SOCI 136F: Sociology of Mental Illness, Syllabus | 2026
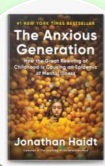
Professor:

Dr. Julia Rogers
- Email: Jerogers@ucsd.edu
- Office: SBS 467
- Office Hours (in person): TBA

Required Books:

Haidt, Jonathan. The anxious generation: How the great rewiring of childhood is causing an epidemic of mental illness. Penguin, 2024.

Goffman, Erving. Asylums: Essays on the social situation of mental patients and other inmates. Routledge, 2017.

Class Time and Location:

MWF 12:00 - 12:50PMCOA B23

---What Will We Cover?[1]---
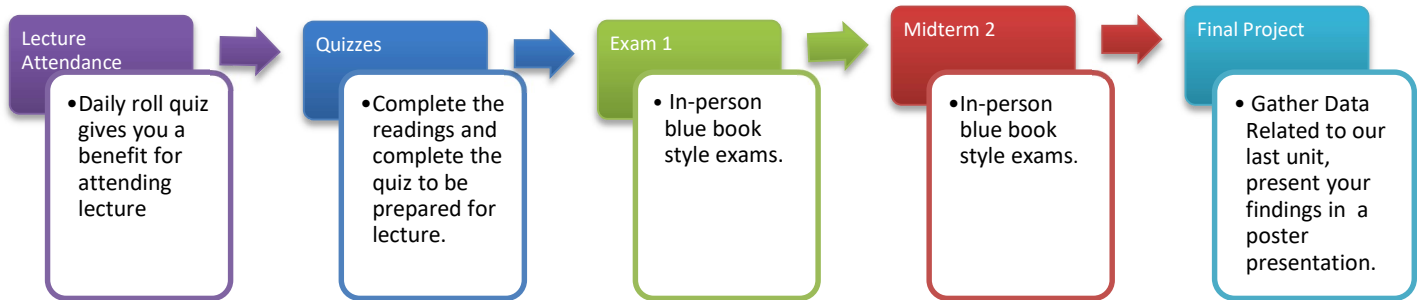
Concerns about mental illness seem to be everywhere in our contemporary world: from headlines about the impact of smart phones & social media to statistics about suicide, depression, anxiety, and autism. Reading headlines about mental illness you might be left with questions like: Is mental illness a bigger problem in the contemporary world than it was in the past? What is the relationship between violence and mental illness rates? Do Smart Phones make our lives better or worse? Are Gen Z and Generation Alpha really more prone to anxiety – and why? How much influence does social media have – can it create "trends" like going no contact with family? How do we decide who is mentally ill anyway? Are psychiatric medications safe and effective – how did they become the default way we treat mental illness in the first place?

