# S 626 The Child and Family Services Bill H.R. 2966 A Federal Prescription for Parentectomy?

# Testimony of Robert S. Mendelsohn, M.D. Joint House-Senate Hearings on the Child and Family Services Bill June 20, 1975

I am Robert S. Mendelsohn and am here today representing no organization or group. Therefore, responsibility for my statements is exclusively and totally mine. The request for my testimony was initiated by your committee.

At the outset I would like to express my deep appreciation to your

Subcommittee for inviting me to testify.

I well remember the opportunity given me by Senator Mondale and his colleagues on the Subcommittee on Employment, Manpower and Poverty, when on August 4, 1969, I was privileged to appear as the opening witness in nearings on S. 2060 to provide for an expanded Head Start Child Development

I also will never forget the interest and personal concern shown me by Congressman Perkins when, on March 24, 1969, I appeared before the Committee on Education and Labor, of which he was chairman, and spoke in opposition to the proposed transfer of Project Head Start from the Office of Economic Opportunity to the Department of Health, Education and Welfare. I am sure that Congressman Perkins and others will recall that that testimony resulted the very next day, March 25, in a request by the American Academy of Pediatrics for my resignation from the position of National Director of the Medical Consultation Service of Project Head Start.

I had a subsequent opportunity in 1970 to appear before another committee of which Senator Mondale was a member. That was the Senate Select Committee on Nutrition and Human Needs, chaired by Senator McGovern. In addition, I have in the past been asked to comment on early drafts of the

proposed legislation now before us.

My intent in recounting this historical background is to indicate the documentary sources that demonstrate the progression of my thinking in the field of child development. That there has been a progression is beyond question, and my thinking today, in 1975, is in many respects quite changed from that of years ago. I hope the experience gained by observing the outcomes of my previous predictions as well as interpreting the passage of events has led to some degree of wisdom which will be reflected in my testimony today.

I have the greatest respect for Senator Mondale and Congressman Brademas. I admire their code of ethics and their record of achievement. Therefore, when Bob Agee, a member of your staff, first phoned me about two weeks ago, I told him of the change in some of my opinions, described them at weeks ago, I told him of the change in some of my opinions, described them at some length, and cautioned him that my testimony may, in some respects, be detrimental to his cause, namely passage of this bill. He showed a keen appreciation of my situation and, after checking, phoned me again with a declaration that the aim of the committee was to pursue the truth, and he strongly urged me to accept and tell it like I saw it. He further stated that many more individuals and groups than could be accommodated had requested a change to appear before your committee but that I had been specifically chance to appear before your committee, but that I had been specifically recommended and therefore called.

You can well imagine how encouraged I was by this response, and what a bright and welcome contrast it provided to the ever-deepening crisis of

confidence in our governmental institutions.

Therefore, although initially I was a reluctant witness, I now accept the responsibility of stating my views honestly, forcefully, directly and completely.

# QUALIFICATIONS

My Board certification is in the specialty of pediatrics. My major career position is at Michael Reese Hospital in Chicago, where I serve as Assistant to the Executive Vice-President. My primary academic position is at the University of Illinois College of Medicine as Associate Professor in the Department of Preventive Medicine and Community Health. I am also on the faculty of the Erikson Institute for Early Education, and hold the rank of Lecturer in the Department of Education at Loyola University. From 1967 to 1969 I was the National Director of the Medical Consultation Service, Project Head Start, under a contract between the Office of Economic Opportunity and the American Academy of Pediatrics. Since then, I have been the Medical Director of the Head Start programs operated by the Chicago parochial and private schools. My record of academic awards and honors, as well as my list of publications is available to this committee upon request.

## LACK OF QUALIFICATIONS

I have never been enrolled in, nor have I attended a day care center. Neither have my children, nor will — I hope — grandchildren I may have in the future. Therefore, I can give no first-hand testimony of the value or deficiencies of day care centers. My entire experience is derived either from personal observation or from second-hand verbal and written reports. I would venture that the same lack of first-hand experience with day care centers applies to most Congressmen and Senators.

