

EAR Why don't you, if you would, Lou, unless you've already thought about how you want to start, really, one last point to make, this is being done within the framework of the first 25 years. After 1971, it's a totally different story and I don't want to tell that story, because I don't know it well enough. But maybe if you would start from where you literally first had your contact with NIMH and work your way up.

LC Well, you mentioned a little earlier, talking to Jerry Carter. To some extent, this is my induction. I had, after the war, gone to Duke and I was at that time, I had an MA in clinical, and what with experience, I had finished about five years of the war, and went to Duke and the reason I got into Duke was that Don Adams had been in OSS with me and I was in charge of training there and so on and so forth. They asked me to come to Duke as a psychologist. There was an opening in the Medical School. So, anyhow, this gave me a chance to get in and work on my doctorate, and get that completed beyond the staff and it was very very congenial, and about '49 I had gotten my degree and I was at that time, in perspective to what was going on, and Jerry called me and said, "Look, how about considering coming up to NIMH?" And what was NIMH and so on and so forth. It was still just about in its earliest growth at that time and I thought, well, why not. Why not come and take a look at it. I'd known Jerry from Indiana. It was in the '30's and he had been at the James Whitcomb Riley Center there, with Mac Loutitt and Loutitt and Loutitt and I were very good friends, Jerry was very close, it was a small group of clinical psychologists. It was very friendly and when Jerry called it was just great. So I got up there and visited around, and they really turned out the red carpet. It was marvelous, and I had a chance to talk to Bob Felix at great length, and Dale Cameron was there and Ruth Needy and , the whole crowd, John Eberhardt was around, and most of the time I spent with Jerry. I never told him why I didn't take the job, but now it will be told. But they had proposed that I go out to Kansas City to be Regional Director

LC , Regional consultant in psychology, to work with Maddox (?) who was the psychiatrist in the area, but it was a real nice exciting city. I went out there and it was just marvelous, Well, I think the thing that got me stumped was Jerry was talking about retirement, and here I was a vigorous young, and he said, let me tell you about retirement benefits if you go into the career service, retirement benefits if you go into the commissioned service and of course I had enough rank, I could have gone either way and so on and so forth. I said, what in the hell kind of an operation is this. If the first thing they talk about is how you retire, I didn't want to have anything to do, because what it struck me as was kind of like it was going to be a grandfather type of service, that we would be in the Public Health Service, so, backstopping the actual workers. And I said, I was much too young to be a grandfather at that stage. I wanted to be on the firing line, I wanted to work, and here I was at Duke, and I could work there, and there were problems and there were patients, and there were delivery services, and let me work here, and then maybe, someday, I'll go to NIMH. But the greeting, the sense of warmth, when Bob Felix said wahl, we've got a pledge pinned on you and I felt like I was being inducted and it was very exciting. I knew Sid Newman too and kind of got a real sense, that this was a professional, competent rally, committed to the long view, it was socially responsible, all the things that I wanted to be identified with, very exciting, but in not coming with the group, I think it was more the question of my own impatience to be a little more active than some of the perspectives, like at one point, Jerry was saying, well, you come into the state, and if they're not ready, you can wait. After all, you know the Public Health Service has been here now 160 years or something like that and it's going to take another couple three, four years and a long pull, we can do it that way. But what came to me at least, was, at that time, a sense of real mature professional exciting group of people and someday I wanted to be identified, and all through the years, in

LC* the next 25 years, whenever I had a chance, when I got a sabbatical, I always tried to get over to NIMH and get a piece of the action. I was lucky, I got a piece of the action a couple, three times and I've always had a tremendous amount of respect. In the last few years I've begun to raise some questions, but all through the time that Bob Felix and Stan Yolles were there and in the early years of Bert Brown, it was , for me, a sense of first class professional service, one with great prestige. I afforded it, I gained it, I had the sense of any affiliation with NIMH was marvelous.

ear How did you close that little episode on Kansas City?

LC Well, I talked to Jerry and told him pretty much that I felt that I was, that I really wanted to stay on a while, and that's what I wanted to do. And that, again, keep me in mind, sometime in the future I still felt very very close. And in fact, over the years, I did stay and felt very very close but I thanked them for their interest, but it seemed at the time just a step away from where I wanted to be, and I thought, well, I wasn't a kid, but I was not too old, in my early thirties and I really wanted to get into it. So I did at Duke. And I think the next big exciting contact was a little remote, but still a terribly important one and one of the most exciting things that happened to me was the conference that was sponsored by NIMH at Palo Alto when Eric Lindemann came and talking about public health, mental health and synthesis, and then again it fit right in to where I wanted to be, in 53, 54, and that was probably one of the most exciting things that happened to me.

EAR Can you talk a little about that?

LC Well, I tell you, I had very much a euphoric experience listening to Eric Lindemann . We had had a great many of the responsible productive clinical psychologists and clinical psychology teachers there, you had your Carl Rogers, and you had , a lot of people who were making sense. Rogers, at that time, even made the comment, not so much, let's not talk about psychotherapy, let's

LC TALK About "why do psychotherapy" and the whole perspective of what's the value to a society, what impact are we making and what kind of an effect do we have? This was very exciting, but it didn't go anywhere until Lindemann spoke, and he spoke about what was happening to him, through his Public Health training at Harvard, what insights he had gotten, the kinds of aspirations and hopes for creating a kind of a Utopia, almost, in some way. And it was easy to identify, because there was a kind of a handle, there was a way of getting at it. You could sort of begin to think of places where you might grab, and you got a much clearer sense of the mission, rather than, in '54, I think most of our research was you simply got a hold of some kind of category of mentally ill and you tried to find some of their attributes. What could they do? Could they add, could they subtract, etc, and we were still kind of doing some basic classificatory processes, and that's much of our research. And here's somebody who says, wait, wait, you've got a mission You've got to go on here and try to prevent, you got to go on and try to ameliorate, you got to work with the conditions, and it looked like it might be possible. We weren't deluded, but public health images that Lindemann had introduced, of course the obvious ones were in the area of infectious illness, but the idea of social intervention, the sense of the whole meaning was sort of captured, and it got to be inspirational, and I just sort of went around...I remember as a consequence of the meeting, APA was meeting, I think, in san Francisco, and I was scheduled to talk to the VA , all the VA psychologists, and inspired by that meeting, I got up and confessed to everybody that it was one of the most marvelous experiences I had ever had, and I said, you know, I can't help but try to translate it. I said, look here, in the VA we are in the most incredibly fortunate position We know those people at risk, we know the population of veterans who have been mentally ill, who have come into the institutions or who are in the various

