

Review of: "[Commentary] The “Mental Health Crisis” and the Non-Being of the Mad"

Nick J. Mulé¹

¹ York University

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- This is an important article with pertinent relevance to serious challenges we are being faced with in the realms of mental health crises (subjectively and systemically) and how we respond to such crises. The authors rightfully acknowledge marginalized populations that are systemically targeted, a brief history of the discipline of psychiatry and its theoretical premises. They then delve into select theories that provide foundational critical analyses, premising their position on Butler’s concept of ‘Non-being’ and its implications of ungrievability. The powerful role of psychiatry and its engagement in the politics of death is examined, before concluding with the argument for the abolition of psychiatry.
- “... state-based killings often take place without public scrutiny or interest” appears to be contradicted in the next paragraph (11) with “Almost like clockwork, following such state-based killings, politicians, police services, correctional institutions, and psychiatric institutions apologize, conduct internal investigations, pledge to implement various sets of recommendations, and promise to improve their relationships with communities” (para. 12). This needs to be fleshed out further with regard to systemic powers and public framings of state-based deaths often by killings.
- Populations focused on appear to be reductive, going from “Blacks, Indigenous, the poor, people considered of deviant gender/sexuality, etc.” (Abstract) to “the lives of Black persons, persons of color, and/or persons living with mental illnesses” (para. 13). The former resurfaces towards the end. Consistency throughout by referring to all would provide equal measure recognition of these varying groups and lend more credence to the argument.
- The philosophical and psycho-social theories section that delves into ontology through the works of Descartes, Lacan, Foucault, Edelman, Butler, and others is a useful rendering of positionality and how those who experience mental health challenges are pre-framed by society or the powers that be.
- In ‘The (Un)grievability of Mad Lives’ section, it would be helpful to contextualize Butler’s philosophizing of mad people as ungrievable as systemic, particularly from the perspective of law enforcement (policing) and high level professionalized mental health ‘care’ (psychiatry). In the absence of such framing, the article risks rendering invisible individuals and movements that demand the recognition of their existence (i.e., the mad movement, the queer movement, and the aptly named ‘Black Lives Matter’ movement). These caring individuals and activist movements have disrupted the ‘foreclosures’ Butler speaks of and can be recognized as such.
- Also, key to the arguments outlined is the section on ‘Psychiatry and its Politics of Death’ in outlining the early positioning, then development of the psychiatric discipline and its growing influence on the social order.
- In the last section, ‘Ontological Negation and Why Psychiatry Must be Abolished,’ the argument of the latter could be strengthened by being more explicit based on concerns regarding the former. There is also room here (if word count

permits) to circle back to the opening position of abolitionists calling for the abolition of the police, then turning to mental health supports as an alternative. With all due respect to abolitionists, a critique is warranted of such a stance, given the mental health system's dependency on psychiatry and the latter's flawed disciplinary standards.

Nevertheless, what can be argued is that in keeping with an abolitionist ethos, needed is a deep re-thinking of our existing systems (inclusive of law enforcement through policing and mental health interventions through psychiatry, among others) in addressing ontological negations and why psychiatry as we know it needs to be abolished.

- As aforementioned, the importance of this article is to call upon the reader to think more deeply with regard to the 'mental health crises' we are experiencing and to question critically our understanding of it, our responses to it, and our efficacy on both fronts. Psychiatry is heavily implicated based on the power base of the discipline and its influence on other powerful sectors. This very valid work with relevant sources could elevate its importance by making more direct links between the arguments posited and addressing complexities such as the framing of 'non-being' vs. caring individuals and social movements that have amplified the existence of the marginalized and challenging the simplistic resolve of resorting to psychiatry in abolitionist thinking.