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**The Fountain House Model of Psychiatric Rehabilitation**

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*Editor's Note: "The Fountain House model" is a phrase that is often heard and seen in the literature, at conferences and seminars, and just about anywhere rehabilitation practitioners are gathered. As concepts become popular they take on different meanings to different people. The editors of the Psychosocial Rehabilitation Journal thought it important for our readers to know the latest up-to-date information about the Fountain House model as seen through the eyes of the Fountain House.*

The Fountain House model is a social invention community rehabilitation of the severely disabled psychiatric patient. Fountain House itself is an intentional community designed to create a restorative environment within which individuals who have been socially and vocationally disabled by mental illness can be helped to achieve or regain the confidence and skills necessary to lead vocationally productive and socially satisfying lives.

Fountain House conveys four profoundly important messages to every individual who chooses to become involved in its program:

1. Fountain House is a club and, as in all clubs, it belongs to those who participate in it and who make it come alive. As with all clubs, participants in the programs at Fountain House are called, and are, members. The membership concept is considered a fundamental element of the Fountain House model. Membership, as opposed to patient status or client status, is regarded as a far more enabling designation, one that creates a sense of the participant's belonging, and especially of belonging to a vital and significant society to which one can make an important contribution and in which one can work together with fellow members in all of the activities that make up the clubhouse program.
2. All members are made to feel, on a daily basis, that their presence is expected, that someone actually anticipates their coming to the program each morning and their coming makes a difference to someone, indeed to everyone, in the program. At the door each morning every member is greeted by staff and members of the

house, and in all ways each member is made to feel welcome in coming to the clubhouse.

3. All program elements are constructed in such a way as to ensure that each member feels wanted as a contributor to the program. Each program is intentionally set up so that it will not work without the cooperation of members; indeed, the entire program would collapse if members did not contribute. Every function of the program is shared by the members working side by side with staff; staff never asks members to carry out functions which they do not also perform themselves.

To create a climate in which each participant feels wanted by the program is the third intentional element in the Fountain House model. It is to be seen in stark and radical contrast to the atmosphere created in more traditional day programs, especially the attitude, almost universal in such programs, that persons coming to participate are doing so not because they are wanted by the program, but because they are in need of the services provided to them by the program.

4. Following from the conscious design of the program to make each member feel *wanted* as a contributor is the intention to make every member feel *needed* in the program. All clerical functions, all food purchases and food service, all tours, all maintenance, and every other ongoing function of the clubhouse program are carried out jointly by staff and members working together. Fountain House thus meets the profoundly human desire to be needed, to be felt as an important member of a meaningful group, and at the same time conveys to each member the sense that each is concerned with all. Mutual support, mutually caring for the well-being, the success, and the celebration of every member is at the heart of the Fountain House concept and underlies everything that is done to ensure that every member feels needed in the program.

These four messages, then, of membership, of being expected, being wanted, and being needed constitute the heart and center of the Fountain House model.

Additionally the model is informed with four fundamental and closely related beliefs:

1. A belief in the potential productivity of the most severely disabled psychiatric client.
2. A belief that work, especially the opportunity to aspire to and achieve gainful employment, is a deeply generative and re-integrative force in the life of every human being; that work, therefore, must be a central ingredient of the Fountain House model; that must underlie, pervade, and inform all of the activities that make up the lifeblood of the clubhouse.

Thus, not only are all activities of the house carried out by members working alongside staff, but no opportunity is lost to convert every activity generated by the clubhouse into a potential productive contribution by members. Such

involvement in the work of the clubhouse is a splendid preparation for and source of increased confidence in each member's ability to take gainful employment in the outside world.

Further, in support of this profoundly held belief, Fountain House guarantees to every member the opportunity to go to work in commerce and industry at regular wages in non-subsidized jobs (see Transitional Employment Program, below). Indeed, Fountain House considers this guarantee part of the social contract that it makes with every member.

