

THE INVISIBLE HITMAN OF NEOLIBERALISM: THE INTEGRATION OF
PSYCHOLOGICAL INTERVENTIONS WITHIN NEOLIBERAL
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ABSTRACT

THE INVISIBLE HITMAN OF NEOLIBERALISM: THE INTEGRATION OF PSYCHOLOGICAL INTERVENTIONS WITHIN NEOLIBERAL STRUCTURES

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In the past 40 years, there has been a significant change in the categorization and medicalization of the manifestation of human behaviour and emotions. Certain experiences that are distributed due to people's location in economic, political or social structures fall no longer in a political reality simply to be categorized as psychological disorders. Although Marxist scholars have often attempted to locate the mental disorders and their political-economic sources within infrastructural environment that neoliberalism created, their systematic analyses barely corresponded to the theories and practices regarding the abnormal behaviour and psychology. That is to say that, the nature of the "therapeutic" practices most -if not all- of the time emphasizes the individual as the unit to fix. The depression, anxiety and suicides that are correlated with socio-political problems are prescribed interventions that explicitly aims to systematically "desensitize", "restructure" and "habituate" the individuals; which in its essence is an embodiment of Foucauldian concept biopower. The aim of this thesis is to further investigate the political implications of the psychological interventions and psycho-social programs within the neoliberal agenda. It is hypothesized that the devastating impacts of neoliberal and capitalist discourses are systematically concealed through psychological and psycho-social intervention programs as "individual suffering". The individuation of

the suffering goes parallel to the atomization promoted by the neoliberal agenda and -again- it is further commodified, reinforcing the capitalist economic structures.

Keywords: neoliberalism, psychopathology, intervention, abnormal, biopower

ÖZ

NEOLİBERALİZMİN GÖRÜNMEZ TETİKÇİSİ: PSİKOLOJİK MÜDAHALELERİN NEOLİBERAL YAPILAR İLE ENTEGRASYONU

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Geçtiğimiz 40 yılda psikolojik bozukluklar, depresyon ve kaygı temelli intiharların görülme oranlarında hızlı bir büyüme görülmekte. Marksist yazarların sıklıkla psikolojik rahatsızlıkları neoliberalizmin yarattığı sosyal ve politik çevre ile ilişkilendirme çabalarına rağmen, “iyileştirici” uygulamaların hepsi olmasa da çoğu onarılacak birim olarak bireyi vurgulamaktadır. Sosyo-politik problemler ile eş-ilişki gösteren depresyon, intihar ve kaygı vakalarına sunulan tedaviler, doğasında açıkça sistematik “duyarsızlaştırma”, “yeniden yapılandırma” ve “alıştırma”yı hedefler. Bu tez çalışmasının amacı psikolojik müdahalelerin ve psiko-sosyal programların neoliberal ajanda içerisindeki yerinin derinlemesine incelemesidir. Varsayımımız, neoliberal ve kapitalist diskurun en yıkıcı etkilerinin psikolojik ve psiko-sosyal programlar vasıtasıyla “bireysel cefa” olarak örtüldüğüdür. Cefanın bireyselleştirmesi ile neoliberal ajandanın toplumsal atomlaştırma politikaları büyük oranda paralel gitmektedir ve -yine- bireysel cefa metalaştırılarak kapitalist ekonomi yapılarını kuvvetlendirmektedir.

Anahtar Kelimeler: neoliberalizm, psikopatoloji, müdahale, anormal, biyogüç

To my little baby sisters, Deniz and Nehir...

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And last but not least, I would like to thank myself. All of this was and is for no one else, but me. I hug myself dearly. I hope I will always find the will to get up once more and remember that:

“... the meaning and solace aren't to be found in the heavens, but in the trenches of everyday living.”

- Exurb1a, and then we'll be okay.

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CHAPTER 1

INTRODUCTION

The norms for human behaviour and emotions have changed throughout the history of civilizations. This change of norms in human behaviour, however, is affected not only by the available insight on human nature; but also by the dominant economic and political structures of the time. From the moment two people are in each other's area of influence, to put it very vaguely, every action comes with a consequence. Hegel (1807) argues that the moment where two people, or consciousness, co-exist; the political sphere is born. The consequences of actions of each consciousness' will be going to involve the will of other subjects. Therefore, the availability of certain life experiences and the inability of others will be dictated onto subjects by the political and economic powers of different subjects.

These distributions of experiences take their names in contexts. In feudal monarchies of Medieval Europe, the will of one ultimate sovereign overruled the wills of its subjects into taming and working the soil. In the '60s of the United States of America, the experiences available to you might be determined by the colour of your skin, economic class and gender. This will of forces can take the form of a law, a norm or even a medical condition. In the '50s and '60s, for example, a woman who is disturbed by the wage gap, available occupations or unpaid home labour could be diagnosed with female hysteria, or gender dysphoria depending on the expert opinion

of a clinical practitioner (Wallace & Gach, 2008). The absence of the word hysteria in the current diagnostic manual of mental disorders (DSM-V, 2013) is not because the hysteria was eradicated like polio was. Rather, these medical conditions came and went with the political-economic trajectory of their times.

In his book, *The Order of Things: An Archaeology of the Human Sciences*, Michel Foucault (1966) argues that there are a number of “orderly” structures that shape scientific knowledge of the time. If these systematic structures that enable the production of science are analysed carefully, the historical realities of a time will be visible. This archaeology of science is important as it implies that the reality, or *epistémé* in Foucault’s terms, is only one dominant version of existing realities.

In the case of psychological sciences, the mass production of mental disorders in the past 40 years that encapsulate the stress and anxiety of neoliberalism is no coincidence. The history of madness was never a linear one according to Foucault (1989). According to him, before the 1950s, the dictionary for ailments of the human soul was a thin one. In Ancient Greek and Medieval Europe, the people who were incapable of perceiving the common material world was called the alien, mad, insane. They were disturbed, different people. The perception of madness as a disease did not exist for a long time. Outside the city walls of Medieval Europe were the leper neighbourhoods that were the neighbourhoods of sick, outcast and the soon-to-be-dead. When Leprosies was no longer common, around the 16th century, Leper houses outside the cities were used as hospitals to fill them with poor people, those who are incurably ill and insane where the Leprosies was no longer common. It is

around those times, Foucault argues, that the stigma and the disease aspects were ascribed to madness.

In the late 19th century and early 20th century, mental illnesses were ailments that disrupted an individual's ability to perceive the real world. In the 19th and 20th centuries, our categories have been broadened and madness left its place for schizophrenia, epilepsy, psychosis (Wallace & Gach, 2008). The remedies for these diseases were researched and patients were examined and provided with professional care; with the only exception of melancholia. Authors (Wallace & Gach, 2008) argue that melancholia, as the predecessor of all today's mood-related disorders, was different from the other illnesses in terms of its cause and remedy. The professionals of early psychiatry recognized the social base of melancholia and the remedy was social care and connectedness. It is remarkable to see how early psychiatry acknowledges the sources of the illnesses when considering a remedy for the ailments. This point in perspective, or rather lack of it in modern psychiatry, will be an essential point in the thesis work.

In order to maximize profit, capitalism often encourages disregarding the welfare of people, environment, society and justice (Kopf, Carnevale & Chambers, 2013). Neoliberalism, locating the hard capitalism in the centre of the political sphere, creates negative externalities when humane, environmental and political elements are excluded from the equation. One such negative externality is its effect on the economy. When the economic behaviour of powerful actors are deregulated, markets fluctuate with sharp growths and recession (Keynes, 1936). These sharp ups and

downs of the markets deepen the wealth gap, produce unemployment, strains of economic stress in people. Higher strains of economic and political distress impact public mental health systematically, in masses. Poverty, inequality and insecurity; the virtues that are frequently associated with neoliberalism, increases the rates of suicides, and the prevalence of psychological distress (Schrecker, 2016). However, the intervention for this psychological distress and disorders take the individual as the unit of analysis.

The unit of analysis being the individual is not a new approach; neither in psychology nor in psychiatry. However, with the rise of Neoliberalism, both the psychological sciences and practices have been transformed. This transformation involves new definitions of illnesses, the introduction of new methods and tools that do not aim to promote well-being. Instead, these interventions act as a very important tool for constructing a society that defines and builds the neoliberal individual that maintains compliance despite the sharpening inequalities, political sufferings and economic difficulties that are caused by the rise and advance of neoliberalism in the world.

Here, it is important to acknowledge neoliberalism's success in maintaining its status quo despite the negative externalities it creates. Ellen Wood (2002) reviews the work of Karl Polanyi, *The Great Transformation* (1944):

“Only in modern 'market society', according to Polanyi, is there a distinct 'economic' motive, distinct economic institutions and relations separated from non-economic relations. Because human beings and nature - in the form of labour and land – are treated, however fictitiously, as commodities in a self-regulating system of markets driven by the price mechanism, society itself becomes an 'adjunct' of the market. A market economy can exist only

in 'market society', that is, a society where, instead of an economy embedded in social relations, social relations are embedded in the economy." (p. 23)

It is argued by Wood (2002) and Polanyi (1944) that capitalism can exist and survive only in certain political and social settings. For this reason, it requires the social and political life to be reconstructed to allow certain economic modes of production, a form of labour and legislation. This great transformation is at the root of neoliberalism's success to buffer the impact of negative externalities. In this sense, neoliberalism is an expected evolution of traditional liberalism.

However, it is a matter of question what the means and processes that help neoliberalism to disseminate its ideology to the masses and make people cherish neoliberal values are. The primary research question of this thesis is whether neoliberalism corrupts psychological discipline and its practices to exploit its authority on concealing the impact of negative externalities, creates a profitable market to reiterate the economic classes and disseminate the neoliberal ideology and values. The answer of this thesis to this question is affirmative. This work will also try to answer secondary and tertiary questions that; how the political and economic suffering is transformed into individual suffering, and how the pharmaceutical industry influences the process of commodification of mental health.

CHAPTER 2

LITERATURE REVIEW

The analysis of the interrelation between psychological interventions and Neoliberalism require research from a variety of disciplines, consisting of political theory, political economy, psychology and psychiatry. However, it is not always possible to find resources that make use of similar compositions of disciplines in their analysis. The literature accumulation concerning these topics clusters around a sub-field named critical psychology/psychiatry in the psychological field of research. On the parts of political economy or political theory, there is no established sub-field that focuses upon such relationship. Therefore, the literature review will consist of the theoretical approaches on mental disorders, ongoing modes of therapies and the existing critical work that draws conclusions on the politics and economics of the science and discipline.

The criteria on the definition of a psychological disorder are taken by the Diagnostic and Statistical Manual of Mental Disorder V (2013) by American Psychiatry Association as the literature on the issue as well as the clinical decisions are based and legitimized on their definition. According to DSM-V:

“A mental disorder is a syndrome characterized by clinically significant disturbance in an individual’s cognition, emotion regulation, or behaviour that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning. Mental disorders are usually associated with significant distress or disability in social, occupational, or

other important activities. An expectable or culturally approved response to a common stressor or loss, such as the death of a loved one, is not a mental disorder. Socially deviant behaviour (e.g., political, religious, or sexual) and conflicts that are primarily between the individual and society are not mental disorders unless the deviance or conflict results from a dysfunction in the individual, as described above.”

Depression and depressive disorders are a part of our reality. The spectrum of depressive mood disorders are often categorized by the lack of motivation, energy and meaning; withdrawal from daily activities and drastic changes in the everyday routines (i.e. oversleeping, not eating etc.) (Bernaras, Jaureguizar & Garaigordobil, 2019).

An Atlas of Depression (Baldwin & Birtwistle, 2002) gathers the theories and approaches on mood disorders and the accompanied outcomes such as suicide and sexual problems. The first issue regarding depressive disorders is the difference in occurrence rates in different demographic groups. The prevalence rate of depressive disorders for women (20 per cent), as reported by the authors, is twice the prevalence rate of depressive disorders for males (10 per cent). It is reported that the reason for this gender gap hosts no clear explanation. Another aspect to understand about mood disorders are that depressive disorders tend to be accompanied by anxiety disorders; meaning that they have high rates of comorbidity.

Although depression has a long history of recognition in psychiatry, persistent depressive disorder -or dysthymia- has been added to the diagnostic criteria of psychological and psychiatric disorders recently in the 1980s. It is a condition where the course of depressive symptoms is not as acute as the major depressive disorders,

but milder; however, is chronic. Again, it is twice more likely in women than men and has higher prevalence rates in older people (Baldwin & Bristle, 2002).

The co-occurrence of anxiety disorders and depressive disorders often tell a lot about the cognitive and emotional processes of these disorders. Both emotions are considered as functional negative affectivities by the evolutionary psychologists (Bateson et al., 2011) and both has a function to evaluate the situations to create an ideal future and present outcomes. Oftentimes, depressive disorders are accompanied by other types of anxiety disorders. Generalized Anxiety Disorder is one of them which has been explained above. Social Anxiety Disorder is another form of dysfunctional negative affectivity that involves the evaluation of social contexts. People with Social Anxiety Disorders are afraid to be evaluated negatively by other people, to fail or to be embarrassed in social contexts (DSM-V, 2013).

Although anxiety disorders and depressive disorders are a part of our everyday reality; we cannot afford to fail seeing how devastating they can be. People become at direct risk of suicide when they suffer depressive disorders, anxiety disorders; or the experiences that are common outcomes of these disorders (Blair-West et. al., 1999). The research shows that people around 40% of people who commit suicide have been in psychiatric care in the year they have committed suicide. Other people who are at-risk groups of suicide involve people with alcohol abuse behaviour (substance abuse, a common response in depressive and anxiety disorders), people who are lonely and isolated (Baldwin & Birtwistle, 2002). When it comes to the reasons for depressive disorders, authors gather the theories and approaches from the

literature and categorize them as genetic factors, neurotransmitter disturbances and psychosocial factors. The psychosocial factors involve negative experiences in early childhood, a difficult life, constant stress, not having an available social network and a low sense of self-worth (Baldwin & Birtwistle, 2002).

The treatment for depressive disorders has issues. Most of the patients who recover from depression tend to have a relapse. In different age and gender groups, the time of remission varies between 6 months and 12 months. For this reason, it is proposed by the researchers and practitioners that there should be follow-up treatments in different periods and the anti-depressants should be used six to twelve more months after the initial therapy has ended. The research on the SSRIs acknowledges the withdrawal symptoms to be close to the actual symptoms of depressive disorder and recommend the reinstatement of the drug (Baldwin & Bristle, 2002).

Among all the mood disorders that require interventions, General Anxiety Disorder is maybe the one that requires special attention. Anxiety is affectivity that has a function to invite an appraisal for the conditions, potential outcomes and responses in order to avoid danger or an unwanted situation (Price, 2013). It is a part of the human-experience package and people are not alien to its existence. However, there is a full spectrum of anxiety disorders in clinical psychology and psychiatry. In DSM, anxiety disorders are categorized by the stimuli that induce anxiety, however, one type is rather different. Hazlett-Stevens (2008) provides an in-depth analysis of the literature on Generalized Anxiety Disorder (GAD). GAD is a condition where anxiety becomes uncontrollable and disruptive of an individual's daily functioning;

accompanied by somatic symptoms of anxiety. These somatic symptoms consist of chronic muscle tension, sleep disturbances, gastrointestinal disturbances and a variety of other symptoms.

There is not a consensus on the aetiology and causes of GAD; nor a consensus on its prevalence, first onset period or other demographic variations on the disease. The meta-analyses that exist on GAD report that the disorder can start from as young as the age of 10 to people in their old ages. It is reported that women in the United States are two times more likely to be diagnosed with GAD than their male counterparts. However, this pattern changes in South Africa (Hazlett-Stevens, 2008).

