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# Interview with Bruce Cohen, author of 'Psychiatric Hegemony: A Marxist Theory of Mental Illness'

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Bruce Cohen of the University of Auckland offers a comprehensive Marxist critique of the business of mental health, demonstrating how the prerogatives of neoliberal capitalism for productive, self-governing citizens have allowed the discourse on mental illness to expand beyond the psychiatric institution into many previously untouched areas of public and private life including the home, school and the workplace.

Through historical and contemporary analysis of psy-professional knowledge-claims and practices, Cohen shows how the extension of psychiatric authority can only be fully comprehended through the systematic theorising of power relations within capitalist society. From schizophrenia and hysteria to ADHD and borderline personality disorder, from spinning chairs and lobotomies to shock treatment and antidepressants, from the incarceration of working class women in the 19th century to the torture of prisoners of the 'war on terror' in the 21st, *Psychiatric Hegemony* is an uncompromising account of mental health ideology in neoliberal society.

In this interview Cohen addresses some of the aspects of his recent book. He concludes that the psychiatric discourse has become hegemonic, a situation in which 'we have all become implicated as subjects at risk of mental disorder'.

**I suspect that your book title might well put off the majority of those who study or work in the mental health field. As a sociologist, how would you convince psychiatry-oriented people that they should still take a look at the book?**

There are two main reasons. Firstly, because I am concerned with answering the same key questions as they are, including 'What is the nature of mental illness?', 'How do we explain the rapid increase in recent rates of mental disease?', and, 'Why are the curability rates for sufferers still so low?'. Secondly,

like any good social or natural scientist, because my analysis is primarily informed by the available evidence. I think people might have a false impression that I will bang them over the head with hard theory and polemic from the first page, whereas most of the book is actually presenting research which they will be familiar with and able to relate to. It's actually quite a fun read, honest!

### **What exactly is 'psychiatric hegemony' then?**

Well, to take a step back, Marxist scholars theorise capitalism as an economic system of fundamental inequalities which are reproduced not only in activities specifically related to the exchange of labour and commodities but in all aspects of social, cultural, and political life. In other words, capitalism and the ideas of the ruling elite frame institutional, group, and personal understandings of the world and responses to it. So what I demonstrate in the book is how psychiatry and allied professions serve the needs of capitalism not only economically and, but – especially in neoliberal society – ideologically.

My notion of 'psychiatric hegemony' then is the idea that ruling class values and norms have become naturalised within the scientific research and knowledge-production on mental illness. Over the past 35 years, this process of expert claims-making by mental health professionals has expanded and become a dominant frame of reference which we now use to speak of and understand ourselves and others. So I argue that our behaviour, personalities, and lifestyles are now closely observed and judged under a psychiatric discourse which has become totalising, thus it can be said to have reached 'hegemonic' status.

Look at it this way: mental illness diagnoses such as ADHD, OCD, 'bipolar', and 'autism' have become a part of everyday conversation, they are now accepted as self-evident truths by the general public, and people are often unashamed to declare themselves as having such a mental illness. That is a radical change in public consciousness when you consider that only 40 years ago psychiatrists were in crisis over their knowledge base and treated with great suspicion by the public, there was great stigma attached to mental illness, and schizophrenia and manic-depression were probably the only two mental illnesses that people were aware of.

### **So what changed?**

That's the central question that my book seeks to answer. Others have often argued that this is a result of the increasing influence of pharmaceutical companies on the diagnostic process and the expanding number of mental illnesses appearing in the American Psychiatric Association's (APA) Diagnostic and Statistical Manual of Mental Disorders (DSM). Certainly the drug companies have benefited enormously from the establishment of closer ties to the APA during this period, yet I demonstrate in my book that new categories of mental illness continue to originate and emerge from academic psychiatry rather than from the pharmaceutical corporations. Thus, it is still the psychiatric profession that dictates exactly what mental illness is. So my answer to your question as to 'what changed' is that capitalism changed – namely, from welfare capitalism to neoliberal capitalism, from the social state with an emphasis on collective responsibility to a focus on the individual and personal responsibility. I argue that as neoliberalism emerges in the 1970s and progresses over the next four decades, so the psychiatric discourse changes with these new socio-political priorities. Fundamentally, neoliberal ideology demands that individuals be increasingly flexible and productive at work, in school and at work, and the mental health system has been a major conduit towards achieving this goal.

### **It sounds like a complicated argument, how did you go about proving it?**

I don't think it's that complicated. As an example, anyone who's looked at the symptoms of ADHD can see that they have nothing to do with having a mental illness but rather denote the requirements for more productive and efficient students and workers (for instance, forgetting or losing homework, failing to complete assigned tasks in the workplace, poor time management, and so on). I am not suggesting some subtle subtext here; it's in the latest edition of the DSM for everyone to see.

But to answer your question regarding proof, I undertake extensive socio-historical analyses of the mental health professions in my book to demonstrate how they have tended to follow the dominant norms and values of capitalism in constructing diagnostic categories and theorising human behaviour, more generally. Additionally, I also include some of my own textual research on the DSM to demonstrate how mental illness classifications have come to increasingly reflect the requirements of neoliberalism over time.

**I can't say I'm aware of any other Marxist theories in the area of mental health, does this make your book the first?**

No, but I think it's the most comprehensive. I cover a lot of ground, whereas others writing in a similar direction have chosen specific aspects of the mental health system to focus on. I am only talking about a handful of books here by the way, most of which are now out of print. That said, Ian Parker's *Revolution in Psychology* (2007) and Ron Roberts' *Psychology and Capitalism* (2015) were very useful for my research.

**Finally, are you working on any other mental health projects right now?**

Yes indeed. I am just finishing off work on the Routledge International Handbook of Critical Mental Health which will be out later this year. It's a 30-chapter edited volume which aims to bring critical thinking and theories back to the heart of research on mental health and illness. It features many critical scholars that people might be aware of such as David Pilgrim, Suman Fernando, Ian Parker, Jane Ussher, Pat Bracken, Sami Timimi, Jeffrey Masson, Phil Thomas, David Cohen, Stuart Kirk, Peter Morrall, and Bonnie Burstow.

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