Mental distress and social struggle

lan Ferguson,
Politics of the Mind: Marxism and
Mental Distress,
Bookmarks 2017
& Johann Hari,
Lost Connections: Uncovering the
Real Causes of Depression – and
the Unexpected Solutions,

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lain Ferguson and Johann Hari both present a significant challenge to the mainstream narrative around mental health in their recent books, at a time when much of the Western world is experiencing a mental health crisis. Ferguson's Politics of the Mind provides a historical, materialist, dialectical analysis that charts the major developments in the politics of mental health over the last few centuries, focusing primarily on the last 100 years or so. Hari's Lost Connections documents how his research into depression and anxiety brought him into contact with different researchers and people affected by mental illness, eventually leading him to challenge the conventional wisdom around the issue. Both authors mount a strong attack on the overly biological explanations for mental illness that have dominated the discourse until recently, instead locating the root causes of mental distress in structural, societal and environmental issues. Both authors also seek solutions outside of the medical model. However, while Hari uncovers and isolates many of the surface-level causes for mental

ill health in society, Ferguson identifies capitalism as the overarching system that creates many of these conditions in the first place.

Although there is considerable overlap in the material covered by each author, there are significant differences between Politics of the Mind and Lost Connections in terms of their perspectives. In Lost Connections, Hari recounts how he was told by a doctor that his depression was due to a 'chemical imbalance' in his brain, which could be treated using anti-depressants. As a result, Hari took anti-depressants for 13 years without experiencing any significant relief. Understandably, this experience greatly influences the framing of Lost Connections. Hari documents how the 'chemical imbalance' theory was never seriously supported by the scientific literature but was promoted by pharmaceutical companies, how placebo effect may account for much of the purported benefits of anti-depressant medication such as SSRIs (Selective Serotonin Reuptake Inhibitors), and how mainstream psychiatry has pushed back against opposition to medication. Of particular interest is his encounter with Dr. Peter Kramer of Brown Medical School, who responded to evidence that anti-depressants were barely more effective than placebos by claiming that the clinical trials in question were flawed and the data unreliable. When Hari put it to him that if there was no clinical evidence to support the medication it should never have been on the market in the first place, Dr. Kramer

cut off the conversation. These kinds of revelations are likely to come as a surprise to people who are unfamiliar with research on anti-depressants. Hari does an excellent job of delving into the research in this area and dismantling the myths that have been built up around SSRIs. His alternative framing of mental health is essentially set up in opposition to medication, which is his primary target. However, his critique of mental health treatment is largely limited to his attack on medication. Politics of the Mind is equally critical of the science behind psychopharmacological treatments, citing similar evidence that antidepressants do not perform much better than placebo and explaining how the pharmaceutical industry has consistently promoted inaccurate science in its pursuit for profits. However, where Hari largely limits his criticism of mental health treatment to medication, Ferguson provides a broader perspective on how mental health has been treated historically and how services function today. Ferguson's account makes it clear that the ills of psychiatry did not begin with the introduction of pharmacological treatments, but that the field has been tarred with many abuses and has often provided cover for some of the most reactionary government policies. Among the examples given is the coercion of soldiers suffering from 'shell-shock' (modern day PTSD) back into the trenches during World War 1 using powerful electric currents to make them abandon their symptoms, the use of lobotomies as cures for mental illness, and the involvement of

psychiatrists in Nazi Germany in the systematic extermination of tens of thousands of mentally ill and learning-disabled people. Ferguson provides quite a comprehensive account of the abuses of psychiatry, arguing that apart from a few possible exceptions, 'the more common patient experience [with psychiatric practice] has been one of not being listened to and of views and experiences being discounted and invalidated'. This leads us to the modern framework through which psychiatry operates - the DSM (the Diagnostic and Statistical Manual of Mental Disorders). Described by both as the 'bible' of psychiatry, the DSM is now in its fifth iteration and has undergone many changes since the publication of the DSM-I in 1952. Ferguson's analysis is more comprehensive than that of Hari's on this issue. Ferguson delineates how, in their attempts to have psychiatry accepted as a real medical discipline, psychiatrists changed the focus of the DSM to solely observable symptoms, 'abandoning any pretence at understanding the origins and nature of mental illness'. This led to the creation of a manual that was reliable in terms of fostering agreement on diagnoses between clinicians, but not necessarily valid - the disorders in the DSM are not necessarily real illnesses. Ferguson provides an incisive critique of the material and ideological impact of the DSM, pointing to the financial relationship between the pharmaceutical industry and many of the psychiatrists who created the DSM-IV and DSM V. The proliferation in

