panded role for the International Atomic Energy Agency (IAEA). Especially needed are greatly increased inspection powers so as to prevent diversion of reactor plutonium to bombs. IAEA might also monitor all underground nuclear testing, if such testing continues. But the U.S. report suggests nonweapon countries generally believe such testing is aimed primarily at weapons improvement, and it calls to task both U.S. and Soviet governments for not acceding to the nonweapon countries' desire for a total test ban. One panelist also raised the possibility that such testing—as in the Plowshare and Gasbuggy programs—has shown "no real advantage" to use of nuclear explosives for peaceful purposes.

Finally, both reports stress that neither the United States nor the Soviet Union should give peaceful nuclear assistance to any nation whose nuclear facilities are not safeguarded by IAEA. Currently, the United States insists only on safeguarding of nuclear materials it transfers to other nations but not the facilities themselves.

Even if all the recommendations in the two reports should become reality, there is little doubt the situation will be hairy for some years. "As a real matter of fact," said panelist Harvey Picker, "we are in a somewhat parlous condition." David Lenefsky, project director for the panel, made clear just how parlous. Under current inspection protocols by IAEA, he said, just a scant two weeks after IAEA inspection of a reactor it would be possible for a nation to be diverting plutonium to bombs—and no one but those concerned would know.

Nader's Raiders knock NIMH

Insane asylums should be a thing of the past. The horrors of these huge fortress-like prisons for the mentally ill have been documented and described over and over. But they continue to exist. Between 1966 and 1971, the number of state supported mental hospitals increased from 307 to 321; the total number of patients seen annually rose from 802,216 to 836,326; and the maintenance expenditure alone for these hospitals rose from \$1.3 billion to more than \$2 billion.

These figures would be less surprising if it were not for the fact that in the mid-1960's the National Institute of Mental Health started a program aimed at replacing the state mental hospital system with community mental health centers.

The idea behind the community centers was that society should help the mentally ill, not just dispose of them in hidden-away institutions. In a community mental health center an emotionally disturbed patient would receive necessary treatment without the expense of hospitalization in the unfamiliar surroundings of a far-away institution. Staffed by local professionals and citizen volunteers, the community centers would be better able to communicate with the patient and relate to the specific problems of the community. Being easily accessible to all segments of society, the centers would not only treat but help to prevent mental illness.

A report issued this week by Ralph Nader's Center for the Study of Responsive Law charges that the NIMH-administered community mental health centers program is falling short in accomplishing these goals.

In the fall of 1969 one of Nader's Raiders took part in a citizens' participation conference on mental health at NIMH. When it was suggested that someone do a study of the vast mental health complex, the Nader group volunteered and even expected NIMH to fund the study. When this fell through the New World Foundation in New York City put up the \$10,000 necessary to complete the two-year study.

Part I of the report covers the community mental health centers program. Authors Franklin D. Chu and Sharland Trotter, in a hard-hitting well-documented analysis, discuss the shortcomings of the program point by point. First of all, the centers are not supplanting the state mental hospitals, the report says. When the state hospitals do transfer patients to nursing or foster homes, the authors charge, conditions there are frequently worse than in the state institution.

As for accessibility, the report says community centers routinely exclude persons who present the most trouble-some cases—notably, drug addicts, alcoholics, old people, children, ethnic and racial minority groups and the poor in general. Centers located within state hospitals are psychologically inaccessible and many others maintain such low profiles that their impact on the community has been negligible.

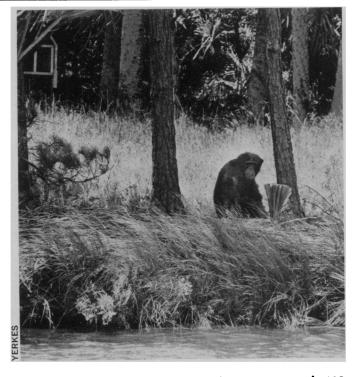
The report accuses the Metropolitan Community Mental Health Center in Minneapolis, Minn., of having an established policy of refusing inpatient care to indigent patients. The report ex-

Hoping for a Georgia chimp colony: But Jiggs is cool to his harem

A real cliché of a dream for many men is to be stranded on an island with one or more receptive females. When this dream came true for Jiggs, a large male chimpanzee from the Yerkes Regional Primate Research Center in Atlanta, Ga. (SN: 6/10/72, p. 381), he failed to respond in the traditional manner. Instead of taking advantage of the situation and of his three female companions, Jiggs whimpered and almost cried when his human friends left him on an island off the coast of Georgia.

Jiggs and the three female chimps are part of an experiment designed to see how well apes can breed and adapt to a wild environment in the temperate zone. Yerkes researchers liberated the chimps last month on the densely vegetated, 100-acre Bear Island. Food and water are provided daily and two A-frame shelters were built for protection from the weather.

After Jiggs' initial reaction the chimps settled into a compact family group. In their native habitats, chimpanzees and the other great apes are in danger of extinction. Geoffrey H. Bourne, director of Yerkes, expects these chimps to breed and to survive the winter. If they do, they will be allowed to develop a family group on the island.



science news, vol. 102

70