

## Documenting Mental Illness (WST 392)

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"Colonialism forces the colonized to constantly ask the question: '*Who am I in reality?*'"

–Frantz Fanon, *The Wretched of the Earth*

"In my sketchbook, I'd trace the familiar lines of my face, and I'd calm down and come back into myself. Inert on a piece of paper, the demons were more handleable."

–Ellen Forney, *Marbles*

"A simple place to start is here: we're sensitive. We feel things hard and fast. We feel things quiet and deep. We feel things huge and open. We feel things heavy and slow."

–The Icarus Project, *Navigating the Space Between Brilliance and Madness*

Mental illness often comes into public consciousness in the United States through the specter of violence, such as in the many horrific mass shootings where the shooter's mental health is questioned. The media frenzy that accompanies these tragic events presents a picture of mental illness that is at best limited and at worst harmful. Indeed, statistics show clearly that people who are mentally ill are more likely to be victims of violence than to commit violence. In this course we will explore mental illness as a category of analysis that comes into being through a multiplicity of discourses, practices, and institutions. We will look at a variety of case studies about the experience and event of mental illness in diverse situations and communities, and as presented in a variety of genres and forms—psychological and sociological analyses, documentary and feature films, graphic and prose memoirs, and through interviews with people who deal with mental illness in their daily lives. We will explore how certain social situations—including, colonialism, incarceration, sexual violence, and trauma—produce "nervous conditions" that can be disabling. We will look at historical and contemporary diagnoses of and treatments for mental illness, as well as forms of activism, including patient-centered advocacy, anti- and radical psychiatry, and the Mad Pride and neurodiversity movements. Our goal is to expand and complicate our understanding of the biopsychosocial politics of mental illness, as well as to think broadly and creatively about effective, and even radical, ways to treat mental illness and generate personal and social health and well-being.