



Neoliberalism and the Commodification of Mental Illness in Surveillance Society

Kyle Shea Minta

Neoliberal ideology has been widely criticised for its focus on the individual and lack of focus on the social (Brohman, 1995). This is true in many ways, but in this essay, I will examine how neoliberal ideology has individualised mental illness, and obscured social causation. In this critical reflection I will explore the commodification of mental illness and how this is justified by neoliberal ideology. I will also explore how information technologies are increasingly being used by individuals to check symptoms, and how this self-surveillance may be a factor in the rising prescription of medicines. Finally, I will reflect on whether the preference for medicines is in the interest of the individual or profit.

Neoliberalism, in short, is the belief that the 'free market' benefits everyone because it is self-regulating via supply and demand (Brohman, 1995: 1). As such neoliberals believe in little or no regulation by the state. The only job of the state is to introduce and provide infrastructure for new markets. For Neoliberalism to function, society must internalise the belief that those who work hard will be financially successful, and that the poor are merely people who didn't work hard

enough (Brohman, 1995). In this process, structural influences that may affect the individual's success, are also perceived as individual problems that can be overcome. By individualising structural factors, the removal of institutions that would otherwise help the vulnerable is justified. Society in the neoliberal view is merely a large group of individuals pursuing individual goals, 'bound together only through market forces' (Brohman, 1995: 1). Additionally, 'the private realm is prioritized over the social sphere' (Esposito



and Perez, 2014: 421), ignoring social forces constraining and influencing behaviour. Therefore, in the neoliberal view, mental illness is viewed as a problem of the individual, and not one that society's structures could have created.

At the same time Neoliberalism dominated western ideology, information communication technologies saw massive advancements. The internet has improved communicative capability by shortening the time and increasing the distance of information spread (Computer Hope, 2019). Castells highlights the importance of this new era, stating 'While the networking

form of social organization has existed in other times and spaces, the new information technology paradigm provides the material basis for its pervasive expansion throughout the entire social structure' (Castells, 2009: 500).

It is unsurprising that with the proliferation of these technologies, and with global information made accessible at the individuals fingertips, people have turned to these services to gain an understanding of their health. Search engines have made it easy for individuals to find relevant information. Using Google trends, we can see that over the past 5 years there has been a steady increase in searches relating to 'anxiety' and 'mental health' (Google Trends, 2019a; Google Trends, 2019b) indicating that search engines are increasingly being used as a means of self-surveillance. Whilst information technologies are being increasingly used for mental health-related issues, Kim and Krishna (2014) found that the internet can be problematic when symptom searching, as there is a risk of "justificatory information forefending" (J.I.F.F), which is a bias whereby people might interpret their experiences as symptoms of certain illness', which could worsen the individual's condition. However, Naslund et al's (2016) research suggests that the use of information technologies is useful as it can connect the individual to wider communities of people who are dealing with similar afflictions, which could be comforting. Other research suggests that the use of information online undermines the paternal physician-patient relationship, as people place higher relevance on the information they have found via the web, over the information provided by their physician, which can be



damaging for the individual where J.I.F.F is concerned (Ahmad et al., 2006).

But is this scepticism in physicians well placed? On investigating the diagnostic rates of mental illness, rates remained unchanged between 1970 and 2018, with 1 in 4 people in the UK diagnosed with a mental illness (Mind, 2019). However, despite no change in rates, the past decade has seen prescribed anti-depressants rise from 36 million in 2008 to 71 million in 2018 in the UK (Iacobucci, 2019). This figure has almost doubled and is expected to double again within the next decade (Katolik & Oswald, 2017). But is this increase in prescriptions because these drugs have become more effective? A

small-scale study suggested that drug-based treatment for these illnesses were only 22% effective, with 27% of the sample taking

additional drugs to alleviate their illness (Chemist 4 U, 2018). So, why if, despite the statistics showing that these drugs are ineffective, are they still prescribed? It is possible that the physician, limited by their neoliberal and biochemical understandings of mental illness, can offer no alternative to their patients. In some cases, however, it was found that physicians would accept incentives from drug representatives to prescribe certain medications to patients, even in situations where these drugs wouldn't help. Krans (2019) demonstrated that some physicians favoured their own personal gain over other people's wellbeing. He identified that incentives were offered to physicians who prescribed Fentanyl to patients who didn't need it.

