

Dr. Alan Miller

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AM Do you want to lead me at all?

EAR I don't really think so, Alan, except to say that what I would suggest is that you try to think of incidents or circumstances in your own involvement with NIMH that you think are related to important decision making events and/or that illuminate your own kind of insights into NIMH. But I think what would be most interesting since you're a key person is really to talk about how initially how you first got involved. What was it that lead you initially to think of NIMH and the public health service?

AM In terms of key decisions and my observations of them they will be necessarily separated often for long distances in periods and time. Obviously, I wasn't a key person to the NIMH in its beginning. Because I was beginning as it was. Infact, I joined this endeavor before it became or was known as NIMH. And, I think some of the imagination and some of the literally vision that a few people had back in '46 and Bob Felix was certainly among them was the most---the one who was singly concerned with the development was actually the person who involved me with his enthusiasm in this---just as it was beginning or even just before it was beginning. I was already in the public health service, although not expecting to stay. I had gone in for 2 years after finishing my internship and I was clearly pre-disposed to a career of this sort because I had been interested in public health as well as clinical medicine but actually decided that I did not want to be a psychiatrist. I actually decided that I was interested in psychiatry but the alternatives at least those that I could perceive for psychiatrists did not interest me. And, NIMH really stood for a third at least a third alternative, which had never occurred to me or very many other people at that time. We had a strong department of psychiatry

AM(cont) relatively at the medical school. Prominent people with lots of exposure.

Most of us who went into psychiatry from that class decided many years afterwards...

EAR Mention the school for the record.

AM NYU. Sam Wortis was the Chairman. He had some good people there. He had managed to get some time in the curriculum. Most of us..the one thing we were very much unanimous about when we finished medical school was that we weren't going to be psychiatrists. The alternatives, of course, were the familiar ones. You could decide to either become a psycho-analyst and devote one's life to what seemed to be at that time, despite its rationalization, is a very small group of people as patients and if someone was in medicine at least in part because of some sense of wanting to make a difference that didn't - at least didn't satisfy me. The alternatives were public psychiatry which in those days meant large state hospitals and we didn't really know much about large state hospitals but much of what we know about them now is much truer then. They were not attractive places for most people professionally, fortunately they were for some but they weren't to me. And I suppose there was another alternative there was the private practioner who saw many patients - true - but saw them in what seemed to be a grotesque way. This was before the days of the new psycho-active drugs. This was the era of the new technique - the electric shock therapy which was being widely indiscrimately used by some practioners in their offices. Well, in any event none of this interested me and I had no intention of staying with the public health service. The chance was that Bob Felix had recently been appointed director of what was still called the Division of Mental Hygiene. I think my phenology is right. And I was running a rapid treatment center in Richmond, Virginia. A small 100 bed hospital and was having a ball. I had never, never had an opportunity or experience like that before or in some ways since. When I learned that that is what I was going to do I was

AM (cont) quite dissapointed because somehow didn't want to go to Richmond, Virginia and I didn't want to be a hospital administrator. I didn't want to do any of those things. I couldn't have been more wrong- in many ways it was a fascinating experience which I won't dwell on now and it became a very exciting place. Exciting in terms of the way we were approaching the patient care with the way were were approaching...a lot of interesting an innotative things were going on. We started a lot of research, a lot of training programs we were involved in a public program which, incidentally, in retrospect had a great deal of preventive probably a great deal of preventive consequence for mental disorders. At least we were treating early syphilis for the first time. Penecillin was new and we had it and we were using it to treat early neuro-syphilis and so on. I think it was partly because Bob Felix, who had a new division and very few staff and not much money and lots of time and of course, a enormous amount of energy was scouting around for people. And he was a school mate - a medical school mate of a man who was in charge of the VD program and that part of the country for the public health service a fellow by the name of Bob Zobel. And Zobel said Bob you ought to come down and see that place and meet that fellow. I was not disinterested in psychiatry as a field. Infact, I had decided that I was going to take some training in psychiatry it was just a psychiatrist that I didn't want to be. And so Bob Felix came down in the spring of '46 early summer of '46 and in a way which I now was characteristic - took me over. Spent about 10-12 hours and we talked it was one of the most exciting single 12 hour period of conversation that I have ever had about the possibility that psychiatry and public health might somehow be-influence on another in ways which nobody could really very well imagine, even Bob Felix. And at that time he was just trying to recruit people to this small band. And he was willing to promise almost anything. And, more in the spirit of being uneasy about this than driving a hard bargain I kept saying- telling him

AM(cont) some of the things that I wanted to do if I were going to go into this field. And he kept saying OK you can have it, all right you can have it. He did have, as you know, or you probably know, the nick-name already in the public health service in those days as "promising Bob". And it is not that he didn't mean his promises, of course, he sometimes didn't remember his promises. But at the end of that day he at least had given me something brand new to think about and I have always been a sucker for something that is utterly brand new in terms of a dimension that had never occurred to me before. And, we tentatively agreed that I would, after I had finished that assignment that I would have a residency in internal medicine because somehow I had the feeling that you had to be a real doctor and that was part of being a real doctor no matter what you did and that I would also get training in psychiatry and I would get training in public health and then I would have a series of experiences in learning and a variety of new experimental programs and that all and all I could count on a seven year - seven fat years in which I would really be given a chance to develop myself even as the Institute was beginning to develop. And then he left and I stayed behind and my life was literally changed. I might add that I spend much of the next several years debating with myself arguing back and forth about what this all meant. And I say with myself advisably because there was almost no one else you could talk with about this area. That which has become cliché now was really startling then - community mental health -- what the hell-- that was such an extraordinary position and when someone - when Ernest Gruenberg somehow had found his own way into some similar areas, editing a book which came out as I recall in about 1950 not too many years after called the Epidemiology of Mental Disorders. It could have been a best seller on the title alone. That was racy it had heads spinning. Because epidemiology and mental disorders had never really been brought together in the same sentence. But there was a tremendous newness and everyone asked my concerned colleagues and family and wondered what the hell I was getting

AM(cont) into. Well what do you mean public health in psychiatry, how are you going to prevent anything and how are you going to change anything. The trouble - the people and I were having in applying the familiar models in terms of what people thought of to a human condition as varied and as broad as that which might include under the behaviors of the mental disorders just was literally a unknown area. Getting back to myself and the state of the Institute at that time, I didn't hear anything for several months although I went ahead on that basis and made some decisions. I had gone into the regular corp - the public health service which I had not decided to do before that. And as the time approached when I thought I should be hearing something I heard nothing I decided to look into it. Being in Richmond which wasn't too far from Washington and going up there periodically as we did for various meetings I hunted down the small offices of the NIMH, I think it was 12 by that time. And found that Bob Felix was away as he usually was in those days or often was traveling the country but the man who was there holding the fort was Dale Cameron who had never heard of me but was happy to meet me and aware of his bores habit of saying things which he meant but then forgetting somehow to make a note of it or doing something about it was perfectly willing to believe my story, never doubted it, checked it with Bob and I think he reached him as I recall by telephone and told him that I was in his office and then having gotten the OK proceeded within the next hour to make all the arrangements which was essentially laid out in detail and in practice what Bob had promised. And that ...I think they were a good working team at that point. Ironically, as you probably will get much more about the history of that relationship than I know. I saw it from a peculiar vantage point latter on. Because Dale Cameron by chance became a class mate of mine at the school of public health and Hopkins. So we saw a good deal of one another and through out that year we would commute back to Bethesda where his family still lived and I

AM (cont) know personally that as late as a week before he was to return to duty he expected to return to duty and the position that he had left that had been left vacant during his absence and did not really know until he got back to work that he had somehow been extruded. And that I suppose is another story and I don't know all the things that lied behind that. I do know one thing that Dale Cameron in all the years I knew him afterwards never once made any public complaint about that. Whatever his feelings and I think he was deeply hurt, he spent about the next 2 years really floundering looking for some place until he eventually went out to Minnesota where he became a state commissioner for about 6 or 7 years before he came back to St. Elizabeths. But he never complained he was and saw himself as a good soldier and that was the way it was and he wasn't going to let anyone else know how he felt about this. I think probably the next point at which my career really intersected with what you could call the history of the Institute was not until 1950 by which time I had had a residency in medicine for a year in New Orleans. I had had 2 years of residency in Fort Worth and I didn't think any of this is terribly germane to the history of the Institute and was at Hopkins getting my Masters in public health with Paul Lemkau although as it turned out I getting my Masters in public health and also spending some time with Paul Lemkau because it was the oldest department of mental health and mental hygiene in the school of public health in the country at that time, I think. But it was still as we saw it really not accepted into the fabric of the school and it was almost a sub-division, quite a separate entity. And, relatively enough within the school itself probably unimportant at least as far as we students were concerned. I had met during my two years at Fort Worth a woman who was at that time highly respected as a clinical psychiatrist-child psychiatrist, close friend of Bob Felix's - Maybel Ross. She had come down and spent several days with us residents telling us about child psychiatry.

AM(cont) And I'd - she must have somehow identified me as someone that she thought ought to play some - that she wanted to have some further contact with or thought the Institute ought somehow would put in a useful place and while I was at Hopkins during that year. Again I cannot remember exactly how it came about she contacted me and asked me if I was interested in considering going to work with her afterwards in a place that was then called the Prince George's County mental health Clinic and then in College Park I noticed that you have some reference to that in your outline. As you know the Prince George's Clinic was to have been 1 of 4 such to be established in various places in the country. Two of them were actually established. And only 1 survived, the other was at Phoenix. The concept itself was so different in so many ways - in ways that now seem common place to almost anything that was then in existence around the country. That the imagination in having thought about what it might mean and to get it under way and I think again you have to go back to Bob Felix, it was really quite remarkable. It - Prince George's County Mental Health Clinic first of all what was different about it? There had been child guidance clinics I suppose of some form or another since the ones started out in Denver by Judge - what's his name? in connection with the juvenile court back in ...

EAR Judge Baker??

AM No, Ben The name slips me for the moment. One of the early court related child guidance clinics. And of course, there was the Judge Baker and I don't know when that was started and the IJR and the Commonwealth Fund Clinics starting in the lat '20's and NY State actually had about 30 traveling child guidance clinics - sp called. They - so the idea of having clinical services available to people where they lived was by no means an original idea, they weren't common but the idea was not original. The fact that it was called the Prince George's County Clinic in the first place with an idea behind it, noone is quite sure what the idea meant was almost unprecedented as far as I know. It was identifying itself with a particular population and in that sense it threw back to the

AM(cont) concepts that had been formed even in their poverish days the state hospitals. It related to a particular population. And this clinic somehow was to be the county's clinic and be like the other county agencies. No one was quite sure what it was to do but it was to, in a way, it was its catchment area. And it was to have citizens advising it. Again, that was not a brand new idea but bringing it together and somehow it was to demonstrate that by paying attention to the human development issues, working with the schools, working with other services agencies as well as seeing individual patients all of this was somehow to make a difference. And it was going to try to do some research about it. I don't think it would be at all fair to attribute to it more than that as far as what subsequently became the ideas of a community mental health center because in fact one of the most ---one of the things that it did not do --- and I remember how shocked it was to people when we considered doing was to establish a real sense of a flow and continuity with the hospital services, with state hospitals and I can remember the debates even within the staff there when we thought we would make an effort as we did and started to make contact with Spring Grove which I think was a state hospital in Maryland that served the same population. Where the patients to be discharged and seen at the center. The idea that they would be sitting in the same waiting room with ordinary people was so upsetting that finally it wasn't done. It was done much more unobtrusively. Anyhow, that was the place that I found was a very modest small program - Maybel Ross was the director and there were -- the idea which of course was pretty traditional in child guidance clinics was having the team - there was a chief psychologist, Charlie Alderman and a chief social worker, Herb Rooney and there was something new had been added and I think partly because there was a link with public health and that was a nurse - a public health nurse - a mental health nurse. That was a new breed that has just been named and identified. But when I got there....

