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Postgraduate research in a sick society

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ABSTRACT



This paper argues that contemporary Western societies' fixation on different elements of capitalist production, consumption and distribution lies at the heart of the crisis in mental health and well-being increasingly experienced by individuals within key state institutions. The paper weaves together Lefebvre's and Marcuse's theoretical insights to explore the generation of (time-)spaces in contemporary societies, focussing on higher education and specifically on the lived experiences of postgraduate researchers. The insistence that welfare states, turned into workfare states, treat the symptoms through drugs and sedation, shows the reach of consumption and distribution as a means to address the problems caused by production. Against this backdrop, the paper draws on empirical data from a recent study undertaken by the authors examining the challenges to mental and physical health that postgraduate study posed at a university in the English Midlands. The obliteration of the social, cultural and political determinants of this malaise is expedient to place the onus of corrective measures on the individual through a series of self-help strategies, which again, privatise the atomised self to its lowest common denominator: the cerebral, emotional self. If the body becomes sick in industrialisation, is it any wonder the mind becomes sick in cognitive capitalism?

ARTICLE HISTORY

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Introduction

This paper interrogates how societies fixated on different elements of capitalist production, consumption and distribution ultimately generate by-products that are detrimental to the health of the individuals within them and the institutions which are often charged with being a venue of sanctuary, or at least keeping them free from harm. It presents primary data from a study on the mental health of Postgraduate Research (PGR) students in a West Midlands university in the United Kingdom, carried out in 2019. The spur for the research was the growing awareness, by supervisors of their students, of the challenges faced during their studies and the effects, affects and defects that resulted from this. The paper opens by showing how Lefebvre and Marcuse's analysis of space and the generation of 'one dimensional' individuals, atomised through overtly and covertly

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weakened social bonds and contracts, contribute to the founding of the ‘sick society’ of the title of the paper, even where ‘standards of living’ have increased.

Following this conceptualisation, the paper continues to analysis and discussion of primary data from the study of the mental health of PGR students. The insistence that welfare states, in becoming the workfare state, treat the symptoms, namely mental ill health through drugs and chiefly sedation, shows the reach of consumption and distribution as a means to address the problems caused by production and especially that of the production of knowledge, which our postgraduate students are charged with generating. They do so irrespective of the spatial dissonance or temporal arrhythmia experienced on a daily basis, within calendars and deadlines, spaces and places that are not aligned for the reflection, meditation and self-awareness that is required for intellectual endeavour.

This is not a paper that abstractly dreams of a misty-eyed return to the wistfully imagined ivory towers of the past. The paper draws on empirical data from a study the authors undertook recently, examining the challenges to mental and physical health that postgraduate study posed at a university in the English Midlands. The results are grim. The embodiment of these challenges is manifest in eating disorders, self-harm, suicidal ideation and insomnia. As the findings in the second part of the paper illustrate, the accelerated academy results in the pathologization of mental ill health. Caused by the ‘sick society’ within which we all toil, individuals are then expected to right (or write/rite?) by themselves through a series of self-help strategies, which again, in a recursive action, privatise the atomised self to its lowest common denominator: the cerebral, emotional self. The brain, the known universe’s most complex organ, is turned towards the flattened spatial platforms of digital capitalism in deference to the profit motive. If the body becomes sick in industrialisation, is it any wonder the mind becomes sick in cognitive capitalism?

The authors’ intention is that this is read and the critique within reflected upon and realised in people’s daily lives, especially those who teach and learn within our institutions of higher education. These are institutions which, throughout history have been home to many of the greatest discoveries and minds of our civilisation. Let us be mindful of our civic duty and start to make a difference to the minds of those we interact with.

Flattening of space

In the revanchist renewal and revision of the social contract over the past fifty years, it becomes evident that the conceived spaces of technology, science, planning, simulation and quantification have a profound effect on individuals, communities, cultures and societies. For Lefebvre, the Marxist theorist of time-space, it is clear that ‘technology freed itself from any control’. Massive state sanctioned and corporately executed projects such as ‘housing’ strip away ties to the rhythms of the everyday found in pre- and proto-industrial cottage industries: ‘*Dwelling*, a social and yet poetic act, generating poetry and art work [which] fades in the face of housing, an economic function’ (Lefebvre 2006, 94). In 1964 Marcuse observes the leveraging of the ‘bedroom to the media of mass communication’ (Marcuse 2006, 21), first seen with newspapers and magazines, then TV and now digital media. Marcuse sees these technologies – finding their own consummation in the Internet – as the construction of a ‘space within’, the space for transcending historical

practice in a 'supreme promise of an ever more comfortable life for an ever-growing number of people' (Marcuse 2006, 26). This space, of the one dimensional human, is determined by Lefebvre as being instrumental in its form and function; this "one dimensionality" comes to pass 'in unforeseen ways, in knowledge and reality alike' as a 'flattening out not confined to a work that is scientific in intent' (Lefebvre 2006, 116). In the same volume, Lefebvre poses the question as to what special qualities a digital space might have. It is possible that he and Marcuse have already defined it.

The sociologist's eye for acute observation allied with the historical method led Lefebvre in 1981 to ponder the outcomes of states of security where '[s]tate and society as they are, create anxiety and compensate for it, that is to say, a demand for security [is] closely bound up with the need for identity and continuity' (2006: 60). This is a paradox that lies at the heart of the industrial project. Yet as identity is blurred through everyday existence in flattened spaces, both physical and digital, opportunities for reciprocation and therefore the building of relationships become more limited. Traditional relational frameworks of support, such as family, friends and comrades and extended to the 'universal' benefits system, become increasingly specialised and individualised. This is evidenced firstly in 'means testing' and then 'Universal Credit', a means tested benefit based in an etymology and ethos of loan and debt servicing, rather than benevolence. As seen in the study below, these are phenomena that are as generalised as they are individualised in the lives of postgraduate researchers, and contribute to pathologies of identity, with arrhythmia manifesting as self-harm, the not-so 'hidden injuries' of capital (Gill 2010).

