

RC 49

Sociology of Mental Health and Illness
Research Committee of the International Sociological Association (ISA)

Newsletter

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From the president

As the new RC 49 President for the period from 2006 to 2010 I am very delighted to inform you about the successful activities of our research committee in the last two years and to invite you to take part in the next meaningful events. I am also very pleased to introduce you the new RC49 Steering Board elected at the business meeting in Durban, South Africa, on July 25, 2006.

I hope that reflection of activities gives you an impression of the meaningful development and growth of sociological research in the field of mental health and illness. In spite of the recent success of neurophysiology and genetics most experts agree that neither the etiology nor the course of mental illness can be sufficiently explained without the contribution of the social sciences. The analysis of the gene environment interaction may become one of the most exciting fields of research within the next years. On the other hand, the treatment and care of persons with a mental disorder has dramatically changed during the last two decades and the methods and concepts of sociology are needed to understand the dynamics and the consequences of these transformations.

As one of the smaller Research Committees of the International Sociological Association we successfully established and maintained our status as a Research Committee since 1994. I want to thank the former presidents Rumi Kato Price, Tsunetsugu Munkata and James Gary Linn and all members who made this possible by their outstanding work. Special thanks go to those of you who participated in the organization of conference programs and the presentation of papers.

I appreciate the confidence expressed by RC49 members in giving me their vote for President. Together with the new board I will make any efforts to continue and to deepen the successful work of Gary Linn and to underwrite that the sociology of mental health and illness will play a decisive part in international sociology.

Our next activities will be the organisation of the RC 49 program for the First World Forum of Sociology which will be held in Barcelona from September 5-9, 2008. And let me remind you of the next conference of the Western Social Science Association which will take place in Denver, Colorado, USA, April 23-26, 2008.

You will find calls for the submission of papers in this newsletter and also at our homepage <http://www.isa-sociology.org/rc49.htm>. I hope that many of you will take these opportunities to present your research and to meet with colleagues all over the world.

Vital Association news and updates comprise the focus of this newsletter. But remember, the newsletter of the RC49 is *your* newsletter. My vision is to serve the membership by publishing stimulating articles on themes of professional interest as well as Association news. Please contact me with your ideas about possible future themes or articles.

Hope to see you at one of the occasions aforesaid!

Reinhold Kilian
President of the RC 49
Ulm University
Department of Psychiatry and Psychotherapy II
Günzburg, Germany

Paper: Family planning in young females with severe mental disorder: An application of the biographic approach in the sociology of mental health and illness

by Silvia Krumm, Ulm University, Germany

There is a long tradition of sociological research within the field of psychiatry. The expression “Psychiatric sociology” that was first introduced by Thomas D. Eliot in 1928 covers many research branches: social causes and definitions of psychiatric disorders, social aspects of psychiatric care, and social conditions of prevention and rehabilitation of psychiatric disorders. Further areas of interest are the study of psychiatric institutions and professions as well as the study of psychiatry itself (Reimann 1973). As broad as the research interests in psychiatric sociology as manifold are the theories, methodologies and methods to be used. In the following, the “biographic approach” will be introduced as a primary sociological approach and it will be questioned why this approach is a comprising attempt for the study of people with psychiatric disorders in current (postmodernistic) society. Finally, a research project applying will be introduced where the biographical method: “Family planning of young women with severe mental illness between individual responsibility and social stigmatisation”.

Biographic studies

Sigmund Freud was one of the first who studied biographical events and brought them into relation to psychological problems in the adult. It was somewhat revolutionary that not only famous people like kings and war lords held interesting biographies but also people like you and me (Fuchs-Heinritz 2005). In particular, sociologists of the "Chicago School" were influenced by psychoanalytical concepts and focused on social/biographic conditions of psychiatric disorders. The beginning of biographical research in sociology is commonly traced back to 1918 when Thomas and Znaniecki published their study about „The Polish Peasant in Europe and America“. This extensive study which focuses on individual experience of modernisation processes functioned as an archetype for similar studies about life conditions of lower social class members. In the following, many biographical studies also within the psychiatric field were conducted. However, biographical studies were marginal and became less important against the rise of quantitative methods.