Similarly, Mojtabai and Olfson (2011) found that prescriptions for anti-depressants to people without a psychiatric diagnosis increased from 59.5% to 72.7% between the years of 1996 and 2007 in the U.S. Whilst these statistics are outdated, in the decade that followed, anti-depressant prescriptions doubled, and as such, it is likely that prescriptions for people without a psychiatric diagnosis has also increased. But is there a market for these drugs? Well, Brandessence Market Research Company PVT LTD (2019) found that the global anti-depressant market in 2018 was worth nearly 14 billion US dollars with estimations of further growth, highlighting the revenue-producing potential of individuals with depression.

Whilst some physicians take incentives, it would be dystopian to assume that they are all like this. However, those that aim to offer the best help for their patients are still limited by prevailing scientific knowledge. With companies funding new research, it is down to those companies to direct research to produce new knowledge, to challenge leading scientific discourse. However, most research is directed at new drugs, as opposed to alternative treatments. There are cases of physicians recommending other treatments such as cognitive behavioural therapy or meditation, but this is often in conjunction with medication (Bandelow et al., 2015).

It is clear that the preference for medication is even promoted by drug companies for profit. However, a consideration of the social factors is important. Silva et al (2016) found that a lack of employment, low income, and

poverty, all contribute to financial insecurities, leading to mental illness. Additionally, Silva et al. (2016) found that deprived areas lacking necessary resources, such as community centres and educational facilities, also present higher levels of mental illness and generally low status (Katikireddi et al., 2016). Accompanying these factors, the experience of racism (Berger & Sarnyai, 2014) and domestic violence (Karakurt et al., 2016) are known to contribute to mental illness. In social democracies like Denmark, where policies are based on reducing structural inequality and facilitating equal opportunity, rates of mental illness are far lower, treatment success rates are higher, and stigma around illnesses are lessened (OECD, 2017). Furthermore, Kinderman's (2016) research supports the view that implementing systemic changes to combat inequality correlates with improved mental health.

Despite the overwhelming evidence that medicalisation in the form of drug treatment has proved an ineffective method of treatment, and with evidence supporting a social approach, drug-based treatment is still the preferred method of treatment, and remains a growing industry. I believe, that considering the research

above, that this focus is intentional and underpinned by neoliberal, capitalist and individualising ideologies. I have used the theories of both, Castells and Foucault, to illustrate the use of the internet as a means of self-surveillance of health, and have argued that this could be a factor in the doubling of prescriptions, despite no increase in diagnosis. In addressing the potential causes of mental illness, and potential reasons medication fails, I have



considered a social view of the illness; one that considers structural factors and how these may affect one's wellbeing. The social approach shows promise in Denmark, where wellbeing is reportedly higher than politically neoliberal countries like the U.S. and the U.K. A consideration of social factors highlights the effect socioeconomic status, racism, and domestic violence have on wellbeing. Therefore, a rejection of the neoliberal approach allows us to consider the social factors contributing to mental illness. I, however, believe that the rejection of this neoliberal and individualistic approach is unlikely in mainstream medicine, as pharmaceutical companies control research and choosing to research alternative treatments to medication could impede profits. With the anti-depressant industry worth 14 billion alone, and with projected growth in the future, it is likely that mental health will remain a commodity used for profit at the detriment of those suffering.

Bibliography:

Ahmad, Farah et al. (2006). 'Are Physicians Ready for Patients With Internet-Based Health Information?'. **Journal of Medical Internet Research**, 8 (3), doi: [10.2196/jmir.8.3.e22](https://doi.org/10.2196/jmir.8.3.e22).

Bandelow, Borwin et al (2015) 'Efficacy of treatments for anxiety disorders: a meta-analysis'. **International Clinical Psychopharmacology**, 30 (4): 183-192.

Berger, Maximus and Sarnyai, Zoltan (2014). "More than skin deep": stress neurobiology and mental health consequences of racial discrimination'. **Stress**, 18 (1): 1-10.

Brohman, John (1995). 'Economism and critical silences in development studies: A theoretical critique of neoliberalism'. **Third World Quarterly**, 16 (2): 297-318.