Generalized Anxiety Disorder has been observed to be comorbid with depression, dysthymia and other anxiety disorders; meaning that it is highly likely that people who suffer from GAD tend to come across with either or multiple of these disorders in their lives. Aside from the psychological conditions, Generalized Anxiety Disorder is comorbid with sleep disturbances, gastro-intestinal diseases and muscle tension. The theoretical approaches to GAD, as reviewed by Hazlett-Stevens (2008), have several approaches. Of course, the majority of the studies take the endocrine system, neurological and biological structures into account. Mainly, they hold the chemistry and the neurobiological systems responsible for the disorder. However, in addition to the biological structures, an integrative theoretical model in the literature takes the psychological vulnerabilities as well; mainly, early experiences and an individual's control over her environment.

Authors argue that compared to other anxiety disorders, GAD is a much harder challenge in terms of effective treatment (Hazlett-Stevens, 2008). The rate of success from the cognitive-behavioural therapies, systematic desensitization therapies and pharmaceuticals do not prove as effective compared to other anxiety disorders. Patients that use psychoactive drugs show effects of recovery. However, as the effectiveness of the drug increases, the dropout rate from the drugs increase as well; meaning that they no longer want to use their medication. Interestingly enough, follow-up studies for the drug therapies are not conducted in most of the research that investigates the effects of pharmaceuticals. On the accounts of cognitive-behavioural therapy; therapy becomes the most successful when an individual is given cognitive-behavioural therapy alongside systematic desensitization, imaginary exposure, psychiatric drugs and relaxation techniques. It is reported that even when such a comprehensive package of therapy is presented, within 2-3 years there is a considerable chance of prevalence of the psychological disorder.

The work of Hazlett-Stevens (2008) is crucial in understanding the approach on the mood disorders, the diagnostic criteria and the treatment plans of the mood disorders. These will be valuable in arguing the reductionist aspect of the psychological discipline and practice.

The problem of fitting the behaviour spectrum into notions such as normal and abnormal has been salient for a while. One of the most notable debates on this issue is the movement of anti-psychiatry that has emerged in the 1960s (Nasrallah, 2011). Anti-psychiatry has criticized and accused psychiatry of several sins such as

pathologizing normal human behaviour, commodifying mental health and depoliticizing rebellion (see Nasrallah, 2011; Nasser, 1995). This movement was all-encompassing as it was highly critical of the opinions and authority of psychiatry and the psychiatrists' ways of coping with the abnormal. Anti-psychiatry had invited scholars, practitioners and thinkers from various disciplines to re-examine our existing notions of madness, normal, treatment and diseases.

The term was first coined in 1967 by one of the most radical defenders of the movement, David Cooper (Nasser, 1995). Cooper has argued that psychiatry and psychiatric interventions are tools of capitalism to succeed the capitalist utopia (Nasser, 1995). On a similar remarks Thomas Szasz had also believed that psychiatry was far from being politically neutral, instead it fulfills a disciplinary purpose in society. Szasz (2012, 03:43) argued that "psychiatry is not a branch of medicine, but a branch of law, unlike endocrinology or ophthalmology". There are two scenarios that authorities have the right to discipline, punish or lock someone away, Szasz (2012) argues, that are either when someone breaks the law or is thought to be out of their senses. In this sense, psychiatry is seen and thought to be serving a transformative role in society when it cannot perform its coercive nature.

Szasz's ideas on psychiatry are influenced by Erving Goffman, a Canadian sociologist (Szasz, 2012; Whitley, 2012). Goffman (1961) had argued that asylums and psychiatric hospitals carry remarkably similar characteristics with prisons and national schools. These *total institutions* separate individuals from their surroundings, take away their clothes and other belongings -that give them a sense

of uniqueness- and put individuals through a process of transformation. In this sense, psychiatric knowledge and psychiatry are essential tools of social control and governance (Goffman, 1961).

The scholars of the anti-psychiatry movement has also been massively influenced by French psychiatrist Jacques Lacan (see Nasser, 1995; Nasrallah, 2011). His works are particularly important to emphasize that not all psychiatry literature is (d)evolving into a state where social conditions are reduced merely to biochemical ones (Žižek, 2007). The sources of behaviour cannot be reduced merely to biological actors, in Lacan's terms, but the complex power and social dynamics should be emphasized as well (Harari, 2004). Lacan believed that language was crucial because people experience reality via language (Nasser, 1995) and the unconscious use of language embed the prejudices, ideas, practices and power dynamics of the societies (Žižek, 2007).

Lacan's understanding of the link between bodies of knowledge and human psychology is similar to that of Michel Foucault, French philosopher. Foucault also believed that our reality is shaped and governed by the powerful actors and experts that have authority on everyday phenomena (see Chapter 3). For the analyses of this thesis, the conceptualizations of Michel Foucault was used for several reasons. Firstly, the theoretical tools of Michel Foucault had allowed the critical examination and analysis of both individual thoughts and processes systematically as well as policies, ideological and structural outcomes of neoliberal practices. Secondly, Foucauldian *biopolitics* is useful to locate psychiatric interventions

within its political context, while *discipline* and *epistemé* is useful to explain the neoliberal society and the compliance it created upon people.

Yet another comprehensive work on reconstructing human psychology within the social and political context is *The Mind and Body Politics*, authored by Michelle Maiese and Robert Hanna (2019). Their work is crucial since they help different disciplines; with different units of analysis, taxonomies and perspectives to communicate with each other. In this agenda, the first assumption authors provide evidence to is that human beings cannot be understood in a social vacuum. Humans are social animals. They exist within social structures; under their culture, rules and regulations. They live among other people and consciousnesses. Therefore, they are necessarily impacted by their surrounding structures and, although not in the same magnitude, they impact and shape their surroundings.

Mind, as argued by the authors (Maiese & Hanna, 2019), is embedded in the physical world; so is the conditions and experiences that are created by the social, philosophical and political conceptions. This link, that the meta and the physical world coincide, is a must-have emphasis to understand humanity. Because, the human mind is literally (in the true meaning of the word) shaped biologically, physically by the social institutions:

“Many or even most social institutions in contemporary neoliberal nation-states literally shape our essentially embodied minds, and thereby our lives, in such a way as to alienate us, mentally enslave us, or even undermine our mental health, to a greater or lesser degree...” (pp 1-3)

The neoliberal system creates institutions and culture that shapes individuals to conform to its values and rules. Therefore, reconstructing institutions, regulations and values would act as a radical opposition to the neoliberal status-quo since it would no longer reform individuals to conform to its values and troubles. The point of sustainability is where psychology has to be included in the debate.

Firstly, perhaps the most important core ideological principle of psychology is advocating the self-realization of the individual and activating its potential. One of the pioneers of Positive Psychology and the pillars of Psychotherapy in practice, Carl Rogers argues that the fully-functioning person has several features. He emphasizes a life of fulfilment and with the fullest possible potential. Moreover, he states that for a person to full-function, creativity and its prerequisite freedom of choice is necessary (Rogers, 1961). Similarly, Friedrich August von Hayek (1944) emphasizes the same values of freedom of choice as the only suitable way to achieve most of every person's potential. This emphasis on potential and creativity is the main rationale of liberalism and neoliberalism; it is argued that the main power of the markets come from its productivity, profit-maximization and freedom (see Springer, Birch & MacLeavy 2016). However, this correspondence goes further from being a relationship of convenience. The main premises of psychological treatment do not only promote freedom and creativity, but it also actively denotes counterproductive behaviour. Fox and Prilleltensky (1997) review the theories around Abnormal psychology and argue that the main assumption of an objective world and its availability to everyone is not all-so innocent. This assumption creates continuity in any given value. Individuals can find themselves somewhere on a continuum. When,

especially, a continuum takes the form of values such as adaptation, functionality and productivity; people who find themselves outside of the acceptable range of productivity, adaptation and functionality are considered as objectively disordered.

Still, it is not only the ideological correspondences that make these interventions fit in the Neoliberal structures. There have been structural adjustments in the field of abnormal psychology that enabled the practice to establish even stronger political control as well as financial profit over people's bodies and minds.

The major problem of psycho-pharmaceuticals and biochemicals being frequently used as a remedy has been the focus of scholars from different disciplines. In his book, *The Sedated Society* (2017), James Davies have collected a focused selection of academic work on the misuse of psycho-pharmaceuticals in society in collaboration with various researchers and scholars.

Peter C. Gøtzsche (2017), a professor of clinical research and design, has analysed and criticized psychiatric research and trials. In his article, he proposes several arguments. Firstly, he argues that the clinical research that supposedly provides evidence of the usefulness of psychiatric drugs have methodological and analytical problems. The designs are not conducted in a double-blind procedure and the comparisons are not on the same dimension. As explained by the author, in the clinical trials, researchers take participants that have been diagnosed with schizophrenia, depression, anxiety disorders, epilepsy. These patients are already on drugs and for the sake of the clinical trials, they are cut off from their drugs when they have been assigned to placebo groups. When these patients manifest relapse,

bad mood and remittance; they are in no just comparison with the group that is on medication. The impact of a novel medication cannot be in direct comparison with the remittance due to the absence of medication.

Moreover, there is an important issue of anti-depressants creating a vicious cycle of diseases and death. The effects of these drugs reach far from the targeted emotional or cognitive outputs; *overreaching* to sexual performance, balance, cognitive functioning and sleep cycles. The rate of suicides is significantly higher with patients that stopped using these drugs compared to patients who never started on these drugs. In this sense, they create a cycle of dependency on drugs and the dependency deepens (Gøtzsche, 2017).

Cohen and Timimi (2008) provide an in-depth historical evaluation of how the focus of the interventions focused from welfare towards profit-making. One of the key features of Neoliberal conversion was the retreat of government from profit-making sectors. One such sector is healthcare. Governments that embrace Neoliberal policies relieved themselves from the burden of Psychological health-care around starting from the 1970s. Another important step towards neoliberalism was the drastic decrease in the job securities of workers. Markets promoted competition and government policies mainly aimed to accelerate the growth of the private sector. As a result of this sharp conversion towards a more risk-hungry economy, stress became a daily reality. Moreover, Cohen and Timimi (2008) argue that these increases in stress were turned into a profit by the pharmaceutical companies as a band-aid solution. This was a win-win deal for both the governments and pharmaceutical

companies since psychotherapeutic drugs make an important part of their revenues and their success would return to their home government as the growth of GDP.

Shorter (2009) argues that one such example of the technologies that make biopower applicable to the practice of psychological interventions is that of the invention of the spectrum of mood disorders. The historical progression of these affective disorders correlates with the increase of political and social stress. The author argues that medicalization and pathologizing the political, social or economic stress compounds a big portion of the mood disorder diagnoses. For example, Dougherty (2019) proposes that the absence of political resolution is taken care of by psycho-social help. People who are the victims of wartime crimes, post-traumatic stress disorder, anxiety disorders regarding immigration or political discrimination are not offered a constructive resolution for the root of their problems. The burden of healing being put on the individuals when they neither have any agency nor any means to make their conditions better is a purposeful and explicit decision of the neoliberal state. In this sense, neoliberalism worked hand-in-hand with Psychiatry and psychology to disseminate its dominant discourse and marginalize the opponent voices.

One meta-analysis study by Twenge (2000), argues that social indicators are highly significant factors of anxiety disorders and higher neuroticism levels; that is also linked to the prevalence rates of psychological disorders. He makes a historical comparison on the birth cohorts from children who attend college in a thirty-four-year period between the years 1954 to 1988. This time period corresponds to the

latest years of the welfare state in the United States -where the study takes place- and until 1988 there has been a periodically increased utilization of neoliberal policies. Among the strongest estimators of anxiety and neuroticism are political conflicts, unemployment rate, per centage of children in poverty, adolescent suicide rates, crime rate.

There has been some attention to the neoliberal tendencies within the psychological discipline in the literature. Mostly from the field of critical psychology, authors have argued how anxiety disorders and depressive disorders had been on the rise during the neoliberal transformation and the neoliberal era. However, literature evidence does not provide an in-depth look at the causes and roots of mental disorders. In the next chapter, the theoretical framework to analyse the phenomenon and the material will be presented. Mainly, liberalism, neoliberalism and the Foucauldian frameworks that are episteme, discipline, biopower, madness and biopolitics will be examined.

CHAPTER 3

THEORETICAL FRAMEWORK

3.1 Individualism, Liberalism and Neoliberalism

Liberalism is a political-economic ideology that has been developing over time. It has moral and ideological standpoints that prioritize certain values; and promotes certain modes of economic activities. To understand the main arguments and the critical approach in this thesis; the reader should understand the core values that liberalism and neoliberalism cherish and the assumptions that have been brought up through its history.

3.1.1 Individualism

It is further going to be elaborated that liberal economic practices require individuals to be free when making decisions for maximizing the individual's potential and efficiency (Hayek, 1944). Freedom in the liberal texts presumes individuals to be responsible for themselves and autonomous in decision-making. Therefore, liberalism presumes individualism at ground zero. Often, it is referred by Adam Smith and Friedrich August von Hayek to the works of John Locke and his assumptions in *Two Treatises of Government* (1689), that certain political systems take away the individual freedom that human beings are promised in the holy scriptures. In various social structures such as master-slave relationships where a

man's life is bound to the words of his master; or that of the medieval oligarchy in which the subject pledges his work and allegiance to the lord and the king; men is not and cannot be at liberty. In his words, liberty is described as being free to do what a man wants to do with his life, under no authoritative or legislative restriction of another man. However, he also acknowledges that the freedom of men to do anything their heart desires would create a state of nature in which eventually some men will restrict the liberty of other men. Individual liberty, therefore, would become a misnomer in a state of nature. It is for this reason, the role of the state is to be a guarantor to the individual liberty of men; or rather, regulate and impose legislation that applies equally to every man. This equality, in theory, would refrain some groups from gaining authority on the liberty of other men; therefore, creating individual men at liberty of their lives; rather than subjects or slaves of other men, who work and time of their life for other people's desires and well-being rather than that of their own. (Locke, 1689; see Bishop, 2007).

3.1.2 Liberalism

Every culture, every setting has a tradition or suitability for certain tasks and disciplines, Adam Smith argues (2008), which grants them an advantage over other cultures and settings in that specific task. A soil that gives good crops of corn will likely be cultivated by the peasants through generations. In each generation, the art of producing better crops of corn will be developed and those farmers will have better knowledge in producing corn than those who have never produced corn. With the

profits a farmer obtained from selling his corns, he buys meat from a butcher and clothes from a tailor. In his book *An Inquiry into the Nature and Causes of the Wealth of Nations* (2008), economist Adam Smith explains how the intricacies of the market economy have evolved through time and the paradigms it requires to produce wealth. He argues that it is of great hardship that a man produces everything he will need in his life. It is nearly impossible that a peasant produces his corns, his meat, his clothes and other necessities of his life. Rather, he labours what he can do best and purchase other men's labour for his other necessities. This "division of labour" is the source of his competency and efficiency in the work he is doing. The different conditions, cultures and necessities that give birth to a variety in the quality of the labour and products would not be possible if they were directed or interrupted by some authority. When people are not free to choose the work they do best, or when they are unable to get their hands on the profits that they produce; they will have little, if any, motivation to be efficient at what they do. Similarly, it would not be possible for a diverse market to enable exchanges of a wide variety of products to take place. It is for these reasons that people should be at liberty in choosing the work they do and deciding what to do with their profits.

Since "the division of labour" is of great importance for this economic model to work, Smith also argues the factors that impact the degree of the division of labour. One of such factors is the extent of the market. It is argued that markets should be able to answer the needs and necessities in order to keep people away from investing their work inefficiently into multiple tasks and productions that they will not be as efficient otherwise. When the worker or peasant cannot purchase the necessities of

their life with the profit that they obtained from their labour; eventually, they will have to divide their time and work among different necessities. Consequently, this will reduce the quality of product, the amount of expertise and, of course, the growth potential. He, later in his book, applies this pattern of thought for international economics and exchange; arguing against the restraints and disruptions via taxes, customs or unwillingness of foreign trade.

