History of Mental Illness and Treatment

	Minimum Degree Required	Prescribe Medication?	Typical Jobs
Psychiatrist	M.D.	Yes	Mental Health Physician
Advanced Psychiatric Nurse	Masters plus CNS or NP	Yes	Mental Health Nurse Practioner
Psychologist	Ph.D. (Research Focused) Psy.D. (Practice Focused)	No	Teacher, Government Official, Researcher, Therapist
Licensed School Psychologist	Masters	No	Therapist for Education Related Issues
Licensed Professional Counselor	Masters	No	Perform Individual and Group Therapy, Crisis Intervention
Licensed Social Worker (LSW)	Masters	No	State Government Offical, Therapist
Marriage and Family Therapist (MFT)	Masters	No	Focus on the Dynamics of Marriage and Family
Rehabilitation Counselor	Masters	No	Assist People with Emotional and Social Effects of a Disability
Creative Arts Therapist	Masters	No	Therapist Who Utilize Creativity and Arts

Types of Mental Health Care Professionals

- TABLE 13.1 on page 528

Professional Title	Specialty and common work setting	Credentials and qualifications
Counseling psychologist	Provides help in dealing with common problems of normal living: relationships, child rearing, occupational choice, school problems. Work in schools, clinics, other	Minimum master's degree in counseling; more typically a PhD (Doctor of Philosophy), EdD (Doctor of Education), or PsyD (Doctor of Psychology)
Clinical Psychologist	Primarily work with those who have severe disorders. Usually private practice or employed by mental health agencies or hospitals. NOT licenses to prescribe drugs.	PhD, PsyD, State Certification
Psychiatrist	Specialty of Medicine; deals with severe mental problems by prescribing drugs. Private practice or hospitals.	MD (Doctor of Medicine) Medical Board Certification

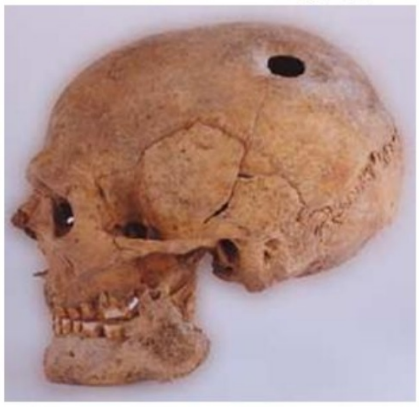
Mental Health "terminology"

- Presents – this means how did the patient come into the clinic/hospital – ie original complaint. Eg – Jody "presents" with tremors and facial tics
- Prevalence – how many people in the population have the disorder? Eg - approximately 7% of Canadians have been diagnosed with a specific phobia (9.8% female: 4.6% male)
- Incidence – number of new cases of a disorder appearing during a specific time-period.
- Course – pattern of development and change of a disorder over time. – Eg an **episodic course** – where the individual recovers and then has a relapse – eg schizophrenia, **time-limited course** – disorder improves on its own in a short period of time.
- Onset – when the disorder began – Eg **acute onset** – symptoms began suddenly, or **insidious onset or gradual onset** – symptoms began gradually over an extended period – important to determine in cases esp. depression – onset may determine the type of treatment. Eg – mild depression with acute onset – probably will clear up on its own – no expensive treatment necessary.
- Prognosis – anticipated course of the disorder – prognosis is good means the individual will probably recover fully – prognosis is guarded – probably outcome doesn't look good.
- Etiology – the study of origins of the disorder – what **causes** it – ie genetic? environmental?
- The cause of the behaviour often dictates the type of treatment – modern treatments involve a multi-dimensional approach – each disorder has a different type of treatment – unlike in the past when all disorders were treated with a particular type of treatment – ie psychoanalytic, behavioural, etc.

Trephining – early form of "therapy"

6500 BC *Trephining*

The first known surgery was probably trephining, or drilling the skull. This may have been a cure for headache. The remains of skulls where the hole has healed suggest that some patients even survived the operation!

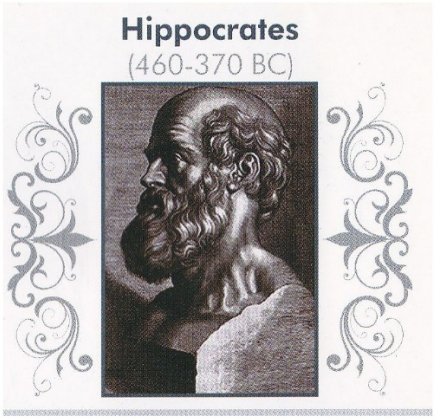


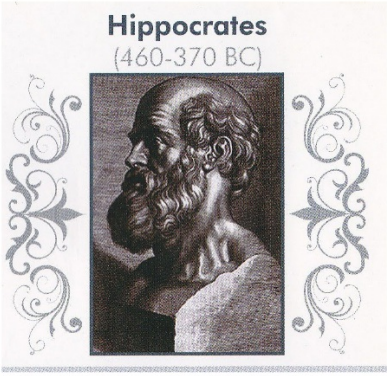
Historical Overview *(cont.)*

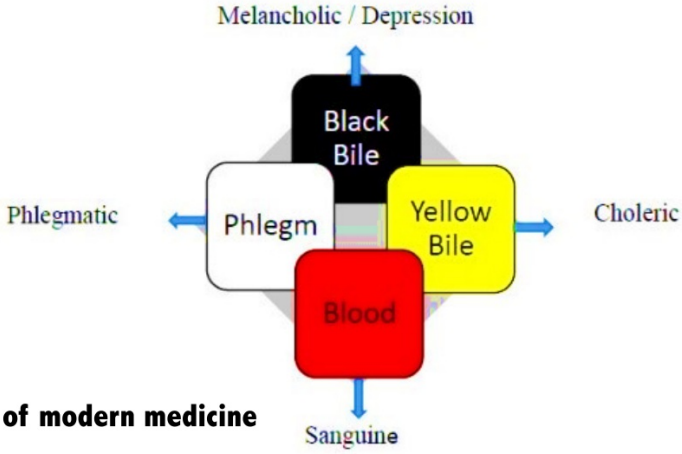
- Some people correlated mental illness with witchcraft, and individuals with mental illness were burned at the stake.
- Hippocrates associated mental illness with an irregularity in the interaction among the four humors: blood, black bile, yellow bile, and phlegm.
- During the Middle Ages, the mentally ill were sent out to sea on sailing boats without guidance to search for their lost rationality. This practice originated the term **ship of fools**.