3. As a parallel concept to that of the importance of work and the opportunity to work is the belief that men and women require opportunities to be together socially. The clubhouse provides a place for social interchange, relaxation, and social support on evenings, weekends, and especially holidays, 7 days a week, 365 days a year.
4. Finally, Fountain House believes that a program is incomplete if it offers a full set of vocational opportunities and a rich offering of social and recreational opportunities and yet neglects the circumstances in which its members live. It follows that the Fountain House model includes the development of an apartment program, which ensures that every member can live in adequate housing that is pleasant and affordable and that provides supportive companionship.

### **Program Components:**

The following program components of the Fountain House model will be seen to flow naturally and logically from the underlying concepts discussed above.

- the prevocational day program
- the transitional employment program (TEP)
- the evening and weekend program (seven days a week)
- apartment program
- reach-out programs
- the thrift shop program
- clubhouse newspapers
- clubhouse name
- medication, psychiatric consultation, and health
- evaluation and clubhouse accountability

### ***Prevocational Day Program***

Fountain House believes that regardless of a member's apparent level of disability, each member has a significant contribution to make that is needed by the clubhouse setting and that will be valued and appreciated by others. Each has skills and talents that, when discovered and utilized, can make the experience of each day worth while. Fountain house believes this process provides a new and nourishing foundation for the future.

The psychiatric patient returning to the community faces extraordinary difficulties in achieving vocational objectives. Employment interviewers in industry do not look favorably on previous psychiatric hospitalization. The psychiatric patient often lacks self-confidence in his or her ability to perform a job and typically does not have the job references essential in securing employment. The Fountain House prevocational day program provides many opportunities for members to regain vocational skills and capacities.

All of the day program activities are performed by members and staff working together. What everyone does is clearly necessary to the operation of the clubhouse. In working side by side with members the staff becomes aware of each member's vocational and social potential and the Fountain House member begins to discover abilities and talents that can lead to greater social effectiveness and more meaningful work.

In designing a program in which staff and members work together, Fountain House has brought about a major change in staff role from the role assigned in other, more traditional day programs. Role change necessitates attitude change on the part of the staff, specifically, that staff comes to appreciate the members, to respect their contributions. In more traditional day programs the patients frequently respect and appreciate staff, but staff rarely has the experience necessary to appreciate and respect their patients.

Members find it helpful to work with staff and other members in the snack bar and kitchen/dining room areas, serving food to other members, helping to keep the area clean, maintaining equipment, and planning menus. Others find a meaningful experience in the clerical area, operating the busy switchboard, helping publish a daily newspaper or a monthly magazine, using typing skills as well as helping with essential clerical routines. There are also members who have a talent in art and photography, and their skills can be further developed in the day program of Fountain House. Those who have special academic skills can utilize them in tutoring fellow members. Still others will find the thrift shop an environment where they assist in sorting, pricing merchandise and other warehouse activities, as well as acting as sales clerks and having opportunities to learn to use the cash register.

Where the educational background or interest of the members is appropriate, they can assist in research activities as well as educational programs, especially in the introduction of new members and visitors to Fountain House, in welcoming members at the front door, in providing orientation for new members, and in conducting tours for the many visitors.

Members become involved in a profoundly important role, visiting other members who are at home or in the hospital, reaching out to those who have stopped coming to the clubhouse for whatever reason. Members also assist each other in working out their problems with welfare or social security regulations.

At Fountain House, as in other clubhouse settings, members view their daily participation in the prevocational day program as a “natural process” that is essential to the growth and well-being of all individuals. They are members of a club and voluntarily provide their help and assistance. They do not regard themselves as undergoing a formal rehabilitation process, in which something is being done to them. The goal is to establish a foundation of better work habits, enriched social skills, and a more helpful view of the future. Many discover that although they are viewed as disabled, there are many ways they can still be constructive, helpful, and needed.

In time, this newly discovered self-awareness can be translated into a more rewarding, non-disabling way of life, free of financial dependency and perpetual patient hood.

In brief, the prevocational day program provides a diversified range of clubhouse activities that clearly need to be performed and that, if reasonably well done over a period of time, will not only be personally rewarding to individual members but in a most fundamental sense will give them the self-confidence and community. These opportunities are guaranteed to all Fountain House members through the transitional employment program.

