Harvard T.H. Chan School of Public Health

**SBS 2015 Society and Mental Health**

**Fall 1 2025**

**Thursdays 3:45-6:45PM**

Kresge G-2

**Instructor**

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## Faculty Welcome Statement

I am thrilled to welcome you to this fascinating journey of exploring the ways in which the larger society can affect our risks for developing mental health problems, and can also be a promoter of enhanced mental health and psychological well-being. I have studied mental health for decades. For example, I directed the first national study of mental disorders in sub-Sahara Africa (in South Africa) and I co-directed the National Study of American Life (NSAL) -- the largest study of mental disorders in the African American population in the U.S. and the first study to include a national probability sample of Black Caribbean immigrants and their children and grandchildren. I have also been a part of research teams that have conducted other mental health studies in the U.S.

## Course Purpose and Description

Poor mental health and mental disorders are often perceived as driven primarily by biological or genetic factors. However, how mental health is even defined and measured is shaped by societal factors, and exposure to societal risks and resources are critical contributors to variations in mental health and mental illness within the population. This course will provide an overview of multiple, major social factors that affect the risk of mental health and mental illness, and the ways in which modern societies can and should respond to these risks.

## Course Learning Objectives

Upon successful completion of this course, you should be able to:

* Objective 1: Discuss how mental illness is/and should be defined and measured, and how some of these influences have changed over time, with emphasis on the consequences for vulnerable populations.
* Objective 2: Describe the overall levels of mental disorders in contemporary societies, and the population groups that are experiencing elevated levels of risk.
* Objective 3: Identify the living and working conditions and psychosocial stressors that are predictive of increased risk of mental health challenges
* Objective 4: Discuss how inequities in access to power, status and resources can contribute to often unrecognized risk factors for mental health problems, and the importance of comprehensively assessing and addressing, neglected stressors and adversities that can be triggers of mental health problems.
* Objective 5: Describe challenges that exist for some population groups in terms of access to mental health services and the receipt of high quality mental health services
* Objective 6: Identify psychosocial resources such as the quality of social ties, that that can enhance mental health
* Objective 7: List multiple innovations in the delivery of mental health services that can enhance the quality of mental health care that clients receive.

**Required Reading Material:** Readings available on the course website

## Pre-Requisites: There are no prerequisites needed to enroll in this course.

## Credits: 2.5 credits

## Course Structure

This course will consist of lectures, active discussion, and other course activities, as described below. Students are expected to come to class having read the assigned readings for the week and prepared to discuss and critically engage with the readings and lecture material.

The Requirements for the course are:

1. **Attendance and class participation**. Attendance and participation in class activities are required. Students are expected to actively engage in classroom discussions. Class participation will be evaluated using the following rubric: 1) being present for the class; 2) extent of contribution; 3) thoughtfulness of comments; 4) active engagement with course material; 5) ability to remain open to controversial viewpoints. Absences are excused in the event of a personal illness or family emergency. In those instances, absences from class will not count against the class participation policy, and students will be given an opportunity to make up missed work.
2. **Weekly readings.**Each week, students are assigned a series of readings related to the discussion in the upcoming class period. It is expected that students will come to class having read the required readings for that week and will come to class prepared to discuss them.

All of the required readings for the course will be posted on the Canvas site for the course.

**Instructions for Reading and Analyzing the Required Papers**

Each week, you will be assigned multiple scientific papers to read. These are not book chapters that provide an overview or synthesis of research findings in a specific area. Instead, they are research papers that report on a specific study and its findings. The number of required readings may initially *appear* to be a heavy lift, accordingly, to keep your workload manageable, I am providing some detailed guidance that will enable you to read the papers efficiently and effectively.

*What you should focus on for each paper (study):*

1. The Introduction:

Identify the research question(s**)**: Quickly skim the introduction to understand what the study aimed to address. What was the main question or problem explored, or hypothesis being tested?

1. The Key Findings:

Move through the results and discussion sections to identify the major findings of the study. You do not need to understand every single statistic or analytic approach, but grasp what the study concluded.

1. The take-home message: What is the overarching conclusion the authors want you to remember? What has this study contributed to the larger field?
2. What to avoid:

You do **not** need to read every word in each section, nor do you need to delve deeply into the methodologies or complex statistical analyses unless they directly inform the key findings.

1. Your goal is to walk away with a clear understanding of:

What question(s) was (were) the study focused on (the purpose? the research questions?).

What did the study find? (the key results).

Why do these findings matter? (the take-home message).

By approaching the readings in this way, you will develop the ability to quickly grasp the big picture and major contributions of a scientific paper, which is essential for efficient and effective learning in this course.

**Recommended Readings:** Each weekthere is a somewhat lengthy list of recommended readings. **There is absolutely no need to engage with them.** They are provided as a useful resource, now and/or in the future, for any student who would like to delve more deeply into a given topic They can be an especially helpful starting point for a student who wants to write the required final paper on the topic addressed in a particular class session.

1. **Stress and Coping Health Diary**

Each student will keep a health diary for **one week**. For each day, record any stressful experiences, and your feelings, and reactions to events. Any bodily state that you notice is worth recording. Examples include difficulty concentrating, feeling nervous, irritable, lonely, bitter, bloated, enthusiastic, pleased or excited. Start by noting how you felt when you awoke in the morning. Record your experiences as close as possible to the actual events, describe the condition, any event that may have triggered it, and what you did about it. For example, "my head started to hurt around 2:00 am, because my room-mate's music was still very loud. Since I did not want a fight, I decided to take a couple of aspirins." At the end of **each day, pick out the most stressful experience for that day.** For each of these "most stressful experiences":

1. Describe what happened and what was stressful about it

2. Describe the strategies you used to deal with it

3. Discuss the ways in which other people may have made this experience harder or easier for you:

* Did anyone help you deal with it? How?
* Did anyone disappoint you when you needed help?
* Did others contribute to the stressfulness of the experience?
* Did other people receive help from you about a problem they were having?

Write a paper analyzing your diary. What does your diary tell you about yourself, your health, your use of health care and how your social environment affects your emotions and your mental health? Does it tell you anything about occupying certain roles in society: being a student, employee, having a particular sexual orientation? Does it say anything about your emotional responses to stress and/or your mental health more generally? The paper, based on the diary, will be during the week 5 class of the course. The diary is personal and confidential and should not be submitted.

1. **Weekly questions**. The study of mental health challenges, as well as their determinants and consequences will be new for many students. This class wants to create a safe space where there can be discussion of the research findings. On the first day of class each student will indicate on a sign-up sheet which class session the student would like to be a discussant for. Each student will be asked to develop ***three******questions*** *based on the readings for that one class session* . Each question posed should directly relate to one of the ***required readings for that session***. These questions may pertain to the research area at large and each of the three questions should relate to a *different* assigned reading. All three questions should be submitted to the Dropbox via the course website by 8pm on the day before class. Please also bring the three questions to class, so that they can be shared and discussed. All students are encouraged to review the course website in advance of each week’s session so that they will be prepared to critically respond to each of the questions, responses, and to generate additional points for discussion.
2. **Final paper.** Each student will prepare a final paper. For the paper the student will select one issue related to a social factor that affects, or is affected by risk factors for mental health status, mental health treatment, outcomes of treatment, or health care provision. The paper should critically assess the research literature in the area and 1) advance a theoretically and/or empirically based argument about the origins and dynamics of the issue or problem OR 2) of needed research to understand its determinants, OR 3) of a comprehensive intervention to address it. The paper will be graded based on the following criteria: adequate assessment of the literature with a thorough discussion of the causes or determinants of the issue or problem OR of the needed research to understand its determinants, OR of a comprehensive intervention to address it. The paper should be about 6-8 pages in length, double-spaced, excluding references. Outlines for paper topics can be submitted to the teaching assistant or instructor for review at any time.

The paper is due on the last day of class. One copy should be uploaded to the dropbox on the Canvas site and one copy should be printed out and turned in at the beginning of class.

## Assessment of Learning

The final grade for this course will be based on:

Weekly Attendance: 20%

Stress Diary: 20%

Weekly questions: 10%

Final paper: 50%

### Late Work and Extension Policy

All late submission of work will be penalized unless there is an excuse because of personal illness or a family emergency. Any formal accommodations (for extra time, for example) should be made through the Office for Student Affairs’ Student Support Services at studentsupport@hsph.harvard.edu.]

## Harvard Chan Policies and Expectations

### Inclusivity Statement

Diversity and inclusiveness are fundamental to public health education and practice. It is a requirement that you have an open mind and respect differences of all kinds. We share responsibility with you for creating a learning climate that is hospitable to all perspectives and cultures; please contact us if you have any concerns or suggestions.

### Bias Related Incident Reporting

The Harvard Chan School believes all members of our community should be able to study and work in an environment where they feel safe and respected. As a mechanism to promote an inclusive community, we have created an anonymous bias-related incident reporting system. If you have experienced bias, please [submit a report here](https://reportinghotline.harvard.edu/) so that the administration can track and address concerns as they arise and to better support members of the Harvard Chan community.

