

**THE PERIPHERALIZATION OF STRUCTURAL REALITIES:  
A CRITICAL SOCIAL THEORY OF WELL-BEING**

**TANNER REID LAYTON**  
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TANNER REID LAYTON

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Dr. Kim Mair Supervisor	Assistant Professor	Ph.D.
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Dr. Kara Granzow Thesis Examination Committee Member	Assistant Professor	Ph.D.
---	---------------------	-------

Dr. Tom Perks Thesis Examination Committee Member	Associate Professor	Ph.D.
--	---------------------	-------

Dr. Catherine Kingfisher Thesis Examination Committee Member	Professor	Ph.D.
---	-----------	-------

Dr. Muriel Mellow Chair, Thesis Examination Committee	Associate Professor	Ph.D.
--	---------------------	-------

*For Grandpa Wally.*

## Abstract

In recent years, expectations to pursue happiness have shifted to well-being—a concept that has been increasingly taken up by the field of positive psychology and mental health organizations in North America. I use critical discourse analysis to examine four mental health and well-being texts: Martin Seligman’s *Flourish*, a Bell Let’s Talk advertisement, and two Canadian Mental Health Association brochures. By embodying traces of the eudaimonic tradition that links well-being to particular ways of living, ways of thinking, and emotion management, these discourses psychologize and individualize emotion by producing a depoliticized, responsible, and normative subject. With their insistence on responsibility, balance, and resiliency, I argue that these discourses support neoliberalism and its inherent violence by disciplining readers to think of their emotions primarily in individualized terms. By doing so, these discourses center mental health in a way that renders ongoing structural inequities peripheral to the cultivation of personal well-being.

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## **List of Abbreviations**

CBC – Canadian Broadcasting Corporation  
CMHA – Canadian Mental Health Association  
HHS – Department of Health and Human Services  
NIH – National Institutes of Health  
NIMH – National Institute of Mental Health  
PERMA – Positive Emotion, Engagement, Positive Relationships, Meaning, and  
Accomplishment  
WHO – World Health Organization

## Introduction: ‘Happiness Blooms From Within’

“You ask *Why* to a lot of things and you’ll wind up very unhappy indeed if you keep at it”

— Ray Bradbury, *Fahrenheit 451*

I was walking through a home and garden centre this summer when I came across a sign that caught my attention; the sign read: ‘*happiness blooms from within.*’ It reminded me of a similar sign that, to this day, hangs in my childhood home; this sign reads: ‘*bloom where you are planted.*’ The two signs, taken together, can carry with them any number of meanings; however, in the context of this project, I found them profoundly illustrative of contemporary conceptions of emotion, generally, and, of happiness and well-being, in particular. What strikes me about the former sign, despite its floral metaphor, is its accurate and succinct alignment with dogmatic psychologized perspectives of emotion. Happiness, as well as sadness, fear, surprise, disgust, despair, pride and anger, are widely discussed within psychology (as well as other scientific and popular fields) as originating universally *within* the body, the mind, the brain, the self, the soul. The notion of a stable self that experiences emotion internally and naturally pervades not only psychologized academic disciplines, but also our ‘common sense.’ What’s also apparent about the former sign is the sense that in order for an emotion to bloom it has to be cared for, nurtured, managed, cultivated—but this care and management, the sign indicates, occurs internally; it happens *within* the self. What this sign seems to conceal is that only a limited amount of blooming can take place on the inside.<sup>1</sup> Without the sun and sufficient amounts of water from *the world*, blooming does not and cannot take place. I am not suggesting that psychologists do not identify

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<sup>1</sup> I think the process of photosynthesis is the one I want to recognize here—please excuse my lack of botanical knowledge.

environmental, external, or social factors in the experience of emotion, but what I am suggesting is that psychology—positive psychology in particular—places a firm emphasis on ‘the inside’ regarding emotional experience and expression, while minimizing the effects of the social.

This brings me to the second sign: this sign accentuates the obscuring of water and sun in the blooming process. The sign seems to suggest that, regardless of where you are planted, your responsibility as a flower, as a self, is to bloom, to flourish<sup>2</sup>—to cope with a lack of sun and water and bloom anyway. I include these preliminary anecdotes to not only connect popular and hegemonic logics of positive emotion with psychological ones, but also to establish a problem with them. The problem is this: the knowledges and discourses that enlighten social subjects’ emotional experiences and expectations in our historical moment tend to place disproportionate weight on the individual—specifically, one’s internal states—and, in doing so, blur the social conditions, the material realities, and the structural inequities that contextualize individual experiences. In short, these discourses depoliticize emotion. At the same time, these discourses also responsabilize social actors—for example, in the imperative to ‘bloom where one is planted’—to bloom and be well despite irrefutable and extreme differences in material circumstances.

This project grew out of a concern with the widespread social practice of pursuing happiness, well-being, and mental health in North America. As Sara Ahmed (2010) argues, “[h]appiness is consistently described as the object of human desire, as being what we aim for, as being what gives purpose, meaning and order to human life;”

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<sup>2</sup> The word ‘flourish,’ we will see, directly intersects with the language of happiness, well-being, and mental health. For example, the Greek word, ‘eudaimonia’ is best translated as “flourishing”; and Martin Seligman—the father of positive psychology—will be widely discussed in this project, in particular, his book by the same title: *Flourish*.

fundamentally, she says, the “consensus [is] that happiness is the consensus” (p. 1). Ahmed also suggests that happiness is articulated simultaneously as the means to an end and the end itself; that is, when one reaches the end of a life, one ought to be happy, but the path one walks throughout life also ought to be a happy one (p. 10). This represents our modern sense, and the hegemony, of happiness: happiness is simultaneously the destination and a central part of the journey towards ‘a good life.’ Similarly, Catherine Kingfisher (2013) writes, “[h]appiness [...] is something we must actively monitor and cultivate, and, indeed, something we *must* have—a key, or, perhaps, *the* key item of desire in consumer society” (p. 67, emphases in original). This logic of happiness is exhorted in ways that frame and shape consumer lifestyles—as we can see in various advertising campaigns: the mobile phone company Koodo urges the consumer to “Choose *Happy*,” Cineplex suggests that “*Happiness* is great food and reserved seats,” the tagline at Fit4Less is “Every Body *Happy*,” Nutella tells us to “Spread the *Happy*” on a piece of bread; McDonalds targets children by offering them a “*Happy* Meal;” Bahia Principe—an all-inclusive resort in Mexico—tells us that “*Happiness* is in the savings” and that “*Happiness* always returns” when enjoying a Caribbean vacation; the bill holder at Hudson’s Pub suggests that the cost of food and alcohol is “the Price of *Happiness*,” Paris Jewellers compel us to “Believe in *Happiness*,” and although Coca-Cola has changed its tagline from “Open *Happiness*” to “Taste the *Feeling*,” we know that the feelings the corporation is hoping to illicit are unanimously positive.<sup>3</sup>

It is not just that consumer products are increasingly coupled with positive emotions; these exhortations to happiness are also utilized by the pharmaceutical

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<sup>3</sup> For a sociological critique of selling happiness, see William Davies’ (2015) book *The Happiness Industry: How the Government and Big Business Sold Us Well-Being*.

industry, the self-help industry, and are increasingly embedded in governance frameworks—for example, with the development of a Gross National Happiness Indicator—and academia—with new journals such as the *Journal of Happiness Studies* and the field of positive psychology (Ehrenreich, 2009; Davies, 2015; Kingfisher, 2013).

