

SOC 486: SOCIOLOGY OF MENTAL ILLNESS
UNIVERSITY OF ALBERTA
FALL TERM 2015

COURSE DIRECTOR: Dr. L. Strohschein
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LOCATION: Business 4-13
Mondays and Wednesdays 4:00 - 5:20 pm

COURSE DESCRIPTION:

This course is designed to provide students with an overview of the broad field of mental health and illness research. Although the interests of many disciplines converge around issues related to mental health and psychological disorder, the course will focus on the sociological aspects of mental health and illness.

We begin with the problems and implications of defining and measuring mental illness, and their consequences for notions of personhood. We then explore the contributions of systems of inequality to mental illness, with a specific focus on gender. Next, we consider the social consequences of labeling mental illness, including the ways in which these responses affect the lives of persons with mental illness. Finally, we investigate the ways in which widely held values and beliefs about mental health, attitudes towards the mentally ill, and professional ideologies and treatment preferences shape the political climate, economic priorities and type of services available to the mentally ill.

Policy about course outlines can be found in §23.4(2) of the University Calendar.

PREREQUISITES:

SOC 224 or SOC 382.

COURSE TEXT:

A coursepack is available in the U of A bookstore.

EVALUATION:

Your grade for the course will be based on:

Writing assignments	40%	
Project #1	20%	due November 4, 2015
Project #2	20%	due December 7, 2015
Class facilitation	10%	
Class participation	10%	

WRITING ASSIGNMENTS

Each student will submit four writing assignments worth 10% each. The assignment is a response (in essay format) to the required readings of a particular week and must accurately summarize and critically evaluate the main arguments. Ideas generated from class discussion may also be integrated into the writing assignment.

Each written assignment must be no longer than two single-sided, typed, double-spaced pages. An assignment must be submitted on the Monday following the week in which the topic is discussed. To maximize the quality of our weekly group discussion, students will be asked to indicate ahead of time if they plan to submit a writing assignment on the weekly readings and will be expected to come prepared with ideas/questions.

Students may choose to submit up to a maximum of five assignments. The instructor will take the four highest marks.

INDIVIDUAL PROJECTS

Students will be asked to select a movie that depicts a particular mental disorder or a character with a mental disorder, and will watch the movie on their own time.¹ Students will be required to obtain instructor approval for their selection to ensure that the film chosen is appropriate to the assignment and not selected by anyone else in the class. Based on their analysis of the movie and some library research, students will submit two papers. The first paper (due November 4, 2015) evaluates the depiction of mental illness in the selected movie by contrasting a medical model of disease causation versus a sociological approach. The second paper (due December 7, 2015) considers how stereotypes and representations of mental illness in the selected movie might influence acceptance or rejection of people with mental illness. Students looking for a film to choose may find it helpful to consult the following website: http://en.wikipedia.org/wiki/List_of_films_featuring_mental_disorders

Each paper will be approximately 8 - 9 pages in length. Students must number the pages and use APA citation and referencing format. Late papers will be penalized 5% per day. Papers submitted by e-mail should be accompanied by a hard copy version delivered to the sociology main office (Tory 5-21).

CLASS FACILITATION

Working in small groups (3 or 4 people), students will take turns being responsible for facilitating class discussion of the two reading assignments for a given week. They should prepare questions for discussion and be knowledgeable about the key concepts/issues. Students will be assessed individually and this mark comprises 10% of the final mark.

¹ I am indebted to Kathy Livingston (2004) for these ideas.

CLASS PARTICIPATION

The class participation grade (worth 10% of the final mark) will be determined by attendance and participation in general class discussions.

GRADING:

Final letter grades will be assigned as follows:

Descriptor	Percentage	Grade	Value
Excellent	94-100	A+	4.0
	88-93	A	4.0
	83-87	A-	3.7
Good	79-82	B+	3.3
	75-78	B	3.0
	70-74	B-	2.7
Satisfactory	66-69	C+	2.3
	62-65	C	2.0
	58-61	C-	1.7
Poor	54-57	D+	1.3
Minimal Pass	50-53	D	1.0
Fail	0-49	F	0.0

ACADEMIC DISHONESTY:

The University of Alberta is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Code of Student Behaviour (online at www.governance.ualberta.ca) and avoid any behaviour which could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

AUDIO/VIDEO RECORDING:

Audio or video recording of lectures, labs, seminars or any other teaching environment by students is allowed only with the prior written consent of the instructor or as a part of an approved accommodation plan. Recorded material is to be used solely for personal study, and is not to be used or distributed for any other purpose without prior written consent from the content author(s).

