Anthropologica

"The Grind Never Stops"
Mental Health and Expectations of Productivity in the North American University

Adrianna N. Wiley

Résumé de l'article

Selon une approche phénoménologique critique, j'explore la manière dont le contexte social néolibéral de l'université nord-américaine produit des attentes normatives qui interagissent avec les expériences des étudiants et leur compréhension des problèmes de santé mentale dans cet environnement, tout en les modelant. Les données que j'analyse proviennent d'entrevues semi-dirigées avec 24 étudiants universitaires âgés de 18 à 24 ans qui s'identifient comme ayant des problèmes de santé mentale, ainsi que d'observations participantes lors d'activités de bien-être à l'université. Dans ce contexte, les étudiants et l'université considèrent le bien-être comme la capacité à maintenir une productivité académique constante. Alors que les programmes universitaires de bien-être promeuvent « l'auto-soin » individualisé et orienté vers des objectifs comme la norme pour atteindre et maintenir le bien-être, les étudiants considèrent souvent les activités d'auto-soin comme inefficaces, donnant la priorité à la productivité académique plutôt qu'au bien-être subjectif en s'efforçant de maintenir l'image du « bon » étudiant. Je soutiens que cette conception de la santé mentale cause et exacerbe le mal, en introduisant le contraste conceptuel entre le « bien-être de l'étudiant » – la réussite académique – et le « bien-être de l'humain » – le bien-être subjectif – comme moyen de comprendre comment les tentatives des universités d'accroître le bien-être soutiennent souvent des agendas néolibéraux au détriment du bien-être de leurs étudiants.

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Mental Health and Expectations of Productivity in the North American University

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Abstract: Using a critical phenomenology approach, I explore how the neoliberal social context of the North American university produces normative expectations which both interact with and pattern student experiences and understandings of mental health struggles in this environment. The data I analyze comes from semi-structured interviews with 24 university students between 18 and 24 years of age who self-identify as experiencing mental health struggles, as well as participant observation at university wellness events. In this context, both students and the university understand wellness as the ability to maintain constant academic productivity. While university wellness programming promotes goal-oriented individualized "self"-care as the gold standard for attaining and maintaining wellness, students often view self-care activities as unproductive, instead prioritizing academic productivity over subjective well-being in striving to maintain an image as the "good" student. I argue that understanding mental health in this way both causes and exacerbates harm, introducing the conceptual contrast between "Student Wellness"—academic success—and "Human Wellness"—subjective well-being—as a means of understanding how university attempts to increase wellness often support neoliberal agendas to the detriment of their students' well-being.

Keywords: mental health; university students; neoliberalism; youth; productivity; critical phenomenology

Résumé : Selon une approche phénoménologique critique, j'explore la manière dont le contexte social néolibéral de l'université nord-américaine produit des attentes normatives qui interagissent avec les expériences des étudiants et leur compréhension des problèmes de santé mentale dans cet environnement, tout

en les modelant. Les données que j'analyse proviennent d'entrevues semi-dirigées avec 24 étudiants universitaires âgés de 18 à 24 ans qui s'identifient comme ayant des problèmes de santé mentale, ainsi que d'observations participantes lors d'activités de bien-être à l'université. Dans ce contexte, les étudiants et l'université considèrent le bien-être comme la capacité à maintenir une productivité académique constante. Alors que les programmes universitaires de bien-être promeuvent « l'auto-soin » individualisé et orienté vers des objectifs comme la norme pour atteindre et maintenir le bien-être, les étudiants considèrent souvent les activités d'auto-soin comme inefficaces, donnant la priorité à la productivité académique plutôt qu'au bien-être subjectif en s'efforçant de maintenir l'image du « bon » étudiant. Je soutiens que cette conception de la santé mentale cause et exacerbe le mal, en introduisant le contraste conceptuel entre le « bien-être de l'étudiant » – la réussite académique – et le « bien-être de l'humain » – le bien-être subjectif – comme moyen de comprendre comment les tentatives des universités d'accroître le bien-être soutiennent souvent des agendas néolibéraux au détriment du bien-être de leurs étudiants.

Mots-clés : santé mentale ; étudiants universitaires ; néoliberalisme ; jeunes ; productivité ; phénoménologie critique

Introduction

University students frequently struggle with their mental health as they navigate the transitional life stage from adolescence to adulthood within the university context (Anderson-Fye and Floersch 2011; Condra et al. 2015; Council of Ontario Universities 2017; Kessler et al. 2005; Lester 2011; Linden, Grey, and Stuart 2018; Ontario University and College Health Association 2017; Stallman 2010). I explore how the social context of the North American university influences these experiences of mental health struggles, revealing how the conflation of productivity and mental health in the university context leads to the stigmatization of unproductive students as "lazy" and not meeting normative expectations about what it means to be a "good" student. In exploring how normative expectations of constant productivity impact students' phenomenological experiences of mental health, I expand on anthropological understandings of mental health stigma as a sanction on the unproductive in neoliberal society (Grinker 2020). In this article, I introduce the conceptual contrast between "Student Wellness"—academic success—and "Human

Wellness"—subjective well-being—as a means of understanding how university attempts to increase wellness often support neoliberal agendas to the detriment of their students' well-being.

