

Making mental health count: quantifying and standardising mental distress

Advanced Studies Seminar

May 8th, 10:30-5pm, St Catherine's University of Oxford

One day, says Ian Hacking, 'we will be able to count up all the mad people in the world, suitably grouped into categories designed for ease of classification by doctors' (1982: 294).

Quantification is central both to individual mental health diagnosis (number of symptoms) and to mental health at population level (number of people with symptoms), meaning numbers are key to the construction of mental health as global. The quantification of mental distress is compelling and has been successfully used to get governments around the world to take mental health seriously. Prevalence rates and burden of disease metrics have been crucial to the inclusion of mental health in the UN Sustainable Development Goals (SDGs), and to the growing influence of the Movement for Global Mental Health (Mills, 2018).

Yet as metrics circulate globally so do their critiques, challenging both their accuracy and underlying epistemologies (Brhlikova et al., 2011; UN Human Rights Council 2017). Epistemologically, mental health metrics, closely tied to Evidence-Based Medicine, are made possible by assumptions of universalism, rationalism, and objectivity, and practices of abstraction, standardisation, commensuration and reduction. These numerical accounts risk overlooking the realities of lived experience and care practices that are important to people's wellbeing but not easily measured (Cooper, 2015); may categorise affective experiences in ways very different from how they are actually experienced (Merry, 2016); and potentially translate distress into psychiatric classifications that may be 'alien' for many people around the world.

The creation of mental health metrics involves extensive interpretative work that often remains hidden (or 'black boxed') and is seemingly only open to challenge from technical insiders (Porter, 1995). Yet how mental health is made to count has significant implications for the way mental health is understood and governed, and for the kinds of interventions scaled up.

Therefore, this workshop invites participants to explore the quantification of mental health as a social and historical process that creates 'mental disorder' as it also seeks to count it. The workshop is interested in exploring the ways mental health is (and has been historically) counted and quantified (techniques of social production); and the implications of this quantification - the ways that quantification construct mental health conditions as 'problems' amenable to particular kinds of 'solution'. The workshop will focus on how mental health metrics are *done*, what they *do* and the ways metrics *do* mental health (for example, as universal, as globally commensurable, and as 'illness') (Mills and Hilberg, 2019). We are interested in how mental health metrics are performed differently in different contexts, with alignments and contrasts between these different ways of *doing*, and what it *feels* like to be counted by these metrics – the affective nature of quantification.

This day-long workshop brings together a diverse group of scholars (including user/survivor scholars) to think in interdisciplinary ways about mental health metrics. It will include short provocations from a range of speakers, ample discussion time, and a showcase of the early findings of two British Academy funded research projects on the social lives of mental health diagnostic algorithms (specifically the WHO's mhGAP-IG) and wider psy-technologies (led by Dr China Mills).

Speakers include:

Mental Health Metrics - A Survivor Perspective

Michael Ashman (Sheffield)

The secret history of ICD and the hidden future of DSM

Bill Fulford (University of Oxford)

The social life of diagnostic algorithms: how are they made and what do they do (with a focus on the WHO's mhGAP-IG)?

China Mills (City, University of London)

Global Burden of Disease estimates for depression: the quality of epidemiological evidence

Petra Brhlikova, Newcastle University

Looking at the Global Mental Health Movement through the lens of institutional corruption

Lisa Cosgrove (University of Massachusetts, Boston)

Decolonizing mental health: Renormalizing madness and [settler] imaginaries

Lindsay Miller (University of Sheffield)

And Grace Ryan (LSHTM), and Akriti Mehta (Service User Research Enterprise, King's College London) – titles tbc

We have a very limited number of free places at this event. If you'd like to attend then please contact China Mills (china.mills@city.ac.uk), and include something brief (2-3 sentences) on why you'd like to attend, and how this topic links to your own experiences and/or area of work.