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MH-MR

# TEXAS CSP NEWSLETTER



Texas Community Support Program (CSP)  
Mental Health Services  
Community Services

Texas Department of Mental Health  
and Mental Retardation  
P.O. Box 12668, Austin, Texas 78711

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COMMUNITY SUPPORT SYSTEMS NEWSLETTER

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## INTRODUCTION

This newsletter is devoted entirely to the Fairweather Lodge Program. Fairweather programs have been an integral component in our attempts to develop community support programs for the chronically mentally ill in Texas. We have presented a discussion and overview of what the Lodge program is and then have talked about specific programs in Texas. This is followed by a section titled NEWS FROM THE GROUPS, written by Lodge members in Austin. We hope this newsletter will increase the knowledge of interest in The Lodge Society, and consequently we have given names and phone numbers of contact people.

## BACKGROUND OF THE LODGE PROGRAM

### Development of the In-Hospital Program

The Fairweather small group treatment program, devised by George W. Fairweather, a social psychologist, was initially begun at the Palo Alto, California Veterans Administration Hospital in the early 1960's. Chronic state hospital clients who were dependent, socially isolated, occupationally unstable, and who had been hospitalized for many years without notable benefit were organized into small groups. The program emphasized the group working together and solving problems related to a daily task. The influence and pressure of the group on its members, work orientation and reward for functioning, produced more overt improvement than did traditional psychologically oriented methods of treatment. Although delusional thinking and auditory hallucinations persisted, the clients were still able to function at work and in group situations. The use of groups counteracted their tendency to isolate themselves socially. The program significantly reduced the number of days clients spent in the hospital, especially the more chronic residents, and increased the number of days spent out of the hospital. Clients were found to become significantly more active and more appropriate socially under this program than under a traditional treatment program. The program is described in Social Psychology in Treating Mental Illness.

## GOALS OF THE LODGE TREATMENT METHOD

A Lodge is set up to provide an environment which can nurture and encourage the growth and development of the ex-mental patient in a community setting. In order to accomplish this, the Lodge begins with specific goals.

First, the Lodge Program is an attempt to form a reference group among the members. This reference group provides members with norms to follow and most importantly peer social support in a community setting. Research in mental hospitals and the community has shown that patients, who live within the framework of a peer reference group, can successfully solve their daily living problems.

Second, the Lodge program creates an environment of mutual responsibility among Lodge members for their own and their partners' welfare. An outcome of long-term hospitalization is the loss of a sense of responsibility to oneself and others. This loss mainly occurs because so many decisions are of necessity made by the hospital staff. While living in the group situation, a member soon gains a sense of responsibility for his/her own life and starts to take an interest in the welfare of his/her peers. Developing a sense of responsibility becomes one of the central aims of Lodge living.

Third, the Lodge program develops social situations which encourage autonomous decision making on the part of each member. Lodge members are encouraged to exercise their own discretion, to the extent that they are capable, in guiding their lives within the Lodge. Basically, this means offering members the opportunity to occupy meaningful decision-making roles within the Lodge. Psychiatric symptoms often have little to do with the individual member's capacity to assume his/her responsibility within the Lodge.

## BASIC OUTLINE OF THE "FAIRWEATHER LODGE" PROGRAM

The concept employs two basic components, a hospital based transitional living facility and community based "Lodges" or alternate living facilities. The transitional component is designed to prepare groups of chronic state hospital clients for community living by teaching them new work skills, living skills, communication skills and acceptable behavior patterns in a structured setting. The major focus is on development of self-management and self-support abilities; however, the key to the program's success lies in formation of family peer groupings. The theory behind the program is that if clients are to "succeed" in the community, they must have the same "equipment" to deal with life that the rest of society has. They must have living skills, a job, and "family" or friends which enable them to become contributing members of society and to weather the everyday stresses of life. Individual psychotherapy is downplayed. The focus is on skills, behavior, and formation of group processes.

The Lodge is a group of 6 to 15 discharged state hospital patients who live and work together in a community setting. The Lodge is a unique kind of social organization with features that make it different from any other kind of program for ex-state hospital patients, whether it be family care homes, boarding homes, or halfway houses. The Lodge members themselves, rather than the staff, are responsible for keeping the Lodge group in the community. There are three basic procedures which maintain this distinguishing feature: 1) no live-in staff; 2) only Lodge staff on call; and 3) only technical consultation permitted.