The language of economic exchange, of targeted 'self-identification of the individuals with the functions which they and others perform' (Marcuse 2006, 95) is brought from production, to consumption to redistribution via taxation. These are self-identifications which fragment, but at a much earlier stage of human development as the 'special child becomes an object of specialism', not only in education, but across the spectrum of state security through 'activity leaders, paediatricians, analysts and psychologists' (Lefebvre 2006, 77). The role of states of security is nuclearised: first in deterrence, then in healthcare, then in families and then in the atomisation of the individual. No longer tied to relationships or frameworks, the individual – and especially young people – are part of networks that are as ephemeral as the flattened spaces where they spend much of their time and money.

The degree to which the dynamics of the flattened spaces affect traditional frameworks finds its logical conclusion in Stiegler's account of the special type of alienation that occurs in the flattened spaces of networks, far removed from traditional frameworks of the pre- and protoindustrial craft of cottage industries; extended families, kith and kin and friendships. The parents of a nuclear family, 'crushed by debt', were intent on killing themselves and their children at a local hypermarket, in the hope of being reunited with 'their children in a better world' (Stiegler 2006). In Stiegler's example, self-identification with objects of consumption, archetypical in the flattened spaces of the hypermarket prior to its absorption into the digital, was based around a corrupted idea of gift giving and the circulation of capital: that if the children had more goods, they would be more valued: a tragic conflation of 'to love' with 'to buy'. These are not public goods, but intensely private ones, acquired in the simultaneous hyper-mobilisation and immobilisation of the hypermarket where people circulate

atom-like around air-conditioned aisles where everything has a price: even human life. Where individuals – and even societies – attempt to give gifts out of love, or out of ‘good’, they are now defined first and last by their economic value. As Burford (2018) recognises, even where there are gifts of education – such as the production of knowledge, or a studentship to support this – there is a sense of being hurt or wounded by the cruel optimism of a better, but not guaranteed life. So in space, as with time: young people identify with the ‘industrial temporal objects’ (Stiegler 2006) of the (hyper)market, away from primary identification with the spaces and times offered by the solace and comfort of traditional frameworks of family, gift or even states of security. The malaise, sickness, anomie at the core of society leads Stiegler to the pessimistic conclusion that the flattened spatiality of everyday life is an ‘epoch which does not love itself, And a world which does not love itself is a world which does not believe in the world – we can only believe in what we love’ (Stiegler 2006). Industrial societies in their current epoch love to consume.

Even this brief overview demonstrates how the management of space and time deployed at an individual level becomes generalised in social and psychological pathologies of sickness. When talking of a ‘sick society’ it is vital to remember the role of a host of actors, human, nonhuman and inhuman in bringing these pathologies about; that their actions are reactions to society’s wider demands. Sick societies are embodied, often tragically at the level of the individual, in, through, with and especially without the frameworks, networks and relationships which provide meaning. Even where this sickness is distanced through and across space and time – and the inclination of societies to manage it through states of security – this paper’s position outlines that what can be seen at the level of the social can be seen at the level of the individual and vice versa.

Rises in standards of living have brought the specialisation of education to those who could previously not access it. This is especially the case in higher education. Yet higher education itself, as both producer, consumer and distributor of much of the scientific and technological knowledge which fuels and defines society including its techniques and technologies, social contracts and states of security, is not untarnished by this. Outcomes from university are not quantified in terms of a degree and qualified in terms of discipline. Instead, like the discretion of Universal Credit in the United Kingdom, individuals are quantified by their amount of debt and defined by qualifications for jobs that pay enough to service the debt. As seen in the research data shared below, illnesses suffered by students are less relatable to the nostalgic epicurean nature of student life and more to the pressures to perform. McLuhan (2006) famously stated that a society can be seen in the form and function, as much as the content of its media. After pay TV, there is debt TV: *Can’t Pay? We’ll Take it Away*. At the social level, politicians are selected through focus groups to manage debt edifices of quantitative easing. In flattened spaces and times this increases in urgency and gravity for the cult of the individual. Young people are familiar with debt from the onset of using digital technologies: quantified by negs, likes and upvotes; qualified by drive-by commentary in echo chambers and the aesthetics of their avatar. These are predicates that stand in opposition to universal, university ideals. So perhaps after the consumer society, the debt society? The second part of this paper analyses how these debts have come to be accrued and their effect on individuals and communities undertaking postgraduate research.

State-(higher) education restructuring and the mental health crisis

As illustrated in the first part of this paper, the historical shift from a period of welfare expansion under the aegis of Keynesianism (Mishra 1999), to a market-oriented *credo* inspired by the principles of neoclassic economics (neoliberalism) has profoundly altered the relationship between state and (higher) education, resulting in the state progressively abdicating its role as ‘the only reliable guarantor’ (Dale 2001, 273) of the public good functions of education. This, for Dale, is both driven by the ideological turn to market fundamentalism (inaugurated by Thatcher and intensified under subsequent New Labour, Coalition and Conservative governments) and precipitated by globalising trends impacting on national economic and social contexts (Offe 1997). The ensuing tensions and contradictions in an increasingly marketised higher education systems mirror the antinomy of accumulation/legitimation faced by the neoliberal state in its attempt to sustain and prioritise capital expansion over social justice, equity and cohesion. This means that all key state organisations, such as education and healthcare, are bound to directly address the three challenges confronting states in modern and contemporary capitalist societies: supporting capital accumulation, providing a context for sustained expansion, and legitimising its mode of accumulation, ‘including the state’s own part in it, especially in education’ (Dale 2001, 274). In a nutshell, as the governance activities of education (funding, regulation, provision) are increasingly tilted towards the market as the privileged coordinating institution at local, national and international scale, an equivalence of intent and purpose is firmly established between markets and educational institutions.

