

MENTAL HYGIENE: RETROSPECT AND PROSPECT.

E. H. LINDLEY.

Hippocrates—Fifth Century B. C.

“Men ought to know that from nothing else but the brain come joy, despondency and lamentation * * * and by the same organ we become mad and delirious, and fears and terrors assail us, some by night and some by day; and dreams and untimely wanderings, and cares that are not suitable and ignorance of present circumstances, desuetude, and unskilfulness. All these things we endure from the brain when it is not healthy * * * .”

Mental Hygiene as the science and art of securing healthy mindedness, and of combating mental unsoundness, came slow and late. It is a development of the latter half of the 19th century. It emerged as one fruition of the development of physiology, pathology and psychology. Feuchtersleben's classic study; Braid's studies of hypnotism; Bernheim's suggestive therapeutics; Chareot and Janet's studies of hysteria; Beard's masterly study of neurasthenia; Weir Mitchell's rest cure; DuBois's psychic treatment of nervous disorders; Freud and Jung's conception of insanity and of psychoneuroses, and their method of psycho-analysis; the recent elaboration of the work cure for the insane and nervous; the elaboration of conceptions of the unconscious and sub-conscious psychic states and split of personalities in relation to disease, made by Binet, Prince and Sibis; the fuller differentiation of organic from functional disorders; all these culminating in a veritable arsenal of methods of psychognosis, and psychotherapy; such are a few of the landmarks which suggest the meteoric rise of mental hygiene. The whole structure rests on a more adequate view of the inter-action of mind and body, and on a new emphasis on mental states in the causation of disease. More properly they reflect the distinctively modern view of the terrific unity of body and mind, and the knowledge that mind and body, like Siamese twins, share each other's fortunes. Not only does somatic disorder tend to produce mental disorder, but mental conflicts and stresses interfere with the normal functioning of the body. This doctrine of the reciprocal relations replacing the older view of one-sided causation, has revolutionized our whole conception of disease of every human sort. The mental state of the patient always required treatment along with the physical.

Such, in brief, is the significance of mental hygiene. The quickening influence of this movement on research and teaching in medicine, and pedagogy, and social service, and the administration of charities, no less than in the administration of criminal law, give new hope for a conquest of human misery.

But my theme is historical. The history of mental hygiene in Indiana is as brief as the short and simple annals of the poor. Yet it is a most credit-

able history, and reflects not only the enlightened spirit of the times, but the influence of extraordinary leadership.

In our earlier history as a state, the chief problems involving mental hygiene, centered about the care and treatment of the insane, and to some extent, of the delinquent. The history of mental hygiene in our state is therefore chiefly institutional. What is Indiana's record in this regard? The last century opened with the minds of men yet enthralled by the demonological view of insanity. Insanity was a possession of the individual by an alien and malignant spirit. This was accompanied by confinement in dungeons, and horrible mistreatment of the unfortunates. Yet in France, Pinel, and in England, Tuke, have long proclaimed the conception that insanity is a disease of the brain and that right medical treatment is always imperative, and in some cases curative. In the early twenties, European alienists began to make extravagant claims as to the proportion of the insane who could be cured by humane and scientific methods. Responsive to this new conception and with fine enthusiasm, the legislature of 1827 made provision for a hospital for the insane. The first hospital was a log cabin called the crazy house, but it is important to note that the idea was to treat the insane as sick, and not as criminal. Dorothea Dix in an address to the Assembly in 1844 aroused the legislators to renewed concern for the insane. And as a result, the first real hospital for the insane was completed in 1848. It provided for both curables and incurables. Later, many incurables were returned to counties where they languished in jail, a serious retrogression. This practice was discontinued, however, in 1883.

In 1883, the legislature created three new hospitals to be located at Logansport, Richmond, and Evansville. The construction of each was abreast of the best thought of the times, including, in the case of Richmond a modified cottage plan of domicile, a plan which has met with high favor, and which is more fully developed in the new hospital at Madison.

A few years ago the Central Hospital for the Insane, thanks to the wisdom of Superintendent George F. Edenharter, erected a pathological building to provide for research and teaching. This marks an important advance.

