A Brief History of Psychotherapy

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Abstract
This paper provides an overview of the historical development of psychotherapy, from ancient religious beliefs about demon possession causing mental illness to modern concepts of brain-based mental functioning. The evolution of psychotherapy is described, from psychoanalysis to the medical model which is dominant today. Freud’s “talking cure” has changed greatly since his time, and there are many competing theories, but psychotherapy is still fundamentally a talking cure in the sense it consists of therapeutic conversation in the context of a helping relationship.

It seems that as long as humans have lived in groups, there have been social norms for human behavior. There have always been certain people who behaved oddly enough to be considered "mad" or "insane," which means mentally unsound. The Greek word "psyche" is defined as mind or soul (interchangeably), and the word "psychiatry" means healing of the soul/mind. Apparently, the concept of the soul resulted from people's reluctance to consider death the end of their existence. Although today there is no scientific evidence for the existence of a soul separate from the body, surveys suggest that the majority of Americans believe in it nonetheless.

The hypothetical soul or spirit is thought to be invisible and inhabit us while we are alive, and then to survive the death of the body. Belief in an eternal soul may protect people from having to confront the prospect of death and nonexistence. Throughout history, some people have found comfort in beliefs about deities, souls, and eternal life, and this may explain why such beliefs are still so common today.

Ideas about the soul are intertwined with the idea of a self, which is what makes each individual unique. Modern psychologists focus on the self, the mind, and behavior rather than the soul. While the soul or spirit is a religious or philosophical concept, psychologists usually define the mind as the set of all the functions of the brain. The
mind has been called the “secular soul.” Today psychotherapy is viewed as the healing of the disordered mind and resulting maladaptive behavior through the use of words, in the context of a professional helping relationship. Psychotherapy is basically therapeutic conversation. Psychotherapists focus on the personhood of the client and the client’s mental and emotional functioning and behavior, and do not typically focus on the client’s religious or spiritual beliefs.

Traditionally, the study of the psyche (the soul/mind) was the domain of religious adepts and philosophers, and healing was done by shamans and priests. The Hebrew Bible (or Old Testament) (about 1000 B.C.) refers to "madness" (shigeon) and says the cause of madness was possession by evil spirits. There was thus an assumed dualism of body and soul/mind. David is said to have feigned madness to escape capture by his enemies (1 Samuel 21). Elsewhere it is written that "An evil spirit came upon Saul" and he tried to kill David (1 Samuel. 18:11), and later Saul committed suicide (1 Samuel 31). There is also the story of Hanna, who was unable to have a child. The description of Hannah's mood sounds like major depression, which later turned to mania, when she did conceive. Several of the Biblical prophets, such as Jeremiah and Ezekiel, might be diagnosed as schizophrenic today if they visited a mental health center and complained about hearing voices and seeing visions. However, in a culture where it was normal to think one heard the voice of God, to do so would be considered a religious experience rather than a hallucination. The New Testament contains a story of a wild man who lived in a cave who cried and cut himself with stones, who was thought to be possessed by demons, and was healed by Jesus, who exorcised the evil spirits (Mark 5: 1-11).

Of course, people in every culture around the world have developed their own ideas about the mind/body relationship and the causes of mental distress. In traditional Hinduism and Buddhism, mind and body were not conceptually separate. The mind/body was seen as mutable and impermanent. A hundred years before Hippocrates, the Hindu physician Sushruta said that mental illness was caused by strong emotions and passions. Thus, some Asian cultures take a monist approach to human nature, while most western cultures are dualist. Monists see the person as holistic being, while dualists see the person as a body and a soul (or a mind).
In the western world, the study of human aberrations entered the realm of medicine in Greece about 2,500 years ago. Plato (427-347 B.C.) described a dualistic theory of mind and matter as separate phenomena. Plato divided the soul/mind into rational and irrational parts. He said the rational soul was immortal, divine, and resided in the brain, while the irrational soul was located in the chest. The irrational, passionate soul was called thymos; the modern term dysthymia describes a person who is depressed (lacks passion). Plato recognized three kinds of madness: melancholia, mania, and depression; he said that madness results when the rational and irrational souls somehow become separated.