# THE FAMILY VS THE PROFESSIONAL

In keeping with the request to restrict my oral presentation to no more than five minutes, I will summarize my position as one of deep concern that the present legislation if enacted and implemented may accomplish exactly the reverse of its intent.

Thus, while the stated intent of the Bill is to strengthen families, the reality may be to weaken them. While the image is that of greater parent participation in their childrens' lives, the outcome may be that of further parent exclusion. The major factor that will determine whether this bill accomplishes its

purpose or whether it proves indeed counter-productive is the power relationship between professionals and parents.

The helping professional — social worker, teacher, obstetrician, pediatri-

cian, psychiatrist, psychologist, educator, nurse — represents inherently and in cian, psychiatrist, psychologist, educator, nuise—represents innerently and in practice, a threat to family relationships. In other words, the so-called "helping professional" may give the image of a family friend, but in reality—both historically and on the contemporary scene—he is the enemy of the family. Therefore, any action that increases the power of the professional (and his minions of paraprofessionals) automatically lessens the strength of the family.

This bill (and I have read it carefully) has the effect of increasing the number, functioning, influence, and power of the professionals absolutely and disproportionately to that of the parents and other family members.

Therefore, unless substantial changes are introduced both in the language of the Bill as well as in the staffing pattern and nature of personnel who will implement it so as to greatly alter the balance of power of professionals versus parents, I predict that this legislation will be judged in retrospect to have been another link in the long chain of public policies that have contributed to the ever-weakening condition of the American family and thus of our beloved country as well.

We will be judged to have behaved, despite the best of intentions, with naivete and misguided enthusiasm. In order to clear, at least partially, my own conscience, and with the belief that my words may influence this committee, I humbly but optimistically appear before you today.

The remainder of my testimony will be devoted to an effort to support the statements made in this summary and to justify my recommendations.

I invite your questions, criticisms and responses at any point during or

following this prepared statement.

## IS MY TESTIMONY UNIQUE?

The answer is - no. My position, and I append to this testimony a reprint of The answer is — no. My position, and I append to this testimony a reprint of one of my publications entitled "Parentectomy — Is it ever indicated?" (Child and Family, 1971), has been stated by others at least equally qualified and often more articulate than I. Thus, Andrew Billingsley, Vice President for Academic Affairs, Howard University, in his book, "Children of the Storm" (Harcourt, Brace, Jovanovich, 1972) states

"The kinds of child welfare services that have come to be institutionalized in the United States are almost exclusively focused on the care of children away from their parents through some sort of substitute parental care." (p.10)

Billingsley points out the profound contrast between American and

Billingsley points out the profound contrast between American and European child welfare. European welfare consists of money while American consists of "services;" infusion of money serves to promote family strengths, while "services" tend to endanger and destroy these important linkages. Thus the term "services" becomes almost a dirty word, not unlike the words "quality care" which have come to mean professional, expensive, usually unavailable, and impossible to evaluate

unavailable, and impossible to evaluate.

Language continues to be one of our greatest stumbling blocks to meaningful Language continues to be one of our greatest stumbling blocks to meaning in communication. Let me give a few examples. Marijuana years ago existed in the inner city and was called "weed"; now, as a result of its spread to the suburbs, it has become upgraded to "grass". A certain kind of person used to be called "promiscuous," but today is referred to, particularly in the medical literature, as "sexually active". V.I.P., once an honorific abbreviation, now refers to an abortion clinic — Voluntary Interruption of Pregnancy. "Poor" has become "economically disadvantaged" and "slum" has become "community". Thus, it is not surprising that for many of us, the words "services" and "quality" have is not surprising that for many of us, the words "services" and "quality" have become pejorative in meaning and in tone.

