A. FRANK KNOTTS. Born 1926.

Summary of OH 1252V.

This interview was recorded for the Maria Rogers Oral History Program on July 27, 2004. The interviewer is Marvin B. Woolf. The interview also is available in video format, filmed by Marvin B. Woolf.

The summary was prepared by Kathleen Salzberg. PLEASE NOTE: this summary is a detailed summary, but it is NOT a word-for-word transcript.

[A].

00:00 FK: Introduces himself. His name is Frank Knotts. Lived in Boulder from 1953 until about 1974. This is the time period that he would like to talk about. During that 20-year period he raised a couple of kids and practiced psychology, among other things. Was lured to Boulder by the University of Colorado, which in 1953 was one of the few universities that had a program in clinical psychology; it was a new profession at that time. CU had a very good program. He and another two students were accepted into the program that year. Came to Boulder with high expectations and little background in psychology, which he came to regret because he found the going tough. Had taken undergraduate work in electrical engineering, but decided that was not for him. He then got a master’s degree in education at CSU, but decided that he did not want to pursue that either. Heard of the new profession and decided to pursue it. Found the program at CU to be of high quality. Strong in academic psychology as opposed to practical or clinical applications. In order to get a PhD at the time needed to have a reading knowledge of French and German, which was quite a barrier since he had never taken a language before. Took long time to complete his degree because he took off from time to time. Was helping his wife to support the family. By the time he got out, the university would accept Spanish and Italian, which he found easier to get a reading knowledge of.

03:25 Wants to talk about the contrasts and changes that he sees in Boulder between 1953 and 1975. On the side of Valentine’s Hardware building, at Broadway and Pearl there was a map of Boulder County listing various statistics. Population of Boulder in 1950 census was 19,999, not including the university population. By the time Knotts left Boulder in 1974/1975, the population was about 80,000. Does not think that all the changes were for the better. He enjoyed the small-town atmosphere when there were only 20,000 people. One could not go out without running into people who you knew; could always find someone who was ready and willing to chat in front of the Courthouse or in Fred’s café, or anywhere else. Could have a personal relationship with any of the shop-keepers in town, e.g., John Valentine, John Reinert, who owned a clothing store. It is a loss that Boulder has become as large as it has; now has an entirely different feeling. Is being quite frank in stating that the present Boulder is not somewhere where he would chose to live.

MW: Asks Knotts when he left Boulder.
FK: Left Boulder in about 1975. Had gotten divorced from Lou Knotts who was a school teacher in Boulder for many years. Had met a woman who lived in Littleton, which lured him away from Boulder.

06:54    MW: Asks him to tell something about his practice in psychology.

FK: Feels that he was in on some early history of psychology in Boulder. When he was a student had a part-time job at the Boulder County Child Guidance Clinic. Was about one of the first employees there. Quarters were over the garage at the old County Hospital. Believes that these were originally nurses’ quarters. This is now the Boulder County Health Department. Does not know if the old building is still standing. There were broad steps to one large room and several other small rooms. The large room served as a reception area and the small ones as offices.

MW:    Asks what were the purposes and goals of the Child Guidance Center.

FK:    Several public-spirited citizens instituted the center. Cannot remember all the names but recalls Dr. John Avery, a noted physician in town. Dorothy Thompson, wife of a CU History professor was on the board. He thinks that Judge Ashton was also one of the “spark plugs” that got the organization going. There was a felt need for mental health services for children and their families. The concept originated, he thinks, in Philadelphia some 30 or 40 years prior. Was a model for receiving diagnosis and treatment.

MW:    Asks FK what he did for the center.

FK:      Although he was a student, he performed as a psychologist and did psychological testing and some child therapy with adults and some counseling with families. Since he was a student, another woman was brought in from the University of Denver once a week to supervise his activities.

Mentions some of the people who worked there: The director was Dr. Bob Carlson, who was a psychiatrist in the Denver area who came two days a week. He was a very down-to-earth guy who had grown up in Minnesota, who knew about gefilte fish. (Laughs and corrects himself when MW states that that would be surprising.) States that he means “lutkefisk”--a different thing. Carlson was the kind of director who would say “this place needs painting. I am bringing up my family, and I want all of you to turn up on Saturday and paint the place.” And they did.

Also had a psychiatric social worker at the center. She was a woman of German descent who came in from Philadelphia, named Dr. Schneider. She remained in Boulder for some time. She ran the clinic with a Germanic iron hand. She had a touch of the German organizational ability, which FK did not cotton to too well, but Dr. Carlson referred to Dr. Schneider as “the back bone of the clinic,” which FK believes was a very apt description.

