Mental hygiene movement as a (r)evolutionary trend in public health in interwar Kaunas and Vilnius from 1918 to 1939

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Methods. In this research we used descriptive and comparative methods.

Results. After the First World War, the problem of treatment of the mentally ill was a medical and a social issue that required a completely new approach both in Lithuania and in Vilnius. The most notable manifestation of such a new attitude in psychiatry was a mental hygiene movement. University scientists in Vilnius and Kaunas were discussing issues of mental hygiene.

Conclusions. The mental hygiene movement of the early 20th century played an important role in the later development in psychiatry and medical sciences. The ideas published by the medical doctors in Kaunas and Vilnius were partly characteristic of the interwar period, although some of them went far ahead of their times.

Keywords: mental hygiene movement, Kaunas, Vilnius

INTRODUCTION

From the historical perspective, modern psychiatry is one of the youngest branches of medical sciences. The complicated evolution of psychiatry was caused by many factors. A significant role in this process was played by the social factor. From the very beginning, mental illnesses were the most complicated social hardship for western communities. Mentally ill people were stigmatised as outcasts of society. Mental illness was said to be a punishment sent by God, a sign of moral dirtiness (2).

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Ancient Greeks were the first who tried to find natural causes of mental illness. Hippocrates (460 BC-377 BC) did not believe in supernatural origins of epilepsy. He claimed that this disease resulted from a natural cause, a brain defect. The Roman physician Caelius Aurelianus (5th century AD) claimed that a mentally ill person should be treated with great care and gentleness. A patient should not be teased or harmed. Nevertheless, succeeding generations were ignorant of such an attitude. Mentally ill people were said to be possessed by devils, or to be witches and warlocks (2). The first steps in fighting the ignorance and negative attitude towards mentally ill were taken during the positivistic Age of Enlightenment. The French physician Philippe Pinel (1745-1826) considered a mentally ill person as a sick person in need of help. He unchained his patients in an asylum in Paris, treated them humanely, and the evolution of a new attitude towards the mentally ill person started (3).

MATERIALS AND METHODS

Our research is based on examination of primary printed sources and literature, that is, academic papers, archival data and literature. We used descriptive and comparative methods.

RESULTS

The problem of mental health was one of the most significant medical and social issues of the interwar period. In the early twentieth century, new important assumptions regarding the paradigm of modern health care emerged. They included the following:

1. Increasing scales of industrialization;

2. Progress in psychiatry, genetics, and other medical sciences;

3. Rapid population growth;

4. Relatively increasing incidence of chronic diseases;

5. World War I as negative effect on the European gene pool;

6. Improved diagnostics of mental illness;

7. Rising costs of treatment of chronic disease and mental illness in the US and Europe.

In the early twentieth century, significant actions were taken in the mental hygiene movement. The modern mental hygiene movement is related to the personality of Clifford Whittingham Beers (1876–1943). Although he was not a medical doctor like Pinel, he had a direct contact with mental health care. Between 1900 and 1910, Beers was put in several local private and state asylums because of depression and paranoia. This traumatic experience inspired him to humanize psychiatric care. Soon after he was released from asylum, Beers took actions to change the situation. He summoned a team of professional psychiatrists and social activists and started wide-ranging reforms in psychiatry (4).

In 1909, the National Committee for Mental Hygiene was founded. The objectives of the institute included: "improving mental health care, preventing mental illness and all sorts of defects, improving the treatment of the mentally ill, feeble-minded care and education of the mentally sick, investigation of the psychological factors related to education". The committee focused on the improvement of the care of the mentally ill as well as on social prevention of mental illness. Special bodies were established for early psychiatric diagnosis, examination, and treatment of children with mental disorders. The committee also took actions fighting the causes of mental disorders such as alcoholism and negative social background. A sister association with similar aims was established in France. In addition to the above, it also took care of vocational guidance for young people in order to prevent mental illness. The movement was also concerned about the so-called speech hygiene actions. Special clinics were founded to help children with speech defects (4).

In the interwar context, the mental hygiene movement can be confused with some other ideas, for instance, eugenics. However, there were fundamental differences between them. A substantial difference between eugenics and mental hygiene movements was the attitude towards hereditary and non-hereditary factors and their relevancy in fighting the diseases. Eugenicists concentrated on racial selection of "good" and "bad" genes. Mental hygiene proponents highlighted the importance of social factors. The mental hygiene movement implemented actions aimed at reducing the preconditions for mental illness by taking such social measures as the right upbringing, selection of decent work, adequate living and working conditions, and fast and accessible psychiatric services (4).

