DISEASES OF SOCIAL AND MENTAL HEALTH: ARE WE CONCERNED?

The rates of social crimes taken as ‘social health indicators’ are commonly used for assessing the magnitude of the diseases of social and mental health (DSMH). The prevalence of social crimes, the indicators of the DSMH, worsened dangerously in recent years. Though both developing and developed countries appear to be affected equally, due to lack of proper documentation, it is difficult to assess the trend of the DSMH in developing countries like Bangladesh. However, the trend of DSMH may be assessed based on some published reports.

British Crime Survey (2009/10) reported that violence against girls and women are becoming a common hidden crime in UK. At least 1 in 4 women in the UK experienced domestic abuse in their lifetime; almost 1 in 5 women are likely to experience sexual assault in their lifetime. It is estimated that about 66,000 women in England and Wales have had female genitals mutilated (FGM) and 100-140 million women have undergone FGM worldwide. The Bureau of US Statistics (1998) reported – “just over 1,800 murders were attributable to intimates in 1996; nearly 3 out of 4 of these had a female victim; in 1976 there were nearly 3,000 victims of intimate murder”. Overall, 65 percent of all intimate murders were committed with a firearm. In 1996, women in the USA experienced an estimated 840,000 rapes, sexual assault, robbery and aggravated assault.

What are the contributing factors that made our community so vulnerable to DSMH? The social researchers and the social reformers have expressed their concerns on this issue. To them, DSMH is the most viewed attribute to the decaying of Social Capital (SC), first postulated by Hanifan (1916). Jacobs revived this idea in 1961 and later strengthened by Bourdieu (1983), Coleman (1988) and Putnam (2000). All of them contended SC as the important element for the maintenance of social cohesion helping social, political, and economic networks and interactions that inspire trust and reciprocity among citizens leading to common good and mutual obligation. SC is strengthened by social bondage, which allows people more time for recreation, voluntary activities, civic engagement and self care. The erosion of SC reduces trust and understanding among citizens. Less and less civic engagement leads to the loss of a sense of community. A positive association between social relationships and health has shown that the higher the quality and quantity of these relationships, the greater are the health benefits. Studies have also shown that persons with a low SC may be at risk for poor physical and mental health.

The declining trend of SC in the USA over the last four decades resulted in a fundamental shift in: a) Political and civic engagement: Voting, political knowledge, political trust, and grassroots political activism are all down. Americans sign 30 per cent fewer petitions and are 40 per cent less likely to join a procession of protest, as compared to just 3 to 4 decades ago. The declines are in community life: membership and activity in all sorts of local clubs, civic and voluntary organizations have been falling at an accelerating pace. In the mid-1970s the average American attended some club meeting every month, by 1998 that rate of attendance had been cut by nearly 60 per cent. b) Informal social ties: In 1975 the average American entertained friends at home 15 times per year; the equivalent figure (1998) is barely half that. Virtually all leisure activities that involve doing something with someone else, from playing volleyball to playing chamber music, are declining. c) Tolerance and trust: Americans trust one another less now than in the past. Survey data provide, for example, employment opportunities for police, lawyers, and security personnel were stagnant in the past - had fewer lawyers per capita in 1970 than in 1900. But in the last quarter century with the erosion of SC and trust these occupations have boomed, as people have increasingly turned to the courts and the police.

An eroding SC and DSMH affected all countries whether be it industrialized or the least developing ones. Initially, the most civilized countries were affected with the manifestation of loosening social bondage, breach of community-cohesion and overwhelming consumerism transmitted rapidly through electronic media. Subsequently, the media was successfully used to extend consumerism to the rest of the world, very steadily and insidiously. The people of the third world just imitated the civilized (modern) world not knowing the dangerous sequels of destroying...
their own traditional social bondage. The epidemiological triad (agent-host-environment) of mental and social disease may be viewed to be ‘desperate consumerism’ as the agent, ‘human brain’ as the host and the ‘relentless media exposure’ as the environment, thus completing the triad and resulting in a pandemic. Had we protected our own inherited social bondage or had we strengthened our own social capital based on scientific knowledge, then we could have protected trust, solidarity and bondage preventing the DSMH.

The elements of SC are bonding, bridging, and linking characterized by strong ties within a network that strengthen common identities and functions as a source of help and support among members, ties that link people from different networks together and become important sources of information and ties between people in different hierarchies. Studies have found that walking, cycling, public transport sharing, friendly neighborhoods can help create more SC through enhanced levels of community and social engagement and social relationships. Improved social life would provide more local schools, parks, play ground or other places where people interact and provide gathering spots for teens and the elderly. The poor quality of relationships between teens and elderly predict poor future health, both physical and mental. Lack of care, support and warmth, and conflict, over-control and inappropriate discipline appear to be detrimental to health. The impact of poor social relationships could be demonstrated on health, symptoms of common health problems, mental health and specific diseases such as cardiovascular disease, cancer, musculoskeletal problems, depression and attempted suicide.

A strong SC allows citizens to resolve collective problems more easily. People often might be better off if they cooperate, with each doing his/her share. It greases the wheels that allow communities to advance smoothly. The people are trusting and trustworthy, subject to repeated interactions with fellow citizens. When people lack connection to others, they are unable to test the genuineness of their own views, whether in the give or take of casual conversation or in more formal deliberation. Without such an opportunity, people are more likely to be swayed by their worse impulses.

Child development is powerfully shaped by rich SC. Trust, networks, and norms of reciprocity within a child’s family, school, peer group, and larger community have far reaching effects on their opportunities and choices, educational achievement, and hence on their behavior and development. People are friendlier, and the streets are safer. Places have higher crime rates in large part because people don’t participate in community organizations, don’t supervise younger people, and are not linked through networks of friends. Regular club attendance, volunteering, entertaining, or attending cultural or traditional or national festivals is the happiness equivalent of getting a college degree or more than doubling one’s income. The SC becomes mentors helping our children to become compassionate, courageous, respectful, confident and purposeful. The greatest gift SC can give our children is the authentic self-esteem that comes from developing their virtues — becoming contributors rather than consumers. To reduce the prevalence of DSMH and crimes the world needs people willing to volunteer community responsibility with the maxim — “think together and work together, share miseries and happiness together”.

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