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ABSTRACT

This paper discusses the role of the free clinic in helping youth. It examines the activities of the Health Emergency Aid Dispensary (HEAD) in New Orleans, a free clinic that: (1) performs pregnancy tests; syphillis and gonorrhea tests, urinalysis for kidney ailments, PAP smears: (2) prescribes birth control; and provides rapid consultation of a crisis-intervention nature through a 24-hour telephone-answering service. The log of a counseling graduate student from Louisiana State University who worked at HEAD to fulfill his practicum requirement provides an insight into the daily experiences encountered at HEAD. The log describes the orientation program, volunteer training, drug problems, venereal disease lectures, emergency telephone calls, and community requests for resource information. The paper concludes that working in such practical settings as HEAD broadens and deepens a counseling student's understanding of the real environment from which his prospective counselees will come. (Author/LAA)

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THE "FREAKY" KID WHO NEEDS HELP: HIS CHARACTERISTICS, HIS ALTERNATIVES

Paper presented to the '73 Convention of the American Personnel and Guidance Association Program number ASCA 155 San Diego, California

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Presenter and Discussant -- Dr. Walter Liston

Many young people today have turned to the free neighborhood clinic as a source of aid in times of stress. They have found that the free clinic can help them with physical and emotional problems. This assistance is provided confidentially and without "strings." There are no red-tape "hassels." A youngster with venereal disease or a drug problem can receive treatment without fear of social ostracism.

The modern educator - counselor - should be aware of the existence and functions of free clinics for one very basic reason: the counselor works with youth. Many young people-at one time or another--use the services of the free clinic. According to the National Free Clinic Conference Directory and the National Directory of Hotlines, Switchboards, and Related Services, there are 674 clinics and switchboards scattered throughout the United States and Canada. This means that a lot of the counselor's clients may have gone to a free clinic for help they couldn't get anywhere else!

One such free medical clinic is HEAD - Health Emergency Aid Dispensary - located for 2½ years in the French Quarter of New Orleans. Sharing the same facilities with HEAD was NOSE -New Orleans Switchboard Exchange - a 24-hour telephone answering service.

For the last two years, some of our graduate students in Counseling at Louisiana State University in New Orleans have worked as volunteers at HEAD and NOSE as a means of fulfilling practicum requirements at LSUNO.

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The paper I'm going to read is based on the experiences of one such student, and is titled, "Log-Rythms.

This is the student's Log:

At 1117 Decatur Street in New Orleans French Quarter, there is an old building much like the many others in that area. This building is distinguished in one respect, however. The ancient structure houses an unusual operation known by the many street people, "freaks," transients and others familiar with the French Quarter simply as HEAD.

The Health Emergency Aid Dispensary - HEAD - is a free medical clinic which provides a full range of ambulatory care under the supervision of volunteer physicians assisted by volunteer nurses, social workers, counselors and students as well as young and old French Quarter "Street Community" members. This is how HEAD is described in "Survival in the Street," a mimeographed pamphlet distributed last year by a French Quarter community service group:

> HEAD is open Monday through Thursday--7 PM-9 PM. Patients seen on first come, first served basis, so please arrive at 6 P4 if you wish to see a doctor. There's plenty to read and occasionally oranges or apples waiting for you. Clinic can perform pregnancy tesps, syphillis and gonorrhea tests and urinalysis for kidney ailments as well as most other regular medical services.

Thursday night is Women's Night. Gynecologists are present to examine for pregnancy, to prescribe birth control, do PAP smears and take care of other female problems. Also, during clinic hours, counselors are available for dropping in and rapping about your head hassles. Medical Emergencies (bad cuts, burns, OD's) can be brought to HEAD during clinic hours, but any other time should go directly to a hospital.

The building also houses the New Orleans Switchboard Exchange--NOSE--a 24-hour telephone answering service providing rapid consultation of a "crisis-intervention" nature. Medical and social service information may be obtained from NOSE any time, day or night.

HEAD was conceived in September, 1969, by a small group of people who had become deeply concerned by the total lack of facilities for appropriately handling the drug and medical problems among the great numbers of restless young people who had gravitated to New Orleans French Quarter from all over the country.