LC at risk groups from having been in hospitals, why don't we address ourselves to the question of preventing their breakdown? Is there anything we can learn about that sort of thing? Why don't we approach this as an at risk group and try to develop strategies for reaching out into the community, working with them. And I went on in this way, and I had the very distinct impression that I was talking to the wind. Nobody had had quite the experience that I had had with Lindemann to that degree (?) I suspect we'll get to that idea maybe in another 20-30 years, but it also was highlighted in something that I think was terribly important and that is the complexity of many of the ideas that we talk about in the prevention field, and more and more I am beginning to appreciate, as the years go by and as my head gets a little softer from beating against stone walls, how we must shift into an entirely different time dimension in thinking about many of these programs, in many cases the ideas are not novel, but what it asks people to do or consider doing, are things which are not characteristic of their usual roles, and they've got to shift out and to visualize themselves, for example, at the time I think I was talking to VA psychologists who were just getting comfortably set into institutions. To say to them, why don't you go out into the community or try to reach out, they had just barely gotten in, they're not going to be very happy about the idea, but if you were dealing with the problem, the problem was in the community and they couldn't quite see themselves. Well, it's taken years and the VA still hasn't gotten into the community. For a while we were sort of consultants to the VA and I think Stan Yolles was on the committee at the same time and again and again would come up with, you know, how about trying to provide services, the NIMH, the national model, we were saying, to the VA, was, here, you try to use all the facilities of the community, why couldn't the VA do exactly the same thing? You've got a hospital system, why not a mental hygiene or a mental health clinic notion

LC at the very least. Why not go a step beyond that with community available day care centers. Well, that was beginning a little bit, but you never could get them to consider, well, how about using the community mental health center as a place to send, and why not interrelate all of this.

EAR What do you think, just to take a moment or two, since the two agencies, in some respects, parallel each other in certain ways, what do you think is some of the reason that the NIMH and the VA really showed such a dramatic difference in respective

LC I don't really know but I have been playing with speculations. I have speculated largely around the veterans groups and I've had the feeling that the veterans groups with the sense of medicine that they may have, like the American Legion, Veterans of Foreign Wars, etc. would probably say something like this. You can get the best care in the hospital and let's provide the best care for our veterans, and nothing of your makeshift stuff, and nothing out of the community, and nothing half-baked. We want our veterans brought into a hospital when they're sick, we want the best doctors, the best equipment, etc, and I think in the interests of, you see, trying to provide better services, they have been very potent, and just absolutely restricting the whole thing. That's why we've had this compensations, the rossis (?) type of thing in the VA where in a sense, you work again. And the very early recognitions of the dangers and the difficulty with that, and nobody is going to be able to make a dent, again in the interests of trying to protect the veteran. And so I think this crosspurpose, well, I think the NIMH, thinking in the larger context, they're also people that came...they're a lot of public health people, it's a lot of public health point of view in NIMH and they've always thought of prevention, even if they haven't been able quite to do what they wanted to do, this was very much on their minds all the time. So you have to think about where was the problem developing, how can you get to the source, what are the ways, where's it coming from, let's get out there. But it's remarkable different, and always you have the sense of trying

LC to work with almost, in the VA with a somewhat self destructive, and somewhat,

EAR And I don't want to get into personalities in a sense that I'm about to say something but I think it's inevitable that you have to think in terms of differences in individuals that there wasn't a Bob Felix at the VA and there weren't some of the other people unfortunately, I think that Jim Miller initially started to do some things and then, perhaps, Hal Hildreth, who was a very complicated and a very gifted man in many ways, still got caught in the framework in which he was functioning. And from there on, it's been frankly, Max Houtchens was not a gifted person and Cecil has played a holding game all these years.

LC Now, as a matter of fact, these days I find myself so distressed because if you take a hard look at the VA, there is no psychology, there is no psychology at the central office at all. There are no people ~~with the name~~ psychologists. It's all disappeared.

EAR And even my early career was in the VA, so I speak with some knowledge. Even initially when there was an effort, and I think it was a very commendable one to sponsor psychologists' research, we had an ou-patient research in psychotherapy program Maury Lorr and I got involved in and the PEP project, that was a big project. It didn't spawn anything else. What the psychologists did at the various hospitals they did primarily on their own. It was a little bit of kind of a pro-forma support from central office.

LC I was just trying to think if we had comparable psychiatry input. Jim Miller could have bridge the two and did the exciting thing, and of course many people have said many many times that he did an enormous service to all of American clinical psychy. I think he shaped it. With his move in the VA I think that really gave character to what clinical psychology was going to be, and a brilliant guy, and so young and so multi-versatile, etc. But I'm trying to think about real statemen in the psychiatric end of that, in comparison so to

LC say, to statesmen/...

EAR Well, Dan Blaine initially, but he left very early on, and after that I don't recall that there was anyone there with any stature.

LC Well, Blaine was of course the spokesman for American Psychiatry too, really top-drawer, no but after that, I am trying to recall from the years when I was going up to Washington regularly and trying to figure out where were the real leadership people there, nowhere near the kind...Felix, of course, was an unusual fellow. My meeting with him there in '49 reverberated and I can almost remember every time I saw him, such a charismatic person. After he left NIMH I tried very desperately to get him here to this university. Yeah, we got him down here to visit, and so and so forth, I thought he'd make a marvelous dean of our school or something, but we didn't have a deanship available. We had a chairmanship available and I didn't think that that was going to stretch him and so on. He did come down and visit and gave some talks and I think we got him in as a consultant. It was always an exciting thing. You always felt so personal with him. Everybody was his friend. He knew you he knew your family, remembered everybody and I always felt from '49 that he was a personal friend of mine and knew him and he'd always make me feel that that was so. It was not only a sense of prestige, a sense of awe, a sense of respect, but it was also a sense of friendliness. This was my operation, even though I wasn't in it. It was very very personal.

EAR What was your next meeting with him after '49?