Hippocrates' Humoral Physiology

- Hippocrates' treatments were different from exorcistic tortures
  - Tranquility, proper nutrition, abstinence from sexual activity were prescribed for melancholia
- Mental health dependent on a delicate balance among four humours, or fluids, of the body
- Imbalances and results
  - ↑ blood = changeable temperament
  - ↑ black bile = melancholia
  - ↑ yellow bile = irritability and anxiousness
  - ↑ phlegm = sluggish and dullness







Hippocrates (Greek physician – 400BC) – the father of modern medicine

- believed psychological disorders could be treated like any other physical disease
- recognized that these disorders could be associated with biological problems with the brain
- he recognized a genetic link – but also a social one – he believed that family stress could increase negative effects – so often removed the patient from family setting.

- normal brain functioning was related to 4 "humours":
blood (sanguine – describes someone who is ruddy in complexion – too much blood flowing)
black bile from spleen (too much black bile flooding the brain caused depression – melancholer)
phlegm from brain (phlegmatic personality – apathy and sluggishness)
yellow bile from liver (choleric person – hot tempered person)

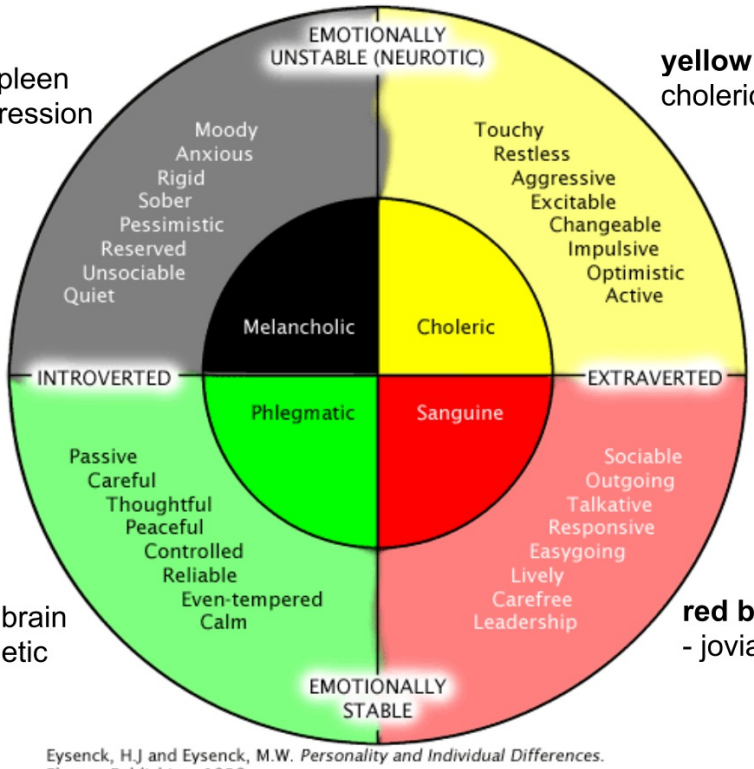
- blood-letting (using leeches) was practiced if too ruddy, induce vomiting to treat depression
- but all treatments included bed rest, healthful diet, exercise and specific recommendation as above.

Hippocrates: the father of modern medicine

4 Humours model of physical and mental health

black bile - from spleen
melancholer = depression

yellow bile - from liver
choleric person - hot-tempered



Eysenck, H.J and Eysenck, M.W. *Personality and Individual Differences.* Plenum Publishing, 1958.

phlegm - from brain
sluggish, apathetic

red blood - "ruddy" complection
- jovial, cheerful

From Bethlehem to Bedlam - England's First Mental Institution

Founded in 1247 A.D.

The hospital regime

Those who became patients were usually the poor and marginalised - sometimes believed to be dangerous - who lacked friends or family to support them.

The hospital regime was a mixture of punishment and religious devotion - chains, manacles, locks and stocks appear in the hospital inventory from this time. The shock of corporal punishment was believed to cure some conditions, while isolation was thought to help a person 'come to their senses'. At the same time, it was a religious duty to care for and feel compassionate for people afflicted by madness.

Exorcism

- many early societies used exorcisms to make the evil spirits leave the individual's body
- The shaman recites prayers and pleads with the evil spirit
- The idea was to make the person's body an uncomfortable place to inhabit

Salem Witch Trials

The Salem Witch Trials began during the spring of 1692, after a group of young girls in Salem Village, claimed to be possessed by the devil and accused several local women of witchcraft. The Salem Witch Trials were hearings and prosecutions of people being accused of witchcraft. This took place in colonial Massachusetts between February 1692 and May 1693. The series of events resulted with the executions of of twenty people, fourteen of them were women and are resulted by being hanged or burned at the stake in public.

The stigma around the topic was what triggered the events, the ones who were accused of witchcraft were the outcasts in society, they were feared and hung for being different. Society thought that it was contagious and that the devil would get their souls.
Belief in the supernatural and specifically in the devil's practice of giving certain humans (witches) the power to harm others in return for their loyalty.

Mental Illness from a biological perspective

The 19th Century

The discovery of Syphilis (General Paresis) and its link with "madness"

- Syphilis causes psychotic symptoms in late stages (delusions, hallucinations).
- L. Pasteur found the cause – a bacterial microorganism.
- Penicillin was found to be a successful treatment in 1870.
- This link reinforced the view that mental illness should be treated like a physical illness.
- Today the pendulum has swung too far in the direction of seeing mental illness only as a physical illness. This view is held by physicians and not most psychologists. Psychologists acknowledge contributing physical causes but continue to emphasize the role of the environment.

Slide prepared by Dr. Gordon Vessels 2005

- **Dorothea Dix**
  - In 1841, Dix was asked to teach a Sunday school class at a local prison in Massachusetts.
  - She was shocked to see mentally ill patients locked up with prisoners in dark, unheated, and filthy rooms.
  - Throughout her lifetime, she **spoke to state legislatures and succeeded in reforming prisons and the treatment of people with psychological disorders**.

Dorthea Dix
(1802-1887)

Dorothea's efforts on behalf of the mentally ill helped create many new institutions across the United States and in Europe. It extremely changed people's perceptions of the mentally ill and reduced the amount of stigma directed towards them.

Dorothea was a major factor in how we see and treat these people today- including how we diagnose and treat them. Modern medical treatments like therapy and medication help people who suffer from mental illness. Dorothea really wanted people of mental illness to know that they were not alone.

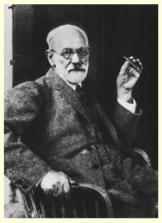
The 19th century (cont.)