In the competition state (Cerny 1997) accumulation and legitimation are ‘flattened’ at a discursive and structural level (Dale and Robertson 2002), which translates in higher education systems reconfigured and re-centred to prioritise (hyper) marketisation and entrepreneurialism through competitiveness (Dakka 2019). This way the state effectively withdraws from many areas of previous social interventions, depoliticising them and reducing its legitimation role at the same time. Depoliticization, however, is not exclusively reliant on market mechanisms because state intervention in higher education is necessary to counteract the chronic market failures that have historically characterised the field (Brown and Carasso 2013). The market itself is socially and politically ‘instituted’ as Polanyi teaches us (Polanyi 1944): the oscillatory movement between state regulation (be it through traditionally centralised or arms-length governance mechanisms, such as the Office for Students in England) and commodification is not only a permanent feature of the neoliberal mode of capital accumulation and regulation, but explains the contradictions at the heart of the ongoing higher education restructuring agenda. These, in turn, arise from a combination of the latest variant of capitalism, now variously defined as cognitive (Boutang 2012), digital and/or platform (Carrigan and Fatsis 2021; Srnicek 2016), and its underpinning neoliberal ideology (Davies 2014). From these premises we can infer two preliminary claims: firstly, that mental health and wellbeing concerns in marketised (higher) education systems should not be framed as exceptional or historically contingent but rather as inevitable side effects, if not as fixtures of advanced capitalist systems. This is corroborated in a recent publication by Crook (2020), charting the expansion of mental health services and its implications for the visibility of undergraduate students’ mental health in post-war British universities. The

historian argues that the current mental health crisis in British higher education should be historically contextualised, uncovering evidence of a long-standing, rather than a generation-specific concern around the mental wellbeing of students. Secondly, the recent intensification of the mental health epidemic in universities (Callard et al. 2022; Chabot 2018; Cornell 2020; Evans et al. 2018; House 2020; Kotouza et al. 2021; Levecque et al. 2017; Metcalfe, Wilson, and Levecque 2018; Morrish 2019, 2020; Pretorius, Macaulay, and Cahusac de Caux 2019; Wisker 2011), should be seen as symptomatic of a malaise rooted in the organising principle of our (sick) society. In other words, the mental health crisis-higher education nexus stands in osmotic relationship to the mental health and wellbeing crisis that is currently afflicting advanced Western liberal-democracies such as the UK, the US, Australia and Canada. That is why this paper argues that diagnoses, prognoses and potential solutions to the predicament faced by Western higher education systems are to be found at *societal*, rather than at individual or institutional level.

This claim is persuasively advanced in a recent publication (Davies 2021) that took issue with the alarmingly high and steadily increasing incidence of mental disorders affecting the UK's population (and, generally, the Global North) since the 1980s.¹ After demonstrating a direct correlation with the advent of neoliberal capitalism, the author, a Reader in medical anthropology and a psychotherapist, illustrated with detailed evidence how the excessive medicalisation of said disorders via widespread recourse to drugs (typically antidepressants) has ultimately resulted in a pathologisation of suffering. This, in turn, has produced a number of perverse outcomes, the most conspicuous of which appear to be a registered increase in long-term (if not life-long) dependency on antidepressants that goes hand in hand with a soaring demand for disability benefits and unemployment; and the increasing mobilisation of mental health discourses that seek to 'correct' (what are portrayed as) pathological attitudes in order to get people back to work. In a typical 'neuro-liberal' fashion (Loveday 2018), *individuals* are blamed for their suffering, a suffering framed as either stemming from a chemical imbalance in their brains (hence the need of medicalisation) and/or from wrong attitudes and behaviours inhibiting success (e.g. pessimism, laziness, low self-esteem), remedied by recourse to quick positive psychology and cognitive behavioural therapy fixes.

Sedated. How Modern Capitalism Created Our Mental Health Crisis (Davies 2021) offers an indicting account of how the contemporary mental health crisis has not simply been 'created' by capitalism but expertly exploited to advance the agenda of big pharmaceutical conglomerates. Benefitting from forty years of economic liberalisation and deregulation, these have accrued significant economic power that has subsequently been deployed to leverage political influence within key institutional spheres such as healthcare, work and education. The latter have been so profoundly and pervasively exposed to, infiltrated and eventually reshaped by competitive market logics that their core public functions and social justice ethos have been almost irremediably compromised. Davies convincingly argues that the mental health crisis has been mischaracterised to *depoliticise* what should have rather been considered emotional and physiological reactions to the suffering and trauma brought about by neoliberal structural inequality and societal polarisation. Through a wealth of research materials and interviews, the author takes the reader on a historical journey that chronicles the cultural, political and economic reconfiguration of the British society around the new mainstays of

neoliberalism: hyper individualism, entrepreneurialism, materialism/consumerism and self-advancement. Those incapable of attaining success and wealth in structurally unequal, inequitable, economically stratified societies – those, in other words, who will most likely somatise stress and trauma induced by objective poverty, debt, marginalisation and existential misery – are recast as the mentally ill to be *politically* neutralised, or, better, *sedated*.