LC Well, he was at the meeting in Palo Alto and we spent a lot of time there together and then I got involved with the Southern Regional Education Board and that was an exciting kind of thing. Bill McLaughlin, really a very gifted fellow, coming out of that whole crowd at the TVA and working with Lillienthal and, I never got to know John Ivey, who was the director of the SREB. He's a guy who I met once or twice, shook hands with and so on. But I worked very closely with McLaughlin who had been in the operation with Ivey in TVA

LC and when the TVA operation was more or less put together they got together and developed the Southern Regional Education Board which was essentially a kind of a boot strap operation of trying to raise higher education in the south and trying to develop more professionals. Again, it comes in to where I feel comfortable in trying to do something in a preventive way. Don Adams asked me to represent him from Duke and I went to one of the first meetings, where they said, well, what do we need to do to develop psychological talent in the south? And there were a number of us, and Nick Hobbs was in that crowd and we had Tom Richards, Clair Calhoun was there and was one of the key figures all the way through. I've got a little picture of that crowd still, Curtis Linehorn, I'll think of the names as we go along, Anyhow, this group became a prying group to take a look at the questions of what do we need to do to develop psychology, wait a minute, I think I have here (EAR - terrific, can you spare one) yes, and this was one of the things that ^{happened when} we tried to develop a proposal for increasing the number of clinical psychologists, which was my special concern there, as well as try to develop a research establishment ^{that} would really address the problems that were unique to the south and we tried very hard to create a group, it was a very exciting ~~thing~~ group of meetings, beautifully run by McLaughlin who had a marvelous way of keeping everything on and we went through a series of meetings and developed a commission for dealing with issues of psychology and so on. But I think what happened, well, it didn't take us long before we said, well, wait a minute, that's only part of the thing, it's one thing to talk about developing psychologists, but how do we deal with the issues of mental health? And we were running through some of this, and particularly Nick Hobbs, because Nick always had a marvelous way of always seeing the forest and never getting sort of cut down by any trees, etc. He saw the big picture and Nick got involved with McLaughlin, they were talking about the mental health program, and they went up one day I think to talk to Bob Felix about some kind of a proposal that might work out, where there might be

LC a southern attention to the problem of mental health. And from that, there was a grant given to SREB, Nick accepted the leadership of this other thing and started a real sothern effort to mobilize resources in psychiatry and psychology and social work and in nursing, and in identifying the usual four major professions and try to operate with that . This is one of the things that came out, out of that. There was a whole series of papers that began to develop out of that, and there were very exciting issues that came up, including some very awkward confrontations between psychology and psychiatry when Nick was challenged by...I'm blocking out his name, but he was the superintendent of the state hospital in Delaware, a Turkish fellow who very much a character, let me see if there is a roster here and I can find him

EAR This was still in the developmental phase?

LC Yes, there were some good names here, as I go flipping through this thing, people who have been very much into,, this is an attempt to...oh, Teruliance, and Teruliance, at one point there, where we were trying to work this whole plenary session in mental health challenged Nick and said, Now how come you're running this meeting. You're not a person who knows anything about mental health. You don't know anything about patients. You haven't got the slightest idea, and why are you running this meeting? I had so much anguish at the time and didn't know what in the world would Nick do. But I shouldn't have had any questions because Nick, very patiently and gently, started to talk about where he was, what his concerns were, what the/^{big}problem was and sort of brought it around, and I remember when they got all through Teruliance, then, nominating Nick to be the chairman of the convention and of the first board, and god Bless that Nick, and you begin to see that there is something to human skill. But, the SREB brought us again into contact with Bob Felix and hovering over the whole thing was the philosophy of NIMH the whole sense of concern, and we began to think in southern terms as to

LC cont. what did we need as a region, and very much aware of discrimination and blacks and income and the economic situation and the lack of personnel and how do we pick that up, and what were the alternate strategies, and all this kind of thing, so we became very much involved in regional action. For years I was very much excited in being part of that and for a while there, chairman of the psychology group, and then I was chairman of the commission on mental health and that was kind of interesting because it tended to be very heavily psychiatric, but nonetheless, everyonce in in a while they would pick somebody else, and psychologists would get in and then be in charge.

EAR Can you think of any other incidents because I think its important for me to kind of point out this constant undercurrent of difficulty between psychology and psychiatry in a formal sense, and yet very often a close congenial constructive relationship among the individuals within the two groups. I've seen that happen so many times. Can you think of any other illustrations in which that problem arose and was at least partially resolved for the moment by personal interaction?

LC Let me keep that in mind as we go along. Just to give you one little illustration, I was on the commission on mental health and retardation, what the SREB called it, the usual representation was, a person nominated by the governor of the state and that almost always was a Commissioner of Mental Illness or in some cases the Chairman of the Department of Psychiatry in the major medical school setting. In setting up the Commission it was originally felt that if you follow that particular design you would never have any psychologists, sociologists, social workers, nurses and you needed some. So the Board itself had the option to add some people and for years I was on. I succeeded Nick on the Board and it was very exciting to be in that position, but I was always a nominee of the Commission itself. Now in this hospital, in this setting here, Bob Williams as chairman of the Department of Psychiatry, had been elected by the Governor to represent this group, and, to the very point that you are talking about, Bob and I were the most congenial of friends on a personal level. I couldn't see anything about what he was doing as a professional, really, and I don't think he had too much use for me in that sense. He had an

LC cont. image of psychology which I think went back to about 1940, 42, 43, as a psychometrician. This is as far as he could go. And we wanted to play a different game. We said, that's a good game, but there are many more issues. He just didn't know how to deal with it. We almost agreed to disagree. If we came into the operation upstairs here as a psychometrician, this was fine. If we wanted to deal with, now how do you rearrange a plan for this patient, or how do you do this, that and the other thing. As a research colleague, fine, that was a traditional role for us, but he didn't understand any expansion on the clinical role. But we always got along fine. We would always go to the meetings together, he as the official representative of the State and I as a member of the Commission. For years we went, we would always have dinner together, it was always that kind of thing. He nominated me for the Presidency of the Commission and renominated me and it was just the strangest kind of thing. Professionally we just sort of went our own ways, very congenially personally, but when it came to something he went ahead and put me up there and I thought it was kind of interesting, just as a little illustration of exactly what you were saying. Anyhow, the SREB carried out in the same tradition, I think it captured, it got its inspiration for this study and, you almost have a sense, the TVA kind of thing, the NIMH kinds of things, the Public Health point of view the whole sense of the new South, all of this came together and again we thought of the NIMH as being a parent group. In the meantime we were very much the recipient at Duke of training grants, research grants, I got research money from NIMH, it was exciting, and one always thought of them in these positive ways. I think it was about '58 I had a chance to get my first sabbatical and said, "what do I want to do most" and I couldn't think of anything I'd rather do than go up to NIMH, I think I had been on some committees on some consulting work with them, they were doing some things, and I don't remember quite the details, but somehow they had asked me to come in and look in on some things and I was delighted and we talked a little bit more about firming up an arrangement and they had the Community Services Branch and Curtis Southard was chairing that and running that and that was a group I wanted to