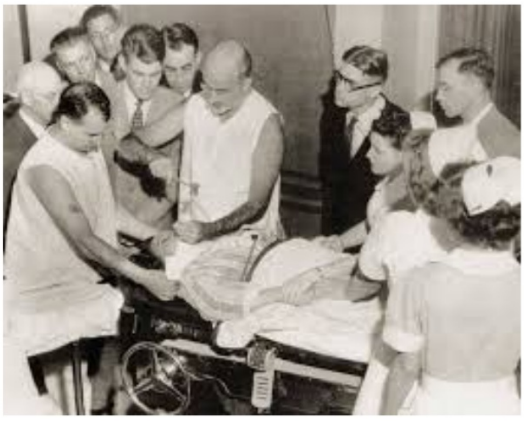
Dorothea Dix (1802-1887)

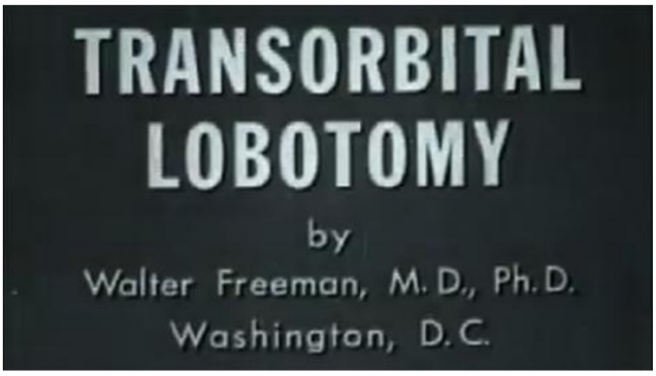
- Reform of U.S. system
  - Moral-treatment movement advocating humane care
  - Led to large, state-supported public asylums

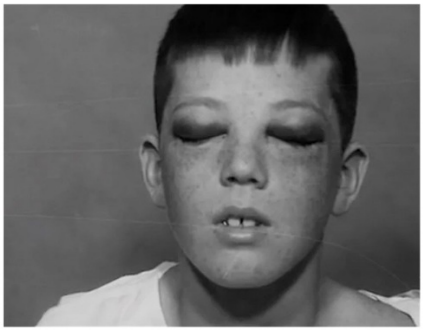
- But problems persisted
  - Overcrowding
  - No effective treatments
  - Eventually…interest waned

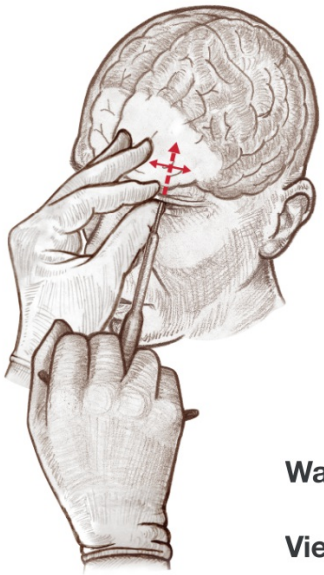
Freud introduces psychoanalysis in 1890s











Walter Freeman video: →

Viewer discretion!!

Wilhelm Wundt

–Leipzig, Germany

–The "father of psychology"

–Founder of modern psychology

–Opened the first psychology lab in 1879

–applied laboratory techniques to study of the mind

Wilhelm Wundt
(1832–1920)

Wilhelm Wundt (seated) with colleagues in his psychological laboratory, the first of its kind

Notable People in Psychology

Wilhelm Wundt –established the first psychology laboratory

G. Stanley Hall – established America's first psychology lab (at Johns Hopkins)

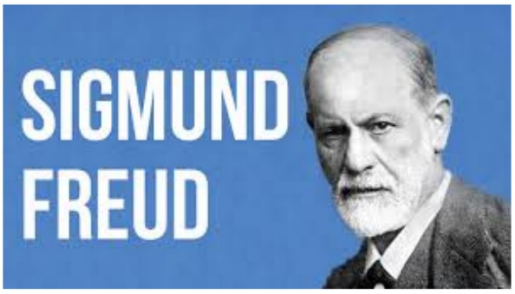
William James – published *Principles of Psychology*, the first widely used psychology textbook.

Edward Thorndike –conducted the first experiments on animal learning

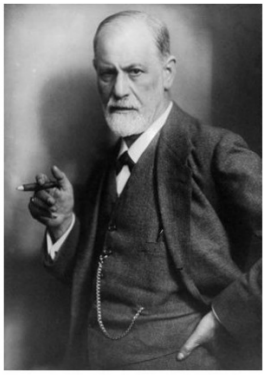
Mary Whiton Calkins – First female president of the American Psychological Association (APA)

Margaret Floyd Washburn – First woman to receive a Ph.D. in psychology.

Psychoanalysis and Freud



- **Sigmund Freud** (born May 6 1856 – 23 September 1939) was an Austrian neurologist who became known as the founding father of **psychoanalysis.**
- Freud qualified as a doctor of medicine at the University of Vienna in 1881, and then carried out research into cerebral palsy, aphasia and microscopic neuroanatomy at the Vienna General Hospital. He was appointed a university lecturer in neuropathology in 1885 and became a



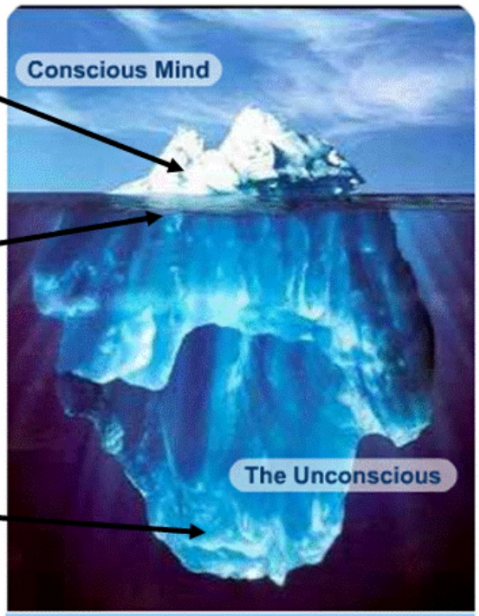
The Unconscious Mind

The conscious. The small amount of mental activity we know about.

The subconscious. Things we could be aware of if we wanted or tried.

The unconscious. Things we are unaware of and can not become aware of.

The **id** is part of the unconscious mind and comprises the two instincts: Eros and Thanatos.



Freud compared the mind to an iceberg.

