

Content Expert Worksheet #1

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Group 1: History of Mental Health Nursing

1. Discuss Freud's theory- what are the key principles? According to Freud, personality develops during childhood and is shaped through a series of five psychosexual stages- psychosexual theory of development. Each psychosexual stage is directly related to a different physical center of pleasure. Freud believed that children are born with a libido – a sexual (pleasure) urge. There are a number of stages of childhood, during which the child seeks pleasure from a different 'object.'

- a. **oral**- starts from birth to one year old. Erogenous zone: mouth
- b. **anal**- one year to three years old. Erogenous zone: bowel and bladder control.
- c. **phallic**- from ages three to six. Boys and girls are becoming aware of their genital differences. Erogenous zone: genitals.
- d. **latent**- ages six up until puberty. Libido (sexual drive) is inactive during this stage.
- e. **genital**- starts at puberty and ends at death. This is when sexual interests start maturing.

Mental abnormality can occur if a stage is not completed successfully and the person becomes 'fixated' in a particular stage. This particular theory shows how adult personality is determined by childhood experiences.

Cherry, Kendra. (2019, Jul. 14). Freud's Psychosexual Stages of Development.
<https://www.verywellmind.com/freuds-stages-of-psychosexual-development-2795962>

2. Explain what occurred during the Community Mental Health Centers Act of 1963- what impact does this have on treatment for individuals with mental illness moving forward?

The Community Mental Health Centers Act of 1963 led to deinstitutionalization. A deliberate shift from institutional care in state hospitals to beginning community facilities. Community mental health centers served smaller geographic service area that provided less restrictive treatment located closer to individuals' homes, families, and friends. These centers provided emergency care, inpatient care, outpatient services, partial hospitalization, screening services, and education. This accomplished the release of individuals from long term stays in state institutions, the decrease in hospital admissions, and the development of community-based services as an alternative to hospital care. In addition, federal legislation was passed to provide an income for disabled persons. This allowed those with severe and persistent mental illnesses more independence financially and not to rely on family for money. States were able to spend less money on the care of the mentally ill than they had when they were located in state hospitals because the program was federally funded. Commitment laws were also changed in the early '70s making it more difficult to commit people for mental health treatment against their will. This further decreased the state hospital population and the amount of money spent.

Moving forward this has reduced the number of public hospital beds but the number of admissions to those beds have dramatically increased. Leading to the "revolving door" effect, those with mental illness may have a shorter hospital stay but they are admitted more frequently. The continuous flow of clients admitted and discharged quickly overwhelms hospital staff on psychiatric units. In some cities, ED visits have increased by 400-500%. Patients are often boarded or kept in the ED while waiting to see if the crisis deescalates or until an inpatient bed can be located or becomes available. Boarding of patients leads

to frustration of health care personnel, dissatisfaction with care for clients and their families, and some believe this increases the suicide risk. While the Act tried to address the problems it also created new problems that still need to be fixed and adjusted to accommodate the public need.

Community Mental Health Act. (2019). Retrieved from <https://www.thenationalcouncil.org/about/national-mental-health-association/overview/community-mental-health-act/>

Videbeck, S. L., & Miller, C. J. (2020). *Psychiatric-mental health nursing*. Philadelphia: Wolters Kluwer.

3. What is the historical significance of 1950?

The world as we know it would have been dramatically different had these events not have occurred in the year 1950. Events that have shaped America today, for example, the construction of the hydrogen bomb, the Korean war and many more. More important the use of the first antipsychotic drugs. According to Psych Central (2020) states “Antipsychotic medications have helped many patients with psychosis lead a more normal and fulfilling life by alleviating such symptoms as hallucinations, both visual and auditory, and paranoid thoughts” (Psych Central, 2020, para 4). There had been many adverse and side effects from taking these medications but mental health psychotic drugs have since improved its therapeutic effects on patients. The drug chlorpromazine is used to treat psychotic disorders such as schizophrenia or manic depression in adults (Chlorpromazine Uses, Side Effects & Warnings,2019).

Chlorpromazine Uses, Side Effects & Warnings. (2019). Retrieved from <https://www.drugs.com/mtm/chlorpromazine.html>

Psych Central. (2020). Antipsychotic Medications. *Psych Central*. Retrieved from <https://psychcentral.com/lib/antipsychotic-medications/>

4. What was the influence of Harry Stack Sullivan on psychiatric-mental health nursing? In other words, what is the major concept of his theory?

Harry Stack Sullivan was a psychoanalyst who valued the importance of interpersonal communication with his patient similar to the practice of Hildegard Peplau’s interpersonal relationship between nurses and patients. According to the journal article Penckofer et al (2011) state, “ He believed that mental disorders often resulted from inadequate communication. Sullivan thought that when people interact, they share an interpersonal field rather than act as sole entities”(Peckofer et al, 2011). This brought upon change to the way we view treatment for patients with mental health challenges this new technique is called therapeutic milieu. This modality has become a prevalent psychiatric setting “therapeutic milieu is more than an environment; it is a healing culture, rich in therapeutic interpersonal relationships and co-operative attentiveness to patients” (“The Therapeutic Milieu,” n.d., para 1). The overall concept is that developing interpersonal relationships and communications with patients will decrease anxiety and other psychological behaviors once introduced to a new environment of self-expression.

The Therapeutic Milieu. (n.d.). Retrieved from https://www.carefulnursing.ie/go/overview/professional_practice_model/therapeutic_milieu

Penckofer, S., Byrn, M., Mumby, P., & Ferrans, C. E. (2011). Improving subject recruitment, retention, and participation in research through Peplau's theory of interpersonal relations. *Nursing science quarterly*, 24(2), 146–151. <https://doi.org/10.1177/0894318411399454>

NCLEX question:

Hildegard Peplau is best known for her writing about which of the following?

She conducted the **six roles** for nurses as follows; Stanger, resources, teaching, counseling, surrogate and leadership.

- a. Community-Based Care
- b. Therapeutic Nurse-Patient Relationship**
- c. Psychopharmacology
- d. Humane Treatment