In recent years, the pervasive social expectation to cultivate positive emotions, namely happiness, has shifted to, and privileged, well-being—a concept that has been recently taken up by positive psychology, but is deeply rooted in Aristotle’s classical conception of happiness as eudaimonia (Guignon, 1999; Huta, 2013; Ryan & Deci, 2001). The concept of well-being, as distinct from happiness per se, has been taken up most eagerly by mental health organizations and experts and positive psychologists who argue that “[p]ositive emotion is the rock bottom meaning of happiness” (Seligman, 2011, p. 13) and that “[e]motional well-being isn’t about being happy all the time” (Canadian Mental Health Association, 2014c). Instead of happiness, well-being, from this perspective, more accurately describes what one should want out of one’s life because it “cannot exist just in [one’s] own head: well-being is a combination of feeling good as well as actually having meaning, good relationships, and accomplishments” (Seligman, 2011, p. 25). The concept of well-being, then, seems to offer an objective evaluation of the quality of one’s life, whereas the concept of happiness seems to do so subjectively. This idea will be unpacked further in Chapter 2.

The shift from an emphasis on the concept of happiness to the concept of well-being will be explored through the following critical questions: (1) How is emotion generally conceptualized? (2) How are happiness, well-being, and mental health conceptualized in particular? (3) In what ways are mental health and well-being attributed to particular ways of thinking, ways of living, and emotion management? (4) What, if

any, are the political effects of the moral and cultural expectations to pursue mental health and well-being?

I will structure these questions around four primary mental health and well-being sources: one of Martin Seligman's (2011) positive psychology exercises, two pamphlets disseminated by the Canadian Mental Health Association (CMHA) (2014c, 2014g),<sup>4</sup> and a Bell Let's Talk advertisement (Bell Canada, 2018b).<sup>5</sup>

The texts that are distributed by organizations that promote mental health in Canada and North America provide timely and illustrative instances of the tendency to depoliticize emotion. Following Jhangiani and Vadeboncoeur (2010), I will explore the ways in which the tenets of positive psychology intersect with the language of mental health and well-being and how that language is shaped hegemonically in the Canadian context.

Specifically, I will explore the ideas of Martin Seligman, who is an internationally recognized academic credited as a founding father of positive psychology. I chose Seligman because of his unique relationship with mental health organizations—his approach and mental health discourse support each other in the following ways: First, Seligman (2011) is funded by a major US mental health agency: the National Institute of Mental Health (NIMH). The NIMH (2017)

is the lead federal agency for research on mental disorders. NIMH is one of the 27 Institutes and Centers that make up the National Institutes of Health (NIH), the largest biomedical research agency in the world. NIH is part of the U.S. Department of Health and Human Services (HHS).

This link makes me wonder: whose interests are being invested in when the state is investing in positive psychology? Second, Seligman (2011) has taught the principles of

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<sup>4</sup> See Figures 1.1, 1.2, 2.1 and 2.2.

<sup>5</sup> See Figures 3.1 and 3.2.

positive psychology to university students and mental health workers worldwide; through this pedagogy, mental health workers are encouraged to implement positive psychological exercises and advice into their practices and therefore into their clients' lives. And third, as Jhangiani and Vadeboncoeur (2010) note, in 2005 the CMHA incorporated Seligman's positive psychology as its 'new' theoretical framework (p. 174), which is described as an investigation of positive individual qualities instead of a focus on how the "negative aspects" of society "affect us."

Although Seligman's work is largely produced in a US context, he is widely read and internationally respected (as we can see with the CMHA's adoption of his theoretical framework); thus, Seligman's connection with mental health research and his global readership tell us something about the overlap between the logics of mental health and the logics of positive psychology in the Canadian context.

I will analyze Seligman's exercise, the CMHA pamphlets, and the Bell Let's Talk commercial both textually and visually using critical discourse analysis (Brookes & Harvey, 2015; Fairclough, 1992, 2012; Ledin & Machin, 2015; Rose, 2007; van Leeuwen, 2008). My thesis focuses mainly on "the text;" which is the first of three levels—discourse as (1) text, (2) discursive practice, and (3) social practice—in Fairclough's (1992) conception of discourse analysis. "Text analysis," as he notes "can be organized under four main headings: 'vocabulary,' 'grammar,' 'cohesion,' and 'text structure.'" (p. 75). However, this micro-level analysis always overlaps with analyses of "discursive practice;" as Fairclough writes, "one never really talks about features of a text without some reference to text production and/or interpretation" (p. 73). My chosen texts, for example, largely draw from the same perspective, but they are delivered through different modes of presentation. Seligman's positive psychology emphasizes its authority

through credentialism and appeals to scientific knowledge, but circulates in the form of self-help books and popular websites with quizzes and activities. On the other hand, the CMHA and Bell Let's Talk draw their authority from informal means—a peer role model approach to legitimization—but are delivered through formal brochures and promotional advertising. I will explore, in part, the ways in which the uptake and consumption of these texts vary depending on their modes of presentation; that is, my critical discourse analyses will also capture elements of “discursive practice,” but will prioritize analyses of “the text” through close and careful readings.

Fairclough acknowledges, however, that “discursive practice” is not neatly distinguished from “social practice” either:

Analysis of a particular discourse as a piece of discursive practice focuses upon processes of text production, distribution, and consumption. All of these processes are social and require reference to the particular economic, political and institutional settings within which discourse is generated. Production and consumption have a partially socio-cognitive nature, in that they involve cognitive processes of text production and interpretation which are based upon internalized social structures and conventions (p. 71).

In short, then, “[i]f being a social (political, ideological, etc.) practice is one dimension of a discursive event, being a text is another” (p. 71). My analyses, although mainly concerned with the level of the text, will culminate in a critique at the level of “social practice.” As Fairclough suggests “[m]icro- and macro-analysis are therefore mutual requisites;” that is, “it is the nature of the social practice that determines the macro-processes of discursive practice, and it is the micro-processes that shape the text” (p. 86). I use the level of social practice to analyze contemporary ways of living and acting, and to critique the hegemonic production of ‘common sense’—a neoliberal ‘common sense’—that is embedded in my chosen texts.

Discourse, then, “is a practice not just of representing the world, but of signifying the world, constituting and constructing the world in meaning” (Fairclough, 1992, p. 64). I will explore the constitutive features of my selected mental health and well-being texts by utilizing van Leeuwen’s (2008) notion of the “recontextualization of social practice” as a way to, as Ledin and Machin (2015) suggest, draw “particular attention to sequences of activity, or ‘scripts’ that can be understood as the ‘doing’ of discourse” (p. 5). The sources that I have selected

can be thought of as representing knowledge of what goes on in a particular social practice, ideas about why it is the way it is, who is involved and what kinds of values they hold. They tell us why these scripts are reasonable ways of acting in the world” (p. 5).

I argue that these texts produce particular meanings that align with dominant neoliberal ideas, and the tradition of critical discourse analysis best enables me to critically explore what the texts include or exclude in that meaning making. The upshot of this, as Fairclough (1992) argues, is that social subjects’ everyday practices “are shaped in ways which they are usually unaware by social structures, relations of power, and the nature of the practice they are engaged in whose stakes always go beyond producing meanings” (p. 72). My chosen texts, at the level of social practice, reify and contribute to the active making of hegemonic neoliberal ideas and everyday practices. In other words, the CMHA, Bell Let’s Talk, and positive psychology will be theorized as deploying hegemony (Fairclough, 1992). Although the link between positive psychology and neoliberalism has been made in scholarship (Ahmed, 2010; Christopher & Hickinbottom, 2008; Ehrenreich, 2009; Fernández-Ríos & Cornes, 2009; Ferguson, 2007; Jhangiani & Vadeboncoeur, 2010; Kingfisher, 2013), my work uses discourse analysis to elaborate how those linkages are established and shape everyday practices.

