



Many Faces of Mental Health: Integrating Biological, Psychological and Sociological Perspectives

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Abstract: Mental health is often understood through biological and psychological frameworks that emphasize brain functioning, genetics, cognition, emotions, and individual behaviour. While these approaches have contributed significantly to the diagnosis and treatment of mental illness, they frequently overlook the broader social conditions that shape mental wellbeing. This paper examines mental health through an integrated biopsychosocial perspective by engaging with biological, psychological, and sociological explanations. The biological perspective highlights genetics, neurochemistry, and brain processes in understanding mental disorders. The psychological perspective focuses on cognition, emotions, personality, and family interactions. In contrast, the sociological perspective emphasizes the influence of social structures, cultural values, inequality, stress, and lived experiences on mental health. Drawing on key theoretical contributions from scholars across these perspectives, the paper argues that mental health cannot be adequately explained through a single framework. Instead, it should be understood as a multidimensional and socially situated phenomenon shaped by the interaction of biological, psychological, and social factors.

Keywords: Mental Health, Biopsychosocial Perspective, Stress Theory, Labeling Theory, Structural Strain Theory.

INTRODUCTION

In the context of mental health research within the social sciences, it is commonly assumed that mental health is best understood through biological or psychological frameworks. It is less frequently considered from a sociological perspective, despite the significant role that social contexts play in structuring mental wellbeing. This tendency reflects the dominance of biological and psychological narratives in both academic discourse and public understanding, where mental health is often framed in terms of brain processes, individual pathology, or therapeutic interventions. Consequently, sociological interpretations, focusing on social structures, cultural norms, and lived experiences, tend to receive comparatively less attention as discussed in the following sections.

Against this backdrop, the present paper seeks to broaden the understanding of mental health by engaging with biological, psychological, and sociological perspectives. Drawing on key

theoretical contributions from each domain, the paper aims to highlight the value of an integrated approach that acknowledges the complex and interconnected nature of mental health and wellbeing.

THE DOMINANCE OF BIOLOGICAL NARRATIVES IN MENTAL HEALTH

In a similar vein, one author argued that when we talk about mental health, we often think of mental illnesses, issues, problems, and disorders, essentially the maladies, but it also includes emotional strength, mental stability, and psychosocial well-being, which contribute to a healthy life. Mental disorders generally attributed to a mix of genetic, psychological, biological, and environmental factors, as well as their interactions (Stoewen, 2022) [1]. In continuation to this, the present work on mental health and its component is discussed through the integration of three perspectives i.e. biological, psychological, and sociological. The discourse starts with an academic debate among scholars of differing background in which one of the scholars Kandel states "All mental processes are brain processes, and therefore all disorders of mental functioning are biological diseases,". He reiterated "The brain is the organ of the mind. Where else could [mental illness] be if not in the brain"? Another scholar Insel supported the Kandel's view by providing example that mental illnesses are comparable to chronic diseases and all chronic diseases such as diabetes, heart disease involve both biological and behavioral factors. He mentioned, the brain is the organ of concern here rather than the heart or pancreas, which is the only distinction. However, the same fundamental ideas apply i.e. biological and behavioral. Whereas Richard McNally replied that mental illness cannot be approached with a one-size-fits-all strategy. Each condition may require different considerations. He states, some conditions, including autism, bipolar disorder, and schizophrenia, clearly suit the biological model. In contrast, disorders like depression and anxiety have less clear biological foundations. McNally like D. L. Stoewen (2022) [1] also points out that mental illnesses usually caused by a blend of genetic, biological, and environmental factors.

This complexity is similar to that found in many chronic diseases, such as heart disease and diabetes. However, in response to the complexity of the concept of mental health, Jerome Wakefield asserted that placing too much emphasis on the biological dimensions of mental disorders may lead us to ignore significant behavioral, social, and environmental factors that also play a vital role in mental illness. He states "By over-focusing on the biological, we are doing patients a disservice,". The debate concluded with the remarks of Kandel that social conditions and environment are significant for comprehending mental health issues [2].

Moreover, the U S president George W H Bush declared 1990s as the "Decade of the Brain" and after that various newspaper headlines reveals the identification of new genes linked to various psychiatric and behavioral conditions and various advertising campaigns gave slogan "Depression: A Flaw in Chemistry, Not Character" and "Don't Worry, Take Prozac", it indicates that biological revolution on mental health has widely recognized. Biological revolution in psychiatry was started by two key achievements: the use of twin and adoption studies to explore psychological disorder and advancements in pharmaceuticals [3].

