicapped children -- 18 of them -- in a pilot project at one of the junior high schools.

Educators and doctors (and parents) alike decry the fact that there is no place in the county where children may go and receive psychiatric treatment. Hundreds just remain, untreated, in the community. Others are sent to Springfield State Hospital where they are mixed with adult psychotics and alcoholics.
The county operates a Child Mental Health Center in Rockville, which is not accredited by the American Association of Psychiatric Clinics for Children. It provides consultation with other county agencies, and gives brief interviews with the families of those children lucky enough to get an appointment. But it does not pretend to offer a comprehensive program of treatment for disturbed children. The main psychiatric facility in the county, the Community Mental Health Center in Silver Spring, financed by a federal grant, does not admit children at all.

As for the adults, the Silver Spring Center, and the privately operated Community Psychiatric Clinic in Bethesda make up the main services. Their space and their staffs limit them to handling only a fraction of those who need help. The Center tries to channel many patients to private psychiatrists.

If a person breaks down and needs temporary hospitalization, there are only 31 beds available -- in the Seventh Day Adventist Washington Sanitarium -- in the county. All too often, such a person will find himself on his way to the state hospital, when some temporary care could have done the job. Pilot studies have shown that about half the people thus sent to mental hospitals did not really need such treatment.

One of the main county hospitals has resisted setting aside beds for mental patients. Up and down Montgomery County's highways, nice new signs direct the way to Suburban Hospital. But psychiatric patients are not welcome. Although in the midst of a new building program, there are no plans for psychiatric beds. For reasons: the Hospital Administrator has said that the space is needed for parking; that psychiatric units of hospitals lose money; that the Hospital cannot attract psychiatrists to serve such a unit. There is no psychiatrist on duty at the hospital.
Woe to the Montgomery County citizen who needs emergency psychiatric care after 5 P.M. or on weekends. As the recent Survey notes, there is no such thing as after hours care.

The county does run a clinic for alcoholics, of which there are said to be 5,000 in the area. It consists of one three-hour session on Saturday morning during which two psychiatrists, an R.N. and a secretary see about 60 people a month. It has no psychologists, no social workers. "We are busy from 9 in the morning until well after closing time," one of the staff reports. "We have all the work we can handle, and if we advertised at all, we would be swamped... Once we put a small blurb in the County Medical Society journal announcing our hours, and we were so overcome with phone calls and with people arriving on the doorstep that our work came to a stand-still... I know for a fact we are not even beginning to handle the problem."

Quotes from some of the doctors and psychiatrists questioned in the recent Survey further document the story:

"Waiting lists are very long... Facilities for disturbed children are virtually non-existent".

"School facilities for these children are totally inadequate."

"Are services adequate? No! No! and No! again."

"The county has no facility to which I would care to refer a patient."

"The services are either substandard or non-existent."

"Public care is very unsatisfactory. Welfare workers are forced to refer the patients around in circles... All too many cannot afford long term care with private psychiatrists."

"It makes your heart ache."
Now we know that the suburban county, overrun by city folk who demand a high quality of services, has become a national problem. The Encyclopedia Americana (1961) notes that, "Even where a single county contains all or most of the metropolitan area, it cannot render the services required by the population pouring out of the urban center... County government in general is too far removed from effective control of public opinion... Many people have a tendency to write off county government as a bad job." Many county natives, resenting the invasion from the cities, take the attitude of the Mad Duchess in Alice in Wonderland -- "If everybody minded their own business, the world would go round a deal faster than it does."

But a number of counties have not been satisfied to let things slide, the Americana and the Mad Duchess notwithstanding. In Montgomery County, only .60¢ is spent per person a year for mental health services. But Nassau County in New York spends $2; Westchester County, New York and San Mateo County in California, counties comparable to Montgomery in size and growth rate, spend $3. Two Minnesota counties spend $8 to $10 a year.

The interesting point is that wherever good mental health programs have been launched, it was done by a determined and single-minded public. Dr. William Menninger likes to tell how the citizens of his home state of Kansas banded together and demanded a good mental health program. They pushed through a 60% increase in the state mental health budget the first year they tried, and a 118% increase the second year.

