

# Hospital Capsules

Beatrice H. Hill

The NRA Hospital Recreation Consultant Service has been working very closely with two new projects. One involves the Williamsport (Pennsylvania) Recreation Commission, which is trying to solve a problem for the Williamsport Technical Institute. There are over three thousand students at the institute, 399 severely handicapped. Their tuition fees are being paid by the government. This number will perhaps be tripled in 1958 because of new government grants for vocational rehabilitation training.

This institute is actually the only one of its kind in the country where such a large number of severely handicapped students are accepted. Every part of the student program is successful, except for the leisure-time after-school hours of this group. They have no place to enjoy leisure-time activities because there is no way to transport them to the many facilities the town has to offer. Thus, they either go back to their rooms and do homework in the late afternoon, go to evening adult education classes, or are limited to radio and television programs. A third possibility is to go to the neighborhood bar for sociability. Obviously, none of these three possibilities is very healthy; and the Williamsport Recreation Commission and its director, James Dittmar, called upon the National Recreation Association for help.

Together, the NRA Hospital Service and the department have set up a recreation program for the handicapped twice a week, at the YWCA. The NRA has suggested games, holiday activities, special events, movies, passive and active music, hobbies, drama, newspaper, arts and crafts, outings and so on.

At the same time, the NRA and the Williamsport Recreation Commission are considering a pilot project for such students. It is to have the community, and the state and federal governments jointly finance a large building for handicapped students—or at least a large quonset shelter—with partitioned

areas, for the many diversified facets of the recreation program. Such a building will not isolate the handicapped students from the non-handicapped ones, but will provide a place easily reached without transportation difficulties.

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The other one is a pilot project in Westchester County, New York, where there are thirty-five nursing homes directly under the jurisdiction of the Westchester Health Commission and the Westchester Recreation Commission. The National Recreation Association knows that there is a tremendous need for sustained recreation programs in all nursing homes. Therefore, a pilot project is being set up with seven nursing homes, by the Westchester Health and Recreation Commissions in cooperation with the NRA. These will share the salary of one recreation worker, rotating volunteers and, in some cases, equipment. The worker will have office space at the largest home, and will personally visit each once a week. Most of her time will be spent in making up lists of local entertainment or adult education sources and places where volunteers can drive patients for a day away from the home. She will be responsible for finding, training and placing volunteers, setting up recreation programs in each one of these homes. If this project works out successfully, it may prove that nursing homes and communities can cooperate to the advantage of both, recreationally speaking.

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"Dance in Psychotherapy" was the subject of a talk by Elizabeth Rosen,\* at a recent meeting of the New York Metropolitan Hospital Recreation Association. She said, in part:

Dance cannot be used as a panacea.

\*ELIZABETH ROSEN, Ed.D., is a certified corrective therapist and recreation therapist, and has taught modern dance and dance therapy in New York City's school system, and Teachers College, Columbia University. She will take part in the "Recreation in Rehabilitation" workshop, co-sponsored by the NRA and Columbia University, June 3-28.

All activity is important. Some patients can make more use of dance, than others. The therapist must be an active part of the treatment team for dance to be effective.

Today, art is being used diagnostically and therapeutically to help patients express their emotional problems. Creative dance may also be used in this way; but only with certain patients who can use this means of expression. Other forms of dance can also be used. Dr. Richard Kraus of Columbia University says that square and folk dancing is one of the best measures of reality testing that we have. The patient who can keep up and dance the involved figures is certainly in touch with reality.

Modern or creative dance is based on natural body movements. The body is used as the tool of the dancer. This type of dancing is easy to participate in. Anyone can swing an arm. There is a kinetic response to others moving, which is a form of communication. It opens the way for socialization and the therapist might begin to dance with one patient, include another, and slowly widen the circle.

For further information, see Mrs. Rosen's book, *Dance in Psychotherapy*, Teachers College, Columbia University, \$4.50. It may be purchased from the National Recreation Association Book Center, as can another book of interest, *Clinical Application of Recreation Therapy* by Dr. John Davis. Charles C. Thomas, publisher, \$3.75.

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A first annual conference, on "Recreation Club Leadership of, by and for the Handicapped," was recently conducted by the recreation and camping department of the Connecticut Society for Crippled Children and Adults. More than one hundred handicapped persons and their friends, representing special recreation groups from Connecticut and New York, attended the one-day conference to learn about improving their club operation and program.

A complete proceedings has been compiled and is available at fifty cents per copy from: Mr. Theodore Fabyan, Director of Recreation and Camping, Connecticut Society for Crippled Children and Adults, Inc., 740 Asylum Avenue, Hartford 5. ■

Mrs. HILL is the NRA consultant on hospital recreation.