National Mental Hygiene

THE MENTAL HYGIENE MOVEMENT

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(Ed. Note:—The following articles published by Dr. Adolf Meyer and Dr. C. Macfie Campbell on the work of the American National Committee during the last few years give much information of value to this most important cause:—"The Mental Health of the Community and the Work of the Psychiatric Dispensary," *National Committee for Mental Hygiene, 50 Union Square, New York;* "Where should we attack the problem of the prevention of Mental Defect and Mental Diseases," *No. 53, Reprints Reports of National Conference of Charities and Correction, 1915 Meeting, at Baltimore* "Organization of the work of the Henry Phipps Psychiatric Clinic, Johns Hopkins Hospital, with especial reference to the past year's work," *Proceedings of the American Medico-Psychological Association, 70th Annual Meeting, Baltimore, Md., May 26–28,* 1914; "The Work of the Out-patient Department of the Henry Phipps Psychiatric Clinic," *Johns Hopkins Hospital Bulletin, xxv, No. 279, May,* 1914; "Introduction to Special Number, *American Journal of Insanity,* containing addresses at opening of the Henry Phipps Psychiatric Clinic: The Purpose of the Psychiatric Clinic," *American Journal of Insanity, lxix, No. 5,* 1913; "The Aims of a Psychiatric Clinic," *Proceedings of Mental Hygiene Conference and Exhibit, November,* 1912; "The Problem of the State in the Care of the Insane," *American Journal of Insanity, vol. lxv., No. 4, April,* 1909.)

THE Mental Hygiene Movement owes its origin to the realization that the problems of mental health and the prevention of misfits and disease must be attacked beyond the walls of the hospitals which to-day deal with mental defect and mental disease. To attain this, three lines of progress are needed: More extensive training of the average physician in the timely understanding of mental difficulties; provision for early study and treatment within the means and taste of the patient; and a more sympathetic and hopeful attitude on the part of the public.

In order to get the proper medical training, it is essential that the medical centres develop model organizations for work in these lines. A medical school without provisions for the study and treatment of the minor and major mental problems produces practitioners who are not apt to keep abreast of the progress of the age. Formerly the teaching of the theory and practice of medicine left to common sense the estimate of the personality of the patient. To-day the public has a right to ask that physicians have experience and training good enough at least to render first

aid, *i.e.*, protection against procrastination, and, where special training is needed, direction to the proper physicians and agencies. Physicians must be able to save the patient from overzealous attempts to cure mental difficulties by evisceration and mutilating operations, or from expecting the salvation from one-sided procedures often leading to a mere patching up; and they must guide the patient to wholesome living before a mental healer or "new-thought" agent steps in and reaps a harvest at the expense of common sense. Dispensaries and provisions for psychoneuroses and incipient psychoses in municipal hospitals (like Dr. Carswell's wards in a Glasgow hospital or the Pavilion F at Albany, N.Y.) or actually a "psychiatric clinic" or "psychopathic hospital",—these are necessary helps in any teaching center and more and more recognized necessities in any community centre. Work with the schools, with the social agencies, and with the courts gives additional ramifications into the life of the people.

This type of work needs financial support and the moral and intellectual support of the leaders of public opinion. So far only the more glaring problems—the problem of institutions and the problem of immigration and that of feeble-mindedness—have attracted attention. It seems difficult to make the Government realize the advantages of an active and liberal policy unless public opinion and a united profession stand behind the movement. So far there has been too much of a tendency on the part of the profession to generalize personal inexperience by claiming that very little is known and done about these conditions. Physicians are apt to be arch-obstructionists. The consequence is that hospitals which have too little help get even less, and develop an attitude of resignation very unfortunate in such a difficult task.

Progress will be rather slow at best and will depend on how many local physicians are willing to band together to advocate the necessary organization and the acquisition of trained assistance. New York State has interested the health officers in the cause. In large centres there naturally develops a field for physicians who have acquired the special training which has to be added to mere intuition to do justice to the work in schools, in courts, etc.

It looks very much as if the emergencies of the war might prove one of the greatest stimuli in the great cause. Nobody can read the little book of the anatomist G. Elliot Smith and the psychologist Pear on the treatment of shell shock without enthusiasm over the new interest in a field too exclusively left to

an over-institutionalized specialty. Psychopathology will always be the chosen field of a relatively small number of physicians; but the day is not far off when every physician will want to have as much working knowledge of the technical estimation and understanding of the patient's personality and its main problems as he has now of the conditions of the blood and urine. Many failures in treatment are due to our blindness to facts, ignorance or disregard of which will rest more and more heavily on the physician's reputation as the public wakes up to the present advance in this field.

The Mental Hygiene Committee of Canada starts off with a most propitious organization at a period when everybody is wide-awake to the great emergencies of the day. Those interested in the cause in the United States will watch with cordial interest the evolution of the movement and will no doubt receive much stimulation from the impetus of live activity in the new field with its new problems and its fresh resources.

SOME NOTES ON THE FORMATION OF THE CANADIAN NATIONAL COMMITTEE FOR MENTAL HYGIENE.*

By C. A. Porteous, M.D.

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Mr. Chairman and Gentlemen:

I HAVE ventured to think that the formation recently completed at Ottawa of the so-called Canadian National Committee for Mental Hygiene would be of interest to you as its aims and purposes well deserve the unqualified support of the profession.

To the medical world there are no subjects of greater importance than insanity and its allied conditions such as mental defect, epilepsy and some of the neuropathies. An organization, designed as this now under consideration, is national in scope and activities and representative in character. It will do a great work it is

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