Instrumental in this is the rapid development and diffusion in both public and private sector, by the mid 2000s, of mental health consultancies (e.g. Mental Health First Aid is one of the eighty different providers that can be found in England today) designed to sell mental health and wellbeing packages and training that operate as *biopolitical dispositifs* to keep workers healthy, ‘sane’ and, crucially, productive. It goes without saying that these programmes locate both the source and remedy of the worker’s distress and dissatisfaction within the self, obliterating socio-economic and environmental factors.

In a striking parallel, there are now widespread concerns about the state of mental health, wellbeing and satisfaction of academics and students at British universities. In the wake of a series of tragic students’ deaths by suicide that has occurred in recent years,² culminating in the suicide of a lecturer in Cardiff in 2018, a state of emergency regarding the mental health and wellbeing of the sector has been exposed and declared. Most institutions are now employing consultancy firms such as Mental Health First Aid (MFHEA) to train academics to spot early signs of mental health disorders, in the name of prevention. Would these programmes and this training be so popular, asks Davies, if they:

encouraged employees to critically reflect on the conditions of their working life? Imagine asking a line manager to pay for a well-being course that tries to raise awareness of the various ways in which modern work can make you feel miserable and hopeless. Imagine their paying for a course that teaches that the growing crisis of worker distress has less to do with an epidemic of mental illness than with an epidemic of worker dissatisfaction and disengagement brought about by a host of factors, from flatlining wages to rising wage inequality; from the increase of short-termism in the employment market to longer working hours; from the growing pressure for dual-working households to the erosion of unionised working protections; from lower job security to the rapid expansion of the service sector. (Davies 2021, 94)

Yet these programmes are proving to be a good investment for universities, schools and other workplaces precisely because they help to contain and deflect the worker’s malaise by reshaping the narrative about the causes of distress (lack of physical exercise? Poor diet? Irregular sleeping habit? Negative outlook?) and by effectively ‘removing difficult work experiences from the domain of public discussion’ (Davies 2021, 103).

In line with the ‘spirit of new capitalism’ (Boltanski and Chiapello 2007, 2018) a new perverted alliance is thus forged that enables capitalist reproduction: individualisation, medicalisation of distress and depoliticisation. The same line of argument is also found in Nikolas Rose’s seminal text (Rose 2019) where he questions the deliberate obfuscation of the social determinants of distress, unhappiness and anxiety. His invitation to ‘rise up against the organisation of misery’ (Rose 2019, 42) originates in the urge to reclaim a language that relocates ‘stressful experiences’ and toxic anxiety away from the illness or malfunctioning of individuals and back to the social, political and cultural environments where they belong.

After establishing that mental health problems are endemic to advanced Western capitalist societies and an integral feature of the ongoing restructuring of the British higher education system ‘in the age of digital capitalism’ (Callard et al. 2022), we now briefly turn to examine the claim that the mental health and wellbeing agenda in British universities is used to surreptitiously intensify the HEIs’ exposure to market forces and mould subjectivities by fostering ‘motivational ecologies’ (Kotouza et al. 2021) geared towards self-monitoring and rehabilitation from the deleterious effects of the accelerated academy in the sick society. Two important studies recently published by Callard, Kotouza, Garnett and Rocha deploy network and discourse analysis to unearth the policy assemblages (social actors, technologies, institutions, discourses) through which the crisis is addressed. Their analysis reveals the rapid expansion of markets in digital therapeutic technologies administered via digital applications. These operate as disciplinary techniques powered by metrics and data analytics, grounded in and justified by the ideological tenets of behavioural economics and positive psychology. Their overall conclusion is that ‘mental health as a problem for UK universities has come to be largely defined through the outcomes of “resilience” and “employability” and is addressed through markets that enable training, monitoring, measuring and “nudging” students and staff towards these outcomes’ (Kotouza et al. 2021, 2). The researchers invite further investigation into the role of university infrastructures and frameworks in tackling (or reproducing?) the mental health crisis. The rapid implementation of digital technologies (and the implications for the use of data) and the increasing connections forged between HEIs and corporate actors demand urgent scrutiny, if anything because they are contributing to the modelling, conceptualisation and control of a narrative about mental health that favours individualisation, medicalisation of distress and the depoliticisation of the issue.

Postgraduate mental health: time, space and the production of (academic) subjects

Against this backdrop, we now focus specifically on the experience of postgraduate students within universities. The choice is motivated by two factors: on the one hand there is a wealth of evidence drawn from international studies that demonstrates a worryingly high incidence of mental health issues (especially anxiety and depression) amongst doctoral students worldwide. To cite just a few examples, Levecque et. al. in a survey of 3659 PhD Belgian students revealed that ‘32% of PhD students are at risk of having or developing a common psychiatric disorder’ (Levecque et al. 2017). In 2014 the University of Berkeley Graduate Assembly disclosed that ‘47% of PhD students score as depressed’ (UC Berkeley Graduate Assembly 2014). Evans et al. (2018) conducted a survey of 2279 postgraduate students from 234 institutions in 26 countries which confirmed that 39% experienced depression. What emerges is a dark picture that voices a ‘cry for help from graduate students from across the globe who struggle with significant mental health concerns’ (Evans et al. 2018, 282).

