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Thelma V. Owen

M. G. Stemmermann

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THELMA V. OWEN, M.D.

M. G. STEMMERMANN, M.D.

An experiment in public education

It is generally acknowledged that one of the chief obstacles preventing early treatment and complete rehabilitation of patients with emotional disorders is the stigma attached to the words *mental illness*. One of the reasons for this stigma will be erased when the recovered mental patient is willing to discuss his illness as freely as the surgical patient discusses his operation. Efforts by isolated patients, such as Clifford Beers, Jim Piersall and others, have probably been more helpful than the combined words of all professional workers. Yet it is difficult for the average citizen to identify himself with a public figure such as Mr. Piersall—sick or well. Recent public addresses by patients at Ancora State Hospital in New Jersey may very well be more convincing. It is the purpose of this report to describe an experiment which has had considerable influence on attitudes toward mental illness in our community.

The Owen Clinic Institute is a small

private hospital with in-patient and out-patient facilities. In order to provide the best possible psychiatric care for the average middle-class family, fees are kept at a minimum and whenever necessary installment payment plans are arranged. Approximately 50% of admissions have previously had state hospital care. Most patients are housewives, clerical workers or teachers. During the last weeks of hospitalization patients are encouraged to attend mental health, community welfare and other civic meetings in town, as well as concerts and lectures.

Over the years many ex-patients found mutual support following their hospital experience in visiting each other. Finally, they resolved to form a club in order to be helpful to other newly discharged patients,

Dr. Owen is psychiatric director and Dr. Stemmermann medical director of the Owen Clinic Institute in Huntington, W. Va.

as well as to aid families of newly admitted patients. In January 1950 the by-laws adopted included several types of membership. For full membership—source of officers and committee chairmen—a member must have been a mental patient judged “recovered” by the psychiatric director of the institute or a close relative of the same patient. (Consultation service to decide “recovery” status is the psychiatrist’s only connection with the club.) Full members, both recovered patient and relative, must be willing to identify themselves by full names in connection with any of the club’s public service projects or publicity. Since 1952 every full member has appeared in the role of an ex-mental patient or family member on at least one radio program. Many have also appeared on television. Several are mental health chairmen of their local and county Parent-Teacher Associations.

In the spring of 1956 the county mental health association held a public meeting with a panel of professional people (social worker, minister, physician) who discussed mental health generally and the community’s need for a mental health clinic. A member of the ex-patient’s club was asked to serve on the panel to speak for the average citizen and his mental health problems. Discussion by all panel members was interesting and informative but the ex-patient stole the show with the story of her illness, hospitalization and readjustment in the community. Her statements, forthright and knowledgeable, stimulated a prolonged question and answer period.

Following the meeting an officer of the mental health association suggested that if one ex-patient contributed so much to a panel, a complete panel of ex-patients might be even more influential. The club agreed with the suggestion and prepared to send a panel to any group requesting a mental health program. A panel usually consists

of two ex-patients, each of whom has had a different type of illness, and a relative to describe the impact of the illness on the family unit. The moderator who introduces the panel speakers is a lay member of the institute’s board of directors or the local mental health association board. During the last year 12 panel programs have been given to church circles, women’s clubs, men’s service clubs and county mental health associations.

The following quotations summarize the introductory remarks of a few of the panelists. Speakers do not read their statement but have put their substance in writing for this report. A question period follows the prepared remarks. Unless addressed to a specific speaker the moderator calls on whichever panelist he believes can best answer each question. Full names are used by the panels, in accord with the club policy.

One former patient, 36 years of age, was never gainfully employed until after discharge four years ago. Now she is working as a hospital housekeeper and is taking correspondence school courses. She was hospitalized 8 months for schizophrenia. She tells audiences:

“September 1952, a red-letter day in my life—I walked into a psychiatrist’s office for the first time, referred by my family doctor. The psychiatrist was very kind. She verified what the medical doctor had told me—I was mentally ill and I would need weekly office consultations.

“During the next four months I visited her once each week, meanwhile trying to care for my three children and take part in community life. I planned to return to school in January 1953, but for financial reasons I could not return. This was the straw that broke the camel’s back. I had a complete schizophrenic breakdown. I do

not remember all details of what I am now going to tell you.