Schwartz & Corcoran (2009) [3] further argue that a similarity rate of less than 100% among monozygotic twins suggests that external factors such as environmental play a role in the development of mental illnesses. Whereas some disagree that the concordance rate of less than 100% still indicate that only biological factors are responsible because monozygotic (MZ) twins may not be as genetically identical as previously thought. Various factors such as DNA to RNA transcription errors, variations caused by differences in the placenta, or errors in

phenotyping could explain these genetic discrepancies. In addition, it is stated that 'environmental' do not simply mean psychological and social, this implies non-hereditary that can have physiological influences such as infectious diseases, and accidental neuronal injury.

Whereas another scholar emphasized that disorders such as schizophrenia and bipolar disorder, which are believed to have a strong genetic basis, are receiving increasing attention in psychiatry. This focus aligns with the medical model, which concentrates on illnesses and the identification of individuals who require treatment [4]. Wheaton (2001) [5] also pointed out that mental health issues more likely to be dealt through biological approaches, he emphasized that in 1980s a member of National Institute of Mental Health reported on the distribution of funding for the study of schizophrenia and it was found that 24 out of 25 funded grants were about biological determination, only one was about social process in treatment. It is concluded that mental health is studied mostly through biological aspects and it is evident that the social environment is the fundamental cause of mental health problems.

THE PSYCHOLOGICAL PERSPECTIVE ON MENTAL HEALTH

On the contrary, psychologists concentrate on the personal characteristic which lead to distorted thinking, unhealthy emotional responses, and actions. Moreover, they offer therapies aimed at reducing the distress associated with mental illness. The goal of therapies is not just to treat symptoms but also to address the underlying cognitive, emotional, and behavioral patterns that contribute to the individual's distress. Many psychologists such as Rutter, Beck, and Rotter support Engel's (1980) 'biopsychosocial model', which highlights the roles of social, biological, and psychological factors in understanding mental health issues. In this framework, psychology contributes by focusing on the psychological aspects, particularly how individuals' internal processes such as their thoughts, emotions, and beliefs impact their mental well-being. According to (Persons, 1986), psychologists are not just concerned with diagnosing mental health issues; they are also focused on understanding why people with different mental health problems experience these issues. They aim to explain the underlying mechanisms that cause these problems, rather than simply identifying the differences between people with various diagnoses [6].

Some Issues may arise as a result of the interactions between individuals. This viewpoint is reflected in Bowen's 'family systems model', which asserts that a number of issues, including drug misuse, depressive conditions are expressions of family disturbances. The concept of the family system is presented in his publication 'Family Relationships in Schizophrenia', where he discussed family dynamics by referencing a passage from the novel 'The Life and Opinions of Tristram Shandy'. The passage highlights the complexity of family relationships by using the metaphor of a 'simple machine' that functions like a 'complex one,' the passage also illustrates the paradox of family life, families may appear straightforward on the surface, but in reality, they are full of unpredictable and often irrational interactions. The movements of the 'wheels' (family members) are influenced by a range of emotional, and psychological forces, that interact in unexpected and confusing ways, making the family dynamic both complex and unpredictable.

This model looks at how family interactions help maintain a stable pattern of behaviour, which is called homeostasis, it means that the behaviour of family members stay balanced. Bowen explained this idea of homeostasis through a clinical project undertaken by him where he worked with a family, a father, mother, and their daughter, who had a mental illness. He discussed how the emotional issues of the parents affected their daughter's condition. Bowen

pointed out that when there is conflict or stress in one part of the family, the family make changes elsewhere to try to restore balance. This shows how important family relationships and interactions are in influencing an individual's mental health [7].

The psychoanalytic model of abnormality developed from the significant theories of Sigmund Freud, suggests that individual function as closed energy systems or self-contained energy system which refers to the idea that individuals have a finite amount of psychological energy that is utilized in managing their emotions, thoughts, and behaviors.

The psychoanalytic model proposed by Freud emphasizes that early life events and experiences play a crucial role in shaping adult behavior and functioning. It implies that a person's personality and mental health may be impacted for a long time by these early events. Freud proposed that children progress through a specific series of psychosexual stages, each associated with a particular area of the body that provides pleasure. These stages include oral, anal, phallic, latency, and genital. Successfully navigating these stages typically leads to healthy adult development. However, if a child experiences frustration or excessive indulgence at any stage, they may become fixated, which can shape their adult personality. For example, an individual fixated at the oral stage might develop issues such as overeating or alcoholism in adulthood that can have a negative impact on mental health of an individual (Peterson, 2009) [6].