Plato's student, Aristotle (342-322 B.C.) believed that vapors emanated from the heart and condensed in the brain. Later these vapors were thought to cause nervous and especially hysterical states. The Stoics said that the philosopher uses healing words to help people who are perplexed by problems in living, and Seneca said that "philosophy is the sovereign remedy for sadness." In this regard the Stoics could be seen as the originators of how psychotherapy is practiced today; the psychotherapist uses healing words and wise philosophical ideas to help the client overcome mental and emotional distress.

Hippocrates (460-377 B.C.) was a physician, and was a contemporary of Plato. He stated that "from the brain arise our pleasures, joys, . . . sorrows, pain, grief, and tears. It is the same organ which makes us mad or delirious, . . . brings sleeplessness and aimless anxiety." He considered dreams the province of the soul. One treatment he suggested for melancholy was the drug hellebore, derived from the white lily. This is just one example of how the ancients used naturally occurring plants as drugs to treat mental illness.

The Greek philosopher Epicurus (342-270 B.C.) said the emotions may be rational or irrational, and said that medicine heals the sickness of bodies, while philosophy heals the suffering of the soul (or what we would call the mind today). Soul healing consisted of "moderate discourse" if possible (mild suggestions and arguments), and more direct remarks and injunctions if necessary. Asclepiades (first century A.D.) advocated the use of baths and soothing music as treatments for madness, as opposed to the then-common treatments of restraint in dungeons and bloodletting.
In the first century A.D. the religious and philosophical forces which had been dominant in shaping views of the mentally ill lost some influence to the field of medicine. However, the practice of medicine was in a very primitive state. Celsus, a Roman, recommended restraints, enemas, and induced vomiting to treat mental illness. Elsewhere in Europe treatments for madness included torture, starvation, and flogging. Since prehistory, dreams have been given great significance in some cultures. At the end of the first century A.D. Artemidorus compiled a book of 130 common dream symbols, which remained the only written textbook on dreams for 1900 years.

In the Middle Ages in Europe mental illness was blamed on the Devil, demonic possession, magic, and witchcraft. A common treatment was to touch a holy relic to the patient's head or to conduct an exorcism of the evil spirit. In the 14th century there was more emphasis on the distinction between the cure of souls and the cure of bodies. Petrarch (the "first humanist") said "the cure of the mind calls for the philosopher;" he said physicians should use "words, not herbs."

As recently as two hundred years ago, almost everyone in the world still thought mental disorders were caused by magic or possession by evil spirits. The insane were cared for by their relatives or their communities. In the 19th century "mad houses" were renamed "insane asylums." Insanity was considered an incurable illness, so patients were incarcerated for life. Many of these patients were suffering the neurological ravages of the last stage of syphilis.

Over time, and especially in America, concepts of individualism, personal responsibility, and rationality came to the fore. Insane people were considered personally defective, rather than possessed. Care of the mentally ill began to shift from families and churches to state institutions and large charities, which set up asylums. Physicians began to get jobs in the asylums. Typically asylums used "moral treatment" which consisted of a busy daily schedule of many activities: labor, education, exercise, socializing, entertainment, and religious instruction.

By 1844 the care of the insane had become the first organized medical specialty in America. In 1908 the book *A Mind that Found Itself* by Clifford Beers was published. Beers described his experience in a mental institution, and called for reform of the system. Professional organizations developed lists of mental disorders, which were really
social problems which they thought were due to mental illness: juvenile delinquency, prostitution, alcoholism, etc.

In the 1850s most state commitment laws allowed husbands to summarily commit their wives to asylums. Most asylum patients were chronically mentally ill, intellectually disabled, or senile, and stayed in the asylum for many years. By 1875 neurologists came to the fore, having learned to treat brain injuries during the Civil War. They realized that disease results from damage to specific body systems, and figured that damage to nerves leads to nervousness and mental illness. Some physicians thought that nervous problems resulted from the stresses and strains of modern civilization, while other attributed mental illness to spicy food, debauchery, masturbation, overwork, and excessive thinking.

When scientists showed that parts of the brain control specific functions, mental illness was attributed to disorders of "nerve force." Patients with diffuse symptoms (headache, fatigue, insomnia, depression, etc.) were diagnosed as neurasthenic (weakened nerve force). The cure was thought to be bed rest, massage, special diets, and exercise. In this way neurologists and nerve doctors got into the treatment of the mentally ill.