Unlike most other community facilities for ex-patients, staff persons are kept to a minimum. There are no staff who reside on the Lodge premises under any circumstances. Typically, one staff coordinator will have contact with the Lodge members during an eight-hour work day. Unlike other community programs, the Lodge members must go through the staff coordinator to contact the small group ward or state hospital. Therefore, it is necessary for a staff coordinator to be available on a 24-hour-call basis. The net effect is minimal contact with hospital staff which in turn leads to decreased dependence on the former hospital and staff.

Sometimes the Lodge is faced with a problem which cannot be solved by the Lodge members' individual or combined expertise and experience. The Lodge leadership or the staff coordinator then can call in a technical consultant. These consultations are usually needed for obtaining or refining work and bookkeeping skills. The consultant provides skill and knowledge which Lodge members need but do not have. This is accomplished through training sessions related to alleviating those needs. The consultants are not permitted to become involved in the everyday life of the Lodge members. Whenever a problem arises, the appropriate consultant is sought from whatever source seems useful to Lodge members. Once the problem is solved, the consultant is required to remove himself/herself from further contact with Lodge members.

Lodge members assume responsibility for the decisions which affect the day-to-day operation of the organization. The Lodge members, rather than the staff coordinator, control the various aspects of the Lodge operation. As soon as it is feasible, self-government is established at the Lodge. Regular meetings of Lodge members are held to handle daily problems, establish rules to regulate Lodge living, and plan future activities for the organization.

The work activities related to the Lodge business are performed by crews. Working in groups promotes the Lodge members' control over their work activities. The crews also provide social support for individual members who otherwise would be unable to work in a competitive employment situation.

The crews will be formed whether the Lodge members operate their own business or work as contract employees for other businesses. The size of the groups will be determined by the nature of the work. The Lodge members will have some control over their work hours, their work conditions, their work partners, and their work assignments. This social arrangement is very important for developing self-sufficiency among the Lodge members.

A division of labor at the Lodge residence itself will be encouraged. The Lodge members need to develop functional residential roles. Work roles such as cook, dishwasher, worker, bookkeeper, business or residential manager, and medication distributor are likely to develop as the need arises.

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## SMALL GROUP WARD PROGRAM

The Small Group Ward Program (hospital-based transitional living unit) is the first step towards preparing groups of chronic state hospital clients for community living by teaching them daily living skills, communication skills, work skills and acceptable behavior patterns in a structured setting.

On the Small Group Ward, group cohesion and problem solving skills are fostered through the use of a note system and step level system. Staff members communicate problems of group members or "students" through the use of the note system. If, for example, a group member does not attend a class or is not maintaining his personal hygiene, staff will write a note to the group about the problem and the group will be required to take appropriate action to solve the problem.

The step level system is an incentive structure designed to move the group through a series of behavioral expectations with associated privileges which will promote group cohesion by encouraging group responsibility. It is the group's responsibility to recommend step level promotions and demotions for each member.

The group work program which begins on the Small Group Ward is another essential component to building group cohesion. Ideally, group work contracts are secured in the community but may only be available on the hospital grounds due to the hospital's remoteness or lack of employment resources in the community. The group work program not only helps build group cohesion but also allows the group to begin earning and saving money for their eventual move into a community lodge.

It is estimated that it will take an in-hospital group approximately eight to twelve months to complete the Small Group Ward program and be ready to move to a lodge in the community.

The Small Group Ward phase of the Texas Fairweather Program has been implemented in five state hospitals since 1977. The five state hospitals are located in Austin, Rusk, San Antonio, Terrell, and Wichita Falls.

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## COMMUNITY PROGRAM

The Community Program is the final stage of the Texas Fairweather Program. It is often an exciting and sometimes frightening step for the group members as they leave the structure of the Small Group Ward and move into a Lodge in the community. The community Lodge, like the Small Group Ward, emphasizes group problem-solving and decision making. The group members continue to meet regularly to discuss issues relating to the Lodge and their group employment contracts.

A community Lodge in Texas typically consists of 6 to 15 members who are responsible for maintaining themselves in the community. This is accomplished through establishing a division of labor where all Lodge members are responsible for Lodge duties such as cook, bookkeeper, business manager, medication chairman, etc. The Lodge members also maintain themselves in the community through their group employment contracts; thus being responsible for paying their own rent, food, household utilities, transportation costs and personal needs.

The Lodge coordinator plays an intricate role in the Lodge members' transition from the Small Group Ward to the community Lodge. No staff reside on the Lodge premises; however, the Lodge coordinator is available as needed 24 hours a day. It is the Lodge coordinator's primary function to act as a consultant and facilitator for the Lodge members; assisting the members with such duties as locating appropriate housing, securing group employment contracts, and insuring transportation for the members to and from their work. However, it must be stressed that the Lodge members are responsible for maintaining themselves in the community and the Lodge coordinator is only to assist the group in reaching their goal of complete independence.

