

Mental Institution - Madness or Method?

By Joanne Lee

AUTHOR BIO

Joanne Lee is a junior at Naperville Central High School, where she takes a strong interest in social science, psychology, and public policy. She has spent the past three years volunteering with programs that support the siblings of disabled children, an experience that sparked her passion for mental health advocacy. In addition to academic writing, Joanne is involved in the student council, lacrosse, and growing awareness of helping siblings of disabled children. This paper aims to raise awareness about overlooked issues in mental health policy.

ABSTRACT

This paper argues that large mental institutions in the United States should not be abandoned but improved and better funded. It explores how past efforts to shut down these facilities (known as deinstitutionalization) led to serious problems, including homelessness, incarceration, and a lack of proper mental health care. While some people worry about issues like patient rights, safety, or poor treatment in these facilities, this paper explains why those concerns, though valid, do not outweigh the need for long-term care for people with severe mental illness. Using real-life stories and expert opinions, the paper shows how failing to support these institutions can lead to increased crime and public safety risks. It calls for rethinking the way society views mental institutions. They should be seen as a necessary resource rather than a system that invokes fear and doubt. With the right funding and governance, these large mental institutions can protect both individuals and communities.

Keywords: *mental institutions, deinstitutionalization, psychiatric hospitals, patient rights, mental health care, public policy, social cost, mental health treatment*

DEINSTITUTIONALIZATION AND ITS IMPACT

For decades, large mental institutions received the title of insane asylums. They were seen as horrific places where patients were locked away from society and subjected to lobotomies, electroshock therapy, and inhumane conditions. Some people were institutionalized for simply being "different,"... But does that mean society should abandon them entirely? Just like medicine has evolved, so have psychiatric facilities and our understanding of mental illness. As concerns about institutional abuse grew, a new approach emerged.

In the 1950s, the U.S. began a movement called "deinstitutionalization" in hopes of closing large psychiatric hospitals and shifting mental health care towards community-based treatment. This movement gained momentum throughout the 20th century, especially with the Community Mental Health Act of 1963 implemented by President John F. Kennedy and Medicaid restrictions that prevented federal funding from being put into psychiatric facilities with more than 16 beds. The idea was simple- provide people with the care they need while avoiding the horrors of neglect. Unfortunately, this was not the reality. While shutting down large mental institutions was successful, providing long-term community-based treatment was not as simple which left many mentally ill individuals homeless or incarcerated. The role of mental institutions in the United States needs to be reconsidered; these institutions should be seen as a crucial resource for long-term care rather than dismissed as outdated or oppressive. Therefore, while large mental institutions have received criticism in the past, they are essential for protecting both individuals and society as a whole.

REALITIES INSIDE INSTITUTIONS

One of the most persistent criticisms of large mental institutions centers around the concern of the violation of constitutional rights. Advocates for those with mental health

problems argue that patients are held at facilities longer than necessary or against their own will, denying their autonomy and delaying their reintegration into society. The state of Washington recently had issues with the release and management of their mentally ill patients who stayed at the large, public Western State Hospital consisting of 714 beds. Kimberly Mosolf, an attorney with Disability Rights Washington, sued the state's large inpatient facilities for "violating people's constitutional rights by not discharging them from the hospital in a timely fashion" (Hirschauer, 2023). This lawsuit highlights the deep-rooted fear that even today's institutions could unintentionally become places of prolonged isolation rather than recovery, which is why many people remain cautious about mental institutions. Advocates like Mosolf argue that the potential for misuse is built into the structure of these facilities with the rules that they have in place for their patients, often not considering their personal needs but more so the system's needs. This issue is something that patients have faced as their reality.

Janna Herron (2023), writer for the National Alliance on Mental Illness, shares her personal experience at a large mental institution. Herron felt that she needed help, so she went to check herself in. When she felt that she no longer wanted to be there as it was not helping her, she was forced to stay due to the hospital's policy. A doctor told Herron that if she didn't stay, he would take it to court. Some argue that experiences like these can violate the 14th Amendment, which is the Due Process Clause, where individuals are deprived of their liberty without legal justification. While the intention behind policies like these might be protective measures to ensure the well-being of patients before release, critics assert that they ultimately strip away personal freedom. Patients like Herron enter institutions voluntarily, seeking healing, but often find their rights disregarded once inside (Herron, 2023).