"I had an appointment with Dr. Owen. I did not keep this appointment. She said I called and told her I was too sick to come. Later I went to a justice of the peace, a man I thought to be my friend, told him I was crazy, and asked him to take me to Owen Clinic, 100 miles away. He locked me in a cell, called the state police and they took me to the county jail. There I was locked in with drunks and prostitutes, crying, walking the floor, begging them to let me out and take me to Owen Clinic or call Dr. Owen, my psychiatrist. I was granted neither request.

"I was examined by medical doctors who were not qualified for this, declared insane by the court and committed to a state hospital. My first comment on entering the institution was, 'This is not a hospital; this is just another jail.'

"During the next two days I was given a few electric shock treatments but never saw a psychiatrist. I spent the time in my room alone in bed. Meanwhile all this time Dr. Owen had been trying to locate me. One day she walked into my room at the institution and said 'hello.' I looked at her and thought: 'This is not she; it's just another hallucination.' But it was true she had found me at last, her lost sheep. She came back next day, gathered me up and took me to the 'fold,' Owen Clinic.

"There I received adequate treatment along with the tender loving care that every mental patient needs."

Two other panelists, both 53 years of age, are husband and wife. She was a clerical worker before three months' hospitalization for depressive reaction. After discharge two years ago she returned to her old job. Her husband, a salesman, was engaged to be married to her at the onset of her illness

and was treated in the out-patient department while she was hospitalized.

The husband: "All of you good people listening to me will leave this meeting with the thought, 'That will never happen to me or mine.' This is a perfectly normal reaction and I hope it is true. I thought that way too. But it happened to me.

"I wonder where you should start talking about a subject that is distasteful and shrugged off by most. Should I tell of my experience? Yes, I have been a mental patient. With me it lasted about four months. A short time, true, but to me a lifetime. Fortunately I received early treatment, which made the illness shorter; we know the sooner treatment is started the sooner the patient recovers. My treatment was known as out-patient. I was working the whole time and later when I had recovered sufficiently to talk to others about my illness, to my surprise my behavior at the time was noticed by no one.

"Someone will ask 'How did it happen to you?' I wish I could answer. Unconsciously, meaningless events in everyday life became great factors and were world-shaking in their happening. 'When did it happen?' I can only answer that in retrospect. I remember one day leaving town and driving about fifty miles. I say I remember. Actually, my only memory of the trip is getting into my car and nothing else until I crashed into a bridge, fortunately with no serious consequences.

"You have gone over the edge and have no realization of it. You forsake your family, your friends and have no one to talk to because you are convinced no one will understand and no one will help.

"You are mentally ill. My best advice and the hardest to follow is this: tell somebody about your troubles and worries—someone you have trust in—someone close to you in your family—your minister

—your doctor. What do I do now when a problem arises I cannot cope with? I go to my psychiatrist. But get your troubles outside of you; put them on the table where they can be seen and picked apart. Most of the time you will find they are only shadows.

“Capable psychiatrists, new drugs and treatments all point to case after case of complete cure. Keep remembering this: never forget the one who is ill needs your love and understanding more than ever. I know because I have had the experience.

“And to you who are perhaps wondering if I have forgotten Someone we can always turn to, I say go to God. He will never turn His back and will always answer your prayers. I know how He helped me and I am convinced saved my life.

“God grant it never happens to you who listen; but remember none of us is immune to heart disease or cancer and mental illness can strike any of us.”

The wife: “Have you ever had a gnawing anxiety that you couldn’t put your finger on? Just anxious for no apparent cause? Have you ever lain awake at night thinking you heard music? The same tune over and over and over? Or the voices of people in the apartment next to you or under you talking over and over and over in the same tone of voice, till you think you will have to get up and scream at them?”

