

**University of Wisconsin-Madison
School of Social Work**

Syllabus: Spring 2018

**Social Work 951 Determinants in Mental Illness and Wellness: An Applied
Theory Course**

Instructor: Tally Moses, MSW, Ph.D., Associate Professor
Class Time: Wednesday, 8:30-11:30 AM
Instructional mode: Face-to-face
Class Location: SSW Bldg, room 101
Credits: 3
Course requisites: Social Welfare Ph.D. student
Course designations and attributes: This course counts toward the 50% graduate coursework requirement.

Instructor's information:

office location: Social Work Room 313
Office Hours: By Appointment
Phone: 608-263-3674 (office); (608) 234-1722 (cell)
Email: moses@wisc.edu

Course Description:

This interactive seminar is designed to foster critical thinking about the application of theory to research. The particular theme of this course relates to the “determinant of mental illness and wellness” and we will explore a range of micro, meso, and macro theoretical perspectives from a variety of disciplines and perspectives of social inquiry. The perspectives, and the theories covered within, will be focused on understanding: the nature of mental illness/wellness, various bio/psycho/social factors that affect mental health over the life course, understanding racial/ethnic, gender, and socioeconomic disparities mental health, and approaches to the study of mental illness.

Canvas Course URL: <https://canvas.wisc.edu/courses/91748>

Credit hour statement: This class meets for one 3 hour class period each week over the spring semester and carries the expectation that students will work on course learning activities (reading, writing, problem sets, studying, etc) for about 6 hours out of classroom for every class period. The syllabus includes additional information about meeting times and expectations for student work.

Course Objectives:

- To understand how mental illness is defined constructed from the perspective of different disciplines and theoretical lenses;
- To consider the relative merits of various operational definitions of mental health and illness used in research;
- To understand how/why mental illness occurs and identify multiple biopsychosocial factors that are involved;
- To gain insight about how race and ethnicity, culture, class, sex, gender, and sexual orientation are dealt with in theories that are commonly applied to the study of mental illness;
- To understand the implications of theory for programs, interventions, and system reforms that address the causes and/or consequences of mental illness;
- To consider and address methodological issues in the application of theory to mental health/illness research;
- To discuss how course content related to mental health and illness applies to or has relevance for other social phenomena of interest to students.

At the same time, the learning goals of the course are broader than the study of mental illness such that the experiences and skills students gain will serve their research program, which will likely be focused on other substantive areas. This topic is used as an example of a substantive area that applies a variety of types of theories. Exploration of the various theories will be used to understand: (1) how to describe an outcome of interest and its contributing factors; (2) how to measure this outcome and its contributing factors; (3) how to formulate key research questions in ways that promote knowledge in the field; (4) how to identify the most relevant theory/theories to inform research questions; (5) how to critique and apply these theories in the form of a theoretical model specific to your research question(s); (6) how to test your research question(s) in a way that informs theory, and (7) how to think about the implications of theory for designing interventions that address the outcome of interest. For the final assignment, students will have the option of applying their skills in evaluating and applying theory to their own areas of expertise/interest.

Required Readings:

Readings and resources will be posted to the CANVAS course site. Additional required readings selected by students will be posted throughout the class.

Week 1: Jan 24—Course and participant introductions: What is theory and why should we care?

Week 2: Jan 31— What is mental illness? Current dominant conceptualizations.

Bruce, M. & Raue, P. (2013). Mental illness as psychiatric disorder. In . In C. Aneshensel, J., Phelan, & A. Bierman (Eds), *Handbook of the sociology of mental health*, 2nd Ed. (pp. 41-59). New York: Springer.

APA (2013). From planning to publication: Developing DSM-5 Accessed at: <https://www.google.com/search?q=DSM-5+process+of+revision&ie=utf-8&oe=utf-8&client=firefox-b-1>

APA (2013). *Use of the manual*. In *The diagnostic and statistical manual (5th edition)* (pp. 19-24). Arlington, VI: APA. **Available** at: <https://dsm-psychiatryonline-org.ezproxy.library.wisc.edu/doi/full/10.1176/appi.books.9780890425596.UseofDSM5>

APA (2013). *Trauma and stressor-related disorders*. In *The diagnostic and statistical manual (5th edition)* (pp. 19-24). Arlington, VI: APA. (**Skimming is fine**). **Available** at: <https://dsm-psychiatryonline-org.ezproxy.library.wisc.edu/doi/full/10.1176/appi.books.9780890425596.dsm07>

Former NIMH director announcing that distancing of NIH/NIMH is distancing itself from the DSM-5 categorical system:

Insel, T. (April 29, 2013). Blog post: Transforming Diagnosis. Access at: <https://www.nimh.nih.gov/about/directors/thomas-insel/blog/2013/transforming-diagnosis.shtml>

Recommended:

Wikipedia entry on NIMH's "Research Domain Criteria" (**Skimming is fine**). **Available at** https://en.wikipedia.org/wiki/Research_Domain_Criteria

Friedman, M. (2013). Finalizing PTSD in *DSM-5*: Getting Here From There and Where to Go Next. *Journal of Traumatic Stress*, 26, 548-556.

