Record Nr. UNINA9910466008503321 **Titolo** 50 years after deinstitutionalization: mental illness in contemporary communities / / edited by Brea L. Perry Pubbl/distr/stampa Bingley, England:,: Emerald,, 2016 ©2016 **ISBN** 1-78560-402-3 Edizione [First edition.] Descrizione fisica 1 online resource (342 p.) Advances in Medical Sociology;; Volume 17 Collana Disciplina 362.2 Soggetti Mental illness Electronic books. Lingua di pubblicazione Inglese **Formato** Materiale a stampa Livello bibliografico Monografia Note generali Description based upon print version of record. Nota di bibliografia Includes bibliographical references at the end of each chapters. Nota di contenuto Front Cover: 50 Years after Deinstitutionalization: Mental Illness in Contemporary Communities; Copyright Page; Contents; Editorial Advisory Board; List of Contributors; Introduction: Legacies of Deinstitutionalization through the Lens of Medical Sociology: Contemporary Issues and Calls for Mental Health System Reform; Contributions of Medical Sociology to Innovations in Policy and Practice: Macro-Level Perspectives on Systems of Care: Micro-Level Perspectives on the Role of Family and Community Ties; 50 Years after Deinstitutionalization: New Sociological Insights and Innovations; References Part I: Taking Stock of the Past and Looking toward the FutureSame Problem, Different Century: Issues in Recreating the Functions of Public Psychiatric Hospitals in Community-Based Settings; Introduction; The Institutional Era and Its Discontents: The Decline of the Public Mental Hospital: The Community Mental Health Movement: Moving Hospitals' Functions and Services beyond Institutional Walls; A Structural Functional Theoretical Approach for Examining Deinstitutionalization:

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## Sommario/riassunto

This volume will examine deinstitutionalization's legacies approximately 50 years after reintegration began. It will highlight pressing issues around mental health treatment, social and health policy, and the lived experiences of those coping with mental illness that were or continue to be significantly influenced by deinstitutionalization reforms.