

Problems of Mental Illness

- Sociological concerns of mental illness
- Perspectives on Mental Illness (Interactionist, Conflict, Functionalist)
- Suicide and Mental Illness
- Defining Mental Illness-Medical model, Mental Illness as deviance, and mental illness as a myth
- Inequality, and mental illness
- Drift Hypothesis
- Race, Sex and Age as factors of mental illness
- Institutional problems of treatment and care

Mental Illness as a Social Problem

- **Mental Illness(disorder)**-Psychological or organic problems in the mental functioning of an individual that may require medical treatment but do not require hospitalization
 - Sociology's concern with mental illness is that it is a social problem that affects a large number of people and the extent to which social institutions are strained by efforts to care for the mentally ill
 - Mental illnesses are among the top ten causes of role impairment, or reasons people are unable to perform work or their normal daily activities because of illness
 - Role impairment, esp. not being able to meet one's work obligations costs the U.S. billions in lost productivity each year
 - For society as a whole, mental illness can cause stress in family life, heavy demands on healthcare institutions, moral and ethical problems, the monetary cost to society, etc...

Perspectives on Mental Illness

- **Deinstitutionalization**-the discharge of patients from mental hospitals directly into the community
- Interactionist-focuses on the social construction of mental illness: how our labels of “deviant” and “normal” behavior in social situations lead to definitions of mental disorders.
- Conflict-focuses on how mental illness is associated with deprivation and inequality, incl. unequal access to care. More affluent can afford private care and poorer patients reduced to poverty by their illness relegated to public institutions
- Functionalist-focuses on institutions’ ability to provide effective treatment.

Suicide and Mental Illness

- Depression can be caused by chronic anxieties over money and loss of work
- People commit suicide to avoid severe embarrassment, to escape debt, to express political protest, and to avoid suffering due to physical illness
- Every 17 minutes, someone commits suicide in the U.S.
 - Ranks as third most common cause of death among young people
 - Second most common cause of death among college students
 - In elderly population, it is associated with dementia

Defining Mental Illness

- The Medical Model-most familiar. Holds that mental disorders have biological causes.
 - Genetic research has uncovered much support for the medical model in causing illnesses such as manic depression, schizophrenia, childhood autism, senility, alcoholism, etc...
- Mental Illness as Deviance-(Thomas Scheff)the ways that a mentally ill person is treated (and labeled) once the illness has been diagnosed can have a lasting impact on that person's behavior
 - **Residual deviance**-deviance from social conventions that are so completely taken for granted that they are assumed to be part of human nature
 - The disorder may be a function not only of individuals' inability to comply with societal expectations but also of the label attached to those who deviate

Defining Mental Illness

- Mental Illness as a myth-(Thomas Szasz) not widely accepted; **does not** claim that social and psychological disturbances referred to as mental illness do not exist, but claims it is dangerously misleading to call them illnesses
 - Would rather they be referred to as manifestations of unresolved problems in living
 - A diagnosis of mental disorder involves a value judgment based on the behavioral norms held by psychiatrists
 - Allows doctors to use medicine to correct what are social, ethical or legal deviations
- Sociologists note the biological basis for many mental illnesses, but contend that mental illnesses are often aggravated by their treatment as social deviants

Inequality, Conflict and Mental Illness

- Conflict theorists call attention to the ways in which inequalities of wealth and power produce inequalities in access to effective treatment for mental disorders
- *Prevalence*-estimated number of people suffering from one or more mental illness at any given time
- *Incidence*-number of new cases of mental illness each year
- It can be difficult to calculate the actual number of cases of mental illness because it is difficult to obtain reliable stats on the number of patients being treated in private practice
- People who are emotionally disturbed but are not being treated are usually not considered in the numbers describing incidence of mental disorders

Inequality, Conflict and Mental Illness

- Faris and Dunham (1938) found that highest rates of mental disorder were found near the center of the city, where the population was poor; the lowest rates of mental disorder were found in stable residential areas
- Midtown Manhattan Study (1978)-socioeconomic status was studied for both participants in study and their parents
 - Among number of participants lacking in mental functioning ability, number with lower-class parents was twice that as upper-class parents
- Socioeconomic status has a strong influence on the mental health of children

Social-Selection (Drift Hypothesis)

- **Drift Hypothesis**-the view that social class is not a cause but a consequence of mental disorder
- Mentally disordered people tend to be found in the lower classes because their illness has prevented them from functioning at a higher class level and they have “drifted” downward
- A low social class position is associated with mental disorders, most likely as a result of a process in which the mentally ill drift downward in society

Race, Sex and Age as Factors

- Race-not a significant factor by itself in explaining mental illness
- Racial differences can mostly be explained in terms of social class
- Poor people of any ethnicity are more likely to be seen as needing hospitalization than are members of middle and upper classes
- Sex-women and children more likely than adult men to be diagnosed with severe depression, but also appears that poverty and stress it causes are more important factors than biological factors
 - Women more likely to suffer depression, anxiety, phobias
 - Men more likely to suffer from autism, and schizophrenia