On the other hand, mirroring the predicament of the university as ‘anxiety machine’ (Morrish 2019) we argue that postgraduate students, inhabiting a liminal space, not only absorb and reproduce the affective and psychic environments discussed above (Cornell 2020; House 2020; Metcalfe, Wilson, and Levecque 2018; Wisker 2011). They come to experience, from an early stage, a ‘cognitive dissonance’ between the ideals of academic

freedom, open-ended inquiry, speaking truth to power and public responsibility – that constitute the essence of ‘academic vocation’ – and the harsh reality that ‘the very tools of critique and analysis that academics use to understand the world around them are simply not able to be applied in any meaningful way to their own employment circumstances’ (as recently reported in an article on Times Higher Education (Ross 2022)). This arguably impacts on the doctoral students’ sense of vocation, worth and integrity at a crucial time of ‘academic subjectivation’ (Bendix Petersen 2007), exacerbating a growing sense of unease towards an institution that now, more than ever, is under attack on account of its capitalist, patriarchal and racist roots and legacies (Meyerhoff 2019).

That is why it is crucial to examine how current postgraduate students negotiate these tensions, as they *become* academic through the making and re-making of their social and intellectual practices in their *everyday life*. Let us consider, for example, the double-edged nature of the freedom that usually accompanies the doctoral journey in the form of an exploration of the research topic of choice. Students perceive it as a liberating and exhilarating experience but often cast it as an overwhelming feeling, especially when looming deadlines impose a symbolic, material and recurring reckoning on the *times* and *spaces* of their becoming ‘academic’. These contradictory feelings are increasingly aggravated in the contemporary *accelerated* academy (Bennett and Burke 2017; Cannizzo 2018; Rosa 2010, 2017; Vostal 2016), where ‘time has metamorphosed into a commodity whose depletion is a source of anxiety’ (Chabot 2018, 32) and the ‘locational complexities of doctoral work’ (Middleton 2010, 185) remind us that space is ‘omnipresent as an unquestioned category in everything we do’ (Harvey 1996, 267). As time and space produce and are in turn produced by social practice (Lefebvre 1991, Lefebvre 2004), a closer look at the quotidian life of doctoral students allows us to shine a light on the fraught genesis of (academic) identities, observed in their incessant negotiation and imbrication with peers, supervisors, the institution, and, by extension, the higher education sector and society.

As the literature throughout this article details, there are useful studies which critically engage with the experience of doctoral students. These remain, in the UK at least, small scale or, having a psychological focus, do not seek to address sociological root causes. The net result is that a flattened, cruelly optimistic accelerated academy functions at the behest of the political economy where it seeks to replicate ends orientation (e.g. employment, achievement in the form of attaining a doctorate) or overlooks or omits the source problems of university education: that for as long there is a ‘sick society’ the institutions which reflect and drive this will merely be a function or symptom rather than a solution to these problems. This article, while sensitive to this literature, articulates how and where these overlooked root causes operate and will go on to suggest the application of some practical salves. This is achieved firstly by comprehending the scale and intensity of the problem, situating it within the scope of the society of which it is a part and then by making individual, collective and cultural changes to students’ everyday lives to ameliorate the timespace pressures of doctoral study.

In this respect, a recent research project conducted by the authors on the doctoral population of a teaching intensive university of the West Midlands (2019–2020) sought to explore, identify and assess the experiences of postgraduate students in relation to mental health and wellbeing through a spatio-temporal lens. We were interested in examining how the doctoral research process is perceived through the *lived* experience

of the doctoral students, understood as part and parcel of a wider community of students and staff, at once co-producing and being affected by the time *and* space of their doctoral work. Conceptually drawing on Henri Lefebvre's *Rhythmanalysis* (Lefebvre 2004), *The Production of Space* (Lefebvre 1991) and the author's previous work on rhythms, doctoral academic writing and education (Dakka 2021; Dakka and Wade 2018) we adapted and applied Lefebvre's theorisation on space, time and (bodily) rhythms to the quotidian experiences of doctoral students. A closer look at the intersections between linear times/conceived (bureaucratic) spaces and cyclical times/lived spaces in the everyday life of doctoral students thus informed the aims, methodology and recommendations of the study, shining a powerful light on the enmeshment of the psychological, social and biological 'compromises and disturbances' experienced by postgraduate students on a daily basis.

Data collection methods

The project and results presented here were made up of two consecutive phases and carried out in the calendar year of 2019. In the first phase, a questionnaire with Likert scale questions and free text responses was distributed to all PGR students ($n = 542$) at a university in the West Midlands. A 34% response rate ($n = 186$) was achieved. Respondents provided background data and an initial evaluation of attitudes and experiences in relation to the doctoral process. Respondents were drawn from a catholic spectrum of disciplines. The university has four faculties; these include disciplines drawing from (but not limited to): arts (e.g. English literature, fine art, jewellery); humanities (e.g. sociology, criminology, law); STEM (e.g. computing, health, engineering) and vocational (e.g. nursing, teacher education, construction). Doctoral candidates include both existing staff and external candidates, studying on both part-time and full-time pathways.

In the second phase, three separate focus groups (FGs) were held twice across the university (a total of six FGs: two sets of three on each campus e.g. FG 1B is the second instance of the first FG). A selection of the findings from the three FGs with students is presented below. The three focus group formats are detailed as follows:

- FG 1 - 'World cafe' method. Participants were encouraged to write out their thoughts on a large piece of paper responding to general prompts which reflected the theoretical framework of the research project:

- (1) What are the rhythms involved in PGR study?
- (2) Do these rhythms lead to stressor points in the life course of the PGR?
- (3) Can rhythms and stressor points be managed through the social relationships (e.g. supervisor-student) and institutional support?