While Smith (2008) talks about the necessities and the conditions that will enable the ideal economic and social environment for the maximum human potential and sustainable growth, David Ricardo (1951) talks about the mechanics of the market that influences the cost and profits of the production. In the book *The Works and Correspondences of David Ricardo* (1951), his work describes the nominal and real value wages of the labour. The nominal value is the quantity of currency received by the labourer and the real value of the labour wages is what goods and services the wage enable for the labourer. He argues that the wage is required to cover the necessities of life, a stable population and a certain quality. Since these are the factors that enable a predictable and sustainable stream of labour and workers, the wages of the workers are necessarily influenced by these life parameters. Ricardo (1951) argues that the wages are under the influence of market forces that are similar to those of the market goods. When the supply of labour increases and the demand of the labour remains relatively stable, the price of labour -or, wages- will decrease. The same principle applies the other way around; when the supply of labour decreases and the demand for labour remains stable, the price of the labour will increase.

However, both Smith (2008) and Ricardo (1951) argue that there is another aspect to the prices of labour that makes it a different entity in the market. The value of a material good can be measured and qualified rather objectively; considering its rarity, the demand for the good, its practical use and its use in stocks (Smith, 2008). However, labour is different in the sense that it is an abstract entity that cannot be measured and evaluated as easily as a material good. For this reason, the workers and masters (as Smith calls them) do and must enter a position of bargaining. This bargain involves paradigms such as how many masters there are to employ workers, how many workers there are to be employed and the political and union power of masters and workers. This notion of bargaining for wage values will later be discussed as a key characteristic of neoliberalism that demonstrates the evolution of liberal structures into more aggressive forms.

3.1.3 Neoliberalism

In his book, *The Road to Serfdom*, Friedrich August von Hayek (1944) describes what liberalism is and what liberty stands for. Liberalism is a political-economic ideology that promotes individual human freedom; that is only achievable in terms of liberty in consumption and production. Liberty was defined under these conditions because working for whoever one desire, producing one whatever desires and consuming one whatever desires (as long as one's ends are capable) were argued to be the only way to ensure liberty, as it is argued by Hayek. Otherwise, we would be serfs producing for a lord and consuming whatever our crop allowed us to. It was

mainly an ideology that rooted the capitalist mode of economic production with non-interventionist government policies. However, Hayek (1944) and Friedman (1962) acknowledge some of the limitations of the liberal economy; such as the saturation of markets and the power of liberty in the hands of unions.

In his book, *The Constitution of Liberty* (1960), Hayek thoroughly argues how certain groups and paradigms create backdoors within liberalism that disrupts the workings of the economy. They propose an update to the existing liberal structures. He argues that, over time, the core value in liberalism has shifted towards an understanding of equality. Although he does not advocate against equality openly, he argues that forcing equality within society requires imposing some form of coercion from a group towards another group. It is this coercion that violates the liberty of people. He openly points out the groups and institutions with the potential of coercion; that are, (1) the governments, (2) labour unions, (3) monopolies. Starting from the last one, his opinions on these potential problems go as follows.

Monopolies have the *least* potential for disrupting the economic structures. Often, Hayek argues, it is not the monopolies that harm the economy; but the hardness of trading or entering the industry when smaller businesses co-exist with monopolies. However, Hayek argues that this co-existence is not necessarily a bad thing; rather, monopolies are argued to have a whipping effect for the growth of the economy via stimulating the small business to be able to stand and grow despite the monopolies.

Contrary to monopolies, labour unions have too much power to create artificial influence on market actors. Labour unions, first of all, separate the workers who

associate themselves with the workers from those who do not associate themselves. This separation is in direct contrast to the equality purpose claimed by the pro-union groups in times when workers who do not wish to associate themselves with unions tend to drift away from employment opportunities. Moreover, unions -by refusing to negotiate on terms- take away the competitive rights of the workers. This also impacts the employers' reach for good workers.

However, the most disruptive of it all is the systematic government impact on the economy. Governments can propose regulations that create artificial demand or supply, disincentivize investments and profit-maximization via taxation. Moreover, the politics of governments can shade the convenience of the markets.

In the consequence of these systematic analyses, upgrades were proposed to the existing liberal structures. It is proposed by Hayek and Friedman that any liberal system should consider the potential humps on its road (such as the problems explained above) and restructure itself accordingly. Political mechanisms, for example, should not only respect the liberty of people as argued in classical liberalism and by scholars such as Ricardo and Smith; but also adjust the economic, political and social spheres to maximize the potential of individual liberty. This involves negative taxes that incentivize investments. On this agenda, the bargaining power of labours and unions are a big cut-back to the system and political authorities should take a side against the organized labour resistance and unions in order to treat them the ailments of social welfare (see Hayek, 1944; Friedman, 1962). It is emphasized over and over that an agenda of reaching the common good is violent

and totalitarian in its nature. Therefore, neoliberalism -in ideology or practice- is eager to point a moral from the earlier liberal practices and bring the anti-coercive emphasis back to liberalism.

3.2 Episteme, Biopower, Discipline and Biopolitics

It seems that any piece of literature that deals with the utilization of power and history would eventually come around Michel Foucault's work. Much of what we know was deemed worthy for criticism and, thus, he sought to shatter the consensus on our understanding of history and politics. In this agenda, Foucault had been curious about the paradigms that are taken for granted as the "stable", "uncontested" and "natural" reality. He believed that power structures have created an order that radiated through different aspects of life. Institutions have transformed under their influence. The dominant "order" determined the values and the beliefs and in return, these values would reconstruct and reinforce the existing power dynamics. It is for these reasons Foucault strongly argued *against* seeing history as an uncentered entity.

In the light of Foucault's historical analyses, there have been marginally different belief systems that mould cultures and mindsets throughout time. In his book *The Order of Things* (1966), Foucault queries the borders of the "logic" and "reason" changed over historical paradigms. Today, magic may not enter the territory of reason, even as a joke; but in the Renaissance, magic and logic co-existed together. "Why did people explain their reality by relying on the concepts that are so incompatible with each other?" Foucault argues that the path to find an answer to

this question lies in understanding the mindset that asks this question for the first time. He argued that each era may have different political events, social systems and historical events; but at a level above these units of analysis, there is “*the episteme*”. Foucault explains that episteme is a precondition for knowledge. It is the underlying -often invisible- layer of the mould of the minds and societies, that accepts certain forms of knowledge that are moulded by the beliefs and cultures of a time.

He presents three epistemes, three preconditions that shape the logic of the time, for three time periods. The first episteme is the episteme of the Renaissance Era, which is characterized by the word resemblance. Things, substances and structures that resemble each other, that have similar functions or simply look and understood in a similar manner are thought to have a logical connection. Diseases, for example, that manifests similar symptoms are thought to be of similar aetiologies, similar cures. Walnut, for instance, was thought to be a remedy for cranial injuries, because the texture and the look of it were similar to the human brain (Foucault, 1966).

The second episteme is that of the Classical Era, which is characterized by the word representation. In this era, things and matters were not merely understood through their resemblance with each other; but they went through systematic comparisons and analysis to be differentiated and categorized thoroughly. Taxonomies were the reality of the time and the existing reality was being classified and categorized. Scientific knowledge mostly depended on deconstructing the parts of a phenomenon and understanding how one thing differed from one another. Institutions of the time, too, had undergone this process of categorization and classification. Schools,

hospitals, religious places became separate and their fields of expertise differed from each other just as the fields of different pieces of knowledge had begun to differ from each other.

Lastly, the Modern Era has brought a new episteme; that is characterized by historicity and interpretation. The reality was no longer explained by mere identities and taxonomies; but, a historical contingency was sought to explain and understand how things came to be as they are. Modern perspective acknowledges that there is no single reality, but realities of multiple minds and interpretations. It enables the probability of today's reality to be different given the conditions and historicity also differs; or rather simply, with a shift in perspectives.

Understanding Foucault's episteme is a crucial step to comprehend the methodology for his works. He travels back time with today's goggles, tries to implement today's reality in the past times; and does the same with the goggles of the past times, as he travels forward in history. Doing this, he sees the fits and unfits and analyses the cracks on his path. One of Foucault's famous works, *History of Sexuality, Vol 1: An Introduction* involves a thorough analysis and a thought process on how power works mainly not through an agency, but via different structures and interactions. This work is important as it contains the frameworks such as *discipline*, *biopower* and *biopolitics*.

His main focus of analysis in the book is sex and how it came to be political. Foucault argues, discourse is a source of power. He argues that an inherently asymmetrical relationship is created when someone has the right to talk about reality while

someone listens. This asymmetrical exchange of reality is one of the ways Foucault seems power is utilized, be it in the form of regulations, conversations, moral values makes it. And often, there have been numerous discourses on sexuality -religious discourses as well as methods and science disciplines to understand and perfect it- about what it means and how it can be expressed. It is this problem of expertise and having a say on common issues that creates an arena for power trades. His main focus of analysis in the book is sex and how it came to be political if it had ever come to be political.

Sexuality was not understood homogenously throughout time and through different places. In the old times of the east, he argues, there was *ars erotica*, which was mainly about pleasure and eroticism; whereas in the modern world, we have created a science of sexuality, *Scientia Sexualis*. Sexuality has become an object of science which had numerous consequences. We have rendered sex, sexuality and human experiences dehumanized by defining the things that are pleasurable and creating expertise on the issue, rather than prioritizing the pleasure. That sexuality has been deemed worthy to become an object of scientific inquiry, there have been ways to standardize and fit the practices into methods. Of course, this new reality is not free of political implications. Where there are true and correct ways, there will be better and worse ways, Foucault argues. These qualities create hierarchy, which is a power imbalance in its very nature.

In this book, Foucault calls out the reader to see the politics and the political not only more than its usual suspects. Power can and should be examined outside the army,

sovereign, states and police. Foucault talks about our traditional understanding of power, which exists in a top-down manner. To put it in another way, in the steps of the hierarchy, groups on the tops have the power as if it is something to be held and kept. Therefore, power is a capacity that is prohibitive, a unit of higher power restricts you. However, Foucault expands our understanding of power. He argues that power comes from below and that the order and status quo should be sought everywhere. Often, power is not utilized in a linear fashion, monarch to subjects, from states to citizens. It is legitimized, produced and utilized in all ways. Power exists in relationships, discourses, practices and even in the act of existence itself. These understandings of top-down power, blind the analysis, since in the modern world today, often, the power utilization does not involve killing, torturing as common as before. Therefore, power is a complex concept and is heavily undermined if we were to stick our focus in the central units; because, according to Foucault, there is no individual or structure where you can pinpoint an ultimate authority.

However, this proposition of power is not to overcomplicate power to the extent where relevant debates lose their meaning. Foucault argues that there are numerous technologies of power, different strategies available in different contexts for power to be utilized and discourses to be disseminated. In the modern era, with the availability of birth control methods and media, governments produce discourses on the politics of life. Biopolitics is producing discourses and utilizing power on regulating life and forms of living -hence bio- in the scale of populations and groups. Foucault recognizes these biopolitics, laws and agendas on population control, birth

control, laws and regulations on marriages. Again, it is in the 19th century, the sexuality of children was researched and problematized by teachers and doctors. Expert opinions, in the form of advice, have created a narrative that changed social life. He argues, prior to this problematization, child sexuality was a natural development towards adulthood and practised as a normal aspect of life. From then onwards, science had taken the say in what is acceptable and good; as well as what is unacceptable, problematic and harmful. This medical gaze and scientific inquiries had been the very technologies of power that has moulded social and cultural practices, values and the mindset that we take for granted in the coming ages. It is this discourse that disciplines our behaviour. Through these discourses, and the beliefs and values they normalize and standardize, regulate our bodies, behaviours and attitudes towards life and reality. Biopower, which can be in the form of discipline or biopolitics, Foucault proposes that power has gained a form that is invisible compared to what it was before in regards to the politics of life. Its ultimate aim is to normalize certain ways of things as the way things are.

Foucault questions the political aspect of governing life. The question of who should govern us and on what should we be governed is a relevant question for this thesis. On the agenda of answering this question, he refers to the ultimate governing power, that is governing life. This biopower -the power to decide what is to live, what is to die, what is to reproduce and in what way- was the power of a sovereign in monarchic settings. Foucault argues that, although in modern times sovereigns do not always have the power to decide on life, authorities decide on the method and definitions of life. This shift in the ways of imposing the power makes it less visible than it was;

when sovereigns were simply beheading their subjects. That power being invisible, via surveillance, via the creation of knowledge and norms; it becomes more dangerous. In this regard, Foucault (1995) states the following:

“Traditionally, power was what was seen, what was shown, and what was manifested...Disciplinary power, on the other hand, is exercised through its invisibility; at the same time, it imposes on those whom it subjects a principle of compulsory visibility. In *discipline*, it is the subjects who have to be seen. Their visibility assures the hold of the power that is exercised over them. It is this fact of being constantly seen, of being able always to be seen, that maintains the disciplined individual in his subjection. And the examination is the technique by which power, instead of emitting the signs of its potency, instead of imposing its mark on its subjects, holds them in a mechanism of objectification. In this space of domination, disciplinary power manifests its potency, essentially by arranging objects. The examination is, as it were, the ceremony of this objectification.” (p.187)

The works of Michel Foucault is important for this thesis since the understanding of the human mental condition has gone through radical changes throughout time. It has been hosted in the realms of science, philosophy, religion and morality. It will further be elaborated in this thesis that not any two of these realms were compatible with each other, and yet the society's understanding of the mentally troubled travelled in all of these realms.

In *Madness and Civilization*, Michel Foucault unravels how the notion of the mad has changed through time. He begins in times towards the end of the Middle Ages in which madness was considered as people that were disturbed by the Gods, angels or demons. Although they were exiled out of the city, Foucault argues that they have held their position and dignity as a human. The classical period had brought a much strict attitude towards the mad, criminal or the poor. They were seen as immoral and their agency was taken from them, just as their liberties. Lastly, it was in the modern

age that the mad finally were separated from the poor and the criminal. Madness was considered a disease and doctors were responsible for the mad. However, this medical gaze had dehumanized the madness. The relationship between the mad and the doctor / or the society was no longer symmetrical.

Foucault's methodology and episteme will help the analysis in this thesis to deconstruct what we know and what we assume about the human psyche or to be more specific, about its disorders. Foucault demonstrates in *History of Sexuality* how sexuality became a social construct that is so politically overloaded. Similarly, Foucault's work will help the researcher to, first, provide evidence of how psychological disorders and psychological interventions are politically loaded; second, to unload this political load and explain how today's psychological interventions reinforce the neoliberal culture and the structures. Types of biopower, namely discipline and biopolitics will try to be located in the existing political and economic structures; as well as the very definitions of psychological disorders, their categorization.

This chapter was important in laying out the basic frameworks that will be essential for the analyses in the coming chapters. The next chapter examines the ideological and practical bases for neoliberalism. Throughout the chapter, it will be aimed to unravel why and through what mechanisms neoliberalism becomes harmful for society and human health conditions. The literature evidence will be provided to support the arguments and a link will be formed between the common outcomes of neoliberal economic practices and the mental disorders.

CHAPTER 4

BREAKING THE HUMAN

Societies are under the influence of a wide array of forces. Politics determine the rules, conditions and legislations people live in; economy determines the food on people's plate; institutions operate the machinery in which societies and systems exist. Therefore, ideologies and practices that shape the wheels of everyday life, also tune the human experience; our relationships, education, occupation and the lives we can afford.

In this chapter, the misfit between neoliberalism and human mental health will be discussed. It will be argued that the outcomes of neoliberalism have detrimental effects on people's psychological well-being. Firstly, it will be argued that neoliberalism sees inequality and failure as a driving force in the economy; which leads to intense emotional strain on people. Secondly, it will be discussed how the neoliberal economy deepens the wealth gap; rendering more and more people in poverty and the outcome of poverty being increased risks of anxiety and depressive disorders. The third argument in this chapter will be that the neoliberal understanding of freedom rests on making the individual responsible for the success and the failures under the understanding of self-actualization and realization. This inflation of responsibilities returns as chronic stress and anxiety disorders. Lastly, it will be argued that as neoliberalism spreads its values with globalization; individualism is heavily disseminated as a culture. However, this may enable a conflict in people

trying to fit within their culture as well as the socio-political and economic system; rendering people prone to depression and meaninglessness. Literature evidence for each of these arguments will be provided alongside figures.