Race, Sex and Age as Factors

- Sex-Chesler (1972)-found that the standards of mental health for men and women differed according to traditional sex-role stereotypes
- Age-most mental illnesses begin early in life, in contrast to most serious physical ailments
 - 50% of all cases begin by age 14
 - 75% of cases begin by age 24
- Prevalence increases from the youngest group (18-29) to the next oldest group (30-44) and then declines

Methods of Treatment

- Major forms of treatment of mental illness are psychotherapy and psychotropic drugs
- Psychotherapy-psychoanalysis, client-centered therapy, and various types of therapy and support groups
 - Usually occurs in nonhospital settings
- **Psychotropic Drugs**-pharmaceutical drugs used in the management of stress, mental disorders and mental illness
- Medical treatments like chemotherapy (use of tranquilizers like Valium and Xanax) and shock treatment are applied to the most severe mental illnesses, like schizophrenia
 - Drugs alone can rarely bring significant long-term changes in behavior
- Hypnosis can help patients recall repressed thoughts that may be blocking their progress

Institutional Problems of Care

- Lack of treatment is one of the most persistent social problems associated with mental illness
- Functionalists postulate that to effectively treat the needs of people with mental disorders, institutions like schools, hospitals, families and law enforcement need to work together
- Prevalence of mental disorders did not change much between 1990 and 2003, but the rate of treatment increased
 - Most of those with a mental disorder do not receive treatment
 - Half of those that received treatment did not meet the diagnostic criteria for a mental disorder

Treatment Institutions

- 19th through early 20th century, most mentally ill were cared for in asylums or mental hospitals
 - Housed several thousand patients
 - Surrounded by high walls and gates
 - Staffed by aides who were low-paid
 - Unappealing working conditions
 - Purpose not only to protect patients from society and cure them, but also to protect society from patients
- **Total Institution**-a place where a large number of individuals,, cut off from wider society for an appreciable period, together lead an enclosed, formally administered round of life
 - Characterized by uniform clothing and furniture, regimented routine-can make patients docile
 - Patients encouraged to view themselves as sick and in need of help
 - Rebellion will be seen as proof that patients are sick

Treatment Institutions

- Erving Goffman-because inmates are constantly subject to its control, the hospital profoundly shapes their sense of self.
 - Mental hospitals emphasize patients' failures and inadequacies
 - Staff often encourages patients as being "sick" and in need of help
- Patients who do not improve enough to be discharged within a short period are likely to remain hospitalized for a long time
- High probability that hospitalization will do more harm than good
- Rosenhan (1973) pseudopatients diagnosed with schizophrenia
 - Later, staff was asked who was faking

Community Psychology

- Largely developed in the 1960s as a result of the release of hundreds of thousands of patients who had been put on psychotropic drugs
- **Community Psychology**-an approach to the treatment of mental disorders that makes use of easily accessible, locally controlled facilities that can care for people in their own communities
 - Characterized by outpatient treatment
 - Was widely established by the Community Mental Health Centers Construction Act
 - The movement
 - awareness that social conditions need to be taken into account in dealing with an individual's mental health problems
 - And also the idea that psychologists and psychiatrists should be able to contribute to the solution of this social problem

Community Psychology

- The Community Mental Health Centers Construction Act established support systems for newly released patients
- **Halfway house**-a small privately run residential community in which for a period of weeks or months, ex-patients are helped to adjust from hospital to normal life, most often in an urban area
 - Optimally, they are capable of providing high-quality care
 - More patients than they had staff or room for
 - Lack of funds
- As a result, halfway houses, nursing homes, and other community health facilities find it difficult to meet growing demand

Cost-Shifting and Deinstitutionalization

- Public mental health facilities often in effect subsidize the private mental-health system through cost-shifting
 - Provides mental-health services to people who cannot pay
 - Uninsured, bad risks, difficult patients, and high-cost cases
- Inadequate numbers of community-care facilities
- Advent of psychotropic drugs was not the sole cause of the large-scale release of patients from mental hospitals
 - Expanded federal welfare programs changed philosophy of what mental health-care could provide
 - Fiscal crises in many states
 - Concern for the rights of the mentally ill

The Homeless Mentally Ill

- Because community mental health centers are often inadequately funded, many patients only receive episodic care and may become homeless
- Researchers estimate that between 30 and 60 percent of homeless are seriously mentally ill
- A frequent outcome of untreated mental disorder is rejection and homelessness
- Homelessness is usually the result of years of missed opportunities and increasing disengagement from society and close relationships
- Mental illness can also be a consequence of homelessness

Social Policy

- *Parity*-eliminating the discrimination against mental illness that is inherent in existing health insurance plans
 - Insurance companies fear parity could increase costs of insurance paid by employers
- In 1990, mental-health care accounted for 9% of all health-care costs
- By 2000, due to lack of parity, proportion dropped to 3%
- Surgeon General ranked mental illness second only to heart disease as cause of disability
- Mental health institutions and services need “institutional coordination” to keep straight definitions of treatable problems, who is responsible for funding, and the appropriate professional to treat the illness