They organized a board, evaluated possibilities and decided upon the concept of a free neighborhood clinic. They found an old building, in a less than desirable state of repair, with a landlord who, for a time, donated the building rent-free. Volunteers made repairs with donated paint and building supplies. They scoured the city dump for usable furniture. The clinic



opened in November of 1969, offering general medical treatment two nights a week and a switchboard--NOSE--open 24-hours a day.

As the "street community" became aware of HEAD, an increasing number of people came for medical treatment and other services. Mardi Gras, 1970, brought many drug problems and large numbers of young people looking for food and shelter. The clinic opened four nights a week, from 7 - 9 P.M., for medical treatment. More doctors, nurses, technicians and nonprofessionals gave their time. Seven volunteers, trained in first aid and handling drug crises, moved into the third floor of the building. They became the household, working on the switchboard and taking care of emergencies during non-clinic hours. These people who "run" the HEAD Clinic and NOSE Switchboard are young and can generally be described as "freaks" or "hippies"--like the bulk of the people they serve.

The following account is a log of my experiences as a volunteer worker at HEAD and NOSE from March to May, 1972.

Sunday, March 5

Yesterday Dr. Liston told me that the HEAD Clinic was holding an "orientation session" for volunteer workers. He advised me that this would be a good time to begin practicum activities.

A friend dropped me off on Decatur Street in the Quarter. It was a breezy day as I walked down the old, cracked sidewalk in the eleven hundred block of Decatur. I saw a neatly printed, medium-sized sign hanging from the second floor

balcony at 1117 with the letters H.E.A.D. on it. The door to the building stood open--in the French Quarter, a traditional invitation to enter. Inside, I climbed a long, steep staircase. About halfway up the stairway, I saw a sign with the admonition, "Do not bring illegal drugs into the clinic." At the top of the stairs, I pushed open the door marked "Open, Come In." I was immediately "mind-boggled" by the brilliantly colored psychedelic posters and paintings all over the walls.

Down a short hallway, a group of people were talking. A young girl, about seventeen, seated at a desk, looked up, smiled brightly and asked, "Hello, friend, can I help you?"

"Yes, I'm the graduate student who called earlier. Isn't there a meeting for volunteers here today?"

One of the group, a cute blonde, exclaimed, "Look, another volunteer!"

The girl at the desk introduced me and the group explained the set-up. The blonde then took us on a short tour. Near the desk was the counseling room. Two other rooms served as examining rooms. At one end of the hallway were two rooms with medical supplies, all donated to the clinic, I found out later. At the other end of the hallway were three rooms; two served as waiting rooms; the other was the NOSE Switchboard. Inside the Switchboard room were two desks. There were also two phones, "mail boxes," a large message board, file cabinets, numerous books and magazines and two desk-type chairs. On the left-hand side of the message board was a list of rules governing the proper NOSE worker activities.

Monday, March 6

This first day at the clinic was an eye-opener. The cordiality and openness of the workers really impressed me. They were warm and friendly and without reserve. I was also intrigued by the thoroughness and competence of the girl at the switchboard. The cute blonde--I'll call her "S"--was also very impressive. She had a unique vocabulary, but she knew her business. My work time this first day was from a to 5:30 P.M.

Tuesday, March 7

Today, I worked from 10 A.M. to 2 P.M. I sat in the NOSE room and read over information about clinic and switchboard operations. I familiarized myself with the "pill book" and routine first-aid procedures. I watched closely the switchboard worker, who this time was a bearded young man. He, like the others I'd seen Sunday, displayed considerable competence.

Thursday, March 9

Today, I answered my first NOSE calls. These were primarily of a general information nature. I needed assistance on several occasions from Ray, a young black and former addict, who lives at the clinic. Talking with Ray and other workers at the Clinic, I soon realized that New Orleans Switchboard Exchange performs a most valuable and unique service. Although perhaps the most crucial purpose of the switchboard is in the area of crisis-intervention, the other function of NOSE--that

6

ERIC Full First Provided by ERIC of giving information about--as Ray said, "Anything, everything"--may be just as important. For Nose is the only single place in New Orleans where this information is available with one phone call. In "Survival in the Street," NOSE is described as a call-in, walk-in information and crisis center...a referral service for places to crash, rides, work, legal aid, medical aid. NOSE also provides:

> Crisis service--call-in, walk-in--for freak outs, head hassles, runaways, drug identity information, and simple first aid.

