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The Function of the Social Critic in Assessing Community Mental Health and Social Pathology

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ABSTRACT

The concept of mental health is defined in relation to Fromm's notion of love and Dunn's notion of high-level wellness. These are in turn related to community mental health. It is easier however, to detect and document forms of social ill health in the community than to observe forms of mental health. Nevertheless, the uncovering of social ill health is perhaps even more important than some positive programs of mental health. This is because it is easier to obtain agreement with respect to social pathology which needs liquidation than on value-outlooks which should be widely disseminated. The achievements of our social critics, in describing social ill health in its social pathology, are catalogued. The various kinds of benefits which a modern community obtains from the social critic's exposes of social ill health to be found within its borders, are discussed. Twelve forms of benefit flow from the exposure of social ill health by the social critic. These forms are described and the value of the social critic's functions for raising the mental health level of the modern community, is assessed.

1. COMMUNITY MENTAL HEALTH DEFINED

What do we mean by mental health? There are probably almost as many ways of defining this concept as there are writers on the subject. A first approximation might be to define mental health as the capacity to give love and to define the capacity to give love as the ability to display towards others the four attributes which Fromm [1] has emphasized, namely, care, responsibility, respect and knowledge. The succinctness of this notion of love lies, I think, in the fact that one cannot very well love a person without *caring* for that person, assuming, of course, that no one else interposes a barrier to prevent the exercise of that care. But if one shows *care* or *concern* for another, this is clearly another way of stating that one feels *responsibility* for that person. Such responsibility is almost invariably accompanied by respect. The exercise of responsibility without *respect* — except in such obvious cases as that of a jailer for the prisoners in his care or, perhaps, a surgeon treating a gangster who has just been seriously wounded by a rival gunman — must, indeed, be very rare. If we thus care about someone in the psychological sense rather than as

a professional duty, *respect* is almost sure to be present. All these attitudes — sense of care, responsibility and respect, when not a matter of duty — occur in most instances when we have *valid knowledge* of the qualities of another. It would be difficult to display these attitudes towards individuals who in a substantial way represent some sort of enigma to us.

But although Fromm's concept of love is useful for the definition of mental health, it does not go far enough. This is because Fromm's concept concentrates on the psychological status of the loving person. What is more important, however, for an adequate concept of mental health, is some knowledge of the psychological status of the loved one, that is to say, some knowledge of the inner states of the being which is loved.

Here, I think, a better insight is obtainable if we make use of Halbert Dunn's [2] concept of "high-level wellness." This concept he defines as "... an integrated method of functioning which is oriented toward maximizing the potential of which the individual is capable, within the environment where he is functioning." (pp. 4-5).

Community mental health might then be defined, from Dunn's standpoint, as the aggregate of the observable and measurable characteristics of high-level wellness among those who live in the community. What would a community which consciously seeks to achieve mental health, be expected to do in order to achieve this high level wellness? Dunn himself provides the answer. Such a community would establish.

1. Means of improving wellness in family living and in community living.
2. Measures to teach wisdom (in addition to, and as distinguished from, knowledge) within the present framework of education.
3. Measures to develop understanding and methods of adjustment in man's interpersonal relationships, throughout life.
4. Measures to develop higher levels of wellness among those in leadership positions with control over others.
5. Methods to ensure open channels of information and access to the reservoirs of knowledge, especially in controversial subjects.
6. Systematic and continued efforts to enhance the importance of creative expression throughout life and society.
7. Systematic and continued efforts to foster altruistic expression as a tonic to the spirit of man, and as a means of providing ego security among one's fellows.
8. Crystallization of the concept of maturity in wholeness, in all its ramifications.

9. Opportunity to utilize for the benefit of society those who have demonstrated maturity in wholeness and who have attained a high level of performance in their lives." (pp. 205-6).