But in spite of wise leadership and supervision, our state hospitals for the insane are so over-crowded that they cannot fully realize their functions as hospitals for the cure of the insane. It is to be hoped that larger resources and more room may soon be available.

2. As to the feeble-minded, our state has proceeded slowly but wisely. The School for Feeble-Minded at Fort Wayne opened in 1890, represented the culmination of a long period of care of the feeble-minded in other institutions. The recognition that feeble-mindedness is incurable, now led to a lower age of commitment from eighteen to sixteen years, and retention indefinitely. The law of 1901, creating a department for adult females from sixteen to forty-five years, was an important protection to society, and was designed to prevent mentally irresponsible women from transmitting a taint to increasing posterity.

The development of occupational activities, the provision of farm colonies, and the education of children in adjustment to their proper mental level, are some of the achievements of the State School at Fort Wayne.

3. The recognition that epilepsy is hereditary led to the founding of the epileptic village at Newcastle, where outdoor life and suitable occupation is provided in the most approved way for those whom the state has decreed shall not reproduce their kind.

4. The public recognition of the need of reformatory treatment of criminals, crystallized in 1897 into a provision for the transformation of the southern prison into the Indiana Reformatory, carrying with it the indeterminate sentence and parole, and later the suspended sentence, as well as a program of mental examination and of right education. This is a brilliant chapter in the history of our state.

5. About 1905, sterilization to prevent hereditary criminality and feeble-mindedness was practiced with the consent of the inmates. The law was to apply to incurable idiots and incorrigible criminals. In 1909 the practice was discontinued on legal grounds, at the request of the Governor. But the law, held by many to be one of the most beneficent, still exists on our statute books.

In many of these measures, Indiana has been in advance of most states and has won deserved recognition.

6. There is not time to recount the achievements for sound morality and mentality, of the benign control of youth by the state through the establishment of a board of children's guardians, based on the rights of a child to a decent life, defended even against an unworthy parent. In this class falls also the provision for juvenile courts. These wise provisions are designed to protect plastic childhood from adverse environments which render impossible a normal mental and moral development.

7. Not less important is the recognition of the claims of mental hygiene by our educational institutions. The Indiana University School of Medicine was one of the first in the west to provide extensive courses in mental pathology and psychiatry. It seeks to train physicians competent to deal with the psychic factor in disease, to diagnose mental diseases as well as physical, to provide prompt treatment for incipient and acute insanity, to give wise counsel concerning heredity in relation to nervous and mental disorder and to convert the public to the view that insanity is a disease, not a crime.

The establishment by the University Medical School of a most efficient department of social service has rendered aid in reducing for many patients the stresses of adverse environment as well as providing for the re-education of many victims of bad mental habits.

For many years Indiana University has provided courses in mental pathology and the principles of psychotherapy, designed to train laymen to mastery of their own mental lives and to furnish leadership in the state-wide campaign against mental disorder.

Several institutions of higher learning in our state, are maintaining courses in orthogenics, training men and women in the diagnosis and treatment of backward and feeble-minded children.

This sifting of the school population and the provision of special training for abnormal children, is made possible by the genius of Alfred Binet. The Binet-Simon standard test for mental age, as revised by Goddard, Yerkes, and now presented in its best form by a Hoosier, Dr. L. M. Terman of Stanford University, supplies an efficient instrument for the detection of mental defects.

This makes possible a grading of school children by mental age rather than by chronological. It enables employers also to sift the industrial population and promises a new classification of vocations with reference to mental level. The feeble-minded cannot advance beyond their level. They cannot therefore win or retain promotion in tasks beyond their capacity. These standard tests should tend to bring the right job to the right man, thus increasing industrial efficiency, and replacing discontent and worry and other depressing mental states, with confidence and happiness and good-will.

8. Two years ago Governor Ralston appointed a commission to study the problem of the mentally defective and insane. The report of that commission reveals the existence of more than thirty thousand defective and insane persons in Indiana. The number is increasing and the cost of proper care mounts to millions. Out of the work of the commission, grew the Indiana Society for Mental Hygiene, as a member of the American Society for Mental Hygiene.