- FG 2 - Valeix's vlog (2019). The participants were shown a short vlog from a recently graduated student from University of Sussex (Valeix 2019). In her account, Valeix provided quantitative and qualitative self-efficacy of her experience during the fieldwork and writing-up phase of her Doctorate. Participants at the FG were asked to consider how they would respond to Valeix as peer, what the

University could do to support her, specifically from a supervisory, student services and student body perspective.

- FG 3 - Institutional response. The team asked specifically what the University should be doing for students at the university to improve their mental health and wellbeing. Some of these recommendations were taken forward into practical action and are outlined in the conclusion.

Focus Groups were considered an appropriate method of data collection as they allowed experiential and conversational exchanges among students. Discussions were tape-recorded and moderated by the research team, deliberately opting for minimal interventions, to facilitate a participant-led interaction and minimise positionality and power dynamics traditionally associated with qualitative methods (Wilson 2006; Kitzinger 1994). The social composition of the FGs reflected the university's diverse student body, ensuring a balanced representation of characteristics such as gender, age and ethnicity. Group size varied but an average of eight participants per session ensured an interactive group dynamic.

Data was collected by the authors between March and September 2019 and was carried out in line with full and appropriate Ethics Committee approval. Findings below are taken from FGs with students. As in the original project, which was fully anonymised during data collection and analysis, no identifying data is given.

Findings and discussion

Indicative Questionnaire Data

62.4% of respondents to the questionnaire identified with being female. 32.3% identified as male. 5.4% preferred not to say. This is relevant, considering that, according to Evans et al. (2018), 'female graduate students are significantly more likely to experience anxiety and depression than their male graduate student counterparts' (Evans et al. 2018, 282). This, in turn, could be aggravated by the choice of study: a high number of students are engaged in Arts and Humanities programmes, another leading indicator in psychological distress with 64% of these students scoring as depressed when enrolled on Arts and Humanities programmes (UC Berkeley Graduate Assembly 2014).

The majority (80%) of the PGR community of students are aged between 18 and 50. Age is not significantly associated with incidences of mental health (Levecque et al. 2017). Over 76% are classed as 'home' students, i.e. from the UK, with 23.1% from overseas. The difficult transitions involved in the socialisation of overseas students, which come from new language acquisition, moving country and integrating into a new culture are seen as problematic for doctoral students, especially where the mode of education and frameworks for progression and assessment can be different from their country of origin (Gardner 2010, p. 74). Over 2/3 (70%) of doctoral students are part time, with the split between professional doctorates (e.g. Educational, DBA) and PhD around even.

Focus Groups

Meeting deadlines, handing in work on time and attending meetings at set times and dates reflect the institutional expectation that the doctoral process will unfold along an abstract, linear time-space continuum punctuated by markers of doctoral progressions (e.g. Progression Assessment Panel, Annual Progress Review and so on). If social acceleration and time scarcity are trademarks of modern times (Rosa 2017; Wajcman & Dodd 2017), the accelerated academy (Gibbs et al. 2015; Vostal 2016) can be seen to impact on the mental health and wellbeing of staff and students through time compression, speed and ‘projectification’ (Ylijoki 2015). Chabot reinforces the point when asserting that ‘the dominant theme of modern society is adaptation to temporal norms, to calendars, deadlines, timetables, meetings’ (Chabot 2018, 32). Not surprisingly, doctoral students are often caught between the need to abide by regulatory frameworks, with their imposed linear trajectories, and the irrational, non-linear times and spaces of intellectual production:

Though I have taken my PhD as a job and I sit at that desk every single day, it’s long, it’s a marathon. It’s a marathon. It’s hard going and all the feelings of feeling guilty and not being able to, I don’t know, complying to the expectations that you have on top of you. I don’t know if they are imagined or they are not. (Participant 4, FG 1A)

Time pressure and time management recurred in all the doctoral accounts as acute sources of stress for the students. For those studying part-time or having experienced a major life event during their study, in particular, negotiating and protecting study time while balancing professional and personal commitments was a real challenge. Here, the contrast between the abstract, Cartesian, conceived space (Lefebvre 1991) of the regulatory framework (deadlines and milestones) and the lived time-space of the doctoral students appeared stark. The students expressed the need to feel acknowledged and valued as *individuals*, especially when juggling competing demands and trying to harmonise clashing rhythms.

Discussions with the doctoral students stressed the importance of understanding the times and spaces of doctoral work in their *lived* complexity, that is as *rhythms* characterised by different qualities:

So, if you’ve got your period what cycle the moon is in. I don’t know about you but I notice full moons. Maybe a wolf thing, I don’t know. Whether or not you slept the night before, whether . . . all these other contributing factors that on their own you think, oh, I just didn’t sleep very well last night, but in actual fact when you’re so immersed in something that’s so big, [the doctorate] oh my God, it’s, you know, be all and end all. (Participant 2 FG 2B)

Earmarking specific days in the week and/or squeezing hours in the calendar between professional appointments and personal commitments are not a sufficient guarantee that the students will be able to enjoy the immersive experience they need in order to read or write. In other words, doctoral writing – indeed any form of intellectual production – is often subject to what Cannizzo terms ‘the irrational pace of craft-time’ (Cannizzo 2018). Hence the importance of finding one’s rhythm, to impose a ‘structure’ on the often petrifying freedom that separates the students from their next deadline. The ‘loss’ of rhythm and the disorientation experienced by the student who feels suddenly ‘thrown

into the PhD' resonated with the – mostly negative – experience of the majority of the students, with the noteworthy exception of those students who embarked on lab-based PhDs. They effectively experienced the doctorate as a nine to five job, with a clear structure and rhythms dictated by the lab activities. Relatedly, they reported lower levels of anxiety in their daily lives. Yet this transition can be problematic to those not undertaking lab-based work, with the following showing the disconnection:

So before I came to the PhD, I had a typical . . . not nine to five job, as such, it was a bit flexible, but there was some kind of rhythm, there was some kind of pattern. You know, you wake up in the morning, off you go. If you're going to the gym, then you have to show up early. There was rhythm, there was a pattern (Participant 6 FG 1A)

Rhythm does not simply refer to the structure of experience (Chen 2017), but, in Lefebvre's rendition, represents a *gestalt* sense that foregrounds the body in its multiple perceptive interrelations. The clash between cyclical (natural) and linear (imposed) rhythms generates disruptions that are felt by and through the body, with physical and emotional consequences. As Lefebvre puts it: 'The body. Our body. So neglected in philosophy that it ends up speaking its mind and kicking up a fuss' (Lefebvre 2004, 30).

I've lost count of how many days I've not been working and I've had to take an interruption of study, partly because I have a slipped disc, but mentally, having that disruption as well, from a physical perspective, and you mentioning mind/body, I have fibromyalgia, so for me, I get flare-ups. And I don't sleep at night, I get restless leg syndrome. I've never had insomnia in my life, but I do now. But I agree with [male participant], I bite the inside of my mouth, I bite my fingers, very self-destructive behaviours, and something that's usually actually rhythmic as well, I find very soothing. (Participant 5 FG 2B)

Biting lips, severe insomnia, broken teeth and eating disorders revealed the shocking extent of the emotional and physical discomfort endured by the participants during their doctoral studies. During the second FG, PGR students were shown a short vlog created by Sophie Valeix (2019), at the time a doctoral student at Sussex University, who recorded and synthesised her changing moods in the seventy days leading to the submission of her thesis. In her account, Valeix provided quantitative and qualitative self-efficacy of her experience during the fieldwork and writing-up phase of her doctorate. Valeix's reflection is both powerful and touching and participants at the FG were asked to consider how they would respond to Valeix as peer, what the University could do to support her, specifically from a supervisory, student services and student body perspective.

Scoring mood in apparent relation to productivity, each segment was a vivid portrayal of the physical – indeed physiognomic – and emotive traces left by the intense and disruptive rhythms marking the final stretch of her doctoral journey. Exhaustion, anxiety and guilt dominated her moving account. Not only did the students fully identify with Valeix's intense chronicle, but they accepted and internalised those traumatic feelings as 'what's expected in a PhD' (Participant 6 FG 3B) almost depicting it as a rite of passage to determine if one has the inner strength it takes to *survive* it. Another striking finding was the students' acute awareness of their own mental and physical states and the coping strategies they put in place to prevent or counteract recurring crises.

So I'm in the Life Sciences and she came in and we were talking about being very tired and what to do. And she said, it's this PhD, you are bound to your body, you are bound to your body. And I was like, indeed, undo mine. And were talking about, in the last year, I have

broken three teeth by munching in the night. That's the level of anxiety. (Participant 3 FG 2B)

Many recognised the importance of physical exercise and a healthy diet for their well-being, yet exposed the challenges of maintaining such routines due to either a sense of isolation and loneliness or a difficulty in reconciling professional and personal lives with the rhythms of doctoral studies.

These findings echo the concerning results presented in previously published reports that specifically addressed the mental health condition and wellbeing of the doctoral community (Cornell 2020; Metcalfe, Wilson, and Levecque 2018; Wisker 2011). In a recently published study, for example, Watson and Turnpenny (2022) summarise and review research that has evaluated interventions or institutional changes aimed at supporting PGR mental health and wellbeing. They recommend five areas of development (at individual and institutional level) that resonate with our considerations and conclusions: PGR community building, including student-led initiatives and various training events; use of complementary virtual communities through social media platforms; dedicated mental health services and interventions designed to foster personal development; a focus on the quality of the supervisory relationship and the need to include emotional support in supervisory training; and peer support and mentoring that should go hand in hand with adequate resourcing and specialist knowledge/skills. When the authors discuss potential barriers to the implementation of these interventions, they highlight a combination of individual, organisational and wider socio-political constraints. In this paper we identify the socio-political context as the ultimate source of the dominant societal and political norms, values, aims and relations that percolate inside educational organisations creating strong barriers to meaningful change:

Values, such as maximising student numbers, minimising resource use, world class research, financial survival, may be explicitly expressed or implicitly assumed. There may also be different conceptions of wellbeing and associated causes of poor mental health. For example, some may believe problems are mainly caused by individual lack of resilience, while others may look to a social conception of wellbeing. (Watson and Turnpenny 2022, 1974–75)

This affirms our view that the dominance of corporate, competitive values originating in the ideology of the market fundamentally contribute to individualise and pathologise the root cause of ill-being and malaise produced by its own inhuman practices (e.g. fetishised competition, accountability, surveillance), *de facto* thwarting any institutional or individual attempt to ameliorate the conditions of co-existence in the university.