LC cont be with because , somehow again, it seemed to always sort of catch me to get out and I tried to affiliate with them. I had had a commission during the war and gotten a certain amount of rank and I was sort of playing around with staying in the Reserve but found the Army Reserve was a very thin and unsatisfying thing. It did occur to me, that if I ever wanted to serve, I couldn't think of anything better, so I got myself transferred over to the Public Health Reserve, which I think at that time was some sort of a reasonable option. They were trying to get some people. So I thought maybe I could activate my reserve commission and be assigned to the NIMH. But that was a snare in the delusion. You couldn't do it. It was going to take about a year and a half, some incredible amount of time. Obviously, they didn't want to do that. It was very very difficult. I didn't understand the politics. It was much easier to appoint me as a consultant or something, and work out an arrangement and in that way I got to spend about six months with the NIMH and did a little study on something that they wanted done, it was far afield for me, it was on Mental Health education. I had very little knowledge about this, but felt, why not find out about it and that's when I began to work with Jack Weiner, who was the evaluation fellow there and Jack was there, that was my office there. Of course I had a chance to work with Bill Hollister Tom Gladwin Sauky Steeles and the whole crowd. I'd go to meetings and it was just exciting to be with that crowd and to get over to the Mental Health Center, Prince Georges County. I got to know most of the folks there in six months, and also, the study was supposed to be a national study, so then we identified some activities in each of some nine different programs throughout the country and we tried to see if we could be national. I think I did one out on the West Coast and one up in Idaho. I went to different places, Texas, etc. and looked in on what was going on in Mental Health education in a number of selected areas, but diversified, then talked to the Mental Health Association, to some extent, to try to shape up what was Mental Health education what should it be, what could it be, and who was doing what, it's almost like taking all these adventitious activities and trying to organize it and so forth. We did get this little monograph out, which is a Public Health monograph and that was

LC cont. an exciting thing, it took a little time. It was an entirely new territory for me and as a clinician I wouldn't get out to.. But it served me well, it gave me a marvelously good perspective of how complex some of these key issues were.

EAR Now, who suggested this study?

LC I thought it was an in-house kind of concern, that Jack Weiner, whether it was Curtiss, I don;t remember quite where...But Bill was very much into...I think he had made up his mind that the small group was the meaningful direction and that was what he was doing and what he was trying to promote, but we were dealing with the whole problem of education, but the question of could you use mass media, what are the experiences. So I went up to NAMH and see what they were doing in this area and what kinds of experiences and data they were having and what certitude did they have about what they were doing and then went into Public Health itself. There was a group that was preparing material, so they could publicly..Anyhow, we got into contact with most of the people it was pretty kind of high up. Meantime, I sat in on Staff meetings about what was going on in Community Mental Health activities and some of the ideas about intervention there, there was a lot of politics going on, tensions, stresses. I got the impression Curtiss Southard didn't sit too well, but being more of a stranger and not too curious and actually moving around a great deal. Warren Lamson was in that crowd too and Jerry and Warren ended up in an entirely different area. when the whole thing was reorganized, and Ruth Knee and Pearl Shalit. They were very competent people, you'd meet them around here and there, getting to symposia here and there. But I thought it was just a marvelous experience and I'd love to encourage anybody running an organizagion like NIMH to get the professors in, because I found it very exciting.

EAR By that time Norm Garmazy had already gone for a two year stint.

LC I think he may have.

EAR He was there from '56 to '58/

LC Now that's of course a different operation. He was over in training and I was in the operations part. He was struggling with himself as to what to do and he couldn't quite make up his mind. He doesn't change easily. He struggled for years about leaving Minnesota. From there he negotiated with Harvard,

LC cont. accepted an appointment of Harvard and somehow made sure he didn't take it. Then he accepted an appointment at Cornell, with a tie-in for Rochester, and made sure he didn't take it. You should have seen the struggle he had, the separations he had from Duke. He came in and begged the President not to let him go and struggled with this whole thing and most of the time you wouldn't think the President would care.

EAR I don't mean to divert you, but you know it is interesting that of three people from Duke, yourself and Norm and Elliot Rodnick all of whom had at one time or another a fairly close affiliation with NIMH.

LC We felt very strongly about it, somehow or another we were involved, we believed in the staff and...

EAR So that six months gave you a chance really then to find some closure from what had been left over from years before.

LC Yes, even more so. I still felt a member of the family and I came back again to spend some more time but I got involved in another tie-in, on another sabbatical, I got into another liaison with NIMH and SREB this time when we were going into the whole problem of consultation and so we did a joint study. I tended to be based more with SREB, I think it was a kind of a contract arrangement between NIMH and SREB, and so there I would be coming up and it would be a little bit more desultory for me. I wasn't as much up.. I was really working more with SREB.

EAR You mentioned SREB, but also SREB played another very interesting role in that it served as the prototype for Witchie. Now were you party to that kind of development?

LC Not the development of Witchie as such. I got very much involved with McLaughlin and Winthrop Godwin. I remember when Win Godwin first came I was already meeting fairly frequently with SREB and he was a young sociologist from the University of North Carolina who came on board. He later became the director of SREB and is currently the Director and I got to know the folks well enough to get a picture of where they were coming from, what they were trying to do. Actually, the mission of the SREB was more involved with the Superintendents of Public Instruction and the Chancelors of higher education, ^{and} the Governors. Those were generally the three members of the state who were signatory to the agreement. They

LC cont. were generally the three members that would come to the SREB meeting, and that was a high politics kind of operation. There were negotiations between states and among states for different kinds of arrangements. For example, we here in Florida did not have a Veterinary medical school, but we did have an arrangement with Auburn. Auburn would take ten or fifteen of our students from Florida. Florida would then pay Auburn \$1500, \$2000 for each student and guarantee if the Florida students would meet the requirements there, to accept the fifteen students. So that rather than build a resource in Florida which we were not ready to do at that time and rather than sort of eliminate the possibility of Florida students having access to this sort of thing, you created through a regional agreement resources which were sort of spread around the region in some systematic way. Hopefully, Auburn could then expand its facilities a little bit with a guaranteed income from some known students and in that expansion they could provide a facility that could be used by Florida. At some future date, when Florida was ready, Florida might set up a Veterinary Medical School or not. And in fact, we opened one just a year ago, right here as part of this institution, right next door. But its been many many years, its been 20-25 years that Florida has had Florida veterinarians trained under this arrangement. They had a whole group of compacts of this kind, they had regional compacts of different agreements, for example, forestry, they had arrangements where there were a number of forestry schools through here, they tried to get agreements among all the schools to specialize in different areas so that southern students, by going to one school might get one kind of skill, then go to another school and get another, and they would admit credits across the line so that by using a regional concept you would have the skill and the resources to do the training that you needed for the entire region. NOW this model was the main model. Mental Health was in a sense a kind of a duplicate and it was not quite within the same charge and I suspect it probably flourished at first because of Bill McLaughlin being the director. Bill had been part of the whole original impetus for setting up the SREB, part of John Ivey's small team and he was so good, and so much persona grata in the whole arrangement that he kept the Mental Health group tied in.