EAR

What was her name?



AM

Adele Henderson then. She was very interesting, bright women. She was the widow of a public health service officer who had died studying a disease actually. She was the one as I went there I think there were 2 people on the staff and each one was contributing something - a strand of what ultimately became almost principle in the evolving institute. Although I think it is much too much to attribute to see these as tributaries. They were -- it is possible because I should say parenthetically that when I joined the study center it wasn't called the study center then, we used to go over to staff meetings of the NIMH and there were at that time - well the whole Institute could sit around one not very large table. So it is possible that ideas as they were exchanged during that relatively small group may have in some form influenced what came later. Adele Henderson was the one who was the first to get involved with groups or with seeing very, very sick patients in an out-patient setting and in their home who was doing a lot of - she was the one who started a mother's group and a baby clinic. Because she saw that this was a possibility at a time when someone was really paying attention of altering the way the kind of parents they were. And again, these all sound so very trite as ideas now but they were outlandish at the time. Charlie Alderman, his major insistence and it made him very unpopular there was that this place should be really much more rigorous. That there should be possible for research carefully research done in a place like this. Herb Rooney his persistent theme and again a note which is now actually has become part of the bureaucratic literally bureaucratic requirements these days of conducting business had to fight and he did continually that given the chance citizens know what they need. And worked constantly at the developing of this community advisory board. And I think that has been his pre-occupation through out his career - citizenswork, volunteers and so on. What else? Mean while as far as I was concerned there was a matter of trying to step up as fast as I could.

EAR I want to put in you said Maybel was in charge? When did you come and literally take over the Directorship?

AM OK . I came not expecting to become the Director. And I discovered shortly after I got there that Mayble was going to be leaving. I can't remember now what she left to do. I think...yes, I think I had been there a year and she left to go to the school of public health at Harvard. And another psychiatrist who had been working with her, Bob Faucet became the director and I think the general expectation was that he would continue to be the director for a while. Anyhow, one of the things that I wanted to mention was that the clinic was part of the community services branch. The only..the other activity of the community services branch--and again, I think this showed some real administrative imagination. The other major activity of the branch was the operation of the regional offices whose principle function then was to administer the grants and aid programs to the states. And, of course, you know about all of that. And, but the idea that these consultants were working with the states and of course, as you know, many of the states didn't have any community mental health programs and that wouldn't have had one in most cases if there hadn't been a grant which really was again for many as they began a fairly empty phrase. But this-- there was some federal money to start something and it all it really meant was that the state should be involved in something in addition to the state hospitals. This was the alternative. The way it was set up - jumping ahead a bit at least in my opinion - and I don't think it was by design that is creating some kind of constructive timent - the fact that the Institute at that time had a very strongly anti-hospital bias or at least an un-hospital bias. It never came to mind and that the regional office by and large were working with people who were concerned with community programs which were seen as the replacement for the answer to alternatively - another pan on the scale which as they grew would necessarily lead to the other one shrinking and so on.

AM (cont) And a kind of a presumption of ...when successful they would render obsolete all of the things that are perceivable. To some extent I think that kind of separation was even enhanced by the fact that the principle field laboratory that the regional offices directly had that they might have some influence over to us was a community program which really had very little to do as I said with the hospital population- many of the severely disabled mentally ill people of that area. Well, Bob Faucet surprised everyone by taking a position back at the Mayo Clinic in psychiatry were he had gotten his training before that and as you know, by the way, you know subsequently what happened. But there they were unexpectedly with a vacancy in the Director's position and there I was.

EAR This is early '51?

AM '52 I think. Yeah, '52. And I don't know how much choice they had as to who might have become director. Obviously, it was earlier than I might have expected to be or thought perhaps ready for earlier than they of me because that is a position. Remember Jim Loury was head of the branch then and he asked me to write some of my ideas about what I thought the place could be and should become. And I can't remember exactly what I said. I did spend a lot of time thinking about it, I had done a lot of thinking about it during the time I was there. And I had one..I had the sense that we had not only stayed at the same size because that was the appropriate size for us to be but also because there were ..there was something kind of stunting our development. There did not seem to be a natural course for our growth at that point. And I think that one of the reasons that kept standing in the way of some kind of further development there was there was something fundamentally dishonest about the way we were presenting ourselves. It wasn't intended to be such. And it really didn't matter as much back in '46-'47-'48 or whenever the clinic actually began that we were called the Prince George's County Mental

AM(cont) Health Clinic because there wasn't a chance in the world that Prince George's County was ever going to have a Prince George's County Mental Health Clinic. But it's very presence there for several years had influenced even Prince George's county and many other places to begin to think that this was an appropriate area of responsibility for a county itself. This was in the same era which produced such things within 2 years afterwards and perhaps influenced by it as the New York State Community Mental Health Act which was...not the first one of the first. Connecticut said it was the first but they were all happening around the same time. A state program for the support of county mental health programs and of course, California which followed very shortly afterwards and suddenly it seemed to me that we had suddenly..were standing in the way of Price George's County own development. But that we had a very powerful role that we could play. Having had several years behind us and having established what I think is a rare, especially if your going to see your role as having ..as being to scrutinize to observe and use this site for training and research. The kind of trust that that requires and the kind of comfort in your presence which makes it possible for people to continue pretty much doing what they were doing even though you are there. That kind of a possibility seemed to be uniquely present in Prince George's. Plus the fact that..since it really was a identified with the well being of the county could really most benignly help that county and itself and the Institute and play a larger role throughout the country. If it moved just to the side of the Center-freed the center really of the political action or governmental action to vacate the name if nothing else to work with the county in developing its successor. And then staying in that location and using that one as a much more rigorous and lively center for training research in the areas of service not the first time but..by no means not an unimportant occasion in which the NIMH kept trying to bring together concerns for service even if it wasn't dissolved and research and training as having been continually in interplay. And this was

AM(cont) one of its first experiences at it. It also freed the now new being named mental health studies center to grow in rather different ways. And as you know these for quite a long period of time genuinely flourished. I don't know what its present state is. My own history of it, of course, at that point my first contact with Stan began about 6 months or so afterwards - a year afterwards. I don't now remember exactly how Stan became aware of us or how I became aware of Stan. It may have been when I went down to Lexington where he was a resident to give a seminar. I did that once. It may have been something he heard from Mayble or Bob Felix or somebody, I don't remember. I do know that when I met him he seemed to me to be a ideal person to join the staff and to be one of the key people around which would grow. You know his background so I won't but for the next, I am not sure how ...what year he arrived. You probably know better than I - '53 maybe?

EAR Yes, early '53.

AM Early '53 and for the next ...through June '57 him and I worked very closely together and some others joined the staff quite a few people passed through and I think had considerable influence on a number of developments many of which I am sure I will forget. But Jim Osberg came in and joined the staff. And, of course, he stayed on at the Institute in a variety of capacities. Lymond Wynn spent a year or two there. Others..I'm trying to think... lots of people passed through on relatively brief occasions. Perhaps one of the most significant in terms of what it stood for and how in the number of lives it touched was that we were given an assignment of educating a young statistician by the name of Anita Bond about what an out-patient clinic was all about. And we spent about ---and she learned basically from the kind of record keeping system that we had evolved there and on it was based a nationwide system for collecting for the first time information

AM about what was going on in this country in other than hospital psychiatry. The fact that we had worked on such..at the study center itself reflected our need to observe ourselves as carefully and as broadly as possible and we spend a lot of time in that kind of development in basic methodology. I can't say we finished as much basic epidemiology research as we should of or wanted to. We did start some rather interesting projects, some of which, I think, were influential even though inco<sup>mp</sup>plete like the epidemiologic reading disability study and some of the others. There was some other clinic practice changes which seemed so revolutionary then and I really think were shaping and they had to do with ---I really thing they were expressions of the fact that a center like the Institute and I think this is one of the things that you mean when you say public health decided that a health oriented groups of professions had to do more than be passively the receivers of the problems. They had to take initiative, they had to look at populations and try to make set priorities . There was an awareness that there was no such things as a ....there was no action without a choice - decision to do --not only to do something but not to do many other things. The basic clinical mode which psychiatry and other clinical professions even today, I think, tend to be guided is that they will do as well as they can for anyone who finds his ways to them. Without really stopping to think about is there any responsibility for those who don't and trying to figure out which is which and what influences them. They recognize it as a ethical dimension and every clinical decision to see somebody. Because it meant they were not going to see somebody else. And it was that kind of a feeling which lead us to challenge -relatively minor and yet had been orthodox point in the practices of mental health clinics. Psychiatry , of course, then far more than now although the problems obviously aren't behind us were so insecure about how it was regarded by the public and this got translated into the notion that --- well, I think many of the techniques

AM(cont) that were being used for psychotherapy - the techniques seemed in those days as it was said to depend on the motivation of the person. Which meant if someone wanted you and wanted to get well and came to you voluntarily it was only then that you could do anything for them - whatever that meant. Motivation became a very important thing to measure and to respond to and to hide behind. And in fact, lots of clinics use to measure their success, their acceptance by the fraction of their patients who choose them. So that if a clinic could say everyone who comes to us comes of his own free will and has chosen us and is beseeching us that means we are doing an excellent job because obviously people know and are not ashamed to come here - they trust us. And there were some positive things about it. But they didn't look beyond that person. And the result was of course, there were several results. One was that, of course, they were very quickly accepted much more than people thought they would be and the classic problem of the clinics in those days was the waiting list. Which in those days use to run two years or more. And everyone thought that was a good thing. In a way it wasn't good that you couldn't see people but it was good that there were so many people- it was a demonstration of need and desire. And that was the way it was at Price George's. Which was crazy. Here you are trying to serve a county working..somehow use your limited resources so it makes the most sense in whatever..in terms of what that county needs as well as to recognize the desires of people who wanted to come. And like most clinics found that when people did get to them as often as not it was either now too late or unnecessary or never was appropriate in the first place and so this outlandish idea came to us that we would turn us inside out and we said we wouldn't take anybody who has referred himself. Which was in part a device trying to involve the other agencies in the community. Now there had to be some ways of doing this so that people weren't going to be caught in some kind of a game between practioners. So there was an excessability.

AM(cont) People could call and the center stood by and would help them find someone who could help them get in. And at sometimes it probably was busy were it meant that they just went down the street to the doctors and said yes you go there and I will call. But in any case they had made contact with a physician or the public school teacher or somebody. Now, whether this was a write or a wrong certainly has presented—I'm sure it had its flaws but it was the thinking behind it that I think was characteristic of the sort of thinking that was going on at the Institute, as well.

EAR Were there tangible circumstances that occurred which reversed this kind of philosophy? Was there a point at which you recall that you and the people at the study center said hey, wait a minute what's going on, let's really take a good look at the criteria that we used before and see whether it indeed is causing problems. Was there a specific point at which this switch in thinking occurred or did it just kind of grow?