### Title IX

For information on Harvard University policies and procedures and Title IX Resource Coordinators at Harvard Chan, please see:

* [Harvard University Title IX Sexual Harassment and Other Sexual Misconduct policies and procedures](https://titleix.harvard.edu/policies-procedures)
* [Title IX Resource Coordinators](https://titleix.harvard.edu/coordinators)
* [Title IX Sexual Harassment and Other Sexual Misconduct resource guide](https://titleix.harvard.edu/resource-guide)

### Academic Integrity

You are expected to abide by the Harvard University and the Harvard T.H. Chan School of Public Health School’s standards of Academic Integrity in conjunction with the expectations outlined in the Course Structure and Assessment of Learning section of this syllabus. All work submitted to meet course requirements is expected to be your own work. In the preparation of work submitted to meet course requirements, you should always take great care to distinguish your own ideas and knowledge from information derived from sources.

You must assume that collaboration in the completion of assignments is prohibited unless explicitly specified. You must acknowledge any collaboration and its extent in all submitted work. This requirement applies to collaboration on editing as well as collaboration on substance.

Should academic misconduct occur, you may be subject to disciplinary action as outlined in the Student Handbook. [See the Student Handbook](https://www.hsph.harvard.edu/student-handbook/) for additional policies related to academic integrity and disciplinary actions.

### Accommodations for Students with Disabilities

The Harvard T.H. Chan School of Public Health values inclusive excellence and providing equal educational opportunities for all students. Our goal is to remove barriers for disabled students related to inaccessible elements of instruction or design in this course. If reasonable accommodations are necessary to provide access, please contact studentsupport@hsph.harvard.edu. Accommodations do not alter fundamental requirements of the course and are not retroactive. Students should request accommodations as early as possible, since they may take time to implement. Students should notify studentsupport@hsph.harvard.edu at any time during the semester if adjustments to their communicated accommodation plan are needed.

### Religious Holidays, Absence Due to

According to Chapter 151c, Section 2B, of the General Laws of Massachusetts, any student in an educational or vocational training institution, other than a religious or denominational training institution, who is unable, because of his or her religious beliefs, to attend classes or to participate in any examination, study, or work requirement on a particular day shall be excused from any such examination or requirement which he or she may have missed because of such absence on any particular day, provided that such makeup examination or work shall not create an unreasonable burden upon the School. [See the Student Handbook](https://www.hsph.harvard.edu/student-handbook/) for more information.

### Grade of Absence from Examination

If you cannot attend a regularly scheduled examination, you must request permission for an alternate examination from us in advance of the examination. [See the Student Handbook](https://www.hsph.harvard.edu/student-handbook/) for more information.

### Final Examination Policy

You should not be required to take more than two examinations during any one day of finals week. If you have more than two examinations scheduled during a particular day during the final examination period, you may take your class schedule to the director for student affairs for assistance in arranging for an alternate time for all exams in excess of two. [See the Student Handbook](https://www.hsph.harvard.edu/student-handbook/) for more information.

### Course Evaluation

Your feedback makes a difference. We appreciate knowing what worked well and what needs improvement in our course. In addition, your feedback enables the Committee on Educational Policy to recognize outstanding teaching, to offer faculty development coaching and training opportunities, to aid department chairs in assigning teaching responsibilities, and to inform the deliberation of faculty appointment committees.

The course evaluation system opens during the last week of term and stays open for three weeks. Evaluations may be accessed via Canvas or by following the links in invitation emails. Responses are confidential, and identifying information is never shared with us. You may see your grades once you have completed all available course evaluations; we will receive our evaluation report after the evaluation window closes and only if all grades are submitted in my.harvard.

**Course Schedule**

1. September 4, 2025 Introduction to the course; Prevalence of Mental Disorders; What is Mental Illness? How to measure it?
2. September 11, 2025 Social Factors and Mental Health: Stress, Social Conditions, SES, Race & Ethnicity, Racism
3. September 18, 2025 The role of larger Environment Factors, and Stigma in Mental Health
4. September 25, 2025 How Gender, LGBTQ+ Status, and Migration Can Affect Mental Health
5. October 2, 2025 Neglected Stressors & Mental Health: Early Childhood Stress & Large Socio-Political Policies & Events
6. October 9, 2025 Mental Health challenges of Children and Youth; the role of Resilience factors & Protective Resources
7. October 16, 2025 The costs of Mental Illness: Economic Costs and negative effects on Physical Health
8. October 23, 2025 Maximizing the use of mental health services by reducing barriers and deploying innovative interventions

**WEEK 1 (SEPTEMBER 4)**

**SESSION 1:** Welcome to the Course and an overview of the Prevalence of Mental Disorders in the US and Elsewhere

**Assignment/Activities**

* Review Syllabus
* Sign up for Weekly questions for a future class session
* First Lecture

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Outline key aspects of the course as explained in the Syllabus and identify the course policies**
2. **Understand Key Findings on Mental Health Prevalence**
3. **Identify Global Patterns of Mental Disorders**
4. **Examine Cultural Variations in Mental Health Epidemiology**
5. **Discuss how cultural, economic, and social factors can contribute to variations in the prevalence and expression of mental disorders worldwide.**

These objectives encourage students to critically engage with the readings, understand mental health trends across different cultures, and consider the broader implications for public health and policy development.

**REQUIRED READINGS**

1. Kessler, Ronald C., Olga Demler, Richard G. Frank, …., & Alan M. Zaslavsky. "Prevalence and treatment of mental disorders, 1990 to 2003." *New England Journal of Medicine* 352, no. 24 (2005): 2515-2523.
2. Kessler, R.C., Bromet, E.J. (2013). The epidemiology of depression across cultures. Annual Review of Public Health, 34, 119-138.

**Recommended Reading**

1. Horwitz, Allan V. 2011. “Creating an Age of Depression: The Social Construction and Consequences of the Major Depression Diagnosis.” *Society and Mental Health* 1(1):41–54.
2. Halpin, Michael. 2016. “The DSM and Professional Practice: Research, Clinical, and Institutional Perspectives.” Journal of Health and Social Behavior 57:153-167.
3. de Jonge, P., Wardenaar, K.J., Lim, C.W…, Kessler, R.C., Scott, K., on behalf of the WHO World Mental Health Survey Collaborators. (2018). The cross-national structure of mental disorders: results from the World Mental Health Surveys. Psychological Medicine, 48(12), 2073-2084.

**SESSION 2:** **What is Mental Illness and how should we measure it: `The Social Construction of Mental Illness?**

**Objectives**

Upon successful completion of this session, you should be able to:

**1. Examine the Concept of Mental Illness**

* Critically analyze Thomas Szaz's (1960) argument in "The Myth of Mental Illness" and explore the idea that mental illness is socially constructed.
* Debate the distinction between mental illness as a biological fact versus a social and cultural construct.

**2. Understand the Impact of Labels in Mental Health**

* Discuss how psychiatric labels can influence perceptions of normality and abnormality, as well as social treatment of individuals diagnosed with mental disorders.

**3. Evaluate the Measurement of Mental Illness**

* Compare and contrast different approaches to measuring mental illness, considering their strengths and limitations.

**4. Assess the Categorical vs. Dimensional Debate**

* Critically evaluate the benefits and drawbacks of using categorical versus dimensional models for diagnosing and understanding mental health conditions.

**5. Discuss DSM Revisions and Social Variation**

* Discuss how an improved understanding of social determinants and population variation can lead to more accurate mental health diagnoses and better mental health policies.

**6. Critically Engage with the Social Construction of Mental Health**

* Reflect on the role that societal, cultural, and institutional factors play in shaping definitions and perceptions of mental illness.

These objectives help students engage with the philosophical and sociological aspects of mental health, critically assessing how mental illness is defined, measured, and treated in various contexts.

**REQUIRED READINGS**

1. Szaz, Thomas. 1960. “The Myth of Mental Illness” American Psychologist 15:113-118.
2. Rosenhan, David L. 1973. “On Being Sane In Insane Places.” Science 179: 250-258
3. Horwitz, Allan V., and Jerome C. Wakefield. "The epidemic in mental illness: clinical fact or survey artifact?." *Contexts* 5, no. 1 (2006): 19-23.
4. Kessler, Ronald C. 2002. “The Categorical versus Dimensional Assessment Controversy in the Sociology of Mental Illness.” Journal of Health and Social Behavior 43:171-188.