4.1 Inequality and Mental Health

If one desires to understand where equality and inequality fit in neoliberal understand, the first question to be asked is “how does free-market economy and planned economy approaches on freedom”. The very first postulate of liberalism and neoliberalism is that personal freedom is achievable via economic freedom. In Adam Smith’s arguments, the main advantage of liberalism is that every man is different. Each has a different background, was born into different cultures and spent time mastering a different skill. This gives each and every man/woman a comparative advantage in their occupation. It is this comparative advantage that creates efficiency in economic output and profit to purchase other products. Again, it is this division of labour that ensures the best quality of a product. In Hayek’s book *The Road to Serfdom* (1944), it is throughout the chapters that a person should have the say on whom he is going to sell his labour, for what he is going to spend his profit and the amount of risk he is going to take. Since every man and woman is born different, with different ambitions, life experiences and desires; it is only just to let them decide what they will do with their lives. This assumption precedes a second argument that any economic setting that decides for people on what people are going to do, the amount of risk they can take, where they can work and for what reward is unjust and

against people's freedom. It is for reason that both Friedrich Hayek (1944) and Milton Friedman (1962) uses the analogy of serfdom, a class in which people are bound to the earth they are cultivating and producing what they are ordered to be producing, to a reward that is decided by their lords and their consumption patterns are mostly pre-decided by their lifestyles. Therefore, any attempt at a planned economy is not only unjust; but is a form of coercion on human life, which is unacceptable in both liberalism and neoliberalism.

However, the twist to this understanding is when difference becomes synonymous with inequality and is regarded as the precondition of justice. Neoliberalism does not only disregard inequality, poverty and failure but sees it as beneficial for the society and economy. Hayek and Friedman thoroughly discuss in their work that people should be rewarded not in terms of citizenship or birth right but in terms of merit (Hayek, 1960; Friedman, 1962). They argue that people differ in their appetite for risk-taking, desire for work and the types of works they are willing to labour for. It might be the case that an administrator has bettered herself; learning the intricacies of economics, educated herself on psychology to understand the people she works with, gained skills of leadership and motivation but, getting paid less than a fellow administrator due to seniority or gender. In this case, the qualities that make a difference in work are not rewarded justly and this demotivates her to improve herself to be better at her work. Although neoliberal scholars appreciate when a successful story is rewarded correctly, as in the examples of monopolies being the successful children of a nation; they fail to acknowledge the stories when work is not rewarded appropriately.

Blindly assuming that markets are fair to everyone if not intervened, the economic failure of individuals is interpreted as the natural elimination of the failed ones by the markets. This Social Darwinism takes its roots from the socio-economic meritocracy and emphasis on individual responsibility (Tienken, 2013) that has been rigorously advocated by Hayek (1960) and Friedman (1962).

Any discussion regarding the core values of neoliberalism would be incomplete if it does not involve neoliberalism's emphasis on personal responsibility. The missing link leading to the survival-of-the-fittest paradigm from individual liberty is the understanding that each individual should be held accountable for their successes as well as failures. Governments and authorities should not impose what their citizens should prioritize and should not commit resources and services which individuals may or may not choose to receive. This concept is presented by Isaiah Berlin (1969), in the chapter Two Concepts of Liberty from his book *Liberty: Incorporating Four Essays on Liberty*. He argues that liberty in liberalism and neoliberalism is conceptualized as liberty from an active, oppressive source of influence. Negative freedom is imperative for individuals being responsible for themselves. In finality, this line of arguments begins with individuals being free from any imposition. Individuals are free to choose where their efforts and investments (material or not) will be. If they desire anything, it is their responsibility to work for it and achieve it. Therefore, any effort given or not given is -again- in their choice; therefore, in their responsibility. Lastly, if they succeeded; the success belongs to them. The same rules apply also when an individual fails. It is the individuals who should be held responsible for the consequences and the reasons for these failures. In the last step,

it leads to the adaptive evolutionary idea that if you can do it you will succeed; if you cannot, you will fail and both cases are nothing but only fair.

However, interpreting the world through the glasses of social Darwinism works both ways. Not only those who did not try and failed are considered as a failure, but failure is considered as an indicator to blame the victim. This is visible in our everyday reality. Doctors are getting paid more than teachers, and teachers are getting paid more than unemployed archaeologists. Students in the United States, India, in Turkey are working and studying hard for their university entrance exams and compete with millions of their peers. When they fail to get acceptance from medical schools; but get acceptance from archaeology departments, they are often criticized for failing to achieve their dreams. In such a scenario, a potential hardship in their economic life is often seen as failures and punishments; whereas the life enabled for their doctor friends are considered as fair and just. Neoliberal culture, in this case, sets an example for the relevant parties to take lessons to “May the best one win”, or achieve a decent life with good health insurance and economic security. This social evolutionary approach is the wheel that makes innovations and development happen in society. Moreover, this is the best for everyone; even for the free riders in the society, who did not necessarily contribute to the breakthrough but, take it for granted today.

As a political-economic ideology, neoliberalism prioritizes profit-maximization and growth via setting the method as competition. It is crucial to understand this as this is the basic premise why neoliberalism is not only okay with inequalities but depends

on them for its model to achieve the promised spoils and benefits. In this sense, neoliberalism, as a political and economic ideology, openly advocates for inequality. It is only expected that the ship will go where its nose points out, or to put it more openly, neoliberalism should increase income inequality and poverty.

Unsurprisingly, neoliberalism does increase inequality and poverty. John Quiggin (1999) argues that in the era after the Second World War, income inequality steadily decreased in the developed countries. It is discussed that in the United States this deepening in the wealth gap has started visibly in the 1970s and has continued there ever since (see Figure 1). This is not inherently a virtue of neoliberalism, but capitalism in general.

Thomas Piketty (2014) explains how inequality is achieved and sustained. To understand the paradigms that lead to wealth inequalities, the first acknowledgement to be made is the two sources of income and wealth, which are production technologies (e.g., the capital) and labour-power. Piketty (2014) explains that the capacity of producing wealth is substantially different for each source of income. In the capitalist mode of production, ownership of production technologies, access to the markets and legal rights on the production revenues enable higher potentials of wealth than the labour wage. It is for this reason, Piketty argues, the wealth owned by the top ten per cent makes up nearly two-thirds of all wealth in Europe.

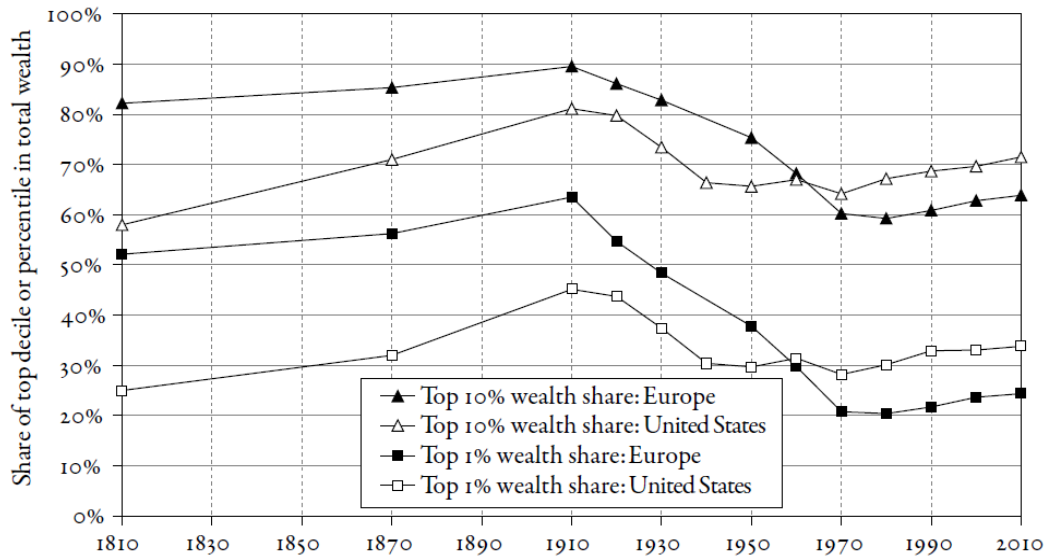


Figure 4.1. “Wealth inequality in Europe versus the United States, 1810 – 2010” (Piketty & Goldhammer, 2014; p.349)

Although capitalism’s inherent mechanisms favour the capitalists, the wealth gap was indeed closed in the post-war periods as the capitalists were subjected to taxes to help flame the economy (Piketty, 2014). Duménil and Lévy (2015) follow Piketty’s evidence on the trends in inequality of income and wealth over the years. The evidence clearly shows that the wealth gap started widening in the favour of the capitalists and against the good of the already poor and working-class in the 1970s and 1980s. The authors (Duménil & Lévy, 2015) explain that this trend is due to the shift in the economic and political policies that neoliberalism has at its heart. In the neoliberal form of capitalism, the wealth flow is channelled to the capitalist and high-level management (i.e., upper and upper-middle classes).

This has been the case with Australia as neoliberal reforms have started dissolving the middle class, adding more people to the poor lower class, while transferring the

wealth in the hands of the fewer people. In the case of Brazil, although neoliberal transformation seemed to benefit the real wages of industrial workers; the number of people being employed has been on a steady decrease (Amann & Baer, 2002). This decrease in employment is argued to be the reason for the rising wealth inequality and poverty. Moreover, it is argued that this ever-growing competitiveness of the job market has made the jobs less secure for the workers, due to the privatization of industries and lesser regulations (Amann & Baer, 2002). Similarly, Nicholas Sowels (2019) examines how people in the Anglophone world had gradually been impoverished and inequality been rising in the era of Neoliberalism, a process starting from the 1970s-1980s for some other countries for its effects to be visible-.

But how does neoliberalism impoverish people and widens the economic inequalities? This transformation occurs through a set of policies and deregulations. Palley and colleagues (2004), explain that there are different processes to neoliberalism in practice. One of them is that the regulations on wages and employment are relieved. This leaves the real wages in the hands of the employer and the industries. This shift in the initiative aims to work better for the worker and the employer since it will provide a better bargain for quality work. However, in practice, this deregulation allows employers to decrease wages to decrease production costs. Stockhammer (2011) argues that neoliberalism is an ideology with crises engraved in its core. He argues that this widening of the wealth gap through income redistribution drives people to take credit for their needs and desires. Neoliberalism creates a problematic and self-enclosing loop as more people are getting poorer, with more wealth accumulating in the hands of fewer people and a

considerable amount of people depending on credits to make purchases. This credit-driven mode of growth locks people in cycle debts and obligations in addition to other responsibilities and war of survival to fight that neoliberalism forcefully dictates upon everyone living within its reach. Moreover, neoliberalism demands political powers to look after their interests, dispossess the little that the commons have and allocate those resources back to the already economically powerful and stable class (Harvey, 2007). At this point, it has already been discussed thoroughly that neoliberalism creates inequalities and unemployment, impoverish people and make them the socio-economic outcasts with a normative judgement that those who have failed deserved it. But these outcomes do not have their effects merely in the economic realm.

Stress and anxiety have been adaptive in human evolution and has been a part of our lives as long as we have known ourselves (Nesse et al., 2016). A definition for stress and anxiety is required for the continuation of the following arguments. Stress is a set of responses that are activated when a change or -the probability of a change- in the environment or conditions is perceived. This perception starts a process of evaluation, which has a question at its core: “How is this going to affect me?”. Therefore, this process involves memory -a reference from past experiences- and anticipation of future probabilities. Stress aims to (1) physically prepares the individual for a fight or flight response and (2) make the individual highly alert to any potential outcome regarding the cause of stress via directing the focus on the stressor (see Nesse, Bhatnagar & Ellis, 2016; Badyaev, 2005). Stress, however, is not meant for a prolonged state of being. The prolonged exposure to stress suppresses

the immune system, have devastating effects on the cardiovascular system, detriments the gastrointestinal system and renders psychology vulnerable to a variety of mental illnesses by changing the chemistry of the brain and the endocrine system (see Hadany, Beker, Eshel & Feldman, 2006; Yaribeygi, Panahi, Sahraei, Johnston & Sahebkhari, 2017).

Anxiety differs from stress in the sense that there does not need to be an external trigger -a stressor- for the negative affectivity, physical distress and cognitive alertness for anxiety, whereas stress is associated with a stressor (American Psychological Association, 2020). As American Psychological Association (APA, 2020) reports, an episode of anxiety involves physical discomforts, such as shortness of breath, dizziness, sweating; worry and fear.

Here, one should appreciate the supply of prolonged stress by neoliberalism. Starting from the early years of school and childhood, children from many countries is presented with the idea that a good school is a path to a good education, followed by an economically stable life. In schools, every year and for every course, students prepare for exams. They fall somewhere in the distribution, their successes are compared with their friends. Inequalities often start from the very opportunities and living standards provided to children. Parents with more disposable income can provide private classes, private schools and additional learning material to their children; whereas, parents who can barely make it to the end of the month often experience difficulties covering the schooling “expenses” of their children. Starting

from a very early age and onwards, children are getting acquainted with competition and stress in a game that is far from being fair.

Building a life for the future often requires a good education. However, that is an investment that requires money from young adults with -often- no disposable capital. For the United States of America, student loans have become an endless pit. Goodnight, Hingstman and Green (2014) explain how universities prioritized profit-making and higher education became an industry whose priority being profit-making. Although the system culturally and ideologically forces -as discussed above- that individuals need to increase the chances of their economic survival; students are encouraged to complete some form of higher education. According to the report provided by Jaleesa Bustamente (Education Data, 2020), the national student debt balance had been on a linear rise since 2003 with 0.24 trillion dollars all the way to 1.68 trillion dollars in 2020. On average, a bachelor's degree holder has a debt of \$31,790, whereas this debt is on average \$118,360 for a doctoral degree holder. The picture is similar around the world. According to the OECD report in 2018, student debts range from 2,000 dollars to 15,000 dollars annually. These costs are aggregate costs that simplify the living costs and university fees. This is the case of the relatively advantaged groups that somehow managed to finish a degree. Even so, their adult lives start with a considerable amount of debt; an obligation that will have negative consequences unless satisfied.

Although this case may seem very limited, it is used to provide a human perspective to the individual within the neoliberal system. From here onwards, we can diversify

the stressors and decide on the amount of distress. As the neoliberal transformation sharpens, the income inequality increases; people take loans and get into debt. The trap of poverty becomes harder and harder to escape as the chances of escaping poverty tricks people into getting into debt. This debt, poverty, unemployment and income inequality rectangle manifests itself in people's everyday lives as events and as potential stressors. Such stressors sometimes take the form of an exam, an occupational inspection, a payment date, the fiftieth job application form, notification of levy by the court. The reader may argue that the existence of stressors is not exclusive to neoliberalism. This is true; however, it is important to acknowledge once more that neoliberalism encourages social Darwinism (see, Tienken 2013) and benefits from the existence of strict negative consequences of failures.