SOCI 136F [Sociology of Mental Illness In Contemporary Society] is designed to pick up in time where SOCI 136E ends, mid-twentieth century with the c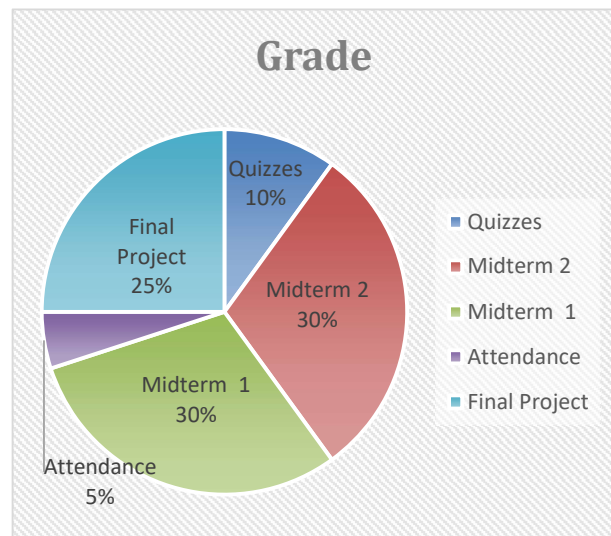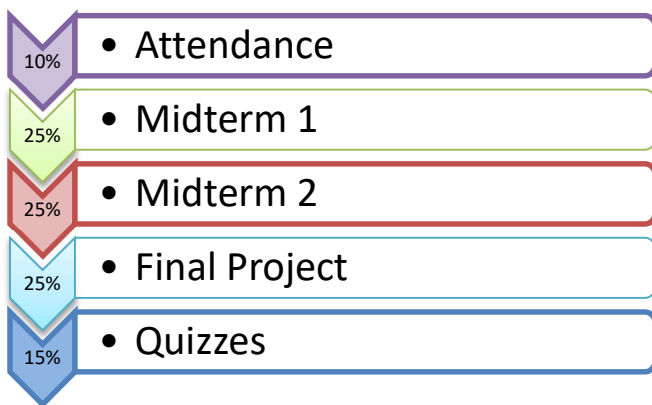reation of Thorazine (the first anti-psychotic), faith in psychiatry cracking, de-institutionalization in full swing, and a cultural revolution changing ideas about what socially acceptable behavior looks like. We will trace the shift in contemporary understandings of both mental health and illness: the bureaucratization of psychiatry with the increasingly encyclopedic editions of the Psychiatric Diagnostic and Statistical Manual, Changing public perceptions of depression, anxiety, and psychiatric medications, the influence of insurance and managed care, rising objections to psychiatry from feminism and "antipsychiatry" groups, shifts in technology and youth culture that have brought "mental wellness" to center stage, and controversies over neurodivergence.

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[1]Lecture subjects and reading schedule subject to change, with notice.

Making the Grade

Lecture Attendance	Quizzes	Exam 1	Midterm 2	Final Project
• Daily roll quiz gives you a benefit for attending lecture	• Complete the readings and complete the quiz to be prepared for lecture.	• In-person blue book style exams.	• In-person blue book style exams.	• Gather Data Related to our last unit, present your findings in a poster presentation.

--Course Requirements and Grading--

- 10% • Attendance
- 25% • Midterm 1
- 25% • Midterm 2
- 25% • Final Project
- 15% • Quizzes

Grade

Quizzes 10%
Final Project 25%
Midterm 2 30%
Midterm 1 30%
Attendance 5%

- Quizzes
- Midterm 2
- Midterm 1
- Attendance
- Final Project

--Learning Goals--

1) Explain how social factors influence the likelihood, definition, and control of mental health conditions and "abnormal" behavior.

2) Demonstrate discussion skills, including fair interpretation of opposing views, finding common ground, and respectfully articulating points of difference.

3) Articulate the relationship between sociological and medical approaches to mental illness in essay form

4) Engage critically with popular psychology concepts from a critical sociological perspective.

Communication

- You are expected to adhere to professional norms around email use.
- Email jerogers@ucsd.edu, put "SOCI 136F" in the subect line.
- Allow until the end of the next business day for a response.
- Check your email and Canvas Announcements frequently.

Regrade Policy

- Allow 24hours after receiving a grade to request a regrade
- Read the feedback and request a meeting to go over your work
- Formal regrade requests must be in writing inlcuidng a justification for the changes that are requested - your entire exam will be regraded.
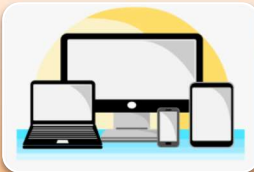
Electronics Policy

- No electronics in the classroom, excepting a tablet with a stylus or to adhere to university vetted accommodations
- If you MUST be available by phone you may use the do not disturb feature to allow breakthrough calls, to be taken outside the classroom

Accommodations, Illness, Emergencies

- If you have OSD Accommodations, please tell me ASAP
- If you become ill please stay home and contact a classmate to get notes from the class.
- If the instructor becomes ill or weather prohibits, class may be shifted online.
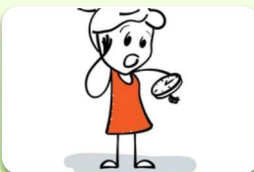
Late Paper or Missed Exams

- Make-up exams will be given at the Triton Testing Center or In-person in my office. The make-up exam will be different from the original exam. It may be a different format including the possibility of an oral exam.
- Incompletes will be granted under university guidelines, if you are passing the course and have completed the majority of the courswork.