Over the last decade, the number of post-secondary[1] students with diagnosed mental disorders in Ontario has more than doubled (Condra et al. 2015; Council of Ontario Universities 2017). Compared to other groups in Ontario, postsecondary students are more likely to experience symptoms of a mental disorder, a major concern considering 83% of Ontario's youth—defined as individuals between the ages of 18 and 24 years—participate in postsecondary education (Ontario University and College Health Association 2017). Understanding the constructs of mental health embedded in the university context is important because they do not neutrally describe an experience, but are patterned by normalized expectations about what it means to be a "good" student to inscribe mental health with particular meanings (Beatty 2016; Kirmayer 1994; Scheper-Hughes and Lock 1987; Szasz 1979). While many interdisciplinary studies explore issues of student mental health as biomedical phenomena, in order to fully understand student experiences of mental health struggles in the university we need to not only look at the "disease" aspect of these struggles (Helman 1981; Kleinman, Eisenberg, and Good 1978; Kleinman 1978) but also how students experience them phenomenologically in their day-to-day lives *as students*. I use an ethnographic, phenomenological perspective in this study to contextualize my participants' experiences with mental health struggles as a single part of their lives where they fulfil other non-pathologized identities and social roles (Whyte 2009), such as that of the student. Critical phenomenology, while foregrounding experiential knowledge and individual subjective concerns (Bindhulakshmi 2012; Mattingly 2019; Raphael 2015; Tran 2017; Desjarlais and Throop 2011) articulates with the ethical and political context in which the experience occurs to create a more holistic picture (Mattingly 2019). Thus, by approaching student mental health phenomenologically while also taking note of the greater social structures at play within the university, I move between macro-level abstractions, such as neoliberalism, to how these forces shape micro-level, individual experiences.

In this article, I use the concept of neoliberalism to critique the entangled social and economic order (Ortner 2011) which promotes the liberal economic policies of open market competition and the privatization and deregulation of social services through the promotion of certain social values such as competition, extreme individualism, and hyper-productivity, and which

positions the individual as entirely responsible for their own holistic well-being (Dolmage 2017; Ganti 2014; Nishida 2016). This system privileges corporate profit over human welfare, producing and maintaining systemic inequalities and barriers. Neoliberalism is an "ideology of governance" capable of molding subjectivities, as well as a structural force affecting peoples' lives (Ganti 2014). In the anthropological literature on mental health, neoliberal critiques have been used in the latter sense to analyze pharmaceutical companies (for example, Bergey, 2017; Cohen, 2017; Jenkins, 2010; Tseris, 2017), insurance companies (for example, Grinker, 2007; Lester, 2011; Young, 2001) and systems of community-care in the United States (for example, Luhrmann, 2000) for their orientation towards economic profit over best practices of care and their placement of total responsibility for recovery on the patient's compliance. Here, I am primarily concerned with neoliberalism as an ideology, especially as it represents a social order—entailing particular values and normative expectations—within which the university operates (Dolmage 2017; Ganti 2014). Previous work in anthropology and disability studies suggests the normative North American university student is faced with expectations arising from this neoliberal social order (Dolmage, 2017; Geert Van Hove et al., 2014; Lester, 2011; Martin, 2007). The competitive environment of the university, reflecting that of the open market, may be understood as a site of "natural selection" where only the "fittest" are meant to "survive" (Dolmage 2017; Geert Van Hove et al. 2014). In the university environment, neoliberal values are reflected in the normative expectations that students are able-bodied, healthy, personally responsible, and able to follow a typical scholastic trajectory involving uninterrupted productivity (Dolmage 2017; Geert Van Hove et al. 2014; Gordon 2019; Lester 2011; Martin 2007). Students who struggle are seen as not up to the challenge and their failure is blamed on their individual traits rather than on the structural failings of the university (Christie et al. 2008; Dolmage 2017; Nishida 2016). In this article, I explore how these previously elucidated expectations, in particular hyper-productivity, are used to socialize students into appropriate neoliberal citizenship within the university, patterning student understandings and experiences of mental health.

I argue that academic productivity as a value—rewarded with validation often in the form of grades—socializes students into this system where their constant economic productivity is demanded. While the academic work of undergraduates may not directly contribute to the economy, the normative expectation that they are hyper-productive is set by faculty whose academic

productivity does place them in competition with others for their "economic survival" through granting and tenure processes (Nishida 2016). Economic productivity maps onto the university context by the ways in which knowledge becomes a commodity and universities focus on "products" or "outcomes" rather than learning processes, and further how this system socializes students into understanding their worth as a person as deriving from their productivity (Nishida 2016; Blum 2016).