Indeed, it is the case with Britain. Concentration Index and GINI coefficient have been reliable predictors of mental disorders. A sample of 8580 individuals has been examined in terms of a range of demographic characteristics; including age, gender, wealth and income inequalities. The evidence shows that people who are at the disadvantaged side of the income-related inequalities are also disadvantaged in the prevalence rates of psychiatric disorders (Mangalore, Knapp & Jenkins, 2007). Literature has the perfect piece for this puzzle here. A report by Richard Wilkinson and Kate Pickett (2017) shows the co-existence of relationships around mental health, poverty and poor health overall. In this set of relationships, income inequalities predict poor mental health. However, what is really catching the eye is that poor health predicts poverty. Working spaces have been ever-more insecure as

with the increases of unemployment, more people competing with fewer jobs and even more being in debts and obligations to be willing to accept even worse conditions. When governments and authorities have fewer regulations and union powers decrease gradually, humane aspects of labour are largely being overlooked by the employers. An employee that goes on sick leaves would mean hours not worked. Therefore, conditions that jeopardize the possibility of maximum profit would not be desirable in a system that prioritizes maximum profit-maximization. Poor mental health is not exempt from this pattern. Although the main argument defended in this chapter being how neoliberalism breaks people psychologically, the relationship is not a one-way relationship but a circular one. People who suffer from mental health conditions; such as anxiety disorders, depression, panic disorder, forms of psychosis as well as substance abuse are at marginal risks of losing their jobs (see, Kaspersen, Pape, Vie, Ose, Krokstad, Gunnel & Bjørngaard, 2015; Butterworth, Leach, Pirkis & Kelaher, 2011; Dooley, Fielding & Levi 1996). Although it will be discussed in depth that the conventional psychological interventions are falling behind in addressing the problems, let alone being effective in the long run; it should be stated that scholars who gaze upon this relationship between the economic reality and human psychology already see these problems and make a call for an alternative intervention. Saraceno and Barbui (1997) discuss that poverty is a significant risk factor worsening mental health; regardless of the north or south of the world. For this reason, they argue that international cooperation should address the necessity of poverty intervention for bettering the mental health of communities.

When we talk about the stress and worries of lower-income groups, we should not only consider unemployment, debts or amendments as potential stressors. Often, it is the lower class and the poor who work at jobs with terrible conditions. Hayek (1960) and Friedman (1962) had been the leading advocators against the labour unions. Both had argued that labour unions disrupt the competitive aspects of the labour market, create artificial employment and deny the workers their rights to bargain their work conditions. Hayek and Friedman argued although labour unions claim to be working for the wellness of many; they are the tools of coercion and are against freedom. However, without any organized power, the right to bargain for work conditions does not necessarily work in the favour of the workers. Neoliberal transformation increased deregulation of work environments and weakened the labour unions. The labour wages had been on a trend of decrease while unemployment consistently rose. For those who remained in their jobs, there have been consistent expectancies of performance development, consistent monitoring of their performance, replaceability (see Albarracín, Naron & Naron, 2000). The vulnerability of different socio-economic groups to psychological disorders has been studied by Murali and Oyebode (2004). Researchers examine how the prevalence rates of psychological disorders vary in five socio-economic classes: (I) professional, (II) managerial, (III) non-manual skilled, (IV) manual skilled, (V) unskilled. These five socio-economic classes are highly significant ($p < .01$) predictors of; (a) Mixed anxiety and depressive disorder, (b) generalized anxiety disorder, (c) depressive disorder, (d) phobia, (e) obsessive-compulsive disorder, (f) panic disorder, (g) functional psychosis, (h) alcohol dependence, (i) drug dependence. Here, the authors

argue that the vulnerability for psychiatric disorders is due to chronic stress, insecure working conditions and economic instabilities. They add that substance abuse is very visible evidence of maladaptive coping strategies in the stressful lives of the lower socio-economic classes. Prevalence rates of drug dependence for the professional class and unskilled working class are 7 per cent and 50 per cent respectively, and the prevalence rates of alcohol dependence for these classes are 33 per cent and 73 per cent respectively.

The competition itself is a contributing factor to anxiety and depression. Globalization had created a sustainable emotional strain on the domestic developing industries. Although workers have very little autonomy and power to impact the unfair trade and production conditions; their workers are forced to compete in unfair conditions (Colantone, Crino & Ogliari, 2015). Humans need to feel accepted and attach securely to their social groups; that make feelings of inferiority and constant worries of acceptance undesirable for people. The evidence argues that competition in social relationships, repeated appraisals of self-worth, fears of rejection, submissive behaviours and the need for validation increase the probability of depression and anxiety (Gilbert, McEwan, Bellew, Mills & Gale, 2009). Although the forms change (i.e., Generalized Anxiety, Panic Disorders, Depression etc.), the emotional and cognitive strains on individuals keep growing. As it has been reported thoroughly by the World Health Organization reports (see World Health Organization, 2005; World Health Organization, 2011; World Health Organization, 2014; World Health Organization, 2018), it is truly challenging to track people with mental disorders, the onset of the mental disorders, their exact prevalence rates and

the recurrent cases throughout the individual's life due to reasons such as under-reporting, poor registries, lack of services and socio-economic availability. Therefore, we need to acknowledge that the data might not give us the full picture of the prevalence rates of mental health disorders. Still, the available empirical research provides a meaningful insight to comprehend how global mental health is affected in the neoliberal era.

A comprehensive study by Dattani and colleagues (2021) adjusts and analyses data from the Institute of Health Metrics & Evaluation and the WHO Global Health Repository. Their analysis shows that nearly 11% of the world population is suffering from mental disorders that have a significant impact on an individual's life. Evaluating the data on depressive and anxiety disorders is crucial, the writers argue, since these disorders seem to have organic bonds with our social, economic and political settings. As it has been emphasized previously, the main argument of this thesis work is to examine how neoliberal structures and the neoliberal ideology systematically harms people's mental health and that psychological disciplines and practices are responsible for creating a market from this harm and re-integrate the individuals back into the system. Therefore, the study of Dattani and colleagues (2021) is one of the many studies that address socio-economic and political factors. However, these *risk factors* (see World Health Organization, 2012; Mental Health America, 2021) or *complications* (MayoClinic, 2019) that acknowledge unemployment, poverty, isolation, financial insecurity do not conceptualize all these factors as the outcomes of neoliberalism, nor it does *imply* any link between neoliberalism and mental health.

Still, the data do not hesitate to show the evidence for a cracking and breaking world. The report provided by WHO (World Health Organization 2017), proposes that the rate of depression has risen by 18.4% between 2005 and 2015 in the world. In the year of the report (2017), approximately 4.4% of the world's population, (300 million people) is experiencing significant trouble due to depression. Moreover, it is reported that prevalence rates for depression have a trend to increase as people get older.

The case of anxiety disorders is very similar to the case of depressive disorders (World Health Organization, 2017). Approximately, 264 million people are suffering from anxiety disorders *globally* and the increase rate of anxiety disorders is 14.9% since 2005. The trend is very similar in the United States. Kessler and colleagues (2012) report that nearly 32% of the population of the United States will suffer from anxiety disorders at some point in their life. Their analysis shows that anxiety disorders are prevalent with teens as well; however, the prevalence of the condition spikes mostly with people in their early 20s. Unlike depressive disorders, the prevalence rates of anxiety disorders do not differ in different age groups. This finding of Kessler and colleagues (2012) is also coherent with the anxiety reports of the world population (World Health Organization, 2017), in terms of its stability in age groups and the age of onset.

The data collected from England between 1993-2014 (data collected four times with seven-year intervals), show the same trend with different magnitudes of increases (McManus et. al., 2016). Researchers report that the prevalence rates of common mental disorders (researchers have arched anxiety and depressive disorders under

this taxonomy) have steadily increased between 1993 (6.9% of the population) and 2014 (9.3% of the population) in both genders. This difference may seem tiny to the reader. At this point, I would like to present the prevalence of common mental disorders by unemployment from the same report. The prevalence rate of common mental disorders among employed people is 14.1%, whereas the rate among unemployed people is 28.8%.

Apart from anxiety and depressive disorders, it is crucial to examine suicide and self-harm data under mental health conditions. According to the State of Mental Health in America report (Mental Health in America, 2021), suicides, suicide ideation and self-harm rates are on a steady increase between the years 2011 and 2021, with 10,770,000 (I had to triple-check the number) adults with *serious* thoughts of suicide nationwide in 2021. Another important finding (World Health Organization, 2017) reports that suicide is the second-leading cause of death in people between 15-29 years old. Throughout the world, 78% of all suicide-related deaths occur in low and middle-income families, which WHO reports having the least public mental health support and spendings (see World Health Organization, 2018). The case of England is similar in the sense that suicidal thoughts, suicide and self-harm has increased throughout time. Moreover, the report from England (McManus et. al., 2016) supports the findings of WHO in terms of suicidality in low and middle-income countries. McManus and colleagues (2016) report that suicide thoughts, suicide attempts and self-harm is higher among unemployed people (30.5%, 11.3%, 12.6% respectively) than the suicide thoughts, suicide attempts and self-harm rates among employed people (20.8%, 5.8%, 7.6% respectively).

One alternative way to observe the growing mood disorder epidemic is to look at the number of prescriptions to cure anxiety and depressive disorders. Although the data are scattered, the trend is quite visible in terms of anti-depressant use as well. Mojtabai and Olfson (2008) found that the percentage of patients receiving psychotherapy has declined from 44.4% in 1996 to 28% in 2004 in the United States. Writers argue that this difference is due to the decrease in the trend of psychotherapy specialization and increase in the trend of psychopharmacology. Again, Mojtabai and Olfson (2010) found that psychotropic medication prescriptions have risen from 42% to 59% between 1996-2005. Between 1993-2002, psychotherapeutic medication use has risen approximately two-fold in the United States (Olfson et. al., 2006; Olfson & Marcus, 2009). The long-term analysis of Zito and colleagues (2020) report that in the years between 1984 and 2014, anti-depressant use grew 14-fold in state Medicaid enrollees. The numbers in the ClinCalc Database (2021) tell a coherent story. A glance at the total number of anti-depressant prescriptions shows that the use and prescription of drugs are on a sharp increase in the past ten years (see Figure 2).

This increase in anti-depressant sales in the United States overlaps with the global economic crisis that started in the United States in 2008. Frasquilho and colleagues (2016) have found in their systematic literature review that in times of economic crisis, people are at high risk of mental health problems, suicide and substance abuse. In 2008, the economic crisis, via unemployment and low-income levels, has led to severe negative impacts on people's mental health in the United States, effects of

which should be reversed via structural solutions instead of psychological ones (Piovani & Aydiner-Avsar, 2015).

Anxiety disorders and depression has become an epidemic as has been continuously discussed before in this chapter and the literature review chapter. However, one form of depressive disorder is an interesting reality of our world to pay attention to.

Existential depression, existential vacuum, existential crisis and existential meaninglessness are terms often used interchangeably referring to this phenomenon (see Frankl, 1972). Psychologists and psychiatrists describe existential depression as a state and feeling of meaninglessness; accompanied by loss of motivation on living, on feelings, on self, on common life goals and potentially other aspects of life (Berra, 2019). The mood has a depressive orientation that originates from the outcomes of the thought processes and evaluations on the meaning and the nature of the existence. When faced with the truth that there is no inherent meaning in life, individuals feel pushed towards extreme ends; such as ending the life altogether or radically adopting a religious faith (see Berra, 2019). The existential depression -the existential vacuum of meaninglessness- has become a growing epidemic and it has been a challenge to psychiatrists as it is radically different from depressive disorders as we know it (see Berra, 2019; Hodges, 2002; Frankl, year; Bergner, 1998).

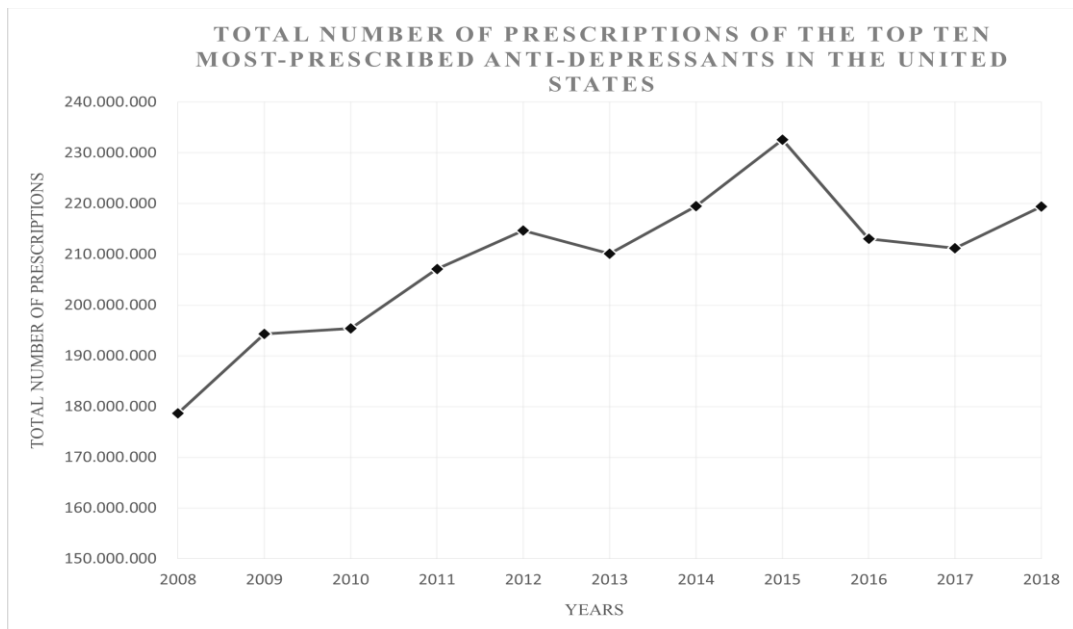


Figure 4.2. Anti-Depressant prescriptions in the years 2008-2018 (ClinCalc DrugStats Database, 2021)¹

4.2 Individualism, Solidarity and Responsibility

It is a problem of existence, of morality and of philosophy to define the standards and ideals on which people should abide. Even though people obey existing laws and legislations for some part, a disagreement on even those rules we abide is not so uncommon. However, it becomes problematic when people are dictated on what they should believe, how they should perceive themselves and others, what meaning to give to their existence. Different cultures had been bred across societies, across time and realities. The variation of these cultures was the reason for war and alliance. However, even that cultures shared similar values would not mean that a person will

¹ The data on the drug-sales and prescriptions prior to 2008 could not be obtained.

stop following his or her cultural values for alternatives. A valid question here is what any of this has to do with neoliberalism and people's mental health. In this section of the chapter, the ideological and cultural penetration of neoliberalism will be explored. It will be argued that the neoliberal values, adjustments and practices impact negatively on individuals' mental health.

Neoliberalism has two nemeses. The first nemesis is economic planning and the second nemesis is collectivism. However, if one would come before the other as more of an evil, it would surely be collectivism. Hayek has emphasized over and over in both *The Constitution of Liberty* (1960) and *The Road to Serfdom* (1944) that collectivism is the root of all evil. His argument against collectivism starts with the basic assumption that there would never be a (set of) values that will represent the worldview of everyone within a community. Even such an agenda to create a set of ideologies and push people to be fit inside the borders of an ideology is a lost cause. However, this has been practised, Hayek argues. In the Soviet Union, socialism had been the ideology. It has aimed to bring greater good via providing equality and security to its people. Hayek's second and third arguments for his standpoint are the existence of Nazism and Fascism. He argues that Nazism had socialist roots and should not be analysed as one marginally irrational movement. With Nazism and Fascism, both had nation ideals -with socialism, these ideals were equality and security-. It is emphasized over and over by Hayek that all these ideologies with collectivism in its heart had several problems. First of all, they denied the individual as a unit of agency and denied personal desires. Each individual had to conform to the collective ideals with very little area of individual space of

manoeuvre if there were any. Collectivism was believed to be detrimental not only to society but to the economy as well. The reason for this was the default liberal argument, that not every two persons had the same interest and efficiency at the same task. Therefore, everybody should be left to their interests. However, collectivism's undebatable problem is its nature of coercion and that it is against individual liberalism. This was morally wrong in Hayek's (1960) mind since it is coercive to force people to live under pre-given values.

However, neoliberalism had the same mistake as the ideologies it despised. Where Socialism, Nazism and Fascism had been so radical in utilizing collectivism to a massive amount of people coming from wide ranges of cultures, neoliberalism became even more radical in its campaign to disseminate individualism to the globe, through markets, schools, media and every other medium that it can assimilate. This poses a moral dilemma as the way it already stands. Still, this poses a potential danger to individuals in terms of mental well-being.