“I had a home, but I leased it and moved into an apartment uptown. This was before I realized how sick I was. I thought I would be happier uptown close to my work, with no yard to tend. My sons had married and moved away. That didn’t bother me especially, because I had prepared myself for it, or thought I had. For a time I was fairly satisfied in the apartment and then the walls began to close in on me. I had no neighbors, as I had when I lived in my home. When I went in and closed the

door I was completely alone. No one to talk to—just four walls. I became so distraught that I was afraid to go to the fire escape to empty the garbage into the incinerator for fear I would jump off. Not afraid to die, for I felt that I would really welcome death to the life I was living—but afraid if I did jump I would only be crippled and become a burden to my family. I had aches and pains all over my body. The doctors I went to told me I had arthritis and they gave me shots and pills for that. I am not criticizing the doctors. They are all good men—but they just didn’t go deep enough to find the real cause of my distress.

“Finally, I became so ill and tired that I went into a clinic for two weeks’ rest, and at last I had found a doctor who understood. While there he gave me insulin shock treatment and I came home feeling well. But it didn’t last. I was to report back to him at the end of a week. Within that week I had regressed to my old condition of anxiety and fear. The night before I was to report back to him, I put the man I loved out of my apartment with the sentence that he was not to come back—ever. I was beside myself.

“I went to the doctor the next day for my check-up and he saw immediately my condition. He said, ‘My advice to you is to see Dr. Owen and to go into her clinic for treatment.’ Like most people I was stunned. I said, ‘But that is a mental hospital!’ Even though I knew in my heart that I was mentally ill, I hesitated to admit it. His answer was, ‘Either do what I say or you will end up in the state hospital against your will.’ I knew if I ever went to the state hospital it would be against my will, because I had been a visitor there and I knew the conditions. I went back to my apartment and brooded over the thought of being a mental patient anywhere.

"Then I ran away. I called a friend I knew I could trust and she took me to her home and kept me until I saw Dr. Owen and made arrangements to enter the clinic. No one but this friend knew where I was for some time. This is not a plug for the Owen Clinic, but I found a home away from home. I was given thiorazine to calm me down. I was kept busy every minute, attending classes in psychotherapy, English, occupational therapy, outside raking leaves and even sawing logs for the fireplace. I learned to live again without fear and without anxiety—and finally I married the man beside me and we are having a happy home life. True, I still have anxious, depressed moments at times, but my good Dr. Owen tells me this is to be expected. These times are becoming farther and farther apart. I am well and I am getting better."

A fourth panelist, 42 years of age, is the husband of another club member who was discharged after six months' hospitalization. He says to audiences:

"When my wife became ill, I found myself in a most difficult situation because I had no conception of mental illness. I saw the psychiatrist weekly in regard to my wife's progress but you do not grasp the reason or cause for mental illness in a short time.

"One of the difficulties I had was understanding the treatment used. As a rule, you think of sick people as needing rest and quiet, but for mentally sick people it is just the opposite. This was brought home to me when I found my wife hoeing in the garden, participating in all types of sports, taking courses in everything from handcrafts to current events.

"It is now 10 years since my wife was discharged. Prior to hospitalization she had never worked outside the home and in fact was too fearful to leave the house un-

escorted. She depended upon me for everything. This has all changed. It is the former mental patient who is now the stabilizing influence—the one our son and I depend upon. In addition, she works as secretary to the principal of our neighboring grade school. Formerly, doctors' bills kept us perpetually in debt. Now we own our home and next year we are sending our son to college.

"The mentally ill *can* get well. I've seen it happen."

Statistical evaluation of improvement in public attitudes because of the Owen Clinic Club and its panels is impossible. We know of two results, one discouraging, the other hopeful. It is frequently discouraging to club members to overhear or have it said directly: "But, of course, *you* were never very sick—like patients in the state hospital." It is hoped that the panelists will dispel this misconception.

The hopeful sign is the fact that with one exception no club member has been refused a job following discharge although they never hesitate to admit prior mental illness and usually give Dr. Owen's name as reference. The one exception is a girl who returned to her factory job, completed high school by correspondence courses and then applied for job training in a telephone company. The personnel manager, who knew her past history, hired her and after a probationary period approved her for full time employment. The medical staff, however, general practitioners working part-time, refused to approve her appointment because of "company policy." This ex-patient is now working as a secretary in an automobile agency.

This case may be an exception. If it is not, one may conclude that the Owen Clinic Club has been less successful in changing attitudes of the general practitioner than in influencing attitudes of the general public.