Anthropologist Roy Grinker (2020) has theorized that stigma as it relates to mental ill-health can be understood as one way in which individuals are socialized into hyper-productive neoliberal persons. Whereas Goffman's theory of stigma presents stigma as "natural" and places the burden for "managing spoilt identity" on the individual (Goffman 1968), Grinker (2020) draws from disability studies to theorize stigma as a social structure acting to sanction certain types of already existing people, establishing a socially constructed "normal." Grinker (2020) argues that stigma as it pertains to mental illness has arisen out of the historically embedded structural conditions of modern capitalism and the creation of the ideal modern worker under neoliberal ideology. He contends that the concept of "mental illness" stigmatizes the economically unproductive, allowing them to be isolated and penalized. We might understand this as a specific instance of Scheper-Hughes and Lock's concept of the "double illness," which contends that social and cultural responses to suffering, such as stigma, amplify the original suffering to create secondary negative experiences beyond the original "symptoms" (1986). As Nishida (2016) discusses, academics often experience guilt and shame due to self-stigma in association with not meeting their expectations of hyper-productivity. I explore in this article how similar stigmatization processes play out for students, increasing suffering while socializing them into the neoliberal social order.

The qualitative research I conducted with students at an Ontario university reveals that neoliberal values and expectations, particularly those pertaining to productivity, produce a social context which patterns my participants' phenomenological experiences with and understandings of mental health struggles. When reflecting on these experiences, students tend to define their mental health by their academic productivity levels rather than by their subjective well-being. For students, being mentally well means having the energy and motivation necessary to meet the neoliberal expectation that they maintain constant productivity. University attempts to increase wellness also

reproduce this understanding, focusing on academic success over subjective markers of student well-being. Ultimately, these understandings of wellness pattern student experiences of mental health struggles as they attempt to maintain the image of the "good student" by prioritizing academic productivity over subjective well-being, further damaging mental wellness in a cyclical fashion.

Methodology

This study was conducted entirely online due to shifting public health recommendations during the COVID-19 pandemic.[2] I performed over 5.5 hours of online content research using the University of Guelph (UofG) Wellness Website, 14.5 hours of participant observation at online wellness events/ workshops run by UofG, and conducted 24 online, semi-structured interviews, averaging 40 minutes (a range of 23 to 56 minutes) with current UofG students between the ages of 18 and 24 years who self-identify as experiencing mental health struggles.

The Government of Canada defines mental health as

[t]he capacities of each and all of us to feel, think, and act in ways that enhance our ability to enjoy life and deal with the challenges we face… a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections, and personal dignity (Minister of Public Works and Government Services Canada, 2006);

however, I define "mental health struggles" in this study as any self-perceived lack in any of the areas described above that cause an individual distress and/ or a negative sense of well-being. Importantly, this is considered a subjective and self-identified experience not limited to those with a biomedical diagnosis of mental illness. By focusing on those who self-identify with a broad term such as mental health struggles, rather than diagnosable mental disorders, I draw from varied student perspectives, including those who have been missed in the interdisciplinary literature on student mental health due to their lack of biomedical diagnoses (Condra et al., 2015; Kranke et al., 2013; Stein, 2013).

In the end, 13 of my 24 participants (54%) had a biomedical diagnosis for their struggles, while 11 did not (47%). Two of the 11 participants without a diagnosis were in the process of gaining a diagnosis, and a third had an "unofficial" diagnosis from a counselor (rather than a medical professional or psychologist). Similarly, two of the participants with a diagnosis were unsure of the validity or value of their diagnosis either because they were unsure of the

qualifications of the individual who diagnosed them or because they did not believe 30 minutes was long enough for someone to make an appropriate evaluation of their struggles.

Regarding demographics, 60.3% of UofG students are women (University of Guelph 2020), and it is anecdotally observed that the majority of students are White. It is important to note that this demographic data is reflected in this study; most of my participants were White (or White-passing) feminine-presenting persons.[3] Nonetheless, the study also includes perspectives from people of colour, including men of colour, international students, and other masculine-presenting individuals. The age requirement for this study (18 to 24) was selected because it covers the age of onset for many diagnosable mental health disorders, allowing the study to capture students who may be struggling with their mental health for the first time (Anderson-Fye and Floersch, 2011), and because it controls for generational differences in beliefs about and experiences of mental health.

