

BEYOND DEINSTITUTIONALIZATION: THE FRAGMENTATION OF TEXAS'S  
MENTAL HEALTH REFORM MOVEMENT, 1945-1984

by

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A thesis submitted to the Graduate Council of  
Texas State University in partial fulfillment  
of the requirements for the degree of  
Master of Arts  
with a Major in History  
December 2015

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## **ACKNOWLEDGEMENTS**

I would like to acknowledge Dr. Jeffery Helgeson, Dr. Patricia Denton, and Dr. Mary Brennan for their help, guidance, and support throughout the entirety of this project. I would also like to thank those individuals at the Austin History Center, the Texas State Library and Archives Commission, The McGovern Historical Center, and Austin State Hospital for their generosity and professional advice that made the success of this thesis possible. Furthermore, I would like to acknowledge and thank my parents, Michael and Elizabeth Richardson, as well as my brothers, Michael and Robert, for their love, sacrifice, and steadfast confidence in me that remained constant throughout my studies. Finally, I must acknowledge the love, kindness, wisdom, and determination of my wife, Christina Starkey, who never let me give up and never stopped believing in me.

Thank you.

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## I. INTRODUCTION AND HISTORIOGRAPHY

### Introduction

The mental health system in the United States is in crisis; as states struggle to fund mental health programs, growing numbers of persons with mental illness have less access to mental health facilities and treatments. As a result, people with mental illness instead receive care in emergency rooms, in state penitentiaries, or go without care.<sup>1</sup> Local, state, and federal government officials—as well as non-profit organizations and charity groups—consistently express their genuine commitment to the needs of the estimated 43.7 million adult Americans diagnosed with mental illness.<sup>2</sup> But their efforts to enact mental healthcare reform remain limited and ineffective, at best. Calls for an overhaul of the mental health system focus on the staggering number of mentally ill persons in prisons, homeless persons with mental illness, and the increasing frequency of mass shootings like those that occurred at Virginia Tech University in 2007 and Sandy Hook Elementary School in 2012. Reformers have repeatedly cited the fragmentation of mental health services as the greatest obstacle to instituting effective policies.<sup>3</sup> Given this decentered system, professionals across the nation struggle to piece together services in an effort to create a more efficient system.

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<sup>1</sup> National Alliance on Mental Illness, *State Mental Health Cuts: A National Crisis*, 2011, 3-4, <http://www2.nami.org/ContentManagement/ContentDisplay.cfm?ContentFileID=126233> (accessed October 23, 2015)

<sup>2</sup> U.S. Department of Health and Human Services, *Results from the 2012 National Survey on Drug Use and Health: Mental Health Findings*, by Substance Abuse and Mental Health Services Administration, 2013, 10, <http://www.samhsa.gov/data/sites/default/files/NSDUHmhfr2013/NSDUHmhfr2013.pdf> (accessed October 19, 2015).

<sup>3</sup> U.S. Department of Health and Human Services, *Mental Health Services Provided Across State Government Agencies*, by The National Association of State Mental Health Program Directors Research Institute, 2009, 3, <https://store.samhsa.gov/shin/content/SMA09-4464/SMA09-4464.pdf> (accessed October 19, 2015).

The fragmented nature of the mental health system is rooted in the history of the community-based reform movement that began in the 1960s. Two generations ago, after years of broad commitment to the promise of psychiatry and deep anxiety about its limitations, reformers instituted a system of community-based mental healthcare. Reformers hoped that the new system of community-based treatments would provide more effective care to people, instead of the expensive, ineffective, and isolating care they saw being provided in state hospitals. For a time, the reform movement enjoyed a unified vision for mental health reform. By the 1970s, however, the movement had fragmented into distinct, but related efforts to deinstitutionalize patients and to protect patient rights.

The trajectory of reform and its fragmentation occurred in three stages. In the 1940s and early 1950s, reformers forged a common purpose around the need for more influence of psychological expertise and more effective mental health institutions. At its peak of influence, in the early 1960s, psychiatric care came under intense and sustained attack. Reformers persisted in the face of this resistance by pushing for community-based healthcare. Yet two drives—for deinstitutionalization and patient rights—undercut support from the government and the public and divided the previously unified reform movement in the 1970s and early 1980s. Reformers’ hopes for a more effective mental health system that focused on providing comprehensive services at the local level have been all but forgotten. Instead, the divided mental health reform movement led to a system that requires patients to overcome significant obstacles to get care. In the words of one 2009 Substance Abuse and Mental Health Services Administration (SAMHSA) report, patients need “a tremendous amount of perseverance...to navigate the maze from

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