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Madness in the Streets: How Psychiatry and the Law Abandoned the Mentally Ill, Rael Jean Isaac, Virginia C. Armat, Treatment Advocacy Center, 2000, 0967993903, 9780967993904, . .

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Changing mental health services the politics and policy, Tom Butler, 1993, Medical, 181 pages. .

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Opening Skinner's Box Great Psychological Experiments of the Twentieth Century, Lauren Slater, 2004, Psychology, 276 pages. An intriguing survey of the science of the human mind traces developments in human psychology over the course of the twentieth century, beginning with B. F. Skinner and the

A Dose of Sanity Mind, Medicine, and Misdiagnosis, Sydney Walker, Oct 16, 1997, Medical, 272 pages. Examines the hazards of drug therapy for the treatment of psychological disorders, exploring the relationship between physical illnesses and their psychological components and

Court of Last Resort Mental Illness and the Law, Carol A. B. Warren, Aug 1, 1984, Law, 273 pages. The Court of Last Resort looks at decision making in a mental-health court and at the dilemmas of treating mental illness while protecting patients' legal rights. Carol Warren

The Creation of Psychopharmacology , David Healy, Sep 1, 2004, Psychology, 469 pages. David Healy follows his widely praised study, The Antidepressant Era, with an even more ambitious and dramatic story: the discovery and development of antipsychotic medication

Deinstitutionalization: promise and problems, Issue 90 promise and problems, Richard H. Lamb, Linda E. Weinberger, Jul 11, 2001, , 116 pages. Both the scope and effects of deinstitutionalization have been dramatic. This volume examines both positive and negative effects of this mass movement of persons with severe

As for the sky, falling a critical look at psychiatry and suffering, Shelagh Lynne Supeene, 1990, Medical, 239 pages. .

Companion to psychiatric studies , Robert Evan Kendell, Andrew K. Zealley, 1993, , 955 pages. Headache/eye mov.

An analysis of the community-based-care program services for the mentally ill adults released from mental hospitals to adult foster care settings in Michigan , Inell Bond, 1981, Medical, 96 pages. .

The community training center an educational-behavioral-social systems model for rehabilitating psychiatric patients, Michael D. Spiegler, Haig Agigian, 1977, Medical, 374 pages. .

The Transfer of Care Psychiatric Deinstitutionalization and Its Aftermath, Phil Brown, 1985, Social Science, 275 pages. .

Madness in the Street , Dana L. Landers, Mar 1, 1996, , 293 pages. .

Discharged from mental hospitals , Philip Bean, Patricia Mounser, 1993, Psychology, 188 pages. .

Finally back in print! Mandatory reading for anyone who asks why thousands of individuals who clearly suffer from brain disease go without care. The Treatment Advocacy Center is proud to republish this book so that this valuable tool for reform continues to remain available to them and to all who ask "How can we stop this neglect?"

Taking aim at advocacy groups who view the homeless as ordinary people down on their luck, the authors of this scorching critique cite findings that 30% to 40% of the homeless suffer from major mental illness, and that a high proportion are substance abusers. Isaac, a sociologist, and freelance journalist Armat, blame the abandonment of the homeless mentally ill on the anti-psychiatry movement (led by Thomas Szasz, Ronald Laing, among others), on civil libertarians and on psychiatrists who foster the "delusion that preventive community psychiatry could eliminate mental illness." Arguing that we have replaced the mental hospital with the 18th-century poorhouse which threw together the mentally ill, the retarded, criminals and the displaced, they warn that a humane system of care will be costly and might involve treatment of some mentally ill persons against their will. Their support for judicious use of electroshock therapy will also stir controversy.

Isaac and Armat, a sociologist and a journalist, respectively, look retrospectively at the causes behind the deinstitutionalization of the mentally ill in the 1970s--a phenomena they abhor. Their solution to this monstrous error is to combine community services with active psychiatric treatment. Chapters expose how the "madness myth" started with anti-psychiatry proponents R.D. Laing and Thomas Szasz, ex-patient groups, and radical psychiatrists like Jeffrey Masson. The authors also lambast lawyers who eliminated involuntary commitment and sued hospitals and doctors for failure to treat. But perhaps the most riveting portion of this well-researched, disturbing, and lucid expository is the devastation wreaked on families by untreated relatives afflicted with mental illness. A good companion to Ann Braden Johnson's Out of Bedlam (LJ 9/1/90). Recommended for larger collections.

