Connecting the Social Brain to the Social World

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Abstract

Social relationships are the central focus of sociological explanation and, since Durkheim, sociologists have applied this focus to understanding mental health and illness. The resulting body of scholarship has elucidated the value of social support, the relevance of social networks, and the importance of neighborhood and social context, but it has not yet been informed by recent advances in psychological and psychiatric research on social cognition and social neuroscience. As a result, the potential contributions of sociology to explaining social processes in mental illness are diminished and the growth of sociological knowledge is impaired. Of course, this lack of cross-disciplinary engagement is a symptom of the divergence of social and psychiatric perspectives in the last three decades, but it is also a clear marker of the potential for their reconnection. The goals of this seminar are to review recent research on social cognition and social neuroscience, to identify the most fruitful points of cross-disciplinary intersection, and to nurture interdisciplinary collaborations among key scholars in the relevant disciplines.
Topic Outline

Social cognition links brain functioning to community functioning. Individuals with dysfunctions in fronto-temporal/limbic neural circuitry are less able to perceive social cues, process emotions, understand others’ intentions, and infer causation. In turn, individuals with more deficits in these social cognitive skills maintain fewer social ties in the community and function more poorly in work, school and residential contexts. Research has also identified reciprocal effects of the social environment on social cognition: participation in psychosocial remediation programs can improve social cognition and social isolation can diminish it.

Although the rapidly growing body of research in neurobiology, psychiatry and psychology that has elucidated these connections has focused on persons diagnosed with schizophrenia and autism—disorders defined in part by social deficits—the related areas of research on neural plasticity, neurocognition, social isolation and emotional intelligence indicate population-wide variation in social cognition, its interaction with functioning in the social world, and its broad consequences for mental health and illness. Related research on emotional processing indicates that it involves unique neural circuits, is fundamentally related to social perceptions and interaction, and influences executive functioning. Like other social species, human brains are wired to support social interaction and are stressed by its absence. As with other processes shaped by evolution, the significance of this neural circuitry can only be understood from the standpoint of population-wide variation in its expression.

Although sociological research has not taken these developments into account, research on the consequences of social relationships for mental health and illness has advanced in three areas. Durkheim’s investigation of suicide laid the foundation for sociological research about the relationship between social support and mental illness and has resulted in strong evidence of the etiological significance of social ties for depression and other mental maladies. In recent years, research on social networks has improved understanding of the conditions of and mechanisms for the development and impact of social support. Sociologists have also focused attention on the importance of neighborhood and other social contexts for health and functioning. However, progress has been hindered by lack of engagement with research on the brain and on social cognition, and thus failure to consider individual-level variability in the value of different types of social ties.

The discipline of social psychology has provided the closest connection between sociology and research on social cognition, but it has done so by conceptualizing social cognition in a way that has not taken into account the development of the concept in neurobiological and neuropsychological research. Thus, while social psychologists have focused on the way in which individuals learn about the social world, their understanding of this process has not considered the extent to which abilities to process social information may vary, and even be impaired. At the same time, ongoing efforts to elaborate the dimensions of social cognition in research on mental illness have not been informed by social psychologists’ distinctions between the concepts of shared reality, role enactment, social identity, and internal audiences.

Leading sociologists of mental health like Allan Horwitz and Bernice Pescosolido have begun to focus attention on the need to distinguish and chart biological and social influences, rather than simply rejecting the salience of biologically-based variation. However, even these new perspectives have not integrated current research about social cognition and social neuroscience. We believe that the time is propitious to introduce recent developments in these areas to sociological scholarship and to design a systematic interdisciplinary framework for research and scholarship.
Our proposed exploratory seminar will engage leading researchers who study social cognition from the perspectives of neurobiology, psychiatry, and psychology in discussion with leading sociological and social psychological researchers on social support, social networks, and social context. We will review the progress of research in these areas, identify the major areas of uncertainty in the resulting body of scholarship, and chart the most productive directions for interdisciplinary engagement. Our major products will be an agenda for extending research and scholarship, a review article for a leading sociology journal on the role of biological and social factors in mental health and illness, and outlines of one or more grant proposals (or supplements for funded projects) in areas identified as potentially yielding the most rapid advance in understanding the interaction of biological and social factors.

We believe that the sociology of the 21st century must be grounded in the primary focus of its founding father, Emile Durkheim: the study of the meaning and significance of social ties. Leading sociologists have already charted new directions for enhancing our understanding of how social ties influence behavior and health. In order to develop sociology’s potential to improve understanding of the role of social ties in mental health and illness, however, sociologists must reconsider Durkheim’s methodological focus on only “social facts” and instead embrace the insights about social ties that have emerged from recent developments in neuroscience and psychology. The potential for cross-disciplinary synergy is great and the time for building a new synthesis is now.