In addition to concerns about patient autonomy, some raise concerns about the safety and conditions faced by the staff working in

these institutions. Working with those with critical mental health issues will always come with unprecedented challenges. However, it can appear as though it is more severe in these larger facilities as they often become overcrowded and understaffed, overworking their nurses with a seemingly unbalanced ratio of employees to patients. A study conducted by Nanja Schlup examined the prevalence and severity of violence against nurses in Swiss psychiatric hospitals. The researchers found that many nurses had experienced severe physical attacks, leading to broken bones, deep wounds, and internal injuries. Others reported being victims of sexual assault, including non-consensual intercourse and rape, both of which typically required medical treatment (Schlup et al., 2021). These results could be applied to the United States as mental illness is a concern in both countries and there is a history of unsafe working conditions in large mental institutions.

Carmen Paun (2024) writes in *Politico*, a credible and influential source in political journalism, that "Virginia announced and quickly reversed a decision to close five of the state's eight psychiatric hospitals to new admissions due to overcrowding and understaffing," showing that this issue is prevalent in not only Switzerland but also the United States. This supports the idea that overcrowding and understaffing are not isolated incidents but widespread experiences that significantly impact the safety of nurses. Nurses find themselves more vulnerable to violent incidents when they cannot provide the proper attention and monitoring each patient requires, creating inhumane, long-term consequences for these employees. As a result, some people feel that large mental institutions unintentionally place their employees in harm's way, making these jobs less appealing and potentially unsafe.

TREATMENT GAPS

Beyond concerns about safety, some question the effectiveness of large mental institutions in treating mental illness. Herron shares that her treatment plan focused on helping her establish routines and habits, and every time

she went to the mental hospital, she felt that she was getting better and getting help. However, she proceeds to share that the visit that she is recounting was her fourth time being there. Herron (2023) explains, "It was the hospital's way of teaching us that a routine would play a role in curing depression and making life so much easier. It's easy to believe them until you find yourself right back in the same psych hospital where you began." Her story reflects the cycle that those with mental issues often fall into if they are unable to fully recover. Some may believe that going to a large facility such as the one that Herron went to can limit the effectiveness of treatment as well as recovery because of the lack of attention or care given to the patients. In hopes of managing many patients at once, many feel that mental institutions often adopt a "one size fits all" approach that may temporarily stabilize patients without addressing the deeper causes behind their conditions, leading them to repeatedly return as their root problems have not been resolved. Critics could take this argument a step further by explaining that, on occasion, mental health conditions will get even worse after leaving inpatient treatment, leading them to violent or severe crimes.

Hirschauer (2023) explains in *City Journal* that "New York has learned that discharging civil patients to community-based hospitals, or out of institutions entirely, can lead some to decompensate—a few, like accused New York subway murderer Martial Simon." Simon was a man who was released from a large mental institution and ended up pushing an innocent woman, Michelle Go, in front of a subway train. He had received treatment for many years, yet when he got out, he wasn't able to live a normal life; he wasn't able to recover. In fact, he only got worse, which leads some to question: What help did the treatments he received do? Critics observe a pattern in which when these patients are actually in the facilities receiving treatment, they seem to feel as though it is helping. However, when these patients try to readjust to the world, they struggle as the treatments practiced in hospitals don't necessarily align with adapting to the real world.

While these opposing arguments raise valid concerns, they ultimately overlook the greater good of society. Mental illness is often a significant factor in violence. People with mental disorders such as schizophrenia or bipolar tend to have violent or impulsive tendencies while being unaware of the gravity of their own actions, which can be detrimental to the innocent people around them. David Oshinsky (2023) writes in the *Wall Street Journal* that there were three incidents in early 2022 in different cities, all involving innocent people getting killed, "All three assaults, random and unprovoked, were committed by unsheltered homeless men with violent pasts and long histories of mental illness." (Oshinsky, 2023). These incidents illustrate exactly why society cannot afford to abandon large psychiatric facilities. If proper facilities had been put into place, these tragedies may have been prevented. Large mental institutions offer a controlled environment where people who show signs of psychosis or psychotic disorders would be able to get the refuge and intensive help that they need. According to Figure 1 (Jones, 2024), in 74 cases out of a total of 151 reported mass shootings in the United States since 1982, the shooter displayed prior signs of mental health problems. The impact of a mental disorder is something that cannot be ignored. A majority of the perpetrators of these heinous, large crimes are those suffering from mental health problems, causing them to act recklessly.

