Books About Mental Institutions

Juliana Cummings

State Mental Hospitals Paul Ahmed, 2013-04-14 The 1970s constitute the decade of decisions about state mental hospitals! These large, monolithic, and seemingly impervious institutions are being phased out in some states and their basic purpose for existence is being seriously questioned in almost all others. Since 1970, hospitals have closed in California, Illinois, Kentucky, Massachusetts, Minnesota, New York, Oklahoma, Washington, and Wisconsin. Similar closings have occurred in several provinces of Canada, in Great Britain, and in some European countries. The purpose of the book is to examine the multiple issues growing out of the hospital closings: Why are the state hospitals being closed? What is the impact of closings on patients, hospital staff, and the communities where the hospitals are located? What has been the impact on the communities receiving these patients? What are the trends for the future, in terms of numbers of closings and types of hospitals which will remain? Is there a role for the state hospital in the care of the mentally ill or is it an obsolete institution? The impetus for the closings is diverse. The discovery and wide spread use of the tranquilizing drugs in the early 1950s allowed more patients to be returned to the community-under medication.

Mental institutions in America Gerald N. Grob, Mental Institutions in America: Social Policy to 1875 examines how American society responded to complex problems arising out of mental illness in the nineteenth century. All societies have had to confront sickness, disease, and dependency, and have developed their own ways of dealing with these phenomena. The mental hospital became the characteristic institution charged with the responsibility of providing care and treatment for individuals seemingly incapable of caring for themselves during protracted periods of incapacitation. The services rendered by the hospital were of benefit not merely to the afflicted individual but to the community. Such an institution embodied a series of moral imperatives by providing humane and scientific treatment of disabled individuals, many of whose families were unable to care for them at home or to pay the high costs of private institutional care. Yet the mental hospital has always been more than simply an institution that offered care and treatment for the sick and disabled. Its structure and functions have usually been linked with a variety of external economic, political, social, and intellectual forces, if only because the way in which a society handled problems of disease and dependency was partly governed by its social structure and values. The definition of disease, the criteria for institutionalization, the financial and administrative structures governing hospitals, the nature of the decision-making process, differential care and treatment of various socio-economic groups were issues that

transcended strictly medical and scientific considerations. Mental Institutions in America attempts to interpret the mental hospital as a social as well as a medical institution and to illuminate the evolution of policy toward dependent groups such as the mentally ill. This classic text brilliantly studies the past in depth and on its own terms.

Mental Illness and American Society, 1875-1940 Gerald N. Grob, 2019-01-29 Gerald N. Grob's Mental Institutions in America: Social Policy to 1875 has become a classic of American social history. Here the author continues his investigations by a study of the complex interrelationships of patients, psychiatrists, mental hospitals, and government between 1875 and World War II. Challenging the now prevalent notion that mental hospitals in this period functioned as jails, he finds that, despite their shortcomings, they provided care for people unable to survive by themselves. From a rich variety of previously unexploited sources, he shows how professional and political concerns, rather than patient needs, changed American attitudes toward mental hospitals from support to antipathy. Toward the end of the 1800s psychiatrists shifted their attention toward therapy and the mental hygiene movement and away from patient care. Concurrently, the patient population began to include more aged people and people with severe somatic disorders, whose condition recluded their caring for themselves. In probing these changes, this work clarifies a central issue of decent and humane health care. Gerald N. Grob is Professor of History at Rutgers University. Among his works are Mental Institutions in America: Social Policy to 1875 (Free Press), Edward Jarvis and the Medical World of Nineteenth-Century America (Tennessee), and The State and the Mentality III (North Carolina). Originally published in 1983. The Princeton Legacy Library uses the latest print-on-demand technology to again make available previously out-of-print books from the distinguished backlist of Princeton University Press. These editions preserve the original texts of these important books while presenting them in durable paperback and hardcover editions. The goal of the Princeton Legacy Library is to vastly increase access to the rich scholarly heritage found in the thousands of books published by Princeton University Press since its founding in 1905.