Productivity and Mental Health in the Canadian University Context

Student Understandings of Mental Health as Productivity

I think right now there's this culture that promotes…this glamorization of depression and anxiety and it's just become this very "fashionable" part of life. I think it kind of ties into people being like "oh wow, I only got two hours of sleep yesterday I was so busy working, I was so busy grinding, the grind never stops," that kind of tagline. I think it's super unhealthy, but it's become very popularized as the way that we should be living our lives…and then people are like "oh wow I didn't eat that much today. I have only had one meal today." I heard that yesterday, and I was like why are you only eating one meal, that's so bad, please eat some food, drink some water, right? We have glamorized this not taking care of ourselves but still achieving things as this great feat when it's incredibly unsustainable and super terrible. (Rose)[4]

In the context of the university students often understood their mental health as productivity, an understanding that frequently entrapped them in a cycle of poor mental health and low productivity, producing further negative effects on their subjective well-being. Above, Rose paints a rich image of the university social context in which students are experiencing mental health struggles such as feelings of depression and anxiety; this social context is one

where making sure "the grind never stops" is prioritized over self-care, and not taking care of oneself is worn as a badge of honour. Rose's quotation suggests that subjective well-being is secondary to one's ability to be productive. When I asked students in this study how they knew when they were feeling mentally well or mentally unwell, many referred directly to the entangled concepts of "productivity," "energy," and "motivation." Rose explains when she is mentally well,

> I just am generally more productive…I have the motivation to do things, and accomplish things, and I also have the energy to do them… [Conversely,] when I don't feel mentally well, it's a lot of energy drainage, where I don't wanna get out of bed. I don't want to move. So, the opposite of that where it's like yeah, I have the energy, I have the motivation, I'm getting stuff done. And I also feel good about the things that I'm getting done.

Similarly, Marie defined her level of mental wellness by her ability to be "productive," explaining

> I guess for me, it's kinda how much work I can get done. So, if I'm feeling really stressed out, then I'll sometimes just get this kind of block where I can't get any work done. If I'm productive then I'm not struggling to get stuff done, then that's how I know that we're having a good day.

> Lily also refers directly to productivity when describing feeling mentally unwell, explaining that "…there are days where even if I don't know why I'm feeling a certain way, I know it'll still affect how I function that day and it'll affect my productivity…I know I'm feeling mentally well when I'm not taking naps throughout the day. And…when I'm productive." According to this construction of mental health, one is mentally healthy when one can get work done and maintain productivity throughout the day; phenomenologically these students feel motivated and energized when mentally well.

> Feeling energized was an important part of constructing mental health as productivity; for instance, Rose understands being "mentally unhealthy" as a state where "…you don't have energy." Equally, Ricky notes that mental wellness comes with energy:

> I tend to feel very energetic [when I'm mentally well], I'm down to do anything. I wanna go out, I wanna go, I don't know, play basketball. I'm always calling my friends like OK what's going on? I'm in a good mood, let's go. So, it's kinda that surge of energy that comes with being happy and being in a good mood.

Matt provides a similar explanation when asked how he knew he was feeling mentally well:

> I think I definitely have more energy. That's one thing I noticed when I would be worrying about, whether it be an exam or anything, it took a lot of energy out of me. And the times where I was the most anxious, and did the most worrying, I slept the best...thinking all day about this stuff does take energy out of you. You're not running laps or anything, but your mind is. And it was crazy, 'cause I've never slept that well, but then I wake up in the morning and I have a shitty day so obviously it wasn't [a good sleep].

Concurrently with a lack of energy, students found they lacked motivation when they were struggling with mental health, tying back into the issue of "productivity." Participant 1[5] explains "[when] my mental health is a little lower I'm not quite as energetic, or necessarily talking as much. I may, when I look at tasks, think like, 'Ugh, I don't wanna do this,' or less motivated is a good word for that." This lack of motivation can lead students to struggle with procrastination, which is constructed as the opposite of productivity and is therefore associated with mental health struggles. Marie explains she knows she is struggling, "If I can't seem to get any work done, if I'm procrastinating a lot because I am too anxious to do it ... where just kind of looking at [the amount of work] makes you feel some kind of anxiety."

While Marie makes note of struggles with motivation, she also highlights another part of this energy-motivation-productivity triad—perception of workload. Rose explains how her perception of tasks changes based on her mental health:

> I think definitely energy plays in. I'm less motivated to do things. Things start to feel a lot heavier...Where I see a list of things I need to do and I'm like "Wow, this is going to take me forever," I don't want to do any of these things. And I also tend to not know where to start, and I get overwhelmed very easily...I often feel like I also can't kind of zoom out of a situation, I get very stuck. Yeah, I guess those words like stuck, unmotivated, tired, all kind of fit into that feeling.

Similarly, AB knows she is feeling mentally unwell "when I have a lot of things to do in one day and I don't feel like doing it. Maybe I'm feeling low or maybe I don't want to. I procrastinate and stuff maybe I just don't want to do it, that is when I feel mentally pressured."