I draw from Henry Giroux's (2004) definition of neoliberalism:

Neoliberalism is an ideology and politics buoyed by the spirit of a market fundamentalism that subordinates the art of democratic politics to the rapacious law of a market economy that expands its reach to include all aspects of social life within the dictates and values of a market-driven society (p. xxii).

In other words, neoliberalism is a set of governing practices whereby “markets are touted as the driving force of everyday life, [and] big government is either disparaged as incompetent or threatening to individual freedom, suggesting that power should reside in markets or corporations rather than in governments or citizens” (p. xiv). “Under attack,” therefore, “is the social contract with its emphasis on with enlarging the public good and expanding social provisions—such as access to adequate health care, housing, employment, public transportation, and education” (p. xv). He argues that, in a neoliberal order, the welfare state and social programs are replaced, instead, “with a notion of national security based on fear, surveillance, and control rather than on a culture of shared responsibility” (p. xv). “In short,” under neoliberalism, “private interests trump social needs, and economic growth becomes more important than social justice” (p. 106). Moreover, and of particular importance to this project, is that the governing practices that neoliberalism proposes assume that social and political health and well-being necessarily follow from the *individual* pursuit of health and well-being (Harvey, 2005). This goal is often conceived through the lens of a central neoliberal belief: to take personal responsibility for any and all circumstances, situations, and realities. As Brookes & Harvey (2015) articulate,

[s]uch an individualist stance arguably reflects the neoliberal approach to public health whereby the onus for well-being is placed firmly on the shoulders of the self-determining citizen, a corollary of which is to absolve the government of responsibility towards the health of its citizens (p. 59).

I am concerned with the ways that social subjects might conform to this neoliberal conceptualization of well-being and mental health in Canada. Therefore, I will discuss the ways in which my selected texts reproduce this same conceptualization of well-being. I understand that the appeal of these discourses and their advice seem obvious: Doesn't everyone want to be happy? Doesn't everyone want to be well? I want to defamiliarize us from this 'common sense;' I want to disrupt the notion that well-being is intrinsically good and instead suggest that utilizing mental health advice to foster personal well-being through emotional management techniques may serve particular neoliberal interests. In other words, I am interested in exploring the decontextualized expansion of emotional suffering in these discourses rather than with producing a critique of mental illnesses that have detrimental and damaging effects on individuals' lives. Instead of focusing on resources that address severe or particular instances of mental illnesses, the sources that I have selected seek to advise individuals on how to view and manage their emotions in the routines of everyday life through discourses that center the subject in such a way that social and political inequities get pushed to the periphery, and subjects are asked to frame their emotions in purely psychological language. In fact, neoliberalism works by rendering these structural factors as peripheral—this peripheralization is a way that the discourse of neoliberalism coheres with discourse of mental health and well-being. Like Didier Fassin (2012), I will critically examine the tendency to apply suffering equally across all subject positions while eluding their structural causes—a tendency that fits nicely into a neoliberal order where “individuals are unable to translate their privately suffered misery into public concerns and collective action” (Giroux, 2004, p. 128).

## Brief Outline of Chapters

Emotions have been conceptualized and theorized in multiple ways within and across disciplines. What are emotions? How do they manifest in subjects? These are not simple questions, however, there is ample literature that seeks to answer them. In Chapter 1, I will present what I see to be the key theoretical frameworks of emotion to give the reader a sense of how emotion is understood more broadly as well as the similarities and differences therein. These perspectives on emotion roughly take two forms: those perspectives that locate emotion *within* subjects and those that find emotion *outside* of subjects. Following Ahmed (2004), I characterize these perspectives respectively as ‘inside out’ and ‘outside in’ models of emotion. This elaboration shows that, by locating emotion in interiority or exteriority, these influential theories render emotion as a dead and apolitical object. In doing so, I argue that it is crucial to think of well-being through a political lens, and to think critically about the centering of a subject whose emotional experience occurs ‘on the inside’ or is moved by external forces. Therefore, it will be shown that, while sociological theories have challenged the interiority of emotions, they have also tended to center the subject or elide political contexts to the extent that they still have emotions contained, if not originating, in the subject. Ahmed encourages us to think critically about this centering because the social structure and the ongoing violence of neoliberalism get concealed. By violence here, I refer to Giroux’s (2004) critique:

Under the culture and politics of neoliberalism (despite its tensions and contradictions), society is increasingly mobilized for the production of violence against the poor, immigrants, dissenters, and others marginalized because of their age, gender, race, ethnicity and color. At the center of neoliberalism is a new form of politics [...]—a politics in which radical exclusion is the order of the day, and in which the primary questions no longer concern equality, justice, or freedom but are now about the survival of the slickest in a culture marked by fear, surveillance, and economic deprivation (p. xxii).

These theories of emotion not only rely upon the radical exclusions to which Giroux refers, they produce gaps where the “primary questions” regarding “equality, justice, or freedom” should be. These gaps have violent political consequences—especially when these theories of emotion are unproblematically reproduced in the texts that I have chosen to analyze. The violence to which I refer is not of the same order as physical violence, but rather rationalization and support for violence made through institutional, political, and structural means. I will build upon this critique throughout this thesis.

Therefore, Ahmed’s (2004) conceptualization of the sociality of emotion will inform my analyses of popular psychology—as presented in Chapter 2 in the work of Seligman—and of mental health discourses—as presented in Chapter 3 in the literatures that the CMHA distributes, as well as an anti-stigma, awareness-raising, promotional campaign by Bell. The sociality of emotion rejects the ‘inside out’ and ‘outside in’ perspectives on emotion since it understands emotion itself as playing a role in making inside-outside distinctions in the first place. Rather than focusing on the subjects and objects that pass emotion around or emotion itself, Ahmed suggests that we focus on objects of emotion and consider: what those objects do; what orientations, relations, and connections they make; how they connect, disconnect, or place meaningful boundaries between individuals and collectives (p. 11). In what follows, I aim to show why Ahmed’s approach to the sociality of emotions and their cultural politics, as “not only a critique of the psychologising and privatisation, but also as a critique of a model of social structure that neglects the emotional intensities, which allow such structures to be reified as forms of being” (p. 12), is a useful theoretical approach to guide this thesis research.

This thesis, on the whole, presents a normative argument that encourages a departure from psychologized conceptions of emotion in a neoliberal era—particularly in the social formation that Ahmed (2007) has identified as “the happiness turn”—that stresses personal responsibility and the pursuit of well-being. Pursuing mental health and well-being seems to be ‘common sense’ and conventional, however, my overarching goal in this project is to show that the contemporary pursuit of well-being and mental health in Canada is hegemonically invested. As Fairclough (1992) notes,

[i]t should not be assumed that people are aware of the ideological dimensions of their own practice. Ideologies built into conventions may be more or less naturalized and automatized, and people may find it difficult to comprehend that their normal practices could have specific ideological investments (p. 90).

Therefore, my thesis is most concerned with the ways in which the advice in the discourses of mental health and well-being support the discourse of neoliberalism. My analyses show that my selected texts make individualized and psychologized assumptions about mental health and well-being that are directed towards ordinary, everyday emotion that requires management. These discourses also frame and equate mental suffering in a way that depoliticizes the reasons for that suffering, which may have a troubling, yet familiar, consequence: the challenges and inequities of living in a neoliberal social world are flattened and homogenized. My analyses underline the ways in which incitements to positive emotion and particular ways of thinking and living in the world—ways that are presumed to produce those emotions—traverse with the ideals of neoliberal selfhood. In short, ‘ideal’ personal and emotional characteristics like resiliency, balance, and personal responsibility are celebrated and admired from the perspective of both neoliberalism and mental health.