**Recommended Reading**

1. Loring, Marti and Brian Powell. 1988. “Gender, Race, and DSM-III: A Study of the Objectivity of Psychiatric Behavior.” Journal of Health and Social Behavior 29:1-22.
2. Smith, Tyson and Owen Whooley. 2015. “Dropping the Disorder in PTSD” Contexts 14:38-43
3. Schnittker, Jason, Savannah H. Larimore, and Hedwig Lee. 2020. "Neither mad nor bad? The classification of antisocial personality disorder among formerly incarcerated adults." *Social Science & Medicine* 264: 113288.
4. Whooley, Owen. 2014. “Nosological Reflections: The Failure of DSM-5, the Emergence of RDoC, and the Decontextualization of Mental Distress.” Society and Mental Health 4:92-110.
5. Allsopp, Kate, John Read, Rhiannon Corcoran, and Peter Kinderman. 2019. “Heterogeneity in Psychiatric Diagnostic Classification.” Psychiatry Research 279:15-22.
6. Whooley, Owen. 2016. “Measuring Mental Disorders: The Failed Commensuration Project of DSM-5.” Social Science and Medicine 166:33-4

**WEEK 2 (SEPTEMBER 11)**

**Assignment/Activities**

1. Assigned students submit weekly questions before class
2. Begin Week-long Diary

**SESSION 1:** **Social Conditions and Mental Health: The Role of Stress and Social Conditions and Mental Health**

**Objectives**

Upon successful completion of this session, you should be able to:

**1. Understand the Sociological Framework of Stress**

* Differentiate between various types of stressors (e.g., life events, chronic stressors) and their impact on individuals' mental well-being.

**2. Explore the Stress Process and Depression**

o Analyze Turner and Lloyd’s (1999) discussion on the social distribution of depression and how different social factors contribute to stress and mental health outcomes.

o Discuss the role of stress in the onset of depression and how social inequalities shape this process.

**3. Critique the Pathologization of Stress**

o Consider the role of stressful social arrangements in shaping mental health outcomes and the potential over-medicalization of these responses.

**4. Apply the Stress Process Model to Mental Health Disparities**

o Propose ways to address these disparities by focusing on stress reduction strategies within vulnerable populations.

These objectives aim to deepen students' understanding of the relationship between social conditions, stress, and mental health, with a particular focus on the roles of stress.

**REQUIRED READINGS**

1. Pearlin, Leonard I. 1989. “The Sociological Study of Stress.” Journal of Health and Social Behavior 30:241-256.
2. Turner, R. Jay and Donald A. Lloyd. 1999. “The Stress Process and the Social Distribution of Depression.” Journal of Health and Social Behavior 40:374-404.
3. Horwitz, Allan V. 2007. “Transforming Normality into Pathology: The DSM and the Outcomes of Stressful Social Arrangements.” Journal of Health and Social Behavior 48:211-222.

**Recommended Readings**

1. Turner, R. Jay, Blair Wheaton, and Donald A. Lloyd. 1995. “The Epidemiology of Social Stress.” American Sociological Review 60:104-125
2. McLeod, Jane and Eliza K Pavalko. 2008. “From Selection Effects to Reciprocal Processes: What Does Attention to the Life Course Offer?” Advances in Life Course Research 13:75-104.
3. Link, Bruce and Jo Phelan. 1995. “Social Conditions as Fundamental Causes of Disease.” Journal of Health and Social Behavior 35:80-94.
4. Grace, Matthew K. 2020. “Status Variation in Anticipatory Stressors and Their Associations with Depressive Symptoms.” Journal of Health and Social Behavior 61:170-189.
5. Thoits, Peggy. 2006. “Personal Agency in the Stress Process.” Journal of Health and Social Behavior 47:309-323.
6. Aneshensel, Carol S. 1992. “Social Stress: Theory and Research.” Annual Review of Sociology 18:15-38.

**SESSION 2:** **Socioeconomic Status, Race, and Ethnicity**

**Objectives**

Upon successful completion of this session, you should be able to:

 **1. Examine the Relationship Between Poverty and Mental Health**

o Identify and reflect on the mechanisms through which socioeconomic disadvantage contributes to mental health issues, such as access to resources and chronic stress.

**2. Investigate Mental Health Disparities Across Social Groups**

o Identify key factors that create mental health disparities and discuss the implications for public health interventions.

**3. Understand the Role of Race-Related Stressors in Mental Health**

o Consider how discrimination, systemic racism, and minority status contribute to stress and mental health inequalities.

**4. Analyze the Intersection of Socioeconomic Status and Race in Mental Disorders**

o Evaluate how socioeconomic disparities affect mental health outcomes differently for various racial and ethnic groups and the implications for diagnosis and treatment.

These objectives aim to deepen students' understanding of the relationship between social conditions, stress, and mental health, with a particular focus on the roles of socioeconomic status, race, and ethnicity.

**REQUIRED READINGS**

1. Costello, E. Jane, Scott N Compton, Gordon Keeler, and Adrian Angold. 2003. “Relationships Between Poverty and Psychopathology.” Journal of the American Medical Association 290:2023-2029.
2. Aneshensel, Carol S. 2009. “Toward Explaining Mental Health Disparities.” Journal of Health and Social Behavior 50:377-394.
3. Williams, David R. 2018. “Stress and the Mental Health of Populations of Color: Advancing our Understanding of Race-Related Stressors.” Journal of Health and Social Behavior 59:466-485.

**Recommended Readings**

1. Chen, R., Kessler, R.C., Sadikova, …, Williams, D.R. (2019). Racial and ethnic differences in individual-level and area-based socioeconomic Status and 12-Month DSM-IV Mental Disorders. Journal of Psychiatric Research, 119, 48-59.
2. Brown, Tony N. 2003. “Critical Race Theory Speaks to the Sociology of Mental Health: Mental Health Problems Produced by Racial Stratification.” Journal of Health and Social Behavior 44:292-301..
3. McLaughlin, K., Alvarez, K., Fillbrunn, M., Green, J.G., Jackson, J.S., Kessler, R.C., Sadikova, E., Sampson, N.A., Vilsaint, C.L., Williams D.R., Alegría, M. (2019). Racial/ethnic variation in trauma-related psychopathology in the United States: a population-based study. Psychological Medicine, 49(13), 2215- 2226.
4. Sugie, Naomi F and Kristin Turney. 2017. “Beyond Incarceration: Criminal Justice Contact and Mental Health.” American Sociological Review 82:719-743.

**WEEK 3 (SEPTEMBER 18)**

**Assignment/Activities**

Assigned students submit weekly questions before class

End Week-long diary and begin drafting your rellections on this assignment

**SESSION 1: The Larger Environment and Mental Health**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Examine the Impact of Environmental Factors on Mental Health**
* Understand the complex relationships between various environmental factors (e.g., urban living, pollution, green space) and adult mental health.
1. **Explore the Psychological Impacts of Global Climate Change**
* Reflect on the psychological burden of climate change and the implications for future mental health trends.
1. **Investigate the Mental Health Consequences of Disasters**
* Evaluate how disasters compound mental health stress, focusing on vulnerable populations and long-term recovery.
1. **Assess the Impact of Urban Interventions on Mental Health and Crime**
* Consider how improving the physical environment of communities can lead to better mental health outcomes and reduced crime.
1. **Understand the Intersection of Environmental and Social Stressors**
* Propose strategies for addressing these combined stressors through policy, urban planning, and community resilience initiatives.
1. **Apply Theoretical Models to Real-World Environmental Mental Health Challenges**
* Identify potential solutions for mitigating the negative effects of environmental stress on mental health, both at the individual and community levels.

These objectives encourage students to think critically about the broader environmental contexts that influence mental health, integrating knowledge of social and physical environments into their understanding of mental health challenges.

**REQUIRED READINGS**

1. Bjørndal, Ludvig Daae, Omid V. Ebrahimi, Xiaoyu Lan, Ragnhild Bang Nes, and Espen Røysamb. "Mental health and environmental factors in adults: A population-based network analysis." (2024) American Psychologist 79 (3), 368-383.
2. Palinkas, Lawrence A., and Marleen Wong. "Global climate change and mental health." Current opinion in psychology 32 (2020): 12-16.
3. Harville, Emily W., Arti Shankar, Christine Dunkel Schetter, and Maureen Lichtveld. "Cumulative effects of the Gulf oil spill and other disasters on mental health among reproductive-aged women: The Gulf Resilience on Women’s Health study." Psychological Trauma: Theory, Research, Practice, and Policy10, no. 5 (2018): 533.

**Recommended Readings**

1. Branas, Charles C., …, & John M. MacDonald. "Citywide cluster randomized trial to restore blighted vacant land and its effects on violence, crime, and fear." Proceedings of the National Academy of Sciences115, no. 12 (2018): 2946-2951.
2. Fadadu, Raj P., Gina Solomon, and John R. Balmes. "Wildfires and Human Health.” JAMA, Published online July 10, 2024
3. South, Eugenia C., Bernadette C. Hohl, Michelle C. Kondo, John M. MacDonald, and Charles C. Branas. "Effect of greening vacant land on mental health of community-dwelling adults: a cluster randomized trial." JAMA network open 1, no. 3 (2018): e180298-e180298.
4. Heinze, Justin E., Allison Krusky‐Morey, … &, Marc A. Zimmerman. "Busy streets theory: The effects of community‐engaged greening on violence." American journal of community psychology 62, no. 1-2 (2018): 101-109.
5. Tong, Yi, and Julie A Phillips. 2018. “Understanding Changes in Attitudes Toward Suicide Between 1980s and 2010s in the United States.” Social Science Quarterly 99:1585-1598.