Eskin and his colleagues (2020) have investigated how individuals coped with cultures with nearly opposite values. It was examined whether there was a link between the dissociation of cultures and increased risks of suicide. What they found was not a simple relationship, but a complex one; not with a single pattern to present. For some collectivist cultures, individualism reduced the risk of suicide; whereas, in some other collectivist cultures, individualism increased the risk of suicide substantially. A similar relationship was observable in the opposite case as well, in which different cultures with different values in addition to encouraging

individualism responded differently to individual collectivism. Another study by Frank and Hou (2017) had a similar finding with immigrants from collectivist cultures, immigrating to individualist cultures -or vice versa-. Authors argue that cultural values have intricate relationships and the effects of these intricacies are not unidimensional. In both studies, researchers report the existence of increased vulnerabilities to suicide and mental disorders in some groups, as well as reduced risks of mental health disorders in others. Here, I would like to propose the crisis of meaning in neoliberalism. The main problem with dictating a value orientation is its potential to create dissociation. Humans are meaning driven social animals. We have schemes to perceive the world, we attribute meanings to life events, our ambitions and goals are fed by our ideals and values. We like to believe that our goals and life events have meaning, that they are somehow coherent with an understanding of our world. However, many of the humane aspects of our beliefs and cultures are; first, isolated and second, became obsolete.

The isolation of our beliefs and cultures is a promise of individualism. A person can believe in anything they want, choose whatever norms and values to cherish. This liberty of knitting life for oneself on one's terms is not a problem as long as it is in a vacuum. However, the problem with our isolated beliefs and values is that they exist in predatory conditions of the neoliberal world.

One may like to believe in mercy and kindness, aim to achieve a life of being a good person. We may like to believe in work ethics, honesty and truthfulness. Our eyes are looking for the existence and absence of these beliefs. Neoliberalism, however,

is a political-economic ideology that has penetrated so deeply in our social systems that the values it cherishes have the power to overwrite the individual values in many human interactions. An individual may possess a variety of values, may prefer to choose honesty and conscience over profit-maximization, over profit, over competition and even over success. But, when there becomes a conflict between the individual values and values that are cherished by neoliberalism; there will be a cost of prioritizing individual values over the market values. Moreover, this cost will be tangible. Its effects will impact the individual; maybe via an opportunity of employment, an opportunity of promotion, an opportunity of avoiding a penalty, an opportunity of avoiding poverty. Maybe Hayek and Friedman, indeed, wished for individuals to be at liberty. At liberty of choosing what they wish to believe, strive for, do for themselves in their lives. However, neoliberalism dictated its values so fiercely that individual values became obsolete (Plesa, 2020; Siromahov, 2017). The growing sense of meaninglessness is visible in the literature under the themes of ontological security, *neonihilism* and existential anxiety.

Meaning-making is a social-cognitive process that is inherent in our social lives (Plesa, 2020). Siromahov (2017) argues that the institutions and social consensus created by neoliberalism are a source for our existential anxiety. It is argued that humans tend to cling to practices, relationships and thoughts that may not necessarily be reasonable but coherent with each other. These mental schemes and the meanings of individuals are formed through the experiences of the social world. If the social-institutional compositions reconcile cohesion, solidarity with predictability and security; then the conditions of existence are considered to grant a sense of security.

This sense of security is named *ontological security* (see Siromahov, 2017) and it is inversely linked to existential anxiety (Neilson, 2015). The link between ontological security and existential anxiety is crucial; therefore, it should be elaborated further. The social conditions that promote ontological security (experiences that validate the meaning of solidarity, unity, social co-operation and security) also seem to buffer existential anxiety. Inversely, the values and conditions tailored by the neoliberal structures (e.g. Social Darwinism, competition, individualism, self-help, over-emphasized responsibilities) inherently paints a world of ontological insecurity and existential anxiety (see Neilson, 2015; Siromahov, 2017).

Tracking the impacts of a political-economic ideology is hard, but not impossible. The penetration of neoliberal values to social institutions and culture is visible -as it has been discussed previously in this chapter- through policies and through our practices that comply with neoliberal values. Additionally, the impact of neoliberalism on individual meaning-making is visible within the continuity of warm ontological security and cold existential dread.

Plesa (2020) argues that humans have a collective response in the face of existential anxiety, precarious conditions of work and tragedies of neoliberalism, leaving the meanings behind. *Neonihilism*, as the writer conceptualizes (Plesa, 2020), is a coping mechanism that we collectively utilize. People are constantly trying to sustain a place and condition that they can survive and exist despite the present social, political and economic conditions. Their efforts on achieving stable and predictable life conditions with social solidarity conflict with the neoliberal values, institutions and

work conditions. This conflict is a reliable source of systematic suffering and, as a result, it is argued that opting out of the meanings has become a widespread response to this suffering and failure to adjust (Plesa, 2020).

What makes neoliberalism a failing human project is its coercive nature. Previously, this coercion was argued to be the product of a collectivist ideology; giving very little space to manoeuvre for its members. This time, coercion is the product of an individualist ideology; giving very little space to manoeuvre to its members.

What could reverse the effects of this meaninglessness, emptiness and existential vacuum? It wouldn't be so mind-blowing to address the core of the problem and propose the removal of the causes of disease in this example. The first problem, as it has been discussed, was the individuals trying to cling to their meanings alone and by themselves under the heavy presence and force of neoliberal market values; because, this is an individualistic ideology and they were responsible for themselves. The second problem was the gigantic reality which was full of everyday examples of why no other meaning would have a place in the distribution of experiences and life conditions. If in a crisis, the market commands you to be efficient and you have values that tell you otherwise in your heart; you need to make a decision, considering what markets can enable you and from what they can deprive you of. To oversimplify the problem: we, in our tiny lives and bodies, are against a whole system that runs the world; and we face this system alone. Therefore, the remedy this thesis would propose is bringing humane back to humanity. What will be the remedies for this

cancerous system of values is social solidarity and the possibility of our values and meanings worth for something again.

This proposal has literature evidence although it is scattered. Some of the studies examined the effect of solidarity on the disastrous life events that make people question the meaning of life, death and existence. The first study examines how three separate groups of people coped with mass shootings. They have found out that social solidarity has a highly significant effect ($p < .001$) on the recovery of the depression and anxiety of these events. Moreover, they have found out that the recovery from the social solidarity is not episodic but it is enduring; meaning that social solidarity did help in recovering people (Hawdon, Räsänen, Oksanen & Ryan, 2012). Ross and Mirowsky (1989) have researched the effects of several coping mechanisms on depression. The study investigates the effects of autonomy, problem-solving, social support and talking on depression. Their analysis shows that the most important impact on a person's recovery and well-being is the person's control on what is going to happen to themselves, whereas the other end of this variable implies that the life of the individual is at the mercy of others and other variables. They find that a person who has good autonomy in his life has higher rates of recovery from depression and is more likely to find solutions to his / her problems. The second important predictor in this research is social support, which is the perception of bond and common understanding with others, knowing that the person will find solidarity and trust. One very interesting study by Brueggemann and Boswell (1998) examine the solidarity of unions that have been previously racially divided and fragmented during the Great Depression. The authors report that as the unions have gained

solidarity; they had a stronger social movement which led to better working conditions, political power, economic stability and improved morale with the workers. Another example from the effect of solidarity and meaning is that of the World War II (WWII) veterans of Finland. It is reported that Finland had considerably lower rates of PTSD after WWII. Hautamäki and Coleman (2001) have found out that the meaning and significance attributed to the war and the social solidarity among soldiers and their community in Finland had enabled strong mental well-being from something as devastating as a war. Lastly, Hyun-Sook and So-rim (2016) conduct a study on the relationship between depression and suicide in older adults in South Korea. They confirm once more that depression does kill, mostly through suicide. However, they find that social solidarity acts as a mediator and breaks the highly significant bond between depression and suicide.

In the last paragraph and throughout the chapter, it was aimed to provide an in-depth look at why neoliberalism is so detrimental to human mental health. Neoliberalism is an ideology that places individualism, competition and freedom at its core. However, as we unravel each of these principles, it becomes visible that neoliberalism is high efficiency and profit-oriented ideology that leaves the human aspect to lesser priorities in the context of humanity. People within neoliberalism are exposed to chronic stress, trying to survive within this socio-economic system and possibly have a fulfilling life. The constant stress manifest itself starting from childhood throughout the individuals' life as a competition, challenging work conditions, insecurity of jobs, poor health conditions, inflated responsibilities and loss of meaning in life. As a result of the prolonged stress caused systematically by

neoliberal values and policies, people are rendered highly vulnerable to mental health disorders, ranging from psychosis to anxiety disorders, depressive disorders to existential crises. It is argued in this chapter that the detrimental effects of neoliberalism can be reversed and the ever-growing damage on the mental health of societies can be recovered via increasing social solidarity and restructuring the economic and social reality in a way that the values and meanings are no longer forced upon people.

In the next chapter, it is aimed to explain how neoliberalism acknowledges the damage it creates. It will be argued that neoliberalism is aware of the aftermath of its policies and practices; moreover, it has shaped the psychological and psychiatric field and the practice to (1) conceal the magnitude and the commonness of the damage, (2) restructure the individual to build compliance to the system and values and (3) profit from the mental disorders via turning its victims into consumers. For these analyses and arguments, Foucauldian concepts of discipline, biopower, biopolitics and episteme will be used.

CHAPTER 5

REBOOTING THE NEOLIBERAL INDIVIDUAL

In the previous chapter, the sources of the detrimental effects of neoliberal values, policies and practices on human mental health. Neoliberalism dictates individualism, competition and responsibility upon the people as its core values; meanwhile transforming the economic and political structures to reify and utilize these values as well as severely punish those who denies or fails to comply. These punishments come in the form of poverty, unemployment, financial bankruptcy and -often- accompanied by a form or a mixture of mental health disorders such as anxiety, depression, substance dependence and psychosis.

At this point, it is interesting to see how and why masses do not organize and revolt against the neoliberal system; but, instead, internalize the values of the system. The works of Michel Foucault presented the world with a set of valuable frameworks and concepts that potentially explains what happens at the backstage of the play. In this chapter, Foucauldian frameworks will be used to read the discourse and practices that are told inside the neoliberal realm. The main argument in this chapter will be that psychological interventions that are aimed to better the mental condition of people with disorders- have an active agenda of (1) concealing the debris caused by neoliberal paradigms, (2) form compliance in people via re-installing the personal

norms as the neoliberal norms (3) creates a profitable market from its unwanted by-products.

5.1 Episteme, Discipline and Biopower

It is a naïve approach to believe that scientific knowledge is an impersonal and objective entity. After all, under a specific condition, water boils at a certain temperature. These conditions should not matter who the scientist was that was holding the thermometer. However, Foucault believes that there is more to every kind of knowledge. He accepts the existence of conscious processes that impact our perspective regarding certain events and phenomena. These may be caused by our personal lives and environments. However, these conscious personal biases are not the only aspect that filters our perceptions. In 1966, Michel Foucault had written *The Order of Things*, in which he explains *episteme*. On the top level, we have ourselves and our thoughts. We try to make up our minds if we were to drink whiskey or beer when we go out on a Saturday evening. After a thought process, we decide on whiskey; because the day after is Sunday anyway, so we don't have to go to work. We made considerations of different scenarios and we made these consciously. However, as we dive down level by level; we can realize how we are sewed into and onto layers and layers of preconditions, assumptions and beliefs. Each one of these preconditions is important in shaping our experiences, influencing our choices and decisions. We are indecisive about whether we should drink whiskey or beer; but we know that if we go out on a Saturday night, we will be having alcohol. Again, as we

think more on this example; we are going to have fun on a Saturday night because the next day is Sunday and Sunday is not a workday. While we made our consideration, we don't consider the days we are working. Or, we do not even consider why we work on our jobs and *not simply kill for food?* Each layer of reality is reinforcing the one it is built upon; while leading to potential realities, interactions and meanings.

Just as it is the case with the nature of knowledge, Foucault was highly interested in the manifestation of power in places we tend not to look for. Power, according to Foucault, is not only a definitive construct that *denies* certain experiences and aspects of life. In his book *History of Sexuality* (1978), Foucault delves into the methods of power and how they are utilized on people for governing them. The example in the book is that of the power of the sovereign in the middle-ages. The sovereign had the power to *deny* living for his subjects. "Off with his head" he might say and his head shall be off. The sovereign could deny his subjects freedom by sending them to prison; or, exile them of their lands to deny them the crops and the protection they used to obtain from their soil. However, Foucault argues that power has another dimension, which is not to deny and diminish certain aspects of life but to define the standards of life. This *fostering* aspect of power is deeply interrelated with the production of knowledge. Because, as it has been explained in the parts where *episteme* was discussed, no piece of knowledge can ever be detached from the power relations that have shaped the existing reality. The reality of existence is a stage of powerplay which shapes the very episteme that in turn will reinforce the existing reality. Foucault (1978), believes that the creation of a discourse and a piece of

knowledge regarding the *how's* and *why's* on an aspect of life is a form of *power*. This created discourse then creates a reality, which in turn will enable a piece of knowledge that will feed the discourse.

The produced discourse and knowledge become a form of *biopower* when it gets through the people, it is internalized by them and it practically enlivens the discourse. It is not necessary for the power figure, or authority, to utilize the power. Individuals *discipline* themselves, internalizing the values, making the proposed rules the *norm*. This is the power that fosters life because it decides on methods and norms of living, hence, *biopower* (see Foucault cited in Senellart & Burchell, 2008; Foucault, 1978).

Foucault (1994), argued that each entity can be traced to the reality it belonged to and that this was not only possible, but also it was *essential*. Any piece of knowledge had a predisposition that decided for its existence and denied the existence -even the consideration- of potential other pieces of knowledge. These preconditions were the *epistemes* that each knowledge had depended on. Of course, psychological knowledge, what we know about ourselves, our sanity and insanity cannot be exempt from these intricate relationships. The first thing in this chapter, therefore, will be a historical journey on how madness and mental disorders were perceived throughout time, and how they were *intervened*. By doing this, it is aimed to show how today's disorders -mainly affective disorders- are classified and intervened.

5.2 Madness and Its History

Madness has been thought to be as old as humanity itself. In his book, *Madness: A History*, Petteri Pietikäinen (2015) shares the findings of his research on the history of madness. He reports his findings with the antique times as old as 3000 BCE, from the records in Mesopotamia. Madness in the Babylonian and Mesopotamian writings was thought to be the wrath of Gods and spirits, often punishing the society or the individual for his wrongdoings. In this sense, Pietikäinen (2015) argues that Judaism and Christianity had a similar approach to that of the antique people as well as the Greeks. In the old times, people believed that it was the Gods' fury upon people; when they refuse to worship, make the Gods angry or denied his rules. Often, they were seen as the will of God setting an example to society. They were looked at and taken lessons from. Their existence was accepted in these ancient cultures and they were taken care of by the people in their families, the neighbourhood and by the local authorities (Pietikäinen, 2015).

It went on and on like this for the mad until the end of the middle ages. They were the residents of streets and cities, along with the poor. Michel Foucault, in his book *Madness and Civilization (1989)*, confirms this analysis. However, his analysis is critical starting from the end of the middle ages and onwards. For all of the history of the mad; Foucault points out the first problem, which is that we never get to listen to the world of the mad from the mad. From the end of the Middle Ages and Renaissance, Foucault argues that a fundamental change happened for the mad in Europe. Leprosy had been fading away from Europe and the leper houses and

neighbourhoods outside the walls of the city had started to be emptied. Foucault argues that as leprosy had faded away from Europe, it had a new contestant as an outcast; which was the mad. Germany, Britain and France had started collecting the mad and send them outside the cities, along with the poor and guilty. They were subject to segregation, however, they were free in their lands, they were treated as a human-beings; moreover, in art and literature, they were even believed to hold divine wisdom.