As of June 1, 1981, Texas had 14 community Lodges located in 6 cities with a total membership of 110. Those cities and their respective number of Lodges are: Austin (4), Dallas (3), San Antonio (3), Wichita Falls (2), Houston (1) and Fort Worth (1). Additional Lodges will open this year in Tyler as well as in the existing cities, bringing the total number of community Lodges in Texas to approximately 20 by the end of 1981.

## TEXAS REHABILITATION COMMISSION

The Texas Rehabilitation Commission has worked closely with the Texas Fairweather Lodge Program since it began in 1977. Their involvement begins initially at the five state hospital Small Group Ward Programs where they are involved with the screening of prospective group members. The Texas Rehabilitation Commission fulfills an essential role in assisting with the coordination and transition of Lodge groups from the hospital-based Small Group Ward to the community Lodge.

All 14 community Lodge groups have a Texas Rehabilitation Commission counselor who works directly with the Lodge members for the first six months of their community placement. They provide Work Adjustment Training and Room/Board funds for each community Lodge member for six months. They can also provide a wide range of restoration services to the community Lodge members, if appropriate and necessary, during their six month sponsorship of Lodge members.

Representatives of the Texas Rehabilitation Commission will be meeting in Tyler, Texas in June to assist East Texas MHMR Regional Center with the development of their community Lodge program which is scheduled to accept members from Rusk State Hospital in September, 1981.

We appreciate the Texas Rehabilitation Commission's continued commitment and ongoing support of the Texas Fairweather Lodge Program.

## AUSTIN

The Austin-Travis County Mental Health and Mental Retardation Center began their Community Lodge Program in 1977 to receive the first group of Lodge clients to be graduated from the Austin State Hospital Small Group Ward. Alpha Lodge was the name that the first group of 13 members selected for themselves. The Lodge members had an average age of 36.8 years with a total of 136 psychiatric hospitalizations resulting in 82.3 years.

Almost four years later, the Austin community now has four Lodges with a total of 33 members. Although the original Lodge (Alpha) and the second Lodge (Eagle) consist of 13 and 10 members, respectively, the most recent two Lodges (Daylight and Maple) have been limited to a maximum of six members each. This reduction in the size of Lodge groups to six has been due in part to city zoning and housing regulations which prohibit more than six unrelated adults from living together in a single-family residence without a special permit from the city of Austin. Due to the lengthy and sometimes costly procedure to obtain the special permit and other required licenses (sometimes up to six months), future Lodges will be limited to six members.

Alpha, Eagle, and Maple Lodges are all coeducational with Daylight Lodge consisting of all men. Alpha and Eagle Lodge members all work approximately 20 hours per week as custodians with the State Purchasing & General Services Commission. The Maple Lodge members also work approximately 20 hours per week as custodians at the Texas Department of Mental Health and Mental Retardation Central Office. Daylight Lodge members are employed full-time as custodians at the University of Texas.

Each new Lodge is assigned a full-time Lodge Coordinator for the first six months after they move into the community. After the first six months, the Lodge's level of independence is assessed and the staff involvement is reduced. This procedure enables the Lodge program to serve more clients without requiring additional staff.

The clients have developed a monthly Lodge newsletter called the Fairweather Gazette. Three clients attend school (Basic Ed., UT Speech classes, and Austin Community College Psychology classes). A Lodge "Dinner Club" has been formed. The clients meet monthly at different restaurants to eat. A Center-wide weekly social club, River City Junction, has been started. Fairweather clients, as well as other Center clients, attend. This has given the Fairweather clients an opportunity to meet and mix with other people. A birthday fund was set up some months ago. Money from this fund buys a cake and presents for clients celebrating birthdays. One Saturday per month a Lodge van is used as a "city bus," providing transportation to the malls, movies, etc. Individual members of all Lodges participate in this activity. Daylight Lodge has a "resident van driver" who drives the van for his Lodge to and from work, as well as to and from grocery shopping with his Lodge and Maple Lodge. This plan will soon be used by Alpha and Eagle Lodges, with a driver from Alpha Lodge. These drivers are approved and covered by the Center insurance carrier.

Two clients in each Lodge are trained and certified in CPR. All but one Lodge figure all Lodge bills and pay expenses without staff assistance. Lodge residents have two or three weekly group meetings without staff supervision.