Mental Institutions in America Gerald N. Grob, 2017-09-04 Mental Institutions in America: Social Policy to 1875 examines how American society responded to complex problems arising out of mental illness in the nineteenth century. All societies have had to confront sickness, disease, and dependency, and have developed their own ways of dealing with these phenomena. The mental hospital became the characteristic institution charged with the responsibility of providing care and treatment for individuals seemingly incapable of caring for themselves during protracted periods of incapacitation. The services rendered by the hospital were of benefit not merely to the afflicted individual but to the community. Such an institution embodied a series of moral imperatives by providing humane and scientific treatment of disabled individuals, many of whose families were unable to care for them at home or to pay the high costs of private institutional care. Yet the mental hospital has always been more than simply an institution that offered care and treatment for the sick and disabled. Its structure and functions have usually been linked with a variety of external economic, political, social, and intellectual forces,

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Out of the Madhouse Margaret Leggatt, Sandy Jeffs, 2021-01-29 2020 Victorian Community History Award Winner Larundel Psychiatric Hospital was 'the madhouse on the edge of town' - until the 1990s, a Melbourne cultural icon shrouded in mystery in the outer suburb of Bundoora. What was it really like inside this madhouse? This story takes us into the heart of Larundel through the voices of former inmates and staff, exposing the best and worst aspects of the mental institutions of the times. It shows the shifts in psychiatric treatments, the social forces at play, and changes driving mental health policy. It explores what de-institutionalisation and 'care in the community' actually meant for those suffering mental illness, as well as for those treating, and caring for them. What did we lose with Larundel's closure in 1999 and the move to acute psychiatric wards in general hospitals? The notion of asylum? Is the more recent notion of 'recovery' a hopeful signpost towards a brave new world for mental health? The authors are Sandy Jeffs, a former inmate of Larundel, who became an advocate for her 'mad' comrades and is now a poet of distinction; and Margaret Leggatt, sociologist, occupational therapist and activist for the friends and families of mentally ill people. 'A significant and lively contribution to the history of mental health services in Australia, offering vital insights for the progress we must work for.' – Jack Heath, CEO, SANE Australia

Asylum Christopher Payne, 2009-09-04 Powerful photographs of the grand exteriors and crumbling interiors of America's abandoned state mental hospitals. For more than half the nation's history, vast mental hospitals were a prominent feature of the American landscape. From the mid-nineteenth century to the early twentieth, over 250 institutions for the insane were built throughout the United States; by 1948, they housed more than a half million patients. The blueprint for these hospitals was set by Pennsylvania hospital superintendant Thomas Story Kirkbride: a central administration building flanked symmetrically by pavilions and surrounded by lavish grounds with pastoral vistas. Kirkbride and others believed that well-designed buildings and grounds, a peaceful environment, a regimen of fresh air, and places for work, exercise, and cultural activities would heal mental illness. But in the second half of the twentieth century, after the introduction of psychotropic drugs and policy shifts toward community-based care, patient populations declined dramatically, leaving many of these beautiful, massive buildings—and the patients who lived in them—neglected and abandoned. Architect and photographer Christopher Payne spent six years documenting the decay of state mental hospitals like these, visiting seventy institutions in thirty states. Through his lens we see splendid, palatial exteriors (some designed by such prominent architects as H. H.

Richardson and Samuel Sloan) and crumbling interiors—chairs stacked against walls with peeling paint in a grand hallway; brightly colored toothbrushes still hanging on a rack; stacks of suitcases, never packed for the trip home. Accompanying Payne's striking and powerful photographs is an essay by Oliver Sacks (who described his own experience working at a state mental hospital in his book Awakenings). Sacks pays tribute to Payne's photographs and to the lives once lived in these places, "where one could be both mad and safe."