Week 3: Feb 7— How do we measure and study mental illness?

Wakefield, J. & Schmitz, M. (2017). The measurement of mental disorder. In T. Scheid and E. Wright (Eds), *A Handbook for the study of mental health: Social contexts, theories, and systems* 3rd Ed. (pp. 20-44). New York: Cambridge University Press.

Raulin, M. & Lilienfeld, S. (2015). Conducting research in the field of psychopathology. In P. Blaney, R. Krueger & T. Millon (Eds.), *Oxford Textbook of Psychopathology*, 3rd ed. (pp. 100-129). New York: Oxford University Press.

Mirowsky, J. & Ross, C. (2002). Measurement for a Human Science. *Journal of Health and Social Behavior* 43:152-170.

Recommended:

Keyes, Corey. 2002. The Mental Health Continuum: From Languishing to Flourishing in Life. *Journal of Health and Social Behavior* 43:207-222.

Mirowsky, J. (2013). Analyzing associations between mental health and social circumstances. In C. Aneshensel, J., Phelan, & A. Bierman (Eds), *Handbook of the sociology of mental health*, 2nd Ed. (pp. 143-165). New York: Springer.

Week 4: Feb 14—Alternative conceptualizations of mental illness: social constructivism

Rosenhan, D. (1973). On being insane in insane places. *Science*, 179, 250-258.

Szasz, T. (1960). The myth of mental illness. *American Psychologist*, 15, 113-118. Can be accessed at: <http://psychclassics.yorku.ca/Szasz/myth.htm>

Eisenberg, L. (1988). The social construction of mental illness. *Psychological Medicine*, 18, 1-9.

Conrad, P. (1975). The discovery of Hyperkinesis: Notes on the medicalization of deviant behavior, 23 *Social problems*, 12-21.

Horwitz, A. Transforming normality into pathology: The DSM and the outcomes of stressful social arrangements. *Journal of health and social behavior*, 48, 211-222.

Recommended:

Scheff, T. (1999). Social control as a system: In *On being mentally ill*, 3rd ed (pp. 31-51). London: Routledge.

Scheff, T. (1999). The social institution of insanity. In *On being mentally ill*, 3rd ed (pp. 69-100). London: Routledge.

Week 5: Feb 21— Structural determinants of mental illness and wellness

Merton, R. (1938). Social structure and Anomie. *American Sociological Review*, 3(5), 672-682.

Muntaner, C., Ng, E., Vanroelen, C., Christ, S. & Eaton, W. (2013). Social stratification, social closure, and social class as determinants of mental health disparities. In C. Aneshensel, J., Phelan, & A. Bierman (Eds), *Handbook of the sociology of mental health*, 2nd Ed. (pp. 205-228). New York: Springer.

Fenwick, R. & Tausing, M. (2008). Work and the political economy of stress: Recontextualizing the study of mental health/illness in sociology. In W. Avison, J. McLeod, & B. Pescosolido Eds.(pp 143-168). *Mental health, social mirror*. New York: Springer.

Pugh, T., Hatzenbuehler, M. & Link, B. (2015). Structural stigma and mental illness. Commissioned Paper, Mailman School of Public, Columbia University.

Recommended:

Brown, T. (2003). Critical race theory speaks to the sociology of mental health: Mental health problems produced by social stratification. *Journal of Health and Social Behavior*, 44, 292-301.

Week 6: Feb 28-- Critical theories pertaining to mental illness: Feminism, Marxism

Cohen, B. (2016) *Psychiatric Hegemony: A Marxist theory of mental illness*. London: Macmillen.

Ch. 1: Introduction: Thinking critically about mental illness (pp. 1-26)

Ch. 2: Marxist theory and mental illness: A critique of political economy (pp 27-67)

Brown, L. (2000). Discomforts of the powerless: Meaning making frameworks for psychotherapy: Feminist constructions of distress. In R. Neimeyer & J. Raskin (eds.), *Constructions of disorder: Meaning making frameworks for psychotherapy* (pp. 287-308). Washington, DC: American Psychological Association.

Recommended:

Schultz W. & Hunter, N. (2016). Depression, chemical imbalances, and feminism. *Journal of Feminist Family Therapy: An International Forum*, 28 (4), 159-173.

Week 7: March 7-- Stress and coping theory & Life course Perspectives

Pearlin, L. (1989). The sociological study of stress. *Journal of Health and Social Behavior*, 30(3), 241-256.