**Contributed by Kris Nicks, Austin-Travis County MHMR Center**

## DALLAS

The actual placement of the first Lodges in Dallas was preceded by the formation of a non-profit corporation, Phoenix House, Inc., in the Fall of 1977. With that groundwork laid, the first Lodge, El Phoenix, was established in Dallas in November 1977 with six graduates of the Fairweather Training Program from Terrell State Hospital. Initially, they worked as a group for a trucking company, then formed their own company to do yard work. However, the lack of predictability of income led the Lodge members to seek a source of steadier income. They went to work as a group for the Dallas Housing Authority for several months and several then moved on to NCP Maintenance Co. During the initial months of the Lodge, the population changed rapidly, retaining only two of the original Lodge members by the end of the first six months. The replacements came from the Fairweather Training Program at Terrell State Hospital.

The second Lodge, Lakewest, was established in January 1977 and is located in the Lakewest Housing Project of Dallas Housing Authority. It was originally comprised of six members and a group of four was sent to complete the Lodge census in May 1979. A second Lodge coordinator was hired in May to provide additional client services and offer some relief to a badly-taxed coordinator who had been with the program from the beginning. He resigned later that year and was replaced by a new coordinator in July.

There were some Community referrals accepted into the program after the first year as limited vacancies occurred, with varying degrees of success in terms of acceptance by the Lodges and their stability in the Lodges, i.e. length of stay as a response to increased community referrals. During the second year there was an effort at providing some Lodge-type training in the community. It was discontinued as the staff determined that cohesion could not be attained while trainees lived separately and without a longer training period.

The original members of the second Lodge worked primarily as a group for NCP Maintenance for most of a year. The members worked independently or were in a work adjustment program at Independence House. This Lodge had great difficulty in maintaining cohesion, due primarily to personality clashes among several high-functioning but low-tolerance members.

The third Lodge, Pleasant Casa, was established in December 1979 with eight members. They worked in a variety of placements, one core group of four at one location and the others in independent situations. Four of the original group have remained in the Lodge and form a cohesive group which also has been accepting of new additions. Two additional members came from the reduction of Lodge two and two came from the community after screening in Independence House.

In July 1980 a large group of twelve was graduated from training and established as the Town House Lodge. The group experienced employment problems and difficulty with group cohesion from the outset. This was due in part to the physical setting of the Lodge and from financial stress. To address these problems, the Lodge moved to a less expensive site which is more homelike and closer to support services.

Since December 1980 the existing Lodges have accepted six students from the Terrell Training Program to fill vacancies as they have occurred in all three Lodges. Also, during this time the Community Staff, together with the Texas Rehabilitation Commission representative, have been sharing the screening process at Terrell.

Another Lodge is anticipated in August 1981 and a third Lodge coordinator will be hired prior to that time.

**Contributed by Sharon Fiscus, Independence House,  
Dallas County Mental Health and Mental Retardation Center**

## FORT WORTH

Mahogany Lodge began in our community March 14, 1980, after an approximate nine month long training period at Wichita Falls State Hospital. The group maintained the Mahogany Janitorial Services through December 1980, at which time new work roles were begun for each of the members. Five members presently work at the Tarrant County Mental Health and Mental Retardation Services Sheltered Workshop, one member is starting a laundry business in which she does the linens for the Alcohol Recovery Center in Fort Worth, and one member stays at the Lodge and does the housekeeping and cooking. This arrangement was necessitated by the inability of the group to maintain their major janitorial contracts.

The present goals for the Lodge are for the individuals to eventually be employed in separate jobs within the community and continue their Lodge identity and work roles in the evenings and on the weekends.

The Lodge members go to their jobs during the weekdays. In the evenings and on weekends, they attend nightly group meetings at which decision-making and problem-solving takes place. Each member has a work role in maintaining the functioning of the Lodge.

Some of the social needs of the group are being met at the Total Living Cooperative, a component of which is social gatherings held on four different occasions during the week. A community volunteer also arranges social outings once a week when the Lodge goes out to eat, to movies or other such activities. Crisis support is provided through the Total Living Cooperative's daytime program which includes medication management and structured daily activities.

Mahogany Lodge has moved three times and is now settled in their permanent residence which is large and comfortable and has a long term lease.

Mahogany's leader left the group three months after discharge, and since that time no real leader has emerged. Other problems that have arisen involve transportation, insurance costs, medication management, airconditioning and heating the Lodge, and dealing with two highly symptomatic members. Despite the problems that have continually plagued this fledgling program for Tarrant Co. MHMR Services, the group has shown itself to be strong, supportive of each other and highly durable. They were honored recently with a one year anniversary celebration by Tarrant Co. MHMR Services staff, local dignitaries, and community citizens, friends and family. At the ceremony, each member of the Lodge stepped up to the microphone when handed his/her certificate and made personal comments about their life in the Lodge and in the community. It was truly a memorable occasion and there was much warmth and many good feelings shared by all.