So often we forget the plight of the severely mentally ill, even though we are in the mental health profession. But then again, that probably is the problem. We work with those who are already mentally healthy, or at least almost. Like the world, we enjoy working with college students or high-functioning adults who are good conversationalists. The severely mentally ill are relegated to the streets.

Isaac and Armat hit us with our own neglect. The severely mentally ill compose between one-third and one-half of the homeless population. Why? The authors blame the anti-psychiatry movement, specifically R. D. Laing, Thomas Szasz, and the ex-patient movement. Government, and the rest of our culture, has been heavily influenced by their philosophy and political rhetoric, while ignoring the scientific evidence and humanitarian compassion. Irving Goffman and others joined forces to defame state hospitals, and then to defund them. Community mental health centers were to replace them, but as Torrey points out in his Nowhere to Go, the CMHs almost exclusively treat the non-severely mentally ill.

There is much rhetoric about preventing mental illness, but the trouble is that no one really knows how to prevent it, since science really hasn't determined its source. Instead, the federal and state governments pour their resources into programs designed to treat the severely mentally ill, but don't actually provide such treatment.

The stories of broken families, suicides, and people thrown out on the street break your heart. Families are caught between a rock and a hard place. Patients are allowed to refuse treatment even

though their minds are "ill," while family members watch their loved ones destroy themselves or be raped or killed on the street. "The effect was to deprive many of life in the name of liberty" (p. 127). If you work with the severely mentally ill, this book is a must. Historians of psychology will find their discussion of the roots of anti-psychiatry, the ex-patient movement, and the rise of the mental health bar highly informative. And clinical psychologists or psychiatrists will find their discussion about the effectiveness of psychosurgery, ECT, and psychoactive drugs not only informative and well-documented, but stimulating (electrifying? shocking?). In contrast to most of the psychological and psychiatric community, the authors endorse all three modes of treatment!

In their analysis, Isaac and Armat demonstrate that the science of clinical psychology is so clouded with rhetoric on all sides of every treatment issue, it is often difficult to discern the truth. Consequently, insurance companies and the helping professions become political conservatives, not wanting to make waves and wanting to appear socially and politically correct, rather than acting in the best interest of the severely mentally ill.

Isaac and Armat don't merely criticize the present system. Almost a quarter of their book outlines practical guidelines to help the severely mentally ill. They encourage voluntary community programs, and give several examples. Yet they point out the necessity of state hospitals and involuntary treatment backed up through the courts. In sum, if you are concerned about the homeless and you are in the mental health profession, this book is a definite must. Read more ›

For those of us who have lived these fifty years loving and caring for a family member with mental illness this story seems like reading our family diary. We remember doctors who used their own money to purchase medicine in the 1950's and we find it hard to forgive the people who made it difficult for us to care for our family member. This book will make you examine your ideas about who is the one with the mental illness and perhaps encourage you to learn more.

activists American Psychiatric Association anti-psychiatric asylum attorney behavior Birnbaum brain Bruce Ennis California called civil commitment clinical CMHCs community mental health community psychiatry conference dangerous David decision deinstitutionalization Dincin disabled disease Donaldson effect Electroconvulsive Therapy electroshock Ennis ex-patient movement Fairweather Fuller Torrey funds Goffman hearings Ibid individual informed consent insane institutions Interview involuntary involuntary commitment Journal of Psychiatry judges labeling limbic system living lobotomy Madness Network major Massachusetts medication ment mental health bar mental health center mental health system mental hospitals mental patient liberation Mentally 111 mentally ill NAMI National neuroleptics NIMH outpatient commitment person Peter Breggin political population problem Protection and Advocacy psychi psychiatrists psychosurgery psychotic radical refuse treatment responsibility right to refuse right to treatment says Scheff schizophrenia social staff streets Supreme Court surgery tardive dyskinesia Thomas Szasz tion told treated Washington York

The national enthusiasm for a civil rights approach to all social problems has produced a body of case law that has made it impossible to give medical help to anyone without their consent. A short walk through any community reveals the failure of these policies--sidewalks and parks have become open-air mental wards, but without treatment. Now the authors make a call to action.