Academic Integrity and Plagiarism

- familiarize yourself with the UCSD definitions of plagiarism and academic misconduct.
- Violations of the University academic policy will result in a zero on the assignment and a referral to the Academic Integrity Office.

Attendance

Regular in-person attendance at lectures is the best way for you to succeed in this course and is expected.

Roll will be taken through Canvas the use of after-class canvas quizzes.

Attendance is 5% of your overall grade.

Becoming a Good Participant[2]

Since many of the issues we will address in this course are scientific and humanistic puzzles subject to ongoing debate, your analysis, life experience, and interpretation are crucial. At its best, discussion moves us from being recipients of knowledge into interlocutors with the authors we read. It is a collective endeavor and we all have a responsibility to contribute. Being a good contributor is a learned skill, and it takes time and practice, both for us as individuals and for a group to learn to work together, which is why attendance in this course is mandatory. Furthermore, being a good participant in discussion is more than simply expressing oneself in front of an audience. It requires the ability to seriously consider alternative perspectives, identify common ground, and then articulate points of nuance or difference constructively.

Guidelines for Discussion

We will be discussing difficult issues throughout this class, such as subjective experience of mental illness, forced hospitalization, incarceration, discrimination, and trauma. At times we may discuss these in ways that focus on the personal and experience-near, and others times it may be highly abstract or experience-distant. At times you may experience a strong emotional reaction, but it is equally possible that you will not. Being able to speak openly and from a wide variety of experiences and perspectives is important, yet we should also recognize the responsibility that comes with discussion of this material. It is important to treat our interlocuters with respect and to respect the humanity and worth of those who may or may not be in the classroom, but are the subject of discussion. Here are some basic guidelines that can be useful for facilitating a respectful engagement.

- We do not have to agree and we can disagree without being disrespectful.
- As a general rule: we attack arguments, not people. No ad hominem.
- Do not assume that the position a person is taking necessarily represents their personal opinion, argument from opposition can sometimes help us to fully understand a perspective. In the same vein, be cautious in your use of "devil's advocate" positions, is the position being taken to further debate or to further understanding?
- Try to take into consideration what people before you have said. If you disagree or see a different side, consider if there are in fact points of overlap, and acknowledge these. This isn't just a matter of politeness—very often we may find that what we thought was a counter argument is more a nuancing of others' points…on the other hand, we may better understand points of difference by closely comparing our thoughts with another person's
- If you've been speaking a lot, consider taking a brief step back and seeing where the conversation goes before contributing again.
- I (the instructor) will try to avoid over-moderating—that is, I'll allow for dialogue between students before interjecting myself.
- Pay attention to the language we use to describe psychiatric disabilities and conditions. In some cases, people prefer "person forward" language—e.g. "a person with schizophrenia" versus "a schizophrenic." In other cases, some people may see the diagnosis as a key part of their personhood, e.g. "I am proudly autistic." Still others may reject diagnostic language entirely. The point is not to prescribe a single rule (because things may vary person to person), but to be aware and respectful.
- The above also applies to other topics where the politics of language is complicated, and bound up with material forms of power and privilege. We should all try our best to be informed and respectful, as well as generous when someone is learning other perspectives/ways of talking about issues.
- Avoid discussion of the <u>means</u> of suicide or self-harm.
- Avoid attempts to invalidate another person's experience. Noting that a given interpretation or experience may be a less common, or bringing up a contrary example, can be productive if done right. We are interested here in both trends and highly individual experience. Rarely are there clear-cut "right and wrong answers."
- Try to speak from your own experience and avoid speaking for others, or assuming you know how things look from someone else's perspective. At the same time, you are not required to share your own trials and tribulations, and you don't need to have been through something to talk about it!