Thoughts
Perceptions

Memories
Stored knowledge

Instincts – Sexual and Aggressive

Fears
Unacceptable sexual desires
Violent motives
Irrational wishes
Immoral urges
Selfish needs
Shameful experiences
Traumatic experiences

Psychology (1920s-1960s)

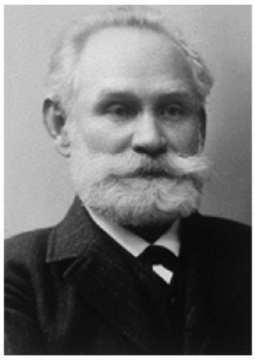
Behaviorism

Psychology
Science of *Observable* Behavior

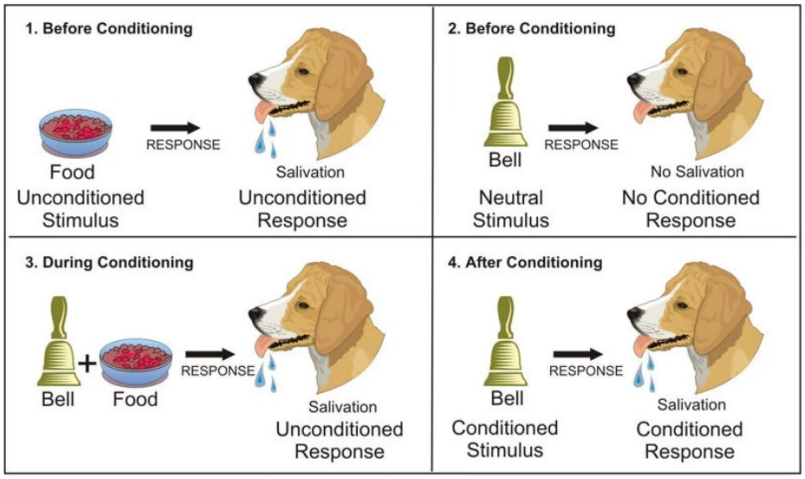
John B. Watson (1878-1958)
Watson believed that a person's behaviour was a product of his/her experiences as opposed to their internal mental state

"Give me a dozen healthy infants, well-formed, and my own specified world to bring them up in and I'll guarantee to take any one at random and train him to become any type of specialist I might select – doctor, lawyer, artist, merchant-chief and, yes, even beggar-man and thief, regardless of his talents, penchants, tendencies, abilities, vocations, and race of his ancestors."
John B. Watson - 1930

Behaviouristic Psychology



Ivan Pavlov (1849-1936) - was a Russian physiologist who was trying to study the effects of salivation on digestion in dogs. He inadvertently discovered something else – that the dogs would salivate even without food present – just the sight of the experimenter would cause the dog to salivate! Pavlov began to study this phenomenon and called it "classical conditioning".



Classical Conditioning

B.F. Skinner – Operant Conditioning

- **Operant Conditioning** – Subjects operate on their environment in order to produce desire consequences.
- **Skinner's ABC's of behavior:**
- A – Antecedent – stimuli that were present before a behavior occurs
- B – Behavior – that is emitted
- C – Consequences – that follow the behavior

Albert Bandura

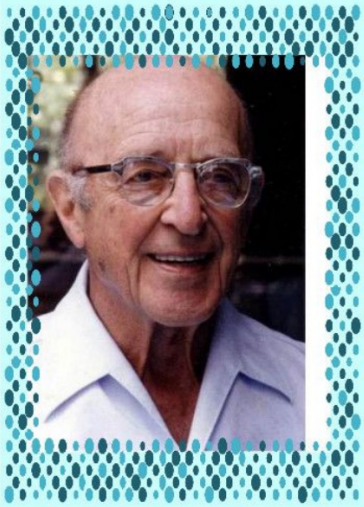
- Born on December 4, 1925 in Alberta, Canada
- He attended the University of British in Columbia, in Vancouver , for his Bachelor Degree in Psychology and his Ph. D. in 1952 from the University of Iowa.
- In 1953, he started teaching at Stanford University. While there, he collaborated with his first graduate student, Richard Walters, resulting in their first book, ***Adolescent Aggression***, in 1959.
- Bandura was president of the APA in 1973, and received the APA's Award for Distinguished Scientific Contributions in 1980. He continues to work at Stanford to this day.

Bobo Doll Experiment and the Modelling of Aggression

Social Learning Theory

- ***Vicarious Learning:*** or observational learning, occurs when a person is motivated to learn by watching someone else work and be rewarded.
  - People are motivated to imitate models who are highly competent, expert and receive attractive reinforcers.
- ***Self- reinforcers:*** desired outcomes a person can give themselves.
  - Person can reward themselves for success.
- ***Self-efficacy:*** refers to a person's belief about their ability to perform a behavior successfully.
  - People will only be motivated if they think they have the ability to accomplish the task.

CARL ROGERS



His theory:
Humanism.

Further explanation:
Rogers disagreed with Watson and believed that individuals behave in whatever way they want. He had the idea that we control our own destinies.

He used "Client-Centred Therapy"- showing people they they have the power & motivation to help themselves

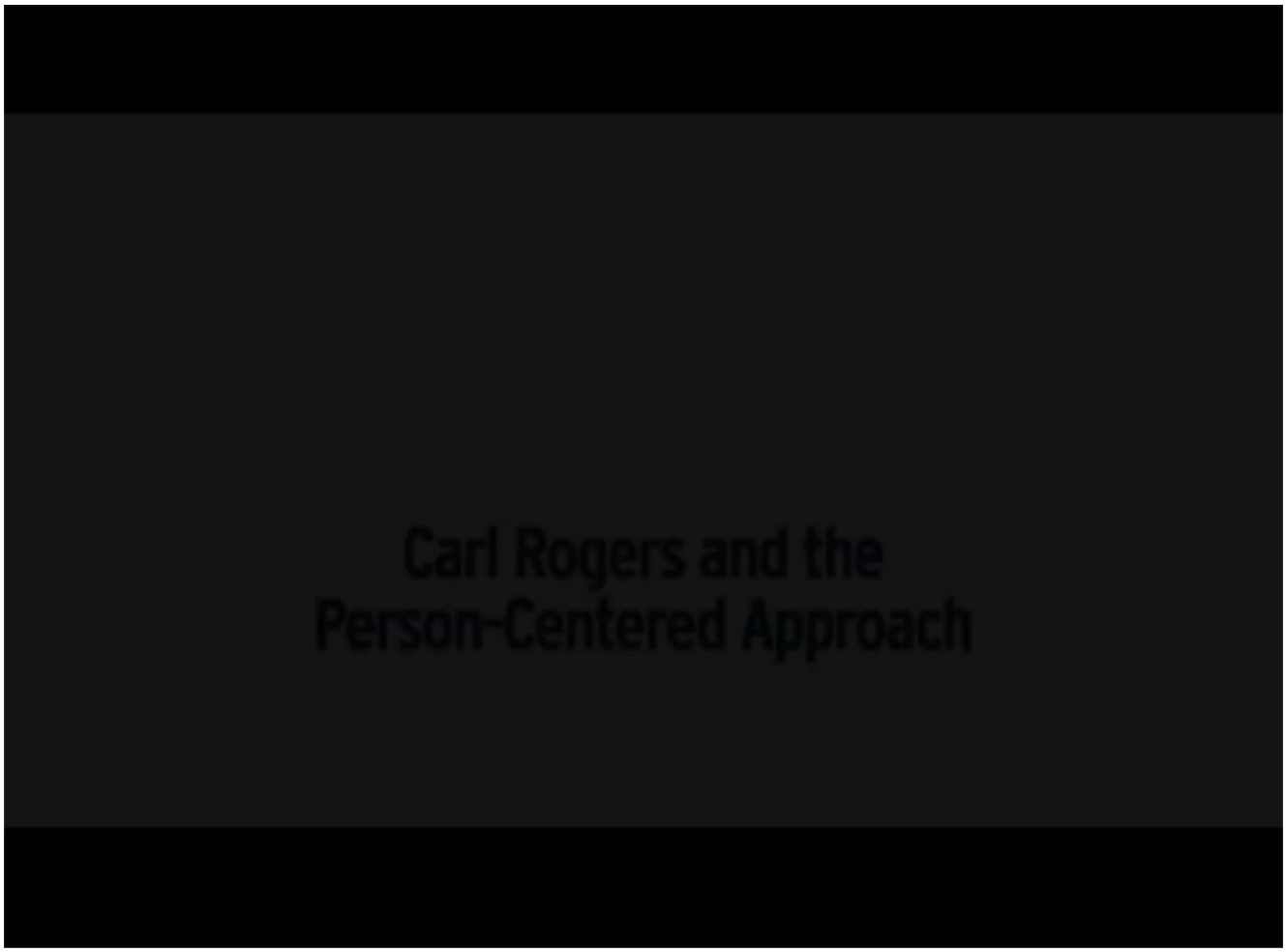
"When I look at the world I'm pessimistic, but when I look at people I am optimistic."
- Carl Rogers.