A second lodge, called the Lodgers, is scheduled to be discharged from Wichita Falls State Hospital to Tarrant County in June. We are presently finalizing the lease on their lodge and working on attaining sufficient janitorial work for their support. This group consists of 12 members and the prospects look good for its success.

**Contributed by Cathy Albright, Tarrant County Mental Health & Mental Retardation Services**



## HOUSTON

The Harris County Mental Health and Mental Retardation Authority opened its first community Lodge on September 22, 1980. The Houston Community Lodge Program is one of the residential components available to clients of the Harris County Community Support Program.

Moonlight Lodge has a large four-bedroom house on LaBranch Street, a neighborhood in transition located in the central part of Houston. Six men make up the group, their ages ranging from 20 to 43 with a median age of 30. Racial composition consists of two Blacks, one Mexican-American, and three Anglos.

Moonlight Lodge has formed themselves into a legally registered partnership and are fully bonded. They have two group contracts at this time; one at the Houston Housing Authority that earns them \$1,450 per month, and the other at the Jung Educational Center that pays \$250.00 monthly. The first contract is on a daily work schedule that takes from one and one-half to three hours to complete; the second is done once per week for about two hours. The Moonlight Lodge has purchased all of their own equipment (vacuums, buffers, buckets, mops, etc.) and provides chemicals and paper supplies for both contracts.

The Moonlight Lodge has accepted a full-time group contract to begin in July 1981 at the University of Texas M. D. Anderson Hospital and Tumor Institute. The benefits of this employment opportunity are several. As State employees, individuals in the group will be entitled to paid vacations and sick leave, will not have to concern themselves with quarterly tax and FICA payments to the Federal Government, and will no longer have to deal with the monthly financial outlay for equipment and supplies. All other State benefits accrue to them as well. The group has expressed concern that not all of their members may be able to work an eight hour daily job but, as a whole, they have decided to attempt to do so, and have agreed to remain aware of their responsibility to help the slower workers.

Indeed, the Moonlight Lodge members have a sense of the importance of working and being self-sufficient. Although it is not something they verbalize or is readily apparent to them, these qualities have developed out of their personal relationships to one another. The newest member to join Moonlight Lodge was formerly a member of Alpha Lodge in Austin who moved to Houston to be near his family. He has been well accepted by the other Lodge members and has contributed to the Lodge through his knowledge and past experience with the Austin Fairweather Program. The Lodge members are now discussing viable methods of integrating new members into the community Lodge group as others drop out.

A second Lodge group, Twilight Lodge, graduated from the Houston Lodge Training Program on June 14, 1981 and moved into their Bellaire community Lodge on June 20, 1981.

**Contributed by Kate Sexton, Pyramid House, Harris County MHMR Authority**

## SAN ANTONIO

The Community Lodge Program in San Antonio is under the guidance of the San Antonio Urban Council; a nonprofit private organization. The San Antonio Urban Council is a church mission agency in the city of San Antonio. For ten years, 30 churches had been doing a variety of projects as part of their mission but working with patients from the San Antonio State Hospital was totally new to us. The idea to take on this project was presented to and approved by the San Antonio Urban Council Board in October 1977.

On December 1, 1977, eight men moved into their new lodge and began living as the Jitney Janitorial Cooperative Association. Between the middle of October and November, the eight lodge members went through graduation ceremonies at the San Antonio State Hospital training program and moved into their own community lodge. The eight men had spent a total of 68 years in the hospital.

The funding for this Lodge and the means for moving in, living there, and working in the community were truly the results of a community support process. Each individual had contributed \$500 to his own bank account, which gave them \$4,000 as a fund to start their business and pay for initial costs. Most of us were skeptical enough that we wanted to see as much as possible of that \$4,000 left intact so that if they had financial problems or work problems in several months they would have some money to continue living in the community. Therefore, the Urban Council and the staff at the state hospital began to work for donations for the group. Since the San Antonio Urban Council is a nonprofit organization, we were able to go to the churches and to work with the volunteer council of the state hospital to accumulate approximately \$8,000 in cash, equipment, and household items. As a matter of fact, several of the men's major initial expenses for janitorial equipment were donated by businessmen. The household items were purchased at low cost from several motels that were putting in new equipment; new beds were bought at an auction sale; household items were donated by the churches; and because the group was moving in around Christmas time, many of the churches in the community, especially those associated with the San Antonio Urban Council, found this project to be an excellent one for Christmas gifts. When the men actually moved into their Lodge, they spent only \$450 to finish furnishing it with the necessary linens, towels, and kitchen equipment they needed.