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[2] This section and the sections titled "Guidelines for Discussion" are heavily indebted to a similarly titled sections from a syllabus from Neil Gong.

THE FINE PRINT

Uh, ah, almost. There are a few, uh, provisos.
Ah, a couple of quid pro quo.

UCSD Statement of Academic Integrity:

Please familiarize yourself with the definitions of cheating:
http://academicintegrity.ucsd.edu/excel-integrity/define-cheating/index.html
http://senate.ucsd.edu/Operating-Procedures/Senate-Manual/Appendices/2
Plagiarism is using the ideas or words of someone else (or something else) without acknowledgment. The minimum punishment for plagiarism on any written assignment in this course is **a failing grade for the assignment. No student shall employ aids (including artificial intelligence) in undertaking course work or in completing any assessments [i] that are not authorized by the instructor.** The use of generative AI programs to complete any stage of your written work is prohibited for this course. However, you may make use of AI to aid you in understanding course readings (without substituting reading the assigned works yourself). You must be careful not to plagiarize from any AI by not copying or paraphrasing notes, summaries, "tutoring" style conversations, or other engagements with AI – you cannot represent this work as your own without violating academic integrity. Do not be complicit in the devaluing of your university education – learning to write, and write well, is one of most important and marketable skills you gain at university. The use of AI systems such as "grammarly" (on the free setting) while you are writing is acceptable. All students should save multiple copies of their written work so that, if requested, they can provide documentation of the writing process.

As noted in the FAQ page from AIO: "As a Triton, you're expected to know some of the basics of excelling with integrity. For example:
- Cite your sources.
- Complete in-class tests and take-home tests independently.
- Complete your own homework assignments.

In general, the Academic Integrity Office recommends that before you engage in an action related to academic course work, assignments or exams, run your action through the following three tests:

- VALUES - is the action honest, responsible, respectful, fair and trustworthy?
- STANDARDS - does the action honor the integrity standards set by the University and/or by the course instructor?
- EXPOSURE - if my action was exposed to the course instructor or the AI Office, would I be okay with that or would they approve?

If the answer to ANY of the tests is a NO, then the action is likely a violation of academic integrity so avoid it!"

Students with Disabilities:
In adherence with "Appendix 3: Policy on Students with Disabilities and Steps for Academic Accommodation" if you require disability accommodations for this course you should be registered with the OSD and provide your accommodation letter to Professor Rogers and the Sociology Department Disability Coordinator as early in the quarter as possible. Accommodations cannot be granted retroactively.

http://senate.ucsd.edu/Operating-Procedures/Senate-Manual/Appendices/3

Electronics Policy
No electronics in the classroom. Cell phones are to be turned off/silenced – I suggest that you utilize the "do not disturb" feature of your phone that will still allow breakthrough calls for emergency contacts if you have caregiving duties – and stored away during class. You may not have your phone out on your desk. Studies indicate that the mere presence of a cell phone, even a silenced and face-down cell phone, will "occupy limited-capacity cognitive resources, thereby leaving fewer resources available for other tasks and undercutting cognitive performance" (Ward, A. F., Duke, K., Gneezy, A., & Bos, M. W. , 2017). This effect is not limited to the owner of the cell phone. Similarly, you are expected to take notes by hand or through the use of a tablet with a stylus. You may only

use a personal laptop with documented accommodations through the university. The negative effects of allowing laptops in the classroom are well documented as are the advantages of handwriting notes (Carter, S. P., Greenberg, K., & Walker, M. S., 2017; Glass, A. L., & Kang, M., 2019; Mueller, P. A., & Oppenheimer, D. M., 2014). These effects are not limited to the people using the laptop or phone, but effect those around them. For this reason, I ask that you do not use these devices in lecture. Students who disregard the electronics policy and are disruptive to class will be asked to leave lecture.

