

## CEPS 8499-01: Mental Disorders and Oppression in the United States

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### COURSE DESCRIPTION

This anti-oppression course is designed for those of us who are called to be with people who live with mental disorders. We will spend the semester together exploring the complex world of mental “illness” in the US (although we will venture abroad just a little bit). We will companion each other through the weeks – these are emotionally difficult topics, and part of what we will do in this class is support each other as we scrutinize the ways in which our culture treats people who have been given the label of “mentally ill.”

Along the way, we will gain an understanding of the recently released new DSM-5 – and the implications of the new definitions of what behavior is, and isn’t, considered pathological. We will look at intersections of oppression, using race/ethnicity; class; age; gender; institutional power as the anti-oppression framework to examine cultural definitions and treatments of people who live with “mental disorders.” We will take specific issues (e.g. therapies; treatments; pharmaceuticals; criminal justice; mental health policies; children; youth; veterans) to examine the intersections. And we will also look for hope – making sure to find positive examples wherever and whenever possible.

### COURSE OBJECTIVES

After successfully completing this course, students

- will have critical skills to understand, analyze and synthesize theories and ideas related to mental disorders and systems of oppression
- will be familiar with the DSM and the terminology used by the mental health system and pharmaceutical industry to describe and treat people with mental disorders
- will understand contemporary systemic and individual meanings of mental disorders/illnesses and our institutional systems.
- will be knowledgeable about hegemonic and oppressive frameworks, including the impact of race/ethnicity; class; age; gender; institutional power
- will know about therapeutic modalities and programmatic interventions that have proven successful, including pastoral care strategies
- will have a better understanding of interventions for people with mental disorders in the criminal justice system and for people returning from active service

**REQUIRED BOOK:** There is only one required book. The vast majority of materials (PDFs, essays, newspaper/magazine articles, videos and films) will be available online. *The Mark of Shame: Stigma of Mental Illness and an Agenda for Change* by Stephen P. Hinshaw. Oxford University Press 2007. ISBN: 978-0-19-973092-6. It’s a paperback and the price on Amazon is \$31.40 although I did look to see and

there are some used copies online. If you look for a used copy make sure you also note the author (there's a fictional novel with the same title written by someone else).

## **COURSE REQUIREMENTS AND ASSIGNMENTS**

I have tailored this course to meet a wide range of interests – you each come with your own life experience, your individual learning style, and scheduling complexities. You are adult learners with your own learning goals.

### **Reminder**

There are topics in this course that may bring up difficult emotions, and yet they are important, because these are topics that we encounter in our ministries. **We will always be respectful of others' opinions, careful with our words, and compassionate in our hearts.** If a topic is too close to your heart to read/write about, please tell me immediately.

## **SYLLABUS**

Our weeks together will include:

- written lectures accompanied by an eclectic selection of online films and videos, magazine/newspaper articles, academic papers, original documents, personal stories, occasional book chapters -
- examination of the ways in which race, class, gender, sexual expression, and age, intersect with a person's diagnosis, treatment, and prognosis; you may be surprised at how much these vary –
- close exploration of the mental “health” and pharmaceutical industries as well as the spiritual/emotional consequences of its maintenance; you will learn about survivors' groups and resistance –
- pastoral resources to help us, as religious professionals, companion people who are marginalized because of mental disorders; you will explore existing programs and learn from each others' experience –
- safe, respectful class discussion and reflection about difficult topics having to do with mental health issues; many conversations emerge from personal experiences and there is always support from classmates and instructor

**1. "Normal" and how "normal" came into being:** Have you heard of the mental disorder named "Drapetomania"? Hysteria? Our ideas and understandings of mental disorders and normality are culturally based – and exportable.

**2. The Diagnostic and Statistical Manual of Mental Disorders (DSM):** We will spend our first week learning about how the DSM is created and used – including surprising information about its evolution and its politics.

**3. Institutions and mental disorders -- looking at the past:** This week we will look at the way “lunatics” and other people with mental disorders were treated, beginning with colonial days and the asylum movement.

**4. Treatment (Week I - history):** The next few weeks we will be looking at treatments - starting this week with historic treatments including insulin coma therapy, lobotomies, and other “successful” interventions.

**5. Treatment (Week II - psychotropics):** Looking at the complexities of how mental disorders are treated, this week we will explore treatment with psychotropic-psychiatric medications, learning about Big Pharma and its influence.

**6. Treatment (Week III – talk therapy):** Continuing to look at ways that mental disorders are treated, this week we will examine psychotherapy modalities and successful religious and faith-based local programs.

**7. Treatment (Week IV - community):** Why do we think of mental disorders as personal -- don't we all grow up in, and live in a community? This week we will talk about attitudes, stereotypes, and the power of language.

**8. Mental disorders and the mental health system:** The Surgeon General's Office refers to our mental health system as dynamic and *de facto*. This week we will look at our “mental health system” (its complexity and ineffectiveness).

**9. Mental disorders and the "corrections" system:** This week we will look at the increase in incarceration of people who have mental health issues. More people who live with mental disorders are in jails and prisons than in hospitals.

**10. Mental disorders and war:** Each year more soldiers committed suicide than die in combat. This week we will look at the “invisible wounds of war” – treatment (or lack) for men and women returning from deployment.

**11. Mental disorders and children:** Overworked medical professionals; desperate families; the deep-reach of Big Pharma – there is a lot of attention and controversy about how to help children who have been diagnosed as “mentally ill.”

**12. Mental disorders and elders:** Religious professionals are uniquely suited to work with elders in our ageist society. This week we will look at resources to help us minister to elders with mental disorders and dementias.

**13. Suicidal and self-injurious behaviors:** Many young people intentionally harm themselves. How do we talk about eating disorders; cutting; suicidal thoughts given our legal as well as pastoral responsibilities?