## Chapter 1: A Review of the Theoretical Frameworks of Emotion

*“Our external reality is an opportunity to heal our internal upset”*

— Jay-Z, 4:44

We are perhaps most indebted to psychology for providing us with theories of emotion that inform our ‘common sense’ emotional experiences. Hence, in addition to invoking a positive feeling of choice and agency in our own happiness, the sign, ‘happiness blooms from within’ (discussed in the introduction), represents a dominant conception of emotion in the contemporary social world. What can be said about psychological theories of emotion is that generally they presume emotion to be an interior process, as something that is manifest within us, and then expressed outwardly. In short, psychological theories of emotion largely argue that emotions are expressions of internal states.<sup>6</sup> Sara Ahmed (2004) argues that “[s]uch a model of emotion as interiority is crucial to psychology” (p. 8)—she refers to these perspectives as proposing an “inside out model” of emotion. Psychology, however, is not the only discipline to make such a presumption, which draws from biological and evolutionary explanations and generally share a functionalist perspective, that tends to assume that the function of emotions is also their cause, or reason for being.

### The ‘Inside Out’ Model

An evolutionary perspective contends that emotions (specifically emotional expressions like anger and fear) are *functional*; they enhance individual survival (Darwin, 1873, p. 95). Similarly, as Robert Plutchik (2003) argues, “emotions are forms of

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<sup>6</sup> There is, however, a diversity of work on the psychology and neuroscience of emotions. Lisa Feldman Barrett (2017), for example provides an exception to the tendency towards the internalization of emotion, rather she sees them as social concepts that we learn.

communication signals that have adaptive or survival value” (p. 102). This perspective assumes that emotions have a *natural* and *universal* basis, such that humans share an innate capacity for the basic emotions, such as happiness, anger, fear, and disgust (which is often shown through studies of facial expressions and physiological changes; see Izzard, 1991). As Gordon Moskowitz (2005) notes, “[w]e are born with these responses to stimuli already in place, allowing the response to be elicited in the absence of conscious intent” (p. 79). Thus, these emotions are also conceptualized as *involuntary* (i.e. without conscious deliberation): “we are wired to respond [...] regardless of the culture in which we have been raised” (Moskowitz, 2005, pp. 79-80). Moskowitz continues by writing “[i]t seems that people all over the world reveal the same emotional expressions and communicate these to others, regardless of whether they intend to do so” (p. 80).<sup>7</sup> On a basic level, an evolutionary perspective argues that emotions are largely *uncontrollable*, *unconscious* and *innate*—they serve the almost exclusive function of supporting our survival through physiological reactions.

An early psychologist, William James (1884), characterized emotion slightly differently. He writes, “[c]ommon sense says [...] we meet a bear, are frightened, and run” (p. 190), however, the James-Lange theory of emotion suggests that emotions do not arise directly from situations, rather, we meet the bear, we experience the physiological changes (such as heart rate increase and perspiration), and only after interpreting those physiological changes, do we label the emotion (Plutchik, 2003, p. 29). In other words, *physiological changes are caused directly, or naturally, by the situation*, but our interpretation of those physiological changes elicits a particular emotion that can be named and categorized (Plutchik, 2003, p. 29). This is to say, “the emotion felt is simply

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<sup>7</sup> See Ekman & Friesen, 1971.

the feeling of [one's] bodily states" (p. 30). Ultimately, the sequence of events is the main difference between the evolutionary view and the James-Lange view. Interpretation is the key thing that distinguishes the two perspectives and yet the James-Lange view does not explain how a situation can produce physiological changes independent of, and prior to, interpretation.

In response to the James-Lange theory of emotion, James Cannon (1929) recognized that physiological responses are substantially similar regardless of the emotional label that we use to name them. For example, one's heart rate will increase and one will perspire during emotional experiences of anger, love, excitement, or embarrassment. So, the Cannon-Bard theory argues that both emotional responses and physiological responses occur simultaneously (Plutchik, 2003, p. 24). Cannon concerned himself mainly with the structures of the brain to come to this conclusion but maintained evolutionary assumptions in his theoretical framework; he suggests that "visceral changes [do] not tell us anything about emotions; rather, they [are] homeostatic adjustments that helped the body prepare for action" (Plutchik, 2003, p. 34). Survival and maintaining balance are centered as the function of emotionality. However, the line between the physiological and the emotional seems to get blurry here—the location of the emotion is unclear.

There are particular differences in the theories surveyed thus far, but there are also some key similarities. What is crucial is that these three theories retain something fundamental in common: the "notion of an instantaneous unmediated visceral reaction to a perceived stimulus" (Hochschild, 1979, p. 554). The idea that there are natural and automatic reactions to situations and that these reactions and states are internal to individuals are at the crux of all three perspectives. Generally, these perspectives imagine

the human subject as having a natural capacity, in different degrees, for very specific emotional experiences independent from interpretive processes.

Similarly, Gustave Le Bon's (2002) classic study of crowds argues for the unconscious and automatic character of emotion, as he writes, "[t]he part played by the unconscious in all our acts is immense, and that played by reason very small. The unconscious acts like a force still unknown" (p. vi). Le Bon also contests that a crowd garners new psychological characteristics by virtue of having a collective mind—a notion commonly known as 'groupthink'—"which makes them feel, think, and act in a manner quite different from that in which each individual of them would feel, think, and act were he in a state of isolation" (p. 4). He also sees a relation between contagion and emotion: that is, "[i]deas, sentiments, emotions, and beliefs possess[ed] in crowds [contain] a contagious power as intense as that of microbes" (p. 78). Although Le Bon suggests that the collective can produce emotions, the analogy with microbes is significant because it situates the description of emotion, yet again, as an internal (biological and micro-level) phenomenon and is a hallmark of functionalism. Ultimately, emotion *unmediated* by active interpretation takes center-stage.

Moreover, classical Freudian psychoanalysis also contends that emotions are unconscious; that is, the feelings that drive our behaviour tend to be hidden 'beneath the surface.' For Freud (2010), humans have natural aggressive instincts and sexual urges that drive behaviour, as he writes, "the tendency to aggression is an innate, independent, instinctual disposition in man" (p. 102). Once again, we see a similar narrative: emotions are internal and instinctual, they stem from our unconscious.<sup>8</sup>

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<sup>8</sup> Freudian psychoanalysis, however, sidesteps notions of functionalism; it is therefore an exception to the theoretical trends discussed here.

Cognitive psychologists, on the contrary, argue that emotions require far more conscious involvement—that is, emotions are rational and deliberative. Cognitive psychologists take into consideration the personal history of the individual and the way in which the individual appraises a situation. For example, one who has been bitten by a dog in the past will be likely to experience negative emotions in future encounters with dogs—the very sight of them would cause one much anxiety and fear. However, one who has grown up with dogs one’s whole life will almost certainly have positive future experiences with dogs. This perspective argues that emotions are mediated by past experience and are, therefore, not universal or independent of social context. As Lazarus & Lazarus (1996) argue, “[f]ar from being irrational, the emotions have a logic of their own, which is based on the meanings we construct out of the situations in our lives” (p. 6). However, this perspective maintains the assumption that emotional reactions come from ‘inside;’ it differs in that emotions are caused by the way in which we comprehend particular situations (Plutchik, 2003).

