Mental Health Problems: Concept, Historical Overview, and Healing Process

Chaitali Halder*

Ph.D. Research scholar, Department of Education, University of Calcutta,
Alipore, Kolkata 700027, India

Abstract

Worldwide, mental health problems appear to be more and more prevalent in individuals across all ages. The objective of this present study is to discuss the basic concepts and terminological differences of mental health, mental health problems, mental illness, and mental disorder. Moreover, the emergence of mental health problems and the associated treatment strategies from the ancient to the modern period have been addressed. This study further emphasizes references to significant voices across time and highlights how historical views gradually structured modern notions of mental health problems and their treatment procedures. To ensure the positive mental health and well-being of individuals, the support of the government, policymakers, and other stakeholders is also highly required.

Keywords: Mental health problems, mental illness, mental disorder, history, healing procedures

Introduction

Mental disorders make a substantial independent contribution to the burden of disease worldwide (Prince et. al., 2007). World Health Report (2001) demonstrated that mental and behavioural disorders are common, affecting more than 25% of all people at some time during their lives. They are also universal, affecting people across countries and societies, individuals of all ages, women and men, the rich and the poor, and those from urban and rural environments (WHO, 2001). An international study estimated that 970 million people worldwide had a mental health disorder in 2017, among whom around one in seven people had one or more mental disorders (Dattani et. al., 2021). WHO (2003) documented that 20% of adolescents may experience a mental health problem in any given year and more specifically, 50% of these problems are established by age 14 and 75% by age 24 (Kessler et. al., 2005) and this is a very crucial time when individuals were pacing through the educational arena by playing the submissive roles of students of schools, colleges, and universities. According to the report of the Indian Council of Medical Research (ICMR) survey, 12% - 13% of students in India have been recognized as sufferers from psychological, emotional, and behavioural conditions (Dittakavi, 2022). Henceforth, diagnosis of mental health problems at an earlier age and their proper treatment on a regular basis is strongly needed so that a better future for those

individuals can be provided. Thus, they become capable of serving the nation in broader perspectives. The objective of this present study is to present a comprehensive overview of mental health problems, a historical overview, and healing procedures.

Conceptual Understanding of the Key Terms in Mental Health

In a person's life, both mental health and mental health problems coexist simultaneously (Granlund, 2021). Every individual can feel, think, and act in ways that enhance their ability to enjoy life and deal with challenges. Just as physical health is vital at any age, positive mental health is also essential in life. According to the WHO (2005), mental health is a state of well-being in which individuals can understand their capabilities, manage day-to-day stress, perform effectively and productively, and contribute significantly to their community. When people experience significant disturbances in their mental functioning that hinder their regular thinking, feeling, or behaving, it can be termed as mental health problem(e.g., anxiety, depression). Bremberg and Dalman (2015) defined mental health problems as "a broad concept covering both less serious mental strain and more severe symptoms, fulfilling criteria for a diagnosable mental illness".

On the other hand, mental illness is seen as a severe and intensive type of mental health problem. So, it can be meant that all mental illnesses are mental health problems, but not all mental health problems can be termed as mental illnesses (e.g., schizophrenia). If the symptoms of mental illness or mental health problems become more severe and need clinical diagnosis and treatment, that can be called as Mental Disorder (e.g., Intellectual disability, Attention Deficit Hyperactivity Disorder (ADHD) (Citizens Advice Bureau, 2023).

In their conceptual analysis, Bremberg and Dalman (2015) proposed that mental health problems partly overlap with mental illness; sometimes mental health problems in childhood lead to having a mental illness in adulthood (Copeland et. al., 2013). On the other hand, mental illness, being a kind of severe form, is under mental health problems. Still, some particular mental disorders (Neurodevelopmental disorders) do not easily fall under mental health problems or mental illness (Granlund, 2021). This may be because of their basic origin, i.e., dysfunctions of motor, intellectual, or social functions during the developmental period (i.e., pre-natal, peri-natal, and post-natal phase) that are more or less permanent and cannot be cured appropriately, in comparison to mental health problems (Granlund, 2021). Since mental health problems are the initial stage, occurring in any individual's life, and gradually become more severe towards mental illness and then mental disorders by pushing the individuals to be diagnosed clinically, and also leads to the extent of death. Henceforth, the diagnosis of mental health problems at the primary level during childhood or adolescence is strongly needed.

