"The Metropolis and Mental Life": from Georg Simmel’s philosophy to social and phenomenological theories about psychosis origins

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Abstract

The risk for psychoses at the most urban environment was estimated to be 2.37 times higher than in the most rural environment. In 1903 the sociologist Georg Simmel in a little essay titled “The Metropolis and Mental Life” suggested urban conditions necessitate the creation of a “protective organ” against the intensification of external and internal sensual stimuli in the city as compared to a rural setting. In 2006 Hetrick and Erickson proposed that symptoms of psychosis indicate a primary deficit in mechanisms of attention related to selection and inhibition stimuli. We argue that Simmel’s “protective organ” could be linked to the “Sensory Gating” theory for psychoses by Hetrick and Erickson.

KEY WORDS: Simmel, urbanicity, sensory gating, schizophrenia.

Introduction

The association between urbanicity and risk of schizophrenia is well established (1). The incidence of schizophrenia has been observed to increase in line with rising levels of urbanicity, as measured in terms of population size or density. This association is expressed as Incidence Rate Ratio (IRR), and the results are usually presented by comparing the most urban with the most rural environment. Vassos et al. first employed a simple regression analysis of log (IRR) as given in each study on the urbanicity category, assuming an uniform distribution and a linear association. In order to obtain more accurate estimates, they developed a more sophisticated method that generates individual data points with simulation from the summary data presented in the original studies, and then fits a logistic regression model. The estimates from each study were combined with meta-analysis. Despite the challenges that arise from differences between studies as regards to the number and relative size of urbanicity levels, a linear association was observed between the logarithm of the odds of risk for schizophrenia and urbanicity. The risk for schizophrenia at the most urban environment was estimated to be 2.37 times higher than in the most rural environment. The same effect was found when studies measuring the risk for non-affective psychoses were included (2). The large effect of urbanicity on the risk of developing psychosis does not necessarily imply causation, but the level of exposure to urban environment remains a very important risk marker for schizophrenia and psychosis in general. Explanations for this association include differences in individual characteristics (e.g., different levels of migration or family history), familial characteristics, selective migration, exposure to infections, exposure to pollutants, diet, and the social environment (3). Evidence from a Danish sibling design suggests that the causes responsible for these urban-rural differences are related to family-level factors although the influence of individual-level factors could not be ruled out. Neighbourhood effect, social fragmentation and deprivation, and other differences between life in cities and rural areas have been found to explain better the association of urbanicity with psychosis than individual differences (4).

In 1903 the sociologist Georg Simmel wrote a little work titled “The Metropolis and Mental Life”. Simmel suggested that urban conditions necessitate the creation of a “protective organ.” Due to the intensification of external and internal sensual stimuli in the city as compared to a rural setting, the metropolis fosters a situation where one must buffer him or herself from a constantly changing environment. This protection manifests itself in the rise of logic and intellect. In other words, life becomes matter-of-fact, with little consideration to emotional concerns. This intellectualism defines life in the city, and sharply contrasts with the emphasis on personal relationships characteristic of smaller settings. As Simmel writes: instead of reacting emotionally, the metropolitan type reacts primarily in a rational manner. Thus the reaction of the metropolitan person to those...
We suggest that Simmel’s “protective organ” could be assimilated to the Sensory gate as the Simmel’s "protective organ" in an effort to reduce the number of possible percepts including distractions and sensory overload. The resulting inability to react to new stimuli with appropriate levels of energy defines the blasé mind-set and is unique to a metropolitan society. In addition to the blasé outlook, several other behaviors manifest themselves in an urban setting, namely reservation and freedom. The social attitude of people living in cities can often be designated as one of hesitation or reluctance—an unavoidable result of building a protective organ in an effort to reduce the number of possible human interactions. This is in stark contrast to the familiarity and vibrancy that people from small-towns often greet one another, which is facilitated by years of recognition and knowledge. However, in the city, most personal encounters are fleeting and not worth a significant investment of time or emotion. Thus a characteristic cold and unfriendly stereotype defines people living in a metropolis. This reservation leads to another characteristic of the city, the large degree of personal freedom. As an individual in an urban setting, one is freed from the kinds of prejudices and boundaries that one might feel in a political or religious community. This urban freedom is clearly illustrated when juxtaposed to rural life, where an urbanite might feel trapped or suffocated (5).