Person-centred approach

- Fundamentally positive vision of humanity
- Essential concepts for Rogers
  - Authenticity and congruence
  - Empathy
  - Unconditional acceptance of the client
  - Confidence in the client's capacity

Humanistic Personality Theories:
Carl Rogers

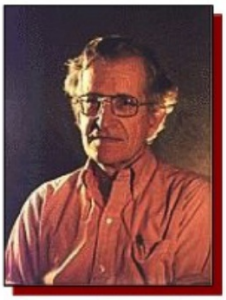
- **Self-concept**: our image or perception of ourselves
  (Real Self versus **Ideal Self)**.
- We have a need for positive regard/approval from others.
  - Conditions of worth or conditional positive regard.
    - The conditions under which other people will approve of us.
    - We change our behavior to obtain approval.
    - What we need is: **Unconditional positive regard**.


Carl Rogers and the
Person-Centered Approach

Cognitive Psychology

Cognition ➡ the mental processes involved in acquiring, processing, storing & using information

Cognitive Psychologists return to the study of learning, memory, perception, language, development & problem solving

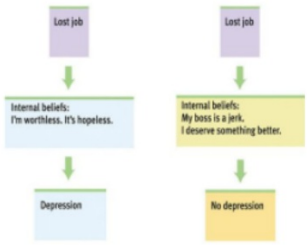


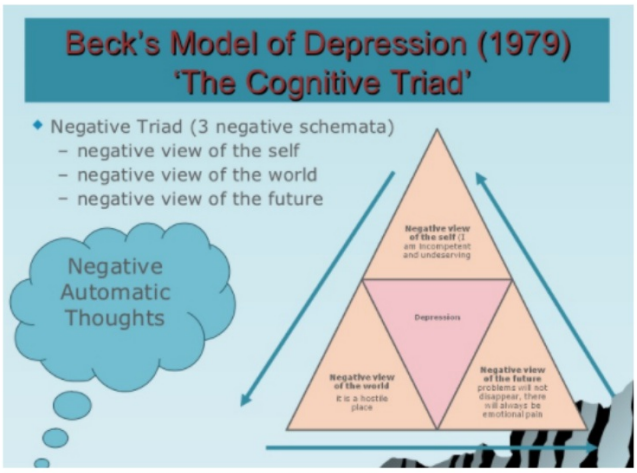
Noam Chomsky "Language"

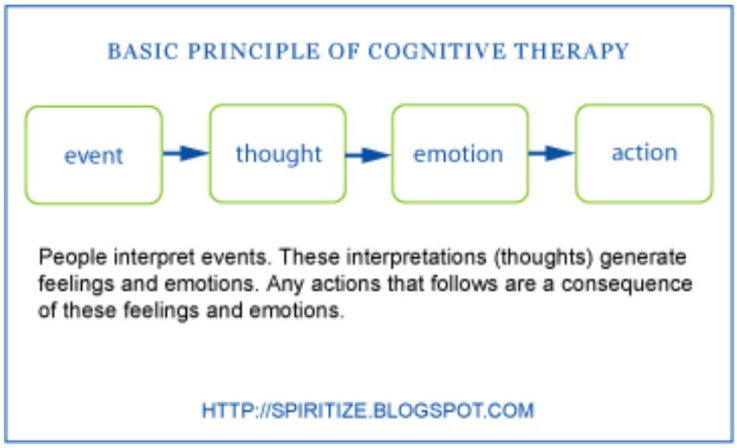
Advent of computers (late 1950s) provides a new model for thinking about the mind

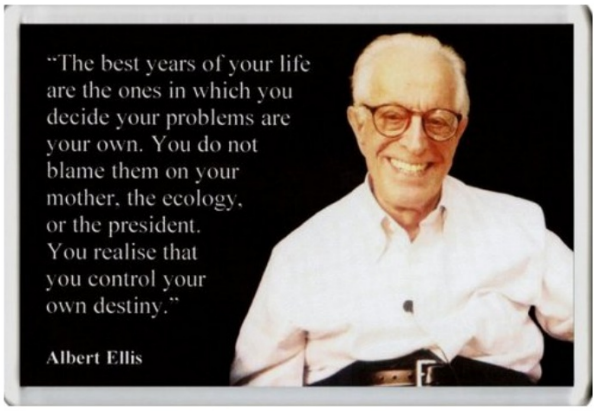
Cognitive (Thinking) Therapy

- Aaron Beck
- Teaches people new methods of thinking & acting. (change our schemas)
- Patient's negative thoughts are responsible for psychological problem
- Albert Ellis & Rational Emotive Therapy- anxiety is causing their beliefs