A History of Insanity and the Asylum Juliana Cummings,2023-01-24 The iconic image of the lunatic asylum is one that often leaves us wondering what went on inside these imposing buildings. In this new book, Juliana Cummings first questions what behaviors and characteristics define insanity and leads us through a comprehensive history of insanity and the asylum from the early treatment and care of mental illness in the Middle Ages and early modern period through to the closure of mental institutions in the twentieth century. Throughout the years, we learn of how the treatments and institutional structures for caring for the mentally ill developed and changed. The Age of Enlightenment and the rise of humanitarian reform was followed by the emergence of the insane asylum in the 1800s, which saw the beginning of the widespread constructions of asylums. We explore the different reasons for admittance, as well as the vast array of treatments. It shows that your treatment as an inmate of an asylum could vary depending on your gender and your social class. Although once thought of as criminals, the mentally ill were gradually treated with care. Juliana discusses the different treatments used over time as attitudes towards the mentally ill changed, such as drug use, psychosurgery and insulin therapy. We learn of the regulations and reforms that led to the closure of asylums, how their closure affected society and consider how the mentally ill are treated today. This insightful new history helps us to better understand the haunting past of the asylum and leads us down a fascinating road to where we come to an understanding of a time in history that is often mistaken.

Methods of Madness Benjamin M. Braginsky, Dorothea D. Braginsky, Kenneth Ring, 1969 Topics include conceptions of mental illness, experimental studies of the manipulative tactics of mental patients, patient's adaptation to mental institutions, and history of mental illness treatment.

Mental Hospital Alfred H. Stanton, Morris S. Schwartz, 1954-01-21 This book is both disturbing and encouraging: disturbing because it highlights so many of the imperfections of current hospital practices, and encouraging because it indicates how change and improvement may be brought about. It is a serious inquiry into the social setting in which hospital administration occurs, and it concerns itself primarily with the frequently unrecognized forces which influence patient and staff behavior. The book is, and necessarily must be, a composite of observations and opinions, data and inference. It is, therefore, a rather accurate mirror of the stresses and strains encountered in a hospital when existing practice is under scrutiny and when change is proposed. The rigorous examination of clinical administrative procedure at Chestnut Lodge marks a significant stage in the development of our hospital. The study here reported was made during the stage of

development at Chestnut Lodge when there was still a separate administrator for each floor and should be viewed as reflecting the state of affairs during that period. It was at this point that Drs. Stanton and Schwartz undertook to examine our procedures and to identify what actually took place. This planned examination, of course, brought into focus the existence of many stereotypes which had grown up about the way the hospital worked and which had at times been uncritically accepted. It was in part due to findings made in the present study that our step to a single administrator for each service was made. As differences of opinion between therapists, administrators, and nurses were investigated, it became clear that many times administrative, therapeutic or nursing procedures reflected personal needs of those involved rather than reality needs of the patients. Although their conclusions have been derived from work on a small ward of a small hospital, Drs. Stanton and Schwartz have developed principles which are applicable in large settings and in different types of hospital organizations. Such applications are possible if there are present both a desire to determine the actual situation in a given hospital and a willingness to accept change without fear. (PsycINFO Database Record (c) 2005 APA, all rights reserved).

Mental Institutions in America Gerald N. Grob, 2017 Mental Institutions in America: Social Policy to 1875 examines how American society responded to complex problems arising out of mental illness in the nineteenth century. All societies have had to confront sickness, disease, and dependency, and have developed their own ways of dealing with these phenomena. The mental hospital became the characteristic institution charged with the responsibility of providing care and treatment for individuals seemingly incapable of caring for themselves during protracted periods of incapacitation. The services rendered by the hospital were of benefit not merely to the afflicted individual but to the community. Such an institution embodied a series of moral imperatives by providing humane and scientific treatment of disabled individuals, many of whose families were unable to care for them at home or to pay the high costs of private institutional care. Yet the mental hospital has always been more than simply an institution that offered care and treatment for the sick and disabled. Its structure and functions have usually been linked with a variety of external economic, political, social, and intellectual forces, if only because the way in which a society handled problems of disease and dependency was partly governed by its social structure and values. The definition of disease, the criteria for institutionalization, the financial and administrative structures governing hospitals, the nature of the decision-making process, differential care and treatment of various socio-economic groups were issues that transcended strictly medical and scientific considerations. Mental Institutions in America attempts to interpret the mental hospital as a social as well as a medical institution and to illuminate the evolution of policy toward dependent groups such as the mentally ill. This classic text brilliantly studies the past in depth and on its own terms.--Provided by publisher.

