

**Mental Illness and Oppression in the United States**  
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Our weeks together will include:

- Lectures accompanied by a selection of online films, videos, magazine/newspaper articles, academic papers, original documents –
- examination of the ways in which race, class, gender, sexual expression, age, intersect with a person's diagnosis, treatment, and prognosis –
- a close exploration of the mental illness industry and the spiritual/emotional consequences of its maintenance –
- pastoral resources to help us, as religious professionals, companion people who are marginalized because of mental illness –
- safe, respectful class discussion and reflection about topics having to do with mental illness, with support from classmates and instructor

**1. 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.

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

**3. Institutions and mental illness – looking at the past:** This week we will look at the way “lunatics” and other people with mental illnesses 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 mental illness treatment, 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 illness is 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 illness 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 illness 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 illness and the "corrections" system:** This week we will look at the increase in incarceration of people who have mental illness. More people who live with mental illness are in jails and prisons than are in hospitals.

**10. Mental illness and the educational system:** It is an understatement to say that it's not easy to be a student or a teacher if one lives with mental illness. This week we will look at the higher education system and people's experiences.

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

**12. Mental illness 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.

**13. Mental illness 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 illnesses and dementias.

**14. 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?

**Required book:**

Just one inexpensive paperback: “Crazy Like Us” by Ethan Watters