In San Mateo, California, a suburb of San Francisco, the people set to work 19 years ago to forge a good program. First, they did a study to expose the facts, much like you people are doing now; next, they established a good child guidance clinic. They fought
for a bond issue to provide other services. The program is directed by a board of
supervisors who are elected at large in the county and who are responsive to public
opinion.

San Mateo now spends five times more than Montgomery County for mental health,
reaching at least one in fifty residents a year.

San Mateo now has: an active, well-staffed, well-equipped child guidance clinic,
a day hospital for adults, an open ward in a general hospital for short-term intensive
treatment, beds for alcoholics to supplement the alcoholic clinic, a 24-hour emergency
service, and a rehabilitation service.

It has a very successful plan in which psychiatrists screen seriously ill people
in their own homes before committing them to a state hospital. More than half the people
thus seen are spared the upheaval of entering a mental hospital. The county is able to
offer short-term help near home. This saved the county thousands of dollars in hospital
care, and the patients and their families untold heartache.

The point is, something can be done if people care enough to push it through. They
can see the smoke and the fires, too, if they are willing to look a little more carefully
than Custer did.

I also want to remind you -- it is frequently forgotten in Annapolis -- that you
are citizens of the Free State of Maryland. Can you here in Maryland afford minimal
mental health services for the thousands of children and adults who are failing to adjust
to the fierce pressures of modern urban and suburban society?

According to figures from the Department of Commerce, you have not yet filed a
petition for bankruptcy. You are 11th in the nation in per capita income, and you rank
first in per capita income among the 16 states comprising the Southern Regional Education
Board.
Governor Tawes is continually dwelling on your bullish financial picture. In a recent message to the General Assembly of Maryland, he said:

"Maryland has never enjoyed an era of greater prosperity. In 1962, our gross product -- the sum of all goods and services -- for the first time in our history exceeded $10 billion... Maryland continues to outdistance the nation as a whole in the rate of its gross product, employment, personal income, population growth and in the many other facts which indicate a sound and dynamic economy."

In 1962, the last year for which I have figures, the good citizens of Maryland spent a record amount for the consumption of personal goods. In that year, for example, you spent $330 million on recreational activities, $180 million for alcoholic beverages, and $117 million for tobacco. The total for these three items alone far exceeded all expenditures for state government in that same year.

A detailed analysis of state government expenditures indicates that you do not give a high priority to the mental health of your citizens. According to the American Psychiatric Association, in 1962 you spent less than four percent of your general state funds for mental hospitals and other services. That year state governments, by way of comparison, devoted 28% of their revenues to highways.

In 1962, state and local expenditures for highways in Maryland exceeded $145 million. You really take care of those 22,000 miles of state and local roads, but you don't do nearly as well by 22,000 people -- 8,275 in your mental hospitals, 9,500 on old age assistance, and 5,300 in your correctional institutions. Put in very simple terms, the yearly expenditure per taxpayer for highways in Maryland in 1962 was $40, as against a little more than $5 for mental hospitals.
Your most serious weakness is the inadequate amount of money you spend for community mental health services; this is highlighted by the fact that you are only 36th in the nation in per capita expenditures for these services. This is in no way the fault of your excellent Mental Health Commissioner, Dr. Isadore Tuerk. As I have pointed out over the past few years in talks in various parts of this state, and particularly at the 5th Annual Legislative Dinner of the Maryland Association for Mental Health in Annapolis in 1963, it is shocking that Dr. Tuerk's imaginative proposals for the construction of a number of community mental health centers and residential treatment centers for children are continually neglected, or whittled down to ineffectiveness, by the executive branch in Annapolis.

You pay a very heavy price for this failure to treat mental illness in its earliest and most curable stages. Approximately one thousand patients currently in your state institutions have been hospitalized for 30 years or more, at a cost of millions and millions of dollars to all taxpayers in Maryland. Furthermore, because you do not provide intensive treatment facilities in Montgomery County and elsewhere in the state, you have a very high rate of readmission to state hospitals. In the last decade alone, readmissions to Maryland hospitals have risen more than 25%; in other states, where intensive community aftercare facilities have been built, readmission rates have dropped dramatically.

