

David Rosenhan

Being Sane in Insane Places

In 1973 sociologist David Rosenhan designed a clever study to examine the difficulty that people have shedding the "mentally ill" label. He was particularly interested in how staffs in mental institutions process information about patients. He decided that the best way to get this information was from the inside through participant observation.

Rosenhan and seven associates had themselves committed to different mental hospitals by complaining that they were hearing voices (a symptom commonly believed to be characteristic of schizophrenia). The staff did not know the "pseudopatients" were actually part of a field experiment. They assumed they were patients like any others and had no reason to believe the reported symptoms were fake.

Beyond the alleged symptoms and falsification of names and occupations, the important events of the pseudopatients' life histories were presented as they had actually occurred. Furthermore, prior to the study, Rosenhan instructed them to act completely normal upon admission into the hospital. That is, they were not to act "crazy" in any way. In fact, Rosenhan told them that acting normal was the only way they could get out. **(My Note – once admitted, they said they no longer heard voices)**

Despite the fact that they did nothing out of the ordinary, the pseudopatients remained hospitalized for an average of 19 days, from a low of 9 days to a high of 52. Their sanity was never detected except, ironically enough, by the actual patients in the hospitals.

All of Rosenhan's associates retained the deviant label even after being discharged. Their schizophrenia was said to be "in remission," implying that it was dormant and could possibly resurface.

At no time during their stay in the hospital was the legitimacy of their schizophrenic label ever questioned. It was simply assumed that they were schizophrenic; after all, why else would they have heard voices?

Everything the pseudopatients did and said while in mental institutions was understood from this premise. Normal behaviors were overlooked entirely or were profoundly misinterpreted. Minor disagreements became deep-seated indicators of emotional instability. Boredom was interpreted as nervousness or anxiety. Even the act of writing on a

notepad was seen by the staff as a sign of some deeper psychological disturbance.

Furthermore, even though there was nothing "pathological" about the pseudopatients' past histories, these records were reinterpreted to be consistent with the schizophrenic label.

One pseudopatient, for instance, had had a close relationship with his mother but a remote one with his father during early childhood. As he matured he became closer to his father while his relationship with his mother became more distant. He had a warm and loving relationship with his wife and children, although there were occasional fights and friction. In short, there was nothing particularly unusual about this person's history.

But notice how this history was translated into something troubled and psychopathological by the attending psychiatrist:

This white 39-year-old male . . . manifests a long history of considerable ambivalence in close relationships, which began in early childhood. A warm relationship with his mother cools during his adolescence. A distant relationship to his father is described as becoming very intense. Affective [emotional] stability is absent. His attempts to control emotions with his wife and children are punctuated by angry outbursts and, in the case of the children, spankings. And while he says that he has several good friends, one senses considerable ambivalence embedded in those relationships also.¹

Just as behavior was interpreted in light of the label, the facts of this man's past were distorted to achieve consistency with what was generally believed to be true about the family dynamics of schizophrenics.

Rosenhan didn't conclude that the staffs at these hospitals were incompetent or dishonest. In fact, he argued that there was no conscious effort to misconstrue the evidence to fit the label. They were doing their jobs effectively.

Rather, Rosenhan reasoned, the labels were so powerful that they profoundly affected the way information was processed and perceived. Had the same behaviors been observed in a different context, they no doubt would have been interpreted in an entirely different fashion.

¹Rosenhan, D. 1973. "On being sane in insane places." *Science*, 179, 250-258. p. 253.