Psychoanalysis can be traced back to 1880, when Joseph Breuer treated a patient he called "Anna O." She coined the term "the talking cure" to describe her psychotherapy (she also called it "chimney sweeping"). Breuer called his method of using healing words "catharsis." Although Breuer soon abandoned the talking cure, thinking it too unscientific, one of his protégés, Sigmund Freud, decided to make it his life's work. Freud described psychoanalysis as both the science of the unconscious mind and as the medical treatment of mental disease.

Freud said that psychoanalytic treatment consisted of an interchange of words; it was a dialogue (a special kind of conversation) conceived as a treatment. He said that "words are the essential tool of mental treatment," but he speculated that eventually chemical substances might become available to directly influence mental functioning.

By the 1930s Freud's theories were very influential, and the majority of American psychiatrists embraced psychoanalysis. They defined psychotherapy as a medical activity and excluded non-medical practitioners. The prior practice of healing the mind with healing words was redefined as the medical treatment of mental illness.
Typically, psychoanalysis was a non-coercive, secular therapy for patients who were voluntary, affluent, and lived at home. Psychiatrists, on the other hand, usually worked in salaried positions in public mental institutions. They were paid by the state, and their patients were typically poor and involuntary. Szasz (1997) has disparaged the marriage of psychiatry and psychoanalysis as "a hopeless match; psychiatry acquired the worst features of psychoanalysis, its pseudo-explanations and vocabulary of stigmatizations; psychoanalysis acquired the worst features of psychiatry, disloyalty to the patient's self-defined interests and coercion." (p. 303)

In the 1930s and 1940s many physicians saw psychoanalysis as lacking a scientific basis, with little evidence of effectiveness, similar to metaphysics. But it was a functional approach, different from the practice of medicine, where the focus was on the body, and it opened the door for non-medical practitioners to treat mental disorders.

Eventually, Freud came to see psychoanalysis as fitting better in psychology than in medicine. He thought it was possible that a person could be perfectly fine physically but be mentally ill. In the 1930s psychology in America was dominated by two very different approaches: psychoanalysis and behaviorism.

Since Descartes, psychology had been a part of philosophy, but in the early 1900s the discipline of academic psychology developed to deal with questions about human behavior scientifically. Although there were only about 25 clinical psychologists in 1917, the profession grew rapidly, especially when World War 1 occurred and the government needed a way to test thousands of soldiers to assign them to specific tasks. A huge amount of data about mental functioning was collected, and by 1930 there were 800 clinical psychologists.

In 1922 the syphilis spirochete was isolated and a treatment was discovered, leading to one of only two Nobel Prizes ever granted in the field of psychology. Several types of shock therapy were tried for schizophrenia, including insulin, metrazol, and electric shock. Another doctor developed a new treatment, lobotomy, for which he received the other Nobel Prize granted in psychology; he discovered that destroying parts of the brain could alleviate psychiatric symptoms. This treatment was considered a high-prestige operation to have and was performed often in the 1940s and early 1950s.
More and more the cause of mental illness was thought to be related to the environment and socialization, rather than organic disease. In 1945 psychologists were first licensed to deliver primary care to the mentally ill. Due to World War II, the number of psychiatric specialists in the Armed Forces rose from 40 in 1940 to 2,440 in 1945. Based on psychological testing, a million potential draftees were rejected as mentally unfit. Another 850,000 men who did become soldiers were diagnosed with mental problems, and the awareness of the prevalence of mental problems grew.

American society saw a definite role for psychological assessment and treatment. Between 1945 and 1950 over two million students studied psychology in college, and the number of graduate programs grew from 20 to 150 in the same period. In 1946 the National Mental Health Act created the National Institute of Mental Health. Will and Karl Menninger established the Menninger Clinic, and psychoanalysis continued as a powerful force through the 1950s.

After World War II social norms changed, and more emphasis was placed on social mobility and the autonomy and dignity of the free individual. The definition of normal behavior gradually became less restrictive. Between 1945 and 1955 acceptance of mental health care came into the mainstream of the culture. There was a proliferation of ideas about health and illness, although there was little data about the effectiveness of various treatments. In the 1960s there were large numbers of practicing psychiatrists, psychologists, and social workers. By 1970 there were 20,000 psychiatrists and 10,000 psychologists doing outpatient psychotherapy.

