



# ประวัติของจิตเวชศาสตร์ในอเมริกา : ประเด็น เรื่อง สมาคมจิตแพทย์อเมริกัน

Pedro Ruiz M.D. \*

## บทคัดย่อ

จิตเวชศาสตร์ในสหรัฐอเมริกาเริ่มจากปี ค.ศ. 1500 เป็นต้นมา ตั้งแต่สเปนได้ ค้นพบ  
ประเทศนี้ และดินแดนในภาคใต้ของประเทศ เช่น รัฐฟลอริดา, อลาบามา, มิสซิสซิปปี, หลุยเซียนา,  
เท็กซัส, นิวเม็กซิโก, อริโซนา, เนวาดา และแคลิฟอร์เนียต้องตกเป็นเมืองขึ้นของสเปน ต่อมา  
ชาวฝรั่งเศสได้เข้ามาอยู่ในมลรัฐหลุยเซียนา และอังกฤษได้รุกเข้ามาในภาคตะวันออกเฉียงเหนือ  
ของประเทศ จนชาวอังกฤษกลายเป็นชาวต่างประเทศส่วนใหญ่ที่ได้เข้ามาตั้งรกรากอยู่ที่นี้  
จนถึง ค.ศ. 1700 จึงถือเป็นการสิ้นสุดของยุคอาณานิคม กล่าวได้ว่า อังกฤษได้มีอิทธิพลต่อ  
จิตเวชศาสตร์ในอเมริกาอยู่นานกว่า 200 ปี

ส่วนสมาคมจิตแพทย์อเมริกันนั้น ได้ก่อตั้งขึ้นเมื่อปี ค.ศ. 1844 และเป็นสมาคมของ  
แพทย์เฉพาะทางสาขาแรกที่ได้มีการรวมตัวกันจนกลายเป็นสมาคมดังกล่าว ปัจจุบันมีสมาชิก  
ประมาณ 40,000 คน และเป็นสมาคมจิตแพทย์ที่ใหญ่ที่สุดของโลก

ในบทความนี้ผู้นิพนธ์จะกล่าวถึงความเป็นมาของสมาคมจิตแพทย์อเมริกันจนถึงปัจจุบัน  
ตลอดจนการฝึกอบรมของแพทย์ประจำบ้านในสาขาต่างๆ ทางจิตเวชศาสตร์ รวมทั้งการดูแล  
ผู้ป่วยจิตเวชที่อยู่นอกระบบประกันสุขภาพด้วย ซึ่งยังคงเป็นปัญหาที่ทำให้ทนายวงการจิตเวชศาสตร์  
ของอเมริกาอยู่ในขณะนี้

**คำสำคัญ** อเมริกา สมาคมจิตแพทย์อเมริกัน ประวัติ จิตเวชศาสตร์

วารสารสมาคมจิตแพทย์แห่งประเทศไทย 2551; 53(ฉบับผนวก 1): 7S-13S

\* Department of Psychiatry and Behavioral Sciences, University of Texas Medical School at  
Houston, Houston, Texas 77030, USA



# History of Psychiatry in America : An American Psychiatric Association Perspective

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*Pedro Ruiz M.D. \**

## Abstract

Psychiatry in the United States began with the colonization process initiated in the 1500s by Spain which discovered and colonized most of the southern parts of the United States; that is, Florida, Alabama, Mississippi, Louisiana, Texas, New Mexico, Arizona, Nevada and California. Subsequently, France had its presence in Louisiana for quite a few years. Later on, however, England also conquered parts of the United States, particularly in the Northeast section of this nation. Eventually, however, the English population dominated the whole country and in the civil world of the late 1700s ended by dominating the entire country; thus the English influence with respect to psychiatry has now prevailed in this country for over 200 years.

The American Psychiatric Association (APA) was founded in 1844, and it is the first medical subspecialty to become organized in what is to the APA. Currently, the APA has about 40,000 members and has become the largest psychiatric association across the world.

In this article, emphasis will be made to explain and help understand the current mental health challenges and psychiatric dilemmas that currently prevail within the field of psychiatry.

**Key words:** America, American Psychiatric Association, history, psychiatry

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J Psychiatr Assoc Thailand 2008; 53(Supplement 1): 7S-13S

\* Department of Psychiatry and Behavioral Sciences, University of Texas Medical School at Houston, Houston, Texas 77030, USA

## Introduction

The American Psychiatric Association is the oldest Medical Society in the United States. It was founded in 1844 under the sponsorship of the Medical Superintenders of American Institutions for the Insane in the United States, and it was at first called The Association of Medical Superintendents of American Institutions for the Insane. A few years later, its name was changed to its current name; that is, the American Psychiatric Association. Currently, the American Psychiatric Association is the largest psychiatric association in the world, and it has almost 40,000 members. It is estimated that there are about 50,000 psychiatrists currently practicing in the United States.

