

U.S. screens children of the poor for 'deviants'

By Diane Bauer
Pacific News Service

WASHINGTON, D.C. — Thirteen million children of the poor are the latest targets for federal government intervention in the lives of U.S. citizens. Some critics would call it spying.

The Department of Health, Education and Welfare, conducting the mission, is offering free medical tests for the children in all poverty families.

The program, called Early and Periodic Screening, Diagnosis and Treatment (EPSDT), aims to detect and prevent health problems among children who lack access to medical facilities.

But even as doctors probe these children for physical defects and symptoms of disease, they also test for personality and psychological disorders — to label potential problem children, the "deviants," and criminals. Unknown to the mother, doctors will observe and grade the relationship between parent and child.

The findings are then recorded in the child's federally computerized dossier.

And there is no guarantee medical treatment will follow once the problems have been identified.

According to James Kolb, HEW deputy director in charge of the program, 3 million children have already gone through some mental health screening.

Parents of eligible children who don't apply for the testing will be sought out through the schools or in their homes by federal outreach programs.

The program has been in existence for three years, but HEW still has no guidelines for the mental health component. This means states can set the rules, or let doctors devise their own test procedures.

Meanwhile, the American Orthopsychiatric Association (Ortho) of psychiatrists, psychologists and social workers, which was awarded the contract to draft the guidelines, has yet to produce a finished document. Five drafts submitted to HEW have been rejected for not including hardline, one-shot tests.

Ortho claims such tests are not valid.

At a meeting this month, Ortho plans to recommend to HEW that the mass mental health screening program be dropped, though this could mean losing the \$75,000 contract and jobs for Ortho members.

Dr. Florence Halpern, who toured EPSDT programs to devise the guidelines, has already advised Ortho "not to mess with it."

"It can't be done in this country at this time," she says.

The experimental program is going on in almost every state, and Congress has ordered federal welfare funds withheld from nine states that haven't implemented it.

If this order is carried out, it will cut aid to the very families the government hopes to force into EPSDT.

At the same time, public legal programs have sued a dozen states for not pushing EPSDT through fast enough. Such groups — formed to be watchdogs

But the dream turned into a nightmare as it progressed through the bureaucracy. The mental health component was ignored in the rush to get the job done.

The obvious problem of cultural bias raised by mental testing on such a massive scale was not addressed.

The EPSDT critics also include HEW's own National Institute of Mental Health (NIMH), the Center for the Study of Psychiatry in Washington, D.C., the Committee Opposing Abuse of Psychiatry and the Medical Committee for Human Rights.

Dr. Stephen Hersh, NIMH's assistant director for Children and Youth:

"As soon as I heard of the legislation, I started seeing Hutschnecker nightmares."

In 1970, Arnold Hutschnecker, President Nixon's doctor, proposed nationwide mental health testing of 6 to 8-year-olds, with detention camps for those youngsters judged to have "criminal potential." The proposal was hastily abandoned in the ensuing furor from all sides.

Dr. Edward Opton, chairman of the Committee on Coercive Modes of Therapy of the American Psychological Association, calls the program "a blueprint for wholesale invasion of privacy and sophisticated control of welfare families.

"With friends like these, poor children need no enemies."

A special committee of NIMH consultants has also recommended against EPSDT's mental health screening.

But HEW is going ahead anyway, according to James Kolb.

"Each state is experimenting in various approaches," Kolb said. "It's healthy to try out to find out which ones work and which ones don't. Let the most workable system survive."

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