The most important concern to the professional worker in the fields of mental health is the assurance that the forces, institutions, cultural themes, ways of life, and interpersonal processes characteristic of the psychological and social milieus in which our citizens actually live, promote the *desiderata* which Dunn emphasized. In contrast, those forces, institutions, cultural themes, ways of life and interpersonal processes that preclude these desiderata cannot be regarded as creating mental health so that the community which fostered these dysgenic features can be regarded as a mentally unhealthy community. In the present paper we shall imply these considerations whenever we talk about community mental health or its opposite.

Dunn then draws a series of implications from his concept of high-level wellness — implications which are of importance if we are to say that the prevailing community atmosphere is a mentally healthy one. I think Dunn's arguments can be interpreted in the following terms. If, in fact, a community is blessed with mental health then, as Dunn sees it, such a community will exhibit the following features. 1. The different channels in which its citizens deploy their energies will be found to reinforce one another. In this way one type of interest does not functionally block the expression of another [2]. The citizens of a mentally healthy community achieve personal integration in the face of fairly moderate, social change. 3 No job discrimination is shown towards the senior citizen and the community avoids the fiction that beyond a certain age all individuals are socially and occupationally useless. 4. The Greek cultural and educational ideal of *paideia* is expressed socially and no individual feels he has lived a good life unless he can add something to the culture from which he has so freely drawn. 5. Citizens of the mentally healthy community do not fear social change. Instead they adapt to it. 6. The development of one's mental gifts is the responsibility of the individual, himself, but the community facilitates the task for its citizens, chiefly by providing educational experiences and removing road blocks to personal growth. 7. A free mind is the product of open channels of communication and a mentally healthy community provides these. In an ideal situation, secretiveness would never be regarded as healthy, whether personal or organizational.

In addition, says Dunn, the mentally healthy community will also exhibit the following characteristics. 8. Men can explore their future and the leading vehicle for doing so will be creative imagination. It is incumbent upon a mentally healthy community to leave this gift unfettered. 9. The good society also

facilitates the achievement of personal integrity and does everything in its power to encourage a realistic self-concept for each of its citizens. A realistic self-concept will demand a match between one's abilities and one's aspirations. 10. The mentally healthy community sponsors a balanced life for its citizens. This means that we develop the capacity to enjoy ourselves and to deploy our talents in several dimensions. It definitely does not mean specialization of interest to the exclusion of everything else. 11. A mentally healthy community helps its citizens to search for those purposes, goals and projects which will nurture the mind of man throughout his life cycle. 12. Each citizen has his own particular sphere of interest and influence and the healthy community inculcates in its citizens the desire for an active participation in these spheres, rather than a passive and resigned acceptance of what others do and decide. 13. Finally, the healthy community encourages the search for goals sufficiently broad and important to interest the men and women of other communities and other cultures, so that hopefully, sooner or later some sort of a value-consensus will be found for all mankind. When this becomes a reality international tensions, conflicts and anxieties are reduced and the coal of world peace may be assured.

It is easier, however, to detect themes which foster poor mental health in a community than to detect the activities which are producing high-level wellness. This is because social pathology sooner or later becomes conspicuous as it becomes cumulative, whereas a widespread healthy outlook is likely to be less noticed and appreciated precisely because it tends to be taken for granted. This is the usual story in human affairs. Desirable situations are usually missed only when they leave our grasp entirely. Then, too, the effects of social pathology are often noticed only by the observant and involved, while the rest of us who take things at face value, rarely take stock of some of the mentally and socially unhealthy consequences of the status quo. The facade and the public image, the slogan and the propaganda piece, the publicity and the razz-matazz are taken as the truth. That which is out of joint is well hidden and few of us care to probe beneath the surface. But behind the mental ill health of any community is nearly always its social ill health.