The breaking point for the mad starts in the mid-1600s when the Hôpital Général (General Hospital) was founded in France. In the newly capitalizing France, the authorities had started to sterilize the society from the functional and unemployable. In this agenda, the residence of the General Hospital became the mad and the poor. Foucault (1989), argues that this is different from the times before since they're now was a derogatory judgement for the poor and the mad; they were not seen immoral like the poor, they were hazardous to the functioning society. They were robbed of their freedom and policed. Still, madness was not a disease, but it was an animality to be tamed.

In the following century, madness was stopped being confined to the poor and the criminal. The conditions of these prisons were realized by the relatives of the mad people and people had complaints and movements against the inhumane conditions that the mad were held. This is the birth of the asylums, according to Foucault (1989). There were no longer bars and chains for the mad and it was not the police, but doctors and nurses who were responsible for the mad. Along with this shift, for the

first time, madness was started to be seen as a disease. This was also the point in which the classification of madness as a disease had taken the political authority and their existence away from the once human. Their brains were now seen as a medical *object*, like a malfunctioning liver or a lung with tuberculosis and its functioning were no longer considered reliable and accountable. Although, they were free from the bars of prison; they were now silent in the doctor's eyes. Their words and desires had been an object of study instead of being the will of a human (see Foucault, 1989; Foucault, 1978).

These changes in the classification of madness and the interventions can be summarized as follows. In ancient times madness was a form of divine disturbance, which had been approached with hesitancy and caution. Towards the end of the middle ages, as the contagious and condemned leprosy had faded; they were exiled to leper zones and houses. Again, they were seen to hold divine wisdom; which was the reason for the marginality of their behaviour and sense of reality. They were exiled, but they held their humanity in their zones, free to wander and be themselves. In a time where political governance became authoritarian and capitalism growing in France, the unemployable poor, criminals and the mad had been collected and imprisoned. Their liberty was taken away and they were policed regularly, forced to learn and comply with the norms and got rehabilitated. Lastly, as they have started being hosted away from the criminal and the poor; the first madhouses (asylums) were founded. There, it was the physicians who took care of the mad; and studied. The madness became a subject of modern medicine, accepted as a disease and it was sought out to be cured.

5.3 19th and 20th Century: Psychiatry and Before and After Neoliberalism

Foucault's analysis is extremely essential to start laying out the context and start the debate regarding mental health disorders. It is yet a mystery how the purpose and existence of psychiatric and psychological interventions are not questioned; their findings being accepted as rigid and unchanging discoveries. The path to understanding this requires a long historical analysis, which Foucault's work provides. *The epistemes* of the renaissance era, classical era and modern era starts being visible in the science of the human psyche. The existence of supernatural, the divine, morality and dignity have been traded in and out through time; as the borders of God, material, political and economic are drawn again and again.

When psychiatry took its place at the stage around the 19th century, mental *illnesses* had started being seen as biological problems, often rooted in the brain, that deny the individual the reality that is shared by the other members of the community. People were considered *ill* when their reality was too alien to that of the *real* world. However, marginal experiences, feelings often were not in the spectrum of mental illnesses (Wallace & Gach, 2008). Diseases such as *schizophrenia* or *epilepsy* were sought for therapies. Interventions involved in intrusive measures, such as drilling a hole in the skull or taking a part of the brain as well as medications. However, in terms of disorders that involve emotions and mood; it was argued that *trauma* and *melancholia* were the umbrella diagnoses. Authors (Wallace & Gach, 2008), argue that these illnesses were not considered to have biological causes, unlike those of *epilepsy* or *schizophrenia*. The social roots of melancholia and trauma were

acknowledged. Homesick soldiers were diagnosed with *melancholia*, or they might have had war *trauma*. In these cases, the intervention was directed at the root of the problem (see Pichot et. al., 1985; Wallace & Gach, 2008). A soldier who had been homesick was sent home. The people with grief would share the weight of their hearts with the people around them. The people with trauma were advised to seek relief and comfort.

Wallace and Gach (2008) argue that it started to become visible that psychiatry was indeed open to being political. During the 1960s, the scope of depression had been broader. Adjustment disorder, under the name of *Dysphoria*, became a classification for people having significant discontent with their lives. Women all around the Europe and United States have been the subject of this diagnosis. What is interesting is that the initiation of this diagnosis in the psychiatric field corresponds with the active years of second-wave feminism and the movements of women all around the world, being discontent with their lives and conditions. Similarly, during the 1970s, anxiety and stress had become popular psychiatric diagnoses (Wallace & Gach, 2008); a decade in which the world had been struck once more with economic crises and mass unemployment.

Until the mid-1970s the psychiatric diagnostic criteria were stricter; diagnosing much fewer people with mental disorders. The medication that has been used since the last decade of the 19th century until the mid-20th century has been highly experimental. Opium was given to kids who have been misbehaving, coke was a common cure for anxiety symptoms, cannabis was a choice of tranquillizer in

Europe. Along with coke and opium, many other chemical substances have been abandoned from use and prescriptions due to the addictive effects (see, Shorter, 2009). These drugs were distributed to the market with little to no clinical trials; therefore, there was very thin scientific and psychiatric research on their effects and impacts. In 1944, in the search for a more potent anti-histamine -a drug category for allergic reactions- the French drug firm Rhône-Poulenc discovered a molecule called promethazine. This discovery was important because they found out that their drug was highly psycho-active and had an impact on the serotonin-active neurons. On this drug race, Rosche, Pfizer and other companies had synthesized their molecules and patented them. With this race on the patenting and grabbing a slice on this new market, drug companies sponsored the psychiatric studies and within 10-15 years the *chemical imbalance theory* became the mainstream theory regarding mood disorders (Shorter, 2009).

The Chemical Imbalance Theory argues that the neurotransmitter compositions in the brain correlate the emotion and affectivity changes. There is a range of normal flow to the neurotransmitters and when the flow and fluctuations of these neurotransmitters deviate from the clinical norms, they lead to clinically significant mood shifts. This theory is the basis of the psychiatric approaches to mood disorders; such as depression and anxiety (Leo & Lacasse, 2008).

5.4 Redefining the Deviance

At this point, we should be able to trace how human experience is medicalized and marginalized *step by step*. A phenomenon, mental disorder, that was once considered wisdom and divine has (d)evolved to a mechanical problem of the body machine. However, the aim here is never to glorify mental disorders. Our understanding of mental disorders, our ways of describing them and the consequences we attribute to them determine where we locate mental disorders, how we deal with them and the meaning we make sense about them. In a time where Gods were frequent intervenors of our daily lives, people were punished for their deeds and became mentally disturbed. They carried the engraved punishment of the Gods inside their souls. In such a world, mistreating a soul that carries the mark of the God's punishment was a risk too high to take. In this regard, neither the true origin of madness nor the existence of God was of great importance; as *the mad* were not denied their dignity. In the light of Foucault's historical analyses (see Foucault, year; Foucault, year) we see during the times of Renaissance when God left his place to enlightenment, the *episteme* of the mad had to change. God left his place to reason and morality; societies and political environments changed and the mad defied reason and morality. They had to be checked and policed. Not so long after, the mad were considered to be diseased. From there and onwards; psychiatry had the burden to monitor deviance.

Neoliberalism is a challenging system for humans and their societies. As it has been discussed thoroughly in the previous chapter, it creates a social, economic and

political setting that derogates humane values and has absolutely no toleration or mercy for human lives if profit-maximization is at stake. The inter-disciplinary communication of relevant theories has been provided, alongside literature evidence, to show how neoliberalism *systematically* breaks people down. Here, Foucault's episteme will help us unravel the question of why this link between neoliberalism and mental disorders are relatively invisible.

The classification of deviance was narrow once (fewer behavioural & psychological disorders, see Pichet et. al., 1985; Wallace & Gach, 2008) and the *normal* human experience was wide (see Foucault, 198) in variety. However, with the rise of modern psychiatry, the range of the human experience got narrower and narrower; whereas the spectrum of deviance had enjoyed a world full of non-conforming individuals and experiences. The discontent from life became *dysphoria*, sadness became *melancholia* (see Pichet et. al., 1985, Wallace & Gach, 2008). In doing this, during the 1970s and 1980s, the pharmaceutical industry, the capitalist class and the political authorities had enjoyed a victory via their trustworthy *allies*, *psychology* and *psychiatry*. Here I will present several cases that redefined the borders of ideal, normal and deviant.

Firstly, it is humanitarian psychology's description of human needs and conditions that conforms with the *episteme*. Carl Rogers (1961), one of the founding pillars of humanistic psychology, theorizes human needs and the sources of fulfilment. He argues that individuals have the innate need to achieve their potential and realize their functionality. This fulfilment, or *self-actualization* in the relevant term, consists

of achieving our emotional, cognitive and relational potential. Still, the requirement for self-actualization is having our *individual* ideals congruent with *who we are*. In humanistic psychology terms, this is the congruence between the *actual self* and the *ideal self* (Rogers, 1961). Two definitions here will make things easier for the following analysis. Firstly, a life of fulfilment is when we have our best versions as our ideal selves. Secondly, a functional self is when we achieve our ideal selves. Hence, a dysfunctional self is a self that is at incongruence with its ideals.

Right here, we should be able to see how the ideological values of humanistic psychology and neoliberalism complement each other, both taking the sacred *individual for granted*. Moreover, we see how the emphasis on being the best versions of ourselves and failing to do so is being dysfunctional may correspond the competitiveness and social evolutionism. Still, it is possible that connecting these dots might all this might be a long shot. However, the literature has reports saying that it is not that of a long shot.

In a world where the overarching mode of production is capitalism, the evidence from the alternative systems adds great value to the quality of the criticisms toward the status quo. Tomas Matza (2012), in this regard, examines the cultural, institutional and moral transformation of post-socialist Russia. He explains that psychological education and psychotherapy acts as a *trojan horse* in Russian society. This is achieved on certain fronts. One of them is the self-work trajectory that has been put in practice under Putin's reign that prioritizes *self-responsibility* that aligns with the market requisites (explained in detail in the previous chapter). *The*

ReGeneration camps, although they are extremely costly, are covered by the Russian government. In these camps, a comprehensive program is offered to the emerging Russian youth that presents interventions to improve self-knowledge, self-management and skill training to enable individuals on a path of self-improvement. Author (Matza, 2012) argues that psychological education, therapies and body of literature are used as an instrument to utilize power and governmentality over the Russian society and is actively guiding it.

The case of post-socialist Russia is very valuable in understanding how neoliberal values are disseminated by the political actors, via *psychology*, through the ranks of subjects. Individualism, self-help, freedom, competition and responsibility are the values that are coercively fed to individuals in societies that embraced neoliberal policies and practices. These individuals, in return, reinforce the *reality* that is presented via adapting, complying with its *physics* and striving to meet its criteria.

Defining the standards and the norms of the *neoliberal* individual is not the only agenda that psychology is instrumentalised for. The range of abnormal behaviour is encompassed within the neoliberal norms. Davies (2017) argue that the criteria of DSM-III, DSM-IV and DSM-V (Diagnostic and Statistical Manual of Mental Disorders) regarding psychological disorders have an emphasis on personal, emotional functioning as well as occupational functioning. However, it is reported by the practitioners that in practice; occupational functioning becomes the tangible measure of emotional distress. At the end of the day, the existing frameworks and

ideologies tend to focus on occupational productivity, a *tendency* to encourage achieving full potential and validating ourselves with the ideal values.

The definitions of a self-actualized person, a functional/dysfunctional person and a psychological disorder have been linked with neoliberal values and practices. These meanings are, although very visible now, a form of *biopower*. In our existing episteme, the dominant agencies and actors have the power to create knowledge via sponsorships (Davidoff et al., 2001), to define the norms of existence, fulfilment and functioning. This biopower is used on the subjects to form compliance and belief to the system. However, the power is utilized not via authorities and actors; it is utilized to subjects by the subjects themselves. They *discipline* themselves to fit inside the norms and values that have been *normalized* via bodies of scientific work, practices and experiences in their everyday life.

Still, the essential point to this analysis begins for those who refuses or fails to *discipline* themselves to comply with those values. It may also be the case that although some individuals tried, the experiences were too harsh in the cases of failure and they have been broken mentally. This is where the second line of neoliberalism's defence begins. I would like to propose here that, if a system systematically breaks people down and let them to the streets -or the society-; the streets would be full of victims of that system. Here, we should realize that what makes this scenario dangerous is not that the number of people on the street, but their visibility. The real threat to the system would not be one-hundred and fifty people in the street walking, but it would be one-hundred and fifty people walking *together*.

Psychological interventions make, in this regard, sure the victims do not realize they are victims and there are many of them outside. Once entered the room, the victims become the person to blame. Moreover, once they entered the room, each person becomes *a* person inside a room, behind a closed door, inside four walls.

The interventions for anxiety disorders and depression often involve psychiatric drug assistance along with psychotherapy. There are several implications for these therapies. First of all, both of these therapies are applied to the individual. They aim to fix an individual's chemistry or cognitions, which is problematic in the sense that it denies an outside source for the trouble. It is ironic how the practitioners and the disciplines tend to overlook the fact that the person who visits their clinic was once a healthy person and something happened.

However, at this stage it is important to remember that the psychiatric theory to explain mood disorders argues that the reason for mood disorders are due to the imbalance of the neurotransmitters; therefore, psychiatry's solution for a once-working-biological-system is to prescribe mood regulators and leave the patient back to the system which broke the individual in the first place. The case of psychotherapy is not conflicting with this pattern as well.

Hazzlett-Stevens (2008) examines the prevalence rates of anxiety disorders and depressive disorders, as well as the applied therapies and their effectiveness rate. Her report from multiple meta-analyses shows, for anxiety disorders and depressive disorders, the most successful psychotherapy model is that of an integrative Cognitive-Behavioural Therapy (CBT). This model consists of several methods.

Often firstly, the patient is started on the anti-depressant or anti-anxiety group drug, to regulate the mood for cognitive restructuring and behaviour modification to be enabled and most efficient. Another method is called systematic desensitization, a process in which the stimuli *-or the stressor-* that distresses an individual are presented in a controlled environment to help the patient to learn and cope with the cognitive and emotional aspects of the perceived outcomes of the stimuli. A third method is a cognitive therapy to achieve *cognitive restructuring*. Author (Hazzlett-Stevens, 2008), reports that this method aims to help the patient gain insight into the individual cognitions *-schemes, beliefs and values-* that leads to conflicting outcomes and dysfunction. Lastly, the patient is taught behavioural techniques that will help him/her to cope with the stress when it is present.

The abusive prescription of psychotropic medications targets a wide spectrum of victims. Psychiatry offers “magic pills” of pharmaceutical companies as the remedy. Aside from mood disorders, psychotropic drugs are prescribed for alcohol and drug abuse cases (Mehdi, 2012; Amato et. al., 2010). However, benzodiazepines are far from being a “magic” remedy. Benzodiazepine is a class of drug that has a very sensitive balance in terms of dosage and duration of use, which has a considerable rate of error either on the side of the patient and/or the doctors (Ashton, 2005). In the cases that benzodiazepines are misused and abused, this class of drugs is addictive and may lead to harsh withdrawal processes (Owen & Tyrer, 2012; Schmitz, 2016; Huff, 2020). Moreover, it is reported that the pharmaceutical companies’ addictive remedy is more likely to be abused by people who have a history of drug abuse, people who show depressive symptoms and people who had some form of

psychiatric diagnose (Schmidt et. al., 2018). This is one of the cases where psychiatry enables a previously absent market for the pharmaceutical companies, meanwhile abusing the mental, physical and social conditions of targeted demographics.

