

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 Re-

sponsive 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 troublesome 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. □



YERKES

plains how the inpatient facility there is reserved for the private patients of the psychiatrists connected with the center and their colleagues at two adjacent private voluntary hospitals, although an \$800,000 Federal community mental health center grant was used to construct the facility. Centers in Bakersfield, Calif., Orlando, Fla., and New Orleans, La., are accused of operating under similar conditions.

The report concludes that the more than 300 centers currently in operation offer little more than a collection of traditional clinical services instead of the bold new approach originally intended. The Nader task force says the program provides more jobs and office space for mental health professionals but citizen involvement is minimal and the centers remain inaccessible and irrelevant to large segments of the community.

To correct these problems, the authors suggest immediate emergency upgrading of state hospitals, plans for their ultimate demise and laws restricting admissions. They suggest that community governing boards be made legally responsible for getting grants and running the community centers while psychiatrists tend only to medical problems. The centers should be staffed by citizen-aides as well as professionals. They should have more Federal money for work in poverty areas and care of the elderly, children, addicts and other neglected groups. A patient's-rights manual should be published by each center, and each center should establish a quality-standards committee made up of professionals and citizen representatives.

Like most Nader reports, this one is slanted in favor of the consumer and seems to have no patience with the slow moving wheels of the bureaucratic buggy. But NIMH has been trying to get the community centers program off the ground for almost 10 years, and the report does ask some fundamental questions that should be answered before Congress extends authorization of the Community Mental Health Centers Act. Chu says he and his task force want to do all they can to improve the program and he hopes that Congress, the mental health professionals and NIMH will make the appropriate responses to the report.

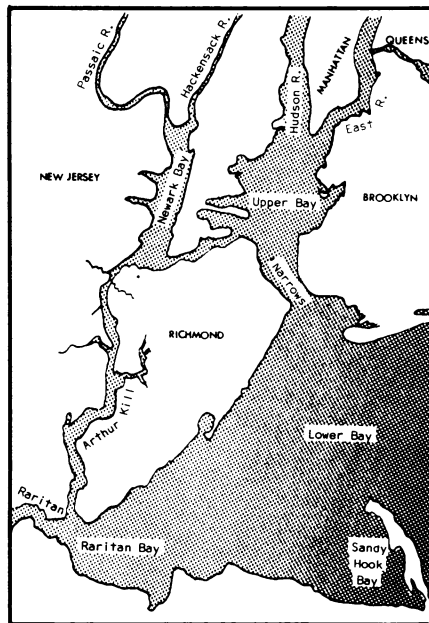
Bertram S. Brown, director of NIMH, said after reviewing the report, "I sincerely welcome the Ralph Nader group to study our program because I feel it is our first responsibility to be responsive to the needs of the public." But Brown did point out that the report would have been more balanced and accurate if it had included case studies of programs that have done extraordinarily creative things in their communities. He also noted that persons living in an area

served by a mental health center have a 50 percent less chance of ending up in a large mental institution.

"I was pleased," says Brown, "that the majority of the criticisms and concerns voiced in the report were actually made by NIMH staff members, council members and advisers. We have been aware of these issues and have worked hard to make our own program more effective." The community mental health centers program is in the process of effective and productive change, he continues, and the Nader report will help that change. Brown anticipates welcoming some recommendations and rejecting others.

The remainder of the task force report on NIMH is to be released later this summer. It will include additional sections on NIMH's research and training programs and a number of special topics such as child mental health and suicide prevention. □

EPA to NYC & PVSC: Clean NY Harbor



N.Y. bay: Walk across on the garbage.

New York Harbor is so polluted that local wags claim you can walk on the water with help not from the Almighty but from floating debris.

In an attempt to return the water to its natural consistency, the Environmental Protection Agency announced last week that it is giving New York City and the Passaic Valley Sewerage Commission of New Jersey 180 days to submit plans to decrease pollution to acceptable levels. If acceptable abatement plans are not forthcoming, warns EPA head William D. Ruckelshaus, EPA will take legal action through the Justice Department.

Each day, says EPA, New York City and the PVSC discharge 1.9 billion gallons of raw sewage and inadequately treated domestic and industrial wastes into the harbor and adjacent waters. This discharge, says EPA, contains unacceptably high levels of suspended solid materials, coliform bacteria, heavy metals and oxygen-demanding substances that deplete the amount of dissolved oxygen in the water making it uninhabitable for fish and other life. Coliform bacteria are thought to be involved in causing fin rot disease in fish. Lead concentrations in New York Harbor range from 0.1 to 0.8 parts per million. In laboratory experiments, concentrations of 0.1 to 0.4 parts per million have been found to be toxic to fish.

Ruckelshaus said that New York City must upgrade its 12 major existing sewage treatment plants and build two new ones. Construction on all 14 of the needed projects is now in progress, but EPA says that seven of them are behind schedule in implementing federally approved pollution control measures. The city contends that it is behind schedule because of insufficient funds and because Federal and state standards have been upgraded. EPA responds that the city has not even met standards set five years ago. A New York spokesman said the city is pursuing the most ambitious pollution-abatement program in the nation, but EPA counters that of 20 major U.S. cities New York ranks 13th in per capita expenditures on sewage treatment and 20th in the percent of local government expenditures devoted to such treatment. An EPA spokesman says that New York has been trying to do something about pollution for a long time. "It just hasn't achieved much."

The Passaic Valley Sewerage Commission runs a treatment plant in Newark that serves some 1.2 million people and over 700 industries. This plant, says EPA, provides only partial treatment of sewage and is usually overloaded. Its capacity is 225 million gallons per day, but it treats an average of 225 million gallons daily. The plant removes less than 15 percent of oxygen-demanding wastes and only 22 to 72 percent of suspended solids from waters it treats.

EPA charges that the PVSC is violating water quality standards set as long as 63 years ago. They are now more than three years behind schedule in meeting existing federally approved abatement schedules. The PVSC is now upgrading its facilities, with completion scheduled for May 1973. Until recently the commission has had trouble financing its projects, but in 1969 state legislation removed the limits on the amount of bonds the commissioners can issue. Funding, says EPA, should no longer be a problem. □