Arlie Hochschild (1979) rightfully suggests that, for the most part, in these views, “emotion is characterized by the fixity and universality of a knee-jerk reaction or sneeze” (p. 554). Nonetheless, psychological explanations have dominated academic conceptions of emotion, but they also dominate our ‘common sense’ conceptions of emotion; ultimately, we make sense of our emotions through introspection—how we feel ‘on the inside.’ But more importantly, emotions are theorized as residing in the self, a self that expresses those emotions outwards. This is the crux of “the ‘inside out’ model of emotions” (Ahmed, 2004, p. 9).

## The ‘Outside In’ Model

In sharp contrast with psychological, expressive perspectives, the social, moral, and political character of emotions has been well established by symbolic interactionists, affect theorists, and sociologists. Among those are scholars who have focused on how Western subjects are emotionally socialized, that is, they have explored the ways in which subjects are expected to obey feeling rules that are appropriate to social situations, interactions, and relationships (Goffman, 1959; Hochschild, 1975, 1979, 1983). These emotional guidelines are shared socially and mediated by social contexts that construct which emotions are permissible and impermissible to feel and to express. Thus, we have patterns of emotional order—happiness at weddings, sadness at funerals, pride at graduations—that are relatively stable. Although emotional stability is typically used as evidence of intrinsic, universal and reactionary emotional patterns, these scholars use this as evidence of social control and conscious emotion management in tune with social contexts, histories, and normative expectations.

Erving Goffman (1959) offers a distinctive take on emotionality. He conceptualizes emotion as a *performance*, not as a physiological event. Goffman’s dramaturgical perspective contends that individuals are like actors on a stage occupying particular roles in particular situations—in short, Goffman suggests that we, as social actors, *perform* a certain kind of self. Importantly, Goffman distinguishes between front stage and back stage performances, claiming that “[t]he performance of an individual in the front region may be seen as an effort to give *the appearance* that his activity in the region embodies certain standards” (p. 107, emphasis added). Whereas the “backstage may be defined as a place, relative to a given performance, where the impression fostered by the performance is knowingly contradicted as a matter of course” (p. 112). Goffman

insists that “[h]ere the performer can relax; he can drop his front, forgo speaking his lines, and step out of character” (p. 112). Goffman makes this distinction to argue that individuals perform emotion *only* on the surface. Thus, there is a basic theoretical separation between the public (the front stage) and the private (the back stage): a separation where, in one case, social forces mould emotions, but in the other the social forces that impede emotion are relaxed (Goffman, 1959). Similar to cognitive psychologists, Goffman argues that—in the front stage—we perform consciously and calculably; as Hochschild (1975) claims, “Goffman shows us how much more we calculate than we thought” (p. 282). The management of *impression* is central for the self in Goffman’s dramaturgical theory of emotion.

Hochschild (1975, 1979) argues that outward emotional expression is not all that is at stake in emotional socialization. Rather, the way one feels ‘on the inside’ is also socialized. She writes, “Goffman’s approach might simply be extended and deepened by showing that people not only try to conform outwardly, but do so inwardly as well” (1979, p. 556). Hochschild argues that Goffman “obscures the importance of ‘deep acting’”; by doing this, she suggests that “we are left with the impression that social factors pervade only the ‘social skin,’ the tried-for outer appearances of the individual. We are left underestimating the power of the social” (p. 558). Distinguishing her theory of emotion from Goffman’s, she argues that the way we *feel* ‘on the inside’ is far more social than Goffman leads us to believe. Hochschild (1975) contends that our emotions are governed by “feeling rules, which define what we should feel in various circumstances. Such rules,” she argues, “put a normative floor and ceiling on feeling by indicating what is appropriate and desirable” (p. 289).

Although informed by Goffman's observation that appropriate emotional expression is contingent upon social context, Hochschild amends the theory by arguing that subjects "work" on their emotions, that is, "the act of evoking or shaping, as well as suppressing feeling in oneself" (1979, p. 561). Thus, the distinction that Goffman proposed between public and private is collapsed—the internal and external are both subject to emotion work according to Hochschild's emotion management perspective. She argues that there are "two broad types of emotion work: *evocation*, in which the cognitive focus is on a desired feeling which is initially absent, and *suppression*, in which the cognitive focus is on an undesired feeling which is initially present" (1979, p. 561, emphasis in original). The key here of course is that emotion is conceptualized as a conscious and effortful conformity to shared emotional expectations—expectations that are formed by social contexts. Hochschild (1979) sums this notion up nicely: "Work to make feelings and frame consistent with situation is work in which individuals continually and privately engage. But they do so in obeisance to rules not completely of their own making" (p. 563). Crucial, though, is Hochschild's claim that emotion work is not merely a display or an impression (in the dramaturgical sense) but rather a kind of "deep acting" that directs internal feelings. In this sense, then, emotion becomes a rather collective and social activity in contrast to the individualized and psychological frame that is often assumed in everyday interactions and the prior theories surveyed. By collective, of course, I do not align it with Le Bon's conception of emotion as contagious and unconscious; instead I wish to emphasize Hochschild's proposition of an active and conscious shaping of feeling, a shaping which is regularly in line with collective feeling rules. Sara Ahmed refers to this as the 'outside in' model of emotion.

## The Politics of Emotion

Ahmed's (2004) theoretical contribution, however, departs from both of these models. She argues that

the 'outside in' model is problematic precisely because it assumes that emotions are something that 'we have.' Along with the assumptions of the 'inside out' model, the crowd [or a social situation] becomes like the individual, the one who 'has feelings' (p. 10).

She contends that both models "assume the objectivity of the very distinction between inside and outside, the individual and the social, and the 'me' and 'we'" (p. 9). Ahmed wants us to consider the *relationality* and '*sociality*' of emotion. In other words, she wants us to consider how emotions produce the effects of 'subject' and 'object' and how they are separated through their interaction and relation with one another. In Ahmed's view, the subject and object are shaped and made distinct by emotions themselves: as she writes, "feelings do not reside in subjects or objects, but are produced as effects of circulation" (p. 8). An example of a child's interaction with a bear is one that Ahmed uses to explicate; I feel it worthwhile to cite this example at length here:

Why is the child afraid of the bear? The child must 'already know' the bear is fearsome. This decision is not necessarily made by her, and it might not even be dependent on past experiences. This could be a 'first time' encounter, and the child still runs for it. But what is she running from? What does she see when she sees the bear? We have an image of the bear as an animal *to be feared*, as an image that is shaped by cultural histories and memories. When we encounter the bear, we already have an impression of the risks of the encounter, as an impression that is felt on the surface of the skin. This knowledge is bodily, certainly: the child might not need time to think before she runs for it. But the 'immediacy' of this reaction is not itself a sign of a lack of mediation. It is not that the bear *is* fearsome, 'on its own' as it were. It is fearsome *to* someone or somebody. So fear is not in the child, let alone in the bear, but is a matter of how child and bear come into contact. This contact is shaped by past histories of contact unavailable in the present, which allow the bear to be apprehended as fearsome. The story does not, despite this, inevitably lead to the same ending. Another child, another bear, and we might even have another story (p. 7, emphasis in original).

Ahmed uses “the idea of ‘impression’ as it allows [her] to avoid making analytical distinctions between bodily sensation, emotion and thought as if they could be ‘experienced’ as distinct realms of human ‘experience’” (p. 6). Thus, the relationality and sociality of emotion is highlighted with precision. The bear is not fearsome in itself and the child is not fearful in itself; the interaction and the relation between the two—along with the knowledges, discourses, and histories that inform the interaction—produce the emotion and the distinction between bear and child. Certainly, one can see how Ahmed’s theory of the sociality of emotion can have political ramifications. Unlike the previous theories of emotion reviewed above, Ahmed centers power relations and structures not independent selves in the experience of emotion.