Historical Overview of Mental Health Problems and Their Healing Process

An abundance of sources (primary and secondary, both) have demonstrated the existence of mental health problems throughout the past and continue to exist in the present. The historical trajectory of mental health problems can be viewed mainly from three perspectives, such as the Ancient Period (before the 1st century), the Medieval Period (6th to 15th century) (AD to 1500 AD), and the Modern Period (1500 AD to present). It has been found that, throughout the ages, each society has endeavoured to understand the phenomena of psychological problems and to

address and eliminate them through various methods. There have been radical changes in realizing the concept and treatment of mental health problems, and this may be due to the varying societal opinions and knowledge.

Figure 1

Hierarchical Steps of Mental Health Problems, Mental Illness, and Mental Disorders
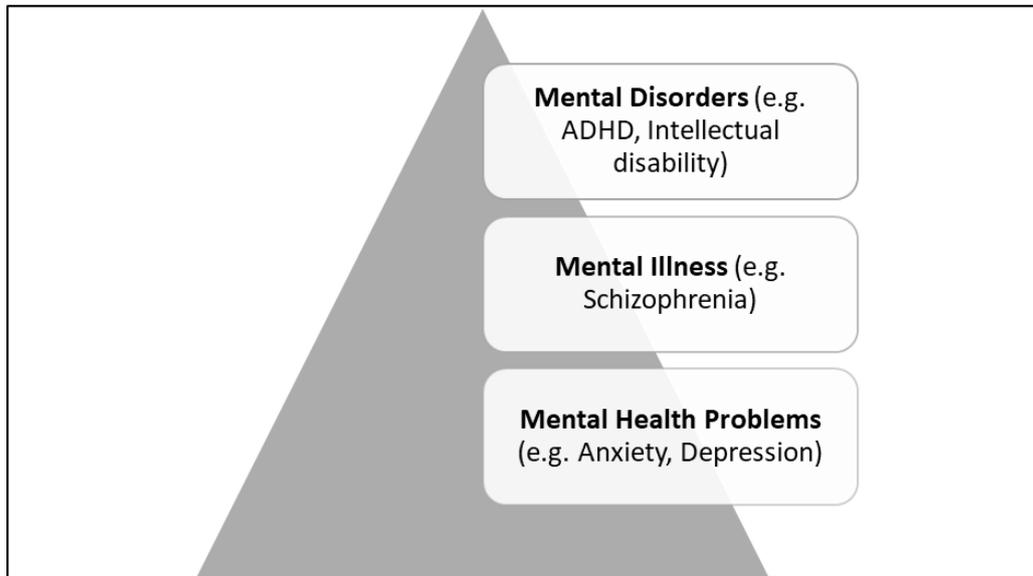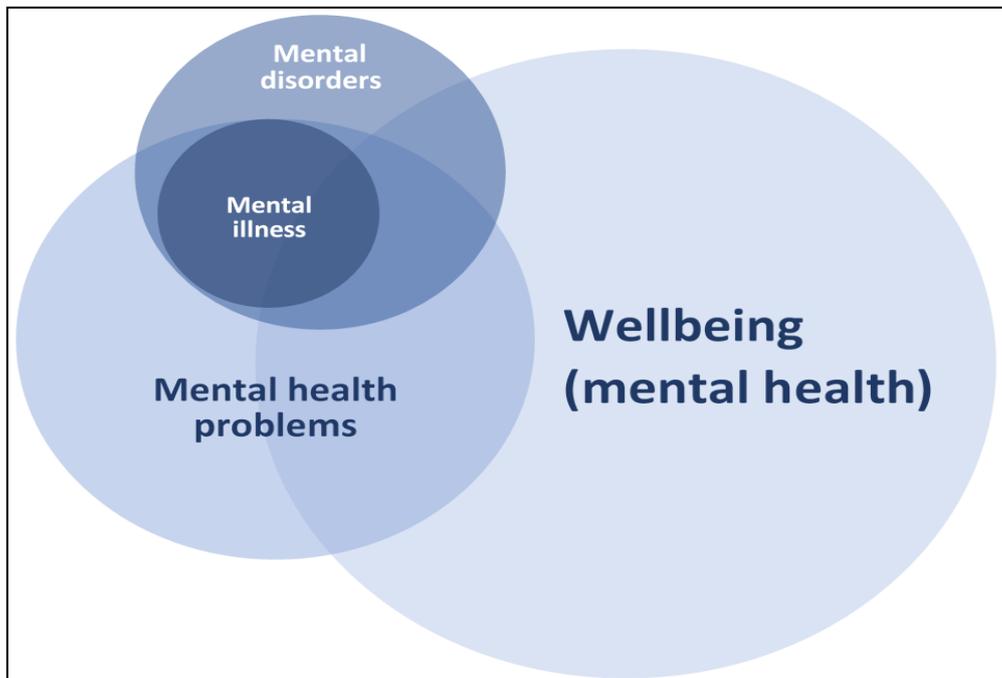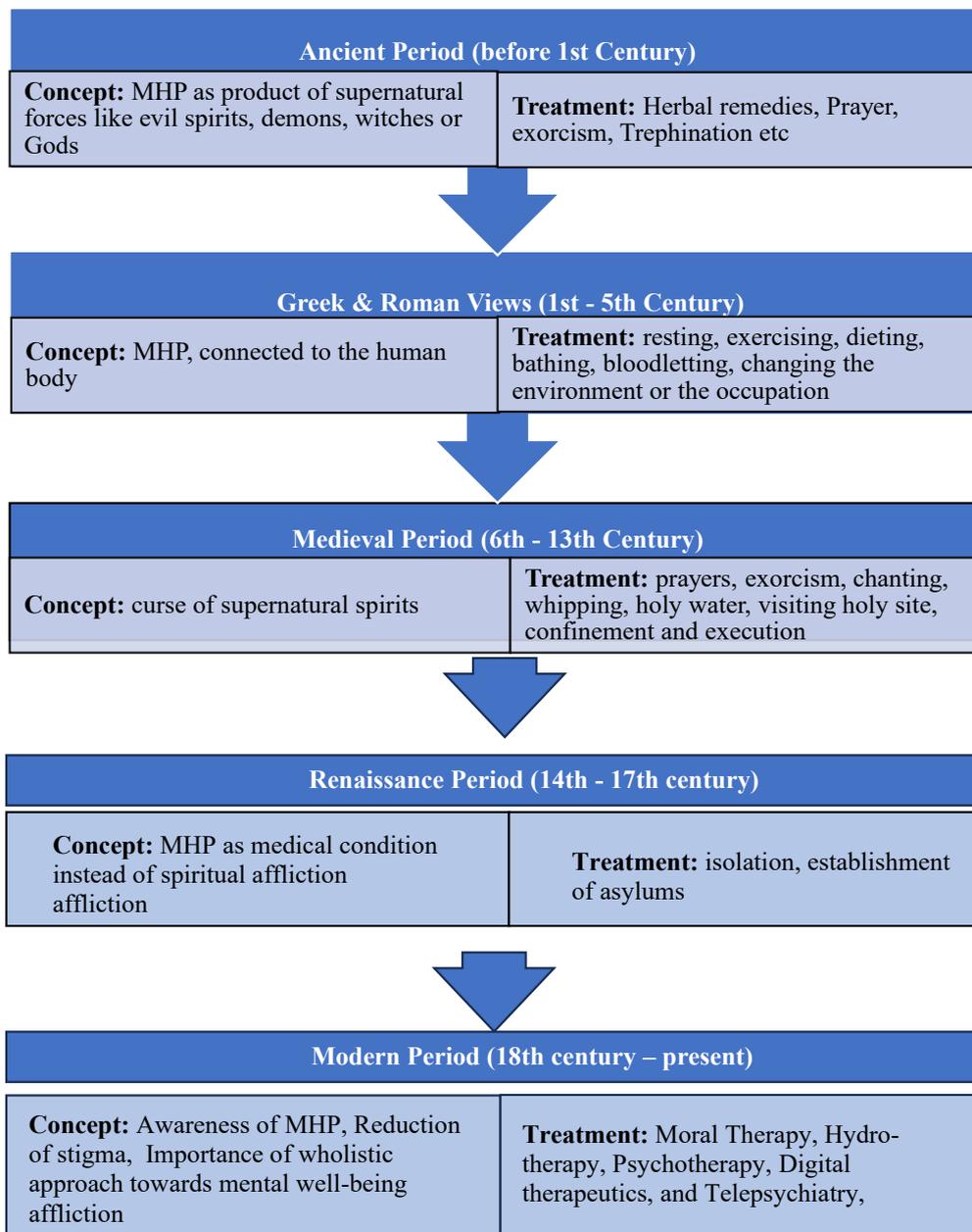