Full Attendance Policy
When you enroll in a course you make a time-commitment to be present at the regularly scheduled meeting times of the class. Regular attendance in lecture results in better grades, this is supported by literature on learning and my own experiences as an instructor. Lectures are also more interesting and successful when students attend class in person – your commitment to attend class is not only a commitment to me as the instructor, but to your fellow students as part of a learning community. Knowing that a choice is the correct course of action is not always enough to produce that behavior, so this course has a small incentive in place to help you in your commitment to attend class. Class attendance makes up 5% of your course grade, a nice boost for those who regularly attend. While attendance remains small, I will call roll. If enrollment in our course jumps or roll call becomes cumbersome I will change to the following method:

- Each day in class a "secret code" or "secret question and answer" will be given out to those who are present in lecture.
- You will have 4 hours after the conclusion of class to enter that code or answer that question on Canvas as part of an "attendance quiz"
- Your three lowest scores for these quizzes will be dropped – in essence creating a set of "free" absences. These are intended to accommodate the realities of life: occasional illness, car troubles, mental health days, etc. This means that if you experience an emergency or illness there is already an avenue to excuse your absence built into the system – you do not get "extra" excused absences because of such events. If you chose to use your "free" absences for non-emergencies you are taking the risk that they will not be available if you get sick.

Incomplete, late or missing work/Difficulties with the course
Late quizzes will be penalized by a deduction of 10% of the total grade for each day that it is late, not to exceed 5 days past the assignment due date. This late penalty is applied automatically by Canvas. Your lowest quiz grade will be dropped at the end of the quarter and not used when calculating your final course grade.

For all submission based assignments (not quizzes) the Canvas drop-box will close promptly at the due time and date. It will then re-open 8AM the following morning for late submissions. Assignments will not be accepted as email submissions. Be mindful of the cut-off time and plan accordingly: computer or Wi-Fi malfunction is not a sufficient reason to excuse the late penalty. I strongly suggest you do not put off submission until the last moment. Late assignments that have not made use of the Kitten Policy are subject to a 10% per day penalty, not to exceed 5 days past the assignment due date. This late penalty is applied automatically by Canvas.

Missing assignments and quizzes will be assigned a grade of zero.

Kitten Policy: The late work policy is designed to be fair to the majority of students who turn in their work on time and are engaged in class. However, each student may use one "no questions asked" kitten which will enable you to extend the deadline on one assignment for a maximum of two days. To use your kitten simply upload an image of a kitten in place of your assignment and be sure to resubmit the actual assignment within 48 hours of the original due date. The kitten policy cannot be applied to in-person midterms or in-person portions of the final.

The twos midterms and the final are given in-person and at the scheduled times. They can only be made up with documentation of an emergency (an unforeseen circumstance outside the student's control that would prevent a reasonable person from attending the midterm). If you are ill leading up to the exam contact the professor to establish communication about the issue as soon as it arises. If you are taken ill on the day of the exam it is essential that you email Dr. Rogers (jerogers@ucsd.edu) prior to the exam. Make up exams will be given in-person, under supervision at the Triton Testing Center or in Dr. Rogers's office. The exam will cover similar material but will not be the same as the missed exam. Dr. Rogers reserves the right to change the format of make-up exams, including the option to administer an oral examination.

If you are experiencing strains that are getting in the way of the course, technical difficulties, or difficulties with course content I encourage you to reach out to me sooner, rather than later. In addition, if you are experiencing extraordinary life circumstances, I encourage you to reach out to CAPS, academic advising or the Dean of Students.

Difficulty with Course Subject Matter

This course deals with difficult subject matter, including : mental illness, incarceration, homelessness, institutionalization, trauma, poverty, Drug Use, suicide and suicidal ideation, anxiety, Racism, Bias, Bigotry, Prejudice, and Violence. These topics are salient to the sociological understanding of mental health. It will not be possible for me to warn you each time such content is present in the assigned texts, lectures, or videos accompanying this course. Please be aware of this content and any personal limitations or sensitivities you might have around these topics. In addition, we do read a number of historical texts that use language which was not offensive at the time of publication, but may be offensive by contemporary standards.

