

History of Mental Health Treatment

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Pre- 1960:

- Treatment was provided in a large mental hospital (away from city centers), Long term stay.
- Few mechanisms for follow-up after discharge
- Client became dependent & institutionalized,
Low social & communication skills.
- No role for family in the treatment team.

1960s:

- The civil and human rights focus on the mentally ill.
- The community mental health centers affected on delivery of mental h. services.
- Shifting of treatment from large hospitals to community mental health centers (CMHC).

CMHC services:

1. Emergency care.
2. 24-hour inpatient care (short term).
3. Partial hospitalization (6-8 hrs/ day).
4. Out pt. care (1-2 hrs/week), assessment, medication, psychotherapeutic support.
5. Consultation & education programs in different topics: alcohol, trauma,)

-1970s:

- Long term to shorter stay followed by community based.
- Decrease client in large hosp.-(some closed)
- CMHC were often unable for greater number
- Homeless became a problem for chronic mental illness client who lacked family support.

1980s:

- The high cost of health care lead to establishing managed care system which stress on payer, provider, and consumer relationship & promoting quality of services.
- Types of managed care:
 1. Health maintenance organizations.
 2. Independent practice organizations.
 3. Preferred provider organizations.

1990s:

- Significant change in delivery of mental health treatment: (new structures and services)
 1. Case management and multidisciplinary team
 2. Organization, sequence & timing of intervention
 3. Population-based community care: focuses on primary care services.

- Alternative were designated to provide treatment & tertiary prevention:

1. Crisis intervention centers
2. Short term inpatient unit located in community hospitals
3. Partial hospitalization in day care programs
4. Residential treatment in half- way houses...
5. Mobile crisis unit & homeless shelters
6. Club house to promote independent community living

- The Americans with disabilities act(1990): people with disabilities can fully participate in the economic and social mainstream of society.
- National changes: National alliance of the mentally ill, fund from local organizations help to improve treatment & remove stigma
- Decades of the brain....reshaping of the causes & treatment of mental illness.

2000s:

- The recovery and rehabilitation model: prevention & reduction of impairment
- Team approach to provide treatment and rehabilitation for persistent mental illness
- Evidence-based practice integrate clinical expertise with clinical research evidence.
- Increase awareness of cultural diversity leads to use of alternative treatment for mental illness.

THANKS FOR INTEREST