LC cont. The Commission of Mental Health, it had a number of different names at different times, but as it began to broaden out its concern with mental retardation and such other things. But that model did get developed even though it was sort of separate from the higher education preoccupation, still the commission did concern itself with trying to develop manpower resources and research resources but then it got very much involved with services. I think when ^{Nat} McPheeters came on board it got very much more into services, ~~that~~ came from being Commissioner and delivering services and this kind of thing. But by that time, I think, Witchie had already developed and there were a number of Northeastern..

EAR None have become as prominent though as SREB and Witchie.

LC In recent years I find though that I haven't been hearing as much about SREB. I hear more of Witchie than I do of SREB. Win Godwin has been director of that for a long time and for a while, about every three or four years, the Director of the SREB would pick up an assignment in some institution of higher learning. He might be Vice president for development, etc, anyhow some kind of assignment, and I'm not sure whether it may not have lost some of the revitalization that might have been kind of helpful.

EAR Let me take you back, because you've had contacts. I think we've already talked about the enimitable style of Bob Felix and the critical role he played and briefly about Jerry and a couple of other people at the Institute, are there any other people who come to mind with whom you've had some contact that you think are important to mention. Did you have much contact with Hal Hildreth when he was at NIMH?

LC Well I do have, mostly from the VA. I know him from the VA and I did have contact with him. He was developing , I think, the suicide..

EAR Yes, he was developing a number of special areas.

LC Yes, I had a lot more contact with Hal in the VA

EAR Did you hear his famous resignation speech? At one of the meetings he in effect, before he left, threatened to resign if the VA didn't do something more positive about clinical psychology. In fact they did not, and it was at that point that he resigned.

LC I probably thought about this, and that this was the way to go ahead, and thought of this as something else terribly strange. Now Hal was always an exciting fellow and I thought he got even more exciting when he came to NIMH because he bubbled over with ideas, he was always selling something, he was promoting some new outreach kind of thing, his enthusiasms were engaged and off he went.

EAR I mention him because he's illustrative again of something that I think was a very integral part of NIMH. The very issue that you said initially deterred you, so to speak, from joining NIMH. That is, they were catalysts, they were provocateurs, they stimulated other individuals to do things, even though they themselves might not get their hands into the action, so to speak, and, as you well know, Ed Shneidman feels that Hal Hildreth in a real sense set him going in the whole suicidology, so there is a very strong and warm feeling about Hal Hildreth, as do a number of other people.

LC Well, I think, if there's anything I've done, in sort of out in in the community activity, it has been through this constant stimulation that you get. Well, the insights that I got from the meeting with Lindemann, and that whole eye-opening perspective, not that I wasn't in a sense ready to be stimulated, I think it picked up on something that I had been concerned. I think the phrase I used earlier was a sense of hope that you could do something and here there was a good crop of people and they were solid people, and they were going to try, well, why not, it was not a Don Quixote kind of assault at a windmill, that you might do, it would be tough, but it was worth doing, and you had very much a sense of doing that.

EAR Were there any other people that come to mind?

LC Well, a lot of people come to mind. The whole thing is full of people. Bill Hollister, I think, is kind of an interesting guy. I don't know that he made a terribly big dent on NIMH but he was an absolutely committed person 100% devoted. One of my students, Will Edgerton, was another guy. I was delighted to see what Will has been doing, the two of them teamed up when they went back to North Carolina, but that was at a kind of the grubby operational level. They were trying to demonstrate how to do it. They were trying to get good patterns and trying to encourage people out in the field to do similar..They were kind

LC cont. of operational people with lots of inspiration, lots of enthusiasm, I don't think they had big big effects, but they were in there doing and they were good people, and they were exciting to know. Somehow I think of Tom Gladwin as a person I always remember, a little bit of a sort of resident philosopher, the kind of anthropology perspective, you just sort of step back and you think of Truk, and you think of long distance places off there and what's the perspective of the human animal here in the United States and Tom used to get off, every once in a while, on little talks that I found very exciting.

EAR Did you ever have any interaction with Richard Williams?

LC No. John Eberhardt I bumped into a little, and mostly he had a reputation for the thinking and for the perspective, and so on. When he went to the Commonwealth and came back, you had a sense that he was always up there, but I didn't quite know what he was in to. Joe Bobbitt, was again, a person of whom I had a sense of his importance, but I didn't have too much to do with them.

EAR You knew Sid Newman?

LC Yes. I knew Sid by 1947,48. Somehow I knew Sid and knew he had had been over to the Coast Guard and had worked with Bob Felix and so on. He was trying to work out some things for me, and I felt very congenial to him, and he sent me his reprints for years. He never quite got into NIMH. (EAR - No he went into personnel) He was right there

EAR Early on the three of them, Felix, Bobbitt and Newman were together in the Coast Guard and then Bobbitt and Felix stayed and Newman went off.

LC Yes, but I knew him, and we'd write to each other and we kept in touch. I felt very congenial to him, and he evidently took enough trouble to sent me notes. We never worked together.

EAR Talk a little about Jerry.

LC Well, I knew Jerry from back in Indiana and he was at that time part of a professional group that was sort of affiliated with Mac Loutitt. Loutitt was trying to spearhead a kind of a concept of clinical psychology out in Indiana. I had an MA at that time and hadn't quite made up my mind whether I wanted or needed a PHD. I felt it would probably be a good idea, so I was sort of touching in with Mac about different things, but the situation got very peculiar, because in almost all my relationship they assumed I

LC cont. was a fully trained, a fully qualified professional, and maybe in relation to the kind of level of competition that was around in Indiana, I might have been able to make a lot of fusses, a lot of noises, but what I'm trying to indicate is that I enjoyed a kind of freedom of movement that was far in excess of our contemporary sense of where one's education ought to take him... that was the style at the time. Jerry was very close to Mac Loutitt and we used to spend a lot of time on various seminars I would come in to Bloomington, Mac would ask me to kind of take a lead on some of the stuff there and we would get a lot of people out to our little prison where I was working, and in fact we would have a three ring circus there. For a while I had Julian Roder out there as sort of one of our interns and there must have been about a half a dozen of some pretty good people there and it was kind of a good congenial setup, but Jerry was working with the Riley set, that was children, that was not my thing. I was working with adults, in prisons, and so forth. But through Mac we had a sense of closeness and Mac was again, I suppose, a very charismatic person. Loutitt had many of the qualities of Bob Felix and made me have a sense of identity, and he gathered students around him and they really worked like hell. Somehow he had that kind of inspiration over them, and began to shape up a sense of what clinical psychology was in Indiana. We roamed the entire state, we got together, we'd go to different meetings. We had people like ^{Powell} Kelly from Purdue, who was part of this group old Harriet O'Shea was one of the people there. We had an association of clinical psychologists. Through different meetings, different kinds of contacts, particularly through Mac Loutitt I got to know Jerry quite well on a social level but we never quite worked together in the sense that I didn't work with children at all. We stayed in touch, knew about each other and had kind of a warmth there and then when I got invited to come down, so I went. Mac was very kind, he used to say nice things to me and I apparently got along pretty well with old Ed Conklin, he was one of the fellows who wrote a book on Abnormal Psychology years and years ago, and somehow he took a shine to me and he used to come out to see us at the prison from Bloomington, and invited me to come in as a Visiting Professor. I said, you must be kidding. I only have an MA. No he wanted me to come in. It just didn't fit.