AM I can't remember a specific event.

EAR OK.

AM I ..it grew on me fairly quickly after I got there. It bothered me that there were so many unknown people waiting to be seen. It bothered me that we were really not working with other agencies in a real collaborative way. Even though that is what we wanted to do. The first real process was a matter of convincing the staff. Herb Rooney was the first very much to see it in the same way. Charlie Alman was basically the critic on our hearth and so he was bound to be sympathetic with anything that criticized the present way of doing things. But others on the staff as Abe found this very much harder because it violated ---it still does. It violates a very deep trained impulse on the part of clinicians that you --when someone asks for help you help. But help means something direct and the fact that saying yes I will see you was at the same time saying to lots of other no I won't see you ...I don't know I really can't



AM (cont) tell you <sup>what</sup> ~~what~~ it was that permitted this sort of thinking and that atmosphere to go on. But I don't think it was just chance that it happened in that kind of place or was it the interactions that were going on with the NIMH staff which wasn't physically that far away. I don't know! We did of course do this in an experimental way. But soon afterwards became not quite as rigidly as we had did originally basically changed the way most clinics thought of themselves and the...I think it was more than likely that some of the sort of thinking that took place within the mental health field than in other areas of health partly because something which nearly antedates the Institute and helped to shape the fact that it was the first of its kind and remains in many ways still the first--the only one of its kind. That there was a long standing tradition of public responsibility for mental disorders in this country which meant a habit of thinking about how do you deal with limited resources and huge problems. And that it was part of the atmosphere in which we all worked all the time. And that really isn't very precise about how this particular decision was made and maybe I attached more importance to it, I am sure I do in retrospect. But I used it really as an illustration of a kind of thinking that was going on there. Well, as you know it did grow and removed into larger quarters and in turn they moved after I left to even larger quarters. And when I left to go to England Stan became the director. And it continued to grow in terms of numbers. It grew to perhaps the mid-'60's. I don't know, finally occupying a building of its own and so on and so forth. But..and I really can't evaluate its course and influence afterwards. In terms of numbers of people who came through and spent some time and were influenced by the kinds of issues, discussions, agrumentations that we would have with each other....

AM(cont-side) Anyhow, it was at that time the Institutes only outlet. The Phoenix Center

2

as you know for reasons I don't fully understand never really flourished. It

AM(cont) had a series of problems. And finally the last director was Bob Hewett. And I think he was the director when the decision was made to close it. And I know that at that time felt very bitterly about that. It never really followed the same generally pattern that Price George's .

EAR Well let me go back a moment though. What were the internal mechanisms that provided you with the kind of staff feedback. Obviously, there were interactions among the various staff persons. Did you have weekly staff meetings? Was it primarily your interaction with the community services branch and the reporting of the program development in that context that provided the feedback. What...

AM You say feedback to the NIMH?

EAR NO, feedback to the study center about its operation. What kind of self-reflective mechanisms in a formal sense did you use?

AM Within the study center?

EAR Within the study center.

AM Well, that goes back. It wasn't very large when I left. So, you didn't really.. I think when I left...

EAR It was automatic.

AM Yes, much of it was much easier.

EAR Yes.

AM I think when I left..it had grown to a professional staff of maybe 12 or 15. By that time I think we had brought in a number of different disciplines from sociologists and so on but it was still small. And so one ran into one another. There was thought given at that time. It ranged from the usual forms which were to have meetings which were devoted not only to our clinical concerns but also whatever projects were going on. We tried to make it physically possible. This is something, by the way, that I learned from Stan among others that you need anatomy as well as the physiology and he was always very conscious about design. And when we moved out of our really the really make shift quarters in which the

AM(cont) study center has existed for its first 5 years. And had a chance to design some space of our own. I doubt whether it would have occurred to me that we really have it in the beginning wired for sound so that we could record from any room so we could communicate easily so that we had a good conference room, space with ..so that they could be observed and could be taped and probably the best at the time the best tape recording equipment anyone in Price George's County ever saw...that sort of thing. And I say this kind of frivolously there was thought even in the design of the space that there be a possible easy flow of people and places people could meet and its few mechanical impediments and so on. So it was thought about. I can't recall anything particularly original about the way we went about it.

EAR You weren't self-conscious about your being the first and only and therefore- let me just tell you the direction in which I am going. Bob said to me that very early on he had thought about the fact that the NIMH needed to look at itself in terms of the dynamic process that it was involved in the whole issue of dynamic process and there had been an early but avoided effort to have an in-house dynamic historian. That wasn't the phrase he used but infact Johnny Clausen was suppose to serve to take a look at the sociology of what was going on at the Institute. Now, Johnny Clausen said he never really did that although Bob related that that was what he had in mind. Did the study center have the same kind of self-consciousness. Did you see yourself in such a way that it seemed worthy while for someone to look at the internal process and serve to provide a running commentary on it?

AM Not really.

EAR No. OK

AM I think we knew we were unusual infact we identified --were identified with a relatively small group of similiar--centers with some similiar characteristics and we would infact we tried --we took some initiative ourselves actually to try to arrange periodic meetings with other like us. We knew that

AM(cont) with that kind of special quality for example, we arranged a meeting with the Wellsley Project- Linderman and I think it was quite a good meeting although I don't think we had more than 2 finally. And Linderman himself didn't seem to be terribly interested. I went up and I think other of the staff did up to Syracuse where Ernie Gooinburg at that time was running his research project. A community research project. And there were one or two others that we knew were like us. But I can't say we were...we had the opportunity for a kind of reflection on our work but our work was not seen to be ourselves. At least I didn't think at least my recollection is. If it was so it was only from time to time. The Institute itself as I said by that time was till very small. It didn't really begin to take off geometrically until the clinical center. And the branch - the community services branch was one of several branches none of them very large - the training branch and you know - you obviously are talking with people from each of these and you know what the interactions- both the cooperations and also the conflicts and competitions and just the fact that the people are pre-occupied each with a different area. Then there was the research grants - I'm trying to remember who---it was John Eberhart:

EAR John Eberhart, right. And then Phil.

AM And then Phil, right. But there weren't many people and there were more occasions to meet. I think we probably got over, I did at least, to Bethesda - T-6 I think more often to meetings than subsequently people from the clinical center got over to ...what's the name of the building?

EAR B-20?

AM No the one where you and I were when I came back in 60..when we moved in '62 out of that temporary ..what was the name of that..you know ..your new office building.

EAR North Bethesda office center?

AM No, no, before that, before that right next to the clinical center..that brand

AM(cont) new office building.

EAR Oh, building 11.

AM No, it wasn't 11. Well anyhow..

EAR I know what you mean.

AM The thing that I have to keep saying is that there weren't that many of us but as far as a conscious process of recording ourselves and looking at ourselves I think people were not that self-conscious and they didn't have that kind of time. Maybe..whatever I don't think it happened to that extent. In Bob's mind it may have been a very important thing and he may have been watching it and so on. And again it was again small enough for him to have a personal fatherly sense of knowing each of the people. And, I think his staff relations were essentially familial which was both good and bad. And depending upon whether you happened to be ...how your standing was in the family you were treated accordingly. And that is probably, for something that size, was had many more advantages than disadvantages.

EAR But he had among his many other characteristics he really did have a sense of history I think that at least in retrospect he described it that way in so much of what he was doing and what he was involved in made him feel that they were really

AM

EAR And he was conscious and wanted in a sense to preserve it. I don't think he always did by any means.

AM I have no doubt of that and I think most of us had the exciting feeling that we were in the beginnings of something and much of what did happen over the next 10 years were things that we might have dreamed about and there was always the reinforcement that there wasn't too long a lag between some of the dreams and ideas of projects - things to be done. And often something happening. There was really more reinforcement than one would ordinarily expect, particularly in a government organization. It had a lot of those characteristics- young,

AM(cont) growing and relatively manageable scale-organization. But again if you ask me how explicitly aware were we..I don't want to minimize I am sure there were enlightened in comments about how we should be writing our history as we go. Every group discovers..says that to itself from time to time. We probably did as well as most or did better than some in reporting on our own activities. But I don't think that we were really able to look at this process in any systematic way.

EAR What precipitated your year in England?

AM Oh, several things. At that time, of course, there was..England was the exciting place. All of the changes in their hospitals and their own inquiries within their mental health programs which begun in the late 40's. And had by even the mid 50's or early 50's lead to something of a pilgrimage among people. The open hospital all of those ideas which now seem ancient history. Many of them had been taking place in England. So I was a pre-disposition who chose to go to England. I met someone who had come over to work with Lemkau and Pasamatic and when he came here and discovered that Pasamatic had left Hopkins and Lemkau had gone to New York for 2 years and no one had bothered to tell him and I was running Lemkau's program for a couple of years he gulped three or four times and decided well here I am I'll make the best of it. This was Michael Sheppard. And we became friends and I think learning something more about some real possibilities in England and some of the things going on at the Mordsley intrigued me. I think personally there was something else which made it especially attractive. And that is that is now talking about the mid-50's. In those days in terms of intellectually within psychiatry I was in a very small minority. At least I think I was in 2 respects and I'm not saying..one I think..for one I was among psychiatrists --among a very much smaller group that had been --had thought of themselves as a community

AM(cont) psychiatrist or public health psychiatrist and although I was with a cluster of them I didn't have that sense of isolation. In other words, there were many more things going on in England. But more to the point was that I really was--- remained unpersuaded that virtually all my other colleagues had concluded was a necessary part of their training. I had continued to think --was not only a necessary part of training but was anathetical to training. And that was psycho-analysis. Now, that idea is not quite so outlandish now there may be others which have a certain amount of respectability now. But in those days I really felt quite bewildered because I knew---If I am right how can I be right when all these other smart people are wrong. But that fact was that this was---I was in that respect and Stan was, by the way, in the same general same position. There was a certain degree of professional isolation. Now why this did not make anyone make us miserable when I discovered that there was a place of some excellence and generally admired where in fact what I held as relatively minority views were the commonly held ones I thought how interesting it would be and how pleasant to go to such a place for a year. Just one year in my life. I really was interested in seeing if the issues on how you train psychiatrists - I look at the Mordsley- while it was very very-it understood very clearly that to be a university of psychiatry there really had to be the free play and involvement in all of the ideas which informed this profession. That is was as un-doctrinal and unscholastic as any place I knew of. It was also good. There had been other places that were had no character at all they never took a position on anything- they were just lousy and they weren't any good. Now here was a place that acknowledged to be of high quality but also in trying to do so and being congenial to all the range the full range of ideas. That also attracted me. And I think there were other reasons that someone would like to take a sabbatical. It sounded like fun.

EAR Was it called a sabbatical for you?

AM Virtually.

EAR So you really were the first practically.

AM Yes. And so I very carefully mustered together all my arguments and thought it

AM(cont) through so I was able to get this across to Bob Felix this outlandish idea. And so I thought I was ready and I called him up and asked him for an appointment and went to see him. And I took a breathe and launched into what I thought was going to be a hard sell and after 5 minutes he said that is a great idea, a perfect idea. And that was it. It took about a year to work it out but he really -- he wrote to Augie Lewis and paved the way and he..I was the first to do that and I think he pinned a lot of expectations on it as I did. But I certainly didn't have to convince him. And I think really at that time he though of me as being one of his most promising Lieutenants. As you know, events during that year altered our relationship. And I don't know how much of that is germane to your story.