Looking at the participants' descriptions together, a patterned cycle begins to emerge (see Figure 1). Emma explains "I'll feel overwhelmed from the stress, and then for me those feelings of being overwhelmed kinda come out, emotionally. So, I'll get quite upset. Or I'll just, I won't want to do anything." Lily makes this pattern even clearer:

> I also felt like my energy levels decreased a lot when I was in university...I would be able to do a full day [in high school], and then university I would go to two lectures and I'd be exhausted. So that definitely affected my mental health as well, 'cause it made me feel like I'm not doing enough. And I still feel that way, even though I've been at university for three years now. It still feels like I'm never getting enough done. And then, that makes me feel worse because I'm not doing enough, I'm not getting enough done, it's going to take me forever. And then when that happens, when I get super overwhelmed, I just do nothing, which makes me feel like shit again, so it's a cycle.

Feel 'Shitty'
Struggling with
Mental Health

Loss of Motivation/Energy
Perceive Tasks
as 'Heavier'

Not Productive
(e.g. sleep more)

Self-Criticism/
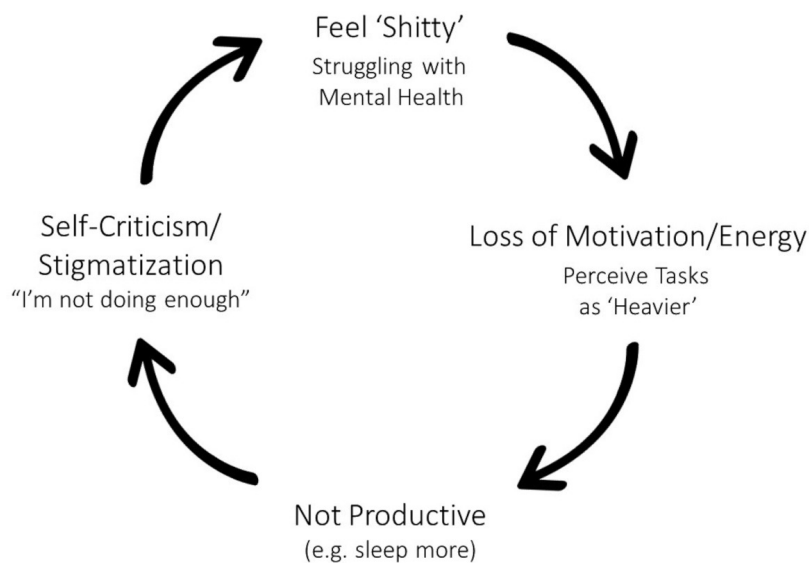Stigmatization
"I'm not doing enough"

Figure 1. The Mental Health-Productivity Cycle described by students.

This cycle begins when students attempt to maintain unsustainable levels of academic productivity at a time when they need to address other aspects of their wellness, such as getting appropriate levels of sleep and resting both mind and body. As productivity is conflated with wellness in student conceptualizations of mental health, the conceptual contrast between Student Wellness and Human Wellness in the university context begins to emerge.

Constructing Mental Health as Productivity in the University

Not only is the concept of mental health as productivity present in students' accounts of mental health struggles, it is also present in mental health events/ workshops held at the university. UofG offers several mental health events/ workshops for students each semester. In these workshops the construct of mental health as productivity, encompassing energy and motivation, was apparent; wellness in this context is understood as the ability to maintain constant productivity. One series of events called "Thriving in Action" clearly emphasized the connection between well-being and productivity as demonstrated by academic success. The workshop series' stated purpose was to "build academic and well-being skills." The first session on the topic of "connection" repeatedly reiterated that connection fosters both a sense of well-being and academic success. It was implied that when well-being is impacted by other areas of our lives such as being parents or volunteers, this impacts our academic success and potentially leads to decreased grades and drop-out. Similarly, the workshop on mindfulness focused on how mindfulness tools can improve productivity within the university context. It explained that multitasking is a myth and is inefficient; being single-minded or "mindful" was the more efficient route. Later, mindfulness was connected to the concept of attentiveness which was described as making one more productive and thus more academically successful. Relatedly, during the workshop on "balance" the host tried to "sell" wellness and balance as important because they improve our academic success, as opposed to for their own sake. Additionally, one host claimed, "When we are satisfied with our lives our GPAs increase." Generally, the workshops expressed the implicit idea that productivity was the main goal of life, positioning increased academic success as the primary reason to work on improving one's mental health, with subjective well-being seen as a means to better grades rather than as a worthwhile goal in and of itself. This was also clear from the journal prompts given to participants in "Be Well Be Safe Week" events for university staff (including student staff members) such as "What could you have done better to benefit from your break(s) more?" and "Ask if you felt more reenergized and focused when returning from breaks." These prompts ask students to optimize their breaks, not for their subjective enjoyment, but to increase productivity upon returning to work. Thus, while these workshops attempt to provide tools for addressing Student Wellness, Human Wellness is largely neglected, and few tools are provided to help students escape the mental health-productivity cycle described above.

It is important to note that the students attending these workshops often agreed with this construct. For example, the workshops typically began with an ice-breaker activity called "What went well despite" during which students would share what went well this week despite the pandemic context. During this activity, most participants talked about things going well in terms of productivity, such as finishing to-do lists or managing to get up early.