**SESSION 2: The Stigma of Mental Illness**

**Objectives**

Upon successful completion of this session, you should be able to:

**1.Understand the Dimensions of Stigma and Its Impact on Mental Health**

 - Explore the different dimensions of stigma (e.g., public stigma, self-stigma, structural stigma) and their effects on individuals diagnosed with mental illness.

**2.Examine Stigma as a Fundamental Cause of Health Inequalities**

Reflect on how stigma contributes to disparities in mental health outcomes, healthcare access, and treatment.

Investigate Public Attitudes and Stigma Towards Mental Illness

Evaluate the role of media, culture, and social norms in shaping public perceptions of mental illness.

**3.Assess the Impact of Personal Contact on Reducing Stigma**

* + Discuss how interventions promoting personal contact between the general public and individuals with mental illness can help reduce stigma at a societal level.

**4.Propose Solutions to Address Mental Health Stigma**

* 1. Based on the readings, propose evidence-based solutions to reduce stigma, improve public understanding, and address health inequalities related to mental illness.

These objectives help students critically engage with the topic of mental health stigma, exploring its multiple dimensions and broader societal impacts while proposing solutions for stigma reduction.

**REQUIRED READINGS**

1. Boyd, Jennifer E, Emerald P. Katz, Bruce G. Link, and Jo C. Phelan. 2010. “The Relationship of Multiple Aspects of Stigma and Personal Contact with Someone Hospitalized for Mental illness, in a Nationally Representative Sample.” Social Psychiatry and Psychiatric Epidemiology 45:1063-1070.
2. Hatzenbuehler, Mark L Jo C. Phelan, and Bruce G. Link. 2013. “Stigma as a Fundamental Cause of Population Health Inequalities.” American Journal of Public Health 103:813-821.
3. Link, Bruce G. and Jo Phelan. 2014. “Stigma Power.” Social Science & Medicine 103: 24-32.

**Recommended Readings**

1. Phelan, Jo C, and Bruce Link. 2004. “Fear of People with Mental Illnesses: The Role of Personal and Impersonal Contact and Exposure to Threat or Harm.” Journal of Health and Social Behavior 45:68-80
2. Billings, Katie R. "Stigma in class: Mental illness, social status, and tokenism in elite college culture." Sociological Perspectives 64, no. 2 (2021): 238-257.
3. Schnittker, Jason. 2008. “An Uncertain Revolution: Why the Rise of a Genetic Model of Mental Illness Has Not Increased Tolerance.” Social Science & Medicine 9:1370-1381
4. Hipes, Crosby, Jeffrey Lucas, Jo C. Phelan and Richard C. White. 2016. “The Stigma of Mental Illness in the Labor Market.” Social Science Research 56:16-25.
5. Thoits, Peggy. 2005. “Differential Labeling of Mental Illness by Social Status: A New Look at an Old Problem.” Journal of Health and Social Behavior 46:102-119.
6. Pescosolido, Bernice. 2013. “The Public Stigma of Mental Illness: What Do We Think; What Do We Know; What Can We Prove?” Journal of Health and Social Behavior 54:1-21.

**Week 4 (September 25)**

**Assignment/Activities**

Assigned students submit weekly questions before class

Reminder: you beed to submit paper about your one week Diary next week.

**SESSION 1: Gender, LGBTQ+ Status, and Mental Health**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Examine Gender Differences in Mental Health**
	* Explore how gender influences the prevalence and presentation of various mental health disorders in different cultural contexts.
2. **Understand the Role of the Wage Gap in Gendered Mental Health Disparities**
	* Discuss how economic inequality and work-related stress may lead to differential mental health outcomes for men and women.
3. **Explore the Influence of Social Roles on Gender Differences in Mental Health**
	* Reflect on how societal expectations, caregiving responsibilities, and occupational roles may affect mental health differently for men and women.
4. **Investigate Mental Health Risks Among LGBTQ+ Individuals**
	* Compare mental health outcomes between LGB and heterosexual populations across different countries and social contexts.
5. **Assess the Impact of Institutional Discrimination on LGBTQ+ Mental Health**
	* Discuss the effects of discriminatory laws, policies, and social stigma on the mental health of LGBTQ+ individuals.
6. **Critically Engage with the Intersectionality of Gender, LGBTQ+ Status, and Mental Health**
	* Discuss strategies to address mental health disparities among LGBTQ+ and gender nonconforming individuals, considering both institutional reforms and community-based interventions.
7. **Propose Solutions to Reduce Mental Health Disparities**.
	* Develop strategies to create more inclusive, supportive environments that protect the mental well-being of women, LGBTQ+ individuals, and gender nonconforming populations.

These objectives aim to provide students with a comprehensive understanding of how gender and LGBTQ+ status intersect with mental health, focusing on both structural inequalities and the social determinants of health.

**REQUIRED READINGS**

1. Seedat, Soraya, Kate Margaret Scott, Matthias C. Angermeyer, et al. "Cross-national associations between gender and mental disorders in the World Health Organization World Mental Health Surveys." Archives of general psychiatry 66, no. 7 (2009): 785-795
2. Platt, Jonathan, Seth Prins, Lisa Bates, and Katherine Keyes. 2016. “Unequal Depression for Equal Work? How the Wage Gap Explains Gendered Disparities in Mood Disorders.” Social Science and Medicine 149:1-8.
3. Gmelin, J.H., de Vries, Y.A., Baams, L, & de Jonge, P. (2022). Increased risks for mental disorders among LGB individuals: cross-national evidence from the World Mental Health Surveys. Social Psychiatry and Psychiatric Epidemiology. 57(11), 2319-2332.

**Recommended Readings**

1. Hatzenbuehler, Mark L et al. 2010. “The Impact of Institutional Discrimination on Psychiatric Disorders in Lesbian, Gay, and Bisexual Populations: A Prospective Study.” American Journal of Public Health 100:452-459.
2. Weich, Scott, Andrew Sloggett, and Glyn Lewis. "Social roles and gender difference in the prevalence of common mental disorders." The British Journal of Psychiatry 173, no. 6 (1998): 489-493.
3. Miller, Lisa R and Eric Anthony Grollman. 2015. “The Social Costs of Gender Nonconformity for Transgender Adults: Implications for Discrimination and Health.” Sociological Forum 30:809-831.
4. Beauboeuf-Lafontant, Tamara. 2007. “You Have to Show Strength: An Exploration of Gender, Race, and Depression.” Gender and Society 21:28-51.
5. Riecher-Rössler, Anita. "Sex and gender differences in mental disorders." The Lancet Psychiatry 4, no. 1 (2017): 8-9.
6. Everett, Bethany. 2015. “Sexual Orientation Identity Change and Depressive Symptoms: A Longitudinal Analysis.” Journal of Health and Social Behavior 56:37-58.
7. Meyer, Ilan H. 2003. “Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence.” Psychological Bulletin 129:674-697.
8. Johnson, Austin H. "Rejecting, reframing, and reintroducing: Trans people's strategic engagement with the medicalisation of gender dysphoria." Sociology of Health & Illness 41, no. 3 (2019): 517-532.

**SESSION 2: Migration and Mental Health**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Identify the Impact of Immigration on Mental Health Across Different Populations**
	* Compare the mental health outcomes of immigrant versus native-born individuals within their racial and ethnic groups, taking into account various social determinants.
2. **Understand the Role of Nativity and Socioeconomic Status in Mental Health Disparities**
	* Explore how nativity (i.e., whether an individual is U.S.-born or foreign-born) interacts with socioeconomic factors to shape mental health outcomes among diverse populations.
3. **Assess the Mental Health Impact of Immigration Policies**
	* Consider how restrictive immigration policies and anti-immigrant sentiments contribute to heightened levels of mental health morbidity among immigrants, particularly those in vulnerable legal and socioeconomic positions.
4. **Discuss the potential Role of Acculturation Stress in Immigrant Mental Health**
	* Discuss how acculturation stress strategies that might mitigate the effects of acculturation stress on immigrant mental health, including mental health interventions and community support.
5. **Propose Interventions to Improve Mental Health Among Immigrant Populations**.
	* Develop approaches to promote mental health equity for immigrants, with special attention to vulnerable subgroups, such as undocumented immigrants or those facing language barriers.

These objectives aim to deepen students' understanding of how migration, social ties, acculturation, and immigration policies influence mental health, particularly for marginalized racial and ethnic immigrant populations.