It took the men only three months to obtain a fair number of contracts. The first contracts were through churches looking for janitorial services. Many churches had been struggling with keeping a single custodian or having somebody come in part-time. We were able to get three of these contracts very quickly and begin the exciting process of building our own business. Since that time, this first group has been able to maintain an income level of approximately \$2,100 a month through their janitorial contracts.

When we began our work with the janitorial contracts, we made the decision that 25 to 30 hours a week per person was all the work that probably could be taken on. The reality, however, is that at present the Lodges are working between 30 and 40 hours a week and seem to be handling it quite well. They have one fairly large contract that they must do seven days a week beginning at 7:00 in the morning for an hour and a half and for an hour and a half in the middle of the afternoon. They have been able to share this contract on the weekends with the second Lodge janitorial company so they have every other weekend off. Their work day goes from 7:00 in the morning to approximately 7:30 in the evening, five days a week, with several hours during the day, each day, when they have no jobs and can eat, rest, and do other things they might want to do. Even so, it is a long day and a long week but the group at present is quite satisfied with the work and apparently satisfied with the schedule. They also enjoy what they are able to afford with their level of income. Their major complaint is that they want more money. We have tried to emphasize through the whole funding process and through their month-to-month operation that they are in charge of their lives and that the money they make is theirs to support themselves in their home and business. Thus, we try to avoid government support programs as much as possible.

The Celebrities have shown a great deal of growth in the six months they have been out and they are continuing to grow. They have shown a good ability to address and solve problems. For the first four months of the operation, the Lodge had to deal with the departure of several of the original Lodge members. This kept the group dynamics in a state of flux, but it appears that they are now stabilizing as a group. At this time the Celebrity Lodge requires more staff support than the Trojan Lodge but this is understandable due to the differences in time that the two Lodges have been established.

Both Lodges are fully self-supporting in the financial area from their work for the School District. However, many of the Lodge members receive disability subsidy which they use for their own individual personal needs. No SSI or SSDI goes toward support of the Lodges as a whole. Each Lodge member works between 25 and 30 hours a week.

There are 2.75 Staff members who work in the Fairweather Lodge Services Program. This breaks down to 1.375 Staff members/lodge. The Lodge Staff are continually looking for ways to reduce Staff involvement and to promote client independence by reducing Staff systematically through attrition. There is one Coordinator for both of the Lodges and the other 1.75 Staff members work as quality control consultants at the Lodges' work sites.

Finally, the Lodge members are involved in various activities throughout the Community to aid them in the socialization process. Some of the main ones are local churches, the Friendship House, and relatives. One of our future goals for the Lodge Program is to increase the Lodge members' independence by decreasing Staff involvement as the Lodge members exhibit the ability to function more independently.

**Contributed by Doug McMillian, Wichita Falls Community Mental Health & Mental Retardation Center**

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### NEWS FROM THE GROUPS

#### The Flood

A true story written by a Lodge member caught in the Memorial Weekend Flood.

I was caught downtown when the heavy rains began. That Sunday, transportation wasn't mine so, bravely, I walked through the downpour, the lightning, the thunder and the flooded streets. At 21st and Guadalupe, I rested under a shed for an hour, hoping the rain would cease. Finally, it did and I set out to continue my march homeward. As soon as I did so, the thunder, the lightning, the rain recommenced and I was caught in the middle of nowhere with water reaching first my knees then my waist. I lost my slippers as they floated away from my feet in the swift waves which the strong winds made.

What were my thoughts as I got as far as 25th and Guadalupe? Briefly, here they are: Alpha Lodge is only three blocks away. Maybe I can stop there. Will they make room for a fellow Capital Lodge graduate who is stranded and can go no further? With open arms they welcomed me into their home. Very quickly they offered me dry clothing to replace the soaked ones I was wearing. In their dark house where power had been temporarily shut off, they offered me popcorn and coffee which they had prepared earlier. Their hospitable gestures were enough to impel me to an unwavering patriotism to the Fairweather program. Repeatedly my mind discerned the true meaning of that overused phrase, "No man stands alone; all that we put into the lives of others will come back into our own."

**Contributed by Fred, Daylight Lodge, Austin, Texas**

Within the first year, the Jitney Lodge lost three of its original members. Since that occurred, the Lodge has become coeducational and has become very stable and close-knit. It is a strong group able to display a lot of caring and very fine functioning on the job and in the Lodge. Issues have surfaced several times about when a member should leave and the group has handled this very well by advising members about the timing of their leaving. This current group appears to be quite stable.

