throp Griffin's *Humphrey: A Candid Biography* (the most informative book on Humphrey yet to appear), Humphrey is quoted as saying that politics is "like running a drug store. When people come in, you've got to do something for them."

In his book, Griffin says that one of Humphrey's "most appealing characteristics—his love of people—would in one sense be a Presidential weakness. Humphrey is almost incapable of saying 'No' to the request of any human being. . . . He would have trouble, as he does now, turning down the marginally important or inconsequential requests for his time and effort."

Humphrey's advocates do not think he deserves all the abuse he has received from the Vietnam dissidents. His supporters think he is still basically the same man that the liberals liked prior to becoming Johnson's Vice President. "Those of us who've known him know he hasn't changed. He's still the same Humphrey," physicist Ralph E. Lapp maintains. Wiesner comments, "I think that the predominant view of the scientific community is that the Vietnam war is a mistake and that we should get out. I don't think Humphrey disagrees." Wiesner says that he trusts Humphrey's instincts on Vietnam more than either Johnson's or Nixon's.

When voters make the trip to the polling booth, many will be more influenced by what they perceive to be the candidate's "instincts" than by his past record. During the forthcoming month, Hubert Humphrey and his backers will be trying to convince the country that the instincts of the "Old Nixon" are still alive and dangerous and that the pre-LBJ Humphrey has risen again.—BRYCE NELSON

Topeka: Psychiatric Aides Shake Up the Old Order

Topeka, Kansas. In the late 1940's Topeka State Hospital broke with the snake-pit tradition of custodial care of mental patients and became the bellwether of reform for state mental hospitals in the United States. This dramatic change, accomplished with the aid and leadership of the Menninger brothers and the nearby Menninger Foundation, involved a rapid buildup of the hospital's then skimpy patient-care staff by the addition of many psychiatrists, psychologists, social workers, therapists, and other mental health workers.

It is ironic, therefore, that many professional and nonprofessional staff people at Topeka State today regard the personnel policies of the hospital and the Kansas mental health system as hopelessly outmoded. In fact, the hospital's personnel problems—problems from which similar institutions in other states are by no means immune—are now acute, partly because a combination of old laws and old attitudes in this politically conservative state have largely frustrated dealings between state officials and militant hospital workers.

The new militancy at Topeka State, which seems too potent to be long put off, derives not only from the outrage of the workers at their low pay and status but also from their desire to have a say in the rules and policies governing their workaday lives. In short, the militancy of these workers, nearly three-fourths of whom are Negroes, is simply a new manifestation of a pervasive national phenomenon.

Unrest at the hospital attained its present high visibility this past June with a demonstration—a "takeover" of several wards—by some of the psychiatric aides, who make up more than a third of the hospital's 900 employees and are its most numerous class of health worker. In the snake-pit era the aides served principally as orderlies and strong-arm attendants, cleaning up after patients and restraining those who became violent. A significant aspect of reform, however, was to give aides better training and to make them—the people closest to the patient—key members of the treatment team. Karl A. Menninger has expressed the view that the aide, more than any other hospital employee, could "exert a potent and continuous therapeutic influence."

Conflict with Nurses

Although such acknowledgments of the aide's importance have been frequent, his income, usually from $3000 to $5000 a year, is close to the poverty level unless he (or she) takes a second job, as many do. Moreover, his career ladder has even fewer rungs now than it had early in the reform period, when senior aides supervised other aides at the hospital-section as well as at ward levels. In time, graduate nurses (of whom the hospital once had very few) were given the principal supervisory responsibility at the section level. Many aides now regard the nurses as despots whom the hospital administrators, psychiatrists, and other professionals allow, by default, to run the institution.

Moreover, some of the hospital's professionals, especially some of the residents and other younger staff people, agree that the aides are caught in an oppressive system. One of them, William Bronston, a bearded 29-year-old California physician who was in psychiatric residency training until dismissed from the staff last June, was a prime mover last year in reactivating the aides' union, which was first established in the late 1950's but had become dormant. Bronston, clearly a radical, is also credited with stirring up much of the current unrest. The principal reason given by the hospital for firing him was that his true interests were deemed to be in fields other than psychiatry. Coincidentally, Bronston was notified of his dismissal on the very day in June when the more militant aides revolted.

These militants, organized as the Kansas Health Workers Local 1271, American Federation of State, County, and Municipal Employees, last May set the stage for a confrontation by submitting a list of 17 "demands" to Robert A. Haines, state director of institutions. Included were demands for a contract, a 35-percent increase in pay, union-approved job specifications, better grievance procedures, and a voice for the union in personnel policies and hospital management.

On 12 June, the deadline the union had set for compliance with its demands, Haines replied. Though agreeing that there is a "marked lack of incentives" for aides, he cited a ruling by the state attorney general to show that the

Board of Social Welfare, which sets policy for mental hospitals, could not enter into a union contract.