A good example of a proponent of this movement is Juozas Blažys, a psychiatry professor at Vytautas Magnus University. In recent studies, Blažys's work was associated with Antanas Smetona's antidemocratic regime and with racial eugenics of the Nazis. The problem is that a significant part of Blažys's papers shows that his views were rather mixed than specifically eugenic, which is interesting in the European context. The label of a severe eugenicist simply did not suit his case.

In 1924, Blažys's paper on the role of heredity of mental illness was published. He claimed that to a great extent a mental illness was clearly hereditary, but at the same time the laws of the hereditary mechanism were not yet completely clear. Because of that a doctor should rely on medical and social measures. In his opinion, people should be consulted on heredity and laws of heredity should be taught at school (5).

Juozas Blažys supported the mental hygiene movement rather than the old methods in psychiatry. He did not support violence inflicted on the mentally ill. While describing the advance in French psychiatry, he proposed humane treatment methods. For example, he introduced humane French open-type hospitals in Lithuanian psychiatry that had been under the tsarist grip for long years. In such hospitals, patients were admitted with their own or their patrons' permission. Patients were treated with respect and kept in good conditions (6).

A similar example is Adolf Falkowski (1886– 1963), a psychiatrist of Vilnius Stephen Bathory University. He also supported the mental hygiene movement. In 1929, in his paper titled "Educational factors in psychiatric treatment" he condemned abuse against mentally ill persons. The scientist reminded Pinel's and Conolly's (1794–1866) humane principles as the foundation of modern psychiatry. The doctor claimed that a patient was a human, a person who deserved respect. According to Falkowski, the treatment of physical disease could not be changed just because of new political circumstances and new fashions in society (7).

Instead of negative measures Juozas Blažys proposed fighting the social causes that predestine mental illnesses. One of the most significant of them was alcoholism. A war against alcoholism was associated primarily with propaganda of healthy lifestyle and positive anti-alcohol actions.

We would find propaganda of healthy lifestyle in almost all of Blažys's papers. His articles were published in both the scientific and popular press. The main goal of his articles was education. He revealed the significance of bad habits, improper lifestyle that affected individuals and society. In 1925, in his article "Alcohol and malformation" he discussed the problem of degeneration caused by alcoholism. Blažys mentioned two main directions of prevention: restriction of reproduction of degenerated individuals (which, according to him, already worked naturally because of the lower reproduction rate of such individuals) and the fight against the source of degeneration, that is, alcohol consumption. Valuable insights can be found in the paper of this scholar: "A nation that succumbs to alcohol is bound to be impoverished today and its tomorrow will be even darker" (8).

In 1932, another similar article was published. Juozas Blažys highlighted the problem of alcohol-induced mental illness. His observation about a thin line between "moderate" alcohol consumption and alcoholism should be considered the most important message dedicated to the public. According to him, "there is no other thing that people could became addicted to so easily as drugs, of which the easiest is spirits. The forms of their use are so diverse [...] that every taste and age could be satisfied" (9).

Juozas Blažys's article about the effects of smoking on the human body must be considered a progressive phenomenon. Reviewing foreign literature, the scholar notes that the damage of smoking to health is obvious and its benefits are doubtful. He concluded his paper with such a statement: "While smoking, humanity wastes the greatest wealth annually, but people are almost completely indifferent to this health issue. This is the irrationality of life: health is recognized as the most precious thing, though the least is done for it." As the anti-smoking strategy, professor encouraged promotion of knowledge about the harmful effects of smoking in youth by his own example (10).

In the context of the mental hygiene movement, it is worth to mention the idea of occupational counselling. According to Juozas Blažys, a considerable part of mental and social adaptation problems would drop away if people chose the most suitable occupation for themselves (11).

In his opinion, occupational counselling is very important when choosing medical studies. These studies place the students under extreme psychological tension and because of that they may be affected by a mental illness. The professor suggested checking students' health, both physical and mental, just before entering university. He suggested organising medical studies in a reasonable way, so that students would not have to comply with too many colloquia or exams which were not always necessary. Instead he emphasised the importance of harmonious development of a student's personality as a "student's moral anchor". Juozas Blažys believed that medical humanities, such as medical history, might serve in creating such "a moral anchor" (11).