Since the Lodge program first began in December 1977, we have added a second (Rountown) and a third (Rainbow) Lodge much like the first one. Our experiences with the first Lodge led us to begin the next two with what we believe to be several improvements:

1. The groups began their contractual work as a janitorial company prior to leaving the hospital so that when they left the hospital they already had several contracts. For this reason, the time they needed to establish their own income was much shorter.
2. The groups were composed of men and women from the beginning.
3. The Lodge Coordinator position and funding for the position had been stabilized.

It amazes us that so many of the individuals have survived the program so well - - still out of the hospital, working, and basically happy - - even the staff!

**Contributed by Kent Miller, Executive Director, San Antonio Urban Council**

### WICHITA FALLS

The Wichita Falls Community Mental Health and Mental Retardation Center started its Fairweather Lodge Services Program in May 1979, when twelve clients were established in the Trojan Lodge. The Trojan Lodge continued to operate very successfully in the community and nine of the original twelve members are still residing in the Lodge. Three replacement members were brought in during the Spring of 1980 and no members have left since that time.

The Trojan Lodge works for the Wichita Falls Independent School District at McNeil Junior High School. They have a permanent contract and they are well accepted and appreciated for the work they do. They have had this contract since November 1980.

The Trojans continue to be a tight-knit group and they often support and assist each other when problems arise. They require only a minimal amount of staff consultation in their daily affairs.

In October 1980, Wichita Falls Community MHMR Center established its second Fairweather Lodge with ten ex-patients from the Wichita Falls State Hospital and five of the original ten members still reside at the Lodge. Five replacement members have filled openings in the Lodge as they have come open and the current level of members at the Lodge is ten. The Celebrities also maintain a work contract with the Wichita Falls Independent School District and are responsible for the janitorial duties at Kirby Junior High School. Their work with the School District has also received many compliments.

### Short Story

You're walking down a narrow hallway, lights flicker on and off but mostly it's just dark. You hear the sound of water dripping, there are other things going on but your mind is roaring with the noise of running water. You look into a mirror, but it is a stranger who looks back in panic and confusion. And everything keeps getting darker and the repetitious beat in your head screams louder, "You don't belong, you don't fit in, run, run away." Something in your world explodes.

Sometimes for a person who is mentally ill, this is a concrete reality. It sounds a lot like a late night horror show, but unlike a movie, you can't just switch it off. Even if you drink whiskey until you're numb, trying to run from this continuous nightmare, it's still there when you open your eyes. And you try to shut everything out, tightly securing every door, pulling the shades on all the windows, but the stranger follows you and the voices seep in through the cracks. It's so hard to escape from what is inside of us, and it is a fact that it is impossible to destroy the darkness without also losing the sun. But for most of us there never was any sun, at least none that ever shined on us; we were forever lost in the middle of the night.

Not every solution is the same for everyone. But for many coming here to Capital Lodge was the beginning of a clear morning. There are no miracles or grand cures to be had, though. It isn't easy turning around and looking inward. It's scary to face what for so long had persecuted and dominated our lives. At first, we begin to get to know those in our group and see in them some of the same fears and troubles we ourselves had. But we didn't run. After you learn new things and you keep practicing, and it's not so bad when you mess up or become confused because here you're not alone. This group, these once-threatening strangers, have merged into a relationship of growth and work and laughter and tears all in one; it's a family a lot of us never knew. And one morning you wake up and the sunshine you feel radiates from inside yourself and the nightmare is overcome in the strength of hope. There is something to look forward to.

This isn't the experience of all of us here at Capital Lodge, but for all of us this is a beginning. I now have hope and I heard a voice the other day that was my own, "It's great to be alive!"

**Contributed by Lisa, Buffalo Lodge, Austin, Texas**

**FAIR**  
**(Family And Individual Reliance)**

**FAIR** in Texas is a two-pronged program designed to meet the needs of people who are affected directly or indirectly by mental illness. It's for those who are personally suffering or have suffered from some form of mental disturbance. It's also for the equally important families of the mentally ill, whose own lives have been disrupted. The **FAIR** plan proposes to bring together in different locales around the state these groups of people who are or have been mentally disabled and separate groups for family members.

For the families, the focus is on coping with and coming to a better understanding of the problems of their mentally ill relative and the effect on their lives. The goal of the family groups is to give members a new vantage point of distance and discovery gained by mutually-shared perspectives.