Another case against the reformed health *industry* under neoliberal terms is the need for, growth of and the misuse of psychostimulants drugs, commonly sold under the brand names of Ritalin and Adderall. This class of psychiatric drugs are mainly used to treat Attention-Deficit/Hyperactivity Disorder (ADHD), via stimulating the central nervous system (Sherzada, 2012). The spectrum of the audience for these psychostimulants is illusive. The chemical and response characteristics of Ritalin and Concerta (most commonly prescribed psychostimulants) is similar to that of cocaine and amphetamines, which makes them highly prone to abuse for recreational and performance-enhancing purposes (Svetlov et. al., 2008; Clemow, 2015). If you type the words “Ritalin” and “use” to academic search engines, the literature is quite rich in terms of articles that report “*misuses of Ritalin*” by elementary school, undergraduate and graduate students abusing psychostimulants to satisfy the performance expectations of their parents, schools and universities (see Marshall, 2018; Svetlov et. al., 2008; Clemow & Walker, 2014; DuPont et. al., 2008; White et. al., 2006; Barrett et. al., 2005).

Aside from its use as a fuel to enhance performance, the diagnosis of ADHD and the drugs to treat has politically controversial implications. Firstly, the children who are born to an era that is marked by neoliberal culture, technology and ideology will necessarily differ from the previous era. Childhood and parenting within the

neoliberal context is an important body of discussion of its own. However, children being handed to psychiatrists to fit within the standards of the parents and teachers is a decision that has political implications. While debates go on over the rightful authority on drug decisions, normality of child behaviour, benefits and adverse effects of the drug (Accardo & Blendis, 2001; West & McVeigh, 2001; Fine, 2001; Frazetto et. al., 2007), children's autonomy is often disregarded in terms of receiving a stimulant drug to alter the neurochemistry of their brain (Rafalovich, 2001; O'Leary, 1993).

The existing potential of the abuse of psychological diagnoses and treatments is not an accident. As it has been discussed thoroughly in this chapter, what enables the marginalization of human experiences is the authority of psychological disciplines to define the standards of the normal. Neoliberalism encourages the scientific methods and perspectives to stretch and fit the human experience to a *continuum*, which results in a collective disregard for the understanding of human experiences being *categorically* different (Olivier, 2020).

The model that is reported to work best tells an important story about the nature of the alliance of psychology and neoliberalism. Individuals who are broken systematically and who fail to adjust -sometimes despite the transformation programs- are considered to be abnormal and they are presented with neuro-biological agents. Moreover, in addition to the neuro-biological agents that suppress their humane responses to the outputs of the neoliberal system, individuals are presented with psychotherapy to help them be integrated back into the system.

5.5 Pharmaceutical companies and the market

Although the narrative changes, the motives of capitalism and neoliberal ideology penetrates every industry successfully. When we evaluate this knowledge-power-market relationship the most important actor is proposed to be the pharmaceutical companies since they are the *gatekeepers* to science, practice, market and policies.

Pharmaceutical companies are massive shareholders of biomedical research. The share of investments made by the pharmaceutical industry is on a steady increase (Moses & Martin, 2001; Beckelman et. al., 2003) and the amount of investments made by the pharmaceutical companies and their associates consists nearly %60 to 90% per cent of psychiatric research, 47% of which has at least one author that is in direct financial conflict of interest with the industry (see Perlis et. al., 2005; Healy & Thase, 2003).

This phenomenon of industry's funding is, however, far from being a neutral impact in terms of the results of the studies. Systematic reviews manifest that psychiatric research that is funded by the industry consistently provide favourable results *for* the industry, whereas the studies that are not funded by the industry has significantly diverse outcomes (see Moncrieff, 2003; Baker et. al., 2003; Montgomery et. al., 2004; Procyshyn et. al., 2004; Perlis et. al., 2005; Kelly et.al., 2006; Heres et. al., 2006).

Although the literature evidence has been provided so far and the arguments have been made, it is beneficial to phrase the relevant findings in a single sentence: The

use of anti-depressants has been on the rise in the neoliberal era (see Chapter 4) and, similarly, the pharmaceutical industry's funding on the psychiatric research has been on the rise (see Figure, 3); whereas psychotherapy as a means of treatment has been on a steady decline for the people diagnosed with psychological disorders (Olfson & Marcus, 2009).

Moreover, pharmaceutical companies are actively rooting to widen their prescription base and increase the number of prescriptions. It is reported from various resources that the annual marketing and promotional budget of pharmaceutical companies exceed the budget of R&D (Busfield, 2010). Doctors are the major prescribers of medicine and the industry's interest in doctors are well-known. Sale representatives are sent out to doctors' offices and provide the doctors with promotional materials, take the doctors to luxury dinners, sponsor the medical conference expenses for the doctors, all to ease their hand in terms of the prescriptions even though the marketed drug is in the medical expertise of the doctors or not (Beder et. al., 2004; Busfield 2010). Indeed, it is reported that anti-depressants are often overestimated in terms of their usefulness and are overprescribed as a part of the arching trend of overmedicalisation (Spence, 2013; Braithwaite, 2014).

In addition to the influences on the research, the practitioners and the consumers, the pharmaceutical industry pour hundreds of million dollars in lobbying. It is reported that the drug lobby spends around \$100 million annually to propose regulations that will be profitable for the industry (Singer, 2007). The financial ties of the industry go further deep in the governmental institutions. It is reported that in the 92% of drug

approval and clearance meetings, there is at least one member who has a financial conflict of interest with the pharmaceutical companies (Beder et. al., 2004).

This appetite for investments, indeed, pays back in revenues. Drugs that are “scientifically” proven to be beneficial are prescribed at very high rates (see Figure 3). These drugs, in return, bring flattering success to the companies’ profile and brings significant revenues for the shareholders and the company. Zoloft (Sertraline), the brand name for Sertraline molecule, brought \$2 billion in revenue for Pfizer in 2005, in the year which the company’s total revenue was \$50 billion (Smith,2006).

Palmer’s report (2002) argues that in the decade between 1991 and 2001, global sales of antidepressants grew ten-fold to over \$11 billion, leading the companies’ portfolio as the most profitable drug category. Celexa (Citalopram), for example, accounted for a dollar-82-cents increase a share to its shareholders (Palmer, 2002). I would like to summarize these facts as follows. Pharmaceutical companies fund studies that favour the use of their drugs. Later, these drugs bring large sums to their shareholders and the company. Therefore, the pain, anxiety and suffering extracted from inequality, unemployment, uncanny work conditions and the culture associated with the neoliberal ideology are transformed into profit that enriches the already rich and solidifies the unjust status quo.

In this chapter, the pressing questions of how neoliberalism sustains itself and its values maintain its legitimacy among people are aimed to answer. Neoliberalism is a system that is inherently unsuitable for human mental health. It is argued that the

Drug Name	Rank among top 200 drugs	No. of prescriptions
Sertraline	# 12	37,157,934
Escitalopram	# 19	27,510,959
Fluoxetine	# 20	27,110,302
Bupropion	# 22	25,722,873
Trazodone	# 25	23,934,214
Duloxetine	# 26	23,821,966
Citalopram	# 30	21,546,700
Venlafaxine	# 40	17,713,653
Paroxetine	# 78	9,783,756
Amitriptyline	# 94	8,178,156

Figure 5.1. Number of prescriptions and the rank of ten most prescribed anti-depressants among the most prescribed two-hundred drugs in 2019 (ClinCalc DrugStats Database, 2021).

debris it leaves is at a considerable amount; however, neoliberalism's parasitic relationship with the psychological sciences has allowed it to conceal the damage it leaves behind and reinforce the strength of its values on the individuals who have lower compliance. To analyse this parasitic relationship, first, the history of the *abnormal* human psyche was examined through times that date back before neoliberalism, liberalism all the way to antiquity. Madness was aimed to be examined using Foucault's frameworks of *episteme* and *discipline* to see the power relationship among the scientific knowledge, socio-economic context of cultures and subjects. Based on these analyses, it can be argued that madness -previously- had been a construct that held a humane status with dignity. However, as modern psychiatry emerges and it was started being seen as a disease, it had a separate agenda of making sense of the deviance. During the late 19th and throughout the 20th century, it had created new classifications to marginalize human experiences and *discipline*

them back to normal. The pharmaceutical industry is perhaps the most important link in this fruitful relationship between the outcomes of this political-economic ideology (neoliberalism) and the authority on human experiences (psychological disciplines). The role and place of the pharmaceutical industry in this power network is multi-directional. Firstly, the pharmaceutical companies are economically powerful actors that enable bodies of knowledge moulded by the status quo that they benefit from. They “pay the bills” of the researchers and make this reality possible. Secondly, they create an important prescriber base and they aim to keep them happy with various incentives. Thirdly, they pour large sums of money into lobbying activities that aim to clear out potential legal bumps on their path. In this sense, pharmaceutical companies are immensely powerful actors that can shape the reality of human experience, political and institutional systems and wealth distribution dramatically in a manner that will make the poor poorer, while the rich gets richer. In the conclusion of this thesis, it will be proposed that a radical change is necessary to accommodate tranquillity and comfort in the psychology of the masses.

CHAPTER 6

CONCLUSION

The debates surrounding the crises of neoliberalism have been around for a while. It has been argued previously that neoliberal political-economic practices and ideology create externalities for the sake of creating efficiency and profit (see Kopf et. Al., 2013; Harvey, 2005). In this thesis, it has been argued that neoliberalism is detrimental to human mental health. This detrimental effect is due to its coercive nature and the values it cherishes.

In the course of understanding this misfit between neoliberalism and human psychology, first, the ideological premises and the values cherished by the system has been discussed. Neoliberalism is a political-economic ideology that has individualism and freedom at its core. The only moral imperative in this ideology is individual freedom, which can only be achieved by maximizing the freedom of the markets and maximizing the competition. However, neoliberalism also encourages a survival-of-the-fittest mode of socio-economic existence. These values and practices set an environment of constant stress for people; especially, for those who find themselves in the non-advantaged classes. The impact of constant stress leads to an epidemic of anxiety disorders in the public mental health, and/or with unhealthy coping mechanisms such as alcohol and drug abuse. Moreover, neoliberalism has a fierce way to deny people meaning for their life and existence. The literature shows

that the epidemic is not only an anxious epidemic but a depressive one as well. The prevalence rates of existential crisis and depressive disorders have increased significantly in neoliberal times (see Twenge, 2000; Twenge, 2014; ClinCalc DrugStats Database, 2021) and these findings correlate with the common outcomes of neoliberalism, such as unemployment and poverty.

Despite the pressing evidence in the literature, the link between the tragic outcomes of neoliberal policies and mental disorders have been rather absent in public understanding. Of course, this invisibility of the debris is not a coincidence since neoliberalism and psychological disciplines have a parasitic relationship in which psychology and psychiatry carry out the definition of the ideal neoliberal individual as the classification of the functional individual. This problem of correspondence is not a doing of neoliberalism per se, but it is the part of a larger process of natural occurrence of which Foucault names as the episteme. The preconditions of a long period of time have created a whole set of beliefs, practices and perspectives that are so grounded in our society, science and memories that any piece of knowledge gravitates toward the episteme of the era. What happened with psychology and psychiatry is that they have been grown and bred under the episteme of the capitalist mode of production in the western world that embraces individualism and co-evolved with the political-economic ideology of its time.

The co-existence of neoliberal psychology and psychological neoliberalism has a grip on the people that is hard to escape without compliance to the system. To propose a solution, we should carefully and correctly acknowledge the problems. If

we were to address the problem within psychiatry or psychology; we would be mistaken. The problem with psychological disciplines is that they are incomplete and often apolitical in identifying the problem. However, even if the problem is identified correctly; the unit of analysis and the scope of interventions often involves people in small numbers, either as individuals or as little groups. The enduring success is a problem even if the discipline somehow manages to find better ways to make people better. As long as people go back to the environments that they have been broken in the first time, the potency of the therapy would become in jeopardy.

The main problem, therefore, is the embeddedness of neoliberalism in the social and economic life with everything it stands for. People need to bond with each other and have solidarity among themselves. This bonding and solidarity environment is hard to achieve when the existing environment encourages competition among each other; which can be considered as the exact opposite in most of the scenarios. Another problem in this regard is that people have neither economic security nor stability that will redeem the factor of constant stress. People should be able to stop worrying about the food that is going to be on their plate in the evening, or about the cost of the incoming dental appointment.

Psychology and psychiatry play a crucial role in the final manoeuvre of responses and efforts in the face of the roughest conditions of neoliberalism. When people deviate from neoliberal norms, psychological discipline and practices let them know that there is a proper way of living and being. When people fail to fit in, psychological practices present interventions to put people in line. When people

break down, psychiatry presents the theories of why they are out of balance and presents them with the pills that turn their voltage down.

Integrating people back into the system is a fundamental role of psychological interventions and knowledge produced by the psychological disciplines. However, the dynamics that emerged in the neoliberal era paints a *cruel* picture. The pharmaceutical industry claims an indisputable dominion over people's mental health. The industry funds studies that marginalize poverty, sadness, political outcast, performance worry and non-compliance. Moreover, pharmaceutical companies push for regulations that necessitate drug use (see Beder et. al., 2004; Singer, 2007). When it is not a necessity by regulation, they influence doctors to take the initiatives to prescribe their product. As a result of these highly intricate and complex dynamics, the capitalist class strengthens its dominion over the exploitation of the mental health of the poor, women, children, outcasts and the unsuccessful. It is for this reason the picture becomes *cruel*.

The primary research question of this thesis was whether neoliberalism corrupts psychological discipline and its practices to exploit its authority on concealing the impact of negative externalities, creates a profitable market to reiterate the economic classes and disseminate the neoliberal ideology and values. Indeed, it is expressed thoroughly that psychological disciplines conceal the damage caused by neoliberal structures, rename them and profit from them. At this point, maybe the most important question to ask is: why does visibility of power and suffering matter? It is important, because the weight of this question revolves around the sustainability

problem of neoliberalism and its social, economic and political structures. Neoliberalism blames people for their suffering. Neoliberalism claims the authenticity of each and every suffering by claiming that every life is different and unique in its own terms. Neoliberalism addresses, re-addresses and conceals human suffering, again, in order to reinforce the existing class structures and its ideology. However, it is discussed thoroughly in this thesis that, a significant amount of distress, anxiety and disorders is not authentic *at all*. In the simplest terms: *we suffer together, similarly and unfairly*. However, it is exactly this realization that neoliberal ideology is trying to conceal. Because, when the suffering is addressed and named correctly, meaningful action will be possible. Foucault (2008) defines the core characteristics to differentiate traditional power and biopower as visibility. When the party to blame the suffering does not correspond with the reality, the chances for the change become an illusion.

In this sense, distress caused by unemployment, financial instability, social isolation, competition is reduced to depression and anxiety disorders. It is reduced to an imbalance in chemistry. It is reduced to a faulty mindset. It is reduced to genetic disposition. Additionally, when individuals try to relieve their distress with pills and cognitive treatments, the narrative of neoliberalism is verified. The existing class structures remain untouched. The existing economic system is reinforced. Ideas and the culture promoted by neoliberalism are rehearsed. Here, it should be acknowledged that psychology and psychiatry are the vessels of this power dynamic. In this sense, pharmaceutical companies have acted as monopolies that dominated the funding market (of the academy). The pharma industry has influenced the

conditions of their own market, the information and the culture that their products would flourish. In this sense, the authority of human experience is subjected to neoliberal market forces via psychological disciplines by pharmaceutical companies and the neoliberal epistémé. This commodification of mental health and human life strengthened the capitalist class while condemning the poor to misery under psychological labels. Hence, psychological interventions acted as the invisible hitman (see, the title of the thesis) of neoliberalism and the capitalist classes.

To conclude this conclusion chapter and the thesis, it should be emphasized once more that a system that has efficiency and profit as its priority will reach a state of economic efficiency and the literature evidence shows that efficiency and profit-maximization do not necessarily align with human welfare. Once more, the ship will go where its nose leads but not the sides. It is a long and challenging road, being a human in an inhumane system; but, where there are people, there is always hope for a brighter day.

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