The detection of social ill health is, however, something which our body of social critics are very good at. These social critics may be intellectuals, progressive politicians, social reformers, clergymen concerned with social misery, novelists and playwrights interested in exposing social sham and hypocrisy, educators with a mission, lawyers determined to right social wrongs and many other types of activists too numerous to mention here. It is the existence of the social critic that often makes it possible to call the score on the hidden social ill health of the community, and, even more pointedly, on the mental ill

health that must be present in a community that tolerates the social pathology in question. Sometimes the social critic has to indict a limited sector of the community, treating the community at large as its victim. In either case, however, the social critic often calls to public attention those social disgraces and twisted values which are present. Frequently the social critic has to call attention to imbalanced decision-makers whom the community easily tolerates, a situation which spells community ill health. Community ill health is usually of a kind which works against the processes that promote high-level wellness. What the social critic lays bare *eventually* becomes the sphere of operations of the professional worker in the field of community hygiene, necessitating the research, the welfare proposals, the long-range programs and the public education that are needed to deal effectively with those derangements in community values which are what we ordinarily mean by poor community mental health.

The importance of the social critic, then, and of the spadework which he regularly performs for the professional concerned with community mental health, is immeasurable. Because this is so it seems to me that a statement of the chief services the social critic is able to provide the professional workers concerned with community mental health, is in order. In the section which follows let us try to state these fundamental services provided to the profession by the social critic in our time.

2. THE SOCIAL CRITIC AND THE COMMUNITY'S MENTAL HEALTH

We have said that the social critic often succeeds first in focusing public attention upon a social disorder and then professional attention upon it. The muckraking period in American history is a reminder of the truth of this fact. Upton Sinclair [3], the novelist, functioning as a social critic of labor conditions in the Chicago stockyards, wrote *The Jungle* in the early years of this century. An *indirect* result of the shock this book created was the establishment of the U.S. Food and Drug Administration. We can turn to a more recent example of the effect of social criticism in disestablishing an undersirable condition. Ralph Nader's [4] book, *Unsafe At Any Speed*, was a shocking expose of the indifference of automobile manufacturers to the task of designing proper safety features and building them into the American car. Recent Federal regulations to ensure design safety for car-owners has been the result. Between the time *The Jungle* appeared and Nader's expose saw the light of day, many other examples have appeared of books which have aroused the social conscience of the American community to some of our outrageous social conditions. At the same time these ventures in social criticism also expose the conscienceless outlook of decision-makers in some industry or some government agency. The social critic thus provides grist for the mill of professional attention.

Perhaps one of the most succinct contributions in recent years, in this connection, has been Michael Harrington's [5] *The Other America* with its expose of poverty. Chronic poverty creates an extremely poor condition of mental health in its victims. At the same time the feeling of well-being which derived from the complacency shown by the great American middle class which had for so long refused to notice poverty — and thereby do anything about it — is, itself, hardly the best example of a healthy mental outlook. But Harrington's volume was only the first in a series which brought public attention to the fact of poverty and which led to the various Federal anti-poverty programs with which we are now all familiar. Many of these anti-poverty programs have involved to some degree and in various ways, professionals of every sort who have a basic and continued interest in poor community mental health. Quite obviously a conspicuous example of poor community mental health is the state of mind engendered among the chronically poverty-stricken in Appalachia.

To the extent that the social critic — whether novelist, social reformer, social welfare critic, social scientist, liberal attorney, or any other category one cares to invoke — lays the groundwork for needed social welfare and often directly or indirectly points up the need for one or another community health program, his value is assured. That groundwork eventually becomes the basis for what Daniel Moynihan [6] has called "the professionalization of reform." The latter activity invariably involves a consciousness of community problems and a sensitivity to the need for community health programs. Recognizing, then, the basic value of the social critic in relation to arousing the social conscience of the nation and in improving the humaneness and mental health of the American community, itself, let us try to establish below the particular benefits the community derives from the hard-hitting exposes of the social critic in whatever guise and form his criticisms, alarms and social indictments, appear.