We cannot create the new era of community mental health services without additional tax revenues. In the face of a rapidly expanding population, highlighted by an enormous increase in children of school age and in elderly people who have retired from active employment, it is absurd to talk in terms of reducing the revenues available to state and county governments. I know that you have been belabored with the hoary argument that
public taxation has reached a confiscatory level, and that you cannot handle any further
taxes. I submit to you, and if I had the time I could document it as fully as I did in
Annapolis in 1963, that state and local taxes today take roughly the same percentage of
your personal income as they did fifteen years ago.

In America today, our major personal expenditures are increasingly going for private
wants. As the economist John Galbraith has noted, there must be a redress of the balance
between rampaging private consumption and urgent public needs.

In underlining his point that in our society all private wants are inherently
superior to public wants -- that an individual doesn't have to prove the need for a new
automobile, but he is always on the defensive when pleading for a new school or better
mental health services for his community -- Galbraith notes:

"The scientist or engineer or advertising man who devotes himself to developing
a new carburetor, cleanser, or depilatory for which the public recognizes no
need and will feel none until an advertising campaign arouses it, is one of the
valued members of our society. A politician or a public servant who dreams up
a new public service is a wastrel. Few public offenses are more reprehensible."

I am aware of the tax situation here in Montgomery County. I know that three years
ago, the Democratic County Council was ushered out of office because it increased the tax
rate on property by 37 cents in order to provide more schools for an exploding child
population. I understand, according to a recent article in The Washington Post, that the
members of the other party who came into power on a platform pledging reduction of tax
rates have been boosting the realty tax to a point where it is awfully close to the 1962
rate which led to the political extermination of their opposite numbers.

I am happy to note that a Commission on State and County Finance has been working
on this problem of lack of state and county revenues for the past year. It is my under-
standing that its recommendations would increase revenue by $20 million annually to the state and more than $50 million to the counties. It is up to you as citizens to back these proposals -- to educate your fellow citizens as to the need for these revenues if better schools, more adequate mental health facilities and other social services are to come into being.

I really can't fathom those who argue that there must be a halt to taxes in a growing and prosperous economy with a record Gross National Product which is the highest of any country in the world. To follow their arguments to a logical conclusion, you could not build any additional schools here in Montgomery County, although the number of children has doubled in the last 15 years. How, then, would we provide a general education for all of these children? I suggest that these Taxpayer League members and their colleagues be given the job of building and operating these schools under private enterprise and let us see how well they will do it. Will they make a profit at it? How much will they charge each family for a year's tuition?

We have the financial resources to educate our children, and to see to it that those who need psychological help receive it at the moment it is needed.

We live in an affluent society in which the U. S. appliance industry so successfully stocked the American home with its basic wares a few years back that it thought it faced a virtually saturated market. Not so. Our ingenious manufacturers have opened fantastic new markets for electric tooth brushes, shoe polishers, slicing knives, drink mixers, cradle rockers, foot warmers, ice crushers, plate warmers, electric sweater dryers, and so on ad infinitum. The housewife can also now get small and highly necessary appliances to buff floors, mash potatoes, peel carrots and warm her towels.
In this kind of economy -- where the gold toothpick is now a family necessity -- it is nonsense to talk of our inability to provide adequate mental health services.

I have had a chance to review the Maryland State Plan under the new federal legislation which emphasizes a federal, state and local partnership in support of these community centers. I find the initial proposals quite modest, particularly those relating to Montgomery County. Several psychiatric units in general hospitals are proposed, but far from enough to meet the present demonstrable need. The plan is also very vague on residential units for children in this county, and this is a source of anxiety to me.

To make these plans a reality and to expand their scope, there must be the truly aroused action of an enlightened citizenry here in Montgomery County.

It can't happen without citizen support.

It will not be done by those in power in Annapolis or in Rockville, unless you -- the citizens -- make it crystal clear that you are willing to pay for these new services designed to create a mentally healthier Montgomery County.