THE SOCIOLOGICAL UNDERSTANDING OF MENTAL HEALTH

In contrast to psychological and biological perspectives, which emphasize individual traits and brain functions, sociologists examine how social circumstances influence mental health and illness. Sociological perspectives specifically focus on the effects of life events, social conditions, structures, and cultural meanings on mental states. Sociological perspective suggests that different individuals in similar situations are likely to experience similar levels of mental health or illness. This means that a person's feelings are shaped not only by their own personality or brain but also by the social conditions they encounter, which can differ significantly across various social groups, societies, and historical periods. Divorce, job loss, car accident, disease diagnosis, and loss of a loved one are examples of different social conditions or events [8].

The 2000 study by B. P. Dohrenwend (2000) [9] highlights how serious stressors and adverse events, such as being a victim of violence, experiencing catastrophic environmental changes, armed conflict, and childhood abuse, can have a profound impact on mental health by providing example of an American play, Arthur Miller's 'Death of a Salesman', in which the protagonist, Willy Loman, is overwhelmed by a series of life challenges that significantly affect his mental well-being. At the time of the play, he was jobless, has no stable source of income, and was struggling to maintain his family and his sense of self-worth. These cumulative stressors, such as, financial hardship, career setbacks, and the pressure to meet social expectations are depicted as driving forces behind his mental decline. The director of the play sent the script to two psychiatrists for feedback on Willy's character, both concluded that Willy was "manic-depressive with hallucinatory aspects". And then Arthur Miller the playwright responded "Willy Loman is not a depressive. He is weighed down by life. There are social reasons for why he is where he is". He argued that Willy's struggles were not merely the result of personal illness, but were deeply tied to social and economic pressures. In other words, Miller emphasized that Willy's mental state was a consequence of broader societal factors, economic

instability, the disillusionment with the American Dream, and the pressures placed on individuals to succeed in a capitalist system.

Turner, Wheaton, and Lloyd (1995) [10] mentioned that other social factors negatively impacting mental health develop from persistent living conditions, which are not merely temporary challenges but are deeply embedded in ongoing circumstances. It implies that factors like sex, age, marital status, and social class have a strong influence on mental health. Another scholar [11] offers a relevant example of these social factors, such as living in a neighbourhood with high poverty rates and a prevalence of single mother households can contribute to feelings of stress, leading to depression. This environment may cause individuals to feel constantly worn out, sad, overwhelmed, and without hope. She asserted that psychological well-being can suffer from continuous exposure to crime, drug use, noise, violence, and other signs of neglect. In areas where social control is ineffective, residents face a dangerous and unhealthy environment, which can be profoundly distressing. Sociological perspective emphasizes that mental health and mental illness are not solely determined by individual characteristics, but are deeply influenced by broader social factors. Horwitz (2009) [8] states most sociologists study mental health problems in the everyday environments where individuals live, like schools, families, neighbourhoods and communities. They focus on how these environments affect people's mental well-being, rather than studying mental health in medical settings where people go for treatment. Because of this, the mental health issues sociologists look at are often different from the ones studied by doctors or psychologists.

Research conducted in clinical environments focuses on specific psychological issues, such as major depressive disorder, schizophrenia, obsessive-compulsive disorder and bipolar disorder. These disorders are characterized by signs which reflect an underlying disease and are distinct from those of other disorders [8]. In contrast to clinical environment [12] mentioned that many sociologists focus on general indicators of distress rather than specific mental illnesses. He emphasized that most sociologists used Centre for Epidemiological Studies–Depression scale (CES-D) to evaluate mental health. This scale is not designed to diagnose or relate to any particular mental illness, but instead include items that assess overall states of wellbeing. Such scales are designed to evaluate global states of wellbeing, which include factors like life satisfaction, emotional balance, stress levels, happiness, and other subjective measures of mental and physical health.

Sociological research shows that psychological well-being and distress are linked to various broader social factors, including the level of social integration, the presence of inequality, and the significance of shared belief systems (cultural values). Emile Durkheim's work, "Suicide," is widely recognized as the first study in sociology focused on mental health. In this work, Durkheim studied the level of social integration by providing an example of suicide rates, he examined suicide rates across various European countries at the close of the 19th century and analysed how these rates related to different sociocultural features of local populace. The main argument was that the strength of people's relationship with one another and with social institutions influences their likelihood of committing suicide. He discovered that the likelihood of committing suicide was lower for those with close social relationships, while those who experienced social isolation were more prone to what Durkheim termed 'egoistic' suicides. Durkheim also talked about another factor related to social integration called 'social regulation,' which is about how society controls behaviours, and due to lack of proper regulation people commit what he called 'anomic' suicide. He explained that 'anomie' happens when society goes through big changes too quickly, and due to these changes people feel lost