In Germany, it was not until the 1960s and 1970s that the biographical method in sociological research was established. This development was supported by certain societal changes: The individualisation process was an important background for the rising awareness for the subjective perspective on the life course. Some authors talk about a societal interest for

history (Kohli 1981) while other authors underline the “turn to inwardness” after 1968 with the rising awareness for psychology (Eßbach 2001). Women’s studies with their interest in the subjective situation, their affinity to individualistic and qualitative methods contributed markedly to the rise of the biographical method (Ostner 1987).

The biographic approach

The starting point of the biographical approach is that biography is a social construct. It is believed that people have the need for the construction of a comprehensive and meaningful picture of the life course. If the story is to be told to an (imaginary) audience, a person is “forced” to tell a story - literally the “story of my (his/her) life” – with a starting point in the past and an ending point in the present (Kohli 1978). With its focus on subjectivity the biographic approach follows the interpretative paradigm, while it does not ignore the impact of social structures. The biographical approach focuses at the individual-biographic strategies to “cope” with structural requirements and therefore sheds light on the production and reproduction of societal structures. On a methodological level, the biographic approach has the potential to close the gap between the theory of structure and the theory of action (Fischer/Kohli 1987).

Biography and Psychiatry

Elementary for the understanding of biography as a central and structural construct for modern societies is the “institutionalisation of life course” and the “normal biography” (Kohli). The construct of “normal biography” describes a script for the appropriate timing as well as significance of certain life events e.g. employment, marriage and parenthood. While it is widely accepted that the construct of a ‘normal biography’ in ‘post-modern’ societies has changed dramatically – if not dissolute - it could be hypothesised that people with mental disorders still favour traditional models of a ‘normal biography’ (Krumm/Becker 2006). However, the realisation of a ‘normal biography’ can be impeded by many factors, e.g. partnership aspects, risks for mother and (potential) child as well as social stigma on motherhood and mental illness. Since family life and reproduction - among employment – are central life domains it could be interesting to look at their perceptions of a “normal reproductive biography” and at their ways and strategies to achieve – or to refuse – ‘normal biography’.

Research project: Family planning of young women with severe mental illness between individual responsibility and social stigmatisation

With the increase in public awareness and the recognition of the right of self-determination of people with mental disorders female patients also have gained a position to take autonomous decisions about their reproductive behaviour including decisions on motherhood and family planning. This development is inevitably related to an assignment of the responsibility for the risk of a genetic transmission of mental illness to the child and a possibly insufficient ability for the practice of the mother role on the women concerned.

The still existing stigmatisation of people with mental disorders and the spread out of information about knowledge of the genetic research may have an impact on reproductive behaviour among female patients. Furthermore, headlines about "mental disorder genes" and media representations can promote and intensify stigma on mentally ill mothers. Such messages may lead the women with mental disorders to strong inner conflicts between the desire for children respectively motherhood and the felt responsibility to prevent harm from the offspring. Female patients have to take into account the risk for their child to develop a mental disorder and additional they have to deal with the fear of becoming blamed in social contexts and to handle with the knowledge they are at risk to suffer from social restrictions. This background could complicate a rational consideration for the decision of motherhood and family planning and may result in the search for support for reproductive behaviour decision-making in women concerned.

The study focuses on the subjective attitudes of motherhood and family planning in women with mental disorders. The purpose is to investigate the experience of the inner conflicts as described above and how they if necessary such conflict work on. The findings of the research can contribute to the identification of a potential need of professional backing and help to create and offer effectual support strategies.

The study is financed by a grant of the German Research Foundation (DFG) to Reinhold Kilian, Ulm University.

(References can be obtained by the author)

The new RC 49 steering board elected at the business meeting on July 25, 2006 in Durban, South Africa

