



A couple finds guidance at Family Center

## Center Serves Hundreds

Rochester's Catholic Family Center gives services to 2,670 families during 1953-1954. To each of them, the caseworker offered a confidential relationship in which the client was able to share his problems, to think through possible solutions and to choose one which best met his own unique personality and situation.

Sometimes the solution was an intangible one — a change of attitude toward one's self, spouse or child. In other cases, it was a concrete one — placement of a child in a foster home or the adoption of a baby.

For nearly fifty years, Catholic Family Center has placed children in adoption. This year, 76 children were placed. Occasionally, a couple returns to the agency after many years to share with us what the child and our services meant to them.

"Mr. and Mrs. M." are such a couple.

Mr. and Mrs. M. couldn't believe that their son, Jim, would be graduating from high school tomorrow. They could feel themselves getting nostalgic about "the old days" for he still seemed to them their little boy.

He was a very special little boy when he came to them. They could remember — having been married for four years and the terrible disappointment, hurt and shock they felt when they finally knew from the doctor's report that they would never be able to have children of their own. It took a while to recover from the blow. They wondered what they would do now.

As they talked, they realized they could still have their family — only in another way — by adopting a child.

How should they begin?

That was the hardest part — taking that first step. It was something they had heard many rumors about but knew no one who could give them any first hand information.

From their pastor, they learned of the Catholic Family Center. Their first recollection after that was a group meeting at which they were amazed to see so many other couples their age, with the

same questions they had.

After that, they went through something the agency called a "home study." This consisted of a series of interviews and a home visit, all with the worker who had been assigned to them. This was the part they feared — they had heard so many comments about how hard it is to adopt, and all the questions you will be asked. But to their surprise, their worker really made it an enjoyable experience for them as they talked with her about what they did with their families when they were youngsters, what they liked to do, what they thought of school, where they worked, how they met their husbands and wife, and the things they liked to do as a couple.

Then they talked about earnings, and how Mr. and Mrs. M. might plan to support and raise a child. Religion, and the way the M's practiced it, was also discussed with them. But all the while, the M's could understand how all this is necessary when the agency has the tremendous responsi-

bility of the life of a child in its hands.

They could never forget that "big day" when their application had been approved — they had been waiting for that phone to ring to have their worker tell them "their baby" was here. Finally, it rang and the days immediately following that were a pleasant blur. One day, about eight months later, they went to court with Jim, and he became legally theirs. Of course, he had always been theirs in their hearts, and many times they had caught themselves forgetting he was ever adopted.

They could remember how he seemed to grow so quickly — how he walked and talked, played with the neighborhood children, began school. Oh, they had so many things to remember about Jim and their life with him. But most of all they remember all the love and joy he has brought them and the way he has given meaning and richness they never before dreamed of to their lives.



George Montgomery, Jr.  
Catholic Family Center

## When Emotions Erupt

"He is stubborn and does not learn." "His restless behavior affects other children in the classroom." "I have tried reasoning and punishment, does not affect him either."

Teachers in the Rochester Catholic school system are confronted with this type and other kinds of problems in their classrooms. Since 1953, they have been able to turn to the DePaul Clinic for help in understanding children with emotional difficulties.

The clinic is a division of Catholic Charities and a Community Chest agency, is licensed as a psychiatric clinic by the State of New York, Department of Mental Hygiene. Mental health services are provided for children between the ages of five through eighteen and from April, 1953 through March, 1954, the staff saw 392 children and their parents.

Referrals to the clinic are made by the parochial schools in cooperation with parents. Once referred, parents are initially interviewed by the clinic team of psychiatrist, psychologist and social worker. Then the child is seen for psychiatric examination and psychological testing. The parents have additional interviews with the social worker. Then the clinic team meets with the school principal and teacher to discuss and determine the child's difficulties and plan what can be done about them.

Very often such planning includes parent counseling (either on an individual appointment or on a parent group basis). Any treatment approach, whether with the child directly or not, is conducted and coordinated with the teacher's efforts in the classroom.

Since 1951, the clinic has been offering consultation to the school teachers in the form of mental health education. This approach was emphasized more during 1953, as it is seen as an effective approach to meeting mental health needs on a broad scale. \$25,000 was required to meet total needs during 1953, and the Community Chest participation in this was \$22,000.