Thomas K. Fagan, Ph.D., Director of the School Psychology Program,

Western Illinois University, in the American Medical Association publication "Quality of Life — The Early Years" (Publishing Sciences Group, Inc., Acton,

Mass., 1974) states (p. 104):
"What I sense, and I hope I am wrong, is a belief that as professionals we are in some manner duty-bound to protect

children from their parents."

Thus, the child advocate becomes the advocate against the parent, and interferes with the longitudinal transmission of family patterns and cultural heritage.

Some helping professionals favor this kind of interference (they call it "intervention"), particularly in the field of child abuse, where I have witnessed more abuse by well-intentioned professionals than by the accused parent. As a matter of fact, it has become downright hazardous for a poor mother to bring her child to a hospital emergency room. Regardless of his illness, if he has the slightest bruise, he is likely to be subjected to the inquisitional type of interrogation by a well-meaning social worker whose action, whether purposefully or otherwise, often results in separation of mother and child. The entire disruption of family tradition and cultural patterns has been clothed with a sort of bogus academic respectability by Anna Freud, who

together with two other leaders in the mental health field, has published an important book ("Beyond the Best Interests of the Child", Anna Freud, Joseph Goldstein, Albert J. Solnit, The Free Press, N.Y., 1973) which seeks to make a distinction between "biologic" and "psychologic" parenting. One example at the end of the volume carries particular significance for me personally.

When the Dutch Jews were forced into Nazi concentration camps in the 1940s, they left their children behind with Dutch Gentile families. Upon the release of the lews some Dutch families were reluctant to return the children. together with two other leaders in the mental health field, has published an

release of the Jews, some Dutch families were reluctant to return the children, on the grounds that their "best interests" would be served by maintaining the "continuity" of the "psychologic" environment to which they had already "adiated" at the standard to the server of the serve "adjusted", rather than replacing them in the hands of biologic parents who had already been severely damaged as a result of the concentration camp

These cases went through the Dutch courts and finally to the Dutch parliament which ruled in favor of the Jewish parents. The children were accordingly returned.

Anna Freud and her co-workers now argue that this decision was wrong! She rejects the classic pediatric teaching that "child development begins with the grandparents". I would dismiss the Freud-Goldstein-Solnit attempt to deny the value of history and family value were it not for the fact that her book is widely used in colleges across the country, and has been a major influence in the education of helping professionals.

#### THE RELATIONSHIP OF PROFESSIONALS TO FAMILIES

The nurse tends to assume the role of mother; the social worker that of big brother or sister, the physician tends to displace the grandmother with her traditional home remedies; the teacher takes the place of mother or father; and the oldest professional of all tries to replace the wife. Indeed, it is no accident that prosititution is included, not in the category of a business, but among the professions. For in a business transaction, there is an exchange of money or commodities; but in a professional transaction, the professional gives of himself

It would be well for all contemporary helping professionals to remain aware of their historical roots so that they might better appreciate the inherent threat they pose to the family. According to this view, a viable society consists of many strong families and few weak professionals. The growth of a powerful class of helping professionals poses a dangerous threat to society. Our own American history shows the major growth of our country occuring in an era of strong families, few teachers and doctors, and almost no social workers and psychologists.

#### THE UNATTAINABLE IDEAL

Even though it cannot be achieved in modern America, the ideal child welfare program should be defined.

The best child welfare system consists of children being raised not in day care centers, not by professional advocates, but in their own homes, by their own fathers and mothers, assisted by aunts, uncles, cousins and grandparents. Somewhat like you gentlemen and 1. your children and mine, were raised.

We cannot afford to be guilty of prescribing for the children of others measures we will not tolerate for our own. Therefore, in order to achieve an ideal, single standard, child welfare system, I would opt for distribution of money rather than services; for family allowances (the policy in practically all other civilized countries), and even for an annual wage for motherhood. If parenting were considered an occupation and compensated accordingly, if women were paid as much to stay home, breastfeed their infants, and care for their children as they are now paid for going to work, we would then have a real opportunity to see how many would choose fulfillment through occupations for themselves, and the corollary of day care centers for their children. In this ideal situation, the kind of Child and Family Services bill we are considering today would either be totally unnecessary or drastically reduced in scope.

