

[See this page in the course material.](#)

Learning Outcomes

- Explain mental health and disability issues as they relate to society in the United States

Mental Health and Disability

The treatment received by those defined as mentally ill or disabled varies greatly from country to country. In the post-millennial United States, those of us who have never experienced such a disadvantage take for granted the rights our society guarantees for each citizen. We do not think about the relatively recent nature of the protections, unless, of course, we know someone constantly inconvenienced by the lack of accommodations or misfortune of suddenly experiencing a temporary disability.

Mental Health

People with mental disorders (a condition that makes it more difficult to cope with everyday life) and people with mental illness (a severe, lasting mental disorder that requires long-term treatment) experience a wide range of effects.

According to the National Institute of Mental Health (NIMH), one in five adults in the U.S. live with a mental illness, numbering 46.6 million in 2017 (Citation M).^[1] The most common mental disorders in the United States are **anxiety disorders**. It is important to distinguish between occasional feelings of anxiety and a true anxiety disorder. Anxiety is a normal reaction to stress that we all feel at some point, but anxiety disorders are feelings of worry and fearfulness that last for months at a time. Anxiety disorders include obsessive compulsive disorder (OCD), panic disorders, posttraumatic stress disorder (PTSD), separation anxiety disorder, and both social and specific phobias. The NIMH reports that the prevalence of any anxiety disorder is higher for females than for males, estimating the prevalence at 23.4% and 14.3%, respectively. Anxiety is a prominent mental condition; one in three U.S. adults experience any anxiety disorder at some point throughout their lives.

The second most common mental disorders in the United States are **mood disorders**; roughly 10 percent of U.S. adults are likely to be affected yearly, while 21 percent are likely to be affected over the course of a lifetime (National Institute of Mental Health 2017). Major mood disorders are depression, bipolar disorder, and dysthymic disorder. Like anxiety, depression might seem like something that everyone experiences at some point, and it is true that most people feel sad or “blue” at times in their lives. A true depressive episode, however, is more than just feeling sad for a short period. It is a long-term, debilitating illness that usually needs treatment to cure. And bipolar disorder is characterized by dramatic shifts in energy and mood,

often affecting the individual's ability to carry out day-to-day tasks. Bipolar disorder used to be called manic depression because of the way people would swing between manic and depressive episodes. As with anxiety disorders, mood disorders are more prevalent among females than among males, and over 20% of adults in the U.S. experience a mood disorder at some point throughout their lifetime.

Depending on what definition is used, there is some overlap between mood disorders and **personality disorders**, which affect 9 percent of people in the United States yearly. Unlike with other types of mental disorders, there is no significant gender difference, although 84% of individuals with personality disorders also had one or more other mental disorders.

After a multilevel review of proposed revisions in the early 2010's, including reducing the number of listed personality disorders to six, the American Psychiatric Association Board of Trustees ultimately decided to retain the DSM-IV categorical approach in the new DSM-5 with the same ten personality disorders (paranoid personality disorder, schizoid personality disorder, schizotypal personality disorder, antisocial personality disorder, borderline personality disorder, histrionic personality, narcissistic personality disorder, avoidant personality disorder, dependent personality disorder and obsessive-compulsive personality disorder). Personality disorders represent "an enduring pattern of inner experience and behavior that deviates markedly from the expectations of the culture of the individual who exhibits it" (National Institute of Mental Health). In other words, personality disorders cause people to behave in ways that are seen as abnormal and deviant to society but seem normal to them. During revisions to the DSM, there were proposals to broaden this definition, and there was heated debate over the appropriate labels and proper diagnosis for personality disorders. As you've learned in this module already, the label we give an illness can impact how the affected person views themselves as well as how they are treated by others.

Link to Learning

Interested in seeing more statistics about mental health or specific mental disorders/illnesses? Visit the [NIMH statistics website](#).

You can also watch this [CrashCourse video "Personality Disorders"](#) covering the types of personality disorders.