**REQUIRED READINGS**

1. Takeuchi, D.T., Alegria, M., Jackson, J.S., Williams, D.R. 2007. “Immigration and Mental Health: Diverse Findings in Asian, Black, and Latino Populations.” American Journal of Public Health, 97(1):11-12. PMID: 17138903. PMCID: PMC1716240.
2. Vilsaint, C.L., NeMoyer, A., Filbrunn, M., Sadikova, E., Kessler, R.C., Sampson, N.A., Alvarez, K., Green, J.G., McLaughlin, K.A., Chen, R., Williams, D.R., Jackson, J.S., Alegría, M. (2019). Racial/ethnic differences in 12-month prevalence and persistence of mood, anxiety, and substance use disorders: Variation by nativity and socioeconomic status. Comprehensive Psychiatry, 89, 52-60.
3. Viruell-Fuentes, E.A., Morenoff, J.D., Williams, D.R., House, J.S. 2013. “Contextualizing nativity status, Latino social ties and ethnic enclaves: an examination of the “immigrant social ties hypothesis.” Ethnicity and Health. Dec;18(6):586-609.

**Recommended Readings**

1. Hatzenbuehler, Mark L, Seth Prins, … & Hirsch. 2017. “Immigration Policies and Mental Health Morbidity Among Latinos: A State Level Analysis. ” Social Science & Medicine 174: 169-178.
2. Escobar, Javier I. "Immigration and mental health: Why are immigrants better off?." Archives of General Psychiatry 55, no. 9 (1998): 781-782.
3. Williams, D.R., Haile, R., Gonzalez, H. … & Jackson, J.S., 2007. “The Mental Health of Black Caribbean Immigrants: Results from the National Survey of American Life (NSAL).” American Journal of Public Health, 2007, 97(1):57-59.
4. Jackson, J.S., Neighbors, H.W., Torres, M. Martin, Williams, D.R., Baser R., 2007. “Use of Mental Health Services Subjective Satisfaction with Treatment among Black Caribbean Immigrants: Results from the National Survey of American Life (NSAL).” American Journal of Public Health, 97(1):60-67.
5. Meyer, Sarah R., Molly Lasater, and Wietse A. Tol. "Migration and mental health in low-and middle-income countries: a systematic review." Psychiatry 80, no. 4 (2017): 374-381.
6. Cervantes, Richard C., Amado M. Padilla, Lucy E. Napper, Jeremy T. Goldbach. "Acculturation-related stress and mental health outcomes among three generations of Hispanic adolescents." Hispanic Journal of Behavioral Sciences 35, no. 4 (2013): 451-468.
7. Escobar, Javier I., Constanza Hoyos Nervi, and Michael A. Gara. "Immigration and mental health: Mexican Americans in the United States." Harvard review of psychiatry 8, no. 2 (2000): 64-72.

**Week 5 (October 2)**

**Assignment/Activities**

Assigned students submit weekly questions before class

Submit paper about your one week Diary

**SESSION 1: Early Childhood Stress and Adult Mental Health**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Understand the Long-Term Impact of Childhood Adversities on Mental Health**
	* Reflect on how childhood stress and adversities can contribute to mental health challenges during the transition to adulthood and the onset of college life.
2. **Identify the Biological Mechanisms of Childhood Maltreatment**
	* Understand the neurobiological pathways through which early-life stressors contribute to long-term changes in mental health.
3. **Assess the Role of Early-Life Stress in Adult Mental Health Disorders**
	* Discuss the potential moderating factors (e.g., resilience, social support, access to mental health care) that may influence whether childhood adversities lead to adult mental health disorders.
4. **Critically Engage with the Intersection of Childhood Adversities and Mental Health Policy**
	* Discuss the role of schools, healthcare systems, and social services in identifying and addressing childhood adversities to prevent long-term mental health issues.
5. **Propose Interventions to Mitigate the Effects of Childhood Adversities**
	* Develop strategies for fostering resilience in children exposed to early-life stress, with an emphasis on community, family, and institutional support systems.

These objectives aim to provide students with a comprehensive understanding of how early childhood stress and adversities affect mental health into adulthood, emphasizing both biological and social determinants.

**REQUIRED READINGS**

1. Husky, M.M., Sadikova, E., Lee, S., … & Kessler, R.C., and WHO WMH-ICS collaborators. (2023). Childhood adversities and mental disorders in first-year college students: Results from the World Mental Health International College Student Initiative. Psychological Medicine. 53(7), 2963–2973.
2. McLaughlin, K.A., Greif Green, J., Gruber , M.J., Sampson, N.A., Zaslavsky, A.M., Kessler, R.C. (2012). Childhood adversities and first onset of psychiatric disorders in a national sample of US adolescents. Archives of General Psychiatry, 69(11), 1151-1160.
3. Herringa, Ryan J et al. 2013. “Childhood Maltreatment is Associated with Altered Fear Circuitry and Increased Internalizing Symptoms by Late Adolescence.” PNAS 110:19119-19124.

**Recommended Readings**

1. Van den burgh, Bea R. et al. 2017. “Prenatal Developmental Origins of Behaviour and Mental Health: The Influence of Maternal Stress in Pregnancy.” Neuroscience & Biobehavioral Reviews. 117 (2020): 26-64.
2. McLaughlin, K.A., Gadermann, A.M., Hwang, I., Sampson, N.A.,… Williams, D.R., & Kessler, R.C. (2012). Parent psychopathology and offspring mental disorders: Results from the WHO World Mental Health Surveys. British Journal of Psychiatry, 200(4), 290-299
3. C., Karam, E.G., Kovess-Masfety, V., Lee, S., …& Kessler, R.C. (2017). The association between childhood adversities and subsequent first onset of psychotic experiences: A cross-national analysis of 23,998 respondents from 17 countries. Psychological Medicine, 47(7). 1230-1245.
4. Ludwig, J., Duncan, G.J., Gennetian, L.A., Katz, L.F., Kessler, R.C., Kling, J.R., Sanbonmatsu, L. (2012). Neighborhood effects on the long-term well-being of low-income adults. Science, 337(6101), 1505-1510.

**SESSION 2: Major Socio-Political Policies and Events and Mental Health**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Understand the Mental Health Impact of Terrorist Attacks**
	* Discuss how major traumatic events, such as 9/11, lead to increased mental health challenges, including PTSD, anxiety, and depression, and the role of mental health services in the recovery process.
2. **Examine the Relationship Between Mental Illness, Mass Shootings, and Firearm Politics**.
	* Reflect on how mass shootings are often framed as mental health issues and the implications of this for mental health policy and gun control debates.
3. **Investigate the Mental Health Consequences of Neighborhood Violence**
	* Explore how living in violent neighborhoods affects mental health outcomes such as anxiety, depression, and PTSD, and discuss the broader implications for public health in high-violence areas.
4. **Assess the Mental Health Impact of Dramatic Societal Events**
	* Reflect on how major political events and societal shifts can trigger stress, anxiety, and depression in affected populations, especially among marginalized groups.
5. **Propose Mental Health Interventions for Communities Affected by Socio-Political Events**
	* Based on the readings, propose strategies for addressing the mental health needs of populations affected by major socio-political events, such as terrorist attacks, wars, political shifts, and natural disasters.
	* Develop interventions aimed at improving access to mental health services and reducing the long-term psychological impact of these events on vulnerable populations.

These objectives provide a comprehensive understanding of how major socio-political events and policies influence mental health, emphasizing both individual and community-level effects.

**REQUIRED READINGS**

***September 11***

Boscarino, Joseph A., Sandro Galea, Richard E. Adams, Jennifer Ahern, Heidi Resnick, and David Vlahov. "Mental health service and medication use in New York City after the September 11, 2001, terrorist attack." Psychiatric Services 55, no. 3 (2004): 274-283.

***Mass Shootings***

Metzl, Jonathan and Kenneth T. MacLeish. 2015. “Mental Illness, Mass Shootings, and the Politics of American Firearms.” American Journal of Public Health 105:240-249

***Neighborhood Conditions, including Violence***

Benjet, C., Sampson, L., Yu, S., Kessler, R.C., …. & Galea, S. (2019). Associations between neighborhood-level violence and individual mental disorders: results from the World Mental Health surveys in five Latin American cities. Psychiatry Research, 282, 112607.

***Elections and Health****:*

Williams D.R., Medlock, M.M. 2017. “Health Effects of Dramatic Societal Events—Ramifications of the Recent Presidential Election.” New England Journal of Medicine. 376(23): 2295-2299.