President: Reinhold Kilian, Germany,
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Reinhold Kilian Ph. D. worked as a sociologist in the field of psychiatric sociology, mental health services research and mental health economics at the Central Institute of Mental Health, Mannheim and at the Department of Psychiatry of the University of Leipzig. Currently he is the head of the Working Group on Mental health Services Research and a senior lecturer of medical sociology, mental health services research and health economics at the Department of Psychiatry and Psychotherapy II of the Ulm University, Germany. From 1998 to 2006 Reinhold Kilian was the vice president of the RC 49. He published about 60 journal articles and a number of book chapters on several issues of mental health service research, quality of life, and health economics. Articles were published in *Social Science and Medicine*, *Acta Psychiatrica Scandinavica*, *Quality of Life Research*, *Journal of Mental Health*, *Journal of Mental Health Policy and Economics*, *Social Psychiatry and Psychiatric Epidemiology*, *British Medical Journal*, *British Journal of Psychiatry*, *Psychopathology*, *International Journal of Social Psychiatry*. Current research of Reinhold Kilian centres in the analysis of factors influencing quality of life of persons with schizophrenia, the prevention of somatic illness in persons with severe mental disorder, the role of empowerment in mental health service provision. Reinhold Kilian is a member of the World Health Organization Quality of Life Working Group (WHOQOL-Group) and he was involved in the development of the WHO instruments for the intercultural assessment of QOL (WHOQOL-100 and WHOQOL-BREF) as well as the WHO questionnaire for the assessment of QOL in elderly people (WHOQOL-OLD). Reinhold Kilian participated as a temporary WHO adviser at the WHO European Ministerial Conference on Mental Health in Helsinki, January 12-15, 2005 and he joined the European Commission Peer Review Mission on Mental Health (Ref. 21830) in Romania, February 21-24, 2006.

Vice President: Bronwen Lichtenstein, USA,
University of Alabama, Tuscaloosa, Ala
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Bronwen Lichtenstein, Ph.D., is Assistant Professor in the Department of Criminal Justice, The University of Alabama. She is affiliated with the Center for Mental Health and Aging at the University of Alabama, is a visiting research fellow at the Center for Rural HIV/STD Prevention at Indiana University, is a member of the Governor of Alabama's AIDS Commission on Children, Youth and Adults. In 2000-2001 she was Chair of the Sociologists' AIDS Network. Previously, she was employed as Assistant Professor in the Department of Sociology at the University of Alabama, Birmingham and was Associate Director of the Center for Social Medicine and STDs at the University of Alabama at Birmingham. She has published over 40 articles on stigma, STDS, HIV/AIDS, illicit drug use, and women's health and minority health, especially in Alabama's rural Black Belt. The journals in which she has

published include *Addiction Research, Social Science and Medicine, AIDS Patient Care and STDs, Sexually Transmitted Diseases, Gender and Society, Culture, Health and Sexuality, Women and Health, AIDS and Public Policy* and *Medical Anthropology Quarterly*. Dr. Lichtenstein's mental health research primarily centres on the impact of stigma on the incidence and treatment of STDs and HIV/AIDS.

Secretary: Kwabena A. Poku, Ghana,
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Kwabena A. Poku, PhD, MSPH is Professor and Director of the Health Services Program in the School of Administration of the University of Ghana at Legon. He is member of Ghanas National AIDs Commission and has served as editor of the Journal of Management. He is currently an investigator on a National Institute of Health study of the genetic basis of hypertension in African and African American populations. He has been an investigator on a USAID sponsored HIV prevention program for young rural to urban male migrants in Accra Ghana. Dr. Poku has many publications related to the behavioural aspects of HIV, hypertension and other chronic illness including mental disorder. He received his PhD from Vanderbilt University and holds a Masters in Public Health from Meharry Medical College. He also has completed Post Doctoral Studies at UCLA

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Silvia Krumm, MAsoz works as a research assistant at the Department of Psychiatry and Psychptherapy II at Ulm University, Germany. In her prior position at the Sociological Research Institute on Women in Freiburg (Germany) she was involved in studies about family planning of women and men in the general population. In her current position she combines her interests in gender and family studies with her interests in psychiatric sociology. Currently, she works within a research project that focuses on family planning aspects of young women with mental disorders. She is also a doctoral candidate in Sociology at the University of Freiburg.

Board Members: Judith Boardman, USA; Herbert Matschinger, Germany; Alfred Gausgruber, Austria; Kjeld Hogsbro, Denmark; Takashi Asakura, Japan

Past Presidents: J Gary Linn, USA; Tsunetsugu Munakata, Japan; Rumi Kato Price, USA

Report from the XVI ISA World Congress July 23. to 29. in Durban, South Africa

The most important event for our Research Committee was the participation at the XVI ISA World Congress in Durban last Summer. The Program had been organized by our passed President James Gary Linn and the themes of the seven sessions as well as the titles of the presented papers gave an impression about the thematic and methodological richness of the current sociology of mental health and illness.