The first Annual Meeting of the American Psychiatric Association was held on 1844, and focused on the management of the mental hospitals that existed in the United States at that time<sup>1</sup>. Following World War II, the Annual Meetings of the American Psychiatric Association grew up considerably, and at the present time there are Annual Meetings with over 20,000 persons in attendance. It is also worthwhile to note in this regard that some of the Annual Meetings in recent years had around 7,000 psychiatrists from all over the world attending these meetings. The Annual Meetings of the American Psychiatric Association have actually become the “premier” scientific meetings in the field of psychiatry worldwide. Since its creation, the American Psychiatric Association has had 134 Presidents; I was the President of the American Psychiatric Association in the year 2006-2007; that is, I was the 132<sup>nd</sup> President of the American Psychiatric Association. The theme of my Presidential Annual Meeting held in May 2007 in San Diego, California, was

“Addressing Patient Needs: Access, Parity and Humane Care”. Each President selects every year the theme of his /her Annual Meeting and the emphasis of this meeting is based on the selected theme.

The American Psychiatric Association is composed of District Branches across the country. There are District Branches that represent one given State, like, for instance, Texas which is represented by the Texas Society of Psychiatric Physicians, a District Branch of the American Psychiatric Association. There are States, however, that are represented by several District Branches; for instance, the State of California is represented by five District Branches; they are: 1) Northern California Psychiatric Society, 2) Central California Psychiatric Society, 3) Southern California Psychiatric Society, 4) Orange County Psychiatric Society, and 5) San Diego Psychiatric Society. Some District Branches have several chapters; for instance, the Texas Society of Psychiatric Physicians which is the Texas District Branch of the American Psychiatric Association has four chapters. It is interesting to note that the American Psychiatric Association also has District Branches in Canada. They are: the Quebec and Eastern Canada District Branch and the Western Canada District Branch. Additionally, the American Psychiatric Association also has a District Branch that represents the psychiatrists from the Armed Forces. This District Branch is called the Society of Uniformed Services Psychiatrists. In terms of dues, members of the American Psychiatric Association, by and large, pay annually national/central and District Branch dues. In terms of membership, there are requirements that permit the advancement from member to fellow, to distinguished fellow, and to distinguished life fellow.

## The United States Medical Psychiatric Workforce

In 1995, there were in the United States a total of 646,000 physicians<sup>2</sup>. Of this number, there were 505,900 who were males (78.3%), and 140,100 who were females (21.7%). It is also of interest that of this number of 646,000 physicians, 153,800 or 23.8% were International Medical Graduates (IMGs). With respect to psychiatric residents who represent the future of the psychiatric profession, it is interesting to note that the number of psychiatric residents in the United States has increased from 3,965 in the academic year 1969-1970 to 5,714 in the academic year 2000-2001<sup>3</sup>. The distribution of psychiatric residents among the different psychiatric specialties also show some interesting trends; for instance, in the academic year 2000-2001, the distribution of psychiatric residents and fellows in the United States was as follows<sup>3</sup>:

	Number	%
General Psychiatry	4,350	79.3
Child & Adolescent Psychiatry	657	11.5
Geriatric Psychiatry	90	1.6
Forensic Psychiatry	47	0.8
Psychosomatic Medicine (C&L)	27	0.5
Addiction Psychiatry	50	0.9
Psychiatry/Internal Medicine	133	2.3
Psychiatry/Family Practice	57	1.0
Psychiatry/Neurology	31	0.5
General/Child/Pediatrics	77	1.3
Psychiatric Research	15	0.3
Total	5,714	100.0

The ethnic/racial composition of the psychiatric residents and fellows during the academic year 2000-2001 is also of interest. It is as follows<sup>3</sup>:

	Number	%
White/Caucasian	3,573	62.5
Black	328	5.7
Asian/Pacific Islander	1,271	21.3
Hispanic	341	5.9
Native American	13	0.2
Other	242	4.2
Total	5,715	100.0

The gender distribution of the 2000-2001 psychiatric residents also denotes interest. It is as follows<sup>3</sup>:

	Number	%
Male	2,824	49.4
Female	2,813	49.2
Unknown	77	1.3
Total	5,714	100.0

The place of origin and/or status of the psychiatric residents who were in training in the United States in the academic year 1999-2000 also show an interesting pattern. It is as follows<sup>4</sup>:

	%
U.S. Born	52.2
Born Abroad	42.8
U.S. Citizens	80.0

Likewise, the source of medical training of the psychiatric residents who were in training in the United States in the academic year 2000-2001 also demonstrates an interesting trend. It is as follows<sup>3</sup>:

	Number	%	Country	Number
Trained in the USA	3,812	58.0	India	1,398
Trained Abroad (IMGs)	2,288	40.0	USA	1,281
Unknown	114	2.0	Philippines	512
Total	5,714	100.0	Pakistan	341
			Argentina	220
			Egypt	185
			South Korea	194
			Cuba	178
			England	156
			Poland	150
			Romania	145
			Iran	143
			Germany	134
			Mexico	125
			China	105
			Other	2,510
			Total	7,777