State Mental Hospitals John A. Talbott, 1980

<u>Asylums</u> Erving Goffman,2017-09-08 A total institution is defined by Goffman as a place of residence and work where a large number of like-situated, individuals, cut off from the wider society for an appreciable period of time, together lead an

enclosed, formally administered round of life. Prisons serve as a clear example, providing we appreciate that what is prison-like about prisons is found in institutions whose members have broken no laws. This volume deals with total institutions in general and, mental hospitals, in particular. The main focus is, on the world of the inmate, not the world of the staff. A chief concern is to develop a sociological version of the structure of the self. Each of the essays in this book were intended to focus on the same issue--the inmate's situation in an institutional context. Each chapter approaches the central issue from a different vantage point, each introduction drawing upon a different source in sociology and having little direct relation to the other chapters. This method of presenting material may be irksome, but it allows the reader to pursue the main theme of each paper analytically and comparatively past the point that would be allowable in chapters of an integrated book. If sociological concepts are to be treated with affection, each must be traced back to where it best applies, followed from there wherever it seems to lead, and pressed to disclose the rest of its family.

A Social History of the Asylum Thomas George Ebert,1999 This book is the most extensive and comprehensive history of mental health care and treatment in the 19th and 20th century dealing with the institution of aslym yet available. Included is a carefully constructed theoretical framework, methodology, and data source assessment, a consideration of the founding of county asylums and the removal of the insane from poorhouses, definitions and treatment of insanity in the late 19th and early 20th century, an investigation into the history of a case study in one mid-west county, and a constructive look at the creative development of Milwaukee's best system plan to treat the insane.

Patients in Mental Institutions National Institute of Mental Health (U.S.),1964

Gracefully Insane Alex Beam, 2001 Presents a history of the Massachusetts mental institution from its beginnings in the early 19th century to today.

Patients in Mental Institutions National Institute of Mental Health (U.S.),1955

Mad House Michael Keene,2013 Michael Keenes third book explores the dark, twisted history of insane asylums in 19th century New York. While most of these hospitals were opened with altruistic intentions, they quickly degraded into abuses, neglect of patients, and other horrors. Having worked in the mental health industry himself, Keene's experience in the mental health industry gives him special insight as he recounts the horrific stories of the institutions and the souls that once inhabited their wards, but have since been long forgotten.

Closing the Asylum Peter Barham, 1992

The Mad Among Us Gerald N. Grob,1994 In the first comprehensive one-volume history of the treatment of the mentally ill, the foremost historian in the field compellingly recounts our various attempts to solve this ever-present dilemma from colonial times to the present. Gerald Grob charts the growth of mental hospitals in response to the escalating numbers of the severely and persistently mentally ill and the deterioration of these hospitals under the pressure of too many patients and too

few resources. Mounting criticism of psychiatric techniques such as shock therapies, drugs, and lobotomies and of mental institutions as inhumane places led to a new emphasis on community care and treatment. While some patients benefited from the new community policies, they were ineffective for many mentally ill substance abusers. Grob's definitive history points the way to new solutions. It is at once an indispensable reference and a call for a humane and balanced policy in the future.

Closing the Asylums George Paulson, M.D.,2014-01-10 One of the most significant medical and social initiatives of the twentieth century was the demolition of the traditional state hospitals that housed most of the mentally ill, and the placement of the patients out into the community. The causes of this deinstitutionalization included both idealism and legal pressures, newly effective medications, the establishment of nursing and group homes, the woeful inadequacy of the aging giant hospitals, and an attitudinal change that emphasized environmental and social factors, not organic ones, as primarily responsible for mental illness. Though closing the asylums promised more freedom for many, encouraged community acceptance and enhanced outpatient opportunities, there were unintended consequences: increased homelessness, significant prison incarcerations of the mentally ill, inadequate community support or governmental funding. This book is written from the point of view of an academic neurologist who has served 60 years as an employee or consultant in typical state mental institutions in North Carolina and Ohio.

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