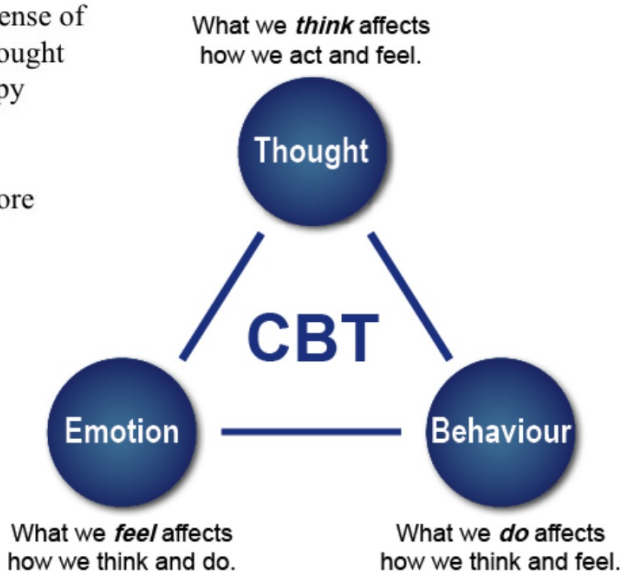


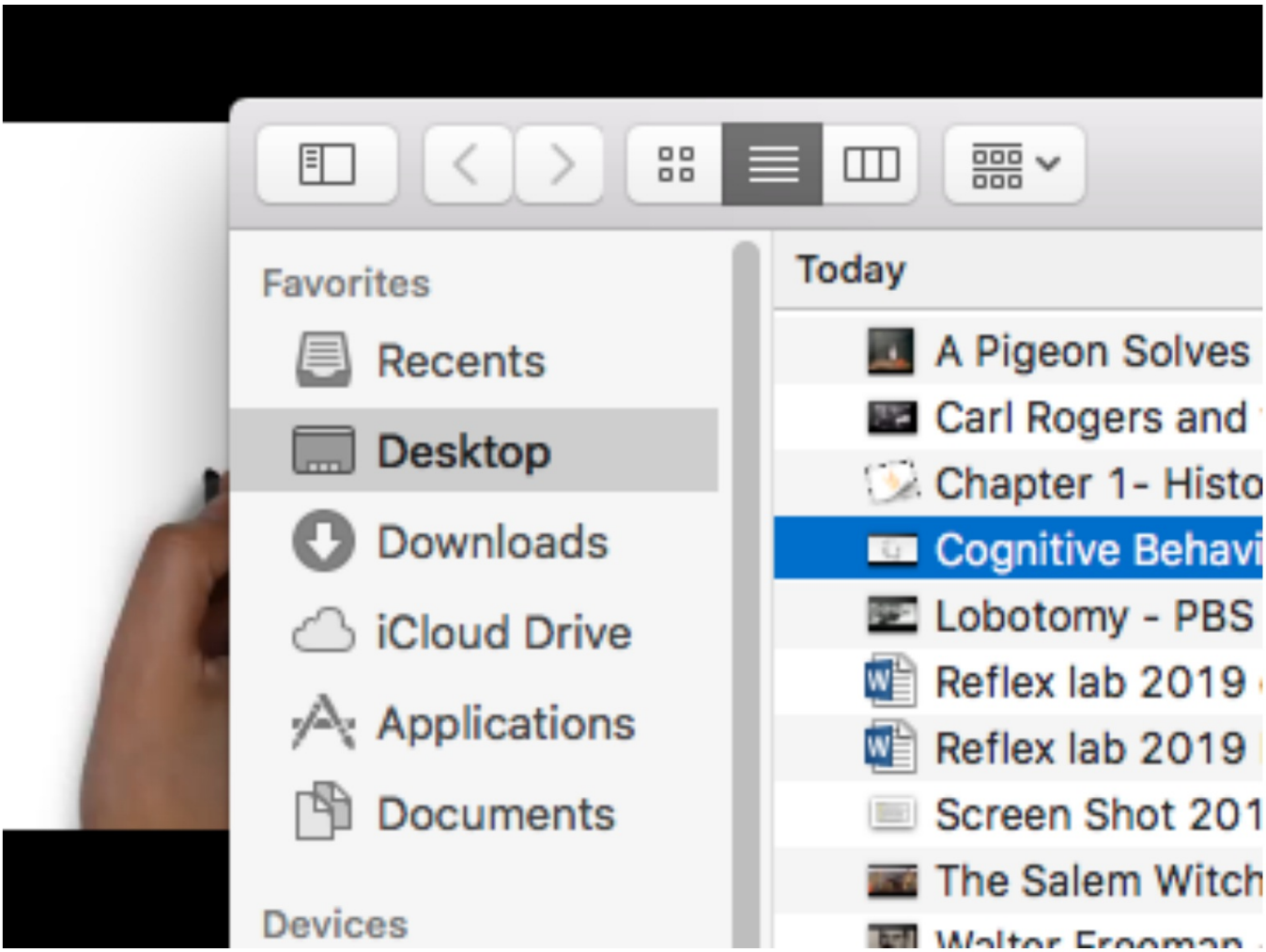
Cognitive-Behavioural Therapy (CBT)

• a method of treatment to help clients change "thought patterns" and behaviours through role-play, desensitization, journaling, talk therapy, etc.

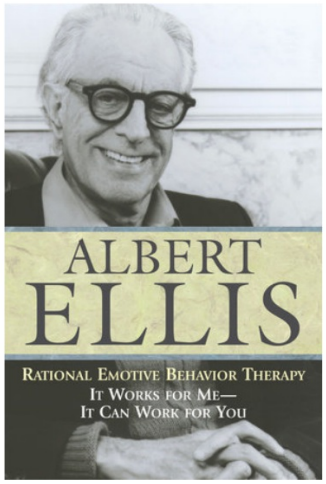
• it involves helping the client understand and make sense of the problem – and eventually teach and change the thought patterns and behaviours often through exposure therapy (guided exposure to the problem or issue)

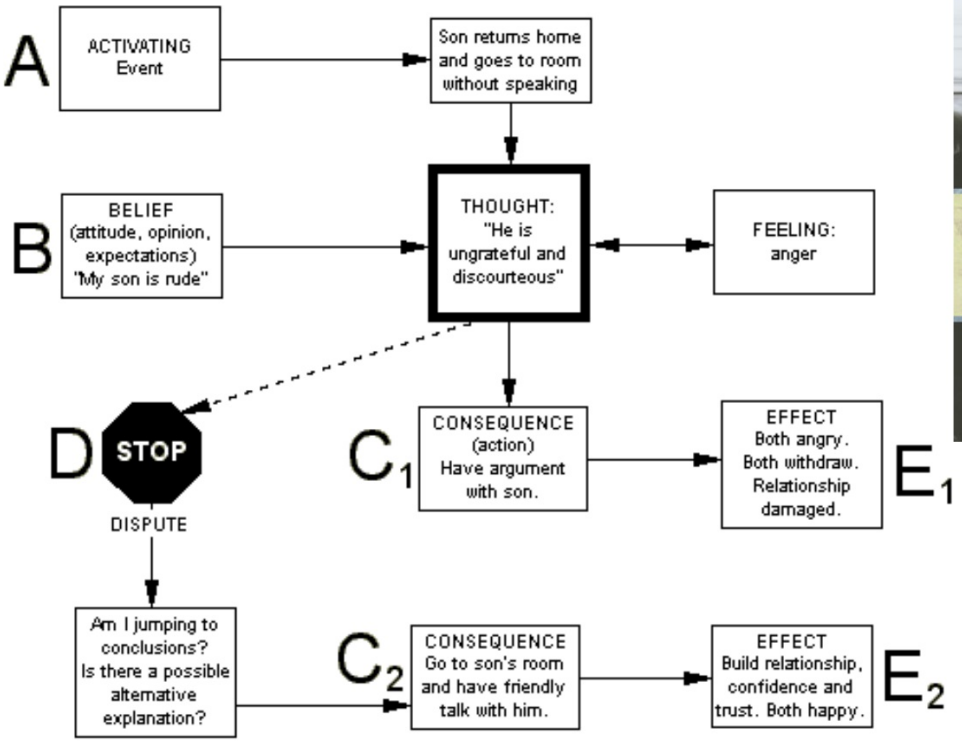
• often skills are taught to help the client behave in more successful and appropriate ways




Favorites
Recents
Desktop
Downloads
iCloud Drive
Applications
Documents
Devices
Today
A Pigeon Solves
Carl Rogers and
Chapter 1- Histo
Cognitive Behavi
Lobotomy - PBS
Reflex lab 2019
Reflex lab 2019
Screen Shot 201
The Salem Witch

The REBT Approach to Changing Your Thoughts, Feelings, and Behavior, and their Consequences.