EAR As much as you want to tell.

AM It isn't a matter of wanting to tell. I have no secrets from you and I am not sure how accurately I can tell it. But I don't know how much of it -- I think more of it has to do with me than the Institute. It is apparently in other people's minds I was surprised to discover a very important event in the history of NIMH. Felix -- the relationship between Felix and me that year and the year after.

EAR Well you know why.

AM Well I know some of the reasons why but George Tarjan told me that he thinks that that was one of the - as he put it - I forget what the other one was - the 2 greatest mistakes that Felix ever made. I mean something like that and he didn't mean it in terms of long range policy but just in terms of a mis-judgment- right or wrong. It was--but it was of interest because it was so characteristic of the way Bob related. And I think he changed somewhat afterwards- quite a lot I don't mean in just the relationsh with me but to many other people. But there was one - it did also point out one of his major flaws - maybe that is too strong a word. He always had the feeling he knew



AM(cont) people far better than he did. He had the sense of being intimately aware of all of them. I mean he had the illusion that he knew me- that is in my domestic arrangements as if I had been his son. When in fact, I think I had been in his house socially maybe twice and he had been in my house socially maybe once in all the years I ever knew him. He didn't really know now, there really was no reason why he should have but he had the illusion that he knew - that he really knew all of his people inside out. And, of course, so he reacted in his very personal way to situations of this kind. And again, I don't really know except obviously it influenced my life tremendously and I can't say for the worse but when I came back because he wasn't at all sure what he was going to do with me. It was - I was definitely sent to Denver on probation I mean in so many words because if I screwed up once who knows when I would screw up again. But I don't know really what would have happened - of course, I think the things we did in Denver, by the way, in my bias way I think we really started a lot of things in that region - regional office and the scale of things were such that we were in a much better position because of how large we were, how small the states were and how undeveloped they were to try out and start a number of things which would have been much more difficult elsewhere in the whole Fort Logan kind of experiment and the first mental health centers as such named as such and a number of other things were possible to do out there that were more difficult to do than say in N.Y. or Illinois or even California. But it was, of course, what brought me into the center for several years I was functioned as any of the other regional offices but it was Stan who brought me back into Washington...

EAR What was your perception of having been in one sense much closer to the middle of NIMH before you went to England and what was your perception of NIMH the time you were in Denver aside from starting a number of new things out there. Did you have a different perception of the Institute from that distance or did it not matter?

AM The biggest sense of differences was -came before I went to Denver and had been

AM(cont) away for a year. Now there the differences were real, not only my perceptions because in that year the Institute had grown in numbers enormously. That was '57. I went away in June '57.

EAR You went in June '57 and not before that?

AM Right.

EAR And you came back in June of '58

AM Right. And during that 12 months I came back. I had left a place and in a sense I knew everybody and then came back and had the feeling that I didn't know anybody. And part of it was because of the enormous number of new people had come into the clinical center and I think it was at that point that I personally within a staff there is always a certain amount of discontent-communications problems - I don't know what is going on that sort of thing. But certainly the feeling that the early days when people were just bumping into one another constantly I discovered I came back and I remember I was asked to come back to give a seminar about my ear in England and I met a number of people I hadn't known before. And I found myself introducing to each other people who were in the Institute and I would have met one person then I would have met another person and there was at that time--I remember there was a certain irony - it seemed to me that although the Institute and I think for good reasons, constantly talked about the fact that unlike any other Institute it contained research as well as training and service concerns and that these should never be divided. In fact, for more and more of the people at the working level it didn't change them at all. It may have changed what the Institute could do as an Institute and it may have changed the thinking of the cadre of people who were at the administrative top levels but as far as the working levels felt it they could have been on different planets.

EAR People like Lenny Duhl you had not known before you left.

AM I don't remember exactly when I met Lenny.

EAR You had relatively little contact with Joe Bobbitt.

AM Joe I had know.

EAR Joe you had know, of course, but in terms of the working relationship.

AM Joe's first...was he the psychologist in the training branch?

EAR No, Joe actually came with Bob at the very beginning.

AM Right, of course, but then in terms of position.

EAR He was primarily in Bob's office in charge of some of the special projects - the various juvenile delinquency projects and other as they developed. He really was working out of Bob's office in one sense or another.

AM What was the question? Did I have more to do with him or less to do with him?

EAR No, I am just trying --- your saying that the year away when you came back your impression was that the Institute had grown so significantly during that year you were gone and I was just trying to pin down the names of some of the people who before you left perhaps you had little contact or awareness of and those who were perhaps visible for the period before you went to Denver. How long were you back before you went to Denver?

AM Oh, just a month or two.

EAR Just a month or two. OK so you really didn't have that much contact with him.  
Oh, I see.

AM Then from Denver my perceptions of NIMH which I think were shared by Stan in this respect became as I recall increasingly artificial to us and the regional office. That our contacts were still so narrow and that they were relating to one branch. And I had a sense of being except as we might know someone individually. Quite out of touch with what was going on in the other parts of the Institute and in a way having been in that branch before I left and now being at the regional end of it that part of the Institute which I related to at that time hadn't really changed that much. What had changed is all the other things and there was in a sense in the region was an insufficient connection between what we were doing and what was happening

AM(cont) in this much more rapidly much more then much more exciting areas and developments.  
Perceptions?....

EAR Well let me ask you..did you have as clear a sense of mission when you went out to Denver in terms of the opportunities and responsibilities there as you did when you went to the Study Center?

AM Yes, I do. I think there was still that kind of a feeling among the regional offices. And I think it tended to gather people, many of them who require a sense of mission. If it isn't there they invent it. And I think the other people with whom we were working had a feeling of being identified with the NIMH purposes often had the feeling we had to be kind of devious in order to get that silly Institute to realize what we were trying to say. But as all those people in the field always feel when they look at the Central office. But it wasn't a sense of being alien from it and yes, I would say that was a period of high excitement. Again, although there was no formal way whether any of the -- you really couldn't yet see what was going to become much more articulate as the mental health centers and mental health planning and all the other programs. The-- a lot of the ideas which finally shaped those programs were part of our conversation and our pre-occupation. And where they came from exactly it would be hard to trace. But I think the NIMH at that time certainly had the highest concentration of people working in one organization who were thinking along those lines. And trying in each regional office somehow to put some of this to work. What are instruments were working with by that time had changed. Remember, they had begun with a small grant to the state. Small, they began what the minimum grant was \$25,000 a year. Which today seems almost laughable. I think by the time I got to Denver the minimum was \$40,000 or something. And I think we had a couple of minimum grant states. And this was suppose to set up an office in each state and then you consulted with them and that was your instrument and from that you became sometimes almost too closely indistinguishable from the states own programs. But in the

AM(cont) mid to late 50's there were some new grant programs that were obviously designed to shift the field. There was the hospital improvement grant. That was the first time really in the mid-50's that there was finally recognition that this whole range of concerns had some how be brought into focus. There was...we spent an awful lot of time on what we called technical assistant projects if you remember?

EAR A ha.

AM I don't know who dreamed up the concept, but again it was again how do you take a relatively small amount of money strategically and bring the right combinations of people together. We were great party givers in effect. We would get the right people together under the right mix and hope something would happen. And the more carefully we planned the parties sometimes the more ideas we would get ..that was another one of our major pre-occupations. But those were our instruments, and there weren't very many others.

EAR You worked officially as well as informally with WICHE.

AM Right, right WICHE was just also getting under way. At least its mental health division was so was its first person waiting for Dan Blane to arrive and they were also...I think there were several times when it could have developed into a foolish competition - it didn't actually.

EAR I had the feeling when I came to visit you to give that talk on ~~man~~<sup>MAN</sup> power. I guess that was in late '58 or early '59.

AM It would have to have been '59.

EAR Yes, early '59 probably.

AM Oh no, it could have been either one.

EAR Somewhere around there. It was either fall or the early spring. And I really recall only the delightful memories about that day and a half that when we met at the Retreat in Aspen for the meeting that there was very much in a sense a kind of family feeling among those of you. You clearly had the group of people

EAR(cont) working with you there all working together as a kind of family in a sense this was a Denver prototype sort to speak of what was going on at NIMH in the early days.

AM That has some similarity

EAR Yes.

AM Again, the numbers were relatively small in the states. The people were at about similar stages of development. And we had...I had forgotten that.. I had forgotten that occasion- it wasn't Aspen but I remember ~~where we were-~~ it was up towards Este's Park. Right?

EAR Yes, Right, right.

AM Now I remember. Julian Hammond came out the same time, I think. Didn't he?

EAR Yes, he was there that night. That's right and made some very funny remarks in the Julian Hammond fashion. Yes, and that is when you wrote me this very famous note afterwards saying..a note to Bob thanking him for sending me out there. That all my comments had been apposite. It was the first time I saw that work used. I even had to look it up and I was very pleased at that lovely compliment you paid me. It was very nice. OK, I just want to finish this side which is about another 10 minutes and then we can break. Stan asked you to come back to Washington?

AM Yes, it was a very funny time. Whenever I came to Washington, which was fairly often in those days for me I would at least I would say more than half the time it seems to me in retrospect I would stay with Stan. And a couple of time he came out to Denver, I think really just to talk to me. And it was a very close relationship and I think at that time I was one of the people that he trusted especially and his judgment we value and he was going through some rather hard times. And he would ~~te~~ll me all the things that were going on and the problems that he was having and so on. And I don't remember the exact sequence but when he found himself in a position

AM(cont) of being special assistant to or something.

EAR Yes, when Joe Bobbitt had to go on the 20 school study.

AM Right. And I remember we had talked quite a lot about some of the ideas I had about the regional offices and what I thought might be done and somehow to relate them now more to the Institute as a whole and began to conceptualize what I thought the regional offices could become. Whatever our ideas must have resinated somehow and so he asked me several times if I would come back and I really at that point didn't want to. I gave up San Francisco to go to Washington. After I had been there about a year and a half in Denver the Institute wanted to move me to San Francisco. And the..I had liked to be promoted to the majors as it would seem. That was when 2 big offices... and our regional director made the appropriate proto-stations. He didn't want to have his staff taken away so a compromise was arrived at afterwards. They would spend a second year another year at Denver and then I would go to San Francisco. So I was suppose to go to San Francisco and it was during that year --the later part of that year infact, we were already house hunting and then all this happened. And finally Stan, well I guess I couldn't have been too hard to persuade. There were lots of things that looked like they might be interesting to try out. But the thing that really intrigued me most was the idea that we could ...all the complaints that we had had over years about the regional offices now was the chance to try to do something about it. So anyhow, that is when I came back and started in July '61. And set up what was called the operations as you recall. And the next 2 years were a fascinating 2 years in all kinds of ways. I really think we really did reshape the regional office in many ways. And I think..I don't know what it is like now but for awhile I think they were much more involved in many more ways than they had been. And of course, being in that particular position I found myself getting involved in a number of other programs very, very early. And we had a fantastic small

AM(cont) team, I thought, working together. Each complimented each other very well. Sam Bucker who is prodigious and ~~Dorothea~~ Dolin who is flamboyant and well Rod Berker was our..kept us in tact. But it was..we really turned out an enormous amount of work during that period of time.

EAR Do you think Stan anticipated the developments that went ..is that what he really had hoped would occur when you came in or did he just have a kind of large vague idea?