With the rise of modern ideas about how the body and the brain work, medical practice focused on physical causes of illness, and religious and spiritual beliefs were seen as irrelevant. The medical model continued to define mental disorder as illness, rather than as a sign of the need for spiritual or mental work. Many medications have been developed which effectively reduce psychiatric symptoms (although they have side effects and may not cure the illness). In the psychological model, not all psychological disorders are thought to be due to brain or biochemical defects; relatively normal people can also benefit from psychotherapy. Today, clinical psychologists are more likely to work with patients with biologically-based disorders, while counseling psychologists
work with relatively normal people who have problems in living. At times everyone has problems in living, so they are not seen as mental illnesses.

At the time it developed, the medical model was a definite advance in the treatment of mental disorders. It largely replaced the earlier religious and spiritual concepts of mental disorders as caused by magic, witchcraft, or demonic possession. The weakness of the medical model is that if taken to an extreme, it would explain all dysfunctions or deviations from normal health as ultimately medical disorders resulting from disordered brain functioning.

While there does seem to be good evidence for the biological and biochemical causation of certain mental disorders, the evidence is much weaker for many other common psychological problems. Still, it is obvious that sensory awareness, mental and emotional functioning, and a sense of self are all dependent on a functioning brain. Without evidence for the existence of a soul or spirit in the religious or philosophical sense, modern scientific psychology has focused on the mental, emotional, and behavioral aspects of human existence. Without a functioning brain in a living body, there would be no mind and no behavior (and thus, no psychology).

Psychologists tend to focus on the personal, interpersonal, and environmental determinants of mental states and behavior, as opposed to the biological determinants. Szasz (1997) makes the point that if mental disorders are due to chemical disturbances, then treatment with only the "talking cure" is malpractice. However, although all mental and emotional states have biological correlates in the brain and nervous system, not all psychological problems are caused by biological or biochemical disturbances. Many psychological problems are caused by learned maladaptive patterns of thinking and feeling.

Mind and body interpenetrate each other, and our difficulty in thinking about ourselves as wholes rather than as a collection of parts appears to be a flaw in our mental functioning. Humans are whole beings, and reference to parts (such as mind and body) is artificial and not always helpful. Obviously, human personality and behavior have many causes and correlates, and eventually we may be able to describe human functioning from a monist, holistic perspective, without so much emphasis on subunits, such as the body and mind. Perhaps in another hundred years the professions of physician (healer of the
body) and psychologist (healer of the mind) will no longer be separated, and patients will be treated as whole human beings by practitioners known simply as healers.

Great progress has been made in how we think about what is wrong with people who are severely psychologically disturbed. We no longer think of them as immoral or evil or possessed by demons; instead we attribute their disturbance to a complex interaction of heredity, environmental history, personality style, and habitual ways of thinking and behaving. Instead of inhumane treatments like restraining people in dungeons and bloodletting, we now attempt to use treatments that have the most empirical validation, such as psychotropic medications and psychotherapy. Research continues in an effort to develop new treatments that are safe and effective.

A Chronology of the Development of Psychotherapy

10,000 BCE  Trephination (cranial surgery). Belief in magic and the supernatural. Early humans may have cut holes in the skulls of mentally ill people in an attempt to release evil spirits.

3,000 BCE  The Egyptians had several treatments for mental illness. Imhotep was the god of medicine. Treatments included religious rituals and incantations, music, dance, and incubation sleep (a hypnotic state induced by herbs).

2,000 BCE  Babylonia (now Iraq); Hammurabi, demonology, rituals, sorcerers, evil eye, priest's incantations; possibly the first deliberate use of suggestion for healing.

500 BCE to Year One CE  Among the Hebrews physicians were priests; God was said to afflict people with madness, e.g., Saul, King Nebuchadnezzar (lycanthropy); demonology. According to the New Testament Jesus conducted exorcisms and spiritual healing.

Persians (Iran): Zoroaster; demonology, spiritual healers; priests of the Magi.

Greeks: Homer wrote that the gods inflict madness on people. Aslepiades created the temple/spa for the treatment of the mentally ill, with baths, a gym, a library, gardens, and temples. He used snakes for shock therapy.
Hippocrates advocated for a naturalistic, materialistic approach to healing.

Galen was the father of modern medicine.

476 CE to 900 CE The Dark Ages in Europe (all the advances of the Greeks were lost). Return of belief in demonology and supernatural causes of mental illness.

1243 CE In England King Henry VIII established the first asylum, the Hospital of St. Mary of Bethlehem (Bedlam), which stayed open until 1945. He used treatments such as restraint, purging and bleeding. The hospital sold tickets to the public to observe the insane patients.