SCHEDULE FOR THE TERM:

** weeks that students may choose to prepare a written assignment on required readings

Sept. 2 Introduction: Course overview

Sept. 9 - 16 Sociological perspectives of mental illness
Is mental illness like any other illness?

Craddock, N. & Mynors-Wallis, L. (2014). Psychiatric diagnosis: imperfect, impersonal and important. *The British Journal of Psychiatry* 204, 93-95.

Sept. 21 - 23 Mental illness and conceptions of personhood I

Kramer, P. D. (1993). Chapter 1: Makeover. *Listening to Prozac: A Psychiatrist Explores Antidepressant Drugs and the Remaking of the Self*. New York: Penguin Books.

Wilensky, A. S. (1999). Chapter 6: Seismic shifts. *Passing for Normal: A Memoir of Compulsion*. New York: Broadway Books.

**Sept. 28 - 30 Mental illness and conceptions of personhood II

Rose, N. (2007). Chapter 7: Neurochemical selves. (Pp. 187-223) *The Politics of Life Itself: Biomedicine, Power and Subjectivity in the Twenty-first Century*. Princeton, NJ: Princeton University Press.

** Oct. 5 - 7 Measuring mental illness

Mirowsky, J. & Ross, C. E. (2002). Measurement for a human science. *Journal of Health and Social Behavior* 43(2), 152-170.

Martin, E. (2006). Cultures of mania. In Haggerty, K.D. and Ericson, R.V. (Eds.). *The New Politics of Surveillance and Visibility*. Toronto: University of Toronto Press.

Oct. 12 Thanksgiving

Oct. 14 - 21** Blurring the boundaries

Horwitz, A. V. (2010). How an age of anxiety became an age of depression. *The Milbank Quarterly* 88(1), 112-138.

Summerfield, D. (2001). The invention of post-traumatic stress disorder and the social usefulness of a psychiatric category. *BMJ British Medical Journal*.

**Oct. 26 - 28

Women and mental illness

Ehrenreich, B. & English, D. (2005). Chapter 4: The sexual politics of sickness. (Pp. 111-144). *For Her Own Good: Two Centuries of the Experts' Advice to Women*. (2nd edition). New York: Anchor Books.

Smith, D. E. (1990). Chapter 5: The statistics on women and mental illness: The relations of ruling they conceal (p. 107-131). *The Conceptual Practices of Power: A Feminist Sociology of Knowledge*. Toronto: University of Toronto Press.

Blum, L. M. & Stracuzzi, N. F. (2004). Gender in the Prozac Nation: Popular discourse and productive femininity. *Gender and Society* 18(3), 269-286.

**Nov. 2 - 4

Masculinity and mental illness

Hart, N. (2006). Making the grade: The gender gap, ADHD and the medicalization of boyhood. (Pp. 132-164). In D. Rosenfeld & C. A. Faircloth (eds.). *Medicalized masculinities*. Philadelphia: Temple University Press.

Singh, I. (2005). Will the 'real boy' please behave. Dosing dilemmas of parents with children with ADHD. *American Journal of Bioethics* 5(3), 34-47.

Nov. 4

Project #1 due

Nov. 9 - 13

Fall Reading Week

**Nov. 16 - 18

Social labeling and stigma

Sayce, L. (2003). Beyond good intentions: Making antidiscrimination strategies work. *Disability and Society* 18(5), 625-642.

Pilgrim, D. & Tomasini, F. (2012). On being unreasonable in modern society: Are mental health problems special? *Disability and Society* 27(5), 631-646.

**Nov. 23 - 25

Eliminating stigma?

Crossley, M. L. & Crossley, N. (2001). Patient voices, social movements, and habitus: How psychiatric survivors speak out. *Social Science and Medicine* 52, 1477-1489.

Pilgrim, D. & Rogers, A. E. (2005). Psychiatrists as social engineers. A study of an anti-stigma campaign. *Social Science and Medicine* 61, 2546-2556.

Nov. 30 - Dec. 2 The asylum: Past and present

Brimblecombe, N. (2005). Asylum nursing in the UK at the end of the Victorian era: Hill End Asylum. *Journal of Psychiatric and Mental Health Nursing* 12, 57-63.

Boschma, G. (2008). A family point of view: Negotiating asylum care in Alberta, 1905-30. *Canadian Bulletin of Medical History* 25(2), 367-389.

Fabris, E. (2011). Chapter 3: Restraints and treatment. (Pp. 35-56). In *Tranquil Prisons: Chemical Incarceration under Community Treatment Orders*. Toronto: University of Toronto Press.

Dec. 7 Project #2 due