LC cont. I wasn;t quite sure, but I was flattered with that sort of thing. But that Department of Psychology there was a very good department, Davis Kellog was there, Loutitt

EAR: Well, let me ask you in kind of an open-ended way if there is anything else that you can think of that would serve to illuminate the manner in whãch NIMH worked, are there any things that we left out?

LC Well, I do have this job I did with the SREB , let me see when did this get published? (EAR-in the mid-sixties, wasn't it) I don;t think there's even a date on this, I don't even remember it, Anyhow this was turned out by the SREB and we probably should have published it as a book at the time. I think that it is kind of silly that we didn't, but we didn't. But then I got called into a training relationship with Ralph Simon and worked on that committee for a whole stint, and that was another exciting kind of thing, with Ralph and with Sam Silverstein. Then I got into the Training Branch and saw a lot of things and I must say I got very irritated with psychology there, and I got very irritated with the Branch itself. I felt in many ways that by that time they were getting very stodgy and I was looking for some of the, well you were around probably, right in the middle of that sort of thing, and a number of times I'd fuss with you about the difference between contracts and grants and somehow things were getting tighter and tighter and I couldn't understand why. I thought there needed to be some more adventure, some more excitement. I suspect I always associated you fellows with the whole notion of "Tomorrow the Gonsaldat (?) and that you could do, and would do, and so on, and that if you didn't do them, well, by Golly, there was something wrong. That was one of the expectations that developed with NIMH, that this was a group that would undertake anything. This was an exciting affiliation, because it was really out on all the pioneer front. Some of it was crappy, some of it was not worth the trouble, some of it was politically difficult, like supporting Jerry Kaplan or something like that, and you knew that you couldn't cut him down because he was at least, from some points of view, exciting, innovative buy, but also so damn narcissistic that you couldn't see that anybody else would dare quite to follow. Yet he wanted \$300,000 and God, how to spend the money. But there were exciting things. I remember getting into

LC cont. one of the squabbles over the Sci-D Degree, over supporting that program over at the University of Illinois.

EAR Take a moment, I think it's a very important issue, to talk about the Committee itself as a functioning entity. Let me just preface why I am asking the question, which you well understand..I think that one of the very important side effects , if you will, of the whole NIMH program has been the functioning of the various peer review committees, the training committees, etc. Not only did they of course do a superb job evaluating projects and to have exactly the perspective which you just voiced, recognizing that in some instances, there were some things that aside from quality you had to give some support to for, other reasons, but the issue of quality was always paramount, and I think the Committee members were always extraordinarily hard working, extraordinarily gifted and extranordinarly competent in collaborating on making decisions but over and above all of that, over and above the fact that it was a status symbol to be on a Committee, over and above that was the thing which everyone realized and yet I think it is terribly important, is that those committees served as an incredibly competent scientific communication network, so that it was a parable that was going on all over the country once you started to serve on those committees you;d come home, and there was a ripple effect, every committee member had this kind of impact. I think that's very important. Can you talk about that from your perspective?

LC I am thinking that I was proud to be on the Committee. I was proud because there were some people there that were incredibly bright and knowledgeable and capable and sometimes you'd see the full working of their minds as they tried to solve problems or work things out, and it was exhilarating to see the operation to see the perspective. I was thinking of Dr. Blum from San Mateo, who was one of the committee. That man was light years ahead in perspectives. I was maybe at the Pre-Bacalonian age of Public Health and he was way the devil out in the Star Wars type of tomorrow. Te see him think and reshape problems, I don;t think we were able quite to catch up with him. He was so far ahead. It was a perspective. You know, a guy like that, just marvelous to have around. Herman Stein, just a dynamo, such perspective and such energy and maturity. These are exhilarating experiences. You come and you look forward to just to meet with

LC cont. them and have a chance just to visit with such people, all experienced and they came from different fields, and so on. We had a Dr. Anderson from Buffalo who was an educator, a very very able fellow. It was great to have them just throw in people like Don Klein, who of course had had all that experience with Lindemann and Wells dating way back when and had so much perspective. It was nice to come together with this group. It was a nice challenge.

EAR How did you see this staff operation in terms of the committee meetings?

LC Staff is always with a group like that a very tough job. It's an incredibly tough job. It's a question of trying to exploit the talent, and trying to get as much wisdom as you possibly could and at the same time there were some damn practical things that had to be done and had to sort of bring the thing together and you didn't want to obstruct the Committee, Ralph, I felt, was kind of a simple, direct honest kind of guy. Sam, on the other hand, tended to be a little loquacious, a little hyprovolic and to get him down, I think Ralph was a good antidote for him.

EAR When you came in, Ray Ballester was already gone?

LC He was already stepped up. He used to stay with me. I knew Ray from the time that he had been a graduate student at the University of North Carolina. Then he went over to Vanderbilt where he had his degree and he used to come over and sit in on some of our classes at Duke. We had sort of a family type of thing there. He was really very very warm. Ray of course was a very skillful person, very skillful, but I lost touch with him recently.

EAR He's no longer with Case Western Reserve where he was Vice Provost under Herman Stein. He was there for some time, and then Herman left to become research professor, and Ray was acting, it was too much for him, and he went from there to head up a community mental health clinic and I have lost touch with him in the past couple of years. I'm not sure what he is doing. I think he may still be there. His wife has a degree in law.

LC I'm glad to hear that. Herman asked me to come out to Western Reserve and that was very flattering, and George Albee asked me and the two of them were in a little conspiracy. I'm as bad as Norm Garmazy, I suppose. I don't change very much. I don't move so easily.