Furthermore, university mental health resources often position students as personally responsible for their mental health, and thus at fault if they are not striving to increase their productivity. The term "personal issues" (sometimes "personal problems" or "personal challenges") is used throughout the university's wellness website as a euphemism for mental health struggles. For example, the website describes Counselling Services as offering "...individual counselling sessions to help support students through personal challenges." This phrasing has an internalized connotation, individualizing these problems by suggesting the issue resides within the students—similar to a "disease" model—rather than being a relationship between the student and their circumstances, as students seem to experience them. Positioning these challenges as "personal" suggests the university environment is not at fault and that students are personally responsible for resolving these challenges. While structural challenges, such as the expectation of unsustainable hyper-productivity, require institutional responsibility, personal challenges just require personal responsibility. This orientation to mental health struggles works to socialize students into neoliberal personhood, pressuring them to take responsibility for their own ability to maintain (or not) constant productivity.

In sum, university wellness events sell goal-oriented individualized "self"-care as the gold standard for attaining and maintaining wellness. Wellness in this context is understood as the ability to meet the social expectation that one maintains constant productivity, with academic achievement seen as reflecting one's ability to meet this standard. The university focuses on Student Wellness—academic achievement—rather than Human Wellness—subjective well-being—and sees maintaining wellness as the sole responsibility of the student.

Grinding the Wheel: Stigmatization of Inactivity in the University

In this context, where mental health is equated with one's ability to be productive, and constant academic productivity is expected of the "normal" university student, the stigmatization of low productivity becomes an important factor in the maintenance of the mental health-productivity cycle described

above. The "good" student is the student who is hyper-productive and furthermore is able to translate this productivity into academic success, while students who are struggling with energy and motivation (and thus are unable to maintain this level of productivity) are stigmatized as "lazy"—and thus "bad"—students. This stigmatization, which might come from the student themself or others, such as parents and faculty, prevents students from circumventing the mental health-productivity cycle as it continually triggers the connecting self-criticism stage. This is an issue Daniella works on with her therapist, explaining that she has learned that "lazy" is just what we call struggling students when we want to stigmatize their lack of productivity:

> …lazy is not really a thing. People aren't lazy, they're either burnt out or anxious or they're struggling with something, people aren't lazy just to be lazy …that's a big thing that I talked about with my therapist. She's like you always tell me you feel lazy, but it's not really laziness it's just you are trying to protect yourself from those feelings of anxiety and whatever, sadness, whatever.

To avoid this stigma, students prioritize academic productivity over various forms of self-care. For instance, when Maanaav is feeling mentally unwell, and thus has limited energy to spend on daily tasks, he prioritizes his academics over other important aspects of human life. He explains he socially withdraws "…because at times I have been mentally unwell, and then I just focus on my academics, even though I should connect with other people to be mentally better." This prioritization is reinforced by the conflation of productivity and wellness discussed in the proceeding sections. If students are producing academic work, then they must be well, subjective well-being notwithstanding.

When students continue trying to maintain this hyper-productivity, they no longer have energy even for daily self-care. Celine explains that she knows she is struggling with mental health when "'basic' daily tasks start to feel more mentally exhausting." Similarly, Daniella identifies some signs that she is not doing well as including:

> I stop taking care of myself. I'll get up in the morning and not wanna do anything. I won't wanna brush my teeth, I don't wanna get up and make my bed, I don't wanna do anything. Just lacking basic self-care skills and basic ways to take care of myself too, right? I can kind of tell it's going downhill.

The examples these students describe correlate to Rose's opening quotation from the section on student definitions of mental health as productivity. This lack of participation in basic daily self-care, while amplifying subjective feelings of mental unwellness, is important in avoiding the stigmatization of being an unproductive, and thus "bad," student. A lack of self-care can demonstrate that a student is putting all their energy into their academic success, while also placing responsibility for their subjective unwellness on their individual choice not to engage in appropriate self-care activities (eating, sleeping, socializing etcetera).

Many participants recognized that continually doing things that are "exhausting" without "refueling" oneself, was harmful; however, this "refueling" was difficult to accomplish in the university context. As Sammie explains:

I think especially for a science major there's just a lack of time to yourself to do things that are relaxing, and that make you feel just good, and have time to rest and really take a break and invest in therapy and stuff. I think that has been challenging for me, 'cause I'm definitely a bit of a workaholic, so, I don't wanna let my grades drop, but it's also really important to prioritize your mental health.

AB had a similar recognition explaining that once she started paying more attention to both her physical and mental health, she would do things such as:

...going off with friends ... or maybe having a movie night once a week or game nights and things like that...basically, if you're overburdening yourself, take some time out to not burden yourself at all...I...decided that there should be a balance in your life so if you are doing things that exhaust you, you should also do things to refuel you up.

