

A SECOND LOOK AT PSYCHIATRY AND MENTAL HEALTH

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"The neuroses are cured by osteopaths, chiropractic, nix vomica, bromides, Benzedrine, change of scenery, a blow on the head, and psychoanalysis, which probably means that none of these has yet established its real worth and surely that psychoanalysis is not specific. Moreover, since many neuroses are self-limited, anyone who spends two years with a patient gets credit for the operation of nature."

This observation was made by a Jesuit scholar, John Ford, of Weston College.

Within recent months, an increasing number of books, editorials, and articles have appeared expressing doubts as to the value of psychoanalysis and psychotherapy. It is encouraging to note that at least some of these hard second looks and evaluations have come from the psychiatrists. This seems to confirm a nagging uncertainty, which has existed for many years in the minds of most physicians who have wondered whether medicine and the public were sold a faulty bill of goods by the fast talking promoters of mental health.

In the early thirties, the psychiatry departments in most medical schools were ranked with those of the minor specialties. Their pitifully small staffs consisted of a department head and two or three clinical assistants. By the mid-thirties a great push, initiated through teaching grants supplied by Rockefeller money, gave an impetus that elevated psychiatry to the respectability of major department status. The older, practical-minded neuropsychiatrists were elbowed aside by bright, young men talking psychodynamics and coining fresh words like psychobiology and psychopathology. With the passage of another ten years, their departments had expanded into monster organizations occupying whole floors and wings, their staffs numbering in hundreds, and their lexicon a mushrooming terminology of feedbacks, ambivalences, and other mystifying behavioral double talk.

Particularly after World War II, the psychologists, psychiatric sociologists, psychiatrists, psychotherapists, and psychoanalysts, having caught the popular fancy of press and public, were further inflated into a state of ultra-fashionable respectability. The all-out war on psychiatric illness evoked crusading zeal among educators, PTAs, civic clubs, Junior Leagues, church groups, welfarists, politicians, and industry. With all this help, plus the cooperation of economists and sociologists in government, it was evident that most of mankind's problems of adjustment were on the verge of solution. Prevention

of mental illness was the watchword, and sound mental health for all, the battle cry. By the understanding and contemplation of mankind's group navel, the gateways to Utopia would soon open.

In the last fifteen years, the increase in the number of psychiatrists and their allied associates in the field of mental health have been exceeded only by the increase in the number of federal government employees. The problems of mental health have been attacked from all sides and on all fronts. No one has escaped attention, from the fetus in uteri onward to the moribund octogenarian. It might be imagined that by now, some results would be evident. Paradoxically, the private and state mental institutions continue to expand, remain full, and get fuller. Crime, delinquency, illegitimacy, homosexuality, and narcotic addiction have increased. Rioting, sociologic unrest, and general maladjustment are widespread and more prevalent than ever before. The neurotics have remained neurotic and daily more join their ranks. Everyone needs and takes tranquilizers.

The army of mental health soldiers, however, remains busy . . . but at what, it is sometimes difficult to determine. At least half of them refuse to treat psychotics, and often cannot find time to treat the psychoneurotics unless these fit into special categories, agree to the rules of the game, and conform to measures and patterns of therapy acceptable to the therapists. Some of these have justly earned the designation of "Band Aid" psychiatrists, and have been likened to the internist who will treat a cold but not the pneumonia that follows, or the general surgeon who, after ten years of special training, will remove a wart but not a gallbladder.

Among the few who have had reservations all along about the expanded importance of psychiatry and psychotherapy are those who know patients and psychiatrists best of all, the practitioners in other fields of medicine. It is amusing that the psychiatrists, those experts in dealing with the insights and rationalizations of others, retreat with little insight and much rationalization into their completely defensible positions behind smokescreens of half-plausible, improvable assertions when faced with criticism. Now that a certain amount of disillusionment has set in among the psychiatrists, perhaps they will ventilate more freely and consider rejoining the rest of the profession.