

(February 15th, 1937)

Mental Health and Ill Health

BY DR. S. G. CHALK.

PRESIDENT COLONEL MESS:—I suppose that we encroach in the prerogative of the psychiatrists when we tell this or that man, whose ideas we dislike, that he is crazy. Perhaps we encroach still further when we minimize the seriousness of radical movements as we have today in Alberta by dismissing them briefly with the remark, "They are crazy". Perhaps we are all a little crazy. With these and other similar indications, perhaps we minimize just what mental ill-health means. The question cannot be treated lightly. We have many reasons why we want to hear more on the subject, and to this we are fortunate in having the services of Dr. Chalk, whose work has been such a contribution in the last number of years. He has all the characteristics of success along this line—hard working, very interested, quiet, friendly disposition, and a very even temper.

DR. CHALK:—Mr. President, Gentlemen: When I was asked a few days ago if I would address your Club, I was very doubtful as to whether I could contribute anything to your general knowledge of the subject in which I am interested. However, it did seem that there might be some information which I could give you which might help, and so I decided I would attempt to clarify perhaps some of the things, that we find are not always quite clear in the minds of those with whom we come into contact. More, I mean from the standpoint of information about the general problem of mental ill health, and what can be done to increase mental health through preventing mental ill health.

First of all, I thought I might just generally refer to the fact that less than a hundred years ago, the first mental hospital was erected in Ontario. That, as you know, is the

old hospital on Queen Street, and since that time there has been a gradual increase in the number of hospitals in the Province. The hospital, when it was first put up, was not called a hospital. It was called a "lunatic asylum", and lunatic was the name that used to be used for people who required care because of mental illness, and the term "asylum" represented the haven of refuge, which the word itself implies. Since that time the understanding that we have got of mental illness and mental aberrations has changed a great deal, so that now all institutions for the treatment of mentally abnormal people are known as hospitals, and at the present time in this province there are twelve hospitals—three for specialized functions, and the other nine are for the use of mentally ill people generally. The number of people who are now in our hospitals is approximately 13,000, and that number is in proportion to the population of the Province about the same as in the rest of Canada. I think the last census figures showed about 37,000 in mental hospitals throughout the Dominion. With the population of Ontario roughly a third, the figures will be about the same—one-third of all those in mental hospitals. I mentioned that three of the hospitals were for specialized functions, and I would like to make clear that what I am going to continue to talk about is the subject of mental ill health and not mental deficiency. There is some confusion between the terms and both are sometimes considered one subject. The mental deficiency problem is different from the problem of mental ill health, and I do not propose to refer to it today.

The question frequently comes up as to whether the number of mental patients is increasing at an alarming rate, and there does seem some increase slightly out of proportion to the general increase of population. According to the last Dominion statistics, the number of patients per hundred thousand is 335, about a third of one per cent, and that number has risen from about 300 during the past five or six years, so there has been somewhat of an increase, but it is rather difficult to explain just how that increase does occur. We do know, and there are figures to show, that the increase, to some extent, although by no means all, has occurred to the people who are at a later time of life

than others. It would appear that there is an increase there, but at the same time it must be recalled that people are living longer now. During the last thirty years there has been an increase in the expectancy of life of ten years, and that would account for some of the increase. There are other factors that have been put forward to account for the increase, but from our scientific standpoint, we are not altogether prepared to say just how that increase has occurred. On the whole, there has been some slight increase in those conditions which are due to, and associated with, physical illness.

It must be remembered that the physical aspect of any individual must be considered as well as the mental, and that the individual as a whole is thought of in dealing with any mentally ill person. There is also to be considered the mental aspect of physically ill persons, and it is generally known that those who can take certain attitudes toward their physical illness recover sooner. Some recent investigations made at certain centres have shown that inquiring into the mental aspect of patients physically ill brings out many problems of mental ill health, which, when treated, have resulted in better recovery than is usual in certain types of individuals.

A point, which may be referred to here, is that there are different types of mental illness. When you go into a general hospital, you find various wards, with different types of physical illness in each ward, so in a mental hospital, you find there are different wards with different types of mental illness. And another point is that mental illness is, of course, very different from physical illness, such as influenza, in that influenza can be caught from someone else. Mental illness is not acquired in that way.

Mental illness, even though in some individuals it may appear to come on quite suddenly, is, as a rule, the development of that individual's reaction to certain stresses on the basis of the type of individual and the type of attitudes he has acquired throughout his whole development, and really develops slowly.

There are various types of mental illness, and the work that is necessary in order to find out everything about any particular individual is quite extensive, and it is necessary

to only not know that individual as he is at the moment, but also to find out everything about him from the time he began to grow up, and indeed throughout his whole life, to get the attitudes he has developed, and the way in which he approaches and meets the difficulties with which he is faced.

There are different types of individuals in ordinary every-day life, and when people become mentally ill, we really see exaggerations beyond the normal limits of what they have been in their ordinary life. There are some types who react in such a way that they have a very wide swing of emotions. When this type breaks down, we see exaggerations of these mood swings, but we expect them to recover and get back to normal life. Other types show a lessening of emotional response or a changed one, others become irritable or forgetful, and some, of course, become chronically ill and never recover.