For the very people affected by mental disturbance, the aim is to gain strength and stay out of the hospital. By learning through the experiences and examples of others, group members may be able to take the necessary chances to live more meaningful and independent lives.

Generally, **FAIR** groups should offer support and comfort. Specifically, **FAIR** group members should encourage each other to help themselves. **FAIR** believes it is important for people to realize that they are not alone, that they can rely on each other, that they can rely on themselves and that there is hope.

With a grant provided by the federal government through the Texas Department of Mental Health and Mental Retardation to the Mental Health Association in Texas, Dian Cox, a restored mental patient with a ten year career in media and a firm belief in self-help groups, was hired to direct these mutual support groups.

In addition, the job involves trying to help work out the particular problems of clients and chipping away at the stigma in different ways (she is even doing a television public service announcement to be distributed state-wide in coming months). As a consumer advo-

cate, she is encouraging public support from patients, former patients, family members and other interested people for an effective lobby to make legislative changes. She hopes to coordinate efforts with these state self-help peer support groups with those of national groups of support and advocacy. Dian says, "I feel fortunate to have the chance to help try to bring about such needed changes in the mental health system in Texas and to individual lives."

**For more information, contact:**

**Dian Cox, Director of FAIR  
Mental Health Association  
4600 Burnet Road  
Austin, Texas 78756  
(512) 459-6584**

**FAIR GROUP LOCATIONS**

**Austin**

3 Client groups/1 Family group

**Beaumont**

1 Family group

**Dallas**

1 Client group/2 Family groups

**Freeport/Lake Jackson**

1 Family group

**Galveston**

1 Client group

**Houston**

2 Family groups

**San Antonio**

2 Family groups

**Small Group Ward Program**

<u>City</u>	<u>Contact Person</u>	<u>Address</u>	<u>Phone</u>
Austin	Mary Faith Sterk	Austin State Hospital 4110 Guadalupe St. Austin, Texas 78751	512/452-0381
Houston	Martha Collins	Houston Lodge Program 4802 Caroline St. Houston, Texas 77004	713/526-8478
Rusk	Ray Cryer	Rusk State Hospital P. O. Box 318 Rusk, Texas 75785	214/683-3421
San Antonio	Carolee Moore	San Antonio State Hospital P. O. Box 23310 San Antonio, Texas 78223	512/532-8811
Terrell	Marshall Mason	Terrell State Hospital P. O. Box 70 Terrell, Texas 75160	214/563-6452
Wichita Falls	Guy Grogan	Wichita Falls State Hospital P. O. Box 300 Wichita Falls, Texas 76307	817/692-1220

**Community Program**

Austin	Kris Nicks	Austin-Travis Co. MHMR 1430 Collier St. Austin, Texas 78704	512/447-4141
Dallas	Sharon Fiscus/ Marvin Bates	Independence House 1014 N. Zang Dallas, Texas 75203	214/941-6054
Fort Worth	Cathy Albright	Tarrant Co. MHMR 1319 N. Summitt Fort Worth, Texas 76101	817/335-5371
Houston	Kate Sexton	Pyramid House 4802 Caroline St. Houston, Texas 77004	713/526-8470
San Antonio	Kent Miller/ Shirley Whyte	San Antonio Urban Council 217 McCullough Ave. San Antonio, Texas 78215	512/224-1756
Tyler	Bob Pitre	East Texas Regional MHMR P. O. Box 4359 Tyler, Texas 75712	214/597-1351
Wichita Falls	Erwin Jaloway	Wichita Falls Community MHMR 1800 Rose Street Wichita Falls, Texas 76301	817/322-1196

## Texas Fairweather Lodge Program Directory of Contact Persons



WHY A NEWSLETTER

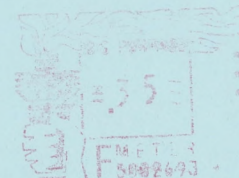
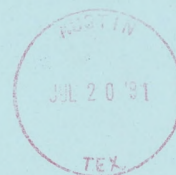
We would like to communicate statewide efforts to you through brief descriptions of activities and people involved in developing Community Support Programs. It is our hope that information sharing will broaden the base of support for our efforts and, in turn, we can provide some resources (people, ideas, activities) to interested individuals. We invite your comments and welcome additions of news to share. Please mail articles for the **TEXAS CSP NEWSLETTER** to:

Michael Carter, Program Specialist  
Tex. Dept. of Mental Health & Mental Retardation  
P. O. Box 12668  
Austin, TX 78711

For additional information, please call Michael Carter (512) 465-4614

Texas Dept. of Mental Health  
and Mental Retardation  
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