Similar ideas can be found in the papers of Stanislaw Trzebiński (1861–1930), a professor of medical history at Stephen Bathory University. He believed that medical students should possess a very good and quick logical thinking which should be checked by using psychological tests. However, not less important should be a student's sense of morality. The professor was critical towards old-fashioned medical education using the only method of cramming the materials into the head without any critical observations (12).

In the frames of the mental hygiene movement, important interdisciplinary strategies of speech hygiene should be discussed. The problems of speech hygiene were described in the papers of Benedykt Dylewski (1894–1988), an otolaryngologist from Vilnius. According to him, fluent development of speech is one of the features of normal development of intellect. Because of that the doctor has to prevent speech difficulties to occur in order to guarantee well-timed development of pupils' intellectual abilities and future capabilities for living wholesome life. From 1929 to 1935, he had been examining schoolchildren of Vilnius (13).

During his investigation, he found out that a significant part of Vilnius' pupils had speech problems such as stammer, nasal speech, inability to pronounce resounding and voiceless consonants. He concluded that those problems were caused by biological and social factors. On the one hand, the pupils were often afflicted with respiratory diseases which had a negative impact on the development of speech. On the other hand, it was also a social problem since speech difficulties were much more common among working-class children. That was associated with low intelligence of their parents and their inability to teach their children. Sometimes it was also caused by psychological problems, for example, stammer (14).

After several years of treatment, the abovementioned speech defects in the children of Vilnius were corrected. During later years, annual speech checks in the schools of Vilnius became a regular practice (13). In addition to the actions mentioned, Dylewski published basic recommendations for daily speech therapies that had to help to awaken and correct children's speech skills. Among the practices that he had mentioned, the practice of speaking aloud in class should be highlighted as one of the most important ones (14). Dylewski concluded that a fluent development of a child's speech is a result of cooperation of parents, teachers, and doctors. With regard to the doctors, he emphasised their duty to regularly check children's speech (13).

CONCLUSIONS

The mental hygiene movement in the early twentieth century played an important role in the later evolution of psychiatry and other medical sciences. After World War I the problem of medical treatment for mentally ill was a medical as well as the social issue in Lithuania as well as in Vilnius, and it required a completely new attitude. Scientists in Vilnius and Kaunas were discussing the mental hygiene issues. The ideas that were published by Kaunas and Vilnius doctors were partly characteristic of the interwar period, however, some ideas went far ahead of their times.

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PSICHIKOS HIGIENOS JUDĖJIMAS KAIP (R)EVOLIUCINĖ VISUOMENĖS SVEIKATOS TENDENCIJA TARPUKARIU KAUNE IR VILNIUJE 1918–1939 M.

Santrauka

Tikslas. Sveikatos priežiūros sistema tarpukariu išsiskiria revoliuciniais mėginimais įveikti socialines ligas ir negandas. Po Antrojo pasaulinio karo paskelbtuose darbuose skirtingos ir netgi iš dalies viena kitai priešingos psichikos higienos ir eugenikos idėjos buvo supainiotos ir beveik išimtinai susietos su nacių rasistine ideologija, totalitariniu arba autoritariniu režimais. Tarpukario Baltijos šalių socialinės ir medicinos politikos vertinimai taip pat tapo gana vienpusiški. Neseniai paskelbtas B. Felder tyrimas sudaro įspūdį, kad pokyčius Lietuvos psichiatrijoje lėmė vienintelis veiksnys – nacių eugenika. Tačiau būta ir kitų veiksnių. Vienas iš svarbiausių – psichikos higienos judėjimas, kuris ir aptariamas šiame straipsnyje.

Metodai. Tyrime naudotas aprašomasis ir lyginamasis metodai.

Rezultatai. Psichikos sveikatos problema tarpukario Lietuvoje buvo ir medicininė, ir socialinė, ji reikalavo visiškai naujo požiūrio. Ryškiausia tokio naujo požiūrio apraiška buvo psichikos higienos judėjimas. Universitetų mokslininkai Vilniuje ir Kaune analizavo psichikos higienos klausimus.

Išvados. Psichikos higienos judėjimas XX a. pradžioje lėmė svarbius pokyčius psichiatrijos ir kitų medicinos mokslų evoliucijoje. Kauno ir Vilniaus medikų idėjos buvo iš dalies būdingos tarpukariui, tačiau kai kurios iš jų įžvalgumu pralenkė laiką.

Raktažodžiai: psichikos higienos judėjimas, Kaunas, Vilnius