### ***Transitional Employment Program (TEP)***

Successful participation in the prevocational day program encourages many members to look forward to independent employment in the community. However, because they have often experienced considerable vocational failure, they lack confidence and necessary job references and are typically unable to secure employment on their own. The Fountain House transitional employment program makes it possible for members to work at jobs that other members have held before them and that industry has made available specifically to Fountain House to facilitate the work adjustment of the vocationally disabled.

The major ingredients of the transitional employment program are as follows:

1. All job placements for the severely disabled mentally ill are located in normal places of business, ranging from large national corporations to small local firms employing only a few individuals.
2. All job placements are essentially entry-level employment, requiring minimal training or job skills.
3. The prevailing wage rate is paid by all employers for each job position, ranging from the minimum wage to considerably above minimum wage.

4. Almost all jobs are worked on a half-time basis so that one full-time job can serve two members. A few TEP placements, however, are available on a full-time basis.
5. Most job positions are performed individually by a member in the presence of other workers or employees. Some job responsibilities, however, are shared by a group of six, eight or even ten individuals from a community-based rehabilitation facility. In that case members relate primarily to one another on the job.
6. All placements, both individual and group, are temporary or “transitional” in design, providing employment for as little as three months to as long as nine months or a year.
7. TEP provides a guaranteed opportunity for disabled members to maintain temporary, entry-level employment through a series of TEP placements or to use such employment as a link or step to eventual full-time, independent employment.
8. Job placements are maintained only if the individual member meets the work requirements of the employer. No adjustment or lowering of work standards is made by employers.
9. Job failures on a TEP placement are viewed as legitimate and essential experience for most vocationally disabled members in their effort to eventually achieve a successful work adjustment. Fountain House believes that the opportunity to fail on a job is a part of the total learning experience of working and that, although the sting cannot be totally eliminated from member’s experience of failure, it need not be the catastrophe it would be if it were perceived by the staff as a major defeat. In guaranteeing a member the right to fail, the transitional employment program at the same time guarantees the employer a worker. In setting up a TEP with employers, Fountain House agrees that if a member does not come to work, another member or a staff person will be selected to do the job. No matter what an individual member’s vicissitudes may be, employers can count on the job assigned to Fountain House being done every day.
10. In the work experiences of normal or non-disabled individuals, failure or withdrawal from entry-level employment often occurs, and TEP employers emphasize that job turnover rates are not typically greater for the vocationally disabled mentally ill on TEP placements than for the normal or non-disabled employee.
11. New TEP placements in the business community are always first performed by a staff worker for a few hours, longer if necessary, so that an accurate assessment can be made of the requirements that must be met if the job is to be handled successfully by individual members. Staff initiating new TEP placements are also able to evaluate the work environment and its compatibility with the needs of the vocationally disabled individual.

12. Through direct familiarity with the work environment, staff has immediate access to a work site whenever vocational difficulties occur that require prompt evaluation and assessment of a member's performance.
13. All TEP placements are allocated to Fountain House by the employer and the selection process to fill TEP placements rests with Fountain House and the individual members it serves.
14. No subsidy is provided to the employer with respect to wages paid by the employer to a member on TEP placement.
15. The unique collaboration or rehabilitation partnership between the business community and Fountain House is not a charitable act on the part of the employer. It is an agreed upon arrangement that is of mutual benefit to the employer and the member who is seeking a higher, more rewarding level of work adjustment through the vocational services of the TEP.
16. The TEP provides a unique opportunity to enrich and expand the evaluation process concerning vocational potential and work adjustment. Assessment is made through guaranteed positions in a normal work environment, one that only the business community can provide, rather than through evaluations based solely on an individual's past work adjustment, performance in sheltered environments, or personal interviews and psychological assessment.
17. In the TEP it is not assumed that a member's prior history of vocational disability or handicap is necessarily indicative of his or her inability to successfully meet the minimal requirements of entry-level employment provided as a primary service within the supportive, comprehensive delivery system of a community-based clubhouse.
18. TEP placements remove or circumvent barriers that typically preclude or diminish the possibility that psychiatric patients will seek and secure entry-level employment:
  - a. A history of psychiatric hospitalization does not prevent the member from having the opportunity to secure entry-level employment.
  - b. No attention is given to the duration of a member's hospitalization, which may frequently be as long as 20 or 30 years or more.
  - c. The number of psychiatric hospitalizations is irrelevant to a member's opportunity to assume a TEP placement.
  - d. The absence of a work history, the presence of an extremely poor work adjustment or very poor job references does not prevent or serve as a barrier to TEP work opportunities.
  - e. An individual's inability to pass a job interview is not viewed as relevant to working on a TEP placement.