diagnoses meant the creation of new drugs to treat the different conditions. Moreover, as Ferguson writes, 'Ideologically the DSM has contributed to the medicalisation of human nature and everyday life', something that is exemplified by the recent reclassification of bereavement as a symptom of depression. He also documents how criticism of the medical model has led to a doubling down from mainstream psychiatrists such as Premal Shah and Deborah Mountain, who have argued that ideological criticisms ought to be set aside in favour of 'what works'. Ferguson dismantles this response, referring again to the lack of evidence for the effectiveness of psychopharmacological medications, to evidence that many service users desire increased access to talking therapies and other social supports, and discussing the implications of the medical model for policy. Ferguson asks for whom the medical model works, arguing that medication may be used by governments as a means of saving money while not necessarily being beneficial to the

The scope of Hari's criticism of the DSM is more limited, although he does make some salient points. Hari uses "the grief exception" as a springboard for his critique, explaining how the earlier versions of the DSM excluded bereavement from the diagnosis for depression. The acceptance that symptoms of depression are a normal response to bereavement posed a problem for psychiatrists, however: 'Once of you've conceded that, it invites an obvious follow-up

question. Why is a death the only event that can happen in life where depression is a reasonable response? Why not if your husband has left you after thirty years of marriage? Why not if you are trapped for the next thirty years in a meaningless job you hate? Why not if you have ended up homeless and you are living under a bridge?'

As discussed above, this problem has been 'resolved' in the DSM-V by removing the grief exception for a diagnosis of depression. Hari's overall argument around this issue is sound, although he exaggerates somewhat. According to DSM-V criteria, a person would not be diagnosed with depression if they presented themselves to a doctor the day after their baby died, as Hari claims. Symptoms would have to be present for a two-week period. While this might not make an enormous difference to the argument, exaggerations like this will be fodder for psychiatrists who defend the medical model, some of whom have already come out to denounce the content of Lost Connections.

Overall, Hari's criticisms of the DSM-V are sound, although his analysis is not as comprehensive as Ferguson's. It is Hari's search for alternative explanations for the root causes of mental illness that provide the most thought-provoking material in his book. In the second part of *Lost Connections*, he identifies nine different causes for depression and anxiety. The first of these is an issue that is virtually absent from discussions around psychology

and mental health: "Disconnection from Meaningful Work". Hari cites some extraordinary results from a 2012 Gallup study of workers in 142 countries that found that only 13% of workers were engaged and enthusiastic about their jobs, 63% were not engaged and were 'sleepwalking through their workday', while a further 24% felt actively disengaged. While many on the left might not be surprised by these results, it is almost unheard of to find these kinds of explanations for mental ill health in the mainstream discourse, never mind in a book that is on course to become a best seller. Equally interesting is research Hari cites on the British Civil Service which found that the more control workers had over their work, the less likely they were to become depressed. This held true even for people of equal job status, working for the same pay in the same office. Hari fleshes out his arguments about work with the personal testimonies of different individuals in what is an engaging narrative. The arguments he makes present a challenge to an economic system that is intrinsically hierarchical and is constructed in such a way that the agency of most workers is severely limited within their workplace. If peoples' disempowerment in their work is causing significant distress for the vast majority of workers, should we not seek to find a better way of doing work? Ferguson takes this argument further in the last chapter of Politics of the Mind, where he discusses Marx's theory of alienation. What Hari describes as "disconnection from meaningful work" is, from a

Marxist standpoint, an inevitable consequence of the way work is organised under the capitalist system. Ferguson succinctly describes the lack of workers' control over both the process and the products of their labour, which belong to the employer. The lack of control over the work process means that 'work is usually anything but fulfilling'. Marx's words, quoted by Ferguson, might accurately describe the feelings of some of the "disengaged" workers interviewed by Hari:

'Labour is external to the worker, i.e. does not belong to his essential being; that he therefore does not confirm himself in his work, but denies himself, feels miserable and not happy, does not develop free mental and physical energy, but mortifies his flesh and ruins his mind. Hence the worker feels himself only when he is not working; when he is working he does not feel himself. He is at home when he is not working, and not at home when he is working. His labour is therefore not voluntary but forced, it is forced labour. It is therefore not the satisfaction of a need but a mere means to satisfy needs outside itself. Its alien character is clearly demonstrated by the fact that as soon as no physical or other compulsion exists it is shunned like the plague.'