Figure 2

Relationship between Mental Health, Mental Health Problems, Mental Illness, and Mental Disorder

Source: Granlund et. al., 2021

Figure 3

Decade-Wise Trajectory of Mental Health Problems

Ancient Period (before 1st Century)	
Concept: MHP as product of supernatural forces like evil spirits, demons, witches or Gods	**Treatment:** Herbal remedies, Prayer, exorcism, Trephination etc

Greek & Roman Views (1st - 5th Century)	
Concept: MHP, connected to the human body	**Treatment:** resting, exercising, dieting, bathing, bloodletting, changing the environment or the occupation

Medieval Period (6th - 13th Century)	
Concept: curse of supernatural spirits	**Treatment:** prayers, exorcism, chanting, whipping, holy water, visiting holy site, confinement and execution

Renaissance Period (14th - 17th century)	
Concept: MHP as medical condition instead of spiritual affliction affliction	**Treatment:** isolation, establishment of asylums

Modern Period (18th century – present)	
Concept: Awareness of MHP, Reduction of stigma, Importance of wholistic approach towards mental well-being affliction	**Treatment:** Moral Therapy, Hydro-therapy, Psychotherapy, Digital therapeutics, and Telepsychiatry,

Ancient Period (Before the 1st century)

In ancient times, mental health problems or abnormal behaviours were considered to be a product of supernatural forces like evil spirits, demons, witches, or gods that took control of the individual. It happened when people engaged in activities that were quite contrary to the religious traditions of that time (Bridley & Daffin Jr., 2023). The ancient people believed that the human body and mind were the battlefield between the good (God or gods) and evil spirits (demons, witches, etc.), and that abnormal behaviour or mental health problems were the result of evil spirits capturing the human body by defeating the God or gods.

One of the most *popular treatments* of ancient times was trephination, a technique in which a stone instrument, a trephine, was used to cut a round section of the skull. Through this opening gate, the evil spirits could leave the human body, and, in this way, the individual's mental suffering could end, and he could return to normal behaviours (Woldearegai et al., 2019). Another widespread method of treatment, used by early Greek, Egyptian, Hebrew, and Chinese cultures was exorcism, in which a shaman or priest tried to coax the evil spirits through various activities such as prayer, pleading to the evil spirits, noise-makings, magic, beating or starving the person etc. so that the person return to their everyday life (Woldearegai, et al., 2019).

Greek & Roman Views (1st - 5th Century)

In ancient Greece and Rome, the concepts of mental health problems and their treatments were profoundly shaped by thinkers such as Hippocrates (460 BC), Plato (400 BC), and Aristotle (384–322 BC). They totally denied the traditional belief of supernatural influences and explored the psychological, biological, and social influences of mental health problems (Plante, 2010). They proposed a relatively advanced perspective, strongly connected to the human body, without considering the brain as the central factor (Woldearegai et al., 2019). With this in mind, Hippocrates and the Roman physician, Galen (129 – 200AD), introduced the concept of humoral Theory i.e. human body was made of four essential fluids like blood, yellow bile, black bile and phlegm, and the mental health problems were occurred when the equilibrium of these four fluids in trouble (Butcher, 2007; Plante, 2010). In this period, Hippocrates mentioned some mental illnesses such as mania, dementia, melancholia, phobias, phrenitis, hysteria, delusions, and hallucinations. According to Plato, adult behaviours are closely linked to childhood experiences, whereas Aristotle theorized that genetic inheritance might be an essential factor.

According to them, the *key treatment* to get rid of mental health problems is maintaining the body's balance of four fluids: blood, yellow bile, black bile, and phlegm. It can be achieved through rest, exercise, diet, bathing, bloodletting, and other methods. *Another famous* treatment method, suggested by Hippocrates, was changing the patient's environment or occupation (Foerschner, 2010).

In sum, although there were some progressions in thought process, the individuals with mental health problems were judged negatively throughout their whole lives. They were not equally treated with the normal people, who did not have mental health problems. Instead of having some changes or suggestions in understanding or treatments of mental health problems, they found the dominance of supernatural influences.