RC 49 members organized 6 sessions with a total of 25 presentations and one discussion forum. On behalf of the steering board I thank all organizers, chairs, and speakers for their great efforts and their brilliant performances.

Themes of the sessions and titles of the papers:

Session 1 Monday July 25, 2006 Gender and mental health care

(Chairs: Silvia Krumm, Germany and Reinhold Kilian, Germany)

Authors and papers:

Reinhold Kilian, Silvia Krumm and Thomas Becker, (Ulm University, Germany), Attitudes towards patient gender among psychiatric hospital staff.

Irmeli Laitinen and Elisabeth Etorre (University of Plymouth, UK) Diary work with depressed women in Finland.

Silvia Krumm, Reinhold Kilian (Ulm University) and Matthias C. Angermeyer (University of Leipzig); Childlessness in women with mental disorders - subjective views.

Session 2 Tuesday July 26, 2006: Quality of life and mental illness

(Chairs: Reinhold Kilian, Germany and Jerzy Krupinksy, Australia);

Authors and papers:

Herbert Matschinger (University of Leipzig, Germany), Reinhold Kilian (Ulm University, Germany) and Matthias C. Angermeyer (University of Leipzig, Germany); The effects of change on change. Do social and occupational functioning and symptoms really have an effect on QOL?

Judith Boardman (Beverly, USA) Healthcare access and integration for seriously and persistently mentally ill. Correcting healthcare disparities through evidence based practices.

Alfred Grausgruber (University of Linz, Austria) Egon Haberfellner (pro mente, Austria) and Rosemarie Grausgruber-Berner (University of Linz, Austria); Deinstitutionalization in Upper Austria: Problem solving or only transinstitutionalization?

Sônia Regina da Cal Seixas Barbosa (Nepam – Unicamp, Brazil) Environment, subjectivity and complexity: study about depression in the north coast, Sao Paulo state, Brazil

Reinhold Kilian (Ulm University, Germany) Quality of life in mental disorder. Current developments in theory and research

Session 3, Wednesday July 26, 2006. Mental health issues and social interventions in IT society

(Chair: Tsunetsugu Munakata, Japan).

Authors and papers:

Nozomi Donoyama and Tsunetsugu Munakata (University of Tsukuba, Japan) Workplace and other psychosocial factors related to trait anxiety among massage practitioners with visual impairment

Junko Otani and Takuzo Osugi (Kyushu University, Japan) Mental health issues and social intervention in IT society. Case report from Kazakhstan

Takashi Asakura (Tokyo Gakugei University, Japan) Perceived discrimination in everyday life, perceived life chance and health in the two Japanese immigrant groups

Sayuri Hashimoto, Tsunetsugu Munakata (Tsukuba University, Japan) and Jyunzo Okunada (National Institute of Information and Communications Technology, Japan) Effect of internet-based remote counselling to support mental health: Preventing interruptions to regular exercise in elderly people

Manaku Kaneku (Research Center for Sustainable Communities, Japan) and Tsunetsugu Munakata (Tsukuba University, Japan) Development of the SAT-based public policy marketing system.

Session 4, Thursday July 27, 2006. Prevalence of psychiatric disorders and mental health service utilization

(Chairs: Baqar A. Husaini, USA and Kwabena A Poku, Ghana).

Authors and papers:

Lorna Kendrik (Tennessee State University, USA) Justice versus peace: Perception of young African American men

Giedre Baltrusaityte (Vytautas Magnus University, Lithuania) Being mentally ill: The issue of social stigma in a post soviet country

Kwabena Poku (University of Ghana, Ghana) Akwasi Osei (Accra Psychiatric Hospital, Ghana) Prevalence of psychiatric disorders and service utilization in Ghana

Fatima Alves (Universidade Aberta, Portugal) Lay rationalities about madness and mental illness.