The notion that emotions are collective, social, and relational leads to the proposition that emotions are political. Conceptualizing the “emotional dynamics” of politics is mainly the work of affect theorists and the Public Feelings project. Most notable of these theorists is Ann Cvetkovich (2012) who explores the experience of “political depression”—a term that originates in Chicago’s Feel Tank. According to Cvetkovich, political depression is “the sense that customary forms of political response, including direct action, and critical analysis, are no longer working either to change the world or to make us feel better” (p. 1). She theorizes “depression as ordinary” (p. 12) and contends that it is a public feeling; a public feeling that has political potential. She asserts that her “goal is to depathologize negative feelings so that they can be seen as a possible resource for political action rather than its antithesis” (p. 2). Essentially, the key consideration for the Public Feelings Project “is about rethinking activism in ways that attend to its emotional registers” (p. 7), as well as “how it might be possible to tarry with the negative as part of daily practice, cultural production, and political activism” (p. 3).

For Cvetkovich, emotion plays a particular role in creating “new forms of sociality”—especially the negative emotions: “[i]t’s a search for utopia that doesn’t make a simple distinction between good and bad feelings or assume that good politics can only emerge from good feelings; feeling bad might, in fact, be the ground for transformation” (pp. 2-3). In doing so, she makes an intriguing recognition of the moral distinction that is made between “good” and “bad” feelings. This distinction is important in terms of centering structures and relations of power:

The Public Feelings project asks how the systemic forces of capitalism, racism, and sexism, make us feel, and it is interested in working with despair, burnout, hopelessness, and depression rather than dismissing these ostensibly negative affects as debilitating liabilities or shameful failures (pp. 132-133).

For my purposes, the distinction between ‘good’ feelings and ‘bad’ feelings has certain political effects. Contemporary preoccupations with happiness and well-being are at odds with the Public Feelings project due to their profound emphasis on avoiding negative emotions. By dismissing negative feelings as bad, contemporary pressures to “be happy” obscure the ongoing and unjust forces that Cvetkovich mentions. Thus, Cvetkovich theorizes that *feeling is itself political*. Hochschild (1979) touches on this idea briefly when she expands her theory of feeling rules to include framing rules. She writes, “[b]y ‘framing rules,’ I refer to the rules according to which we ascribe definitions or meanings to situations” (p. 566). She provides an example: “an individual can define the situation of getting fired as yet another instance of capitalists’ abuse of workers or as yet another result of personal failure. In each case, the frame may reflect a more general rule about assigning blame” (p. 566). Hochschild argues that the way in which a situation is defined ideologically “has implications for feeling” (p. 567). Thus a scale of feelings is shifted according to one’s political stance. In other words, the way one *feels* about

affirmative action or feminism or immigration, for example, has political ramifications—especially in a context where feelings are often simplified and binarized as either good or bad.

Moral judgements get attached to particular emotions. Not all emotions are valued equally in Western societies. Ahmed’s (2010) discussion of “happy objects” can inform us of the nexus between feelings and moral judgements. To be clear, happy objects, for Ahmed, “refer not only to physical or material things but also to anything that we imagine might lead us to happiness” (p. 29). The idea is that some objects are imbued with social meaning; that is, some objects are evaluated as ‘good’ and others as ‘bad,’ as she writes,

[o]bjects can become ‘happiness-causes’ before we even encounter them. We are directed toward objects that are already anticipated to cause happiness. In other words, the judgement that some things are good not only precedes our encounter with things but directs us towards those things (p. 28).

For Ahmed, “[c]ertain objects are attributed as causes of happiness, which means they already circulate as social goods before we ‘happen’ upon them, which is why we might happen upon them in the first place” (p. 28). Happiness is sutured with goodness: that is, “we assume something feels good because it is good” (Ahmed, 2010, p. 37). Moral evaluations take center stage in Ahmed’s exploration of happiness—happiness is imagined as the ultimate good. However, it is not that these objects are only imagined as causing positive feelings; they are also seen as vital for the good life (p. 33). Ahmed argues that although objects may affect subjects in different ways (i.e., different objects ‘make’ different subjects happy), “[t]he very possibility that we can affect our affections by action, or through will or reason, becomes the basis of an ethical imperative” (p. 36). Subjects are then convinced that “[t]o be good one must feel the right way” (p. 36), and are thus morally inclined to pursue those ‘right ways’ of living.

This connection between feelings and morals also connects with the political in the sense that to be happy means that one is living a life according to convention: one is living life in “the right way.” As Ahmed puts it, “[t]he good life is the life that is lived in the right way, by doing the right things, over and over again” (p. 36). But what does it mean to live the ‘right’ way? What does it mean to experience emotion in the ‘right’ ways and towards the ‘right’ things? Ahmed makes the argument that “[t]he promise of happiness takes this form: if you have this or that, or if you do this or that, then happiness is what follows” (p. 29). She has made clear the point that objects are not neutral—but she also contends that nor are the bodies that consume those objects (p. 34). She puts it very simply: “some bodies more than others will bear the promise of happiness” (p. 45). Similarly, Barbara Ehrenreich (2009) argues that “[h]appiness, after all, is generally measured as reported satisfaction with one’s life—a state of mind perhaps more accessible to those who are affluent, who conform to social norms, who suppress judgement in the service of faith, and who are not overly bothered by societal injustice” (p. 169).

Ahmed, Cvetkovich, and others, as I’ve suggested, depart from individualizing and functionalist perspectives on emotion. Specifically, this departure is propelled by a reference to the sociality and relationality of emotion. This opposing view of emotionality emphasizes the importance of locating emotion not inside the self, or out there trying to get in, but as something that helps to make the boundaries between the self and social collectives, between the self and other objects, or between different publics. Thus, a relational theory of emotion does not apoliticize and ahistoricize like possessive and psychologized theories of emotion do. Further, it does not take for granted the distinctions between individuals, collectives, and spaces as many sociological theories of emotions

do. This theoretical framework allows me to locate the collective knowledges and discourses of emotion as specifically neoliberal in orientation, despite their appearance of neutrality—it allows me to politicize what has often been left in the realms of individualism and psychology.

## Chapter 2: Happiness and Well-Being in Seligman’s Positive Psychology

“One must imagine Sisyphus happy”

— Albert Camus, *The Myth of Sisyphus*

In the introduction I discussed the ways that advertisers exhort happiness through its use in their slogans. But we also use the language of happiness in other realms of social life; our social celebrations and statutory holidays are examples of this: Happy Birthday, Happy Valentine’s Day, Happy Easter, Happy Holidays, Happy Mother’s Day, Happy Father’s Day, Happy Halloween, Happy Thanksgiving, Happy New Year, Happy Anniversary, Happy Hanukah, Happy Hour. And of course we tend to conclude our myths and stories with “they all lived happily ever after.” The incitements to happiness are everywhere—they are pervasive and ubiquitous in our cultural discourses.