This indicates an urgent need to confront the thorny issue of *research culture* within Western, marketised universities, as the widespread mental health 'epidemic' attests. In other words, so long as the challenges of the doctoral process are framed in terms of a rite of passage, a necessary hardship handed down from one academic generation to the next, students and staff will remain complicit in the reproduction of a toxic cult(ure) of 'busyness' that breeds anxiety and guilt. Burford (2018) sheds further light on the complex affective layering that characterises doctoral education in a study that examines contemporary doctoral aspiration. Mobilising the queer theorisation of affect found in Lauren Berlant's *Cruel Optimism* (2011), he reveals how unconscious fantasies and hopes about 'the academic good life' (e.g. job security; social mobility; less stressful work; refuge for the unconventional subject) continue to shape doctoral aspiration through wounded

attachment in spite of ‘the depressing scene that academic work projects for doctoral students’ (Burford 2018, 487). Here, it is worth pausing on the implications of a relation of cruel optimism to the object of one’s desire:

What makes this affective structure cruel is that the thing one desires and develops attachments to (such as the idea of a ‘secure’ job in the academy, or the university as a ‘retreat’ from stress) may in fact be ‘an obstacle to your flourishing’ (p. 1). This ‘double-bind’ means that ‘massive loss is inevitable if you stay or if you go’ (Berlant, 2012, p. 1). Understanding the double-bind of potential loss may get us closer to why it can be so difficult for students to re-mould existing forms of attachment to the PhD. (Burford 2018, 499)

As the wounded attachment to an unattainable fantasy becomes ritualised in the everyday miseries of vexed doctoral students (and fellow academics), we can recognise the conditioning power of dominant norms and values reaching the sphere of the unconscious and manifesting themselves in the guise of the physical and mental illness we have illustrated so far. In that sense, this article goes a step further than arguing that we need a better grasp of the ‘complexities of subjective life’ (Burford 2018, 499). There is a real urgency, we think, to *model more balanced forms of co-existence collectively and deliberately* (life within the university, life of the mind, life outside the university) to erode the dominant *zeitgeist* in higher education from within. This finds resonance with Lefebvre’s notion of a ‘pedagogy of appropriation’ (Middleton 2016), whereby teachers and learners seize, co-produce and dwell in the *times* (critical moments) and *lived spaces* of their learning.

Conclusions

I want to argue that it is necessary to reframe the growing problem of stress (and distress) in capitalist societies. Instead of treating it as incumbent on individuals to resolve their own psychological distress, instead, that is, of accepting the vast privatisation of stress that has taken place over the last thirty years, we need to ask: how has it become acceptable that so many people, and especially so many young people, are ill? The ‘mental health plague’ in capitalist societies would suggest that, instead of being the only system that works, capitalism is inherently dysfunctional, and that the cost of it appearing to work is very high.

(Fisher 2009, 19)

Like Fisher, we have argued that capitalism is an inherently dysfunctional system that produces and reproduces the mental health crisis currently ‘plaguing’ our societies. The higher education system and within it, postgraduate education provide a cross-section of the structural, cultural and systemic issues arising from the distortions of late capitalism (e.g. precariousness, hyper-productivity, poverty, alienation, marginalisation, discrimination). These are the social determinants of the malaise that afflicts staff and students in universities (and elsewhere). Therefore, separating discourses around the mental health crisis and wellbeing from their socio-political and cultural origins unwittingly continues to locate the blame on *individuals* for their alleged inability to cope with stressors, instead of placing the burden of remedial action on the collective.

We have also offered a close theoretical examination of the transformation of relations between state, capital and (higher) education at the turn of 21st century from the multi-disciplinary perspective of political sociology, exposing the inner

tensions experienced by highly marketised (higher) education systems as they increasingly sacrifice their societal function on the altar of capital accumulation and expansion.

The findings from a recent exploratory study conducted by the authors on the doctoral population of a teaching intensive university in the English West Midlands (2020) corroborated the conceptual framework with painful accuracy, revealing how the origin of the academic malaise we have been witnessing and experiencing (often first hand) stems from a fundamental ‘arrhythmia’ that pits the values, ethos and integrity embodied by academics and students *against* those advanced by their institutions, causing the former to experience constant unease and discomfort *vis-à-vis* their everyday (institutional) lives. Following the completion of the project, the researchers advocated on behalf of the participants to the senior leadership team at the university, where it was recognised that the mental health and wellbeing of postgraduate researchers was as important – and their health perhaps precarious – as that of undergraduate students. This encouraged the university to train all supervisors in ‘mental health first aid’, providing training to identify areas of stress and susceptibility in the doctoral journey, so that supervisors are able to provide information, advice and guidance to those in need. Anterior to this, the university’s pursuit of accreditation via the mental health charter prioritised the inclusion of postgraduate students in working groups to reflect their importance to the university community. The researchers have also set up a group in co-operation with the Sunkhronos institute in Switzerland (founded and directed by Prof. Michel Alhadeff-Jones) that explores the rhythms of higher education study and work and how these can be best framed to the betterment of individual, collective and cultural well-being.

In light of these practical outcomes, we argue that the first step towards recomposing this fracture lies in a *collective politicisation*, as opposed to a pathologisation, of suffering. This means, for instance, acknowledging that the experience of acute stress in response to toxic environments and cultures represents a natural, *healthy* reaction. Labelling it as pathological conveniently shifts the blame away from the pathogenic system that has caused it in the first place.

By drawing attention to the production and, crucially, the *appropriation* of space and time in the everyday life of postgraduate students, we suggest a focus on their lived experiences as the only possibility for meaning-making: a place and time for teaching and learning that begins and ends with the rhythmic enmeshment of students, staff and their material and immaterial creations.

Notes

1. According to James Davies (2021), in Britain today more than 20% of the adult population takes a psychiatric drug in any one year, marking a whopping 500% increase in prescription since 1980. Alarming, despite the soaring rate of prescriptions, mental health issues apparently continue to increase in number and gravity.
2. According to TheTab (<https://thetab.com/uk/2017/04/13/number-suicides-took-people-listen-37297>), the number of students’ deaths by suicide at British universities rose exponentially from 30 in 2013 to 134 in 2015.

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