Figure 1. Medication is a common option for children with ADHD. (Photo courtesy of Deviation56/Wikimedia Commons)

Another fairly commonly diagnosed mental disorder is Attention-Deficit/Hyperactivity Disorder (ADHD), which statistics suggest affects 11% percent of children and 8 percent of adults on a lifetime basis (National Institute of Mental Health 2017). ADHD is one of the most common childhood disorders, and it is marked by difficulty paying attention, difficulty controlling behavior, and hyperactivity. According to the American Psychological Association (APA), ADHD responds positively to stimulant drugs like Ritalin, which helps people stay focused. However, there is some social debate over whether such drugs are being over-prescribed (American Psychological Association) Consider the opioid crisis in relation to this; do we begin over-prescribing drugs targeted at children, and perhaps *create* a dependency and cycle? Some critics question whether this disorder is really as widespread as it seems, or if it is a case of over diagnosis. According to the Centers for Disease Control and Prevention, only 5 percent of children have ADHD. However, approximately 11 percent of children ages four through seventeen have been diagnosed with ADHD as of 2011. Contrary to what is observed with many other types of mental disorders, ADHD is more prevalent among males than among females.

Autism Spectrum Disorders (ASD) have gained a lot of attention in recent years. The term ASD encompasses a group of developmental brain disorders that are characterized by “deficits in social interaction, verbal and nonverbal communication, and engagement in repetitive behaviors

or interests” (National Institute of Mental Health). Just over 1.5% of 8-year-old children were diagnosed as having ASD. Like with ADHD, ASD is more prevalent among boys than among girls, with boys being four times as likely to be diagnosed with ASD.

The National Institute of Mental Health (NIMH) distinguishes between serious mental illness and other disorders. The key feature of serious mental illness is that it results in “serious functional impairment, which substantially interferes with or limits one or more major life activities” (National Institute of Mental Health). Thus, the characterization of “serious” refers to the *effect* of the illness (functional impairment), not the illness itself.

Try It

What are the most commonly diagnosed mental disorders in the United States?

☐ Autism spectrum disorders

[See this interactive in the course material.](#)

Disability



Figure 2. The handicapped accessible sign indicates that people with disabilities can access the facility. The Americans with Disabilities Act requires that access be provided to everyone. (Photo courtesy of Ltjltlj/Wikimedia Commons)

Disability refers to a reduction in one's ability to perform everyday tasks. The World Health Organization makes a distinction between the various terms used to describe handicaps that's important to the sociological perspective. They use the term **impairment** to describe the physical limitations, while reserving the term disability to refer to the social limitation.

Before the passage of the Americans with Disabilities Act (ADA) in 1990, people in the United States with disabilities were often excluded from opportunities and social institutions many of us take for granted. This occurred not only through employment and other kinds of discrimination, but also through casual acceptance by most people in the United States of a world designed for the convenience of the able-bodied. Imagine being in a wheelchair and trying to use a sidewalk without the benefit of wheelchair-accessible curbs. Imagine as a blind person trying to access information without the widespread availability of Braille. Imagine having limited motor control and being faced with a difficult-to-grasp round door handle. Issues like these are what the ADA tries to address. Ramps on sidewalks, Braille instructions, and more accessible door levers are all accommodations to help people with disabilities.

People with disabilities can be stigmatized by their illnesses. **Stigmatization** means their identity is spoiled; they are labeled as different, discriminated against, and sometimes even shunned. They are labeled (as an interactionist might point out) and ascribed a master status (as a functionalist might note), becoming "the blind girl" or "the boy in the wheelchair" instead of someone afforded a full identity by society. This can be especially true for people who are

disabled due to mental illness or disorders.