The pervasiveness of happiness finds its firmest academic association with the discipline of positive psychology. Positive psychology and the science of happiness have gained enormous popularity over the last couple of decades.<sup>9</sup> I have chosen to analyze the work of Martin Seligman (2002, 2008, 2011)—specifically his book *Flourish: A Visionary New Understanding of Happiness and Well-Being*—as a highly respected example of this discipline. Seligman himself is a bestselling author, an internationally

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<sup>9</sup> For instance, Professor of Psychology at Yale, Laurie Santos, introduced Psychology 157: Psychology and the Good Life—commonly known as ‘the happiness course’—to the university syllabus in January 2018. In an interview with Fareed Zakaria (2018) of CNN, Santos discussed the course, which teaches the tenets of positive psychology. The logic of positive psychology saturates Santos’s words when she says that the first half of the course focuses on the scientific research that suggests that “our life circumstances play a really little role” in our happiness; the second half of the course focuses on “the psychology of behavior change”—she references Seligman’s emphasis on “taking time for gratitude” as a way to change the “simple things.” The “hard things”, like our circumstances, she argues do not need to be changed. 1,200 students enrolled in the course making it “the most popular class ever in the history of the school” (Zakaria, 2018).

esteemed academic, a former president of the American Psychological Association, a founding father of an entire psychology movement, and, in addition to being funded for 40 years by the US National Institute for Mental Health (NIMH), Seligman has taught “more than eight hundred professionals (including psychologists, life coaches, counsellors, and psychiatrists)” and has assigned “positive psychology exercises for them to do with their patients and clients” (p. 35). His book, *Flourish* (2011), is one of his many works that has been written for a lay audience and is his second most recently published work to date. However, Seligman is far from a lone author in the field of self-help; in fact, when I purchased Seligman’s book from my local Chapters, there were hundreds of other similarly titled books in a relatively massive self-help/well-being section, each of which claimed to give the reader the secrets to happiness. There is, however, an important element of Seligman’s work that he emphasizes in order to separate it from the self-help genre.<sup>10</sup> As he writes in the preface to his book:

The appeal from what I write comes from the fact that it is grounded in careful science: statistical tests, validated questionnaires, thoroughly researched exercises, and large, representative samples. In contrast to pop psychology and the bulk of self-improvement, my writings are believable because of the underlying science (p. 1).

Seligman’s book immediately procures additional value because of its claims to scientific soundness. In her chapter on positive psychology—which also uses Seligman’s work as exemplary of the discipline—Barbara Ehrenreich (2009) accuses him of forwarding “the veneer of science.” Ehrenreich critiques the ‘findings’ of the discipline—especially those that connect positive thinking with health outcomes—by suggesting that such research is

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<sup>10</sup> Like me, Barbara Ehrenreich (2009) is very critical of this distinction; she wonders “what distinguishes an academically trained positive psychology coach from the thousands of self-appointed coaches and motivators that feed off the business world” (p. 174)?

flimsy, overstated and ambiguous.<sup>11</sup> Despite these critiques, the authority that a ‘science’ of happiness has in our social imaginaries cannot be understated. Seligman’s widespread readability, immense popularity, and scientific clout speak to the perceived expertise that underlines the discourse in which he is an integral part.

This chapter defines Seligman’s positive psychology as a prescriptive discourse that recommends behavioural and emotional blueprints for helping oneself through provocations to happiness and well-being. Seligman’s work serves as an exemplar of a positive psychological discourse that reifies and repeats the neoliberal demand of taking personal responsibility for one’s own well-being. It is a discourse that I will theorize as an instrument for disciplining neoliberal subjects. To show this, I will conduct a critical discourse analysis of one of his many exercises that he claims ‘build’ well-being: the What-Went-Well (or “Three Blessings”) exercise. By analyzing “the text”—pronoun usage, sentence structure, and word choice—my analysis suggests that Seligman uses common sense as a form of legitimation to promote—at the level of “social practice” and hegemony—the eudaimonic tradition of life-evaluation in addition to linking well-being with conservative lifestyles (Fairclough, 1992; van Leeuwen, 2008). The discourse that Seligman forwards potentially has wide-ranging effects because of its ubiquity and familiarity. Its popularity seems to stem from the penetration of the logics of positive psychology into many realms of social life—from advertising and common language to self-help discourses and governance frameworks (Kingfisher, 2013), from education and healthcare to the military, economics, and politics (Seligman, 2011).

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<sup>11</sup> See Chapter 6—Positive Psychology: The Science of Happiness—of Ehrenreich’s (2009) book for a more detailed critique.

Before going on to my analysis, I will provide a brief overview of two classical theories of happiness and well-being. I will show that these concepts are often conflated in the many theories and discourses under investigation in this thesis, but I will also show that although both happiness and well-being take shape in complementary ways, they are also distinguished in other important ways. I will then introduce positive psychology through the work of one of its founding fathers, Martin Seligman, and examine the ways in which his work intersects with certain classical models of happiness *and* mental health discourse.

### **Classical Theories of Happiness and Well-Being**

As with emotion, happiness is difficult to define; it has been conceptualized—like emotion more generally—in multiple ways. In addition to ‘happiness,’ there are several words associated with positive emotion that have multiple and overlapping meanings, terms such as: joy, contentment, life satisfaction, pleasure, quality of life, health, flourishing, wellness, and the various dimensions of well-being (spiritual, physical, emotional, psychological, financial, etc.). I am sure the reader can consider more words that carry similar meanings to the ones just mentioned, however my point is to suggest that these words often intersect and that their meanings conjoin to and depart at different junctures.<sup>12</sup> My goal here—instead of attempting to define and distinguish between *all* of these words, with their many definitional confluences and confusions—is to survey some of the broad philosophical approaches to two of these concepts: happiness and well-being. These two concepts are chosen for a number of reasons: happiness is chosen not only for

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<sup>12</sup> For a brief discussion of the multiple definitions of happiness see David, Boniwell & Conley Ayers, 2013, p. 3-4. For a recent cross-cultural analysis of definitions of happiness and well-being, see Lomas, 2018.

its longstanding position as an object of concern in the philosophical tradition, but also because of the ways in which it remains as an object of desire in popular culture and positive psychology. In short, happiness is something that Western social actors deeply value—something that we often agree to be a crucial element of ‘a good life’ (Kingfisher, 2013). Well-being, on the other hand, is chosen mainly because of its use in contemporary positive psychological and mental health discourses; but it is also chosen because of its philosophical connections with happiness—specifically in the eudaimonic perspective.

In what follows, I identify a shift in focus—during the 21<sup>st</sup> century—from happiness to well-being. This shift will be discussed here by exploring different perspectives to respond to the question: how are happiness and well-being understood and defined?

### **Hedonism and utilitarianism.**

Most commentators draw upon the distinction between the eudaimonic and the hedonic perspectives when defining happiness (Huta, 2013; Ryan & Deci, 2001). Hedonists theorize that “the goal of life is to experience the maximum amount of pleasure” (Ryan & Deci, 2001, p. 143). It is a perspective that centers *pleasure* as the foundation of happiness. Ryan and Deci argue that “within this paradigm, the terms well-being and hedonism are essentially equivalent. By defining well-being in terms of pleasure versus pain, hedonic psychology poses for itself a clear and unambiguous target of research and intervention, namely maximizing human happiness” (p. 144). As the reader can see, the quote above contains numerous connotations: happiness is synonymized with pleasure, hedonism, and well-being in addition to being antonymized with pain and

displeasure. One can surmise that pleasure in this case simply means amplifying positive feeling and removing negative feeling. Happiness, from the hedonic perspective, is simply eating a delicious meal, experiencing an orgasm, or winning the lottery. Veronika Huta (2013) summarizes nicely: “Hedonia includes states and/or pursuits associated with pleasure and enjoyment, and the absence of pain and discomfort” (p. 201).