NOTE: Life-endangering OD's should go directly to a hospital as should people with stitchable or facial wounds. People with head hassles can be referred to other outasight people to rap with, too.

In general, NOSE is in touch with many community resources.

Tuesday, March 21

7

I worked the 2 to 6 P.M. shift. Today, I was left alone at the switchboard. I felt more confident and did not need assistance. I had learned where the files were containing the names of the various other "helping" agencies in the area. I found that by checking through this source, I could answer most community information questions as they came in over the phone.



Wednesday, March 22

I was working the 6 to 10 A.M. shift. About 9:30, a young boy in jeans and a dingy T-shirt appeared. He said he was "broke" and needed some "bread." I gave him a dollar and referred him to HAND at 1212 Royal Street. HAND is an agency that locates part- and full-time jobs for young people. The jobs usually are lawn-mowing, window-washing, automobilecleaning or other basic tasks. I understand that neighboring residents are quite cooperative with this agency. The initials stand for Help Around the Neighborhood.

Thursday, March 23

I worked for three hours today, designing a format for a related project. This project involves the collection of data for the purpose of preparing a report of the various services rendered by HEAD and NOSE.

Friday, March 24

I was sitting at the switchboard desk, working on the research project, when the phone rang at 3:27 P.M. I answered, and this is the conversation that followed:

ME: HEAD Clinic, NOSE Switchboard--May I help you? CALLER: Nobody can help me--and I don't care anymore.

ME: Why do you say that?

CALLER: Are you a doctor or something?

ME: I'm a volunteer counse or--why don't you tell me what's bothering you?

CALLER: What's your name?

ME: Don.



- CALLER: _Look--I'm an old woman. I was stabbed by a nigger last week. I just got out of the hospital--do you know that my daughter didn't come to see me the whole time I was in the hospital?
- ME: No ma'am.
- CALLER: Well, she didn't. My husband died eight years ago. I've got no family down here except her and she wouldn't come to see me. Me with thirtgen stitches in my arm. I want to die! (She is subbing at this point.)
- ME: Where is your family?
- CALLER:In Missouri, near St. Louis.
- ME: I used to live in Kansas. I've been to St. Louis twice. That's a nice city with the bridges and all.
- CALLER: Well... ! think so. Did you really like it there?
- ME: Yes, ma'am. I saw the Cardinals at Busch Stadium--Do you remember Stan Musial?
- CALLER: Don't know much about sports--but I have heard of him.
- ME: Are you at home ... your home now?
- CALLER: Yes, please send someone to stay with me...I'm so lonely. (Sobs start again.)
- ME: We don't have anyone who can come to see you now... but you may talk with me as long as you like.
- CALLER: You're nice.
- ME: Thank you...you seem to be a nice person yourself.
- CALLER: Well... o.k. ... My daughter works somewhere down in the Quarter. Do you know her? Rosalie is her name.
- ME: No, ma'am. I just started working here recently.
- CALLER: She works at some damn joint down there. Probably gets money by shaking her ass all over the place. I worked so hard to make her good...it was hard, especially after her daddy died.
- ME: It's rough raising a child alone. Uh...have you been to St. Louis lately?

CALLER: Not in the past two years.





At this point, the caller and I discussed the virtues of the St. Louis area...she seemed to calm down considerably. At the end of the conversation, I cracked a couple of "funnies" that made her laugh. I told her to call back any time. She said that she was planning to go outside and sit in a lawn chair and have a martini. She asked me if I thought that it would be O.K. for her to do this. I said yes and told her I wished I could join her. With that we said good-bye. The whole conversation lasted almost fifty minutes.

Saturday, March 25

Today, I worked a 4-hour shift on the switchboard. The usual "community information" calls were prevalent. I have been inquiring about the possibility of doing some "faceto-face" counseling during clinic hours. Ray gave me the phone number of Lenny, who is in charge of the counseling program at the clinic, and today Lenny called and asked that I report for counseling work on Monday at 7 P.M. Lenny also asked me to attend a venereal disease seminar scheduled for Sunday night at HEAD. He said that much of the counseling at the clinic is done with young people who have contracted venereal disease. <u>Sunday, March 26</u>

I attended the "rap sessions" on venereal disease. A nurse was there to lead the discussion. I learned a great deal about the various types of venereal disease. There were about ten people at the session, most of them members of the household or volunteer workers at the clinic. I was lost sometimes during the session as the kids used a great deal of

nomenclature in discussing the problems of V.D. Their knowledge of the subject was extensive.