EAR Well, this is a lovely place. Well, O.K. that's

LC The pilot projects itself I found to be a mixed bag. I liked many of the things that were forward looking, a lot of it was very grubby and still needed to be done because there were certain political pressures. Somebody good hearted and hard working wanted to have this project and wrote their senator and so forth, and the senator would write, and at least you had to go and do a site visit and so we turned down a number of things like that because we couldn't see that there would be any spread to the thing. The notion was limited to that particular request. We tried to keep in mind the perspective, but you were protected, and to some extent we were anonymous, we could say what we wanted and on the other hand you didn't want to create an impossible dilemma for staff and for the entire executive group of NIMH to be fighting with people like Kennedy and so forth, if it was a Catholic operation and it is was better to leave it and so on, and so you were really very much concerned, that you were always thinking there of long range perspective, what/s going to make a difference and how to guess best as to what was going to have a residual that would pay off. To that extent we did have a number of ideas. I found myself in kind of a quarrel with the people in psychology and I remember we fussed with them while we were there, feeling that they were especially stodgy and that they were unwilling to explore different avenues .

EAR Are you talking about the staff people, Joe Spiesman?

LC It was more Stan. I think Joe had already moved up to ..behavioral styles. I don't think I bumped into Joe on that very much. I think it was mostly Stan Shneidman. He was reading the mandate fairly straight, which was, look, you've got a commitment to doctoral training and we were playing along with new models. That was the day when we were beginning to play with para-professionals. And how do we approach alternate ways? Is there a place for the technician, what do you do with other ways ...It wasn't Stan, it was the study section . I suspect at this point, if I were in that operation now, I would have moved from a joint meeting so that we would raise hell. We were slowly finding out where some of the constraints were and some of the limits were. I don't know whether it would have done much good, but I felt at the time and I feel now that somehow there was much too much stodginess

LC cont. in psychology, which worried me. There was a s much in psychiatry, but that didn't worry me.

EAR Alright, let me ask you a general question, because you raise a very important point. Now we are talking about the mid towards the late '60s by which time NIMH was almost about twenty years old. What is your feeling, do organizations after a number of years and when they grow to that size and when they amass that amount of background, of work and responsibilities, is that part of it?

LC I've worried about that a great deal. I've worried about it in terms of my affiliation here. I've been here about fifteen years, it's a chair, and at the same time, something isn't right, you know, the vitality, you've got to change, you've got to do some things and so forth. On the other hand, I've had another experience coincidental with the things I'm talking about. I've spent some time with the Peace Corps as an old field selection officer and I came in really early, when Lowell Kelly and Nick Hobbs were the first couple of people and they needed some folks, they asked some old timers if they would come..

EAR You worked with Joe Colmen?

LC Ya, yes indeed. I was with it for about six, seven years. Shriver had set up a rule that nobody would stay more than five years so I had enough time though to see one transition and so i've been puzzling about just the kind of thing that we're talking about, do you maintain the same operation, there is perhaps a lowered level of activity, you know those observations about ancient rats, you give them a new mate and you increase the amount of, a little change is probably not a bad thing, from the point of view of enlivening the activity. But what worried me was that as I watched the transition in the Peace Corps at the end of five years a new guy came in and the organization regressed five years, maybe four and a half, and it was almost as if the organization was never going to get more than five years old, what challenged me, what I was never quite able to figure out is how do you maintain the wisdom and keep the level of activity and excitement up, how do you combine the two? And that is really where I puzzled. I don't want the organization just to be five years old. On the other hand, there is a business, just yesterday Tina and I were talking, and saying you know, the idea of change here, and the excitement keeps people going and it;s a good thing. So how do you combine the two?

LC cont. I would say offhand, then, that just because NIMH was 20 years old is not necessarily a bad thing, or 25 or 30 years old. It's how the internal structure works, to what extent is there a constant revitalization of the issue, I don't know, with a guy like Felix you have to change your time. You may have to be talking of 50 year intervals, because he had the energy to carry it on for many many years. But for other people built-in turnover is not a bad thing. on the other hand, you want to develop a role and posture for keeping people on so that you can keep the wisdom there. I'm not sure about the structure, how people can do that, but I think it's important. I'm just thinking back to the old days in the earliest years, you had some resident people who were not necessarily the directors of the NIMH but, who was the fellow who did so much ^{not} in training and psychiatry and everybody (Vestermark), now he was/in sort of a direct line relationship but he was kind of a resident senior person who carried a , transmitted a wisdom that everybody seemed to get so much out of the fact that he was around. And then the fellow who went down to Witchie, Ray Feldman, and he was one of the fellows who was around for a long time. I'm just thinking, somehow, to incorporate a way of capitalizing on wisdom and at the same time to maybe keep an energetic leadership and if you get a guy like Felix, to keep him in charge for longer, how to do that sort of thing.

EAR Do you have a solution for how to find this kind of people?

LC Not how to find them but to make sure that you keep them in the right place. To some extent, I suppose you have to reflect on this and say you may have been damn lucky. You were damn lucky at NIMH to have some of the team. I didn't know enough about the way Bob worked or the internal thing to know whether for example that somehow certain people were pushed aside quietly and stuff like that, and other new people came in. That's also a skill, to know how to maximize but very few people had the sense that they were being on trial, that didn't spread. Curtiss Southard, I think, might have been a little bit miffed but on the other hand he ended up with a very fine position as the Director of the Montgomery County Community Mental Health Center, which is probably about what he wanted to do and really he had a very significant operation there and he was doing it, and OK, good. Whether he was the kind of person who ought to be in the spot to set national

LC cont. policy and national examples, that might have been a question.

But how to do this, and gracefully. Well, I suppose they were very lucky to have people like you around, have other people around who kind of, I don't know how the hell you did it. I was not aware of it, you know, I was aware that things were going, that people stayed with the organization, that nobody seemed to be pushed out and you brought in people and you sort of capitalized. Well even some of your field people, your field consultant people like McNeill and Bell and Calhoun, they were good solid people.

EAR Anything that we haven't touched on, and all of this discussion has been very very helpful, anything else that you can think of that perhaps might be added to the picture.

LC Well, I just wanted to be grateful to you folks for just supporting me in some research too .

EAR Well, that's a two way street.

LC That was a period when I was much more actively involved in research. When I came to Duke I decided that I was going to play a somewhat different game. I was oing to work on staff development and see if I could be a senior citizen and try to get this group, they didn't have any money here, so we took assistant professors and people fresh out of school and we tried to create a group here. I don;t know how distinguished they are, but they've been solid. They've been solid citizens. So mostly I've turned over my research to them, if I had an idea, and maybe there were probably good reasons for that, maybe that wasn't my best thing anyhow. But while I was at Duke I was very busy and NIMH supported me and I was able to work on some of the things on anxiety and got a fellow by the name of Charlie Speilberger involved in some of the things and he's kept on running with the thing. a very persistent fellow about that sort of thing.