As discussed in the section on mental health, many mental health disorders can be debilitating and can affect a person's ability to cope with everyday life as well as their social interactions. This can affect social status, housing, and especially employment. According to the Bureau of Labor Statistics (2019), people with a disability had a higher rate of unemployment than people without a disability in 2018—8 percent compared to 3.7 percent. This unemployment rate refers only to people actively looking for a job. In fact, four out of five people with a disability are considered “out of the labor force;” that is, they do not have jobs and are not looking for them. The combination of this population and the high unemployment rate leads to an employment-population ratio of 19.1 percent among those with disabilities. The employment-population ratio for people without disabilities was much higher, at 65.9 percent (U.S. Bureau of Labor Statistics 2019).^[2]

Obesity: The Last Acceptable Prejudice



Figure 3. Obesity is considered the last acceptable social stigma. (Photo courtesy of Kyle May/flickr)

What is your reaction to the picture above? Compassion? Fear? Disgust? Many people will look at this picture and make negative assumptions about the man based on his weight. According to a study from the Yale Rudd Center for Food Policy and Obesity, large people are the object of “widespread negative stereotypes that overweight and obese persons are lazy, unmotivated, lacking in self-discipline, less competent, non-compliant, and sloppy” (Puhl and Heuer 2009).

Historically, both in the United States and elsewhere, it was considered acceptable to discriminate against people based on prejudiced opinions. Even after slavery was abolished in 1865, the next 100 years of U.S. history saw institutionalized racism and prejudice against black people. In an example of stereotype interchangeability, the same insults that are flung today at the overweight and obese population (lazy, for instance), have been flung at various racial and ethnic groups in earlier history. Of course, no one gives voice to these kinds of views in public now, except when talking about obese people.

Why is it considered acceptable to feel prejudice toward—even to hate—obese people? Puhl and Heuer suggest that these feelings stem from the perception that obesity is preventable through self-control, better diet, and more exercise. Highlighting this contention is the fact that studies have shown that people’s perceptions of obesity are more positive when they think the obesity was caused by non-controllable factors like biology (a thyroid condition, for instance) or genetics.

Even with some understanding of non-controllable factors that might affect obesity, obese people are still subject to stigmatization. Puhl and Heuer’s study is one of many that document discrimination at work, in the media, and even in the medical profession. Obese people are less likely to get into college than thinner people, and they are less likely to succeed at work. Recent research finds that discrimination against obese people is still pervasive in employment.^[3]

Stigmatization of obese people comes in many forms, from the seemingly benign to the potentially illegal. In movies and television shows, overweight people are often portrayed negatively, or as stock characters who are the butt of jokes. One study found that in children’s movies “obesity was equated with negative traits (evil, unattractive, unfriendly, cruel) in 64 percent of the most popular children’s videos. In 72 percent of the videos, characters with thin bodies had desirable traits, such as kindness or happiness” (Hines and Thompson 2007). In movies and television for adults, the negative portrayal is often meant to be funny. “Fat suits”—inflatable suits that make people look obese—are commonly used in a way that perpetuates negative stereotypes. Think about the way you have seen obese people portrayed in movies and on television; now think of any other subordinate group being openly denigrated in such a way—it is difficult to find a parallel example.

Think It Over

- Do you know anyone with a mental disorder? How does it affect his or her life?

Try It

Sidewalk ramps and Braille signs are examples of _____.

☐ discrimination

[See this interactive in the course material.](#)

The high unemployment rate among the disabled may be a result of _____.

☐ medicalization

[See this interactive in the course material.](#)

glossary

anxiety disorders: feelings of worry and fearfulness that last for months at a time disability: a reduction in one's ability to perform everyday tasks; the World Health Organization notes that this is a social limitation impairment: the physical limitations a less-able person faces mood disorders: long-term, debilitating illnesses like depression and bipolar disorder personality disorders: disorders that cause people to behave in ways that are seen as abnormal to society but seem normal to them stigmatization: the act of spoiling someone's identity; they are labeled as different, discriminated against, and sometimes even shunned due to an illness or disability

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1. National Institute of Mental Health (2017). Retrieved from <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>. ↵
 2. U.S. Bureau of Labor Statistics (2019). *Persons with a Disability: Labor Force Characteristics Summary*. Retrieved from <https://www.bls.gov/news.release/disabl.nr0.htm>. ↵
 3. Stuart W. Flint, Martin Čadek, Sonia C. Codreanu, Vanja Ivić, Colene Zomer, Amalia Gomoiu Front Psychol. 2016. *Obesity Discrimination in the Recruitment Process: "You're Not Hired!"* 7: 647. Published online 2016 May 3. doi: 10.3389/fpsyg.2016.00647 ↵

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