Schwartz, S. & Meyer, I. (2010). Mental health disparities research: The impact of within and between group analyses on tests of social stress hypotheses. *Social Science & Medicine*, 70, 1111-1118.

George, L. (2008). Life course perspectives on social factors and mental illness. In W. Avison, J. McLeod, & B. Pescosolido Eds.(pp 191-219). *Mental health, social mirror*. New York: Springer.

Week 8: March 14—Cognitive and behavioral theories

Peterson, C. (2010). Psychological approaches to mental illness. In T. Scheid, Teresa L. & T. Brown (Eds.), *A handbook for the study of mental health: Social contexts, theories, and systems*, 2nd ed., (pp. 89-105), New York: Cambridge University Press.

Hughes, M., Panzarella, C., Alloy, L. and Abramson, L. (2007). Mental illness and mental health. In F. Durso, R. Nickerson, S., Dumais (Eds). *Handbook of applied cognition* (pp. 629-658). Hoboken, NJ, US: John Wiley & Sons Inc.

Beck, A., Rector, N., Stolar, N. & Grant, P. (2009). A cognitive conceptualization of delusions. In *Schizophrenia: Cognitive theory, research and therapy* (pp. 62-101). New York: The Guilford Press.

Recommended:

Leichsenring, F. & Steinert, C. (2017). Is Cognitive Behavioral Therapy the Gold Standard for Psychotherapy? The Need for Plurality in Treatment and Research. *JAMA*, 1323-1324.

Week 9: March 21— Attachment theory & Psychodynamic Conceptualizations

Shilkret, R. & Shilkret, C. (2011). Attachment theory. In Berzoff, J. Flanagan, L. & Hertz, P. (Eds.), *Inside out and outside in: Psychodynamic* (pp. 196-219). London: Rowman & Littlefield.
Schwannauer, M. & Gumley, A. (2014). Attachment theory and psychosis. In A. Danquah & K. Berry (Eds.), *Attachment theory in adult mental health* (pp. 63- 77). New York: Routledge.

Schwannauer, M. & Gumley, A. (2014). Attachment theory and psychosis. In A. Danquah & K. Berry (Eds.), *Attachment theory in adult mental health* (pp. 63- 77). New York: Routledge.

OR

Busch, F., Rudden, M. & Shapiro, T. (2004). Development of a psychodynamic theory of depression. In *Psychodynamic treatment of depression* (pp. 13-30). Washington DC: American Psychiatric Publishing, Inc.

Allen, J., Hauser, S. Borman-Spurrell, E. (1996). Attachment theory as a framework for understanding sequelae of severe adolescent psychopathology: An 11-year follow-up study *Journal of Consulting and Clinical Psychology*, 64(2), 254-263.

Week 10: March 28— Spring Break. ENJOY!!

Week 11: April 4—Biological theories (Neurochemistry)

Nikolas, M., Markon, K. & Tranel, D. (2016). Psychopathology: A neurobiological perspective. In J. Maddux & B. Winstead (Eds), *Psychopathology: Foundations for a contemporary understanding*, 4th ed. (pp. 27-58). New York: Routledge.

Schwartz, S. & Corcoran, C. (2017). Biological approaches to psychiatric disorders: A Sociological Approach. In T. Scheid and E. Wright (Eds), *A Handbook for the study of mental health: Social contexts, theories, and systems* 3rd Ed. (pp. 98--125). New York: Cambridge University Press.

Casey, B. & Jones, R. (2010). Neurobiology of the Adolescent Brain and Behavior: Implications for Substance Use Disorders. *Journal of American Academy of Child & Adolescent Psychiatry* 2010; 49(12), 1189-1202.

Week 12: April 11—Epigenetic research

Guest presenter: Anthony Auger, Professor, Department of Psychology at UW Madison

Readings TBD

Week 13: April 18— Developmental Psychopathology

Guest presenter: James Li, Assistant Professor, Department of Psychology at UW Madison

Rutter, M. & Stroufe, A. (2000). Developmental psychopathology: Concepts and challenges. *Development and Psychopathology*, 12, 265-296.

Li, J. (2017). Assessing the interplay between multigenic and environmental influences on adolescent to adult pathways of antisocial behavior. *Development and Psychopathology*, 29, 1947-1967.

Rutter, M., Kumsta, R., Schlotz, W. & Sonuga-Barke, E. (2012). Longitudinal studies using a “natural experiment” design: The case of adoptees from Romanian institutions. *Journal of the American Academy of Child and Adolescent Psychiatry*, 51(8), 762-770.