The contrasting perspectives of Hari and Ferguson on work provides a good example of the differences in their respective approaches. Hari identifies 'causes' for depression and anxiety and generally provides convincing evidence to support his claims. His narrative is also

replete with personal stories from different researchers and individuals, all of which make for a compelling read. However, although he makes sporadic references to capitalism and systemic factors that produce mental distress, he does not firmly root his critique in capitalism as Ferguson does. For instance, Hari's defines his second root cause for mental illness as 'Disconnection from Other People'. Arguing that we are social beings who have "'become the first humans ever to dismantle our tribes'. Hari locates the reasons for this in vague observations to do with culture, technology, and focus on the individual and family. A materialist analysis of how and why our 'culture' developed in this way is absent. Ferguson supplies this, explaining how the competition inherent in capitalism breaks down human solidarity and collective interest. In particular, workers are pitted against each other for apparently scarce jobs and resources, which creates the conditions for divisions along the lines of race, gender, and sexuality. Ferguson quotes Bertell Ollman on how fierce competition and alienation impacts relations between fellow workers: 'Mutual exploitation' is the rule. Other people are mere objects of use; their wishes and feelings are never considered, cannot be on pain of extinction. [...] In this situation, hearts are opened only to absolute losers; charity becomes the only form of giving'. Several other causes for mental illness that Hari identifies could be identified as symptoms of the

capitalist system in a comparable

manner. 'Disconnection from Meaningful Values', 'Disconnection from Status and Respect', 'Disconnection from the Natural World', and 'Disconnection from a Hopeful or Secure Future', are inter-related and can arguably be linked back to the way in which social relations are organised. Some readers may be disappointed that Hari does not explicitly make these connections, perhaps understandably so. While Hari is clearly aware of a systemic societal malaise, he does not identify the capitalist drive for profit as the primary cause for creating this malaise. For example, Hari's primary suggestion for reconnecting with meaningful work is that workers ought to start co-ops and run their workplaces democratically. Of course, this is a good suggestion! Any talk of workplace democratisation should be enthusiastically welcomed by socialists. However, Hari does not acknowledge that under the current system it is impossible for most workers to start co-ops as they lack the capital and the stability in their personal lives that would

allow them to do so. Moreover, coops attempting to operate within capitalism will inevitably come into confrontation with the competition inherent in the system. This may mean other businesses lowering prices to put co-ops out of business, or they may have to lower wages or somehow get rid of workers in order to survive. Therefore, although talk of co-ops is a positive, they cannot be a long-term solution without the abolition of capitalism.

While the analysis of causes for mental illness and the suggested solutions in Lost Connections do not go as far as one might hope, Hari's narrative is a genuinely refreshing one that opens plenty of space for debate. It is the personal stories in Lost Connections that bring a tender, humane character to the book, something that is often sadly lacking from the psychiatric services that are Hari's main target. At times, Lost Connections is genuinely radical. At one point, Hari documents the achievements of a grassroots housing movement in Berlin. This was sparked by a wheelchair-bound woman who put a suicide note in her window after

receiving an eviction notice. Her neighbours responded by mounting an anti-eviction campaign that grew and eventually won improved rental conditions for everybody in the area. Hari makes it clear that the collective struggle of the community was the primary factor in leading the woman away from suicide and in improving the mental health of everybody involved. In a sense, *Lost Connections* and

Politics of the Mind complement one another very well. Hari identifies genuine aspects of human suffering that are located in lived experience. He demonstrates a remarkable ability to tell human stories in a way that is poignant and inspiring. Ferguson injects some real politics into the debate, providing a comprehensive grounding that clearly outlines the role of the capitalist system in causing mental distress. He is also explicit with his solutions, which require a fight for better mental health services that take into account the wishes and needs of service users, as well a "fight for a world where such services are no longer required".