AM I don't know. I really don't know. I think..I hate to psychologize and I think Stan's relationship and mine is so complex and so strange all I can tell you is that period ..basically that period of '61 to '64 when I finally retired not only were unlike in terms of our personal relations unlike everything that preceded it and unlike anything that followed it. It was just completely ...once I got there the many ways relationships ... there didn't seem to be so much strain they weren't strained as they obviously must have been to me but there was a certain distance. Now part of it is an inevitable distance of having other preoccupations. I think in part Stan felt badly about the way I had been treated and in some ways and at least in the narrow sense he might have prospered because of my misfortune. And that may have been one of the reasons why he wanted me back. I also think at that time that I was someone he trusted and who he wanted to have close and available. In some ways the very success of that operation was our undoing plus the fact that I just can't overlook the fact that because of the timing of what happened. As far as I was concerned absolutely bowled me over was partly a result of the success of that venture and the fact that Bob Felix forgave me. And this really has no place in any kind of a history but that event was probably the most single most stunning ..I was younger and more naive in those days. I didn't realize those things happened. But I don't think Stan anticipated lots of...the flourishing of that office. The fact that



AM(cont) the role that I obviously was playing among others in the development of all new legislation and so on. I don't know he..I don't know how it appeared to him at the time.

EAR But you were doing what he had hoped in the largest sense and this is to bring the regional offices in in a much more tangible way.

AM Definately. And the man I think..and I really do think that at the time I left they had reached a peak in terms of the confidence and moral that maybe they hadn't had every before but accept in the first 2 or 3 years of their existence when they had attracted, just by being there, some of the most imaginative people in the country. Who had said "OH, boy! what a chance to do this." And, of course, our office was also involved in a number of other things . We developed a whole plan for planning and all the preliminaries and a lot of other things. You asked me if I think in the broadest sense Stan had hoped that this would be the sort of thing we could do. Yes, I think so.

EAR Right, but in a large sense he let you develop it and evolve it on your own without...

AM That was alright. I think everyone was..again when you come right down to it now you can recall yourself there weren't that many of us who were available. Everyone had our programs to operate and everyone was busy. No, I felt very much involved in all kinds of things and until what I saw as my banishment which it was in a very physical sense. Even in that banished year I think I found something to do which was useful. That is when we developed the hospital improvement grant. That's right. It was the mental health project grant.

EAR Budget grants.

AM Because before that all the grants.

EAR The HIT and In-Service training came afterwards.

AM That is right, because I was the first director of it. But the..anyhow that

AM(cont) is aside from it. I had the sense when I was asked to go back that it was a genuine request for what I might have to bring to there and the hope that some of these things would develop. I don't think anyone knew how far I could go or how well it would go or how quickly it would go. But it was..it started out as just me and a secretary and it never got very large in numbers because I don't think it should have but well.

EAR There is one interesting, I really do want to try without making it too simple to the whole thing but wanted to make some interpretations of the manner in which the people like Bob and Stan in some respects perhaps yourself or I think your obvious a different person functioned in positions of top responsibility. I think both Bob and Stan and I guess Bert to some extent or those he plays a much smaller role in what we are trying to do, were able on one hand to excite and to induce people to get involve and to communicate the kinds of larger objectives that they had but really maintained some degress of distance from almost everybody. I mean here you were in one sense of being groomed as a possible successor and yet you say you were in his house twice and he was in your house once. So that on the professional level relationship was quite close and very much interactive and yet there was a clear distance in some other personal regards and Stan is in many respects the same kind and I think probably Bert is too, the same kind of individual. Now, I am not saying that in either a positive or negative sense, obviously. But it is an interesting characteristic that the people who played the central role had these kinds of common characteristics. And it means that everyone who worked with them just got so far in the relationship and no further. Does that seem correct?

AM Let me think about it.

SIDE 3

EAR OK I rewound it---you were starting to say.

AM In so many ways they are different. That to find this characteristic they

AM(cont) have in common. It was not easy to know either one of them. I am not sure it is useful without trying to compare the two because they were rather different even in their style of leadership. It is true that I think Bob Felix had much more emotionality about it. And, of course, what everyone knows about is tremendous energy and infectiousness.

EAR And pinching the girls.

AM And pinching the girls. But there was an abulance about him. He made it his business to establish some kind of connection between himself and most anybody. It was almost a joke that you could put a pin within anywhere in the U.S. and within two connections figure out how he was related to somebody in that town. And so there was something convivial also putting it positively there was something that he was that and the techniques of his personal manner to inspire. And, of course, there was a great breathe of vision but he tended to elevate by his matter the tone of what was going on around him even and there was enough solid intellect there so that even though he would embarrass us at times by his..and we were embarrassed by him as we would be by our uncle who was always being gosh in public. I remember the first time going back many years after I had decided to go to the Institute. This is '46 or '47 and as a new regular corp officer I came up for an orientation at Kott Cottage or something. And they brought in the Directors of all the new programs, all the branches of the public health service to meet us and to talk with us and they all came on with the proper professional manner and I don't mean they were all stiff or formal but they were at the expected form of behavior and then this nut from the National Institute of Mental Health my future boss came on and he said, "My name is Bob Felix and just call me Bob and I don't care what you call me as long as you smile." And everyone poked one another and giggled and that is what I mean by embarrassing.

EAR I told him when we had our 2 day session that Bob you are sincerely corny.

AM That is it. Now, I think in a funny way Bert Brown I can't explain his curious hayseed dress but any other way as his attempt to capture some of these qualities only it doesn't come across. But Bob, of course, was solid enough that finally the scholars respected him. When it came right down to an argument you knew you were dealing with somebody or something very solid. But the matter made it look as if he was very . You're right. And I think basically he didn't not feel as deeply about people as Stan. Stan is , of course, a very different person. I think he is much more shy and I think, I am not sure he was any more suspicious than Bob. Probably not.

EAR No, I don't think so.

AM Both of them really were..had a feeling of being kind of an elite. And so in ~~OR-~~ order to be accepted as a real intimate by either of them there were also a sense of them having to have respected you intellectually. Stan once put into words something that ..it was not one of his most attractive qualities in my judgement really and I think to some extent was a limitation of his and Bob had the same one but noone would know it of Bob. Were talking about some...I think this was when we were on the trip to the Soviet Union. And, of course, Stan and I roomed together and we had a lot of time to talk and he made some reference to the Institute - the staff of the Institute and he made a distinction between the people - the top people that he was concerned about and that was a very small fraction and ther others who were just the and this is the quote "the worker bees" and as far as he was concerned they were just the worker bees. Now I think in that sense you were clearly expendable. Now, any administrator knows that he will make decisions in which you set different values on different kinds of people. The "worker bee" feeling got is his way I think because I don't think he saw talent, certain kinds of talent when they were really there. But Bob felt the same but you would never know it. The..I think Stan..I think Stan was not as good at disguising his ambitions as Bob was. Bob really affected

AM(cont) a manner of great egalitarianism and so on. I think probably both of them had the saving grace and that is that they wanted positions so that they could get something done rather than because primarily because it would grandize them and now as to whether they had in common more than any other administrator the fact that you really ... that there are only so many people that really become intimate with you anyhow in your life time and when your in that kind of a working relationship it does get in the way. A really intimate relationship has to be reciprocal and it has to be one in which both enter into it based on the same footing. When you are at a top administrator position essentially because of that no one is quite on the same footing. There is no relationship that isn't some how touched for it would be rare for it to be touched by the working relationship as well. So that..Stan could be an intimate friend with someone status other wise in life would relatively ..I wouldn't say meanial but someone who not necessarily has ..attainments. As long as they didn't have that work relationship. But I really think there is something in the work relationship. You can simulate a relationship where the needs of both are equally met. But it is very difficult to have 2 completely separate relationships with the same person at the same time.

EAR I think that is true.

AM And the difference was that many people - a slight distance from Bob loved him because they didn't really know him but his manner was loveable and people from a slight distance from Stan didn't like him. I think my guess is that the people working very closely with each were probably very similar actually, very, very similar. Each one had people who were very devoted to them and very loyal and so one. But my judgment which has nothing to do with the paper - if your making a number of distinctions between the first 2 directors of the Institute and the present director is what has driven the first 2 was the desire to do something in this over simplified distinction and the present director wants to be somebody.

AM(cont) It really..it effects:everything that they do. All 3 had a kind of vanity but the vanity is kind of over-riding with the third and with the first 2 it was really not -- a very unexpected tune. It mattered more to Bob than to Stan to feel that he was popular, much more. Stan almost prided himself at times with the matter of fact that he was hard-nosed and therefore bound to be unloved. I think sometimes he ever courted a kind of dislike which was also not necessary and didn't particularly help.

EAR OK. shall we stop

AM You know better than I about the stopping part because .....

DR. ALAN MILLER  
November 15, 1977

EAR Now, you deserve more than a footnote.

AM We all deserve

EAR That's true, but will we get it

AM The answer no.

EAR I told John Romano yesterday as I had mentioned earlier in Boston to both Joe Spiesman, he never really had an interaction with him in training, and Herb Kelman, who you may recall is one of the names I gave you when you gave me that mysterious telephone call about the then Governor's mysterious plan which materialized later on. Anyway, they were both - they both played different roles and so I interviewed them and I told them and I told Romano yesterday that I am beginning to feel a little overwhelmed with the material, which is a little late, which is a little late I should have been overwhelmed before I started but I wasn't smart enough to realize it at the time and the feeling of being overwhelmed stems primarily from a lack of clarity as to how to go about putting it together. I know what I don't want to do, I don't want to write a chronological history with meticulous and copious footnotes all the way through and guarantee accuracy of every statement that I have in there, etc., etc., I am not a historian and I don't think that is a very useful way of telling this story. So, that's what I am not going to do. What I had intended to do and when I wrote up in a prospectus for myself and I sent out a couple of places for the possibility of getting a contract for the publication, which, incidentally, I do not as yet have. What I wrote up was essentially a kind of approach in which there would be some thread of continuity in the various parts, but primarily it would attempt to tell the story from the standpoint of some of the major programmatic activities, the Research Grants Program, the Training Branch Program,

EAR(continued) the Community Services Branch Program, the Intra-Mural Program, The Regional Office Story, Alcoholism, Juvenile Delinquencies, Special Projects, beginning with a kind of recap of the 25th Anniversary which I think really served as the demarcation of the milestone of the entire Institute and then go back from that, using that as an introductory chapter, to show where it was and then in a sense a kind of flash-back to the earliest days - how the Institute got started and Bob Felix and Treadway, first Larry Cobb and Thomas Haran, all the old names and how the thing got started and then the growth of the INstitute in those early days and how Bob worked and how some of the other key figures interplayed with him and all the rest of it. I think that's still a doable approach and I still have that as a possibility. The problem with it as I see it at the moment and I am talking out loud to you, so that you can react. The problem with it is that my primary purpose in all of this is to be able to highlight two important dimensions. One, the people involved, because I really think it is a very unusual group of people, that everybody, the Felix's, the Directors.

AM Your sure about that?

EAR Well, I think so. What are your standards of being unusual? Robert Oppenheimer, no, Henry Kissinger, no

AM I am not talking about stature and I am not sure how you measure stature. Oppenheimer, I didn't think about that one, Kissinger?

EAR Yes, why not.

