[Music playing]

Neal: Hello.

Roy: Hello.

Neal: I am Neal Holtan. I am here interviewing Mr. Roy Newcomb. Welcome and glad you could come in. Let's start by hearing a little bit about yourself, what year you were born, where you grew up.

Roy: I was born in December 18<sup>th</sup>, 1924, in Hines, Minnesota, which is north of Bemidji, near Blackduck.

Neal: And, how long did you live there?

Roy: I spent my life there until I got married, other than my time in the service.

Neal: Okay. And, where did you go to school?

Roy: Well, in the service, I was in the Navy and I was in a program called V-12, which was college preparatory to officer training. And, after the service, I went to Bemidji State Teacher's College.

Neal: And, what did you study?

Roy: I studied music.

Neal: And, have you been a musician ever since?

Roy: Well, let's put it this way, Bemidji Teacher's College prepared teachers, and I never had aspirations to be a teacher, but that is what I became. And, I taught school seven years in three different northern Minnesota towns. And, then decided that was not, I did not think that was the best career for me.

Neal: And, what was your next step?

Roy: I got into county social service work, and I obtained a job at Cass County Welfare Department, near Walker.

Neal: And, what kind of duties did you have there?

Roy: I started out as a caseworker. I had a caseload of probably 200 or so old age assistance recipients, and also a program of aid to dependent children recipients, and aid to disabled, and aid to the blind clients.

Neal: And, were you at the Ah-Gwah-Ching facility there?

Roy: Well, Ah-Gwah-Ching was a state nursing home. It had previously been a tuberculosis sanatorium. But, when TB was pretty well wiped out, the state converted it to a nursing home for elderly senile patients.

Neal: And, do you know what year that switch occurred?

Roy: It was in the early 1960s, I cannot remember the exact year.

Neal: And, how did the change affect you?

Roy: Well, I had very little to do with Ah-Gwah-Ching until it became a state nursing home. And, at that time, it was in the early 1960s, the state hospitals were sending a lot of clients out into the community and Anoka State Hospital had sent quite a large number of patients that were senile up to Ah-Gwah-Ching.

Neal: Could you estimate how many?

Roy: I did not really keep track, but I would guess that it was somewhere between, 20, 30, or in that neighborhood.

Neal: And, what sorts of conditions did they have?

Roy: They were really quite difficult to communicate with. Some were senile and really could not hold a conversation when you tried to talk to them.

Neal: And, what was done for them? Was it a therapeutic setting, or just for them to live there?

Roy: As near as I could tell, it was pretty much just nursing care.

Neal: And, could you anything about the process of the transfer from Anoka State Hospital? How did that happen?

Roy: Well, I was not in on the actual physical moving them up there, but at the time I was asked to become involved to get them on old age assistance, they were already there.

Neal: And, did they kind of come one at a time or groups?

Roy: By the time I was assigned to get them on old age assistance, they were all there, as far as I know. But, they had mostly come from Anoka State Hospital.

Neal: Do you know if they had family members that visited them or not?

Roy: I doubt very much, because there was no indication of family involvement of the patients that I saw.

Neal: Do you have any other connections with Anoka State Hospital?

Roy: Well, in 1965 I moved to Anoka and eventually I had a caseload of mentally ill clients. So, I was involved somewhat in getting them admitted to and discharged from Anoka State.

Neal: And, when you moved to Anoka, who did you work for?

Roy: That was the Anoka County Social Service Department.

Neal: And, long were you with them?

Roy: I was there about 23 years.

Neal: Okay. And, what, do you remember what years?

Roy: We moved there in '65 and I retired in '80, probably '88 or '9.

Neal: And, do you remember anything about your interactions with Anoka State Hospital in terms of admitting patients?

Roy: I was more involved with the aftermath of what happened to them after they were discharged.

Neal: Okay. And, could you say more about that?

Roy: Well, some of them were discharged to the community without real planning, as near as I could tell. And, the result, some of them had a difficult time getting along.

Neal: And, were you one of the people that tried to support them once they were discharged?

Roy: Yes, I guess that was the idea at the time the state hospitals were being emptied, was that the county social service would take care of people with problems.

Neal: Did you feel equipped to do that?

Roy: Not really.

Neal: What kind of challenges did you encounter?

Roy: Well, I would say people that just had a difficult time making it, finding a place and so on, supposedly the community group homes would take care of them, but not all of them were able to make that connection.

Neal: What happened to ones who did not fare so well?

Roy: Well, I think some of them were on the street, and some were admitted to the local Mercy Hospital psychiatric ward if they got in trouble.

Neal: Did you interact with medical or nursing personnel in regard to these clients?

Roy: Not a great deal, no.

Neal: Do you know if your clients had psychiatrists that they could see?

Roy: Some did, yes.

Neal: And, were they on medications?

Roy: Some were, um-huh.

Neal: And, what was your personal reaction to this? How did you feel about it?

Roy: Well, I personally felt that some of them should have remained in the hospital, but I guess the philosophy at that time was that community facilities should be able to take care of them.

Neal: Did I hear right that you had some training at Anoka State Hospital at one point?

Roy: The closest that would have been what you would call training, well, even before I moved to Anoka, I was involved with Fergus Falls State Hospital, and we had some training there, and we visited the wards and saw the condition of, and some of the philosophy of treatment. And, I found this similar situation in Anoka.