12:31    FK worked at that clinic for one to one-and-a-half years. Was then offered a Teaching
Assistant position at the university. Spent a year as organizer of the Psychology Department's clinic, doing in-takes and scheduling appointments with therapists under supervision of the faculty. Most of the clients were students and their families. One client drove in from Burlington, CO, to have her daughter seen at the clinic. In general it was a fairly low-keyed operation. It was good practice for the graduate students and gave good service. Later worked for another year as a teaching assistant in a course on psychological testing. Did a little bit of classroom teaching, but mostly dealt with students guiding them in their practice. Worked with Peter Ossorio, who was teaching the course; also with Milt Lipetz, who later went on, he thinks, to become Provost of the university. He passed away young, which was a great loss to Boulder and the university.

The Child Guidance Center was later absorbed by the Mental Health Center of Boulder County, which was quite an expansion; treated both adults and children. Was then directed by Dr. John Lightburn who came in from Denver one evening a week. Initially was only open one or two evenings a week, but soon became full-time and moved to the County Hospital to larger quarters in the old surgical wing. Remembers that the big surgical lights had to be removed to make good sound-proof offices. A new director, Dr. Irwin Sclar, came in at that time as a two-day-a-week director while he practiced psychiatry in Boulder. Sclar was the second psychiatrist in Boulder. Some time in the late fifties, the first psychiatrist in town came in, Dr. Dean Plazak, who did a lot of forensic work. He was very self confident and expressed strong opinions in court and out of it. Sclar was either second or third to Dr. Bob Marshall. By the sixties, there were three or three-and-a-half psychiatrists in town: Plazak, Sclar, and Marshall and Dr. Ray Lewis (practiced about half time). Up till that time there was no privately practicing clinical psychologist. Knotts felt constrained in the Mental Health Center. Had been refused a raise, so took the opportunity to set up his own private practice in 1963.

18:40 MW: Asks what a clinical psychologist was.

FK: A clinical psychologist then and now is somewhat different. Clinical Psychology was a new profession, which by 1963 was eligible for licensing in the State of Colorado. Was grandfathered in as a Masters level psychologist due to his experience. Now a Clinical Psychologist would be required to have a PhD (the academic degree) or a Doctor of Psychology (DPsyc, the professional degree). A clinical psychologist came into the field mainly as a person skilled in psychological testing and diagnosis and in psychotherapy. The uniqueness lay in the ability to do testing. When he opened his practice he did some testing to get enough business as a newcomer and because there was need for it.

21:14 Wanted to say something about the community and the profession of psychology. In small-town Boulder, it was usual to put an article in the paper with information about the practitioner and his/her family. So FK wrote out a piece and took it to the Boulder Camera, and gave them to a person whose name he does not recall. She was a well-know reporter; she made a couple of editorial changes before it appeared in the paper. A week later FK heard from the Ethics Committee of the Colorado Psychological Society who told him he was out of line for putting material in the paper. FK re-read the ethics of the American Psychological Association,
which indeed did have some statements to the effect that psychologists should not do any advertising or put anything in the paper that was aimed at garnering business unless it “fits with local custom.” That was the clause that FK thought made sense. Wrote letters to the Ethics Chairman of the state association and went to the Camera and told the lady who had put the piece in and told her what had happened. She became incensed and wrote a letter to the psychological association Ethics Committee, which stood its ground. FK was still “bad.” This was irritating and perplexing. Finally he appealed his case to the American Psychological Association. To make a long story short, they said “no problem.” Demonstrates an interesting contrast between the official state position and the small-town community attitude. Points out that lawyers went to the local paper. MW agrees that his profession, law, got news articles. The fact that the news article about Knotts and his new practice included his telephone number really got to the Ethics Committee.

MW: Ask what was his telephone number.

FK: “It was 443-1995. How is that for long-term memory?” Laughs.

25:31 MW: Asks what his philosophy was in practicing professional psychology.

FK: His philosophy evolved. His basic philosophy was somewhat in contrast to most medical psychiatric thinking of the time. Although he does not want to do a disservice to the medical profession, states that there was wide-spread belief both in the public and in the medical profession that the doctor knows best. You go to the doctor who diagnoses you and tells you what to do. He says that he is distorting the picture in order to draw a contrast, but believes that that was pretty basically true. The profession has changed more toward what his basic philosophy was that “we are in this together.” The professional has certain knowledge and expertise and skills that enable him, the psychologist, to intervene and find out what is troubling the client. In the best of all possible worlds, he presents himself as “I will cooperate with you if you cooperate with me” in trying to do something about what's bothering the patient. Teamwork or coaching rather than prescribing was his basic philosophy. In the beginning was very much in the Rogerian school, the client-centered school of psychotherapy. As he evolved, he became much more active as a coach therapist. Learned a lot about the emerging school of behavioral therapy, thus becoming a mentor, coach, and advisor. Always tried to be of service to the clients goals and needs as a facilitator rather than an authority figure.