Esposito, Luigi. & Perez, Fernando. M (2014). 'Neoliberalism and the Commodification of Mental Health'. **Humanity & Society**, 38 (4): 414-442.

Karakurt, Gunnar et al (2016). 'Mining Electronic Health Records Data: Domestic Violence and Adverse Health Effects'. **Journal of Family Violence**, 32 (1): 79-87.

Katikireddi, Srinivasa et al. (2016) 'Employment status and income as potential mediators of educational inequalities in population mental health'. **The European Journal of Public Health**, 26 (5): 814-816.

Katolik, Aleksandra and Oswald, Andrew. J (2017). 'Antidepressants for Economists and Business-School Researchers: An Introduction and Review'. **Die Unternehmung**, 71 (4): 448-463.

Kim, Jeong-Nam and Krishna, Arunima (2014). 'Publics and Lay Informatics: A Review of the Situational Theory of Problem Solving'. **Annals of the International Communication Association**, 38 (1): 71-105.

Kinderman, Peter (2016). 'Knots and black holes: why we're all prone to madness and what we can do about it'. **Palgrave Communications**, 2 (1): 1-4.

Mojtabai, Ramin and Olfson, Mark (2011). 'Proportion Of Antidepressants Prescribed Without A Psychiatric Diagnosis Is Growing'. **Health Affairs**, 30 (8): 1434-1442.

Naslund, John et al. (2016). 'The future of mental health care: peer-to-peer support

and social media'. **Epidemiology and Psychiatric Sciences**, 25 (2): 113-122.

Brandessence Market Research Company PVT LTD (2019). **Antidepressant Drugs Market Size, Share, Current trends, opportunities, Competitive Analysis and Forecast to 2019 – 2025** [Online]. Medgaget. Available from: <<https://www.medgaget.com>> [Accessed 13th December 2019].

Castells, Manuel(2009). **The Rise of the Network Society: The Information Age - Economy, Society and Culture**. New Jersey: Wiley-Blackwell.

Chemist 4 U (2018). **Antidepressant Prescription Statistics UK – This Antidepressant Survey Reveals the Latest Statistics You Need to Know** [Online]. Chemist 4 U. Available from: <<https://www.chemist-4-u.com>> [Accessed 13th December 2019].

Computer Hope (2019). **What are the advantages of the Internet?** [Online]. Computer Hope. Available from: <<https://www.computerhope.com/issues/ch001808.htm>> [Accessed 19th December 2019].

Google Trends (2019a). **Anxiety** [Online]. Available from: <<https://trends.google.com/trends>> [Accessed 19th December 2019].

Google Trends (2019b).**Mental Health** [Online]. Available from: <<https://trends.google.com/trends>> [Accessed 19th December 2019].

Iacobucci, Gareth (2019).**NHS prescribed record number of antidepressants last year** [Online]. thebmj. Available from: <<https://www.bmj.com>> [Accessed 19th December 2019].

Krans, Brian. (2019).**Doctors Getting Paid to Prescribe Medication** [Online]. Healthline. Available from: <<https://www.healthline.com>> [Accessed 13th December 2019].

Mind (2019). **Mental health facts and statistics** [Online] Mind. Available from: <<https://www.mind.org.uk>> [Accessed 19th December 2019].

OECD (2017) **How's Life?: Measuring well-being**. Paris: OECD publishing.

Open Markets (2019). **Monopoly Basics: High Drug Prices & Monopoly**. Open Markets Institute [Online]. Available from: <<https://openmarketsinstitute.org>> [Accessed 13th December 2019].

Silva, Manuela, Loureiro, Adriana and Cardoso, Graca (2016). 'Social determinants of mental health: a review of the evidence'. **The European Journal of Psychiatry**, 30 (4):259-292.

Pictures:

Images Money (2011). [Online Image]. Available from: <<https://www.flickr.com>> [Accessed 29th February 2020]

Stethoscope On Money (2018). [Online Image]. Available from: <<https://www.publicdomainpictures.net>> [Accessed 29th February 2020].

Lets talk about mental health (2017). [Online Image]. Available from: <<https://www.flickr.com>> [Accessed 29th February 2020].