Session 5, Mental health implications of the HIV/AIDS pandemic

(Chairs: J. Gary Linn, USA and Thabo T. Fako, Botswana)

Authors and papers:

Gary Linn (Tennessee State University, USA) Donna Champeau (Oregon State University, USA) Johan Maritz (University of Pretoria, South Africa) Mariaon McNamara (Oregon State University, USA) and Kimberly Osborne (United Negro College Fund, USA) HIV prevention and mitigation in Southern Africa through the Rural Livelihoods Project.

Oscar Grusky and Yao Lu (University of California, USA) Perceived HIV/AIDS stigma among drug users in Anhui Province, China

Bronwen Lichtenstein (University of Alabama, USA) Stigma as a barrier to treatment of sexually transmitted infections among older African Americans

Thabo Fako (University of Botswana, Botswana) Gary Linn (Tennessee State University, USA) Sexual activity, knowledge about HIV/AIDS and willingness to test for HIV among young people in Botswana

Session 6: Friday July 28, 2006. Social stigma and disease: Bringing the sociological imagination into play

(Chair: Bronwen Lichtenstein, USA)

Authors and papers:

Michael Corbett (Acadia University, Canada) Beyond antipsychiatry and antipsychotics; Phenomenological reflections on family and schizophrenia

Annette Leibing (Federal University of Rio de Janeiro, Brazil) Regaining Personhood: The multiple realities of living as a person with Alzheimer's

Teresa Labov (University of Pennsylvania, USA) Stigma and HIV/AIDS in East Africa

Robert Jenkot (University of Alabama, USA) How women negotiate the stigma of being a methamphetamine dealer

Session 7: Saturday July 29, 2006. Forum on quality of social existence in a globalising world

(Chairs: J Gary Linn, USA and Tsunetsugu Munakata, Japan)

Participants:

Lorna Kendrick, USA

Kwabena Poku, Ghana

Takashi Asakura, Japan

Reinhold Kilian, Germany

Silvia Krumm, Germany

Sayuri Hashimoto, Japan

Bronwen Lichtenstein, USA

Recent publications of RC 49 Board Members:

Boardman, J.B. (2007). Moving beyond our EHR (Electronic Health Record) phobia. *Behavioral Healthcare*, 52-53.

Kilian R, Becker T (2007) Macro-economic indicators and labour force participation of people with schizophrenia. *Journal of Mental Health*, 16, 211-222.

Kilian R, Becker T, Krüger K, Schmid S, Fräsch K. (2006) Health behavior in psychiatric inpatients compared with a German general population sample. *Acta Psychiatrica Scandinavica*. 114, 242-248.

Kilian R, Porzsolt F (2006) Health economic evaluation of adjuvant breast cancer treatment. In: Porzsolt F, Kaplan R M (eds.) *Optimizing Health. Improving the value of health care delivery*. Heidelberg, New York. Springer. pp 186-200.

Krumm S, Kilian R, Becker T (2006) Attitudes towards patient gender in psychiatric hospital staff. Results of a case study with focus groups. *Social Science & Medicine*. 62, 1528-1540

Lichtenstein, B (2006) Domestic violence in barriers to health care for HIV-positive women. *AIDS Patient Care STDS*. 20, 122-132.

Lichtenstein, B. (in press) 'Exemplary Elders:' Stigma, Stereotypes and Sexually Transmitted Infections among Older African Americans.', *Current Sociology*

Lichtenstein, B (in press) Illicit drug use and HIV/AIDS in the Deep South states Rural Health

Matschinger H, Kilian R, Angermeyer MC (2006) Detecting specific patterns of change in two outcome scores in a mental health study by means of linear mixed models. *Methodology*, 2, 113-123.

Awards

Bronwen Lichtenstein, vice president of the RC49 has won the 2007 award for best article from the American Sociological Association section's section on race, gender and class for the article:

Lichtenstein, B (2005) "Domestic Violence, Sexual Ownership, and HIV Risk in Women in the American Deep South.", Soc Sci Med 60, 701-714.