As far as recoveries go, you will find that the total number of people who recover, and who leave our mental hospitals, is between forty and fifty per cent of those who go in during any year. That rate is continuing to increase, and the reason for that I will refer to later on.

Just a few words about the particular situation in Toronto. I have been talking in a general way and referring to the whole province. In Toronto, as you may be aware, there is a small hospital which is for the use of Toronto people only, and where investigation of certain types of mental illness can be carried on. Because of this, the recovery rate is higher than in other centres. For instance, the total number of people who were admitted to the Toronto Psychiatric Hospital last year was just over six hundred, and nearly four hundred were returned home from the hospital, and the average length of stay which they had was about thirty-five days, which suggests that a great deal can be done for the milder types of mental illness and is encouraging to us all.

Not only was that number of people admitted to hospital, but there is an Out-Patient Department, which looks after a great many other cases. Last year there were 1,700 visits to this department, of which half were by new cases, the other being return visits; and of the 1,700, there were

over 500 children. That does not mean that children show mental illness in the same manner as adults, but it does mean that the behaviour these children showed deviated in some way from the normal, and their thinking habits were unhealthy. If these habits of reaction are allowed to continue, we know that eventually a mental illness may develop.

In the school system in this city, as you know, there is a Mental Hygiene Division, which does attempt to help various problems from the mental health standpoint.

As in the field of general medicine, you are, of course, aware that the tendency has been during the last number of years to attempt to prevent development of conditions which may become serious. Consequently in the field of mental medicine the same attempt has been, and is being, made.

It is interesting to recall that the individual whom we consider responsible for the development of prevention in mental medicine, or what is known as the Mental Hygiene Movement, was a graduate of Yale, who had a mental breakdown shortly after he left University, and he spent some time in a mental hospital. His book, "A Mind that Found Itself", was the result of his experiences and led him to spend his life in arousing public interest in the improvement of mental hospital conditions. As these were accomplished, his attention was centred on the preventive aspect, and he became the dynamic force behind this work. Out of that idea and this man's efforts, there has grown the Mental Hygiene Movement, encouraged and sponsored by various individuals, many of you, no doubt, included, and a great deal of work is being done by that organization.

In the extension of preventive work, a great deal has been done during the past six years in Ontario by the establishment of Mental Health Clinics, which go out from the various hospital centres and do out-patient work in the various towns and cities of the area. Since this work began, over 15,000 people have been seen at these clinics. It seems very definite that not only has a great deal been accomplished in assisting children and young people, but very definitely in the case of numbers of adults who had begun to show early mental symptoms, it has been possible to give such help as would prevent them from having to go to hospital. Many of those who did finally have to have hospital care

are able to stay at home a great deal longer than they would have been ordinarily.

And there is another point. The attitude of the general public toward mental illness has very definitely changed over the last period of years. Although, we still find in some sections of the province the idea that mental illness is a disgrace, that idea is very definitely disappearing, and people are coming to realize that mental illness should be looked upon in just the same way as any physical illness. People are born to some extent with a tendency to develop certain types of physical illness, and in the same way certain individuals have a tendency to develop mental illness. The question of who is going to develop mental illness and who is not is a very difficult thing to decide, because there are so many factors that have to be included. But it does seem that the old notion that a person inherits mental disease is incorrect. We do find in going into histories of a large number of cases that there are just as many who show mental aberration of a mild type, whose families have till then shown no similar tendencies, as there are in the cases where there has been mental illness among predecessors, so that just because some one in one's ancestry has had a mental illness, it does not mean that there is any likelihood that one will develop it too.

With regard to the other general fields of inquiry where psychiatric services have been requested, there are a great many organizations of a social service nature who request assistance from our various out-patient clinics in helping them to decide on the best ways of handling certain problems with which they are faced. There is also the field of juvenile delinquency, but in this department it seems doubtful if psychiatry generally is as yet sufficiently well prepared to be of as much service as may be possible later on. But, at the same time, understanding of an individual from the psychiatric standpoint will give a person an estimate of what the patient might or might not do, which can be of very great assistance.

Just a word with regard to how the principles of mental health might best be brought before the public, and it does seem that one of the best ways may be through the educational aspect of the children at school.

No organization can go into homes or meet people who may be in need of assistance, but there are various school organizations through which contacts can be made, and I think a great deal can be done from that standpoint. It may be that we are thinking of putting too much work on the teachers, but after all they are so closely connected with the children in school, and they have so much influence over them. I have found that the teachers who are interested from the mental hygiene standpoint are better able to handle the problems with which they are faced in the ordinary course of their every-day work. There is no doubt that teachers, who have some idea of the clinics and the problems they deal with, can do a great deal to assist in the improvement of the mental health of the coming generations.

I think I have just about exhausted the time that is available. I hope the remarks I have made will be of some interest to you, and again I must thank you for the honour you have done me in inviting me to speak to you.