



Unlike a broken arm, which is obvious and requires immediate medical attention, mental health issues are not always immediately recognized, nor have there always been effective medical treatment. Three women who paved the way for more humane and effective treatments of those with mental illnesses and related issues were Dorothea Dix, Karen Horney, and Virginia Satir.

Dorothea Dix's life changed in March, 1841 when she was asked by a young Harvard divinity student to teach a Sunday school class for women at the East Cambridge (Massachusetts) jail. Among the drunkards, prostitutes and other criminals in the unheated building, she found a number of women whose only crime was their insanity. She was outraged that these women were being treated in such a manner. At a time when women did not yet speak in public, Dix brought

the matter before the local court then in session. Heat was provided for the women, renovations were made to the jail, and Dix had found her vocation.

There were a few mental institutions in the U.S. in the 1840s where humane treatment was provided for those with mental illnesses. However, particularly among the poor and uneducated (public education was not yet widespread nor mandatory), many mentally ill individuals were either vir-





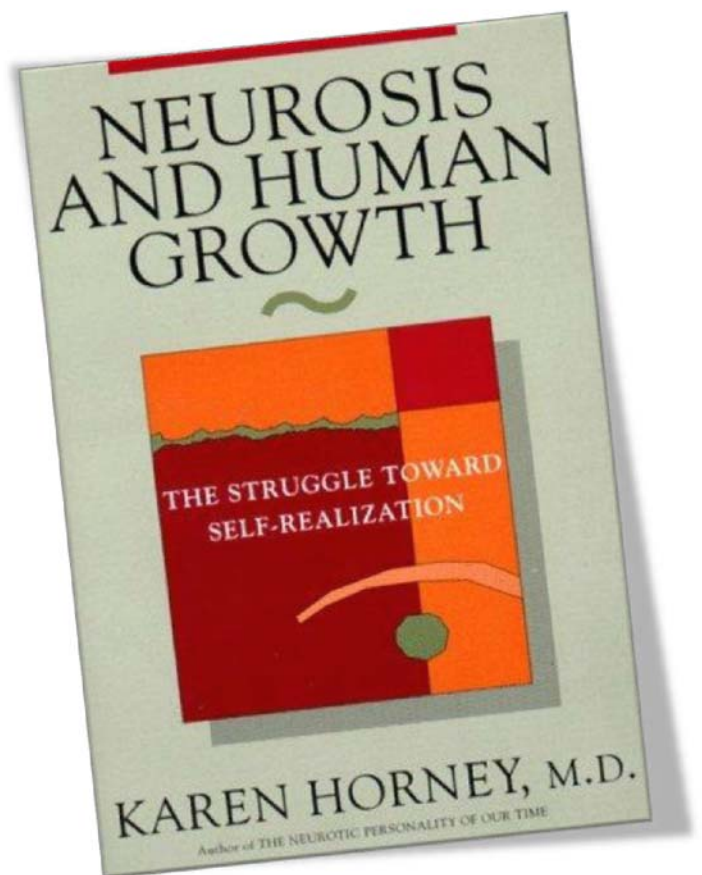
tually imprisoned by their families or in actual imprisonment under almost unspeakable conditions. Dix undertook an eighteen-month survey of every jail, almshouse, and house of correction in Massachusetts. Her report was provided to the Massachusetts legislature in 1843, whereupon the legislature appropriated funds to expand the state facilities so that the mentally ill could receive proper care and treatment.

Heartened by her success in Massachusetts, Dix investigated conditions for the mentally ill in Rhode Island and New York. As in Massachusetts, she was able to secure additional funds for better treatment of individuals with mental illnesses. In New Jersey, she was able to overcome bitter opposition leading to the establish-

ment of the state's first mental hospital in Trenton, New Jersey, which she referred to as her "first-born child". She moved onward to other states including Pennsylvania, Kentucky, Maryland, Ohio, Illinois, Mississippi, Alabama, Tennessee, and North Carolina. Many times, she remained in a state until appropriations for new facilities were forthcoming.

Her work was widely publicized and her name became a household word. When she began her work in 1843, there were thirteen mental hospitals in the United States. By 1880, there were 123. She played a direct role in the founding of thirty-two state mental hospitals; she helped lay the groundwork for advances in psychiatric diagnosis and treatment. Dix's contributions have been recognized by commemorating her on a U.S. postage stamp.

German-born psychiatrist and psychoanalyst **Karen Horney** directly benefited from all of the work that Dorothea Dix had done to advance the diagnosis and treatment of individuals with mental illnesses. Drawn to psychoanalysis as a treatment for her own depression, Horney had decided at age twelve to become a doctor – if she couldn't be beautiful, she would be



smart. Her doctoral thesis in 1915 addressed the question of whether mental symptoms were the result of underlying factors or traumatic causes.

In the 1920s and 1930s, Horney addressed the subjects of female psychology and sexuality in a series of papers. She rejected Freud's male-centric psychology and affirmed the special functions of womanhood – childbearing, nursing and motherhood – as positive and fulfilling. She suggested that men envied these functions – a condition that later writers would refer to as “womb-envy.”

Horney accepted a position at the Chicago Institute for Psychoanalysis in 1932 where she remained for two years before moving to New York. There she did work and published on the topics of neuroses and new ways of psychoanalysis. Her work is important as it emphasizes sociocultural factors in producing neurosis, and for developing new theories for psychoanalytic theory and therapy. Most of Horney's ideas have quietly entered the mainstream of psychology.



Like Karen Horney, **Virginia Satir** believed that sociocultural factors were important in treating mental health issues. Satir was one of the key figures in the development of family therapy (she is often referred to as the “pioneer of family therapy”). Satir began treating families in 1951 and established a training program for psychiatric residents at the Illinois State Psychiatric Institute in 1955. Satir gave lectures and led workshops in experiential family therapy across the country. She advanced the terms for describing family roles, such as “the rescuer” and “the placator.”

Satir's books *Peoplemaking* and *Conjoint Family Therapy* are two of the central texts of humanistic psychology. She developed the Satir Growth Model which is a comprehensive set of beliefs,

methods, tools, and experiential exercises that support positive change in individuals, family systems, organizations and communities. Although her thinking went against the scientific approach to family therapy at the time, today it is widely accepted.

We can be thankful that Dorothea Dix advocated for individuals with mental illness and that Karen Horney, Virginia Satir and others advanced theories of psychoanalysis and psychiatry. The truly amazing women on whose shoulders we stand made contributions in every area of endeavor. We are delighted to continue to bring these women to your attention.



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