- f. A TEP job placement is an opportunity guaranteed to all clubhouse members. It is not a requirement, therefore, for the disabled member to have sufficient motivation to seek employment independently. In the TEP it is believed that the ability of a member to perform a TEP placement productively is not necessarily correlated to the individual's motivation to seek employment independently.

The presence of guaranteed part-time, entry-level work opportunities within the rehabilitative environment emphasizes to the members that mental illness is not viewed as the sole or even primary explanation for vocational disability. It is, rather, a personal experience, one that typically prevented members from having normal opportunities to experience the real world of work and to develop capabilities to perform work productively and meet job requirements.

Transitional employment programs have been developed as a rehabilitative function of the normal work community. Although designed to meet the needs of the more severely disabled mentally ill, TEP placements have been integrated from the beginning with the work community rather than intentionally simulating the real world or work, yet clearly separate and apart, as in the case of the sheltered workshop.

### ***The Evening and Weekend Program***

A primary difficulty for the more severely disabled psychiatric patient has been the inability to get along socially with others in the community. Discharged psychiatric patients typically find few opportunities for successful social interaction, remaining lonely and isolated in the community. This isolation is one of the crucial variables underlying the inability of many discharged patients to maintain their adjustment in the community and it often results in their return to the hospital.

The evening, weekend and holiday social-recreational programs offered by Fountain House are designed to meet the member's needs for companionship and socialization. Fountain House members can experience being with each other, taking part in art programs, photography, chess and other table games, dramatics, chorus singing – indeed, in a rich and varied program. In addition, members have the opportunity to be participants in outside volunteer-led activities such as bowling, movies, tours, theater, and sporting events.

It is important to note that the social-recreational programs of Fountain House are all conducted in the evening, on weekends, and on holidays, not during regular work hours as is often the case in other psychiatric day programs. They are specifically carried out during evening, weekend, and holiday periods because these are times when all other people are able to engage in social and recreational activities. Fountain House considers it counterproductive to the psychiatric patient's reintegration and success in the community to be engaged in recreational activities during what would otherwise be normal working hours.

The evening and weekend program enables members to maintain long-term contact with the clubhouse after they have become fully employed, which is of primary importance to their adjustment in the community. Such contact enables the member to continue to benefit from the supportive relationships developed at Fountain House, as well as from specific services such as the educational and employment programs. Members must know that there is assistance and encouragement available to them in their efforts to obtain a better job or to pursue their educational aspirations. The evening program is also helpful to members when difficulties arise, such as when a job is lost or there is a recurrence of illness. Through the evening program, staff and members become aware of such problems and are able to assist the member who is in difficulty. This might involve helping someone to get to a clinic for a change in medication, or to become hospitalized, or to return to full-time participation in the Fountain House day program.

It has been found that the informality and openness of the evening and weekend program also eases re-entry into the rehabilitation environment for a member who has, for one reason or another, stopped coming to the program for a time or who has been re-hospitalized.

### ***The Apartment Program***

Many psychiatric patients are without financial resources of their own when they are discharged to the community. Their sole support is often minimal income from public sources, which makes it extremely difficult to secure adequate housing. In the past the only alternative has been residence in a single-room occupancy hotel, a woefully undesirable alternative. More recently, discharged patients have been placed in other kinds of facilities such as family care homes, community residences, and halfway houses.