**Recommended Readings:**

1. Toomey, R. B., Umaña -Taylor, A. J., Williams, D. R., Harvey-Mendoza, E., Updegraff, K., & Jahromi, L. 2014. “The impact of Arizona’s SB 1070 immigration law on utilization of health care and public assistance among Mexican-origin adolescent mothers and their mother-figures.” American Journal of Public Health. 104(1), S28-S34.
2. McLaughlin, K.A., Fairbank, J.A., Gruber, M.J., Jones, R.T., Osofsky, J.D., Pfefferbaum, B., Sampson, N.A., Kessler, R.C. (2010). Trends in serious emotional disturbance among youths exposed to Hurricane Katrina. Journal of the American Academy of Child and Adolescent Psychiatry, 49(10), 990-1000.
3. Karam, E.G., Salamoun, M.M., Mneimneh, Z.N., Fayyad, J.A., Karam, A.N., Hajjar, R., Dimassi, H., Nock, M.K., Kessler, R.C. (2012). War and first onset of suicidality: The role of mental disorders. Psychological Medicine, 42(10), 2109-2118.
4. Perera, Isabel M and Dominic A. Sisti. 2019. “Mass Shootings and Psychiatric Deinstitutionalization, Here and Abroad. American Journal of Public Health 109: S176-S177
5. Ozbay, Fatih, Tanja Auf der Heyde, Dori Reissman, and Vansh Sharma. "The enduring mental health impact of the September 11th terrorist attacks: challenges and lessons learned.” Psychiatric Clinics 36, no. 3 (2013): 417-429.
6. Kessler, R.C., Chiu, W.T., Hwang, I.H., Puac-Polano, V., Sampson, N. A., Ziobrowski, H. N., Zaslavsky, A.M. (2022). Changes in Prevalence of Mental Illness Among US Adults During Compared to Before the COVID-19 Pandemic. Psychiatric Clinics of North America. 45(1), 1-28.

**Week 6 (October 9)**

**Assignment/Activities**

Assigned students submit weekly questions before class

**SESSION 1: The Mental Health of Children and Youth**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Understand Suicide Trends in Elementary School-Aged Children**
	* Discuss the social, psychological, and environmental factors contributing to rising suicide rates in young children and propose interventions to address this issue.
2. **Examine the Link Between Discrimination Stress and Suicidality in Preadolescents**
	* Reflect on how discrimination impacts the mental health of children, particularly in marginalized groups, and discuss potential strategies for mitigating these effects.
3. **Assess the Impact of Social Media on Youth Mental Health**
	* Evaluate the role of social media in exacerbating mental health issues such as anxiety, depression, and suicidal thoughts in children and adolescents, and propose approaches for safer social media use.
4. **Explore the Effects of Online Race-Related Trauma on Adolescents of Color**
	* Discuss how exposure to racial trauma via social media and other online platforms contributes to mental health challenges, including PTSD, depression, and anxiety.
5. **Understand Depression and Suicide Among Indigenous American Youth**
	* Discuss the unique challenges faced by Indigenous youth in terms of mental health, including historical trauma, cultural marginalization, and barriers to accessing mental health services.
6. **Propose Comprehensive Solutions to Address Youth Mental Health Crises**
	* Develop strategies to improve access to mental health services, reduce the impact of social media and online trauma, and support the mental health needs of vulnerable youth populations.

These objectives aim to provide students with a deeper understanding of the complex factors affecting the mental health of children and adolescents, emphasizing the role of discrimination, social media, and systemic disparities.

**REQUIRED READINGS**

1. Bridge, Jeffrey A., Lindsey Asti, Lisa M. Horowitz, Joel B. Greenhouse, Cynthia A. Fontanella, Arielle H. Sheftall, Kelly J. Kelleher, and John V. Campo. "Suicide trends among elementary school–aged children in the United States from 1993 to 2012." *JAMA pediatrics* 169, no. 7 (2015): 673-677.
2. Abbasi, Jennifer. "Surgeon general sounds the alarm on social media use and youth mental health crisis." JAMA 330, no. 1 (2023): 11-12.
3. Tynes, Brendesha M., Henry A. Willis, Ashley M. Stewart, and Matthew W. Hamilton. "Race-related traumatic events online and mental health among adolescents of color." Journal of Adolescent Health 65, no. 3 (2019): 371-377.
4. Livingston, Richard, Rebecca Susan Daily, Anthony PS Guerrero, John T. Walkup, and Douglas K. Novins. "No Indians to spare: Depression and suicide in Indigenous American children and youth." Child and Adolescent Psychiatric Clinics 28, no. 3 (2019): 497-507.

**Recommended Readings:**

1. Bruffaerts, Ronny, Philippe Mortier, Glenn Kiekens, … & R. C. Kessler. "Mental health problems in college freshmen: Prevalence and academic functioning." Journal of affective disorders 225 (2018): 97-103.
2. McLeod, Jane D and Danielle L. Fettes. 2007. “Trajectories of Failure: The Educational Careers of Children with Mental Health Problems.” American Journal of Sociology 113:653-701.
3. Mueller, Anna S. and Seth Abrutyn. 2016. “Adolescents Under Pressure: A New Durkheimian Framework for Understanding Adolescent Suicide in a Cohesive Community.” American Sociological Review. 81:877-899.9
4. McLaughlin, K.A, Green, J.G., Alegría, M., Costello E. J., Gruber, M.J., Sampson, N.A., Kessler, R.C. (2012). Food insecurity and mental disorders in a national sample of U.S. adolescents. Journal of the American Academy of Child and Adolescent Psychiatry, 51(12),
5. Tynes, Brendesha M., Ashley Maxie-Moreman, Tuyet-Mai Ha Hoang, Henry A. Willis, and Devin English. "Online racial discrimination, suicidal ideation, and traumatic stress in a national sample of Black adolescents." JAMA psychiatry 81, no. 3 (2024): 312-316.
6. McLeod, Jane and Karen Kaiser. 2004. “Childhood Emotional and Behavioral Problems and Educational Attainment.” American Sociological Review 69:636-658.
7. Argabright ST, Visoki E, Moore TM, Ryan DT, DiDomenico GE, Njoroge WFM, Taylor JH, Guloksuz S, Gur RC, Gur RE, Benton TD, Barzilay R. Association Between Discrimination Stress and Suicidality in Preadolescent Children. J Am Acad Child Adolesc Psychiatry. 2022 May;61(5):686-697.

**SESSION 2: Psychosocial Resources that can Protect and Enhance Mental Health**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Understand the Mental Health Continuum from Languishing to Flourishing**
	* Reflect on how flourishing can be promoted as an ideal state of mental well-being and the factors that support flourishing in life.
2. **Examine Psychological Resilience as a Protective Factor**
	* Explore how resilience acts as a buffer against mental health challenges and discuss the role of resilience-building strategies in promoting mental health.
3. **Explore the Concept of Flourishing in Health and Well-being**
	* Investigate VanderWeele et al.'s (2019) framework on reimagining health through the lens of flourishing and discuss how this holistic approach to well-being differs from traditional health models.
	* Reflect on how psychosocial resources, such as positive relationships and a sense of purpose, contribute to flourishing mental health.
4. **Investigate the Relationship Between Religious Life and Mental Health**
	* Explore Sternthal et al.'s (2010) research on the relationship between depression, anxiety, and religious life, focusing on the potential mediators that link religious involvement to better mental health outcomes.
	* Discuss how religious life can act as a psychosocial resource, providing individuals with a sense of community, meaning, and emotional support.
5. **Develop Strategies to Enhance Mental Health Using Psychosocial Resources**
	* Based on the readings, propose strategies for enhancing mental health through the use of psychosocial resources such as resilience, forgiveness, gratitude, religious life, and social connections.
	* Explore how these resources can be incorporated into mental health interventions to promote overall well-being and prevent mental health disorders.

These objectives provide a comprehensive understanding of the psychosocial resources that protect and enhance mental health, encouraging students to explore both theoretical and practical applications of these resources in mental health promotion.le

**REQUIRED READINGS**

1. Keyes, Corey. 2002. “The Mental Health Continuum: From Languishing to Flourishing in Life.” Journal of Health and Social Behavior 43:207-222.8
2. Denckla, Christy A., Dante Cicchetti, Laura D. Kubzansky, Soraya Seedat, Martin H. Teicher, David R. Williams, and Karestan C. Koenen. "Psychological resilience: An update on definitions, a critical appraisal, and research recommendations." European Journal of Psychotraumatology11, no. 1 (2020): 1822064.
3. VanderWeele, Tyler J., Eileen McNeely, and Howard K. Koh. "Reimagining health—flourishing." JAMA 321, no. 17 (2019): 1667-1668.
4. Sternthal, M.J., Williams, D.R., Musick, M.A., Campbell, A. 2010. “Depression, Anxiety, and Religious Life: A Search for Mediators.” Journal of Health and Social Behavior, 51:343-359.