Neal: And, say more about your impressions of that.

Roy: Well, I thought the patients were well taken care of, but I guess I did not really know much about what treatment they got.

Neal: Did you maintain a connection with Anoka State Hospital through your career?

Roy: Occasionally, I was involved in helping someone get into the State Hospital that obviously needed that kind of care.

Neal: And, how did you get called in, through the county welfare?

Roy: Well, as a county social worker, we had caseloads, and the last ten years or so of my work in Anoka County was a caseload of mentally ill clients.

Neal: And, how many cases did you manage at any given time?

Roy: I would say between 10 and 20 that suffered from mental illness.

Neal: And, did those clients differ from other clients in terms of how much time it took to serve them?

Roy: Well, let's put it this way. Some of them had real problems of adjustment to the community.

Neal: Can you think of an example?

Roy: Well, I remember one lady that suffered from manic depression, and she was able to find her own apartment, and there were times that she functioned very well, quite an intelligent woman. But, then when she would, apparently would go off her medication, she would get in a manic situation and she would destroy the apartment, throw things all in the middle of the floor and be really quite out of control. And, I would be involved in getting her admitted to Mercy Hospital, which was the community alternative.

Neal: How often would a challenging patient like that, or client, need your help?

Roy: I would say at least monthly contact to observe the condition and when she got in a manic condition, I would help her get admitted, usually to Mercy Hospital.

Neal: And, in your client load, did you visit the clients weekly, monthly, how often?

Roy: There was no set schedule of visits, no, but hopefully at least monthly contacts.

Neal: And, did you see them in their homes or at your office?

Roy: Usually at their homes, yes.

Neal: Do you live in Anoka?

Roy: The outskirts of Anoka, City of Ramsey.

Neal: Maybe we could switch a little bit to the community of Anoka and its relationship with the hospital. In your opinion, how is that?

Roy: Well, I think Anoka Hospital has been there a long time, and it was receiving hospital for the whole metro area, still is, I guess. But, I have had very little contact since I retired. I have been retired almost 30 years.

Neal: And, do you think people in Anoka are favorable toward the hospital or neutral or disapprove?

Roy: I would say neutral.

Neal: As a social worker, what do you think about the changes that have occurred in the mental health system? You mentioned them leaving the state hospitals, but have there been other trends?

Roy: Well, supposedly, the community hospitals are able to take care of people with mental health problems, and I think Mercy is doing a good job. But, I have not really kept touch in the last 30 years what is happening.

Neal: If you could make any policy recommendations for serving mentally ill people, what would you change?

Roy: Now that is a question I have not really thought about for a long time. I think the state hospitals did serve a necessary purpose while they were in operation. I do not know how many are left, but the last hospital that I had much contact with in my job was the Hastings Security Hospital. I have been involved in several clients that ended up there.

Neal: Did you have clients that were at risk for harming themselves or getting into dire situations?

- Roy: The ones that went to Hastings, yes.
- Neal: And, they were...

Roy: Well, that is a hospital for the mentally ill and dangerous, yes.

Neal: Okay. All right. Is there anything else that you want to share about either Anoka State Hospital or working in your long career of being a social worker?

Roy: Well, when I went into social work back in the 1950s, at least in the rural areas, the state hospitals had farms. Most of the people in northern Minnesota had some farm background, and that was a good thing, therapeutic in my opinion, to be able to work on a farm rather than just sit around and do nothing. And, I understand that Anoka State did have a farm at one time. That had been discontinued by the time I moved there. But, I thought that was a very good program for therapy and just to not sit around doing nothing.

Neal: Did you work with people like occupational therapists?

Roy: Not really.

Neal: Okay. Anything else come to mind that you wanted to discuss today?

Roy: Well, I guess I sometimes wonder what happened to those people that were transferred to Ah-Gwah-Ching. When I was up to Walker a year or two ago, I thought I would see how that beautiful building is holding up and what is happening to it. Found it is all torn down. The same thing has happened to several of the state hospitals, are no longer there, and I am not sure that I think that was a good idea.

Neal: Well, that is all the questions I had for you. Do you have any wrap-up comments at all?

Roy: Well, the last ten years of my work for Anoka County was a caseload of adults, many of whom had mental health problems. And, I think the state hospital was serving a purpose for long-term care that the community hospitals just cannot do. And, that is observation I would have.

Neal: Well, thank you for coming in today and sharing your memories of Anoka State Hospital. And, thank you for all the years of service that you gave to mentally ill people.

Roy: One thing I did not mention, you asked about did I have any training in mental health. Excuse me, my throat is giving me a little trouble today. But, I think that state hospitals did serve a purpose. Perhaps they were kept longer than necessary in some cases, but I am not so sure that the community hospitals are doing that much better. There is a lot of people out on the streets that probably have mental health problems and nowhere to go.

Neal: And, how about substance abuse? Was that common in your caseload?

Roy: Back in my days, if you had an alcohol problem, that was about it. All these drugs that we are facing now days, fortunately were not on the scene back then.

Neal: Okay. Well, thank you, Mr. Newcomb.

Roy: Okay.

Neal: It has been a pleasure.

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