## **History of SPMI**

Severe and Persistent Mental Illness has been part of history for as long as there has been words to write about it. There is not much in terms of prehistoric information related to mental illness and it often is difficult to delineate reality from fantasy when it comes to cave drawings and other artifacts. However, one this is for sure and it is that severe and persistent mental health disorders are not a new phenomenon, but one that is only very recently beginning to be understood. The neuronal arrangements and evolution of what is now known by terms such as bipolar and schizophrenia have been in progress likely for the duration of history itself, prior to arrival of humans themselves.

More recently, as early as medieval times, illness of the mind has been recognized as problematic, with "mad" people and the "witches" becoming outcasts or being prosecuted. People with issues we now categorize as severe and persistent mental illness would be abused, casted out of society, and left to fend for themselves. Devoid of scientific basis, early hypotheses about these issues involved superstition and the supernatural. Much later, experimentation resulted in many lives taken with marginal benefits to advancement of science. Only a few hundred years ago, "madness" was a term used to describe the mentally ill and an incurable and dangerous condition. Those who were affected by it were to be avoided at all cost for the safety of others.

Lack of consistency in observation was problematic as well. Those who were rejected by their peers for their ideas or mannerisms would frequently be the subject of stigma and labels, sentencing them to a life of exile or even death. Going back far enough, scientific men and women like Copernicus were accused of blasphemy and madness. More recent than that, the infamous Salem Witch Trials which was the bloodiest witch hunt in North

American history is an homage to the profound impact of stigma. The likes of Martha Corey were known to be outspoken and opinionated women who were hung for being witches.

Eventually, the tides turned toward a more scientific basis for understanding mental health. Those with severe and intractable mental illnesses ended up in asylums not unlike prisons, left to die away from the rest of society. Much later, a more thorough understanding of the origins and nature of mental illness worked to partially destigmatize the mentally ill and a movement was started to deinstitutionalize. The initiation of this deinstitutionalization seems to have corresponded with the first psychotropic medications which signalled the arrival of a cure for mental health disorders. Around the same time, stronger ethical principles in western medicine pushed the concept of non-maleficence forward, sparking interest in rehabilitation of afflicted patients much later on. While a net improvement for humanity, the path was fraught with despair as for many years, those institutionalized in asylums who were "cured" of their insanity would go back only to be left on the streets. It has taken many years for rehabilitation to become an integrated part of the recovery process.

The present appears far more tolerant and understanding of SPMI and those afflicted by it. Recent years have seen advancement in integration of the mentally ill in the society and attempts at preserving the autonomy of patients as much as possible. Rehabilitation and recovery, a gradual return to normalcy, is now the mainstay of treatment for the mentally ill and more research than ever before supports this methodology as the best path forward. Rehabilitation and recovery have taken new forms over the years, with pharmaceutical treatment becomes one aspect of treatment rather than the sole cure. Care of patients in their home environment has taken the forefront of research as intensive care and assistance has shown improved outcomes. Such advancements then

have given rise to the understanding of the multifaceted issues patients have in the community, and so groups of people have come together to care for those in need.

Multidisciplinary treatment plans have now become the norm which involve many experts, each in their respective fields, joining hands to become the ultimate A-team.

The future is certainly brighter, but history continues. While current research along with its practical implications appears like the best way forward, it is far from it. Looking back at the timeline of how things have developed, it is not far-fetched to think we are only beginning to understand SPMI and its implications and there is long path forward. Thankfully, we have our ethical principles of autonomy, non-maleficence, beneficence, and justice to guide us through.