A Sensory gate as the Simmel’s “protective organ”

We suggest that Simmel’s “protective organ” could be linked to a “physiologically closed Sensory gate” against social urban stress. Hetrick and Erickson, proposed that symptoms of schizophrenia indicate a primary deficit in mechanisms of attention related to selection and inhibition. In their study, patients with schizophrenia reported anomalies in attention and perception, such as, “I just can’t shut things out,” “Everything seems to grip my attention although I am not particularly interested in anything,” and “noises all seem to be louder. It is as if someone has turned up the volume”. These Authors reasoned that these experiential phenomena could be logically sorted into disturbances in the process of “perception”, including abnormalities in the quality of sensory input, perceived increases in stimulus intensity, and heightening of sensory vividness, and disturbances in the process of “attention”, including distractibility, inability to focus attention, and heightened awareness of background noises. They further hypothesized that a breakdown in selective inhibitory function results in a sensation of being “flooded” by an overwhelming mass of sensory input (6).

Despite these explicit phenomenological origins, little is known about the experiential phenomena underlying contemporary operationalizations of the sensory gating construct, such as whether the construct is restricted to experiences associated with the modulation of sensory percepts includes selective attention and distractibility or even whether the construct is accessible via self-report. Because clarification of these issues has important implications for the development and testing of psychological theories and the study of psychopathology, a series of studies was conducted to empirically identify the major dimensions of sensory gating-like perceptual and attentional phenomenology in healthy young adults and develop a psychometrically sound self-report rating scale to capture these dimensions, the Sensory Gating Inventory (SGI) (7).

Factor analyses of items measuring a broad range of sensory gating-like subjective experiences revealed one primary factor that encompassed anomalies of perceptual modulation (e.g., perceptions of heightened stimulus sensitivity and sensory inundation) and three other factors measuring disturbances in the processes of focal and radial attention as well as exacerbation of sensory gating-like anomalies by fatigue and stress (8).

Conclusions

There are several ties to modernity in Simmel’s “The Metropolis and Mental Life”. In fact, the first sentence of the essay addresses the topic, as Simmel notes that our greatest struggles are derived from our quest to maintain our personalities: “The deepest problems of modern life flow from the attempt of the individual to maintain the independence and individuality of his existence against the sovereign powers of society, against the weight of historical heritage and the external culture and technique of life”. This idea is supported by Deena and Michael Weinstein, co-authors of Postmodern(ized) Simmel. They argue that the mental phenomena of the metropolis are mechanisms utilized by people to maintain their individuality: “The mental life of the metropolis is a series of compensations for the inadequacy of the objective culture to the individual’s subjective demand for an integral personality”. Thus indifference, reservation, and rationality are all methods that people use to hold onto their unique personalities against the pull of the objective lifestyle that dominates city life. Rereading Simmel from a psychopathological perspective, we could hypothesize that a psychotic self, lacking the simmelian “protective organ”, assimilated to the Sensory gating theorized by Weinstein and Weinstein would be too “permeable” function in order to shield effectively from the sensory over stimulation typical of urban life (9). Also a psychotic subject may not realize that “series of compensations for the inadequacy of the objective culture to the individual’s subjective demand for an integral personality” (5).
Therefore sociological insights dating back more than a century ago find new resonances with epidemiological data being able to provide a new perspective to the interpretation of seemingly unrelated phenomenon ever before put in relation to each other such as the theory of Sensory Gating for schizophrenia and the high prevalence of this pathology in urban contexts.

References