Monday, March 27

I was concerned about my first attempt at actual counseling tonight and spent the better part of the day reading the Krumboltz book on Behavioral Counseling. Very truthfully, I was scared witless by the time 7 o'clock came.

I found that most counseling done at the clinic is of a "crisis-intervention" nature. During the evening, I counseled two males and two females. Three of them were suffering with V.D. problems. The other was a pregnancy case. Everything went smoothly after a somewhat shaky start. Wednesday, March 29

Arrived at 5 P.M. for a switchboard shift. There were several community information calls. At 6 o'clock, I helped give out numbers to the people waiting to see the doctors during clinic hours. Shortly after eight, there was a disturbance in the outer hall. A drunk had slipped and fallen to the floor. People helped him into the counseling room and Joyce, another counselor, and I interviewed the man. He had come to New Orleans from a small town in Alabama over a year ago. He was, it turned out, a habitual drunkard. He hadn't is orked in over a year and apparently hadn't looked for work and said he didn't intend to. During the interview, he exuded self-pity. I didn't fully accept the factuality of his story in view of his condition. As the counseling traffic seemed

light, another counselor and I took the man to the "detox" center on Rampart Street and registered him there. I wished him lick.

Tuesday, April 4

Tonight I talked to a black girl who complained of general nervousness resulting from an operation she'd had recently. I suggested that she go back to the hospital for an examination. She replied she would <u>not</u> go back to the hospital after what had happened last time. It was extremely frustrating for me to be unable to sway her rigid attitude regarding hospitals. The thanks she gave me at the end of our discussion was little consolation. I truly pitied her. The situation left an uneasy impression and reatfirmation of the fact that you just can't help everyone.

Wednesday, April 5

Tonight I worked during clinic hours. There was little counseling going on. I saw no one. One of the other counselors handled two V.D. cases. Every night I have counseled so far has either been extremely active or extremely slow. It's good the clinic has three counselors available--there are times when all three are needed and then there are other times when only one would suffice. Sometimes, it's a long two hours sitting around waiting for something to happen. Tonight I read from the Krumboltz book--and four "Superman" comic books.

Thursday, April 6

Today was an experience! I was working on the switchboard and with the data for the report.

About 2:30 p.m., two girls of the household came in to "shoot the breeze." One of them was "S," the blonde I mentioned at the beginning of this log. The other girl, young and not unattractive, decided to go across the street for coffee. A few seconds later, we heard her yelling down below. "S" told me to stay by the switchboard so that she could go down and investigate. Seconds later, I heard "S" call my name. At the bottom of the stairs, the two young girls were struggling to help a young man up. He was glassey-eyed and tottering. "S" asked me to grab his arm and waist in order to get him up the stairs and into the counseling room.

Inside the room, "S" told him to stretch out on the mattress in the center of the floor. Then she turned to me and said, "He's a f----- junkie."

"What do you know about him?" I asked.

"Weil, his name is Ronnie and he's been tripping like crazy. Right now he's starting to come down."

Ronnie was a short, muscular fellow in his late twenties or early thirties. He was groaning as he lay on the tattered mattress. Suddenly, he pulled his knees up to his chest and compacted his body very tightly.

I heard "S" yell, "Stop that ships, you're making it worse by doing that! Pull his legs out, Don."

I grabbed his ankles and pulled. He resisted, so I pulled harder. His legs went straight. "S" was holding his upper body. She kept telling him to relax. I could see the pain mirrored in his eyes. Then he went limp. He appeared to be relaxed. "S" immediately grabbed his attention.

"What did you take--tell me straight."

Ronnie looked a little confused.

"Are you the pigs?" he asked.

"Hell no,""S" said. "We hate the pigs as much as you do. What did you take?

"I was shooting up. I took some pills--I don't know what they were."

"What color were they?" "S" demanded.

"They were red. Oh, God damn it, it hurts!"

And he contracted his body very tightly again. Again, I grabbed his arkles and straightened him out.

"S" said, "I've got to check something--stay with him."

And "S" left the room. Well, here I was with this guy. I was somewhat nervous....I didn't know what course of action to take....I'd never been in a situation like this before.

