Mental Health Timeline: Dehumanizing Treatment to Modification of Societal Attitudes

Former First Lady Michele Obama had this to say about mental health, “At the root of this dilemma is the way we view mental health. Whether an illness affects your heart, your leg or your brain, it is still an illness and there should be no distinction.” Society is being summoned to handle all illnesses the same way – with an attitude of compassion and respect. However, the history of mental health paints a deplorable picture of concern for human suffering and misfortune that was lacking. Treatment was often taken to the extreme ranging from restraints to dangerous and often fatal procedures inflicted upon those with mental illness.

In the Middle Ages, when mental illness was considered to be demonic possession or displeasure of the Gods or even witchery, innocent sick individuals could find themselves chained to walls in dungeons or jailed with criminals. It was not until the 1800s that state hospitals and asylums were established to care for the mentally ill, with good intention, but soon becoming overcrowded warehouses. Straitjackets and shackles were used to control behavior. In the early 1900s, convulsions, comas and fevers induced by electroshock and injections with insulin and malaria were intended to rewire and shock brains out of all types of mental illness. They helped some people with de-

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Celebrate World TB Day on March 24
Free admission to the Museum!
See page 4 for details
pression, but also caused amnesia, suicidal tendencies, broken vertebrae and even death. Diseased body parts that were believed to affect the brain, such as decaying teeth, inflamed tonsils, swollen appendices and portions of stomachs, small intestines and colon, were surgically removed. In 1949, the Nobel Prize was awarded for the discovery of the lobotomy, a medical procedure the nerve pathways in the frontal lobe of the brain were severed allegedly lessening the symptoms of schizophrenia, depression and anxiety. By the 1970s, 50,000 lobotomies had been performed in the United States rendering many mentally ill to a childlike state. Pointless and dangerous procedures, misapplied, often resulted in mortality rate rather cure for mental illness.

Commendable efforts were made to humanize the treatment of those suffering from mental illness through autobiographical reports from individuals who directly experienced horrifying treatment in mental institutions. In the late 1800s, New York World investigative journalist Nellie Bly was admitted to the Blackwell Island Insane Asylum in New York after only a cursory evaluation. She ended up with more than she bargained for. Nellie was given hydrotherapy treatment which she described as an asphyxiating experience with her hands and feet tied and a sheet flung over her head and twisted tightly on her neck to quiet her screeching cries before being thrown in a bathtub of cold water. Warm or cold hydrotherapy was believed to reduce agitation and bring tranquility to manic periods. Nellie far surpassed her goal when she astounded readers with her frightening depiction of a prison-like realm where individuals were abused and tortured rather than cared for with benevolence and gentleness. A few years later, in the early 1900s, an autobiographical encounter of a former resident of a Connecticut mental institution, Clifford Beers, formed the basis of his book *A Mind that Found Itself*. The bestseller provided a vivid description of the terrifying mistreatment that Clifford endured at the institution, including being beaten with a stick for not complying with leech bloodletting that was believed to purge septic body fluids. After being released from the institution, he established the first outpatient mental health clinic, became the Honorary President of the World Federation for Mental Health and also created the National Mental Health Association which supports psychotherapy, the most widely accepted way to treat mental illness today. Medications for treating mental illness have also improved through the years, which allow people with mental illness to live actively in independent community settings.

Nevertheless, some in society still react to people whose minds are ill with stigma, fear, distance; labeling them as “crazy.” High quality, humane mental health care can be combined with awareness of mental disorders, so that as the community becomes knowledgeable about the causes of mental disorders and available treatment, a supportive environment, protecting and promoting human rights can be established and social exclusion and discrimination reduced.

*by Linda J. DiPersio, MSM, MSHC*

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In twenty-first-century America, most people are privileged to be able to smile and have a set of healthy, pearly white teeth—a luxury that was not commonplace just a century earlier. Praise for our current dental health can be credited in large part to two individuals from Bridgeport, Connecticut, who created the field of dental hygiene.

112 years ago, Irene E. Newman performed the first oral prophylaxis, or teeth cleaning, at her cousin Dr. Alfred Fones’ office at 10 Washington Avenue, in Bridgeport, Connecticut. Many dentists thought that Alfred and Irene were crazy for thinking that citizens would seek preventative care for their dental health, but they knew they were on to something. In 1913, Alfred and Irene opened the Fones School for Dental Hygiene to train the first class of “dental hygienists,” receiving students from across the globe to learn about preventative dental care.

The state of Connecticut saw the merit of Irene and Alfred’s work to bring healthy dental habits to the city of Bridgeport, and awarded the world’s first license for practicing dental hygiene to Irene in 1917. Irene would later go on to become the first president of the first dental hygiene association, the Connecticut Dental Hygienists Association.

