Interview with Dr Bruce Cohen, editor of the 'Routledge International Handbook of Critical Mental Health'

Dennis Relojo

Editor-in-Chief

Correspondence: editor@pjp.psychreg.org

Bringing together the latest theoretical work and empirical case studies from the UK, US, Europe, Australia, New Zealand, and Canada, the *Routledge International Handbook of Critical Mental Health* is considered to be the most comprehensive collection to date with which researchers and practitioners within the social and psychological sciences can systematically problematise the practices, priorities and knowledge base of the Western system of mental health. I recently interviewed the editor, Bruce Cohen, to find out more about this volume.

What initially inspired you to put together this collection?

As I outline in the preface of the book, it was sitting in sociology of mental health sessions at various conferences around the world and getting increasingly frustrated by the general lack of critical engagement. To give you but one example: I recently witnessed a presentation based on a quantitative mental health survey which suggested that young people in single parent families were more likely to suffer mental illness than those with two parents, likewise those growing up in black families – rather than mixed race or white families – were also more prone to growing up with a mental disorder. On the basis of these findings, the researcher concluded that professionals need to specifically target black, single-parent families for early mental health interventions. There was no consideration of the dubious measurement tool used to produce these results (namely telephone interviews with parents using a highly unreliable DSM rating scale), nor the long history of racism within the mental health system which has produced many similar ideas of fundamental 'deficits' within such communities, or indeed recognition of the general Eurocentric nature of groups of professionals who have previously targeted and subjectively labelled such groups as prone to mental illness and in need of treatment.

Over time, sociological research in the area has become increasingly conservative and non-theoretical, so I should really not be surprised that I have been sitting through more and more of these presentations. The greater concern though, is that the younger generations of researcher coming through now do not even *know* that there *are* critical debates to be engaged with, let alone how vital they are to reflect upon in producing considered knowledge on mental health and illness. That is the reason I decided that such a book was necessary – as a one-stop resource which extensively surveys different critical approaches and theories within the area, and hopefully gets these young scholars interested in finding out more.

What does it mean to be 'critical' in this case then? Why is it still important to engage with such ideas when thinking about mental health and illness?

In its broadest sense, being 'critical' here means challenging the common sense, taken-for-granted view of what mental illness is, what the mental health system does, and the purpose of different groups of mental health professionals within that system. So, each of the 36 authors in the book demonstrates a critical scepticism in engaging with their topic or theoretical approach as informed by the evidence (or lack of it in many cases).

The reason why it remains important to engage with such ideas is because the 'science' of mental illness is as contested as it was fifty years ago. For example: the causation for any mental illness remains highly contested; psychiatrists and other mental health experts cannot yet agree with any preciseness on the type of mental disease a person has, or indeed whether they are mentally ill or not; no treatment (drugs, ECT, or therapy) has been proved to work on specific symptoms of a mental illness, or as an ultimate 'cure' for a mental illness; and future cases of mental illness cannot be accurately predicted by mental health experts. These issues are reviewed in the book – a key question which is considered by many of the writers is why we have witnessed a recent expansion in the number of diagnoses, mental health experts, and forms of treatment available despite the problems with psychiatry's own knowledge base. Because such crucial questions remain, I believe that health, social and psychological scientists have a duty to the public to thinking critically in this area.

So would you agree that the book is generally taking an antipsychiatry position here?

No I definitely would not! Antipsychiatry is just one theoretical position out of a total 12 different critical perspectives which are outlined in the theory section of the book; these chapters range from updates of labelling and social constructionist positions through to critical realism, queer theory, critical race theory, critical psychiatry, and mad studies. The pigeonholing of anything which critically engages with the area of mental health as 'antipsychiatry' has been of huge detriment to progressing critical thinking in this area. And, I should add, also this does no service to understanding the tenets of the antipsychiatry position itself (something which Bonnie Burstow does a wonderful job of correcting in her chapter on the subject in the book).

I should add that something that I am rather proud of in bringing together the 30 chapters in this collection is that the authors do not share the same point of view or positionality on the subject: while some of us are radical scholars who argue for the abolition of the mental health system, many others prefer to be considered as pragmatists who see the potential for a socially-just mental health system in the future. This is probably less of a surprise when one considers the diversity of backgrounds brought together in the volume: almost half the writers are former or current mental health professionals, a similar number are scholars based in sociology, social work, or a related area, while the remainder are scholars from a variety of other disciplines including cultural studies, education sciences, anthropology, philosophy, and development studies.

Apart from the theory section you have just mentioned, I notice the rest of the book applies these ideas to topics such as medicalisation, the politics of diagnosis, and talk therapy. What specific chapters do you think would appear to the readership of *Psychreg Journal of Psychology?*

Well, taking a guess, I would say Gil Eyal's chapter on 'Autism looping' will appeal to many – that's a very interesting historical analysis of the reasons for the expansion of the autism diagnosis among children previously institutionalised with a variety of 'learning difficulties'. Owen Whooley's chapter on the DSM and what he calls 'the spectre of ignorance' among the psychiatric profession is a really fascinating discussion of the production of the third and fifth editions of the manual, even for those who might be new to the whole DSM saga. I would also recommend Emma Tseris' chapter on trauma therapy and feminist theory – the chapter provides a strong cautionary tale on the dangers of what might appear at first glance to be a completely positive and benign set of practices. Lastly, I am a big fan of China Mills' work on global 'psychiatrisation': her chapter on psychopolitics and coloniality of the Western mental health system should be essential reading for anyone who thinks the expansion of mental health services to the rest of the world is unproblematic.