Ronnie came around again. He looked at me. Then his eyes glassed over. He seemed to be looking at a point somewhere above my head. He started talking.

"It's beautiful. Do you see it?"

I turned and looked in the direction of his fixed stare.





He continued, See the blue. It's real shiney. It's so nice. Don't you think it's nice? Cool water and air, all in blue and shiney."

He doubled up in pain then. Again I grasped his ankles and started pulling. With surprising strength he sat up. "Who are you," he asked angrily. "I need a fix. Get me a fix!"

"My name is Don, I'm here to help you."

"Have you ever been on horse?"

"No."

"Well, how in the hell can you help me? You don't know a f----- thing about it!"

"I can try."

"Try, my ass! That's not good enough. Look, man--I've got to go cold turkey--Now!"

"I didn't know what to say. I started to talk when he bounced to his feet.

"I'm getting outta here."

He started for the door. I blocked his path and simply said, "No!"

He looked me over, then said, "Look ... I don't care how big you are... I'm going out... now!... I gotta have a fix."

I stared directly at him. "Get back on the mattress, Ronnie! You've got to let us help you."

I reached out and grasped his shoulder with as much strength as I could muster. With the other hand I pointed toward the mattress. Ronnie looked at me for a moment and then nodded his head. He sat back down on the mattress. I

sat in a chair next to the mattress. I did this primarily to conceal the fact that my "nees were shaking. In fact, I was pretty well "shook" all coor.

Ronnie said, "Gotta cigarette?"

"Sure." I lit one and gave it to him. At that moment "S" came back. Fonnie saw her and asked who she was. "S" bent down beside him. In a very tough voice, she said, "Look---you know who I am. Don't try to pull any s--- with me!" Her tone of voice sounded extremely tough. I was amazed that this young and very attractive girl could sound so rugged.

She continued, "You've got three choices, Ronnie. You can go "cold turkey," you can go to the methadone clinic... or you can go back out in the street where we found you.... what'll it be?"

Ronnie whimpered, "I need a fix."

"O.K., F----, we'll take you back downstairs."

"Wait! "ake me to the methadone clinic...can you do that?"

"S" seemed to swear under her breath. "Yes, it can be arranged."

"O.K. That's what I need. Please take me there."

The arrangements were made and Ronnie was carted off to the methadome clinic. "S" seemed very tired. She walked slowly back to the switchboard room and sat down.

"What's wrong?" I asked.

"That damn methadone routine is no good...once a junkie gets the methadone treatment...it takes him off heroine... but then he has to "kick" the methadone. Once he gets back

on the street...he'll be back on horse again. The only way these f----- can beat the thing is to go cold turkey."

"Are you sure?"

"I've handled enough of them. I've had one success. It was a cold turkey deal. The dude has been off the stuff over a year now."

What "S" was saying made sense. I said, "You would make a hell of a good counselor...do you know that?"

"S" shrugged, stood up, brushed her blonde locks back and announced, "I'm gonna go get a beer. Bye, Don. See you tomorrow."

That night as I rode the bus from the HEAD Clinic out to The University, I wrestled with a number of unpleasant thoughts. I hated to see a life wasted like Ronnie's. I wondered about "S"...it's a shame she doesn't have the resources to finance the training for a professional career. I thought about my own ignorance concerning the drug problem. I thought about the people outside. How many of them knew...or even cared...about people like Ronnie.

It had been a very unusual day. Friday April 7

Today at the switchboard I answered one rather amusing call. It went like this:

ME:	HEAD Clinic, NOSE Switchboard. May I help you?
CALLER:	Yeah, man. Can you get V.D. of the nose?
ME:	I don't knowI've never heard of it.
CALLER:	Hell! You're a big help!

17

And then the caller hung up! I still haven't found out whether one can contract a nose-related venereal disease. Tuesday, April 11

Today, I spent six hours at HEAD--four at the switchboard and two hours counseling. I talked with three males about their respective problems and alternative courses of action regarding their V.D. problems.