Public health strives to protect and promote health and prevent disease, the work of Dr. Alfred Fones and Ms. Irene Newman applied this goal to oral health, encouraging citizens to view the health of their teeth as playing a pivotal role in their overall health. Oral health and dental hygiene continues to play an important role in the work of public health departments and organizations across the United States and the world, thanks to the intelligence of Dr. Alfred Fones and Ms. Irene Newman, the world’s first dental hygienist.

Irene Newman is buried at Mountain Grove Cemetery in Bridgeport, CT.

References:
Tuberculosis, an ancient infectious disease affecting humans, is caused by the bacterium *Mycobacterium tuberculosis*. It was the number one cause of death in the nineteenth century and is still the leading infectious disease cause of death worldwide.

On March 24, 1882, Robert Koch, a German physician astounded the scientific community by announcing he had isolated and grown the tubercle bacillus—the cause of tuberculosis (TB). At the time of Koch’s announcement in Berlin, TB was raging through Europe and the Americas, causing death in one of every seven persons. Koch’s discovery enabled the entire world to move towards diagnosing and curing tuberculosis.

TB most often affects the lungs, although all other organs may be involved. The disease is usually transmitted person to person through airborne particles containing the bacteria produced by coughing. Most TB is curable if properly treated. Untreated, the disease is fatal within five years in 50-65% of cases.

Most people who become infected develop latent TB infection and the bacteria are dormant in the body. A skin test or blood test can diagnose latent TB infection. Latent TB infection can be treated to prevent active disease, so it is important that people with risk for TB exposure be tested for latent TB infection by skin test or blood test. Pulmonary and other forms of active TB disease can develop at any time after infection in 5-10% of those infected. Active disease is usually diagnosed by symptom identification and a chest x-ray, tuberculin skin test or other tests of blood, and an examination of sputum.

The museum is recognizing World TB with a free open house on March 24th from 1:00 PM – 4:00 PM. Come and explore our expanded exhibit with more information on tuberculosis.

by Dr. Abdul Hafeez Abro
What lies behind the faces of the past? What stories do buildings and the materials inside them tell us?

Unlike a cat's curiosity, which often gets him into trouble, a box of photos can stir our curiosity to look further and deeper into history. Or more simply, start a conversation. What do these pictorial snapshots of history tell us?

Volunteers at the PHM are cataloging the plethora of photos of Tewksbury Hospital as it existed long ago. Many buildings are simply ghosts of the past, but we can get a closer look at how they once were from the photos. We can peak inside the buildings from the photos—ornate rooms, gracious corridors, patients and staff in daily routines. But one particular photo is Holly Bodman's (fellow volunteer) favorite. It's my favorite too.

In January, Holly was organizing photos, when she showed me a photo of a group of toddlers clustered in front of what may have been the children's hospital. They are seated in cribs, playpens, and highchairs with nurses in attendance. What happened next was an interesting banter between Holly and I about the children in the photo.

A baby in a highchair appears to be trying to wriggle out of the chair. A young child is sitting in a hobby horse. We comment on the children's expressions. A few children are looking toward someone off camera. Upon further observation, we see a faint image of a child's face staring straight ahead. Holly notices the nurses' caps. She thinks they are similar to ones we have here at the museum. I couldn't help but wonder why these children were hospitalized. How long was their stay? Did they grow up to be productive adults?

Curiosity may kill the cat, but curiosity for us can offer up a whole new learning experience, heighten observation skills, and a five-minute banter.

The Museum is always looking for curious minds, to visit and learn, and to volunteer. For more information about volunteer opportunities see the Museum website.

by Sandra Price
Our Mission
The Public Health Museum is a non-profit educational and cultural museum. The Museum strives to preserve records and artifacts from our nation’s public health history; educate the public about the achievements and contributions of public health; and inspire people to build upon the past and continue to advance the future of public health. Our Museum provides a space to explore public health artifacts, inspire future public health professionals, and foster community involvement.

Our History
Incorporated in 1990 and open to the public since 1994, the Museum has the distinction of being the first of its kind in the nation. Massachusetts has a rich history of leadership and notable firsts in the birth of our nation. In the field of public health, Massachusetts was the first to record vital statistics; the first to implement a sustained board of health; and the first to implement a communicable disease surveillance system, among many others.

Museum Hours
Wednesdays, Thursdays and the first Saturday of each month 10 AM to 2 PM OR by appointment

Walking Tours
Seasonal (May through October, weather permitting), advanced registration required. Third Wednesday at 6 PM and first Saturday at 10 AM OR by appointment

Admission
$5.00 per person for museum
$10.00 per person for walking tour

Please feel free to forward this newsletter to others who may be interested in the Public Health Museum.
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