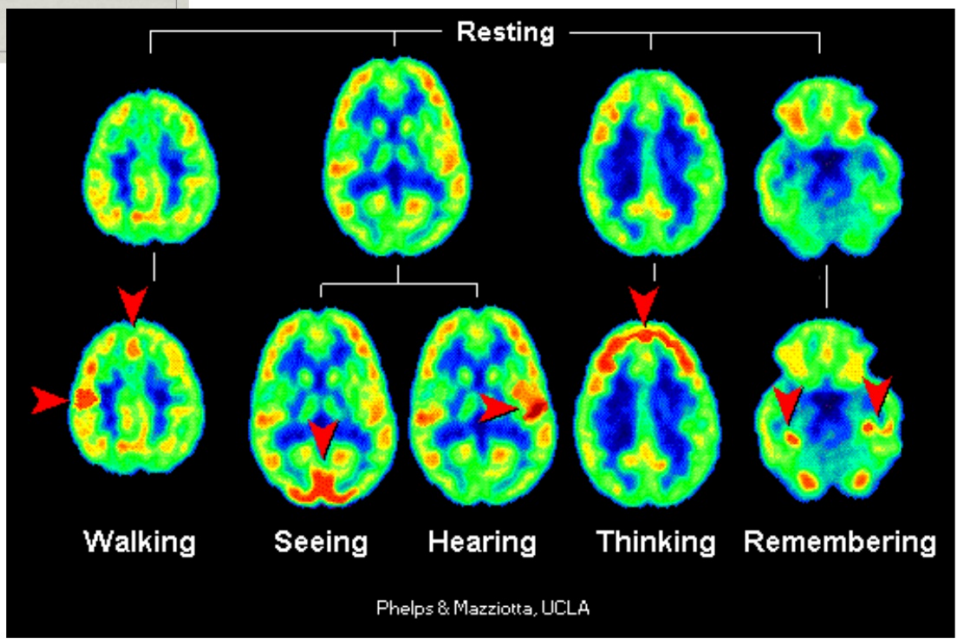


What is a PET Scan?

- Full name: Positron Emission Tomography
- A nuclear medical imaging technique which produces a three dimensional image of functional processes in the body.
- Especially valuable in imaging the brain
- Detects the metabolism level of injected substances (glucose), made radioactive to show the most active parts of the brain.

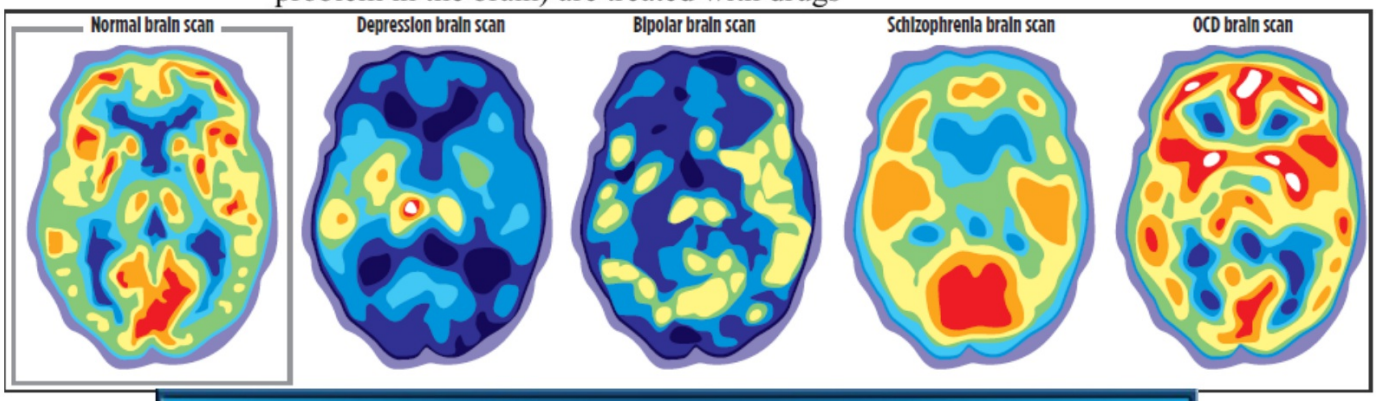
Biological model - genetics, neurotransmitters (schizophrenia, depression) neuron structure/damage (Alzheimer's), developmental trauma

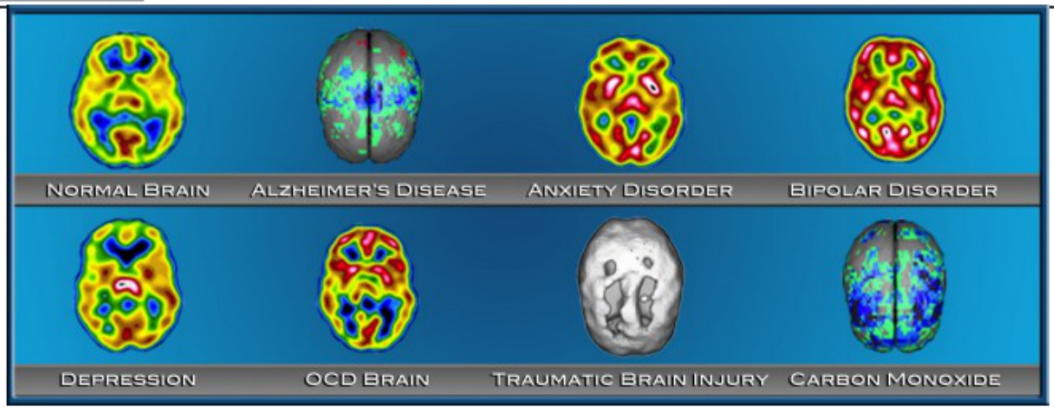
(Neuroscience)