Medieval Period (6th to 13th century)

During this time, a period of political and economic turmoil marked by war, plagues, urban uprisings, and famines, brought misery to the people, and they blamed the devils for these sufferings. Even after the fall of the Roman Empire, the power of the Church increased to such an extent that it discarded the scientific and medical explanations of mental health problems, and again returned to the religious phenomena, i.e., abnormal behaviours were the result of a curse of supernatural spirits like demons, witches, etc. People with mental illness were highly

discriminated against and even sometimes killed. That time, priests were the physicians, and to drive out the demons, they applied cruel, unbelievable torture on the people.

The *methods of treatment* were prayers, exorcism, chanting, whipping, holy water, and visiting sacred sites, etc., and in extreme cases, confinement and execution (Bridley & Daffin Jr., 2023).

Renaissance Period (14th to 17th centuries)

During the Renaissance period, the most remarkable development was *humanism*, which focused on human welfare and the distinctiveness of the individual. For this, the influence of superstition, supernatural views on mental illness has decreased gradually. For the first time, in this period, the government felt the need to establish asylums to provide proper care for mentally ill people. Monasteries and hospitals were turned into *asylums*. However, the infrastructure of these asylums was not so good; people were treated like animals; they were chained up, and sometimes they cried out in pain.

Modern Period (18th century - present)

In the modern era, mental health services now focus on an active recovery process and integration into society rather than just confinement. This transformation was marked by a "humanitarian turn" that culminated in today's technology-driven, comprehensive environment. Moreover, due to the arguments of great pioneers such as William Tuke in England and Philippe Pinel in France, patients were treated as human beings with proper rights. In the 20th century, after the emergence of psychologists like Freud, Rogers, and Skinner, and diverse psychiatric medications, awareness of mental health has massively increased. As a result, stigma has been reduced, and public health has become the most central priority. In addition, modern mental healthcare emphasizes a holistic approach, following the Biopsychosocial model, i.e., a comprehensive overview of biological, psychological, and social systems (Kendler et al., 2022).

Nowadays, to heal mental health problems, there are various therapies available for mentally ill people. Firstly, patients were given *moral therapy;* i.e., to reinstate their self-control, they were treated with kindness and offered a "family-like" social environment and a comfortable setting (Freebody, 2023). Secondly, in *hydrotherapy*, water (cold or sometimes warm baths) was used to calm patients with severe depression or insomnia (Roberts & Kurtz, 1987). Thirdly, to change patients' thought patterns and behaviours, psychotherapy such as Freud's "talk therapy" or Cognitive Behavioural Therapy (CBT) was structured (Beck & Fleming, 2021). Fourthly, due to technological advancements, *telepsychiatry and digital therapeutics* systems could become feasible, enabling specialized doctors to identify mental illness and serve patients in remote areas more easily (Chakrabarti, 2015).

Conclusion

In a nutshell, since the ancient period to the present time, mental health problems have been found to exist among individuals, and all the time, there are some particular strategies to cope with these. Still today, mental health problems are identified as more prevalent among children and adolescents across the world. However, the government, policymakers, and other

stakeholders should take the necessary steps in this regard to establish transparent policies and practical training on mental health, as well as to ensure financial support for conducting interventions and required counselling practices.

References

Beck, J. S., & Fleming, S. (2021). A brief history of Aaron T. Beck, MD, and Cognitive Behaviour Therapy. *Clinical Psychology in Europe*, *3*. https://doi.org/10.32872/cpe.6701

Bremberg, S.; Dalman, C. Begrepp, Mätmetoder Och Förekomst Av Psykisk Hälsa, Psykisk Ohälsa Och Psykiatriska Tillstånd: En Kunskapsöversikt. (Constructs, Assessment Methods, and Prevalence, Mental Health, Mental Illness, and Mental Health Disorders); FORTE: Stockholm, Sweden, 2015. Available: https://forte.se/publikation/begrepp-matmetoder/ (accessed on 3 February 2021).

Bridley, A. & Daffin Jr., L. W. (2023). Fundamentals of Psychological Disorders. Washington State University.

Butcher, J., Mineka, S., & Hooley, J.M. (2007). Abnormal Psychology. Susan Hartman. 13th ed. Boston: Pearson Education, Inc.