It is understandable that course materials may bring up personal concerns and history for students. While I do care about my students and their experience within the course, and I am available to listen to you, I am not a licensed counselor or medical professional, and I am not qualified to provide clinical support. If you find that you need support due to the subject matter of this course, or for your mental or Physical health at any time, I encourage you to reach out to Student Health Services or CAPS at UCSD. Additionally, you may contact one of the additional community resources listed below. If the situation is a medical or life-threatening emergency you should dial 911.

Mental Health Services:
CAPS Central Office and Urgent Care: 858-534- 3755
CAPS After-Hours Crisis Counseling (24 hours): 858-534-3755
National Suicide Hotline: 988
Suicide Crisis Hotline: 800-273-8255 - Chat option available on their website: https://suicidepreventionlifeline.org
Access and Crisis Line: 888-724-7240
San Diego Warm Line (Non-emergency, but in need of support): 800-930-9276
NAMI San Diego Family and Peer Support Helpline: 619-543-1434, 800-523-5933
2-1-1 San Diego – helps you navigate access to mental health services in San Diego

TITLE IX Mandated Reporter Policy

UCSD Faculty, Staff, and Students believe in creating a community free from interpersonal violence, including sexual assault, partner violence, and stalking, in which all members feel safe and respected. I believe each student deserves a safe environment to pursue an education and I understand the devastating impact forms of power-based personal violence (i.e. sexual assault, dating/domestic violence, and stalking) may have. I am dedicated to make our campus safe. Please know that all faculty and staff on campus are mandatory reporters. This means that if you disclose an experience of sexual misconduct to me, I must report the experience to UCSD's Title IX Coordinator, office. If you would like to co-report your experience in a way that feels comfortable for you, we can discuss that process. Filing a sexual misconduct report does not mean you will have to get involved with an investigation or go to court. For more information on UCSD policy regarding nondiscrimination, sexual harassment, and sexual violence see:

https://www.ucsd.edu/catalog/front/shpp.html

If you have experienced sexual violence and wish to reach out there is support available through UCSD via CARE at SARC (https://care.ucsd.edu/) or CAPS (https://wellness.ucsd.edu/CAPS/about/Pages/contact.aspx). If you wish to seek assistance outside of the University system you can also contact RAINN via 800.656.HOPE (4673) or online (RAINN.org) where they have online chat services available or dial 411.

Food Support for Students

If you are skipping and stretching meals, or having difficulties affording or accessing food, you may be eligible for CalFresh, California's Supplemental Nutrition Assistance Program, that can provide up to $292 a month in free money on a debit card to buy food. Students can apply at "benefitscal.com/r/ucsandiegocalfresh" The Hub Basic Needs Center empowers all students by connecting them to resources for food, stable housing and financial literacy. Visit their site at basicneeds.ucsd.edu

READING AND LECTURE SCHEDULE***

Part 1 – What Makes it a Mental Illness, anyway?