Wednesday, April 12

I worked during clinic hours as a counselor tonight. I had a pregnancy case. After talking with her for some time, I referred her to W.M.A., Women's Medical Assistance, a selfsupporting organization whose function it is to assist those women with problem pregnancies. W.M.A. is capable of making all necessary arrangements with Board certified obstetricians and gynecologists in fully accredited hospitals and clinics. Thursday, April 20

I have just completed a 2 to 6 A.M. switchboard shift. In the course of the morning, I saw one person. He asked for a meal ticket to the "No-Name Restaurant" down on the first floor of this same building. I gave it to him and he left. Tuésday, April 24

Today I worked for nine hours on HEAD and NOSE activities. Early this morning...on data for three hours...and last night, two hours of counseling during clinic hours.

Later, I took a 10 P.M. to 2 A.M. switchboard shift. About 1:20 A.M., a young black with a small cut on his thumb appeared at the NOSE desk. I took him to the exam room and applied hydrogen peroxide and merthiolate solution to the injury.

Wednesday, April 27

Tonight, about mid-way through clinic hours, a young, pretty girl wandered into the counseling room. It seems she'd been having unusual nightmares and couldn't sleep. This information was obtained only after utilization of the "inner-circle strategy" of initial counseling as recommended by Lazarus. We discussed the problems of the girl's frightful dreams at length. At the end of the clinic hours, I asked her whether she could come back tomorrow night to pursue the matter further. She said she would.

Thursday, April 28

Tonight I worked at the clinic. I waited for my "nightmare girl." She never appeared! I don't suppose I'll ever see her again.

Saturday, April 30

I had an active switchboard shift earlier today. Lots of calls...mostly of the community-information nature. Nc emergencies.

Tuesday, May 9

During the latter part of last week and the earlier part of this week, "L", the other graduate student, and I spent roughly ten hours recording and categorizing the HEAD-NOSE data.

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Saturday, May 13

Today is my last day at the HEAD Clinic. The whole experience has been very meaningful.

Lately, I've heard that HEAD and NOSE are in the deepest of financial difficulties. Hopefully, the city of New Orleans will realize the services performed by these two fine operations and give them the much needed financial help.

In San Diego, California, recently, free clinics have received "in principle" support from the local government which..."directed the chief administrative officer to investigate the possibility of the county helping the clinics with funds."

This move toward cooperation between the "establishment" and the "street community" may only be the first of many, as awareness of actual clinic activities grows.

The San Diego Herald reported in August, 1971, that ... "free clinics save the county \$335,000 a year by serving an estimated 60,000 patients per year."

The two major New Orleans newspapers have done several articles on the facility, almost always in a supportive vein.

In an article in the December, 1970, issue of the magazine, <u>People</u>, a Southern Baptist publication, the author observes:

"The French Quarter in New Orleans is a magnet for thousands of kids "on the road" in America today--the long haired type kid labeled "hippie," "flower child," ..."freak," and "head." They come from

every state in the Union. Some are college dropouts; some are adolescent runaways; some are kicking or perhaps trying to forget an unhappy marriage.

The observer notices quickly what the HEAD Clinic is and what it accomplishes is not an accident. HEAD...is performing a task that no one else has ever tried to accomplish. Medical aid is dispensed, mental illness diagnosed, runaway kids are put back in touch with home, and--in some cases-kids are given the chance and the freedom to get their feet back on the ground.

Institutions such as Charity Hospital in New Orleans offer health service and emergency treatment. But in a situation like Charity, where emergency rooms treat 20,000 people per month, the impersonality is appalling. Community Health Centers seem to be the only workable solution."

In a local newspaper, I found a story about a young couple who finally obtained assistance from HEAD after being spurned by Chairty Hospital. It seems that a girl, accompanying a boy who was having a bad reaction to drugs, took him to Charity. "They told me to take him somewhere else and buy the drugs he needed. They were very abusive about our long hair, calling us hippies and everything."

The LSUNO campus newspaper, <u>The Driftwood</u>, gave an accurate picture of the HEAD Clinic as 1 saw it as a volunteer: "Every night during clinic hours, the waiting room is packed with humanity seeking medical aid."



In conclusion, I can only say that HEAD and NOSE are excellent operations that more than adequately fulfill their self-appointed tasks of providing humane treatment for those in need. I hope that the 674 other free clinics in the United States and Canada are as well staffed and coordinated.

Don C. Thompson

There is an epilogue to Don's paper. Last December, HEAD and NOSE were forced to leave the dilapidated old building at 1117 Decatur Street in New Orleans French Quarter... they couldn't pay the rent.