While students wanted to take time off to have fun or take care of themselves when burnt out, their internalized expectation to maintain hyper-productivity often translated into an anxiety about "not doing enough." Lily describes:

It feels like this place with the whole thing about "I'm not doing enough"...and then it also feels like am I wasting time here? 'cause tuition is expensive too...I was never one to take breaks and I feel like I just started recently and I realize how much I need it, like that's why I would feel burnt out all the time, but yeah, as a student, it just feels like I'm not doing enough.

These examples show how students feel personally responsible for maintaining constant academic productivity and how their inability to maintain hyper-productivity further impacts their mental health, reiterating the cycle of poor mental health, low productivity, and amplified negative self-talk leading to further mental health struggles. In this way, the stigmatization of struggling students as "lazy" and the university's orientation towards increasing Student Wellness by increasing student productivity can be understood as having a ratcheting effect on this cycle of poor mental health in the university context.

Implications of the Reproduction of Neoliberal Values of Productivity within Higher Education

The narratives above demonstrate how the university becomes a site for the reproduction of neoliberal values, where stigma around mental unwellness is implicitly used to identify unproductive members of neoliberal society, understandings of mental unwellness thrown in relief against the values of our time, which place primacy on productivity (Cohen 2017; Grinker 2020; Skultans 1991; Tseris 2017). Previous anthropological studies of mental health and disability have shown that constant, uninterrupted productivity is a normative expectation of the North American university student, as it is of the neoliberal citizen more generally (Dolmage 2017; Geert Van Hove et al. 2014; Gordon 2019; Nishida 2016). In this context, the expectations regarding productivity pattern both how students and the university as an institution understand what mental health consists of—namely that to be mentally well is to be constantly productive. This is illustrated by both student definitions of mental health and the orientation of university wellness events towards individual care, with achieving increased productivity—rather than increased subjective well-being—as a primary goal. We can understand how the university's attempts to improve wellness often fail to meaningfully help students by using the conceptual contrast between Student Wellness—academic success—and Human Wellness—subjective well-being. This maps easily onto neoliberal structures which promote economic wellness—profit—over human social welfare.

As mental health struggles are equated with being unproductive within the university, we can see the usefulness of Grinker's theory of stigma (2020) for understanding mental health struggles and their meaning in a neoliberal society. Grinker (2020) suggests that "mental illness" labels allow society to identify and penalize those who are not economically productive. In the

university context, this study suggests an analogous process occurs as students are socialized into an appropriate neoliberal personhood. When a student fails to achieve the version of wellness subscribed to by the university—being capable of constant academic productivity—the student is stigmatized as "lazy" or "bad," and their academic failures are attributed to poor work ethic, even when they may be working at their utmost capacity. This creates feelings of guilt and often sparks students to engage in negative self-talk. The university then creates wellness events intended to address this "unwellness" by increasing student productivity rather than by taking responsibility for the ways the institution creates a toxic environment for students. In this way, students who do not meet the normative expectation of constant productivity are "identified" as mentally unwell and stigmatized as "lazy" or "bad" students who need to take personal responsibility for their health and education. However, as one participant—Daniella—suggests above, laziness is not a "real" thing but rather what we choose to call suffering when we wish to stigmatize it.

Grinker's disability studies informed understanding of stigma is useful here because it places the onus for decreasing stigma on social structures, asking that we acknowledge the diversity of persons and build this understanding into the environment rather than asking students to accommodate themselves to fit a preconceived "normal." Nonetheless, while Grinker concludes that capitalism does not create "mental illness," it only gives new meanings to these experiences, my participants illustrate that in this meaning-making, the values embedded within neoliberal expectations do create and exacerbate phenomenological experiences of suffering. Meaning changes experiences, so to say capitalism does not cause suffering simply because "mental illness" meanings are a social construction needs to be nuanced to achieve awareness of the harm caused by these expectations.

We can achieve this nuance by turning to Scheper-Hughes and Lock's (1986) theory of the "double illness." By understanding that social and cultural responses to an individual's suffering can create secondary suffering in the form of stigma (1986) we can better understand how students become entrapped in this cycle of mental unwellness, reduced productivity, and negative self-talk. The double illness of this stigma reinforces negative self-talk, making it increasingly difficult for students to extricate themselves from this cycle. While the original source of their "dis-ease" may come from beyond the university context, the expectation that students are responsible for maintaining hyper-productivity not only exacerbates existing suffering but is in itself disabling;

students become increasingly less capable of academic productivity as their energy levels and motivation suffer due to lack of self-care, negative thoughts, and self-doubt (see also Nishida 2016).

Understanding how mental health is constructed as productivity in the university context and how this construction is made more harmful by the stigmatization of struggling students as "lazy" can help us create effective wellness initiatives which take into consideration this understanding and the cycle it produces. We need to remove the onus for overcoming toxic environments and avoiding stigma from individual students and instead explore how we can ameliorate the social structures present in the university that uphold toxic expectations of hyper-productivity and create mental health policy and wellness programming accordingly.