This society is to work for the conservation of mental health; for the prevention of mental disease and mental deficiency; and for the improvement, the care and treatment of those suffering from nervous or mental deficiency. It seeks to survey conditions in Indiana, to make known the causes of insanity, and to bring to the people knowledge of the means of prevention. It hopes, through public opinion and legal enactment to prevent in time the reproduction of the unfit, and to encourage the adequate provision for early treatment of the mentally sick. When it is known that the chief causes of insanity and feeble-mindedness are heredity, alcohol, syphilis, and head injuries, it is plain that society can and must control these causes through measures of prevention. For in the words of a recent writer, "at the present rate, while we are doubling our population, we are quadrupling our feeble-minded, and multiplying by three our insane. So that within three hundred and fifty years, the crazy people will break out and put us in." To meet these grave emergencies, the Governor's commission makes the following recommendations, which have been adopted by the Indiana Society of Mental Hygiene, as its program of immediate work.

FROM THE REPORT OF THE COMMITTEE ON MENTAL DEFECTIVES.

CONCLUSIONS.

1. The solving of the problem of the mental defective is vital to the state in the development of its social life.

2. One per cent. *at least*, of the general population, is mentally defective, i. e. either epileptic, insane or feeble-minded.

3. Nine thousand, four hundred and eight-four (9,484) *mental defectives*, or thirty-five one-hundredths of one per cent., of the total population, are now on public support.

4. a. There are 1,300 epileptics in the state needing institutional care as epileptics, 1,000 in the community at large or in institutions not suited to their care, and 305 in the Indiana Village for Epileptics.

b. The problem of the care of the insane in Indiana has been carefully worked out in the past fifty years, until now eighty-five per cent. of the insane in the state are cared for in state institutions.

c. The actual problem of the care of the feeble-minded is greater, inasmuch as it appears that the state at present is caring for but 1,350 or twenty per cent. of the estimated number who need care.

5. Mental defectiveness is a large factor in the cause of crime, delinquency, pauperism, inefficiency and many other social ills.

6. Further study of the cause and prevention of mental defectiveness is imperative.

RECOMMENDATIONS.

THE EPILEPTIC.

1. Additional provision for the care of women at the Village for Epileptics.

2. The enlargement of the Village for Epileptics to 1,200 capacity, and provision for larger medical facilities at that Village.

THE INSANE.

1. Indiana should at once provide additional institutional accommodations for one thousand patients now in need of hospital care.

Provision should, therefore, be made for the care of these one thousand patients, now in need of but not receiving institutional care. *First, by providing psychopathic departments at each of the existing hospitals, for intensive hospital treatment for the acute insane; second, by the erection of additional buildings at each of the existing hospitals as the plans of the several hospitals permit such expansion, and third, by the purchase of land for farm colonies and the erection of inexpensive buildings thereon in connection with these institutions where such colonies can be satisfactorily maintained.*

If after the above provisions have been made, there is still need of further hospital extension, we would recommend that the question be left to a committee appointed for that purpose.

2. There should, also, be provided at the Robert W. Long Hospital a psychiatric department, for observation and treatment of incipient mental cases.

3. At other general hospitals throughout the state detention wards should be established for observation and detention pending commitment and admission to the state hospitals. We feel that no person suffering from mental disease should be placed in jail.

4. The development of means for occupational therapy for patients.

5. A law providing for voluntary admission to state hospitals, thus taking care of incipient cases at a time when recovery is more hopeful.

THE FEEBLE-MINDED.

1. The enlargement of the School for Feeble-Minded Youth at Fort Wayne by a colony in the southern part of the state, on not less than 1,000 acres of land, with inexpensive buildings.

2. An additional law providing for commitment of patients to the School for Feeble-Minded Youth, the same as to the Village for Epileptics.

3. That in the event of increase in the facilities for the care of the feeble-minded, there be a law providing for the committal of adult feeble-minded males similar to the law now existing for the commitment of adult feeble-minded females.

GENERAL.

1. *There should be mental as well as physical examination of school children. Wherever it is possible, separate schools or separate rooms should be established.*

2. *We regard as highly important, and strongly recommend, the enactment of a law providing for a commission, with sufficient funds, to study the entire question of the mental defectives in this state.*

I confidently believe that these aims will appeal to the members of the Indiana Academy, and that all will join with us in this necessary effort to reduce mental unsoundness, and thus to contribute to the happiness and efficiency of all our people.