28:34 MW: Asks if a fellow named B.F. Skinner play any role and in what way.

FK: He did. Jokes that MW wants a course in psychology while FK wants to talk about community issues. B.F. Skinner was a widely know behavioral psychologist who was really the father of “operant behaviorism,” which means goal-oriented behaviorism, i.e. that produces as result. An example would be that a dog does the trick and the dog gets the treat. Found this theory very useful in conceptualizing what is keeping people stuck in self-defeating behaviors and finding ways of making changes in their environment and cognition to propel them out of it.

MW: Asks if FK is expecting the person to do something about their own behavior.
FK: Agrees that the patient is the only one who can get out of the behavior.

MW: Asks him to be specific about how he would help someone in this regard.

FK: The clearest example who be in the case of anxiety disorders, which late in his practice constituted the bulk of the practice. A person becomes dysfunctional in states of high anxiety. This is something we have all experienced in our lives. Anxiety disorders are widespread and provide an illustration of a simple example of behavioral treatment. Gives a “bizarre” and an “everyday” example. A bizarre example was a woman who had developed a phobia about freezers and refrigerators. As her disorder progressed, she found herself unable to go out in the summer because she might see a freezer in someone’s open garage. Had to be careful where she sat in a restaurant lest she see a refrigerator and go into a full-blown panic attack. Otherwise this person was perfectly normal. To help this person he used “exposure.” Explains what this means. The psychologist needs to find a way to put the person in the presence of the anxiety-provoking thing and have the client not be anxious. This is not any different from what any good horse-trainer would do with someone who had fallen off a horse. Have to approach gradually until you met the point of total comfort. In her case began with a form of exposure in story-telling. Started with a procedure called “flooding” in which you schedule a long appointment (90 minutes to 2 hours) in which you tell stories of almost unimaginably bad things that had happened to her and to others in connection with freezers. Learned that the phobia had begun when she had read an article about a child trapped in a refrigerator. At this time the woman was doing daycare, and began to dwell on this and the idea spread like a cancer. Began with dire stories about children being trapped, dying, etc. In the process tried to create as much affect in a person as possible. Technique sounds mean because you are deliberately provoking the anxiety to the highest level that you can until the anxiety finally begins to subside. Elaborates on the technique of using scaring situations to good effect by constant exposure. Therapy involves hard work, but it is very effective. Does not know how much this technique is practiced today. Finally go out into the world and go to refrigerators and sit in them, might even close the door. Take each step slowly until the patient is comfortable. Ran into this client on the street two years later. She had gained some weight. She asked FK if he did weight-loss stuff. Which he said he did, and to make an appointment. Asked her how was the phobia, to show she responded, “Oh, that!” This was one of his greatest feelings, but it does not always work that way. In this form of therapy, the therapist takes an inappropriate thing that gets in the way of a person’s everyday functioning and disconnects that stimulus from the response. Works rather well often, but not always.

39:06 MW: Asks him to discuss a less bizarre situation.

FK: Uses stage fright or social phobia as an example of a person with fear of speaking in public or is too shy to talk to others and avoids social contact. To treat this person, therapist gets person to do what is upsetting and provoking the anxiety.

MW: Asks him to illustrate this, e.g. for a person who has difficulty getting up and speaking in public.
FK:  Chooses a remarkable case, but does not want to give the impression that is always goes this well, although it often does. Describes a young man who had what had started as a social phobia, shyness, and had blossomed into a panic disorder as extreme fear of being in public. Just before seeing Knotts, the young man had had too much to drink one evening. Feeling very bad the next morning, he went to get on the bus to go to downtown Denver and became panicked and screamed to be let off the bus. Was taken to the emergency room. The client felt that he was treated with disdain, as though his problem was only due to the fact that he had been drinking the night before. Told to go home to sleep it off. A week later he still was not feeling good, so consulted Knotts. FK got the impression that through the client’s life he had had harbingers of this difficulty.

Parenthetically he tells MW that he is feeling long winded. MW tells him that is OK and will tell him later why he thinks so.