Current research activities of RC 49 board members:

J. Gary Linn

I am currently working with the Vanderbilt University Institute for Global Health. We have a PEPVAR project(HIV treatment)that we are implementing principally through 3 clinics in rural Zambezia Province, Mozambique. As a medical sociologist, I am trying to develop effective programs to support the clinics in ant-retroviral adherence. This is a particular challenge in rural areas where you are attempting to treat disperse, impoverished patients who can only attend clinic after travelling great distances. We are developing some pilot programs which may serve as a model for HIV/AIDS treatment in rural Africa. These will involve decentralized rural satellite clinics, mobile clinics and "buscas activistas" (rural residents who track down patients who fail to show for their appointments and provide them with medication). Approximately 50 percent of our HIV infected patients are women. Because of gender issues and stigma they have special social barriers that must be overcome so that they can attend clinic and receive treatment. We are proposing community based education programs using focus (men & women) groups and local theatre and dance presentations to favourably impact gender related attitudes and stigma.

Kjeld Høgsbro

The Communicative Basis for the Phase-Specific Development of Mental Illnesses. A Contribution to a Humanistic Psychiatry.

The purpose of the project is to conduct an empirically and conceptual study of the decline in communicative function characterising psychotic mental illnesses. The project is based in communications theory and discourse analysis. This approach links cognitively deviant phenomena and identity disruptions to the ability to conduct inner and outer communication in accordance with social convention. The project seeks to integrate the outlining of decline in communicative function with a phase-description of the patients' personal development and social interaction with others.

Judith B. Boardman

I just submitted a research proposal to the US National Institute of Mental Health regarding an exploratory study of adolescents and young adults who are involved in the criminal justice system or at risk for involvement due to mental illness, substance abuse and related medical conditions.

Reinhold Kilian

Reinhold Kilian received a grant from the German Network of Mental Health Service Research for the comparative examination of involuntary psychiatric hospital admissions in three federal states in Germany. Background of the project is the fact that in Germany involuntary admission rates differ significantly between federal states without any known legal or epidemiological reasons. Aim of the project is the examination of the attendant

circumstances of involuntary admissions during a three month period in five psychiatric hospitals in federal states Bavaria, Baden-Württemberg and Mecklenburg-Vorpommern.

Call for papers:

RC-49 Interim Meeting in Denver Colorado, April 2008

Entire sessions (3 to 5 abstracts), or single presentations (1 abstract) may be proposed for an RC-49 interim meeting which will be held with the Annual Conference of the Western Social Science Association (WSSA). The WSSA meeting and RC-49 interim meeting will convene in Denver Colorado April 23-26, 2008 at the Hyatt Regency Hotel. Join us in the "mile high city" and have an opportunity to tour nearby Rocky Mountain National Park and Pikes Peak.

For individuals interested in participating, please send a 150 word abstract, with title, author, and affiliation to

J. Gary Linn, PhD
jlinn87844@aol.com

Proposals for sessions with 3 to 5 presentations are also welcome as are discussion panels organized around a single theme.
We look forward to RC-49 participation in this event.

Call for Papers:
First ISA World Forum of Sociology, Barcelona Spain, September 5-9, 2008

Dear Colleagues and Friends,

the RC 49 will participate at the First ISA World Forum of Sociology. The title of the RC 49 program is:

"New challenges in mental health promotion and mental health care"

Main target of the program is to reflect the contribution of social sciences in facing the mental health problems of the globalizing world and the challenges for mental health promotion, mental disorder prevention and the treatment, the care and the rehabilitation of persons with mental illness, resulting from these problems. With the title of our program we want to continue the long tradition of interdisciplinary inquiries in mental health and illness by giving space for a broad spectrum of issues and methodological and theoretical approaches. We expressly invite interdisciplinary working groups or projects to submit papers.

We welcome the submission of original research papers as well as research reviews and reflections on theoretical and methodological questions on the following topics:

- Risk factors and the epidemiology of mental disorders
- Social reactions to mental disorders
- Social inclusion of persons with mental disorder
- New concepts of mental health promotion and mental disorder prevention
- Empowerment and self-management in mental health care
- Economic aspects of mental health promotion and mental health care
- The role of users in the social research of mental disorders
- Gender and mental health

Abstracts should be submitted until October 15, 2007 by e-mail:

to

<mailto:reinhold.kilian@bkh-guenzburg.de>

Submissions should include the title, names and affiliations of all authors with the presenting author at first, and a structured abstract (maximal 250 words) including the sections: *introduction, methods, results, discussion and conclusion*