AM Why not, indeed. I simply meant that we have been so closely involved with this particular part of the Universe that sometimes we intrude.

EAR But that can be an advantage as well as a disadvantage because in fact in that very proximity, you would then tend to tell the story in such a way that you can



EAR(continued) convey what may seem to you the truth and to some extent even in a larger picture has some truth.

AM It is really a work of art.

EAR Yes, now you prompt me to make a comment that I wasn't going to make until later on. I said to a couple of people now that really as I try to think back why am I doing this to begin with. You know where it really all began, it is very funny but I have tried to recollect. Many years ago George Szlow said to me when he was on the Training Committee, "Eli, you have to write a novel about the Review Committee's because I really think that the Review Committee's are one of the most important phenomena within the totality of NIMH, the way these people interact, the sorts of things they accomplish, not just in terms of the grants they approved and disapproved but how they serve as a network of communication nationally, how the meetings themselves are almost like small plays that the dynamics of what happens at each one of these meetings. A grant that comes up for consideration, the ebb and flow of the discussion, how it finally ends up, what some of the bon mot's are, etc., etc., you really could use that as an interesting set of dialogue for a novel, I knew what he was saying, and I was very intrigued with that comment and I really think in some respect trying to recall back that may have been the germ of the idea, let alone my own literary aspirations to begin with, and my feeling of identification with the Institute. So, it's terribly important the way I see this to be able to illuminate, delineate and bring to life the people involved in a constructive way, I don't mean to be picking at personalities in any sense, so that's a major issue and the other major issue which interacts very intimately with that aspect of it, is to somehow bring alive also the various key decisions that were made, how did the community mental health center's legislation really come about, what happened behind the

EAR(continued) scenes, in front of the scenes, in between the scenes

AM People have written what they alleged to be that story, Musto for example. He hasn't got it exactly right.

EAR I don't think so and I think that everyone that I know about that's been written has been primarily dedicated to, in one sense or another, telling a history, and not so much from a standpoint of the people involved and the decision-making process. When I began I really said to myself, look here is an organization which over the 25 years that I want to take a look at has made enough within which organization a number of key decisions have been made. Now, what was the interplay of forces, individuals, outside pressures, political circumstances that site guised everything you can think of. What were the interplay of those forces, which in a sense, helped to structure the direction of decision went and how the decision was arrived at. In some respects I suspect that the community mental health center's legislation for one is a beautiful example to select, the interplay of people like Stan and you and Bert and people at the program analysis level, like myself and all the outside political figures, people I mentioned to John Romano yesterday that one of things I have the most vivid recollection about regarding community mental health center's legislation is the small role I played in the manpower field. I was asked because I was then the Program Anaylist in the Training Branch, to defend the manpower projections we were making, and it came to the point, as you well know, where the question at the highest level in the White House itself was, should monies be put into the stimulation of training additional psychiatrists at the realization that they may well take people away from other medical specialties and should psychiatry then be given that kind of priority with the potential loss to obstetrics, gynecology, surgery, whatever, and the answer was yes, that it should be done and along

EAR(continued) the way prior to the time that that decision was literally made at the White House it was a very high level meeting towards the very end in which it was a go,no-go precisely on that question and along the way I was asked to come to defend before people of the Bureau of the Budget, do you think you are going to be able to fulfill these projections you are talking about and do all these people really need to be trained in order to do the job you are talking about and how many people are going to be in every community mental health center, etc., etc.? And, there was one man there, as I told John Romano yesterday, who interestingly enough played a key role, his name was Mike March, he was a Bureau of the Budget Analyst, a Sr. Budget Analyst, who had begun his career by nailing, literally, to the wall the first Secretary of Defense, namely James Forrestal, who had presented his first budget for the Department of Defense and Mike March, as the budget analyst probed sufficiently hard to find some fact in that first budget in some aspect of it and the Department of the Defense backed down. Ever since then, Mike March was the Knight with shining armour at the Bureau of the Budget. He was called in as a side issue to make sure that there was no hanky panky in these figures and I had to literally every other week I would have to come up with another set of figures to satisfy, it is a minor little story but it plays a part in the total picture and I think it's a kind of incident which if I can accumulate enough of them will give life to this part of the total story. That's what I would like to be able to do. Now, you said something a few moments ago which I think is very critical. We know all this, we lived all this, how do you tell this story in such a way that other people can vicariously live this same experience or would want to. That's the most important issue of all and I must confess to you that I am at this moment a little bit discouraged because I have not been able to sell the book to a publisher. Now, the discouragement stems from the fact that those

EAR(continued) people are trained to be alert to whether something will sell and the question about whether it will sell depends on whether people want to know these things. Now, it is also true.

AM It probably depends on how well known the \_\_\_\_\_ of the author is.

EAR Partly, interestingly enough that is partly so, not altogether and I can take comfort from the fact that publishers on not on missions, they have many times turned books down, which later got published and turned out to be best sellers. So that's not the end all of the criterion for this but as I say it is a little bit discouraging, the last place I went to was International Universities Press which published my very first book, some 23 years ago, and which is a little house, little houses are as proud as large houses, but you would think if someone comes who has unique edge on this, I made it very clear that no one else is doing anything like this, no one else has the in's so to speak that I have, no one has 7 hours worth of oral history from Bob Felix and other hours from other key people, so there is information and data available to me that is not available to anyone else and she said, even more explicitly than you said a moment ago, you are interested in this and I know that you feel strongly about the National Institute of Mental Health and I don't blame you for that but I really don't think there are enough people around to make it worthwhile for us to write a contract on the book. That's as it now stands. It is realistic to assume that were I able to do what I am now planning to do well enough to produce a reasonable manuscript, it might well be a totally different story when you present a manuscript for somebody to look at. I think too often the publishers in the past have bought a pig in the poke and found themselves disappointed afterwards so they may be more chary now than they ever were before, certainly on something that is not a textbook, doesn't have too much sex in it

EAR(continued) isn't in an area where everyone is buying you know, like self-health books or diet and cook books, etc., so it is reasonable to understand. That, by way of background, you have been involved in this as equally if not in some respects more deeply than I have, I mean the NIMH, and you have more perspective than I have because I really have in a real sense convinced myself that this is the important thing to do and I still very much believe in it and I am still intending to do it, but I am clearer now in my own mind that it is not going to roll out of its own accord and that I really have taken on a task with so much material available that I am already overwhelmed and I haven't even really begun to look at all the accumulated material. I mean I have all the Council minutes, which I have looked at from year 1 through 1971, and I have now a few dozen tapes from various people and I have about 100 replies from people that I have written to, so I have got a good bit of material but there is still a lot more to do and the step after this one, that is after these six months are over, the step after this is really intensively to sit down with all this material and really absorb it, absorb it in such a way that it begins to develop in a sense of structure of its own so that the question I am asking myself now out loud will perhaps be both a little clearer in terms of a question and hopefully a little clearer in terms of potential answer. Any thoughts.

AM Quite a few. You don't need assurance but I think just the documentations you put together in some form of \_\_\_\_\_ is precious and was good to have done it. I can't think of anything that has been done so far is not time worth spending for many others and as the time, well, I won't say comes but as the time continues whether this would be a legitimate area for historic research, not just mental health but also what was happening at NIMH as a paradox to other things that were happening in federal social legislation and I can see this as being very valuable. There have been some very important books that have devoted

AM(continued) themselves not only fairly to movements that located in a fairly narrow span of time as history goes, 25 years or whatever, is really not that long a period but a very interesting time to us, the only time we had in some ways. In fact some of the most influential books have been reports of one individual and not necessarily an individual who was eminent, a world shaker, when you think of books like \_\_\_\_\_ really, there is a work of art in which she selected four people, all of whom were important but none of them level of statesmanship or world shaking scientific concept or anything of that dimension and yet not only was it a book which was of enormous interest but have captured an age in miniature and had some influence. I am reading now a biography for the third time. Each time I have read it, I read it for a different set of reasons, enough interval between the readings that part is recollection and part is revelation each time. It happens to be the biography of someone you may never have heard of. Have you ever heard of William Welch?

EAR Bacteriologist

AM No. It is an interesting occasion point then. It is written by Simon and James Flechsner. I don't think they are related to Abraham who did the famous \_\_\_\_\_ of medical schools, although they must be related. He doesn't speak of that specifically. William Welch, he opens the book, which was written in the late 30's or early 40's by recalling an event in 1930 or 32, 30 to celebrate William Welch's 80th birthday and there were messages from all over the world, about to celebrate this man's birth because he was clearly the apotheosis of American medicine in many ways, world wide. Among some of the milestones of his career, he was one of the four doctors, so called, that started the Hopkins. He had done things long before that. The library, by the way, at the Hopkins Medical Center is the William Welch Library. He also in describing, well, I don't want to prolong it except to say that I can just tic off the things he had done just to illustrate that asperity between person who of enormous stature in his field. He was really one of the early people who recognized

AM(continued) the critical importance of mental health and public health. He helped to start the school of public health, he helped to start the Rockefeller Institute when they were looking for somebody, pathological research, that was his basic, pathology. He was one who in drawing up the initial curriculum for Hopkins Medical School, spoke of psychology as one of the basic sciences. Extraordinary man. There are two points, now forgotten, but to an important audience, first of all, when the book was published, it was published for the general audience and was a best seller. It was a successful book. I am re-reading it now because I am thinking again about some of the issues in medical education, and he was one of the people who would shake the current system. The link between all of that and some of this is that I think one of the ways I would conceive of this as being faithful to what the information and a way of organizing it and broader than general interest, broader than special interest is if you think of it almost as biography.

EAR That was my original intention, Alan.

AM Whose biography

EAR That's the problem. The biography was going to be of the NIMH as an organic whole.

AM That's history

EAR That's right. It falls apart as a biography because it doesn't have the personal interest until you start to talk about the people. Once you start to talk about the people

AM Somebody could have written a biography of Robert Felix.

EAR Yes, right.

AM I don't mean a piece of PR. One of the troubles about writing about anyone's biography is that they had their elements of sadness as well as, for example I can remember, you talk about the mental health centers and the feelings around its establishment, was Stan and the group working at one end of that Building 31

AM(continued) really doing the work and Bob at the other end of that hall with his little group of eminent psychiatrists including Frank Braceland talking to themselves, ~~changing~~ exchanging ideas with the Council, none of it having anything to do - it couldn't have happened at the other end of the hall if you hadn't been all of the years before, so it was in a way a kind of a rise and fall, but I use this only illustratively that if you are writing something other than a carefully documented dissertation, if you were writing this as a Doctor's dissertation, you would probably require to have a hypothesis, I am not sure but sometimes they do, but it would be important in its own right, you would be the principal beneficiary and the scholars of the future would have this to call upon. That by the way is the only way which any of the careful history of the Department of Mental Hygiene is being written now, there are about four doctor dissertations that are being written about some important aspect, not meant for publication. I doubt that any of them would have that general interest in them. But, it is important that there be such a chronicle, someone someday writing a larger history may draw upon. Either as an important piece of history, I think of one of them like Kathleen Jones, who wrote two books on the history of mental health legislation in England. Lucy was the first and then there is a successor and the first one covered a period of 1840 to 1890 or 1910, but it was because it was done, because it was a beautifully done piece of history, well written, it was also read much more widely than people would really expect to pick it up almost as a text, so that you can write a piece of history about just one aspect of a much more complex scene, but by so placing it in its context you are really writing something which is again not going to make the best seller list but it is a sort of thing that gets reviewed by general Journals and the N.Y. Reviews and some other groups that are looking for something carefully done and they are rating it by its quality, all you can write as biography and I wonder



AM(continued) whether, how much of what you have could be organized around a biography of Bob Felix.