For the first time since its inception in 1953, the clinic became affiliated with a university in cooperation with the training of a graduate student of social work. Father John Dwyer from St. Patrick's College of the University of Ottawa was placed here as a student worker during 1953.

The present staff in the clinic includes Dr. Albert W. Sullivan, psychiatrist and clinical director; Philip Fewers, certified social worker and executive director; Mrs. Julian Brown and Harold A. Schwartz, clinical psychologists; Dr. Alden Iversen, psychiatrist; Gerald H. Pasby, supervisor and certified social worker; Mrs. Sylvia Lee and Mrs. Alfreda Yeomans, certi-

fied social workers; and Mrs. Mary English, social worker; Miss Anne B. Christoff, administrative secretary; Mrs. Marcelle Taitte and Mrs. Helene Sokolsky, secretaries; and Mrs. Ailene LeFrois, bookkeeper.

The DePaul Clinic is located on the fifth floor of the Columbus Civic Center at 50 Chestnut St., Rochester.

### Daily Mass At St. Ann's

Time and again one hears from the lips of a guest at St. Ann's these words: "The best part of living here is the privilege of assisting at daily Mass." Many people come to the Home who have not been able to get out to Mass in many months or even years. It is a rare treat to be taken to Mass in a wheelchair or to walk there with some assistance without having to go out in the inclement weather.

No icy sidewalks or insurmountable stairs prevent one's assistance at the greatest Act of our faith.

It is not even necessary for the infirm guests to walk to the altar railing because the chaplain distributes Holy Communion not only at the altar railing but also up and down the aisles for those unable to get up to the railing.

## Foster Homes for Children

During 1953-1954, 287 children from infancy through adolescence received care in foster homes arranged by the Catholic Family Center of Rochester. The decision to place a child away from his parents is undertaken only after much thought on the part of the parents and study of the total family needs by the caseworker. A Center caseworker helped "Mr. West" make a decision to place his daughters in a foster home.

Mr. West, an industrial laborer, is a conscientious man of thirty-eight. Two years ago, Mrs. West died of cancer. It was obviously a great loss both for Mr. West and his two children—Kathy, age 10, and Martha, age 12. Since the mother's death, the family situation gradually deteriorated.

Martha had always been a very pleasant, outgoing girl, doing well in school. After her mother died, she began to gain weight and in two years gained almost eighty pounds. Martha often fought with her sister and other children. Her marks in school began to go down.

Kathy had always been a quiet, shy girl. She was an honor roll student, but had only one close friend. After Kathy's mother died, she began to withdraw more into

her books and had no time for her friends or family.

Mr. West felt his responsibility to his family but was overwhelmed in his attempts to continue to be breadwinner, plus take on many of the domestic chores. Problems which they had been able to cope with as a family previously, seemed almost too much. He did not know how to approach and handle the girls' new problems. He realized he should seek help before the problems became more severe.

He came to the Catholic Family Center where, at the advice of the caseworker, he planned toward placement of the girls temporarily in foster care until he was better able to care for them, and the girls had worked out some of their problems.

With information from Mr. West and by getting to know the girls personally, the social worker was able to select foster homes adequate for their own personal needs, and prepare them for the move into these homes by visits beforehand with the families. A budget was worked out with Mr. West by which he planned to move to smaller quarters, and to pay toward the costs of foster care.

He planned to visit the girls weekly, so regular con-

tact between parent and foster care could be maintained. In addition, regular sessions with the social worker would give him an opportunity to discuss his problems and how to meet them himself.

After a physical examination, Martha began taking thyroid and appetite depressants which resulted in weight loss. This made her feel more sensitive about herself. In discussing her problems with her caseworker, she better understood why they came about and how to prevent their continuance. Her marks have begun to rise and she has begun to make new friends.

Kathy, with the help primarily of the foster parents and other children in the foster family, is slowly becoming more outgoing and has entered into some school activities. She enjoys being with other more and doing things with them. Both girls have found a good "substitute mother," have begun working out their feeling of loss, and have found love, security, acceptance and understanding in their foster homes.

Sometime soon, the West family will be reunited. Continuing casework will be offered until the adjustment is made back to regular family living.

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TO ANY OF THE FOLLOWING AGENCIES THROUGH THE COMMUNITY CHEST-RED CROSS

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