

08 - Sociology of mental illness

Sociology of mental illness

© SPMM Course pregnancy complications such as toxæmia or eclampsia, poor maternal health, maternal age, foetal post-maturity, long duration of labour, foetal distress, antepartum haemorrhage, low birth weight and prematurity are associated with ADHD, increasing the likelihood of its prevalence among lower social classes. In fact, Rutter's landmark studies revealed six inter-related risk factors in the family environment that correlated significantly with childhood mental disturbances in general: 1. Severe marital discord 2. Low social class 3. Large family size 4. Maternal mental health disorder 5. Paternal criminality 6. Foster placement. Rutter observed that the aggregate of these adverse factors, rather than the presence of any one factor, impaired development. Poverty and psychopathology: The Great Smokey Mountains study looked at groups of white American and American Indian children grouped into 'poor', 'never-poor' and 'ex-poor' (ex-poor were those whose income increased annually at later times due to a casino being built on American Indian land). The results showed that before the casino opened poor and ex-poor children had more psychiatric issues, but the levels in the ex-poor fell to the same as never-poor after the casino that produced good income for the ex-poor families opened. The most prominent psychiatric issues responding to poverty were conduct and oppositional defiant disorders while the prevalence of depression and anxiety remained the same. Sociology of mental illness Mental illness as deviance: Society tends to see odd and abnormal behaviour to be against acceptable norms and values and some of these are grouped as mental illnesses. Hence, the deviance becomes an important determinant of illness concept in psychiatry. Edwin Lemert developed the idea of primary and secondary deviance as a way to explain the process of labeling. Primary deviance is any general aberration from expected normality before the person showing such an aberration is identified as a 'deviant'. For example, primary deviance may refer to minor rule breaking in society such as over-speeding. With repeated instances of primary deviance, the subject gets labelled, and the institutions react to the deviant actions. This leads one to become secondary deviant. Secondary deviance refers to the actions carried out by a person identified as a 'deviant' by institutions such as the society or the justice system. This refers to the maintenance of primary deviance as a repercussion of the label given.

© SPMM Course Thus, societal reaction initiates sociological/psychological processes which sustain deviance, making it more central to the life of the "deviant." Formal deviance includes breaking a written law or code of constitution as in criminal act; informal deviance includes breaking unspoken

social rules of living. Deviancy amplification spiral: Originally applied to crime reporting, the theory identifies a spiral that starts with a 'deviant' act. The media report such acts as newsworthy and start regularly adding non-newsworthy items similar to this act ('sensationalism') setting up a bias against the so-called deviant act. As a result, minor problems look serious and rare events are perceived as common. A mounting public concern is the next stage in this spiral, forcing law enforcement to focus more resources on the particular deviancy than it actually warrants. Social construction theory explores how variations in human experience have come to be classed as illness categories; the method used for such investigation is 'deconstruction' or discourse analysis. According to the theory, the reality of mental illness is socially constructed and complicated by cognitive interests of social groups – doctors, lawmakers, politicians. Some examples include:

1. Agoraphobia as a concept developed around the time when the social emancipation of women occurred. The condition thus might be partly originated from problematized use of public space.
2. Sexual role stereotypes may play a role in anxiety disorder constructs and psychopathy.
3. Most major mental problems are circularly defined – e.g. a patient with schizophrenia is termed 'psychotic' as he hears a voice. When this patient enquires why he hears a voice, he gets told that he hears a voice because he is psychotic. Thus, most labels are circular descriptions constructed by the society. Social labelling or societal reaction theory: Labelling theory originated from the concept of symbolic interactionism. Each person plays many different social roles sanctioned by the society; in each role, interaction occurs with other people and meanings of such interactions are dependent on the role assumed. Thomas Scheff in his book *Being Mentally Ill* (1966) expanded labelling theory to mental illness. □ According to Scheff, the social routine is made of numerous, uncategorisable residual rules. These are unspoken and taken for granted often. □ Residual deviance occurs when these rules are broken, but often these are not noticed unless certain specific circumstances arise. Thus in certain circumstances rule breaking is accepted, ignored or normalised, but labelled deviant on other occasions.

Revision #1

Created 2026-01-04 20:02:08 UTC by Omar Ayman

Updated 2026-01-04 20:02:08 UTC by Omar Ayman