Chakrabarti, S. (2015). Usefulness of telepsychiatry: A critical evaluation of videoconferencing-based approaches. *World Journal of Psychiatry*, *5*(3), 286. https://doi.org/10.5498/wjp.v5.i3.286

Citizens' Advice Bureau (2023). What is the Difference between a mental illness and a mental disorder? Retrieved from https://www.cab.org.nz/article/KB00001571.

Copeland, W.E., Adair, C.E., Smetanin, P., Stiff, D., Briante, C., Colman, I., Fergusson, D., Horwood, J., Poulton, R., Costello, E.J. et al. (2013). Diagnostic transitions from childhood to adolescence to early adulthood. *J. Child Psychol. Psychiatry*. 54, 791–799.

Dattani, S., Ritchie, H., & Roser, M. (2021). Mental Health.*Our World India.* Retrieved from: https://ourworld india.org/mentalhealth

Dittakavi, S. (2022). Students' Mental Health in India.Retrieved from https://www.google.cpm/amp/bwhealthcareworld.businessworld.in/amp/article/students-mental-health-in-India/21-03-2022-42325 (Accessed on 23 June, 2025)

Embogama. (2016). Difference between Mental Illness and Mental Disorder. Retrieved from https://www.google.com/amp/s/pediaa.com/difference- between-mental-illness-and-mental-disorder/amp/

Foerschner, A. M. (2010). The History of Mental Illness: From" Skull Drills" to" Happy Pills". *Inquiries Journal/*Student Pulse LLC*, 2*(09). All rights reserved. ISSN: 2153-5760

Freebody, J. (2023). Patient work before World War I. *Mental Health in Historical Perspective*, 61–98. https://doi.org/10.1007/978-3-031-13105-9_2

Granlund, M.; Imms, C.; King, G.; Andersson, A.K.; Augustine, L.; Brooks, R.; Danielsson, H.; Gothilander, J.; Ivarsson, M.; Lundqvist, L.-O.; et al. (2021). Definitions and Operationalization of Mental Health Problems, Well-being and Participation Constructs in Children with NDD: Distinctions and Clarifications. *Int. J. Environ. Res. Public Health*. 18, 1656. https:// doi.org/10.3390/ijerph18041656

Kendler, K. S., Tabb, K., & Wright, J. (2022). The Emergence of Psychiatry: 1650 – 1850. *American Journal of Psychiatry.* 179 (5). https://doi.org/10.1176/appi.ajp.21060614

Kessler, R.C., Berglund, P., Demler, O., Jin, R., Merikangas, K.R., Waiters E. E. (2005). Lifetime prevalence and age of onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62(6). 593 602. https://doi:10.1001/archpsyc.62.6.593

Plante, T. G. (2010). Contemporary clinical psychology. John Wiley & Sons Woldearegai, B. T., & Das, B. (2019). Perceived Causes and Treatments of Mental Illness: A Historical Review. *International Journal of Research and Analytical Reviews (IJRAR). 6 (1).*

Prince, Martin & Patel, Vipin & Saxena, Shekhar & Maj, Mario & Maselko, Joanna & Phillips, Michael & Rahman, Atif. (2007). No Health Without Mental Health. *Lancet.* 370. 859-77. 10.1016/S0140-6736(07)61238-0.

Roberts, A. R., & Kurtz, L. F. (1987). Historical perspectives on the care and treatment of the mentally ill. *The Journal of Sociology & Social Welfare*, *14.* https://doi.org/10.15453/0191-5096.1832

WHO. (2001). The World Health Report 2001: Mental Health, New Understanding, New Hope. Geneva: WHO. Available from www.who.int/whr/2001/en/whr01-en.pdf.

WHO (2003). Caring for Children and adolescents with mental disorders: setting WHO directions.Geneva: World Health Organization. https::://www. Who.int/mental health/ media/en/785.pdf (Accessed on 15 July, 2025)

World Health Organization. ICD 11 Version 09/2020; World Health Organisation: Geneva, Switzerland, 2020. Available online: https://icd.who.int/en (accessed on 3 February 2025).

World Health Organization. Promoting Mental Health: Concepts, Emerging Evidence, Practice; World Health Organization: Geneva, Switzerland, 2005. Available: https://www.who.int/mental_health/evidence/en/promoting_mhh.pdf (accessed on 3 February 2025).