A reflection on the data previously described which relates to the current medical/psychiatric manpower whom nowadays practice in the United States clearly shows the role of women and international medical graduates insofar as psychiatry is concerned. The presence of international medical graduates and women psychiatrists is quite significant. This is very important since the number of ethnic minorities residing in this country is not only significant, but is rising too. In terms of the ethnic/racial origin of psychiatrists in the American Psychiatric Association, in the year 2000 the composition was as follows<sup>3</sup>:

Ethnicity	%
White	70.8
Asian	13.0
Black	2.9
Hispanic	4.6
Native American	0.1
Other	8.5

Insofar as the countries of origin of the international medical graduates (IMGs) who were members of the American Psychiatric Association is concerned, in 2001 they were as follows<sup>3</sup>:

Without question, the number of psychiatrists trained abroad is a significant number vis-a-vis the total psychiatric manpower of the United States. Additionally, these international medical graduate psychiatrists who currently work in the public sector of the United States are very significant too. In a country like the United States, where there are currently close to 50 million persons without any type of medical insurance coverage, having psychiatrists delivery services among the poor population is very important. In 1996, the work setting of psychiatrists practicing in this country was as follows<sup>5</sup>:

Setting	IMGs	USMGs
Private Sector	58%	71%
Public Sector	32%	22%
Other	10%	7%

In the not for profit sector, International Medical Graduates (IMGs) definitely play a major role. In 2001, a large majority of them were working in this sector. Their numbers were as follows<sup>3</sup>:

#### IMGs Working in the not for Profit Sector

Setting	Number
City, County and State Hospitals	643
Medical Schools	594
Community Mental Health Centers	588
Hospitals	373
Federal Government (V.A. & Military)	326
Nursing Homes	213
Total	2,737

This number (2,737) represented 40.3% of the total number of International Medical Graduate psychiatrists (IMGs) who were working in the United States in 2001<sup>3</sup>.

## The Uninsurance Crisis of the United States

In year 1995, there were about 41.1 million persons residing in the United States who were medically uninsured; this number increased to 42.6 million in year 1999<sup>2</sup>; today, the number of medically uninsured persons residing in the United States is estimated to be near 50 million. At the present time, the number of medically uninsured persons in the United States affect all classes; for instance, in 1997, 16.8%

of the workforce who worked full time were medically uninsured; also 24.1% of the part time workforce was also medically uninsured; finally, 26.2% of the unemployed persons of this country were also uninsured<sup>2</sup>. In this respect there is also a clear sign of discrimination in this country; for instance, in 1997, 14.2% of the medically uninsured were native born citizens, 18.2% of the medically uninsured were naturalized citizens, 34.2% of the medically uninsured were foreign born alien, and 43.6% of the medically uninsured were illegal alien<sup>2</sup>. With respect to the medically uninsured among the ethnic groups who reside in the United States, in 1999 the medically uninsured rates were as follows<sup>2</sup>:

Ethnic Group	%
Hispanic	33.4
Black	21.2
Asian	20.8
White	11.0
Other	13.6

In this respect, children and adolescents were highly discriminated. Of the total number of children and adolescents or 72.3 million who were residing in the United States in 1999, 13.9% or about 10 million were medically uninsured<sup>2</sup>. Additionally, the children and adolescents from certain ethnic groups were affected the most. Among Hispanic children and adolescents, 27.2% were not medically insured; among Black children and adolescents, 17.9% were not medically insured, and among Asian children and adolescents, 16.7% were not medically insured. However, the number of white children and adolescents who were not medically insured was only 8.9%<sup>2</sup>.

If one were to focus among poor children and adolescents who reside in the United States, this situation is even worse. Among poor Hispanic children and adolescents, 32% are medically uninsured; among poor Asian children and adolescents, 26.2% are medically uninsured<sup>2</sup>.

It is also very worthwhile to note that International Medical Graduate (IMGs) psychiatrists are playing a major role in delivering psychiatric services to the poor population of the United States, especially the ethnic and racial minority populations.

## Conclusion

The American Psychiatric Association is the oldest medical associations in the United States, and the largest one worldwide. In recent years, the American Psychiatric Association is playing a major role not only within the boundaries of the United States, but across the world as well. Within the United States, the American Psychiatric Association is providing psychiatric care to all persons residing in this country, especially in the public sector and among the most needed population groups. Additionally, the American Psychiatric Association is deeply involved, in collaborating with other national organizations, in all educational efforts in the field of psychiatry; particularly,

in the growth and development of the psychiatric manpower of this country. Moreover, the American Psychiatric Association also plays a major role in advocating for access, parity and humane care for the mentally ill patients who reside in the United States, as well as for the psychiatry profession. Finally, the American Psychiatric Association is definitely involved in the provision of psychiatric education via its Annual Meetings to psychiatrists from all over the world. Also, in the dissemination of new knowledge worldwide through its publications efforts, as well as its continuing medical education programs and activities.

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