EAR You know Charlie spent almost two years at NIMH. That was a very mixed experience for him. You know, I want to ask you one question. It's a leading question because I think I almost know what the answer is, but nonetheless, to get it on the record, Do you think the people, aside the individuals like yourself who started with such a clear positive feeling about NIMH and were wooed by NIMH and continued to have close..do you think people have a sense of family by and large nationally about the NIMH, or is that a very limited sort of thing?

LC cont. Well, let's see. I had a telephone call yesterday and the Chair of the Council of University Directors of Clinical Psychology and there's a fuss going on with NIMH right now. There's a fuss about support and all the clinical directors feeling somehow or other Stan and they, and they have a quarrel, and what the hell is he doing, and what's he doing with our money and so on. I don't know, is it family. That's clinical directors and the folks who have always been in those jobs have been people, who in most cases, you felt pretty close to. (Telephone interference)

EAR As family, and I think you said that the directors...

LC The clinical directors have very much as, I was very much impressed with their saying, Well, what do they mean by taking our money away, should we protest, and how should we organize, what should we do about it. Usually it had been a direct line, and they had called Stan and talked about it, and they were wondering who is restricting Stan's operation, because there had been a change there, and maybe we ought to be calling them. I don't know, there was kind of a sense of that, and there were some people who were in managerial relationships, to what extent it spreads beyond...

EAR Well, I can tell you that people who have had NIMH fellowships and traineeships have that kind of feeling of identity, like people I was one of the original VA trainees and I always had that feeling about the VA, it was part of my past, part of my history, and it's a minor thing in one sense and yet it's another small part of what makes the fabric of the organization so to speak. It's not an impersonal sort of thing. You had a relationship with this organization.

LC Oh, yes, and I still feel very..I keep on mentioning this, that and the other because there have been myriad sort of contacts there. But it's been something very much a part of me, but I've had perhaps a little bit more than a lot of other people. I've always talked in these intimate terms about NIMH to our students to other people

EAR OK, I don't want to turn it off without giving you a chance to say something negative. You alluded to the conservatism, to the psychology, anything else?

LC Well, in recent years, if you did have to go back to the last couple, three, four years, we've been fighting with Bert.

EAR No, that's stopping at 71. Because I really think that you're

EAR cont. talking about something that is now so complicated, that is so fraught with present politics and national constraints--and Bert--

LC Well, Bert himself, for example, happened to be here the very day he got word about the formation of ADAMHA . He was visiting here, somebody had invited him in, we were all in with the vice-president and he was reacting with the first blow and trying to speculate about the thing and saying, I'm going to stay here, I'm going to stay here, because I think this is important and I'm committed to it. On the other hand, he's been marvelously resilient and has managed somehow to keep alive but in the process he's had to go right and left and right and left and he's been trying to wend a path sort of among a lot of forces, and he's terribly -- now that it looks like they're bringing in somebody to run ADAMHA now (EAR - Jerry Klerman) probably a very capable guy, and that puts a different cast to the thing, when they're taking sort of politically affiliated people is one thing. But Klerman could just as well be Director of NIMH, so now _____ that's a different game, And we're also interested in national shifts of policy that are very important, and we in training really question whether pre-doctoral training is going to get any support at all, we in psychology are very much concerned with the issues of national health insurance, what's a national health scheme, will we have a piece in it, and if we have a piece in it will be treated like other health professionals. We haven't gotten ourselves in, so we don't know quite where we're at, and part of what our fuss with NIMH is to hold on to what we have and I'm not even sure of what options Brown and the rest of the boys have for that sort of thing. But we fussed with them and so forth, and poor Stan Schneider sitting in the middle of this sort of thing I don't know how he's managed to stay there, and he's gotten so windy about trying to explain everything that a lot of people get irritated about everything, but it's rough. I just think that in the last ten years he's been with reducing budgets and somehow he's managed to stay there and to fight at any point where there was a little hell. I think Keisler, and what we're trying to do now, as out of this organization, we're saying, well, we too want to get in on the political scene, we want to go to the advisory group, so the Council of University Directors is sending a

LC cont. representative, Bob Karson from Duke up there, as our representative and I've been fussing with Tom Plaut and saying we want our notice of the meetings, we want to know what the agenda is, what the material is and so forth. Well, you can't get in on the private stuff, alright, we can't get in on the private stuff, Let us know about the public ..We want you to know that we're interested and we're just finally getting to learn a little bit about where the political action takes place and it probably doesn't take place at the meeting. It takes place outside the meeting and we don't know enough about it, but we want to get in on the thing so at least we're making... alright, so they'll play with us a little bit and we'll wear out. But in the meantime, we're pushing Chuck Keisler and he's gone up there and he's making speeches...

EAR Well, he is a representative, as Ken Little was before.

LC But I gather he always doesn't get into the confidential parts of it.

EAR No, they're not voting members of the Council.

LC But I gather at the last meeting they asked him to stay. They wanted to raise a few issues. But in a way, ~~to one~~ pushing sort of means, well, anyway, never mind you flies, we'll take this guy instead. Maybe we'll push him a little bit forward. So, there is an attempt at a new kind of game with NIMH that we had not played before.

EAR Well, and in that sense, for better or for worse, it's a new NIMH.

LC That's right. It's a very different organization. When they started to take out the Drug and the Alcohol and just turn the whole thing around and try to emasculate the operation and change its responsibility and change its allocations and authority, etc.

EAR Well, I'm still sentimental and opportune to be happy I'm not there anymore, romantic enough, sentimental enough....

LC I think that was a wonderful 25 years, maybe not all of the years there but I've often reflected, I was damn lucky to be affiliated with these exciting things and during those years, I think, the thing was wide open and there was lots of room. You made a lot of mistakes, you didn't rub people so quickly. As the field has gotten a little tighter, less option, there's more friction a little thing now and you're in a squabble with somebody, or somebody is raising hell, but we had lots of room, we could make

LC cont. all kinds of mistakes and we'd be, like coming out of some of our rural counties here, there isn't a physician, there isn't a psychologist, there isn't a counselor there isn't a nothing, you know, You can't do much harm, you know, and if you do any harm, it's going to take a long time before, ..and there's plenty of room, this whole area was wide open and luckily we did many of the right things because we still have many good people coming out of these programs and things are happening, and we're even getting out good ideas out of some of the smaller places. This is to me a very interesting thing. You might send millions to Harvard, but your good ideas don't necessarily come from there. You go out to Idaho and you find some damn little place out there, and sons of guns, they have a better solution to their problems which you can use, and you find it all over the country. That;s been exciting and it gives a lot of humility and so on. While you may have lots of rooms in a rural area to make all kinds of mistakes, you can also find lots of innovation there and damn good ideas.

EAR Well, this has been very helpful and I appreciate your taking...