Haines promised to discuss with the union those demands that could be handled administratively. But he said that such demands as the one for a pay increase could be met only by the legislature, to which the Board of Social Welfare had earlier recommended a 20-percent pay increase for aides. The union had heard this story before, however, and this time was rejecting it. Emerson Stamps, Local 1271's chairman, felt the aides had waited long enough. Though he had served 20 years as a mental-health worker and had been cited by the hospital as an outstanding aide, he was still working 16 hours a day to support his family of seven. (Each day Stamps reports for his first job, at Topeka State, at 7 a.m.; he leaves his second job, at the Veterans Administration Hospital, shortly before midnight.)

The Aides Rebel

Early on the morning of 19 June the aides, or at least the militants of Local 1271, rebelled. They announced that they were taking administrative control of patient care at Topeka State and also at Kansas Neurological Institute, a hospital for retarded children, where aides had similar grievances. "We will maintain our hospital improvement action until we feel substantial action has been taken by the administration in meeting our just demands," one of the insurgents' handbills proclaimed. One purpose of the takeover, as subsequently explained by union leaders, was to increase the number of aides on the wards and thus demonstrate that intensive aide coverage results in superior care of patients—though this was in part a propaganda gloss on what was essentially a power play.

The takeover, which at Topeka State extended to only three wards and involved no more than about 40 aides, was short-lived. Alfred P. Bay, administrator of the hospital, at first tried to quell the uprising himself. A tall, aloof man who in an earlier day might have cut a figure as a Kansas lawman, Bay invoked his authority as a deputy sheriff of Shawnee County and personally arrested Stamps and several of the other demonstrators. The insurgents were taken to jail but were released when the county attorney could find no charge to bring against them. They returned to the hospital and remained there until late afternoon, when a legal restraining order was served and the takeover ended.

However, the Board of Social Welfare undertook punitive action that provoked new demonstrations. Thirty-four aides from Topeka State and Kansas Neurological Institute were suspended for insubordination and were subsequently fired. The aides reacted by picketing the hospital and mounting protest demonstrations. Black militants from the local community joined in the protest, as did such roving activists as the Reverend James Bevel, who had been a leader of the Southern Christian Leadership Conference's Poor People's Campaign.

The American Federation of State, County, and Municipal Employees (AFSCME), an increasingly powerful national union, intervened by sending in William Lucy, a black unionist who had helped settle the successful Memphis garbage strike. Scores of professionals—psychiatrists, psychiatric residents, psychologists, social workers, therapists, and even nurses—at Topeka State and neighboring institutions also rallied to the support of the aides, petitioning for their reinstatement and for better pay and career opportunities for them. One group of petitioners observed, "while some of us do not necessarily condone recent protest tactics, the usual forms of protest are not open to those caring for the ill and incompetent." Following the suspended workers' dismissal, a dozen or more professionals were arrested and locked up overnight for violating a court order by joining in a demonstration at the hospital's main gate.

Governor Robert B. Docking tried to break the impasse by setting up secret negotiations. He hoped to bring about informal statements of understanding, even though a formal contract would not be possible under Kansas law. These talks brought together Lucy, Stamps, and three other unionists with the director of institutions and two Docking administration officials. At the same time, the governor announced that an effort was under way to prepare legislation, for submission to the 1969 legislature, which would authorize collective bargaining between the state and its employees.

About a month after Local 1271 had attempted the ward takeover, the secret talks produced three memoranda of understanding, recommended for adoption by the union and the Board of Social Welfare. Principally, these contained a proposal for a grievance procedure which the union felt would help its members escape from under the thumb of the nurses; some vaguely worded assurances which, as interpreted by the union leaders and the governor's aides, would give the unionists immunity against reprisals for past militancy; and, more generally, statements recognizing Local 1271's standing as bargaining agent for its members.

At this juncture, the state Civil Service Board upheld the suspension of the unionists who were involved in the ward takeover but, to the dismay of the mental health officials, ordered these militants reinstated. Shortly thereafter, at the end of July, the Board of Social Welfare, for reasons still not entirely clear, chose to ignore the agreements on union recognition and immunity from reprisal. It did approve a new grievance procedure similar to the one negotiated, apparently because the new procedure differed little from one still in the rules at Topeka State (but long in disuse) which could be revived. According to the chairman, the board felt it should not deal with the question of union recognition, since the legislature was to take up that issue.

For the union, immunity from reprisals was vital, as several of its members who had lost their jobs during the disturbances were not covered by the Civil Service Board's reinstatement order. Some of these aides are still out of work, and are the subject of continuing friction and controversy.

Discouraging Results

In Stamps's view, the union has suffered much but gained little beyond a grievance procedure. Recent meetings with Haines and other officials, he says, have been discouraging. "They've given us stalls, the runaround, and legal talk," he adds. Topeka State has established an advisory council in which representatives of Local 1271 and other employee groups can discuss problems with the hospital administration; yet, useful as this council ultimately may turn out to be, it has still to prove itself. For the moment, Stamps's chief hope is that Governor Docking, a Democrat now running a desperate race for reelection (in a normally Republican state), will become more aggressive on the union's behalf. "If everything else fails," he says, "a strike will be our only alternative."