**Recommended Readings:**

1. Roach, Ashley. "Supportive peer relationships and mental health in adolescence: An integrative review." Issues in mental health nursing 39, no. 9 (2018): 723-73
2. Diniz, Geyze, Ligia Korkes, Luca Schiliró Tristão, Rosangela Pelegrini, Patrícia Lacerda Bellodi, and Wanderley Marques Bernardo. "The effects of gratitude interventions: a systematic review and meta-analysis." einstein (São Paulo) 21 (2023): eRW0371.
3. Akhtar, Sadaf, and Jane Barlow. "Forgiveness therapy for the promotion of mental well-being: A systematic review and meta-analysis." Trauma, Violence, & Abuse 19, no. 1 (2018): 107-122.
4. Wang, Jingyi, Brynmor Lloyd-Evans, Domenico Giacco, Rebecca Forsyth, Cynthia Nebo, Farhana Mann, and Sonia Johnson. "Social isolation in mental health: a conceptual and methodological review." Social psychiatry and psychiatric epidemiology 52 (2017): 1451-1461.
5. Priest, Naomi, Marian Esler, Yusuf Ransome, David R. Williams, and Ryan Perry. 2024. "A “Dark Side” of religion? Associations between religious involvement, identity and domestic violence determinants in Australia." Australian Journal of Social Issues 59, no.: 186-205.
6. John, D. A., Williams, D. R. 2013. “Mental Health Service Use from a Religious or Spiritual Advisor Among Asian Americans.” Asian Journal of Psychiatry. 6(6):599-605.
7. Kovess-Masfety, V., Evans-Lacko, S., Williams, D.R., Andrade, L.H., Benjet, C., Ten Have, ….. Gureje, O. 2017. "The role of religious advisors in mental health care in the World Mental Health surveys." Social Psychiatry and Psychiatric Epidemiology, 52(3): 353-367.
8. Maurice, Clémence, Cynthia Engels, Florence Canouï‐Poitrine, Cédric Lemogne, Isabelle Fromantin, and Eric Poitrine. "Dog ownership and mental health among community‐dwelling older adults: A systematic review." International journal of geriatric psychiatry 37, no. 11 (2022).

**Week 7 (October 16)**

**Assignment/Activities**

Assigned students submit weekly questions before class

FINAL paper due next week.

**SESSION 1: The Costs of Mental Illness: Economic Costs**

**Objectives**

1. **Analyze the Economic Impact of Mental Illness**
	* Evaluate the factors that contribute to the economic costs of mental health disorders, particularly in relation to productivity losses and healthcare expenditures.
2. **Examine the Long-Term Effects of Mental Disorders**
	* Discuss the long-term socioeconomic consequences of mental health disorders, especially as they relate to educational attainment and earning potential, based on Mojtabai et al. (2015) and Levinson et al. (2010).
3. **Evaluate the Cost of Depression in Health Care Systems**
	* Explore how different stakeholders (government, employers, individuals) bear the financial burden of treating depression and other mental health disorders.
4. **Identify the Policy Implications**.
	* Formulate potential strategies for reducing the economic impact of mental illness on individuals and society.

These objectives aim to help students critically engage with the readings and connect the academic discussion to real-world economic and policy implications.

**REQUIRED READINGS**

1. Greenberg, P., Chitnis, A., Louie, D., Suthoff, E., Chen, S., Maitland, J., Gagnon-Sanschagrin, P., Fournier, A. & Kessler, R.C. (2023). The Economic Burden of Adults with Major Depressive Disorder in the United States (2019). Advances in Therapy. 40(10), 4460-4479.
2. Levinson, D., Lakoma, M.D., Petukhova, M. ,… Williams, D.R., & Kessler, R.C. (2010). Associations of serious mental illness with earnings: Results from the WHO World Mental Health surveys. British Journal of Psychiatry, 197(2), 114-121
3. Mojtabai, R., Stuart, E.A., Hwang, I., Eaton, W.W., Sampson, N., Kessler, R.C. (2015). Long-term effects of mental disorders on educational attainment in the National Comorbidity Survey ten-year follow-up. Social Psychiatry and Psychiatric Epidemiology, 50(10), 1577-91

**Recommended Readings:**

1. Kessler, R.C. (2012). The costs of depression. Psychiatric Clinics of North America, 35(1), 1-14.
2. Swanson, J.W., Sampson, N.A., Zaslavsky, A. M., Appelbaum, P. S., Swartz, M. S., Kessler, R. C. (2015). Guns, anger, and mental disorders: Results from the National Comorbidity Survey Replication (NCS-R). Behavioral Science and the Law, 33(2-3), 199-212.
3. Breslau, J., Miller, E., Jin, R., Sampson, … &, Kessler, R.C. (2011). A multinational study of mental disorders, marriage, and divorce. Acta Psychiatrica Scandinavica, 124(6), 474-486.

**SESSION 2: Physical Health Consequences of Mental Illness**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Understand the Link Between Mental and Physical Health**
	* Explore how specific mental health disorders increase the risk of developing chronic medical conditions, such as cardiovascular diseases and diabetes.
2. **Examine the Role Impairment Caused by Mental Disorders**
	* Assess how mental disorders impair daily functioning, social relationships, and academic performance.
3. **Explore the Relationship Between Mental Disorders and Chronic Pain**
	* Discuss the potential mechanisms linking mental health issues with physical pain and how this relationship varies across different populations.
4. **Assess the Long-Term Impact of Mental Health on Life Outcomes**
	* Discuss the broader implications of mental illness on personal relationships and how these may affect overall health and well-being.
5. **Synthesize Research to Understand Health Policy Implications**
	* Integrate the findings from the readings to form a comprehensive understanding of how mental health can influence physical health and life outcomes.
	* Formulate strategies for addressing the physical health consequences of mental illness through interdisciplinary approaches and policy interventions.

These objectives aim to guide students in understanding the complex relationship between mental illness and physical health, encouraging critical thinking about the implications for both personal well-being and healthcare systems.

**REQUIRED READINGS**

1. Momen, N., Plana-Ripoll, O., Agerbo, E., Benros, M., Børglum, A., et al. …., McGrath, J. (2020). Association between Mental Disorders and Subsequent Medical Conditions. New England Journal of Medicine, 382(18),1721-1731
2. Alonso, J., Mortier, P., Auerbach, R.P., Bruffaerts, R., …, Kessler, R.C., WHO WMH-ICS Collaborators. (2018). Severe role impairment associated with mental disorders: Results of the WHO World Mental Health Surveys International College Student Project. Depression and Anxiety, 35(9), 802-814.
3. Mojtabai, R., Stuart, E.A., Hwang, I., Eaton, W.W., Sampson, N., Kessler, R.C. (2017). Long-term effects of mental disorders on marital outcomes in the National Comorbidity Survey ten-year follow-up. Social Psychiatry and Psychiatric Epidemiology, 52(10). 1217-1226.

**Recommended Readings:**

1. Bruffaerts, R., Mortier, P., Kiekens, G., Auerbach, R.P., Kessler, R.C. (2016). Association of mental disorders with subsequent chronic physical conditions: World Mental Health surveys from 17 countries. JAMA Psychiatry, 73(2), 150-8.
2. Viana, M.C., Lim, C.C.W., Pereira, F.G.…, Kessler, R.C., Scott, K.M. (2018). Previous mental disorders and subsequent onset of chronic back or neck pain: Findings from 19 countries. The Journal of Pain, 19(1), 99-110.
3. Aguilar-Gaxiola, S., Loera, G., Geraghty, EM., Ton, H., Lim, C.C., … Scott, K.M. (2016). Associations between DSM-IV mental disorders and subsequent onset of arthritis. Journal of Psychosomatic Research, 82, 11-16
4. Alonso J., de Jonge, P., Lim, C.C., Aguilar-Gaxiola, S., …, Scott, K.M. (2014). Association between mental disorders and subsequent adult onset asthma. Journal of Psychiatric Research, 59, 179-188**.**
5. Stein, D.J., Aguilar-Gaxiola, S., Alonso, J., Bruffaerts, R., …. Scott, K.M. (2014). Associations between mental disorders and subsequent onset of hypertension. General Hospital Psychiatry, 36(2), 142-149
6. O'Neill, S., Posada-Villa, J., Medina-Mora, …, Scott, K.M. (2014). Associations between DSM-IV mental disorders and subsequent self-reported diagnosis of cancer. Journal of Psychosomatic Research, 76(3), 207-212.
7. Miller, E., Breslau, J., Petukhova, M., …., Kessler, R.C. (2011). Premarital mental disorders and physical violence in marriage: A cross-national study of married couples. British Journal of Psychiatry, 199(4), 330-337.

**Week 8 (October 23)**

**Assignment/Activities**

Assigned students submit weekly questions before class

FINAL paper due today

**SESSION 1: The Utilization of Mental Health Services**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Examine Pathways to Mental Health Services**
	* Analyze how social, economic, and cultural factors influence the accessibility of mental health care.
2. **Assess Structural Flaws in the Mental Health System**
	* Critically evaluate the historical and systemic issues that hinder effective mental health care delivery in the U.S.
3. **Identify Barriers to Mental Health Service Use**
	* Discuss predictors of treatment dropout and barriers to mental health service utilization, and how racial and ethnic disparities impact access to and continuity in mental health treatment.
4. **Explore Racial/Ethnic Disparities in Antidepressant Use**
	* Assess the socio-economic, cultural, and healthcare-related factors that contribute to disparities in antidepressant use.
5. **Evaluate the Effectiveness of Mental Health Treatments**
	* Critically assess the increasing utilization of mental health treatments, such as antidepressants, and question whether increased treatment correlates with a decrease in depression prevalence, using Ormel et al. (2019) as a guide.
	* Discuss potential strategies for improving the effectiveness of mental health treatments.