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Gabbard's Treatments of Psychiatric Disorders, 4th Edition > Chapter 22. >The Mentally Ill Substance AbuserThe American Psychiatric Publishing Textbook of Substance Abuse Treatment, 4th Edition > Chapter 38. >Community InterventionThe American Psychiatric Publishing Textbook of Substance Abuse Treatment, 4th Edition > Chapter 33. >

The Madness of Deinstitutionalization : OUT OF BEDLAM; The Truth About Deinstitutionalization By Ann Braden Johnson (Basic Books: \$22.95; 296 pp.; 0-465-05427) : MADNESS IN THE STREETS; How Psychiatry and the Law Abandoned the Mentally Ill By Rael Jean Isaac and Virginia C. Armat e Free Press: \$24.95; 414 pp.; 0-02-915380-8)

The deinstitutionalization of the mentally ill that accelerated during the early years of the Reagan Administration--one of the more dramatic social experiments of 20th-Century America--is widely viewed as an abysmal failure. Many of the former denizens of state mental hospitals, liberated in theory but evicted in fact, have found their new homes either in jail or on the streets.

For example, Boston's public shelter, the Pine Street Inn, has become Massachusetts' largest "institution" for the mentally ill. Almost half of its 1,000 nightly residents suffer from schizophrenia or manic-depressive illness. The largest "institution" for the mentally ill in California is the Los Angeles County Jail, where an estimated 15% of its 24,000 inmates are diagnosed with these same diseases. Not since the 1820s have so many mentally ill individuals been forced to reside in public shelters (then called "almshouses") or jails in the United States. Well intentioned though it may have been, deinstitutionalization has been a bad trip down a rabbit hole.

"Out of Bedlam" and "Madness in the Streets" describe this bad trip and explain how we happened to embark on it. "Out of Bedlam" is the work of Ann Braden Johnson, a New York social worker who has spent many years working in the public sector with seriously mentally ill individuals. Johnson's tone is impressively warm and empathic: "Chronic mental patients are both more realistic about their condition and more graceful in failure than the rest of us, for their forced detachment from the normal world the rest of us inhabit has given them the wisdom that comes with tolerance of the inevitable."

Johnson also excels at showing how New York's disjointed, illogical health-care bureaucracy manages to ensnare many patients each day. Getting someone approved for Medicaid, she writes, is like "having a root canal, a mortgage closing or a tax audit." Her derision of administrators who never see patients is both palpable and accurate: "Administration can be a refuge, a chance to dictate and control without having to expose the limits of one's own skills and abilities." Her descriptions of the nursing-home industry, finally, are poignant reminders that some businesses have profited handsomely from deinstitutionalization, at the patient's expense.

The book's major shortcoming is Johnson's failure to consider what is wrong with the patients she cares for. Are they simply social misfits, as Thomas Szasz and R. D. Laing have contended, or do they suffer from brain maladies such as multiple sclerosis and Alzheimer's disease, as current neuropsychiatric research strongly suggests?

Studies of brain structure and function, using the latest methods in neurological research, have shown measurable differences in the brains of those suffering from schizophrenia and manic depressive illness. Physical defects in early brain development, viruses, genetic abnormalities and immune system dysfunction are now all suspected of playing a role in mental illness. Many mental health professionals such as Johnson, however, are still unfamiliar with this research.

This is, no doubt, why Johnson also fails to write any prescriptions for improving the system, a rather startling omission in a book that has spent 11 chapters detailing what is wrong. It is precisely professionals like Johnson, the ones who are spending time in hands-on clinical care, who should be making suggestions for improving the system, yet she merely says that "Although I

certainly have thoughts on the subject," she cannot share them with us. It's as if she has given us a tour of the land down the rabbit hole but then quietly disappeared before telling us how to get back to the surface.

"Madness in the Streets" picks up, in many ways, where "Out of Bedlam" leaves off. Authors Rael Jean Isaac, a sociologist, and Virginia Armat, a writer, manage to pinpoint many of the problems with the way we have been treating those who suffer from serious mental illnesses, and don't hesitate to suggest promising solutions.

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