

*Itself*, while not so stating directly, deals fundamentally with nursing, or perhaps more fittingly, with the absence of nursing. While most of the sad experiences described resulted from the cruelty and lack of understanding in those who cared for the patient, the primary fault was deeply imbedded in the failure of the administrative and medical authorities to interpret the emotional needs of the patient under their observation and control.

When Mr. Beers recovered, he dedicated his life to the task of setting machinery at work to change a system which not only had made the memory of his illness a tragedy, but also a system which was continuing to cause intense unnecessary misery and torture to thousands of others still confined in similar institutions.

He said, "after becoming a free man my mind would not abandon the miserable ones I had left behind." He told the story of his illness not "just to write a book," but because it seemed his plain duty to do so. His efforts did not end with the writing of a book. Not only did he cry out against an unjust system, he also carried along with his pronouncements a way of escape and hope for the future through his plan for organising a national movement for the promotion of mental hygiene. His own words describe the movement simply as follows:

"A permanent agency for reform and education in the field of nervous and mental diseases is one of the great needs of the day. Such an agency, whatever the form, could do in its own field what the National Society for the Prevention and Care of Tuberculosis has done and is doing in its sphere of activity.

"Though the improvement of conditions among those actually insane and confined should ever be an important factor in shaping the policy of such an organisation, its most important work would be the waging of an educational war against the prevailing ignorance regarding insanity. This, to cure the disease by preventing it, is the only effective cure known. The watchword of such an organisation might well be the significant phrase: Mental Hygiene. Its purpose: the spreading of a common-sense gospel of right thinking in order to bring about right living, knowledge of which is needed by the public at large if the population of our asylums is to be controlled and eventually decreased. A campaign of education rigorously carried on would in time lead to the rescue of thousands who, if left in ignorance, must of necessity drift into a state of actual and perhaps incurable insanity. Editors, ministers, educators, philanthropists and members of the medical and nursing professions as well, could do much to further such a work of enlightenment."

When the society was finally organised its chief objects were stated to be "the improvement of conditions among those actually insane and confined, and the protection of the mental health of the public at large."

A truly comprehensive program. Cure and prevention moving hand in hand. It embodies all of the precepts involved in medicine and public health—cure, education and prevention.

And what of the opportunity of nursing in the field of mental hygiene? I wonder, as we are here assembled, if we have the same interpretation of the term mental hygiene? It is a comparatively new term to us in nursing. I will give you a definition which we have recently accepted in the Mental Hygiene Section of the American Nurses' Association: "Mental Hygiene deals with a program of establishing and maintaining mental health and necessitates knowledge of the basic principles of normal behaviour as well as deviations from good mental health."

"Mental Nursing deals with any methods that may be used with any type of illness in aiding an individual to

attain from life his maximum health, happiness and social usefulness."

You will note from these definitions that the mental and physical aspects of illness and living are interpreted as inherent in each other. Mental Hygiene is no strange, mystic substance which belongs to any highly sensitised group or to any highly specialised body of physicians, nurses or social workers. Mental Hygiene is a basic factor concerned with everyday living. It is what you and I and everyone associated with us must understand if we are to maintain a stable adjustment to each other in our social relations.

This is how Dr. C. Macfie Campbell, Professor of Psychiatry at Harvard University interprets mental hygiene. "Mental Hygiene," he says, "is not concerned with those serious forms of mental disorder which require treatment in state hospitals; it is concerned with those other forms of mental disorders which do not necessarily mean the removal of the individual from his ordinary social environment. A disorder is a mental disorder if its roots are mental. A headache indicates a mental disorder if it comes because one is dodging something disagreeable. A pain in the back is a mental disorder if its persistence is due to discouragement and a feeling of uncertainty and a desire to have sick benefit, rather than to put one's back into one's work. Sleeplessness is a mental disorder if its basis lies in personal worries and emotional tangles. Many mental reactions are indications of poor mental health, although they are not classified as mental disorders."

One might continue the examples at great length but the idea must be clear that in dealing with any type of illness, mental disorders of sometimes a serious or more often a very slight nature are present and nurses cannot adequately care for physically ill patients without knowing how to apply the principles of mental hygiene in daily adjustments.

Now the average school of nursing within the hospital is concerned with conserving the student's time for the carrying out of orders and for the daily routine procedures; it provides no opportunity for the student to gain the broader psychological and sociological point of view concerning nursing that is necessary to prepare her for the work in the community outside the walls of the hospital. When schools become concerned with the broader aspects of nursing, students will be found during the general course, in the social service departments of hospitals, the public health nursing organisations, nursery schools, child development and child guidance clinics and psychiatric hospitals; they will learn to think of the patient not as Bed No. 10 or as the appendix or heart case, but as a human being with his own individual differences that set him apart from others. The students will begin then to realise that the way the patient acts and thinks and re-acts emotionally to situations and conditions will be as important an observation for them to make as his change in temperature, pulse or respirations. Signs of mental pain will mean as much to the nurse with a concept of mental hygiene nursing, as do the signs of physical pain so familiar to well-trained nurses. Mental hygiene education is part of nursing, but a part for which we have seemingly not accepted the responsibility in our teaching. It is not for nursing alone. This knowledge is necessary for every mother, every teacher and, in fact, for every human being, in order that each may learn how best to make his own adaptation to life and how best to understand the difference between the good and bad adjustments which each individual must make to all others in the infinite variety of social relationships.

Nurses need a knowledge of mental hygiene in order that the service they are called upon to provide may be enriched and made more adequate. To add another subject to the curriculum for the advantage of nursing is not

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