In an effort to provide less institutional, more normalized housing alternatives, Fountain House some years ago began to lease modestly priced apartments and to make them available to two or three members living together. It was felt that not only could Fountain House provide much more attractive apartments, furnishing them with contributions to the thrift shop, but that members living together could provide support, comfort, and understanding for each other. All apartments have kitchen facilities so that members may cook their own meals. Members pay their fair share of the rent and utilities.

Although the leases are initially held by Fountain House itself, it is entirely possible for a member or members to take on the lease once they have become stable and employed in the community. Apartments are located in various neighborhoods of New York City and many of them are located just across the street or in the immediate neighborhood of the clubhouse.

The apartment serves other important purposes. Resident members often host a new member who is still hospitalized and who is interested in exploring the kinds of living arrangements Fountain House provides as well as the activities of the clubhouse itself. With assistance from staff and other members, apartment residents have the opportunity

to learn or relearn needed living skills, including housekeeping, cooking, budgeting, and getting along with a roommate.

Unlike almost all other community residential programs for mentally ill patients, residence in a Fountain House apartment is not time-limited, indeed, Fountain House does not perceive that any of its programs should be conceived of or presented to members as time-limited. On the contrary, Fountain House believes that members have the same right to seek independence at their own pace as do all persons growing up in a family and that if their growing is successful they have the same likelihood of achieving independence and separateness from the clubhouse family as does the growing person from his or her family. Just as in the family, where certainly no time limit is placed on membership, no time limit is placed on membership in any of the programs of Fountain including the apartment program.

Residence in a Fountain House apartment carries with it continuing active involvement in the clubhouse program as long as such participation facilitates the adjustment of the member. Fountain House does not provide apartments to individuals who are in need of housing but who are not at the same time seeking membership in the full Fountain House program.

### ***Reach-Out Programs***

Often a member stops coming to Fountain House and it is not clear why he or she has done so. At other times, a member requires re-hospitalization. In both instances, Fountain House feels that a reach-out effort from the clubhouse to the member is important, both to carry the message that the member is missed by fellow members and staff and to ascertain whether there is some way in which the clubhouse can help the member.

Both staff and members are involved in this critical reach-out effort. Increasingly it is felt at Fountain House that the reach-out function is peculiarly suited to members. It is often the members who first realize that a person has stopped coming; it is often other members who recognize that person is becoming upset again and may need some counseling, some change of medication, or even a brief period of re-hospitalization. It has also been learned that members take pride in and are effective in providing reach-out to fellow members.

The reach-out function is intended to convey important messages to members; not only that they must come back to the clubhouse, but that they are cared about, that they are missed when they don't come, and that Fountain House will try to supply whatever assistance they may require.

### ***The Thrift Shop Program***

Many years ago Fountain House began to receive a number of telephone calls and written inquiries from people interested in its programs, some of whom expressed their

willingness to make donation of goods they thought might be of value to Fountain House. A number of these inquiries came from individuals who knew of the Fountain House apartment program and who had furniture that they no longer needed but that was still serviceable and that they hoped might help furnish an apartment for Fountain House members.

In response to these generous offers Fountain House established a thrift shop with several goals in mind. First, the shop makes possible the sale of donated goods at reasonable prices both to community residents and to members of Fountain House. The income from these sales converts donated goods into cash donations to the Fountain House program. Second, the operation of the thrift shop provides opportunities for a variety of prevocational experiences for the members: warehousing, classifying, sorting and pricing merchandise, arranging merchandise attractively in the store, and meeting the public both as salespersons and as operators of the cash register. Volunteering in the thrift shop has been particularly appealing to and effective for, older members.

Over the years, the thrift shop has grown both in the volume and in the variety of items donated and subsequently offered for sale. Furniture, clothing, jewelry, and merchandise suitable for gifts are all available. The cash income derived from sales now makes a significant contribution to the total budget of Fountain House. The effort to attract donations from department stores and other retail outlets, factories, and individuals has led to a greater public awareness of the program and in some instances has led directly to active, invaluable involvement of individuals in Fountain House. For all of these reasons, the thrift shop has become a significant component of the Fountain House model.