When the client was a teenager, aged 16, he was responsible for some of his family's support. Had saved up some money from delivering papers. When he got to school he was feeling uncomfortable, he went and took his money out of the bank. He had about $1000. He bought a ticket to Hawaii without telling anyone. It was the great escape. He came to in Hawaii, which he found boring, and called home, and returned. He then lived a fairly effective life and continued into college, at which time he had the incident on the bus. In this young man’s case, what FK did was to very carefully prepare step by step a desensitization program for being in public. Made list of least to most threatening situations, with all in between. The least would be to say “Hello” to someone while passing them on the street. The most threatening would be to appear on television. Presented the situations in his imagination. The next step is to go out and do these kinds of things in succession. Went all the way up the scale. Did not have an opportunity to put him on television until he got a call from Theresa Schiavone who is now on (Colorado) Public Radio, but at that time was working for Channel 2. Was doing a piece on anxiety and wanted a client who had gone through his program. Since being on television was on the client’s list as the most anxiety-provoking situation, FK called the client and found that he was still doing well after a couple of years and presented him with the opportunity of being on television. He agreed, so FK put him in touch with Schiavone, who made an appointment to interview him about this therapy experience. Describes how Schiavone went to the young man’s house and found that he was gone. His girlfriend was there; she told Schiavone to get out. FK then contacted the girlfriend and got the same response. Schiavone was upset because she had a deadline to meet. Later she called to say that the young man had come back and apologized and they completed the interview. One of the best feel-good stories that he has.

MW: Asks if he has other feel-good stories and asks for another example.

48:15 FK: Wants to move on from psychology and to shift to what he considers turning points in the history of Boulder in the Sixties. Examples would be the big flap about celebration of Christmas in schools and the influx of hippies into Boulder in the late Sixties. Would also like to talk about the anti-Vietnam War movement in Boulder.
One of the scarier times for him as a resident of Boulder occurred when the school board rather quietly made a change in the policy about the celebration of Christmas in the schools. A committee from the American Civil Liberties Union had approached the school board saying that some of the Christmas celebrations in the schools amounted to religious celebrations. In FK’s opinion, that was not exaggeration—they were Christian religious pageants. It looked as though the school board wanted to make a quiet change and not stir up opposition in the community, so it issued directives to the schools to tone down the Christianity aspects of the celebrations. There was a huge explosion in the community rallying under the slogan, “They are taking the Christ out of Christmas.” Boulder became polarized in an intense way during that period. A standing-room-only meeting at Boulder High School, which FK listened to on the radio, scared him and he was glad that he was not there. The outcome was alright and things appear to be going smoothly now, but it was a critical juncture for Boulder.

MW acknowledges that it was frightening.

52:17 FK: Cites another example of polarization in Boulder concerning the influx of hippies in 1967-69. Came in droves from all over the country. Swam in Boulder Creek, smoked pot, etc., and caused a lot of distress to a lot of the community. FK was not particularly distressed by the presence of hippies but was concerned about what he perceived as a potentially dangerous situation. At that time he was on a committee of the Colorado Psychological Society on Committee on Social Issues. Got together with research psychologist, Munro Miller, at the Institute of Behavioral Science at the university to see if they could do anything to diffuse the tension. Created a plan that they hoped would cause some healing and presented it to the Human Relations Commission of the City of Boulder. Nort Steuben was on the commission at that time, as was Ellen Greathouse, and others who he does not remember. They were receptive to the plan and backed them with money to bring in speakers and moral support. Formed an ad hoc committee which included Janet Roberts, Ellen Greathouse, Terry (doesn’t remember last name), and Nort Steuben. Put on a series of invited talks. One speaker was the chief of police from Beverly Hills. Brought in because he had been chief of security at Woodstock. He gave a wonderful talk which aroused both support and anxiety. Had panel discussions with Judge Holmes and other local leaders, including Dr. James Galvin, who had been director of institutions in Colorado, and gave an erudite talk. Had a series of group meetings around the city to defuse the tense situation.

56:50 The hippie situation was interwoven with the war protest. Boulder was a pretty large center of protest against the Vietnam War. Jack Gore, a Democratic activist, was here and the community of Friends, the Quakers, who were very central in protesting the war.

MW: Asks why the protests were known publicly.

FK: States that the protests were known about perhaps most notably by the silent vigils that the Friends put on by the Courthouse downtown. He participated in those protests and learned what it was like to have people come by and spit at you. They had strong feelings but were silent because they were bearing witness to their beliefs. States that these were not his beliefs because he is an atheist, but if he were going to become religious, he might become a
Friend because he has much in common with them.

MW: Asks if FK agrees that the Vietnam War was one of the most divisive issues of our times.

FK: Agrees—up to the present. Believes that at present the United States is making the largest foreign policy mistake that it has ever made by going preemptively into an illegal, unfounded war without allies. (Ed. Note: reference is to the Iraq War under President George W. Bush).

MW: Concludes “on that happy note,” thanking Knotts for his interview.

59:05    End of interview.