

## PSYCHIATRIC SOCIAL TRAINING

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Mrs. Solomon 1912, B. S. Simmons 1914, has, since September 1916, been a psychiatric social worker at the Boston Psychopathic Hospital, chiefly in the out-patient department. She is therefore particularly well fitted by experience and by association with Miss Jarrett to write about the summer session.

The war is giving the colleges a new opportunity. Not only are the majority of men at the officers' training camps college-trained, but the universities themselves are being used as training camps. The scientific schools are teaching the basic principles of aviation and artillery, and physicians and engineers are being turned out direct to the army. The women's colleges are now entering the field. Vassar has established a Plattsburg for nurses, Mt. Holyoke will train women health officers, Bryn Mawr, employment managers, Wellesley, leaders for farming units. Smith College, like Vassar, has chosen to contribute to a problem at once military and medical, by establishing a Training School of Psychiatric Social Work.

Now social work aims to adjust the individual to his environment, but while social work as a whole is primarily characterized by an interest in economic adjustment, psychiatric social work is based on an additional interest in the individual as a personality. Its scientific aim is "to contribute to the knowledge of social psychiatry, which, through the study of the abnormal, seeks knowledge of normal character."

In the present war emergency social workers, besides carrying on their regular civilian activities, are being called upon to aid in the rehabilitation of returned soldiers. These may be divided into two classes: first, those suffering from no apparent physical or mental injury; and second, those rendered physically or mentally incapable of returning to their former occupations or modes of life. Those physically disqualified may have lost a limb or be in too weak a state for hard manual labor. Before turning these soldiers back into the community, the Government's big reconstruction plans involve teaching them a new occupation, so as to make them, if possible, self-supporting. This is called reëducation, and is the function of the vocation teacher.

But, in addition to the physically maimed, there is a group of mental cases, a small number of whom are insane, a large majority of whom are suffering from various forms of what is known as shell-shock—a change of mental attitude towards life, work, and play, resulting from the terrible stress of war conditions. Those men are nervously undermined, and it is in aiding in their readjustment that the psychiatric social worker, trained in the psychiatric point of view, is, under present conditions, almost essential.

Not only the soldiers who are mentally incapacitated need mental reconstruction. Many patients who have been disabled physically become despondent and lose all energy and ambition. It is, moreover, found that many soldiers who have lived the army life for one or two years are unable, on their discharge, to adjust themselves unaided to the ways of civil life. They are abnormally high-strung and unstable; they cannot stick to their old jobs; they are often blamed by uninformed civilians for idling and loafing. It is here that psychiatric social workers, having an insight into their condition, can aid in reestablishing them on a normal footing. Such men are slightly "shell-shocked"; enough so to need a social specialist's help, though not that of a medical specialist—a psychiatrist.

One must avoid confusing the functions of the psychiatric social worker not only with those of the occupational therapist or the vocation teacher, but also with those of the psychologist. Though both deal with mental cases, the psychologist approaches the patient from the point of view of his mental rating and his variations from the norm of intelligence, while the psychiatric social worker aims to adjust the individual to an environment better fitted to his temperament, and to develop his personality so that he may make more satisfactory contacts with the world.

The question arises as to what women who have taken the Smith College training course will actually do in the work of mental reconstruction. Their first function will be to collect social data about patients. This means that a worker employed in a psychiatric hospital will aim to secure a complete social history from the soldier or his friends and relatives at home, thus aiding the physician in his diagnosis.

A second function is that of assisting the physician in mental therapy. Ideally this is the function of the psychiatrist, but in this emergency, when specialists will be unable to give the necessary time to each individual soldier, it is thought by many psychiatrists and neurologists that the specially trained worker may well assist in observing mental reactions and reeducating the patient's point of view.

The third function of the psychiatric social worker is clear enough: namely, that of social adjustment. Home service sections of the Red Cross, reemployment bureaus, federal and civil, will undoubtedly need psychiatric social workers, to whom the worker in the reconstruction hospital can refer the soldier, when he leaves, for final adjustment to his environment.

Psychiatric social workers have been used for some years in various clinics, such as the Phipps Clinic in Baltimore, the Massachusetts General and Psychiatric hospitals in Boston, and the Neurological Institute in New York. But it has become self-evident to mental hygienists that the small supply of psychiatric social workers cannot meet the demand created by the war emergency. A reserve group must be trained.

The only systematic training hitherto for this specialized group has been an eight months' apprenticeship course offered by the Boston Psychopathic Hospital to a limited group of students. The director of the hospital, Dr. E. E. Southard, and its chief of social service, Miss Mary C. Jarrett, had seen the necessity of extending the work, and an appropriation had been secured from the Permanent Charity Fund of the Boston Safe Deposit Company to enable Miss Jarrett to spend part of her time in organizing war courses in psychiatric social service. The opportunity of joining forces with Smith College fitted ideally into this plan. Meanwhile the College authorities, who had been interested in the idea through the suggestions of various social workers, were approached by the National Committee for Mental Hygiene—which means that the highest scientific authority in matters psychiatric believes in the importance of training mental reconstruction aides.

An organization of all these forces—a sub-committee of the National Committee for Mental Hygiene, the Psychopathic Hospital, and the College—resulted in the establishment of the present training course, which is “designed as a war emergency course to prepare social workers to assist in the rehabilitation, individual and social, of soldiers suffering from nervous and mental diseases, including war-neuroses and the so-called shell-shock. Aside from the war contingency, these workers will be of permanent value in civilian neuro-psychiatric work as assistants in hospitals, courts, schools, out-patient departments, and social agencies.”

The length of the entire course is eight months. The six months' field work will be given under the auspices of trained workers at various clinics where there are opportunities for social work with psychiatric cases. A group of eminent psychiatrists will deliver lectures supplementing the work, and clinics will be held at the Northampton State Hospital. The academic work, to be given at Smith College from July 8 to August 31, consists of sociology, including methods of case work, psychology, and social psychiatry, with minor emphasis on hygiene, occupational therapy, writing of records, and military usage.

That these workers will be used is assured by the following memorandum, dated June third.

The Division of Neurology and Psychiatry of the Surgeon General's office will be glad to avail itself of the services of some of the graduates of the Training School of Psychiatric Social Work and will recommend to the Surgeon General of the Army certain numbers of them for employment in military service.