Week 14: April 25—Mental illness through (cross) cultural lenses

Guest presenter: Earlise Ward, Associate Professor, UW Madison School of Nursing (9:30-10:45)

Readings TBD

Week 15: May 2-- Phenomenological accounts of mental illness

Karp, D. and Birk, L. (2013). Listening to Voices: Patient experiences and the meanings of mental illness. In C. Aneshensel, J., Phelan, & A. Bierman (Eds), *Handbook of the sociology of mental health*, 2nd Ed. (pp. 23-40). New York: Springer.

Karp, D.A.: 1996, *Speaking of Sadness. Depression, Disconnection, and the Meanings of Illness*, Oxford University Press, Oxford.

Chernomas, W., Clarke, D. & Chisholm, F. (2000). Perspectives of women living with schizophrenia. *Psychiatric Services*, 51(12), 1517-1521.

Assignments

- 20% Class participation
- 20% Paper and co-facilitation 1
- 20% Paper and co-facilitation 2
- 40% Final Paper (or alternate assignment)

Grading Scale for scoring assignments:

100 point scale	Final Grade	Criteria of Work Quality
94-100	A	Outstanding
90-93	AB	Very good
84-89	B	Good
80-83	BC	Fair
74-79	C	Poor
73 or below	D/F	Very Poor

1. Class Attendance and Participation (15%)

Attendance and active participation in class discussions and exercises are expected. This is a graduate-level seminar in which your ability to critically think about and discuss readings and course material is central. You should also actively demonstrate how course content applies to your personal research interests, and be prepared to engage in analytical discussions with classmates about their research interests. Seminars only work if people are prepared and can learn from each other. *Doing the reading is only a start – grappling critically with the reading and comparing one's own interpretations with others' interpretations is where the real learning comes from.*

You may miss one class without having to do a make-up assignment. If you miss more than one seminar session, you will have to do an assignment (content at my discretion) each week you miss. If you know in advance you will be missing the class, please let me know, otherwise check with me after the missed class about how you need to make it up

4. Final Paper/Alternate assignment (35%) – Choice of assignment is due on 5th week of class: Feb 21; outline/thesis of paper due by March 21st; final paper is due May 9th.

All paper options are expected to be ~ 15-20 pages double-spaced, 12 point font, 1 inch margins. Feel free to meet with me about this.

Assignment choice 1: Write a final paper that applies one or more theory(ies) or approach(es) covered in class to your area of interest. This paper would explore how your substantive area could benefit from integration of theories covered in class.

Assignment choice 2: Write a final paper that takes your area of interest and critiques the use of theory in this area. You would summarize the primary theories used, critique their use, and discuss how research could move forward in your field either applying these theories better (what would that look like?) or using or integrating other theories (what would that look like?).

Assignment choice 3: Propose a final assignment to me that would help you learn to critique and apply theory.

Evaluating the use of a theory in a research paper

The application of the theory

- 1) When describing the theory in the introduction of the paper, did the authors correctly summarize the theory?
- 2) Did they highlight all the most important parts of the theory or were they selective in what they highlighted?
- 3) If the latter, what did they leave out, and how does that affect how they motivate or answer their question in this paper?
- 4) Was this paper about testing and extending a theory, or using the theory to motivate a question? (If the latter, particularly consider meta questions below)
- 5) If the paper was about testing a theory, did they set up a test that would allow them to be wrong (did they allow for falsification)?
- 6) How true is their conceptual model (the conceptual model they actual model or test) to the theory?
- 7) If they have a conceptual model (either an explicit or implicit one) did they include all variables suggested by the theory? If not, how might this affect their findings and implications?
- 8) In their empirical tests, did they measure each of the constructs appropriately? (Do the measures have face validity? Have they been used by others and were they validated? Do the measures seem better or worse than the ones used by others? Are there major limitations in how the constructs were measured?) How might this affect their findings and implications?
- 9) If they included concepts and variables that are not part of the theory, did they give adequate justification, and how does this help or hinder their analysis, results, and implications?
- 10) In their discussion of the findings, do they use language appropriate to their analysis... do they talk about testing or proving? Do they weigh their own results impartially so that they don't suggest supporting their theory when the evidence they present doesn't suggest it?
- 11) In their discussion of the findings, if they find evidence contrary to expectation, do they discuss limitations of their test, the possibility that their expectations were faulty (competing hypotheses), or both?

Meta questions

- 1) How did the choice of this theory extend knowledge in new ways?
 - Did it build on previous knowledge and extend in appropriate ways?
 - Did it question previous knowledge?
- 2) What are the known limitations of this theory and/or what do you think its limitations are in investigating this domain, question, or with this population?
- 3) How did the choice of this theory limit the type of question that was asked?
 - e.g., Is the theory limited in the level of analysis it considers (individual, family, community, societal)?

- 4) How did the choice of this theory limit the types of answers to the question that could be tested?
- e.g., Did use of this theory leave out competing answers to the question asked? How are policy and practice suggestions limited by the type of theory used and the questions asked?