### ***Clubhouse Newspapers***

Some years ago it was felt that there should be a vehicle for alerting members of Fountain House to the activities available within it and to current news about fellow members and staff. A clubhouse newspaper was established that from the beginning was a cooperative effort of staff and members. The newspaper contributes to bringing the membership together, it provides a variety of work activities in the prevocational day program, and it also serves as a very powerful communicating tool that informs staff and members of other clubhouses about Fountain House activities.

Members have the freedom to say what they wish about the programs of Fountain House, about the experiences in the house, about success and failures, in articles that they are free to publish. This helps both the members who write articles and the members who read them to experience a deepening sense of participant contribution to and shared responsibility for the club that they and the staff bring to life and help to flourish.

### ***Medication, Psychiatric Consultation, and Health***

Fountain House plays an important role in helping members maintain themselves on prescribed medication and in ensuring that they get required psychiatric care. Most of the members view medication as both necessary and helpful in their adjustment and they are

of significant assistance in reinforcing this attitude among other members. Staff and members become aware when other members seem to be suffering a relapse and often help the member in getting to the clinic or hospital for assistance. Part-time psychiatric consultation is also available at Fountain House in emergencies.

Members and staff also help other members utilize community health facilities. This is extremely important to members who do not have the financial and personal resources to secure such help independently. In this important sense, Fountain House plays a crucial family role in encouraging members to get the care they are entitled to and require.

### ***Evaluation and Clubhouse Accountability***

Fountain House believes it is imperative that a continuing effort be made to evaluate the effectiveness of its programs, a belief shared by responsible community-based day programs for chronically mentally ill patients living in the community. Characteristically, however, the justification for the necessity of evaluations has been the staff's need to know the effectiveness of programs. Fountain House believes that this central reason for evaluation must include the members' right and need to know what kinds of successes and failures each of the programs of Fountain House is contributing to in the lives of fellow members.

In taking this position Fountain House considers itself to be in harmony with the concept emerging in the medical community that the patient has the right to know his or her temperature, pulse, diagnosis, and, further, that the fact of knowing will in itself positively contribute to the patient's recovery of health. Fountain House, in this analogy as in the family, is persuaded that the members' involvement in all aspects of the life of the clubhouse will have the same salutary effect, that is, that it will contribute to assisting members in achieving a high degree of self-confidence and productivity.

### **A Note About the Future**

Over the past 25 years Fountain House has come a long way toward learning how to create a restorative environment for chronically mentally ill patients living in the community. Fountain House has always been and is still acutely conscious that it has not fully realized all the implications of the concepts that underlie its efforts. A word should be said; therefore, about one direction in which Fountain House clearly sees itself going in the immediate future.

What Fountain House is now struggling with is a major increase in members' involvement in program delivery. It has already been noted that members are now taking major responsibility for the conduct of the Categories of Community Adjustment Study, a major element in the overall Fountain House effort to evaluate its program. Members are also increasing their involvement in the reach-out function at Fountain House. During the past two years Fountain House has been endeavoring to maximize a Member Training Project funded under a grant from the National Institute of Mental Health. The purpose of the project is to enrich and enlarge the degree to which and the ways in which

members are encouraged to take increasingly active roles in crucial program delivery. Fountain House submitted the proposal not because it already knew how to extend and enrich member roles in clubhouse programs, but because it profoundly believes it is in an ideal position to pursue the goal, with the assistance of members in many clubhouse facilities.

It has indeed proved to be a challenging, difficult, and exciting effort. To date six roles have been identified in which members clearly take, and enjoy taking major responsibility. The six identified roles are:

- categories of Community Adjustment Study
- reach-out
- member education and tutoring
- advocacy
- consumer literature
- rehabilitation plans

Over the next several years one of the most significant efforts of Fountain House will be carrying through the member training project and conscientiously putting into practice all that it will have learned. Thus, a bright and promising goal for the future of Fountain House is the fully realized utilization of members at maximum levels of involvement in the delivery of clubhouse activities.

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