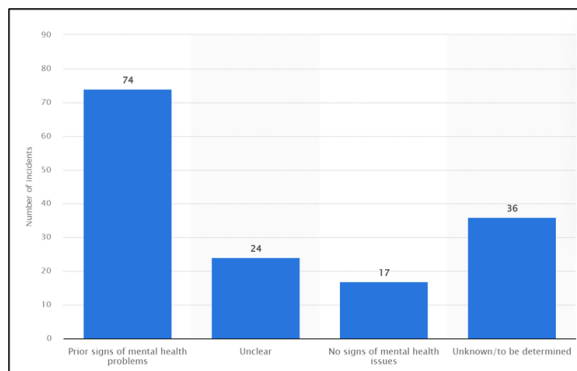


Figure 1 U.S. Mass Shootings 1982-2024

When individuals with severe mental health conditions do not receive the treatment

they need, the consequences can extend far beyond themselves, putting innocent people at risk, such as the victims of mass shootings. Those with the power to eliminate large mental institutions have already considered the opposing viewpoints, which initially led them to deinstitutionalization. However, the consequences of this can be reflected in Hirschauer's report, which states that "New York cut more than 300 beds at its state hospitals between 2016 and 2021. In the past few years, the state has seen several high-profile incidents involving people with untreated psychosis variously injuring and killing strangers." Although there may not be a direct cause and effect, there is a strong correlation between the number of beds available at mental institutions and untreated mental disorders leading to crime. When resources and institutional support decline, people with severe mental illnesses miss out on the help they need, and they are left to deal with their struggles alone. This not only puts them in danger but also impacts their communities in devastating ways. People who are suffering from mental health issues and exhibiting these levels of violence need to be isolated from others in order to ensure the protection of society.

There is also a need for large mental institutions, as some people require intensive care. In some cases, a disorder can be treated through therapy or outpatient treatment plans, but sometimes, the illness goes deeper than that, where they are experiencing high levels of distress, dysfunction, and deviant behavior. This not only affects the individual who is living with the mental disorder but also those around them. Senator Bill Cassidy questions those against inpatient care, saying, "The people who were so opposed to this because they still want to do it in an outpatient [facility], you wonder if they've ever actually lived with somebody who is seriously psychotic" (Paun, 2024). Being around someone who struggles with a mental disorder is difficult, and there is no way for an average citizen to effectively deal with the challenges that arise, whether it is violent or even just the burden of constantly having to take care of

someone while balancing the struggles of everyday life.

Oshinsky (2023) also notes that many of his psychiatric colleagues had become fixated on "guarding the patient's civil liberties... that they had lost sight of the patient's illness... What purpose was served by giving people who couldn't take care of themselves the freedom to live as they wished?" These people are not truly living their lives until they get the help that they need. They are living in a brain that they cannot control, a brain that is not their own. For these patients to live their lives to the fullest potential, they need the care that a large mental institution can provide. These facilities offer an environment where patients can receive the round-the-clock support they require while also being closely monitored by trained professionals who can address their needs more effectively than an outpatient facility or unsupervised living situation ever could.

PRISONS AS MODERN ASYLUMS

The heavy correlation of crime and mental health has led to prisons becoming the new mental institution. Many people who are imprisoned should not be in jail; they should be getting help rather than being punished for the illness that they have. As Bryan Stevenson (2014) writes in *Just Mercy*, not taking mental health issues into consideration in the legal system is the same as "saying to someone who has lost his legs, 'you must climb these stairs with no assistance, and if you don't, you're just lazy'" (Stevenson 2014). Stevenson's comparison emphasizes how unreasonable and unjust it is to punish people for conditions beyond their control. The issue goes further than just having mentally ill people imprisoned. Felicia Mulholland writes in the *Touro Law Review* that "because of the lack of treatment and the ability to properly supervise this population of inmates, these individuals are dying by their own hands at an alarming rate." Those who need professional mental health treatment are not getting that, and therefore, they are committing suicide as a result of their worsening mental conditions, which is extremely dehumanizing. If someone is showing

clear signs of needing help and the government is denying them their right to get help, it violates the Due Process Clause of the 5th and 14th Amendments for protecting prisoner rights (Mulholland, 2024). Not helping these individuals directly contradicts a fundamental constitutional right, highlighting a severe flaw in the way the criminal justice system treats those who are mentally ill. Because of this, large mental institutions are necessary not only to provide specialized care for individuals but also to ensure that society is fairer and more compassionate to those most vulnerable.