If Topeka's convoluted events offer an object lesson, Haines probably has defined it. "Our state, and many others, will have to learn to bargain collective-

ly with employees," he says. Kansas law, he indicates, must be changed to recognize bargaining rights for employee unions and spell out bargaining procedures. And, obviously, an important question to be settled is how, and at what point, the legislative leaders who control the purse will be brought into the discussions on higher pay and upgraded jobs.

Some states, such as California, are far ahead of Kansas with respect to the salaries and career opportunities offered such workers. But in only a few states, such as Washington, Montana, Michigan, Illinois, and Delaware, have any state mental hospitals entered into contracts with AFSCME.

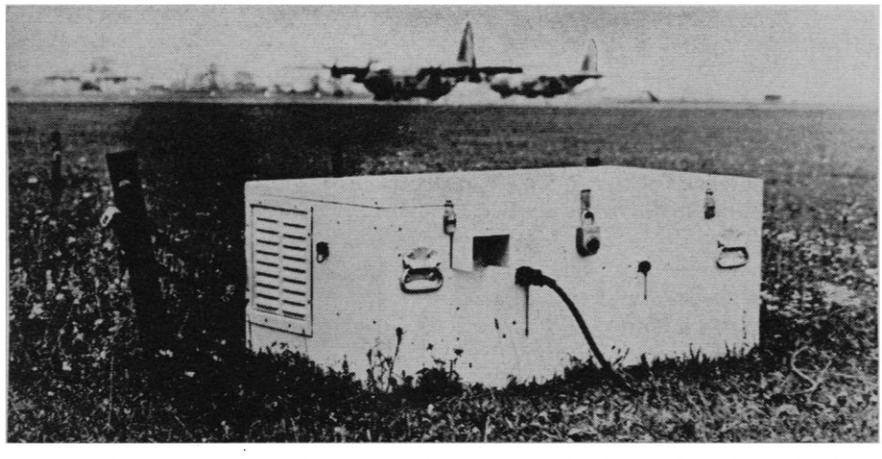
The psychiatric aide's role in mental-health care is growing in importance, for the shortage of psychiatrists and other professionals, together with the rapid expansion of mental-health facilities, is making the aide more valuable than ever. It seems just as certain that the aide's education, professionalism, career ambitions, and militancy (if he is frustrated) will all be on the upswing. Also significant is the fact that many of the younger psychiatrists and other health professionals represent a distinctly new breed, and are likely to be encouraging the aides' new aspirations. Further, the necessity for hospitals and state mental-health systems to forget the plantation system and treat with the aides, collectively, is the clearer because of the strong pressures that the black community and an increasingly self-confident national union movement for public employees will bring to bear.—LUTHER J. CARTER

Arms Control: U.S., British Conduct Big Troop Inspection Experiment

Newbury, England. Though the bottom has fallen out of the market for arms control agreements, it should perhaps not go unnoted that the United States and Great Britain have just completed what is probably the biggest and most complex arms control experiment yet held, a 3-month field test called "First Look." The experiment, which ended on 20 September, was aimed at developing simple, aboveboard, nonirritating techniques for verifying compliance with agreements on the type and size of military forces that may be kept in a given region. Underlying the test was the belief that, since the Soviets have been sensitive to agreements that require close-up verification, any agreement on the limitation of forces will probably have to get by with a minimum of intrusions by inspectors.

For carrying out the experiment, the British made available in southern England a 2000-square-mile area that is the base and training ground for approximately 30,000 troops. With 80 American military officers employed as roving inspectors, once-a-week aerial reconnaissance, automatically operated cameras on runway, and unmanned sensing devices, the experiment sought to determine how well various combinations of these elements could monitor the comings and goings and deployment of the forces. Since the experiment took place during the summer months, when troops were going off on leave, reservists were arriving for training, and maneuvers were taking place, there was a lot of activity to keep track of. Staff members of the British Defence Ministry and the U.S. Arms Control and Disarmament Agency (ACDA), joint sponsors of First Look, say that it will take a year to complete a full analysis of the experiment. Nevertheless, the preliminary conclusions are that, given a fair amount of freedom to roam through an area, even a handful of inspectors can quickly detect a significant change in military forces. A real-life inspection system probably would require far fewer than 80 inspectors for covering forces and an area comparable to those in the test, according to the First Look staff. Actually, the 80 were divided into various independently operating subgroups for the purpose of comparing different inspection techniques.

The experiment proceeded from two assumptions: (i) that in any arms control agreement the side to be inspected would agree to issue an inventory of the forces maintained in the inspection area; (ii) that, in looking for a change in military intentions, the key is the composition and deployment of forces, not simply a gross count of people and equipment. The experiment proceeded as follows. After 3 weeks of instruction each of the 80 inspectors was provided with a Land Rover and a British driver familiar with the inspection area. These two-man teams were then assigned to various groupings. Some were provided with insignia that gave them the right to enter military posts; others were restricted to public highways. Some of the inspection groups were permitted to consult aerial reconnaissance photos; others were not. Situated at 26 locations around the test area were unmanned sensors in steamer-trunk-size



Unmanned sensing station: 26 of these boxes were distributed throughout the First Look test area. Each contains an infrared device for detecting heat emission, two microphones for measuring acoustical effects, and a spike driven into the ground for detecting earth vibrations caused by passing vehicles.