

Mental Health Treatments over Time:

Psychotherapy: – “Talk Therapy,” pioneered by Sigmund Freud and others in the early 1900s and is an interpersonal intervention in which a professionally trained therapist uses a range of psychological techniques, developing a therapeutic relationship to assist clients in self-understanding, life-skills and reaching their full potential. Types of psychotherapeutic techniques include cognitive behavioural therapy, psychoanalysis and systems therapy: and practitioners include psychiatrists, psychologists, social workers, marriage-family therapists, and professional counselors. Significant new therapeutic directions pioneered over the last decades include feminist therapy and expressive therapy. Although many have benefited from psychotherapy in its diverse forms, issues of professional versus patient power, trust and confidentiality have been controversial aspects of this form of treatment. Patients in large state institutions in the period prior to deinstitutionalization would rarely have had access to psychotherapy as it was not economical. Even today in Canada, public funding for psychotherapy is limited to psychiatrists, rarely including psychologists or other practitioners.

Medication: - First introduced in the 1950s, by the 1970s psycho-pharmaceuticals were being consumed by (or at least prescribed to) thousands of patients in Canada, while the figures world-wide were in the millions and continued to grow. The introduction of this form of treatment was closely linked to the closure of large residential mental health facilities and the rise of community care. Most commonly prescribed by psychiatrists or licensed general practitioners in psychiatric settings, psycho-pharmaceuticals are primarily made of synthetic chemical substances. Psychiatric medications include antidepressants for the treatment of depression and anxiety, mood stabilizers for bipolar conditions, and neuroleptics for psychotic conditions. Historically and currently, mental health patients have been unwittingly used as subjects of drug experimentation, with dangerous side effects including neurological damage, obesity, diabetes, and memory loss. While many today find medication to be of assistance in recovery from mental health difficulties, there remains a legacy of mistrust of psycho-pharmaceuticals. Psychiatric survivors, families and some professionals continue to express concern over adverse effects, and there remain problems with patient compliance.

Shock Therapies:

Electric Shock Therapy or Electroconvulsive Therapy (ECT) – First introduced in the 1930s and widespread by the 1950s, ECT is still used today, although it remains highly controversial. Anesthetized patients receive electronic shocks which cause unconsciousness and convulsions. Side effects include nausea, vomiting, dizziness, and memory loss. First introduced in the 1930s, ECT became widespread in the 1950s and is still in use today.

Insulin Shock Therapy - Insulin Coma Therapy - Developed in the 1930s and used throughout the 1940s and 1950s in Canada and elsewhere in the western world, insulin therapy was believed to help people who had been diagnosed as schizophrenic. Repeated insulin overdoses put patients into a state of coma. Replaced by pharmaceutical remedies, insulin therapy is no longer used today.

Psychosurgery:

Lobotomy - is a neurosurgical procedure, a form of psychosurgery, that consists of cutting the connections to and from the prefrontal cortex. Lobotomies were used mainly from the 1930s to 1950s to control a wide range of severe disorders, including schizophrenia, clinical depression, and various anxiety disorders. As well, there were cases of people who were operated on because they exhibited behaviours such as "moodiness" or "youthful defiance". The patient's informed consent in the modern sense was often not obtained. Lobotomy is no longer used as treatment for mental health difficulties.

Sterilization – A surgical procedure which terminates the ability to procreate and was used throughout the mid-twentieth century. Doctors and many members of society thought that people with mental illnesses, particularly those considered mentally “sub-normal,” would give birth to children with similar traits. Sterilization was legal in Alberta (1928-1972) and BC (1933-1973.) In Alberta, young people, women and minorities (particularly Aboriginal people and Métis) were sterilized in disproportionately large numbers, relative to the general population. .

Other:

Confinement and Isolation – These physical forms of dealing with mental health difficulties have a long historical tradition and continue to be used today in some cases. In the past, patients would be restrained in a straight jacket or confined in a padded room. Patients were often tied down so they couldn't move or escape.

Work Therapy – Most mental health institutions relied on the free labour of patients to operate. Women did laundry and cleaning and men worked on asylum farms and in institutional construction projects. The institutional importance of patient work was supported by the medical belief that work itself was the best kind of therapy for most patients. An ability and willingness to work was regarded as a sign that a patient was ready to be a healthy functional member of society once again. The idea that work can be therapeutic is key to the practice of occupational therapy today.

Hydrotherapy – Before World War I, hydrotherapy was regarded as the most successful form of therapy available, and many Canadian institutions were equipped with hot air and steam baths or saunas, and various kinds of warm and cold baths. Used as either a relaxant or a stimulant, hydrotherapy was a popular historical treatment for depression.

Creative therapies – Focusing on the use of the creative arts to aid the recovery process, music therapy, creative writing, art therapy and drama therapy have been employed successfully, historically and today, to alleviate mental health conditions.

Lifestyle adjustments and supportive measures – Today, there is a growing recognition of the therapeutic benefits of safe, secure housing, regular employment, peer and community support, exercise and self-help. It is understood that such aspects of well-being can be particularly influential in cases of early intervention.

Complementary or alternative treatments: In keeping with the broader interest in complementary and alternative health care in the Canada, practitioners and the general public are increasingly turning to such alternative treatments as relaxation therapy, message therapy, acupuncture, nutrition and traditional Chinese Medicine for mental health difficulties.