	Mondays	*Wednesdays*	*Fridays*
Week 1	1/5 Welcome – Syllabus and Course Policies Lecture: "thinking like a sociologist" **Hook – TBD** **Example: Worldwide ADHD Rates** **Possibly – controversy studies**	1/7 **Lecture: "Introduction: The Surprising Difficulty of Defining Disorder"** Greenberg, Gary. "Inside the Battle to Define Mental Illness." Wired Magazine. https://www.wired.com/2010/12/ff_dsmv/ Escalante, A., 2020. Researchers doubt that certain mental disorders are disorders at all. *Forbes.* https://www.forbes.com/sites/alisonescalante/2020/08/11/researchers-doubt-that-certain-mental-disorders-are-disorders-at-all/?sh=23a596b215a6	1/9 **Lecture: "The Social Construction of Mental Illness"** Conrad, Peter and Joseph Schneider. 1981. "Social Construction of Illness" in From Badness to Sickness. excerpt 28-32 Marohn, Stephanie and Malidoma Patrice Some. 2014. "What a Shaman Sees in a Mental Hospital." Waking Life. 1-7. http://www.visionsandvoices.co.uk/uploads/9/2/2/3/9223519/what_a_shamn_see_in_a_mental_hospital_-_copy.pdf
Week 2	1/12 Lecture: "Clinical Psychological Paradigms of the Long 20th Century" Skim: Conrad, Peter and Schneider. 1981. "Medical Model of Madness"	1/14 Lecture: "Practices of Classification – History of the DSM" Conrad, Peter and Allison Angell. 2004. "Homosexuality and Remedicalization." Society.	1/16 Lecture: "Practices of Classification – International Comparisons" LILIENFELD, S. O., & ARKOWITZ, H. (2009). Foreign afflictions. *scientific american mind*, *20*(6), 68-69. https://www.scientificamerican.com/article/foreign-afflictions/ A Mental Disease by Any Other Name (Popular Press) https://medium.com/nautilus-magazine/a-mental-disease-by-any-other-name-300520004b5c Watters, E., 2010. The Americanization of mental illness. *The New York Times*, *8*. https://www.nytimes.com/2010/01/10/magazine/10psyche-t.html

Week 3	1/19 No Class – MLK DAY	1/21 Lecture: "Deviance and Social Control" Conrad, Peter. 1992. "From Badness to Sickness: Changing Designations of Deviance and Social Control." In *Deviance and Medicalization*. United States: Temple University Press. Scull, A. T. (1977). Madness and Segregative control: The rise of the insane asylum. *Social Problems*, *24*(3), 337-351.	1/23 Goffman – Total Institutions and The Moral Career of the Mental Patient Goffman, E. (1961). *Asylums: Essays on the social situation of mental patients and other inmates*. AldineTransaction. (Characteristics of the Total Institutions)
Week 4	1/26 Midterm 1	1/28 Lecture: "Mental Institutions at mid-century" Goffman, E. (1961). *Asylums: Essays on the social situation of mental patients and other inmates*. AldineTransaction. (The Moral Career of the Mental Patient) Rosenhan, D. L. (1973). On being sane in insane places. *Science*, *179*(4070), 250-258.	1/30 Lecture: "Mental Illness after De-Institutionalization" Sapien, J. and Jennings, T., 2018. I Want to Live Like a Human Being': Where NY Fails Its Mentally Ill. *The New York Times*. https://www.nytimes.com/2018/12/06/nyregion/nyc-housing-mentally-ill.html Gong, Neil. "How Defunding Abusive Institutions Goes Wrong, and How We Can Do it Right. *The LA Review of Books.* https://lareviewofbooks.org/article/how-defunding-abusive-institutions-goes-wrong-and-how-we-can-do-it-right/ Newman, Andy., 2025. He Was Locked Up in a Psych Ward. It Helped Him Get His Life Together. *The New York Times.* https://www.nytimes.com/2025/12/24/nyregion/nyc-homeless-mentally-ill-treatment.html