While productivity is not in and of itself a negative construct, and it is a condition necessary to produce quality academic work, the issue is the expectation that this productivity be constant and uninterrupted by restful activities, and the interpretation of those who do not meet this expectation as "lazy" and not taking appropriate responsibility for their health or education. As AB puts it, if one is going to burden oneself for half of the day, another half of the day ought to be spent in a way that balances this energy output; after all energy and motivation appear to be finite resources only renewable through rest and relaxation. I suggest that rather than trying to promote self-care and rest as values in and of themselves, which continues to individualize responsibility for wellness rather than placing the onus on institutions to improve toxic environments, a more culturally appropriate way to disrupt the mental health-productivity cycle would be to reframe how we think about and define productivity. Instead of taking for granted the idea that valuing productivity is inherently negative, we can ask the anthropological questions of "Productive for whom"?, "What is being produced?", "Is it meaningful?", "Whom does it harm?", and, "Whom does it benefit?" in order to reframe notions of what is "productive." This practice could allow faculty to critique the purpose of hyper-productivity and design courses which alleviate the burden on students where it does not improve learning but rather serves to advance neoliberal agendas, causing harm. We might further understand this as an instance of communal care. Faculty are also under pressure to be hyper-productive and so may engage in micro-resistance by drawing on empathy and using their power within the institution to care for students through their daily teaching and mentoring practices (Nishida 2016).

Currently, university wellness programming implicitly reproduces toxic expectations of constant productivity by orienting wellness goals to focus on academic success rather than on subjective well-being and the creation of a meaningful university experience. Academic success is no doubt important within this context; however, it is imperative that we critique the extent to which it is meaningful when trying to balance it with other key aspects of students' lives, such as maintaining health, building relationships, and engaging in other meaningful activities/hobbies. I suggest both these issues might be addressed by reorienting wellness programming to focus first on Human Wellness— subjective well-being—instead of on Student Wellness—academic success. Rather than understanding that rest must be productive of further academic productivity, we might instead understand subjective well-being and personal joy as "things" worthwhile of producing in their own right. In this way, we may begin to disrupt the mental health-productivity cycle by reducing stigma and eliminating the connecting self-criticism stage.

Conclusion

University programming constructs academic success through enhanced productivity as the primary goal of self-care, and students understand mental unwellness as manifesting as decreased productivity due to low energy and motivation. Consequently, my participants find it difficult to prioritize self-care in an environment that expects them to be hyper-productive, especially since they identified self-care activities, such as sleep and rest, as "unproductive." This is reinforced by the stigmatization of the less than hyper-productive as "lazy" and "bad" students and therefore uncompetitive neoliberal citizens. Essentially, while improved well-being was understood to ultimately make one more productive, a paradox arose in that students felt the expectation to be hyper-productive meant they did not have time to engage in self-care. Furthermore, since students who struggle with energy and motivation due to burnout and/or underlying mental health struggles are perceived as "lazy"—their lack of "success" blamed on their lack of productivity—they further prioritize academics over other wellness-promoting activities, such as socializing, in order to reverse this label. This paradox produces a cycle where students feel unwell and overwhelmed and are therefore unable to be as productive as usual, leading to negative self-talk and both external and internalized stigma where students understand themselves as "not doing enough" or being "lazy" and feel guilty for their lack of productivity. This is followed by a decrease in mental wellness

associated with this stigma and negative self-image, which restarts the cycle. Ultimately, this pattern illustrates how normative expectations of constant productivity arising from neoliberal values both impact student mental health and limit students' ability to engage in care, including the care encouraged by the university. In this way, these expectations produce "toxic" environments within the university which prioritize Student Wellness rather than Human Wellness.

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Acknowledgements

Notes

1 In Canada, "post-secondary" students consist of two subgroups, "university" students and "college" students. Unlike the United States where these terms might be used interchangeably, in Canada, post-secondary institutions deemed "universities" are degree-granting institutions which tend to focus on theoretical learning and analytical skills, whereas colleges grant diplomas and have a focus on hands-on learning and technical skills.

2 Readers will note that while this study was conducted during the COVID-19 pandemic, I do not analyze the pandemic in this study as a specific theme or context as it relates to mental health. I do this because my participants do not implicate the pandemic as creating unique mental health struggles but rather as exacerbating and making more easily visible the challenges students were already facing. Emphasizing the pandemic context would downplay the historically deep structural issues this article is meant to highlight.

3 I use the term feminine/masculine here as gender was not explicitly collected during this study but rather, this information is based on my own observations and voluntary use of pronouns by the participants.

4 All names are pseudonyms chosen by participants.

5 The pseudonym "Participant 1" was selected by the participant herself as she wished to be identified by a number rather than a name. Note that Participant 1 requested I still use she/her rather than gender-neutral pronouns.

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