

WE ARE ACCOUNTABLE FOR THE HISTORY OF PSYCHIATRY

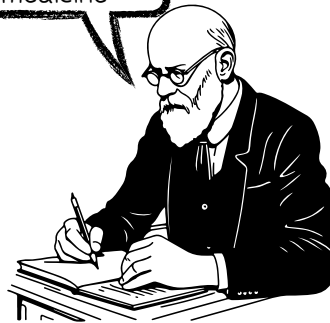
A PUBLICATION OF THE TRAUMA-INFORMED CARE COMMITTEE AT LANCASTER BEHAVIORAL HEALTH HOSPITAL

What Does *That Stuff* Have to Do with Me?

“I didn’t have anything to do with that.” It’s a pretty common response. “Why are you bringing that up?” is typical, too. These are some normal things that people say when they’re asked to reconcile with history.

And it’s fair: whatever work you do, you probably *didn’t* get into that job so that you could discuss its uncomfortable past. But sometimes avoiding the topic is impossible.

If you think this is bad, you should read the history of medicine



Nearly the entire field of Western mental health is founded in the “asylum” model of treatment. It advocated for the *care and management* of people with mental illness. There was very little vision for, or discussion of, recovery, especially in the United States. Asylums at times deteriorated into horrendous conditions.

The current model of mental healthcare has gaps for sure, but it’s a fundamentally healthier

ABOUT THIS PROGRAM

1. Safety
2. Trustworthiness and Transparency
3. Peer Support
4. Collaboration and Mutuality
5. Empowerment, Voice and Choice
6. Cultural, Historical and Gender Issues

These are the *Six Principles of Trauma-Informed Care*, identified by the Substance Abuse and Mental Health Services Administration (SAMHSA). As a part of LBHH’s commitment to trauma-informed care, our hospital pays special attention to one principle each month.

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and more ethical system than in previous generations.

In spite of marked improvements, a field as broad as mental health will have to prove itself again and again to be better than its past--trust has to be proven over *decades*.

So, what do you do when someone brings up an *uncomfortable past*? Assuming it's still within professional boundaries, simply do two things:

1. Acknowledge it. Recognize the suffering that occurred. No need to get defensive. It's a history that you're a part of; not your personal history.
2. Recognize that by being in the field, you may be expected to take some accountability for it. Stay aware of the improvements that have been made. And to the extent that you can, ask your organization, "What can we do better?"

THE HISTORY OF PSYCHIATRY Looks Like...

Learn about the history of hysteria and women's mental health



Read a 19th-century reporter's description of an asylum



Read a short article on the importance of professional self-reflection



Word of the Month

de-institution-al-i-za-tion *noun*
the process of replacing long-stay state psychiatric facilities with shorter-stay, community-based hospitals

Next
Month's
Theme

SAFETY