1. The social critic points out a variety of existing social pathology which requires reduction or elimination. If he makes use of an art form like the novel, he introduces us to man's inhumanity to man and he does so in *unalienated* terms, carrying the needed emotional impact. This enables us to realize that if the conditions he describes are allowed to remain, the victims of these conditions will unquestionably suffer psychologically. If the work of the novelist as critic produces a powerful impact, then those who can do something to relieve the conditions described by the social critic, will have their consciences aroused. This may result in measures being taken to produce the needed change. As a consequence the mental health of both the victims of the conditions whose elimination is desirable and the outlook of their fellow-citizens who once tolerated those conditions, tend to improve.

2. The social critic often creates perspective on the familiar. Most of us tolerate social abuse and social pathology because we either cannot see it at all or we see it and excuse it in terms of rationalizations and stereotypes. Perception and sensitivity tend to be blunted when others, rather than ourselves, are the victims of unjust conditions. The social critic succeeds in piercing the psychological defenses of social callousness and the dishonesties and self-deceptions of social irresponsibility. This is all to the good.

3. The social critic is frequently quite constructive. He often presents alternative plans, proposals and programs for the relief of the social illness he describes. The social welfare worker, the economist, the mental hygienist, the social scientist, often assume the double role of both social critic and social planner. In this dual role they take, we are not only shown some of the unnecessary social pathology we tolerate but we are also provided with alternative constructive social measures for the elimination of the conditions the critic has described. Thereafter the expertise and organization of the professions concerned with mental health and social welfare can come into play and do a better job because of the spadework done by the social critic.

4. One of the great values of the social critic, as novelist, playwright or reformer, is that he enables us to see community pathology from the point of view of its victims. This involves us in their suffering. There is no more powerful way than this to arouse the dormant conscience of a community. The more careful work of the social scientist, incorporated into charts, graphs and tables, often separates all but the most imaginative and thoughtful reader, from the flesh-and-blood realities, suffering and tragedies that lie behind the facts and statistics presented. The more dramatic techniques of the crusading novelist and playwright, however, arouse the public conscience and this is precisely what is needed to support the humane efforts of the social welfare and mental health professions.

5. Part of the mental outlook of those to whom life has been good in the typical American community, reflects a built-in tendency to take social abuses for granted. A type of alienation appears which is best described by the attitudes "Go fight City Hall." Maslow has christened this crass, do-nothing attitude "pathological normalcy." One great value inherent in the functions of the social critic is that he punctures the attitudes underlying pathological normalcy and thereby contrives to galvanize community energies towards the elimination of the social abuses to which he calls attention. The social critic disturbs us. He makes smugness difficult. In so doing he thereby creates understanding for the mental health programs advocated by professionals.

6. Deficiencies in community mental services, whether from private or public sources, are sometimes revealed by former mental patients turned critic. This situation, of course, was the basis of Clifford Beer's [7] classic, *The Mind That Found Itself*, and which led to the mental hygienic movement. Since the appearance of this volume there has been a vast flood of social criticism from the once mentally ill, all pointing up the community's failure to provide efficient mental health services. A representative sample of the social criticism of ex-patients are the writings of Mary Jane Ward [8] who wrote *The Snake Pit*, to mention a well-known critique in fictional form, and the work of O'Brien [9], Krim [10] and Kruger [11], to mention some less familiar work. Work of this sort represents an off-beat type of social criticism, particularly in connection with the problem of mental health, but it is extremely valuable. The writer who has been an ex-patient, often combines the triple role of expressive critic, victim, and that of a reformer who proposes remedial measures. In this latter role he functions temporarily as a professional specialist on community health problems. This is all to the good.

7. Social critics as a class serve to focus attention upon those themes of our culture which lend themselves to social evils and mental disorder: the ignoring and neglect of the aged and the poverty-stricken; the poor treatment of the mentally ill; the overemphasis on military solutions to complex problems; crime, corruption and juvenile delinquency; and many others. Each social critic usually deals only with the social evils with which he is familiar and the psychological effects of these evils on the mental health of both their victims as well as on those who produce and/or tolerate them. Nevertheless, taken collectively, the work of our social critics makes clear the nature of those social problems which, sooner or later, will constitute the concerns of the mental health and social welfare professions. Specialists in these areas eventually have to take up the slack in terms of research, plans and programs. The work of the professional thereafter tends to be aimed at dissipating both the social evils described by our social critics as well as the mentally poor attitudes these evils have left in their wake.