or disconnected. This can lead to mental health problems because people struggle to adapt to new ways of life while still holding onto old traditions. Durkheim noticed that groups who were better at managing their expectations, and who didn't believe they could always achieve unlimited success, shows lower suicide rates. In contrast, people who expected to be constantly happy or achieve big goals were more likely to face serious mental health struggles. This is because individuals who constantly look for happiness and think there are no boundaries to what they can accomplish are likely to face severe disappointments. For instance, sudden economic growth might lead individuals to believe that they can fulfil all their desires but such unrealistic expectations can result in frustration, driving some people to suicide. Durkheim came to conclusion that cultures that value close relationships and foster interpersonal connections shows better mental health [8]. Moreover, relationships that are close, friendly, and supportive are examples of social integration, which help people feel connected and secure, whereas disparities in resources, position, and power characterized social stratification. Research shows that individual with more power, higher status, and greater wealth usually have better mental health compared to those who have fewer resources. Additionally, relationships where everyone has equal power and control have good mental well-being, while those with large differences in power among individuals have poor mental health [13].

Three main theories of mental illness within the social paradigm have discussed about mental issues. In the mid-1930s, medical researcher Hans Selye coined the term 'stress' in his discourse 'Stress Theory'. He defined stress or stressors as anything that causes strain on the body, referring to harmful environmental factors. His experiments involved laboratory animals e.g. rat, and the stressors he studied included extreme temperatures, overcrowded living conditions, and frequent electric shocks. More intriguing to mental health researchers is findings that major life changes are strongly linked to the development of anxiety, depression, schizophrenia, and general psychological distress. Consequently, an increase in social stressors can trigger mental health issues as he illustrates by General Adaptation syndrome which describes body's response to stress through three stages i.e. Alarm stage, Resistance stage and Exhaustion stage [14].

'Structural Strain Theory' attributes distress and disorders to the overall structure of society, highlighting how certain social groups are disadvantaged relative to others. Merton used the term 'anomie' to refer to the disparity between cultural aspirations, such as the longing for economic stability, and the structural resources available to achieve their aims, like admission in quality institutes, job opportunities. Merton explained that society promotes the idea that anyone can succeed financially if they work hard and have talent. However, this idea doesn't match up with the reality of social inequality, where not everyone has the same opportunities to succeed. While society encourages everyone to strive for success, not all groups have the same access to the resources needed to reach those goals. This gap between what society expects and the unequal access to opportunities can cause stress and frustration for individuals. Merton argued that this pressure is especially strong for people in lower social classes, who are taught to value wealth and success but are blocked from the usual paths to achieve them. Merton mentioned that cultural values of U.S places a strong emphasis on success and wealth as key achievement, leading individuals to aspire for economic achievement above nearly all other objectives that give birth to mental health issues [15].

Like structural strain theory, 'labeling theory' often referred to as societal reaction theory, provides a distinctive social perspective on the reasons of psychological issues. This theory has been pivotal in the movement aimed at deinstitutionalizing individuals with mental illnesses.

It is based on a fundamental concept that individuals who are labelled as deviant and subsequently treated as such are likely to adopt deviant behavior themselves. Labeling theorists Becker, Lemert etc. believe, all individual breaks rules and regulations at various point in their lives for a variety of reasons. These reasons can be biological, psychological, sociological, cultural, and economic. Labeling theorists consider these causes of primary deviance to be less significant. What truly matters is how society responds to people's initial misconduct, therefore it is frequently referred to as "societal reaction theory". Deviance or mental illness isn't just caused by a person's biology or mind, nor is it only because of their personal life. Instead, it's influenced and maintained by society and how society reacts to these issues.

CONCLUSION

Mental health is a multidimensional phenomenon that cannot be adequately understood through a single explanatory framework. The present paper demonstrates that although biological and psychological perspectives have significantly contributed to the understanding of mental health and mental illness, they have also tended to dominate both academic discourse and public imagination. Biological approaches primarily emphasize brain processes, genetics, neurochemistry, and medical intervention, while psychological perspectives focus on cognition, emotions, personality, behaviour, and interpersonal relationships. These perspectives have undoubtedly advanced diagnosis, treatment, and therapeutic practices; however, an exclusive reliance on them risks overlooking the broader social realities within which mental health is experienced. By bringing these perspectives into conversation, the paper highlights the need to move beyond reductionist explanations and recognize the interconnected nature of human experience. Such an approach is particularly important within the social sciences, where mental health must be understood not merely as an individual or biological condition, but also as a socially situated phenomenon shaped by historical, cultural, economic, and environmental contexts.

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