These objectives aim to help students critically evaluate the challenges and disparities within the mental health service system while considering both individual treatment and broader community-based interventions.

**REQUIRED READINGS**

1. Alang, Sirry M and Donna D. McAlpine. 2019. “Pathways to Mental Health Services and Perceptions about the Effectiveness of Treatment.” Society and Mental Health 9:388-407.
2. Gionfriddo, Paul. 2012. “How I Helped Create a Flawed Mental Health System That’s Failed Millions -- And My Son.” Health Affairs 31:2138-2142.
3. Green, J.G., McLaughlin, K.A., Fillbrunn, M., Fukuda, M., …., Alegría, M. (2020). Barriers to Mental Health Service Use and Predictors of Treatment Drop Out: Racial/ethnic Variation in a Population-Based Study. Administration and Policy in Mental Health Service Research, 47(4), 606-616.
4. Enrico G. Castillo et al. Community interventions to promote mental health and social equity. Current Psychiatry Reports, 2019, 21, pp.1-14.

**Recommended Readings**

1. Jensen, P.S., Goldman, E., Offord, D., …, Roberts, R. (2011). Overlooked and underserved: “Action signs" for identifying children with unmet mental health needs. Pediatrics, 128(5), 970-979.
2. Gonzalez, H.M., Croghan, T.W., West, B.T., Tarraf, W., Williams, D.R., Underwood, W., Nesse, R., Taylor, R.J., Torres, M., Hanton, L., Neighbors, H.W., Jackson, J.S. 2008. “Antidepressant use Among Blacks and Whites in the US.” Psychiatric Services. 59:1131-1138.
3. Ormel, J., Kessler, R.C., Schoevers, R. (2019). Depression: more treatment but no drop in prevalence: how effective is treatment? And can we do better? Current Opinion in Psychiatry, 32(4), 348-354.
4. Harris, M. G., Kazdin, A. E., Munthali., & Kessler, R. C. (2024). Factors associated with satisfaction and perceived helpfulness of mental healthcare: A World Mental Health Surveys report. International Journal of Mental Health Systems. 18(1), 11
5. Thornicroft, G., Chatterji, S., Evans-Lacko, …, Kessler, R.C. (2017). Undertreatment of people with major depressive disorder in 21 countries. British Journal of Psychiatry, 210(2), 119-124.
6. Kazdin, A. E., Harris, M. G., Hwang, I., Sampson, N. A.,… & Kessler, R. C. (2024). Patterns, predictors, and patient-reported reasons for antidepressant discontinuation in the WHO World Mental Health Surveys. Psychological Medicine. 54(1), 67-78.
7. Andrade, L.H., Alonso, J., Mneimneh, Z., Wells, J.E., Al-Hamzawi, A…, Kessler, R.C. (2014). Barriers to mental health treatment: results from the WHO World Mental Health surveys. Psychological Medicine, 44(6), 1303-1317.

**SESSION 2: Innovative Mental Health Services Interventions**

**Objectives**

Upon successful completion of this session, you should be able to:

1. **Examine the Role of Technology in Mental Health Interventions**
	* Discuss how mobile health technologies can be leveraged to address mental health and substance use issues among young adults.
2. **Evaluate Social Media’s Impact on Adolescent Mental Health**
	* Assess the potential mental health risks and benefits of social media use among young people, and consider policy implications for regulating social media platforms.
3. **Investigate Worksite Primary Care Clinics for Mental Health**
	* Evaluate the benefits and challenges of integrating mental health care into primary care settings, particularly within the workplace.
4. **Understand Community Mental Health Scaling in Low-Income Regions**
	* Discuss the challenges and strategies for delivering mental health services to underserved populations globally, with a focus on scaling up care in resource-limited settings.
5. **Analyze Predictive Algorithms and Telehealth Interventions for Suicide Prevention**
	* Understand the role of predictive analytics and digital health interventions in suicide prevention efforts among vulnerable populations.
6. **Compare Internet-Delivered Cognitive Behavioral Therapy (CBT) with Traditional Treatments**
	* Discuss the advantages and limitations of online mental health interventions, particularly in low- and middle-income countries.

These objectives aim to help students understand cutting-edge approaches to mental health interventions, with a focus on technology, community-based solutions, and innovative treatment models.

**REQUIRED READINGS**

1. Vereschagin, M., Wang, A.Y., Richardson, …& Vigo, D.V. (2024). Effectiveness of the Minder Mobile Mental Health and Substance Use Intervention for University Students: A Randomized Controlled Trial. Journal of Medical Internet Research. 26, e54287.
2. Shahly, V., Kessler, R.C., Duncan, I. (2014). Worksite primary care clinics: A systematic review. Population Health Management, 17(5), 306-315.
3. Belkin, G.S., Unützer, J., Kessler, R.C., Verdeli, H., Raviola, G.J., Sachs, K., Oswald, C., Eustache, E. (2011). Scaling up for the "bottom billion": "5×5" implementation of community mental health care in low-income regions. Psychiatric Services, 62(12), 1494-1502.
4. Benjet, C., Albor, Y., Alvis-Barranco, L., …., & Kessler, R. C. (2023). Internet-delivered cognitive behavior therapy versus treatment as usual for anxiety and depression among Latin American university students: A randomized clinical trial. Journal of Consulting and Clinical Psychology. 91(12), 694-707.

**Recommended Readings**

1. Abbasi, Jennifer, and Yulin Hswen. "US Surgeon General Vivek Murthy: To Protect Adolescents, Social Media Needs Warning Labels." JAMA, 2024
2. Hasking, P. A, Robinson, K., McEvoy, P….& Kessler, R.C. (2024). Development and evaluation of a predictive algorithm and telehealth intervention to reduce suicidal behaviour among university students. Psychological Medicine. 54(5), 971-979.
3. Kessler, R.C., Luedtke, A. (2021). Pragmatic Precision Psychiatry-A New Direction for Optimizing Treatment Selection. JAMA Psychiatry. 78(12), 1384-1390.
4. Saruhanjan, K., Zarksi, A.C., Bauer, T., …., Ebert, D.D. (2020). Psychological interventions to improve sleep in college students: A meta-analysis of randomized controlled trials. Journal of Sleep Research, 30(1), e13097.
5. Amanvermez, Y., Zhao, R., Cuijpers, P., de Wit, L.M., Ebert, D.D., Kessler, R.C., Bruffaerts, R., & Karyotaki, E. (2022). Effects of self-guided stress management interventions in college students: A systematic review and meta-analysis. Internet Interventions. 28, 100503
6. Bossarte, R.M., Kessler, R.C., Nierenberg, A.A., …., J.R. (2022). The Appalachia Mind Health Initiative (AMHI): a pragmatic randomized clinical trial of adjunctive internet-based cognitive behavior therapy for treating major depressive disorder among primary care patients. Trials. 23(1), 520
7. Harrer, M., Adam, S.H., Baumeister, H., Cuijpers, P., Karyotaki, E., Auerbach, R.P., Kessler, R.C., Bruffaerts, R., Berking, M., Ebert, D.D. (2019). Internet interventions for mental health in university students: A systematic review and meta-analysis. International Journal of Methods in Psychiatric Research, 28(2), e1759.
8. Swartz, Karen et al. 2018. “School-Based Curriculum to Improve Depression Literacy Among US Secondary School Students: A Randomized Effectiveness Trial.” American Journal of Public Health 107:1970-1976.

**MENTAL HEALTH RESOURCES**

**COUNSELING AND MENTAL HEALTH SERVICES**

**617-495-2042**

24-hour access line that allows students (or those concerned about a student) to speak with a licensed counselor

OTHER HARVARD UNIVERSITY SUPPORT OFFICES

**Global Support Services**

Resources for Harvard students traveling and living abroad

**Harvard Chaplains**

Supports religious, spiritual, and moral engagement

**Harvard International Office**

Support for international students and scholars

**Harvard Office for Diversity, Inclusion & Belonging**

Coordinates equity and access efforts across Harvard

**Harvard University Health Services**

Multi-specialty medical practice exclusively for members of the Harvard community

**HUHS Center for Wellness and Health Promotion**

Workshops, services, and classes centered on wellbeing

**HU Ombuds Office**

Assists in managing issues affecting work or academics

**LGBTQ+ Supports**

Resources and information that serve LGBTQ+ individuals

**Office for Gender Equity**

Counseling, reporting, and policy resources to address issues of sexual harassment and misconduct

**ADDITIONAL COMMUNITY RESOURCES**

Suicide & Crisis Lifeline Phone Number 988

Samaritans Suicide Prevention Hotline 877-870-4673

SafeLink Domestic/Dating Violence Hotline 877-785-2020

Boston Area Rape Crisis Center 800-841-8371

Boston Food Access 617-635-3717

MA Confidential Referral Helpline 211

MA Mental Health Resources 617-580-8541

MA Department of Mental Health 800-221-0053