1486 CE The Malleus Maleficarum was published (the witch-hunters handbook). Hundreds of thousands of "witches" (many of whom were mentally ill) were executed in Europe.

1750 CE In England, William Tuke used tea party therapy and treated mad hatters, who became ill from chemicals used in making hats. In France, Pinel unchained the patients in asylums and began the moral therapy movement. In America, Benjamin Rush, "the father of American psychiatry," opened the first "humane" hospital for the insane; he used treatments such as bleeding, spinning, and the crib.

1775 Johann Gassner, a Catholic priest, was the most successful exorcist of the time. Franz Anton Mesmer watched Gassner and then began healing "possessed" people without exorcism. He believed in an energy he called "animal magnetism." At first he used magnets in healing, but then he just used his hands to channel the healing energy. Mesmer has been called "the first psychotherapist." He cured hysteria and psychosomatic disorders by suggestion within a therapeutic relationship. In 1784 a Royal Commission determined that there was no evidence for the existence of animal magnetism.

Puységur was a Mesmerist, but he discovered that when he mesmerized his patients they were very responsive to his suggestions, so he abandoned the use of magnets or animal magnetism and used what he called hypnosis (which others had called "nervous sleep" or "magnetic sleep"). Puységur discovered posthypnotic suggestion and demonstrated the existence of the unconscious. He said that Mesmer's passes (hand movements over patients) worked by hypnotic suggestion.
In Paris Jean-Martin Charcot became director of Salpetriere, the leading hospital in the world for the study and treatment of mental disorders. Charcot treated hysteria with hypnotic suggestion. Charcot said that hypnosis, hysteria, amnesia, and neurasthenia are simply different forms of a "universal neurosis," for which the treatment is psychotherapy. Charcot said that 1) dreams are key to understanding neurosis; 2) hysterical paralysis results from ideas the patient has about a certain (traumatic) situation, and 3) behind the dominating ideas are feelings about sex. Charcot believed that neurotic ideas and feelings about sex are at the root of neurosis.

Hypnosis was accepted as the foundational idea of the new field of neurology. Since hypnosis is simply a state of heightened suggestibility, it was theorized that maybe psychotherapy could utilize suggestion without hypnosis.

Charcot's protégé Pierre Janet further developed Charcot's ideas. Janet said that trauma causes the patient's consciousness to split; in hypnosis the patient can recall the trauma. This, when combined with a cathartic emotional release, can remove the neurotic symptoms. You need to access the unconscious mind to cure psychopathology. Janet recognized the power of ideas to determine the overall well-being of human beings. He developed the technique of having patients talk about their "subconscious fixed ideas" at random (later Freud called this “free association.”) Janet noticed the importance of the therapeutic relationship; eg., clients tend to idealize their therapist and share secrets and intense feelings (later Freud called this “transference”). Janet noticed that simply letting clients talk is often healing.

Dr. Joseph Breuer developed similar ideas during his treatment of Anna O. She narrated her hallucinations to Dr. Breuer while in a trance-like state. She called this self-hypnotic procedure the "talking cure" and "chimney sweeping." Breuer called it the "cathartic cure." While talking, Anna re-experienced her original trauma and then felt relief. Later Breuer and Freud wrote a famous case study on Anna O., which is considered the first scientific analysis of the psyche. They said that neurotic symptoms result from repressed memories of traumatic events, and the repressed emotions must be expressed in therapy for healing to occur. They
proposed that mesmerism, hypnotism, and all forms of faith healing work by emotional catharsis. Freud considered Anna's transference with Breuer the key to the birth of psychoanalysis. In other words, Freud felt that the relationship between the therapist and the patient is the most crucial aspect of therapy.

1865 Meanwhile, in America, Phineas P. Quimby mastered animal magnetism and “mental healing” and became the world's leading Mesmerist. By this time, the practice of Mesmerism appeared equivalent to what we would today call hypnotism. Quimby said that illness is caused by the patient's ideas or beliefs; he said faulty ideas cause nervousness. Quimby said "all sickness is in the mind" and "the truth is the cure." His goal was to overcome patients' self-defeating attitudes. His method was Mesmerism (mental healing) and talking to patients. Quimby's approach developed into the New Thought Movement, which emphasized self-help and positive thinking. One of Quimby's patients, Mary Baker Eddy, went in another direction and founded the religion of Christian Science that emphasized mental healing.

Bibliography