Week 5	2/2	2/4	2/6
	Lecture: "Criminalization and Involuntary Commitment" Ford, Matt 2015. "America's Largest Mental Hospital is a Jail." The Atlantic. https://www.theatlantic.com/politics/archive/2015/06/americas-largest-mental-hospital-is-a-jail/395012/ Morse, Stephen J. 1982 "A Preference for Liberty: The Case Against Involuntary Commitment of the Mentally Disordered." (54-62, 67-68) Cournos, Francine. 1989. "Involuntary Medication and the Case of Joyce Brown." (736-740) Bonnie, Richard. 1983. "The Moral Basis of the Insanity Defense."	Lecture: Issues in Measurement and Statistics Horwitz, Allan v, and Jerome c Wakefield. 2006. "The Epidemic in Mental Illness: Clinical Fact or Survey Artifact?" *Contexts (Berkeley, Calif.)* 5 (1): 19–23. https://doi.org/10.1525/ctx.2006.5.1.19 Hansen, Helena., Philippe Bourgois, and Ernst Drucker. 2014. "Pathologizing Poverty: New Forms of Diagnosis, Disability, and Structural Stigma Under Welfare Reform." Social Science and Medicine.	Lecture: Economic Arrangements Silver, Eric, Edward P Mulvey, and Jeffrey W Swanson. 2002. "Neighborhood Structural Characteristics and Mental Disorder: Faris and Dunham Revisited." *Social Science & Medicine* 55 (8). https://doi.org/10.1016/S0277-9536(01)00266-0 Prins, Seth J, Lisa M Bates, Katherine M Keyes, and Carles Muntaner. 2015. "Anxious? Depressed? You Might Be Suffering from Capitalism: Contradictory Class Locations and the Prevalence of Depression and Anxiety in the USA." Sociology of Health & Illness 37 (8): 1352–72. https://doi.org/10.1111/1467-9566.12315
Week 6	2/9 Lecture: Over and Under-Diagnosis of People of Color Netherland, Julie, and Helena Hansen. 2017. "White Opioids: Pharmaceutical Race and the War on Drugs That Wasn't." *BioSocieties* 12 (2): 217–38. https://doi.org/10.1057/biosoc.2015.46 Metzl, Jonathan M. 2010. *Protest Psychosis: How Schizophrenia Became a Black Disease*. 1st ed. Boston: Beacon Press. "Preface" ix-xvi, Ch.12 "Revisionist Mystery" 91-94, Ch.13 "A Racialized Disease"	2/11 The Puzzle of Different Rates of Recovery in Different Cultures Luhrmann, T. M. 2007. "Social Defeat and the Culture of Chronicity: Or, Why Schizophrenia Does so Well over There and so Badly Here." *Culture, Medicine and Psychiatry* 31 (2): 135–72. https://doi.org/10.1007/s11013-007-9049-z	2/13 *Review*
Week 7	2/16 Presidents Day - No Class	2/18 Midterm	2/20 Lecture: Mad Pride and Neurodiversity The Bipolar World, San Francisco Bay Guardian, by Sascha Altman DuBrul

			Listen to: Radio Lab episode on "Elements", segment on "Lithium" Minutes 0 – 22. https://radiolab.org/podcast search "Lithium" or "elements" listen through service of your choice. Unger, Ron. 2019. *Recovery Versus Mad Pride: Exploring the Contradictions. Recovery from "Schizophrenia" and Other "Psychotic Disorders" [BLOG]*. Eugene: Newstex. https://www.madinamerica.com/2019/05/recovery-versus-mad-pride/
Week 8	2/23 Introduction to TAG Read and Be Ready to Discuss TAG Part 1 & 2	2/25 Technology and Mental Health Turkle, S., 2023. Always-on/always-on-you: The tethered self. In Social Theory Re-Wired (pp. 485-495). Routledge.	2/27 Discussion – TAG, Part 3 TAG – Part 3
Week 9	3/2 Going "No Contact": Is there an Estrangement Epidemic? Russell, Anna. "Why are so many people going no contact with their parents." *Retrieved August* (2024).	3/4 Self Diagnosis and Therapy Speak Creep Dr. TikTok? The Impacts of Misinformation on Mental Health Self-Diagnosis https://petrieflom.law.harvard.edu/2025/04/02/dr-tiktok-the-impacts-of-misinformation-on-mental-health-self-diagnosis/	3/6 AI and Mental Health Reading TBA
Week 10	3/9 Interview Day – Go Collect Interviews for your project. We will NOT meet in person.	3/11 The Anxious Generation? Reading due: TAG – Part 4	3/13 Wrapping Up No Reading Today – Bring your survey results.
Final		3/18 *3/18 11:30AM – 2:29PM COA B23*	

**All aspects of this syllabus and the course schedule, except grade allocation criteria, are subject to change by the Instructor.