If these institutions were properly utilized, fewer mentally ill individuals would end up in prisons, and more would receive the treatment they rightfully deserve. Local law enforcement has recognized this problem as well, with Hirschauer (2023) noting that they "want psychiatric patients out of its jails and placed at the state hospitals." Those who see the firsthand impacts of mental illness in prisons understand the importance of psychiatric facilities in addressing these issues and the need for large mental institutions as there are so many people who need help; these individuals only ended up in jail because there wasn't enough space at the smaller community-based treatment centers. Yes, large mental institutions have crowded living conditions, and yes, they can be overwhelming, but that is no different than being in jails. Jails are just as violent and chaotic, with people being mistreated by supervisors in neglectful ways. The only difference is that jails have supervisors, and large mental institutions have nurses and trained professionals capable of providing the necessary care to prevent further harm. The inmates found in prisons are there for different reasons. Some are there with the true knowledge of their actions, while those who suffer from mental illness are there because of their inability to control their thoughts. These two groups should receive different consequences.

THE NEXT STEP

There is a significant social cost when there is a lack of treatment available for those

with mental illness. The needs of individuals with mental health conditions have become more complex over time, and the systems in place to address them must evolve with it. For the betterment of society, public funding for large mental institutions should be increased to attract the right medical professionals and staff members so that these institutions can operate properly, even at larger scales. The right amount of money and governance will improve the public's perception of large mental institutions. Therefore, it is important that the government recognizes the value of investing in these facilities. The social cost of not offering these facilities is much bigger than the monetary cost needed to safely run them. So, in conclusion, although large mental institutions have received criticism in the past, they should be utilized to ensure the protection of mentally ill individuals and society as a whole. As the issue of mental health grows, the solution is not to abandon these institutions but rather to focus on reforming them so that they are able to serve their intended purpose of healing. The stigma around mental health has improved along with the knowledge of psychiatric treatment, so it is the right time to take action.

REFERENCES

Herron, J. (2023). What no one told me about being in a psych hospital. *National Alliance on Mental Illness*.
<https://www.nami.org/advocate/what-no-one-told-me-about-being-in-a-psych-hospital/>

Hirschauer, J. (2023). Washington's mental-health experiment. *City Journal*.
<https://www.city-journal.org/article/washingtons-mental-health-experiment>

Mother Jones. (2024). U.S. mass shootings, 1982–2024: Data from Mother Jones' investigation. *Statista*.
<https://www.statista.com/statistics/811557/us-mass-shootings-by-prior-signs-of-shooter-s-mental-health-issues/>

Mulholland, F. (2024). Mental health in prison: The unintended but catastrophic effects of

deinstitutionalization. *Touro Law Review*, 39(1), 221–250.

<https://digitalcommons.tourolaw.edu/lawreview/vol39/iss1/7>

Oshinsky, D. (2023). It's time to bring back asylums. *The Wall Street Journal*.
<https://www.wsj.com/articles/its-time-to-bring-back-the-asylum-ec01fb2>

Paun, C. (2024). Mental hospitals warehoused the sick. Congress wants to let them try again. *Politico*.
<https://www.politico.com/news/2024/01/01/mental-hospitals-drug-users-congress-00132671>

Schlup, N., Buser, S., Berset, L., & De Geest, S. (2021). Prevalence and severity of verbal, physical, and sexual inpatient violence against nurses in Swiss psychiatric hospitals and associated nurse-related characteristics. *International Journal of Mental Health Nursing*, 30(6), 1550–1563.
<https://doi.org/10.1111/inm.12905>

Stevenson, B. (2014). *Just mercy: A story of justice and redemption*. Spiegel & Grau.