8. The work of our social critics is, in a sense, a quasi-judicial review of the areas of social abuse and mental stress in which our citizens require public education. That education must be provided not only through newspapers, magazines and books. It will eventually also have to be reflected in high school and college curricula which will acquaint our educated citizens of the future with the problems of a world they never made but with which they will, unfortunately, have to deal. Once it is agreed that the academic curriculum must reflect the social evils and mental stresses of the community, then it becomes

incumbent upon professional workers in the field of mental hygiene and community mental health, to decide what the content of the curriculum shall be, that is to be devoted to these problems. In addition, they would have to decide where in the educational sequence that content will have to be placed and what parts of the educational fare on these matters shall be made mandatory for all.

9. A great deal of community ill health is a product of mass culture and a great deal of what is called mass culture consists of techniques made available to the populace, for learning how to be "besides one's self." Basically these are techniques for escaping from the mature responsibilities of facing up to one's problems and from the task of establishing a firm personal identity. They provide vicarious substitutes for pleasures and objectives best attained directly by the individual himself, but with understanding and in moderation. The social critic of mass culture often does yeoman's work in pointing out by means of social analysis, the unresolved problems of the average citizens and the average family, as these are revealed by the type of entertainment fare which has maximum community appeal. We see this motive and habit revealed, to some extent, in the assessment given of urban mass culture made by Chermayeff and Alexander [12]. The mass values and attitudes the social critic reveals frequently serve as a guide in enabling the professional worker to assess the prevailing mental health and outlook of the community. One benefit that can be derived from such an evaluation is the ability to propose programs that may help to offset the attitudinal pathology which creeps upon the community gradually, as a result of the morally and socially uncritical fare to which the citizen is daily exposed.

10. A great deal of the social pathology of the modern community is a function of the large-scale, haphazard urbanization of our time. Poor community mental health is often a product of residential congestion, noise, and the various stresses of urban life. These have been summed up to a considerable extent by Herber[13]. Alienation and anomie are frequently heavily associated with the fragmentation of urban activity and with the absence of any sense of organic community. Even the absence of such things as the opportunity for play, the absence of a sense of neighborliness, the disruption of contact with nature, and the visual ugliness of much of the urban scene — all conspire to make for boredom, sometimes to the breaking point. This yields the blasé attitude which Simmel [14] has described. Life as it is lived in the metropolis is usually and unnecessarily a stress-producing situation. The social critic here again is an invaluable adjunct in providing the mental health profession with a picture of those aspects of the urban milieu which often generate the conditions the mental health specialist is expected to deal with.

11. The social critic inadvertently performs the function of making us ask

ourselves what we mean by social and community mental health. In effect, he is often trying to answer the basic, philosophical question "What is the good life?" Questions of this sort give scope and direction to the work and objectives of those concerned with community mental health. This is the sort of activity and intent underlying such diverse criticism as that contained in Fromm's [5] *The Sane Society* and *Escape From Freedom* [16], in *Communitas* by the Goodmans [17] in Mumford's [18] *Technics And Civilization* and in Borsodi's [19] *This Ugly Civilization*. It is also part of the perspective which underlies criticism of life in the modern corporation — criticism of the type exemplified by Harrington [20] and Vance Packard [21]. In a more direct, less philosophical and more bitter vein we also see such concerns implicitly invoked in the vast muckraking literature of our time. The failures of community with which the muckraker concerns himself are, at bottom, failures in mental health. They are the forms social pathology takes in our time. By implication they assert that what a muckraker inveighs against is not part of the good life and that the conditions he criticises constitute an unmistakable example of mental disorder on a social scale. The muckraker's indictments are, in a sense, negative criticisms. It is the knowledge of the existence of the social pathologies stressed by the muckraker, which prompts social critics like Fromm, Mumford Borsodi, Ortega y Gasset [22, 23] and many others, to try to answer the more positive question of what constitutes the good life. In doing so they are also making an effort to define what is meant by good mental health on the social level. Such activities on the part of our social critics certainly constitute the philosophical foundations of the work and objectives of almost all professionals associated with programs for the improvement of the mental health of the community.