EAR Probably a good bit except that what would be very important that I don't have is more of the personal aspects, I think in order to delineate Bob Felix as well as one should with a biography. You need to have alot more of his early life, he comes from longly distinguished family, physicians, politicians

AM Its a different book, isn't it?

EAR Yes, it is a different book. I think it would be a very interesting book. I think that to the extent that you emphasize Bob you inevitably lose some of the totality of NIMH because all for the per\_\_\_\_\_ of Felix, you can't avoid that if it is going to be a biography of Bob Felix and it is interesting that I really did, it is so clear in my own mind, that I really did think of the NIMH as a biography of NIMH.

AM You are talking then about the story of a family

EAR Yes

AM A family history, only it's a family that is defined by its professional affiliations.

EAR Yes, right

AM Maybe that's the way it can be

EAR Look, I have no doubt that it will merge as I continue - Romano's was very therapeutic yesterday. I said towards the very end because it is now clear that when I get finished with people, they say to themselves, not out loud, but I can hear it nonetheless - "My God, I gave him all of this stuff of my own but where does this fit into something that's a book, I kept on rambling, in fact, did I really say all that, it was so incoherent in some sense and things I couldn't remember." I keep on pushing people on for a comment like this, I say to them whatever they are taling about a particular aspect, I said - "Oh, I would like to hear more about it, can you think of a little a little specific incident that would illustrate that, you know it is very difficult to do and

EAR(continued) very difficult to do and so John Romano yesterday who had an extraordinarily memory at one time and still has a very good memory and would say Eli, I can't recall anything at the moment and so I said at the very end a variation of what I said to these other people. I said you know I am sure that this feels like just one part of a jig-saw puzzle and you can't see the whole jig-saw puzzle but as I begin to accumulate more and more of this I am sure it will all fall into place but I must confess to you now, I said yesterday I am a little overwhelmed and he said "you should be overwhelmed now, that is just the right feeling to have at this stage of the game and it will all come together.

AM This is the point which people need to be urged to press on

EAR Yes, exactly

AM A moment of maximum confusion just before clarity

EAR I think it is a considerable time before clarity

AM That's a good sign, too.

EAR Sure, it means I have been collecting \_\_\_\_\_

AM It also means that you are not so desperately in need of closure that you are going to make it prematurely.

EAR No, in fact my feeling is not so much a desperate need of closure but that in a sense over the past few years I have been involved in so many other things since I ~~introduced~~ interviewed Bob. I have a feeling of uneasiness, which I shouldn't have at all that <sup>some</sup> some time before going to bed on ~~Sunday~~ evening when he has nothing else to think about it may flit through Bob Felix's mind, whatever happened to that stuff that I gave to Eli Rubinstein two years ago and I haven't seen anything of it yet. I am sure it hasn't crossed his mind.

AM It certainly has occurred to me from time to time.

EAR It has, thank you, Dr. Miller

AM It most certainly has. I think a lot of us are involved with this with you

AM(continued) because it was an odd act of fate because I have a respect for the process that you are able to carry on.

EAR Well, yesterday, no the day before yesterday, coming down from Ottawa to Syracuse, we spent the evening the night before last in Syracuse, there was a radio show, an interview of a man named Paul Horgan, who you may have read, he wrote a number of books including "The Fall of Angels, which was a best seller novel and he wrote a book about the Rio Grande River, which was also a best seller. Anyway, the book about the Rio Grande River was apparently part of a series of great rivers, which one publishing house took on to itself to do and from the moment that he began the story to the time it was published, twelve years lapsed, so he said that there were many occasions in the course of those twelve years when the publisher would say to him, "where is this book you were suppose to produce", but he said that it was twelve years well spent. Now I am not going to spend twelve years on this, but I don't have a feeling of urgency about finishing it and yet I have a feeling of importance about the project. ~~In-your-mind~~

AM In your mind you see this as having a beginning and end to that as the period your describing.

EAR Yes, very much so. Well, it is partly artificial but I think there is drama the idea of 25 years and the 25th Anniversary and there is a literary gimmick involved in that Truman signed the Act initially and at the 25th Anniversary we had a telegram from Truman and so I was really going to use that as a ploy to begin with the 25th Anniversary and then as I say to flash back to the very beginning. Well, it is an artifice but I think it is a perfectly reasonable one.

AM Sure. Let me ask you as you have gotten recollections of any people this great volume, has there been any kind of principal theme that you might think of as larger than mental health or let us say inclusive of what has happened in, to what extent could this illustrate for history of a particular idea, or kind of

AM(continued) idea or movement.

EAR Not so much in terms of substance, Allan, but in terms of process and that is I think it was a very happy accident that Bob Felix and all the other people that he brought in early on, plus, no one could have foreseen this or guaranteed it, plus the continued political support that allowed for the steady growth of NIMH GAVE everybody, especially in the beginning and even through those first twenty-five years a strong sense of commitment, a strong sense of enthusiasm, a strong sense of personal and professional worth at being involved in this.

AM No question about it

EAR Everyone I talked to has had very very positive memories.

AM No regrets, essentially for having done it.

EAR No regrets whatsoever.

AM It's a blessing, isn't it? You might write this as a history of blessed people, people lucky enough to have been involved no matter how it came out.

EAR Absolutely, a side issue which is kind of interesting, as we all get older, Joe Spiesman, I met with in Boston, is very dedicated, very sincere, a very decent person who came into the NIMH Training program in Psychology, as the fourth person in a series of individuals, beginning with Ken Little and I don't think you had much interaction with Ken Little, but it was Ken Little, then Irv Alexander, then Harold Basowitz, then Joe Spiesman. Now, Ken Little was congenitally abrasive, Irv Alexander, he took delight in being abrasive, Hal Basowitz had some personal problems which inevitably made him abrasive and it wasn't until Joe Spiesman came in that we had someone who was willing to listen to people in the other three disciplines in psychiatry, psychiatric social work and psychiatric nursing with a feeling other than condescension.

EAR(continued) The other psychologists, frankly, felt that all the people in the other disciplines did not match up to them, either in intellectual ability, mastery of their field or confidence in doing the job. Now to give them their due, I think they were in some small measure, correct. They probably the brightest of them all, but by no means the most competent in running the program and so I had when I became Chief of the Branch I had many rather strident interactions with some of the psychologists who saw me as a psychiatrist, who saw me as having taken the job over as Chief of the Training Branch, which previously had been a psychiatrist's job, because I had moved into their camp and therefore that they could not either trust me or permit me to be involved in their program, all of which I knew quite well better than they think I knew it, and it wasn't until Joe came along that I really had a reasonable opportunity for interaction, the other guys wouldn't really tolerate me except as the necessary administrator that they had to deal with. Well, in talking with Joe, though the other day.

AM Where was John Eberhard in that series.

EAR No, John Eberhard was in a totally different camp. He just hated Stan, He was the first guy in charge of the training program and then he moved over into research.

AM I am thinking about way back

EAR Yes, way back he was the first

AM He didnt have the same sort of defensiveness that I recall.

EAR No, I don't think so at all, but these guys came in and I think they were overally defensive, but we got all finished and I said to Joe, "you know I really have the feeling that as you look back you have the sense of most

EAR(continued) pleasant nostalgia. He said it was a lovely place to work.

Especially, I recall I went back over this Training Committee, he said Eli, those training committee meetings were an intellectual personal delight. All of us, all of us had that feeling of sharing this interaction where so many good things were said, so many bright people with no personal need to take something away for themselves but to give to the totality and he said he was always an absolutely wonderful thing and I said, You know, Joe, I am pleased to hear you say this because I am reminded that when I left Bob Felix at the end of those two days I said to him, Bob you are just sincerely corny, he is just that kind of a guy. So is Pete \_\_\_\_\_ You know I have just been talking to you pure mush but that is the only way it will come out now and I think it was nothing more than a demonstration of how warm and positive a feeling he had had about those experiences and, indeed, he didn't say so. I think in contrast to some of the experiences he had leaving NIMH and getting into this other world. He had an unhappy experience with a research project that he himself had initiated. We were really in many respects very fortunate to be there with a group of very competent people. The point that Joe made, he said "many many times there was tension, but it was constructive tension, there was always something that came out of those kinds of interactions that were constructive for the total program and I had that feeling working with everybody in the Branch and even outside, so yes you are absolutely right, I think that pervasive feeling that comes out with talking.

AM Being involved with something that was important, well there were times of gross expansion evolution process and you could see the process, there

AM(continued) were undue delays or obscure evidences only of what you had done, even though you were working in a national organization, there was an interesting feeling of intimacy.

EAR T think there was one other aspect of that which was very important for those of use who had ~~interactions~~ with the other parts of NIH AND THAT IS even among the preminent reputations of all the National Institutes of Health, I think those of us at NIMH had the feeling that we were favorably unqiue in a number of ways which made us the best of all the Institute's. That is, no other Insitute had the happy accident of having among its personnel, people who totally identified with the total Institute. We were mental health specialists, that is what the Institute was about. Now heart, cancer and all the rest of them, they had dual professional identifications, yes they were specialists in heart reserach or cancer research but they were also something else again, whether its physiologists or whatever the case may be and not so in our case and then, of course, the NIMH when it got to the point after the Community Mental Health Center's legislation where it was first in size for that superficial reason but more substantively important was the fact that no other Institute, I think, was as innovative as we were and some of our grants programs no others to <sup>span</sup>expand the total spectrum of the program for research and training and services, the very reason that we almost got thrown out of the NIH, as you well know, with the Hundley Report, was an asset, was a unique attribute of the Institute that added to this feeling of uniqueness this feeling of positive identification with the Institute. So that message comes out with everybody that I talked to, now, granted that I have a highly select group that I have been interviewing, since these people played an important role in the Inst itute and therefore, a goodly portion of their profession identification is related to it, so when you talk to Frank Braceland, even though he is mildly

EAR(continued) annoyed that it took so long for him to be tangibly recognized as the eminence that he was, nonetheless because of his personal characteristics and because of his feeling about the Institute, none of this was said with any bitterness whatsoever, it was just as if, well you know isn't it too bad that something happened between me and Bob initially and "he got his nose out of joint" and so I wasn't put on the Council until the late 1950's but I continued to testify before Congress, so I said to him at the end, I really felt I had to say it, I said "Frank, I need to tell you something which I hope won't embarrass you, but I want to say it to you in all sincerity, of all the members of the Council that I was privileged to know, you were far and away the darling of all the support staff, the secretaries and everybody absolutely loved you and so he blushed a little bit, and I said, no it was just your thoughtfulness and the fact that you always had a kind word for everybody and also you just have a cherubic face, I mean there is nothing one can do about that - he is just a very kindly guy and he said a number of occasions how he played a conciliatory role among people, things that I didn't know about what went on behind the scenes - Mike Furman and some other people and Frank intervened on various occasions.

AM Apropos by the way as an aside people who not only felt neglected but felt that neglect was going to remedy and there are a number of those who were never on the Council. One of them, of course, is Larry Kolb. Did you talk with Larry?

EAR Very briefly once, one year ago.