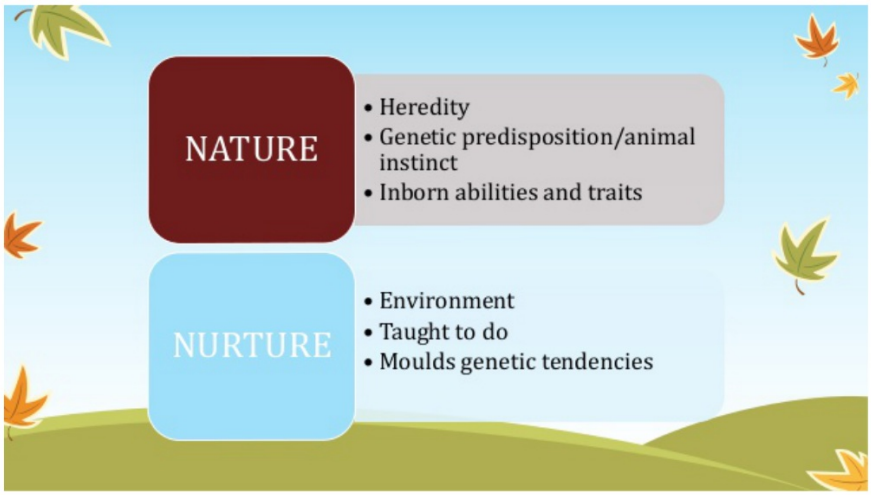


Biological psychology

• based on the idea that the brain is the issue – chemical imbalances and other issues within the brain itself
• often mental illnesses that are "organic" in nature (a problem in the brain) are treated with drugs







Approaches to Psychology

Nature ⟷ Nurture

Biological Approach	Psychoanalysis	Cognitive Psychology	Humanism	Behaviorism
Focus on genetic, hormonal, and neuro-chemical explanations of behavior.	Innate drives of sex and aggression (nature). Social upbringing during childhood (nurture).	Innate mental structures such as schemas, perception and memory and constantly changed by the environment.	Maslow emphasized basic physical needs. Society influences a person's self concept.	All behavior is learned from the environment through conditioning.

Psychotropic medications

alter brain chemicals to regulate mood and emotions.

Antipsychotics

like Seroquel, Abilify and Zyprexa

FDA-approved for youth with: Schizophrenia, bipolar disorder, irritability with autism

Potential side effects: Sedation, weight gain, diabetes, nervous system disorder

Antidepressants

like Prozac, Zoloft and Paxil

FDA-approved for youth with: Major depressive disorder, obsessive-compulsive disorder

Potential side effects: Suicidal behaviors, weight loss, abnormal bleeding

Effexor - SNRI
Cymbalta - SNRI
Lexapro - SSRI

Mood stabilizers

like Depakote, lithium

FDA-approved for youth with: Manic episodes, bipolar disorder, seizures

Potential side effects: Weight gain, diarrhea, nausea, tremors

Anti-ADHD

like Adderall, Ritalin and Strattera

FDA-approved for youth with: Attention deficit hyperactivity disorder

Potential side effects: Growth delays, tics, decreased appetite, insomnia

Anti-anxiety

like Vistaril (hydroxyzine)

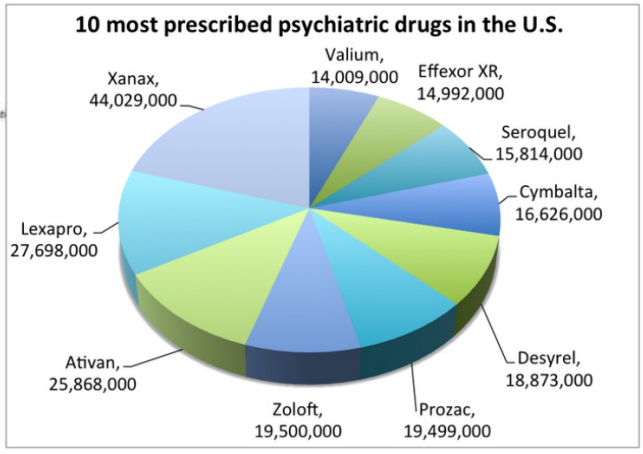
FDA-approved for youth with: anxiety, tension

Potential side effects: Sedation, dizziness, dry mouth

Ativan
Xanax

Source: Texas Department of Family and Protective Services and The University of Texas at Austin College of Pharmacy, "Psychotropic Medicati Utilization Parameters for Children and Youth in Foster Care," September 2013

Graphic by Alexandra Kanik / PublicSource

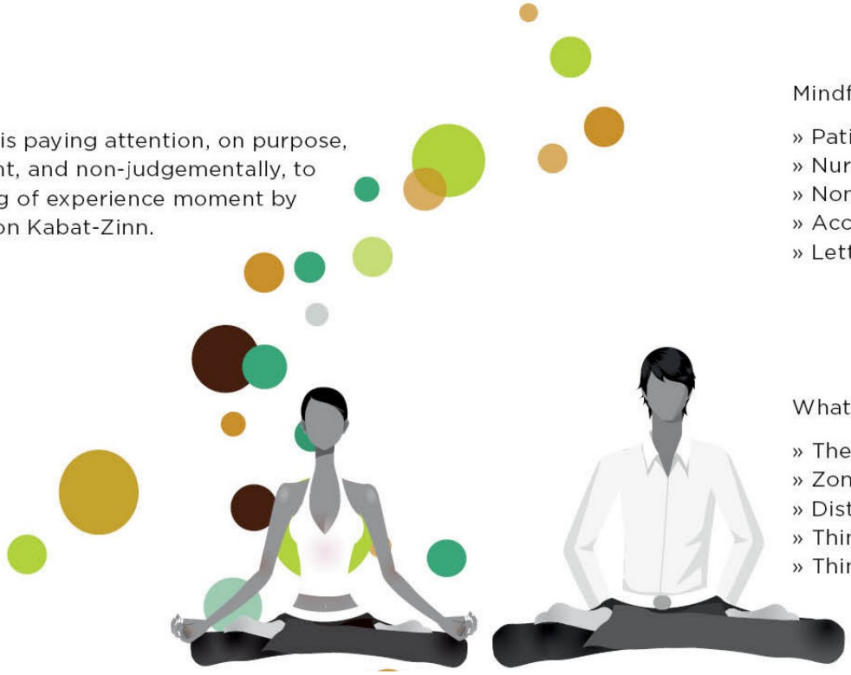


Mental Wellness for the 21st Century...

Mindfulness

Definition

Mindfulness is paying attention, on purpose, in the present, and non-judgementally, to the unfolding of experience moment by moment — Jon Kabat-Zinn.



Mindfulness attitudes:

» Patience
» Nurturing trust
» Non-striving
» Acceptance
» Letting go

What occupies your attention?

» The present moment
» Zoning out
» Distractions and "multi-tasking"
» Thinking about the future
» Thinking about the past