12. Much of the stress and maladaptation we find in the American community today is a function of the pace and quality of social change. Often the rate of social change is much too rapid for most of us to accommodate easily to it. As a result we often find the social critic calling for managed social change. In this way a tolerable rate of adaptation becomes feasible — a rate of adaptation which will produce fewer social dislocations and less nervous strain on individual members of the community. In a sense this has been indirectly recognized by Sorokin [24], one of our most voluble social critics. Armed with an awareness of the undesirable effects of too rapid social change and an awareness of the need for personal adjustments that are often too demanding, the mental health practitioner has a real contribution to make to the social objectives of community and to economic planning. He or she is likely to be able to foresee rates and types of planning that might easily create strains in community mental health. If the mental health worker's advice is taken in relation to such activity,

community reconstruction and economic planning may be modified so as to minimize the risk of increase in community stress. Sophistication, however, with respect to the effects of the pace and quality of social change, is often *initially* provided by the social critic. The mental health and social welfare professions, however, are usually the real agents, that can do something about the conditions the social critic deplores. Here again the mental health professions can be said to owe an immeasurable debt to the work of such critics. It would probably be of real advantage to academic programs concerned with mental health to provide at least one course on social criticism for all those who intend to enter the mental health and social welfare professions.

We have tried in the present paper to emphasize the fact that by almost any definition of community mental health the presence of large-scale social pathology in the community is a rough index of the prevalence of undesirable social attitudes. These undesirable social attitudes can be said to be present only when it is true that (1) most members of the community are aware of the social evils present and (2) either ignore them or do nothing about them. This indifference occurs when most citizens are so alienated with respect to the possibility of liquidating community distress that, although they would prefer to see the disappearance of existing pathology in the community, they do not organize to do anything about it. The prevalent attitude in such cases is that the job is too big to be tackled. With this technique of self-forgiveness over their moral indifference, the conscience of most citizens grows lax and the abuses generally tend to grow more severe. When such callousness towards existing social abuses becomes prominent, a strong case can be made for asserting that this moral laxity is an indication of pockets of ill health in the community. This indictment, of course, does not apply to citizens who are ignorant of the social evils about them.

Many American urban communities today find themselves in a situation such as the one just described. This is equally true for the national community in many respects. It is at this point that the cumulative processes and attitudes of the community's citizens with respect to the toleration of, or indifference to, existing evils, can be sometimes halted and sometimes reversed. This halting and reversal is effected to some extent by the moral functions and social philosophies of our social critics. These social critics come from many sectors of the community but are found chiefly among our novelists and serious writers of non-fiction. Representatives of these two groups often dedicate themselves to exposing our existing evils. We have tried to emphasize several of the values which such critics provide, not only in relation to the augmentation of community welfare but also to the dissipation or lessening of poor community attitudes with respect to community distress. When their work succeeds in doing this

they are providing a genuine service toward the improvement of community mental health. Just as important, however, is the fact that the work of our social critics often acts as a primer for releasing the energies of professional workers in the fields of mental hygiene, community mental health, social welfare and psychotherapy.

In this sense the social critic is an active, if silent, partner of workers in all of these professions. This partnership should not only be more explicitly recognized. It should also be somewhat formalized. An official cross-fertilization, aided and abetted by the education and training of workers in those fields, can prove of value to the community and its citizens, to a more effective community use and appreciation of social criticism and to all the professionals concerned with reducing community mental ill health, in whatever framework it may crop up. A more humane community outlook can house many mansions. Work, however, still remains to be done in the direction of the improvement of community mental health. The social critic has much to offer in this direction.

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