AM He never quite recovered from that.

EAR He never acknowledge that whatsoever. In fact, I alluded to this earlier, some people are able to do this much better than others. I mean it has nothing to do with what they accomplished or any other aspect than just, I don't know what it is, I think Romano in one sense yesterday did what too many other



EAR(continued) people could do, put senses together in a sequence where it comes close to being of reasonably ordered paper, most of us talk when you read it afterwards you wonder, it is close to being gibberish because your thought processes going on while you are talking and you don't control sufficiently the sequence of words so that without the intonation, without the waving of the hand, without the little laugh in between, when you read the cold print it is just not that clear. Now, I have no difficulty because I heard it the first time, so with everything I read is fine but I can still tell the difference between someone who has that kind of disciplined command of things and most of the rest of us. In a sense Bob was very good, both in the ability to speak that way but even more importantly to do so for 7 hours. I spent a full 7 hours with him and I think his hypomanic energy level aside, it was the structuring of material that was quite good. Joe Spiesman, I hate to mention words but I may have mentioned names, but Joe Spiesman had some difficulty recollecting, even recollecting names which I empathize with greatly, since I am having that difficulty myself these days. Herb Kellman who is a remarkable competent writer, who writes extraordinarily gifted papers, long papers, both literate and substantively colorful papers, he has done some very good theoretical work, his language was interspersed with you know, I mean, all the sorts of things, there is nothing wrong with it, it's just that is the difference between someone who speaks like a Romano.

AM John, I think, always in addition to his intellectual command has assumed a stance not only the stance but I think he genuinely describes his vocation as an observer, an important observer, somewhat olympian, it often seemed that way even by his intimates in his own department and also somewhat outside the Institute he was a bit but not in it

Part 2

AM They were talking about something much more that they ad libbed and I suppose lots of continuing editing of remarks having to do with their own relationship sorting them out trying to be objective, trying somehow to express themselves mindful of the history of the posterity uncomfortable with saying some things, candor at times must have been a problem.

EAR Not too much, I think some people sensed

AM I don't mean deception

EAR No, I don't mean that either, I mean just sensed. Now, again to mention names, Bill Hollister doesn't want to talk to me.

AM Not really

EAR Not me, but because he is concerned about his feelings about Stan

AM Even now?

EAR Even now. I am going down to North Carolina next month and I will try to see him again. Don Oken is down there on Sabbatical and I wanted to see Don on the way - so Don is going to be down there and a couple of other people, in fact, I will try to see Irv Alexander, I am not sure that Irv will want to talk because I think he has mixed feelings about the Institute but I think I will try again to see Bill Hollister - he was very open with me about why he felt uncomfortable and I said look, Bill, I don't even have to say it because it is your decision to make, but I do hope that you would be willing in any way that you see fit, what you want to say, say and what you don't want to say, don't say.

AM Did you talk with Curtis Southerd?

EAR I have a long letter from Curtis, I need to talk to Curtis because he was very important and I told John I was going back to see him. Next month, I am going South, in fact combining a couple of things, which you may or may not know, I am on an AMA committee concerned with project of TV violence and so I am

EAR(continued) giving a talk at their Auxiliary Scientific Meeting in the middle of December down in Miami. We want to go down there to see Minnie's folks, anyway, but on the way down there I am stopping at North Carolina to see a few people and hopefully, again to see Bill Hollister. I am going down there from there to see Jerry Carter and Van Staden. Do you remember Van Staden? who is now on a kind of retired basis and then a couple of other people down there and then in January I am going West. Now both Jim Lowery and Dale Cameron are retired as you may know in a retirement community in San Diego, called Rancho Vernardo, and I haven't called them yet, but I want to talk to both of them.

AM I am just trying to decide whether they were level with me,

EAR Either or both you mean.

AM Jim lived his life like a poker game and you were never sure of what cards he had in his hands but maybe the game is over, that game is over. Dale is very different and very close and private.

EAR Well, in a way whatever I can get is to the good. I have to take what I can get, obviously, and if they will, they will, and if they won't, they won't. Then there is George Tarjan

AM That's a must.

EAR Absolutely, you see these two people to whom I wrote and who said to me in one way or another they couldn't answer in paper, come interview, so it is Dale Cameron, Jim Lowery, George Tarjan, Jolly West, Ed Schneidman, who is down there and who I think would serve as a lovely, I don't want to say vignette, because it sounds belittling to his program, but he really did a unique thing. Stan brought him in and I don't know whether you saw his famous memorandum, but Ed wrote a memorandum to Stan and I think it was a 13 page memorandum because he is a very loquacious man to say the least. My interactions with him have been, I wished we had taped some of the things because they would

EAR(continued) have been an absolute delight to me. He counts my verbal ability to the point that few other people are able to do and we have had interchanges which I wished we had taped but anyway. He said, Eli, I can't write this stuff down, come interview me, so I saw him in San Francisco at the last APA and I said, "Ed, I am coming down to interview you and he said come and interview me.

AM What is he doing now?

EAR He is a Professor of Psychology at UCLA and he is still involved in suicide

AM We talk about this counting verbal abilities and having his own, I will never forget one particular exchange I had with him, very brief, when he developed the metaphor of the psychological autopsy and I remember talking to him once about \_\_\_\_\_ that technique, that kind of intensive careful multi faceted analysis, this case not of a suicide, but of an episode of violence, someone that had run amuk, he said "Great, great, we will call it a psychological biopsy" you know it was so quick.

EAR His verbal fluency is just incredible, but couple that he is extraordinarily bright and verbal, but couple that with an absolutely conscious, let alone unconscious, need to be remembered for posterity, a psychological autopsy is as much a "Schneidmanism" for being remembered as for its own utility, so is your suicide allergy is his term, the Journal is everything that Ed Schneidman does is to make sure that Ed Schneidman is remembered and he has the wherewithal to do it, I think he will be, he really is an extraordinary man, this memorandum that he wrote and I really do think it was 13 pages, outlined 10 objectives that he was going to achieve in his program, sent it to Stan, and one of Stan's many gifts is to be able to evaluate the competence of someone fairly well, and Stan knew he had somebody. Whatever Schneidman wanted, Schneidman got to paraphrase the old \_\_\_\_\_ so he came in, cocky as they come and came around and what was the phrase I used, he said to me, "Eli, do you think I belong in this Institute? I said, Ed, I think

EAR(continued) I think you will be a constructive dissonance in the system. I like that he says, I like that, he is a pistol, he really is, so that is another one and a couple of other people down there, then up to San Francisco. I was supposed to have seen Esther Garrison in August and at the very last minute she got a cold and called me that morning and said, "Eli, I cannot see you today because I have a cold and I just will not see anybody today because I am not going to give you the cold and I am not going to get any worse myself, so we will just have to postpone it." I said, alright, Esther, I will be back again. John Classon, there are a lot of people on the west coast, so that is my January trip, for the moment I am only Feb., March, & April.

AM You know what I am thinking as I hear this. If you could capture the fun that you are having in something written

EAR As an aside?

AM No, not as an aside, if you would capture that feeling you would have written a book which would be of enormous pleasure as well as interesting.

EAR Oh, I see.

AM If you could, it is this infectious feeling that you have about the people and about the events which are going to make this book, a book and not just a chronicle, it then becomes a story of Eli Rubinstein.

EAR Oh, don't say that, that's another book, I've got another book.

AM No, it seems to me that's what the essence of it. I am serious, I'm totally serious.

EAR Then why are you laughing.

AM Because that is one of the funniest contemporary catch phrases. Haven't you heard that, "I am totally serious"

EAR Seriously, that is another book.

AM No it's not, there is another book, I am sure, but it is so much fun to talk

AM(continued) about this and to hear you talking about it, that's the quality as well. It seems to me that you are talking about a happy book, I don't mean a book without \_\_\_\_\_ but we are talking about a great adventure in which there was a quality of excitement among its participants which deserves to be described because it isn't that common. Periodically you see them or if you are lucky you are part of it. Maybe if you are very lucky you are part of it twice in your life. We all try to generalize from it initially, the first things you have to do is get it down and I think there are some key sociologic concepts in the events of the mental health movement which have not been put together. All of us are usually in a hurry to sit down alone and have to recapture some of this, Well, this is usually the ten major factors which produced what? Shift in patients, location or whatever and they are all true but it seems to me there is some binding generalizations having to do with the velocity of inclusiveness of the species. There is an anti-segregationist feel as an open society quality to this which very few movements, and it was a movement,

EAR You see why I don't want this to be is ponderous and a number of people. I will mention one in particular, John Classon, when I wrote to him, I said, you know Bob Felix said to me, I think I mentioned this to you last time, that from the very beginning he had a sense of history from the NIMH and so he says Bob Felix, he decided that he would have an in-house sociologist who would keep notes of everything that was going on; who would write a sociological history of the Institute and the first one selected was Johnny Classon.

AM Dick Williams is the only one who ever tried

EAR I have not talked to Dick Williams and I ~~thought~~ saw Dick at the APA and interestingly enough Dick gave me a very erudite and very competent recounting I was very pleased, really, we both had a good time, so I wrote to Johnny Classon and I said Bob Felix said this and besides would you please send me

EAR(continued) the material, he was one of the 150 people I wrote, so as with many other people who acknowledged but didn't say anything, he said I am just terribly busy right now, I can't do it and I will get back to you some months later, then I wrote a reminder note and he said, well, I rethought and I really feel that your taking too narrow a viewpoint of this, it seems to me unless you bring in all the other public health forces that are playing on this and indeed what was happening in England and elsewhere that the perspective will be too narrow and he wants a ponderous book.

AM I think the problem, as I see it, the literary problem you have, is that to sustain the flavor the quality that you capture when you talk to individuals for something as long as a book, you can see this, if this were a series of recollections and was published as such, which by the way is a possible format, in which you would link together almost as if sometimes it is done on a \_\_\_\_\_ recollections of something, this could be reminiscences of the Institute.

EAR Did you see Milton Send new book about the child mental health

AM No

EAR What Milton Send did was in a sense the essence of what you are saying, he has a whole series of anywhere from two paragraphs to four or five pages of interviews with key people in the child health movement, divided into various topical areas and it is a whole book, I forgot the title of it, it just came out last year and so he has got interviews including Orville J. Preem and anybody who is anybody in the field of child health from the mental health side of it not from the physiological or pediatric side of it and it is an interesting little book, but it is somewhat disjointed inevitably since it is just a series of of people although what he does do, which I think is

EAR(continued) useful, is to introduce each individual with a paragraph, so putting that individual in his or her place in this total pattern, but yes, I think what you are suggesting is a possibility, that certainly is another possibility. Well, listen, Minnie is out in the car.

AM In the car, why is she sitting out in the car.

EAR She is reading

AM It's dark.

EAR I didn't realize it was getting so dark, she may be back out in the hall, Let's leave this as tape, this is very useful to me.

AM That I doubt.

EAR No, seriously, I am being totally serious about this. You really gave me a chance to do something I hadn't done up until now and that is reflect on this and also to get your reactions on some of these things so in that sense it is very helpful and also I have had a chance now to get some feedback, you don't realize how much you have just given me, so let's leave that. I really do have enough from you substitutively

AM Rambling as it was

EAR But, there is alot there

AM I was on vacation

EAR There is really a lot there, so that would be fine and my suspicion is that it is going to take a good bit of my time. What I have now