With the help of the Metropolitan Ministerial Service, the Clinic and Switchboard eventually found a new home ten blocks away, in St. Mark's Methodist Church Community Center, on the fringes of the Treme community, a large, predominately black neighborhood.

St. Mark's had been a recreation center for the neighborhood and residents openly resented the presence of HEAD and NOSE. Antagonism was so strong that switchboard volunteers storped coming and NOSE had to move again...this time to 1212 Royal Street, the home of ABBA Foundation, a community self-help service in the French Quarter.

For HEAD, the move to St. Mark's created the need for a whole new kind of medical treatment. Now the population being served was not just street people, but also poor people who simply couldn't afford medical treatment.

The clinic still operated as a "trioge" (tree-ahjg) center, dispensing emergency medical treatment and making referrals to appropriate agencies; but it also broadened services in the direction of community medicine to better serve the Treme neighborhood. A pediatric night was established, Wednesday nights, on a regular basis, to screen as many children as possible for chronic ailments; counseling services are available to deal with specific problems of the neighborhood; and the director of the city health department has designated the clinic as an Outreach Center for the V.D. Control Center....with a health department doctor regularly assigned.

We, in guidance and counseling at LSUNO, plan to continue to assign our graduate students to HEAD and NOSE since we feel strongly that working in these practical situations broadens and deepens our students' understanding of the real enviornment from which their prospective counselees will come.



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NOVEMBER 19-25, 1972

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C= Calls V= Visits

RECORD OF HEAD CLINIC ACTIVITIES

ERIC Full fact Provided by ERIC

MONTH OF MARCH, 1972

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F = Female M = Male

C = CallsV = Visits

SAMPLE PAGE OF NOSE LOG

			,		
Time					D. of Person
10.20	c	c	Carroll for Toddincompcall back	IIIa	<u>king entry</u> Pat
10:20 10:33	C C	C S	Male for Robbie/complete		Pat
10:33	C	D	Todd returned Carroll's call		Pat
	เ เม	P C S	Male to see Todd		Pat
10:40	W C	c ·	Joyce Davison for Ray		Pat
10:45	C C	с С	Todd called Royal Pharmacy about perscription		Pat
10:47	L	ί,	for Chester		
10:55	W	S	Two malestalked to Shelley		Pat
10:57	С	S S C C	Dacusmail and hat's number		Pat
10:59	W	С	#A789-for Valadoltooth ache		Pat
11:00	Ŵ	С	#A741soak freet		Pat
11:00	Ĉ	Ċ	FemaleWelfare Dept. re. do we have Aldomet?		Todd
	-	-	re. clinic hours		
11:02	С	S	Female for Head Ima address		Todd
11:25	Č	S	Dacus on pay phone; about schedule		Pat
12:00	C C	Р	Ron used pay phone		Pat
12:01	Ŵ	S	Ron split		Pat
12:03	С	S S P S S	Comm. Service Centerchange of address		Pat
12:08	W	С	Male here last night; not feeling any better		Pat
			sat down in waiting room		
12:20	W	С	David from LaPhere; fell, gave Valadol #A795		Pat
12:25	С	P P C	For Pat/complete		Pat
12:30	С	Р	Charlie called out on pay phone		Pat
12:35	W	С	Two Femalesbc pills; re clinic hours		Pat
12:40	С	Р	Times for Charlie		Pat
12:40	W	¢	Male: Can women get hernias? Yes; also wants		Pat
		7	to volunteerused to be medic		
12:42	С	S	Bob N. for Shelley's phone number		Pat
12:47	С	S	Female for Frank Craignot here		Pat
12:50	С	s	B.C. pills; re clinic hours		Pat
1:10	С	S	VD clinic address and number		Pat
1:11	с с с с ()	S \	Male from Narcotics Committee, wants to know		Pat
	Ĭ		who we use as references so he can put us down		
	1	Ì	in his file.	•	
1:12	W	C/S \ .	Male-return Ace bandage, apartments?		Pat
1:13 /	M	S	Male-blood banks?		Pat
1:14/	Ŵ	S	Male-address of VP clinic	*5	Pat
		X	N		
CAL	1.11				
CALL	WAI	LK-IN	SWITCHBOARD		
			ACTIVITY		
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CLINIC ACTIVITY