#### PRACTICAL RECOMMENDATIONS

However, it does appear to be my obligation to deal with the world -

particularly with the United States — as it is, as it exists at this time.

Therefore, my recommendations for modification of this proposed legislation, through amendment or other appropriate procedure, are as follows:

1. Amend Sec 105 (Child and Family Service Councils), (a), (1), line 9. INSTEAD OF "not less than half of the members of the Council shall be parents of children served in programs," I recommend it read "all members of the Council shall be parents of children served in programs." the Council shall be parents of children served in programs.

Furthermore, other parent policy and parent advisory committees should be limited to parents; professionals and representatives of private agencies and organizations in this field may serve in an ex-officio capacity, but shall not have the right to vote or hold office.

This will help insure parent control of the program and keep the professional in his proper, circumscribed role. I base this recommendation not solely on theoretical considerations, but on the experience I have accumulated over the years working with and observing both successful and unsuccessful parent participation efforts in Project Head Start.

2. Amend Section 504 (a) which states in part "Nothing in this Act shall be construed or applied in such a manner as to infringe upon or usurp the moral and legal rights and responsibilities of parents or guardians with respect to the moral, mental, emotional, physical, or other development of their children.

This statement, without any enforcement mechanisms, is little more than a pious gesture. In order that it be converted from prayer to reality, I recommend the creation of a special "Office of Parents' Rights" to be headed by a lawyer with special experience and expertise in defending the rights of parents against public and private bureaucracies.

That a supply of such lawyers exists is well recognized. I might only mention an outstanding example from my own state of Illinois, namely, Mr. Patrick T. Murphy, member of a large family with strong religious traditions, author of a highly regarded book entitled "Our Kindly Parent — The State" (Viking Press, 1974) and presently a candidate for the office of Attorney General of Illinois.

The creation of such a special legal staff could offer the necessary counterbalance to the otherwise unchecked grasp for power by the professionals. I strongly recommend this addition to the Act.

#### MY PREDICTIONS

This Act stands an excellent chance of passing in its present form. It directly offers jobs and money to teachers, social workers, doctors, dentists, educators. psychologists, the television industry, and the construction industry. This combination of interests should suffice to overcome the predictable opposition likely to be generated by those concerned with budget restrictions.

However, in its present form, this Act also stands an excellent chance of resulting in the exact opposite of its intent, i.e., it may well weaken rather than strengthen families. Indeed, it is my prediction that this will be the result, and that we will see further evidence of family deterioration as measured by the indicia of rates of divorce, delinquency, school failure, ill health, mental illness, nursing home placements, and suicide.

#### CONCLUSIONS

My two recommendations, first, to guarantee not 50%, but 100% control by parents, and second, to provide a legal enforcement mechanism for the rights of parents, will, in my opinion, greatly increase the capability of this Act to achieve its stated goals. If they become part of the Act, I can then enthusiastically support its passage, and I further am prepared to offer, if called upon, all resources at my command to assist in its implementation.

I am convinced that the Act will then be able to provide the first step in

turning our country towards a family-oriented public policy and will lead our American families towards that Biblically promised age when, according to the prophet Malachi, "He shall turn the heart of the fathers to the children and the heart of the children to their fathers."

Again, I wish to express my deep appreciation for this opportunity to organize and present my thoughts before the finest forum in the world -United States Congress

Thank you very much.

In light of the recent attack by Senator Mondale and Rep. Brademas on opponents of the Child and Family Services Bill as 'misinformed' and 'right-wing' extremists, we offer the testimony of Dr. Mendelsohn, a national advisor to the U.S. Coalition for Life, as an alchemy for truth and defense of the human family. R.E.

Distributed by U.S. Coalition for Life Export, Pa. 15632 January 1976 Additional Copies 3 for \$1.00