Maximizing happiness and minimizing unhappiness is also the hallmark of the utilitarian theory of morality. As John Stuart Mill (2011) wrote:

The creed which accepts as the foundation of morals ‘utility’ or the ‘greatest happiness principle’ holds that actions are right in proportion as they tend to promote happiness; wrong as they tend to produce the reverse of happiness. By happiness is intended pleasure and the absence of pain; by unhappiness, pain and the privation of pleasure (pp. 93-94).

Mill reinforces this by saying “that pleasure and the freedom from pain are the only things desirable as ends; and that all desirable things [...] are desirable either for pleasure inherent in themselves or as means to the promotion of pleasure and the prevention of pain” (p. 94). Thus, both hedonism and utilitarianism appeal to the same logic: the goal is more happiness and less unhappiness. A noteworthy difference, however, is that hedonism is mainly concerned with *individual* pleasure seeking, whereas utilitarianism is mainly concerned with morality and the greatest happiness for the *greatest number*. For example, if one is faced with the choice of either (1) dying to donate one’s vital organs to save five people, or (2) continuing to live while five people die, the pure utilitarian would presumably choose the former—give one’s life in order to save five people.<sup>13</sup> The utilitarian calculation sees the happiness of five and the unhappiness of one as greater than the happiness of one and the unhappiness of five. However, in the same scenario, the

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<sup>13</sup> This ethical problem (although reframed slightly here) is traditionally known as ‘The Trolley Problem.’

hedonist would obviously keep one's organs and allow the others to die—the situation is not a moral one for the hedonist: the hedonist cares only about the maximization of pleasure and the minimization of pain *for the self*.

Utilitarianism seems to articulate a conception of collective happiness that appears to do 'more good'—the pleasure of many over the pleasure of one—than hedonism.<sup>14</sup> However, theoretically, the two perspectives argue for the same understanding of happiness: happiness is about attaining *more pleasure and less displeasure*. This understanding of happiness has been demonstrably criticized. An illustrative example, forwarded by Brickman and Campbell (1971), is the "hedonic treadmill"; they propose that subjects are condemned to "seek new levels of stimulation merely to maintain old levels of subjective pleasure, to never achieve any kind of permanent happiness or satisfaction" (p. 289). Essentially, no matter the intense increase (or extreme decrease) in subjective pleasure, the idea is that subjects return to a baseline level of happiness. The crux of the argument is that regardless of how much pleasure one experiences, increasing one's happiness seems to be a futile activity—happiness, in this case, is fleeting; or as Brickman and Campbell put it, "subjective pleasure is, as a state, by its very nature, transient, and, as a goal, an ever-receding illusion" (p. 289). It seems to be constantly out of one's grasp: unattainable. But, is happiness (through a lens of *pleasure*) really what we want?

Robert Nozick's (1974) thought experiment considers the implications of only being occupied with boosting subjective happiness and pleasure. Nozick's "experience

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<sup>14</sup> Both hedonic and utilitarian philosophies of happiness—like most psychological theories of emotion—also assume that emotions are internal states.

machine” is well known as a profound critique of utilitarianism. The experience machine is one

that would give you any experience you desired. Super-duper neuropsychologists could stimulate your brain so that you would think and feel you were writing a great novel, or making a friend, or reading an interesting book. All the time you would be floating in a tank, with electrodes attached to your brain (p. 42).

Fundamentally, Nozick’s question is: would you plug into this machine for the remainder of your life, granted that you can program *any* experience, *any* time you want? Knowing that you could experience a life full of pleasure and absent of pain, would you? Most of us would not. Why not? Is this not the utopia of utilitarian thought?

It could be that the experience machine seems to block some crucial aspects of a happy life. Nozick makes the clear point that a utilitarian morality—or a life led entirely through hedonic pleasures—puts far too much emphasis on happiness as pleasure. Nozick leaves us with a puzzle: “what matters other than how *people’s* experiences feel ‘from the inside?’” (p. 42, emphasis in original). Nozick wants us to consider that perhaps there is more to happiness than just pleasure.

What’s interesting about this thought experiment is that it illustrates and reiterates an internal and neurological conception of happiness. By referring to electrode attachments to the brain and experience as something that’s felt “from the inside,” Nozick presents pleasure—or emotion in general—as a brain event, as something biochemical—something internal. And by asking “[w]hat [...] matter[s] to us *in addition to* our experiences?” (p. 43, emphasis added), Nozick effectively accepts that happiness is internal; he simply seeks an answer to the question: *what else* matters to us *beyond* these happy internal experiences?

## **Eudaimonia.**

Like hedonism, eudaimonia is an ancient perspective on happiness that originates in ancient Greek thought. Aristotle (1985) argued that “[e]very craft and every investigation, and likewise every action and decision seems to aim at some good; hence the good has been well described as that which everything aims” (p. 23). This good is “the highest good”—this good is happiness. However, as Charles Guignon (1999) mentions in an introduction to Aristotle’s famous text,

[i]t is important to see that the Greek word translated as ‘happiness,’ *eudaimonia*, does not quite coincide in meaning with our idea of happiness. Where we usually think of happiness as a good feeling accompanying some activity or state, similar to pleasure, the Greeks regarded the feeling as only part of what constitutes happiness (p. 22).

Here, we see how the eudaimonic perspective seeks to detach itself from the *happiness as pleasure* assumption that is a hallmark of the hedonic perspective. Happiness, for the eudaimonist, is *more* than ‘mere’ pleasure or ‘feeling good.’ For Veronika Huta (2013), “eudaimonia includes states and/or pursuits associated with using and developing the best in oneself, in accordance with one’s true self and one’s deeper principles” (p. 201). Additionally, Ryan and Deci (2001) write, summarizing Aristotle, “that true happiness is found in the expression of virtue—that is, in doing what is worth doing” (p. 145). The idea then, is that some activities are worthwhile ‘happiness causes’ and others are not. Thus, eudaimonism proposes that there is a kind of *objective evaluation* as to what life activities and pursuits are worthwhile and virtuous. Ryan and Deci (2001) suggest that

[e]udaimonic theories maintain that not all desires—not all outcomes that a person might value—would yield well-being when achieved. Even though they are pleasure producing, some outcomes are not good for people and would not promote wellness. Thus, from the eudaimonic perspective, subjective happiness cannot be equated with well-being (p. 145-146).

As I will explore later on, traces of this stance on happiness are embedded in contemporary discourses of well-being and mental health. However, at this point, there are two important things to identify in this quotation.<sup>15</sup> First, we have, again, a clear distinction being made between *subjective pleasure* (happiness) and *well-being* (well-being here, takes the shape of happiness, except not ‘merely’ *pleasure-induced* happiness). Second, a hierarchy of goods is constructed whereby some objects are more valuable than others in terms of causing ‘true’ happiness. In other words, moral judgements accompany our desires; the ‘good’ ones are framed as bringing happiness, the other ones, as something less than happiness—that is, ‘mere’ pleasure, unhappiness, or somewhere in between. Huta (2013) recapitulates Aristotle nicely:

Aristotle defined eudaimonia as active behaviour that exhibits excellence and virtue in accordance with reason and contemplation—those faculties that differentiate us from other species—and is performed for its own sake. His conception included moral virtues like justice, kindness, courage, and honesty, as well as intellectual activity and high performance at any activity, such as one’s profession (p. 202).

Thus, some things are represented as valuable and intrinsically good, unlike ‘mere’ subjective pleasure. We can see how, from this perspective, some lives may contribute to the stability of prevailing norms of a ‘worthwhile life’ and others may not. However, the line between happiness and well-being becomes blurry here; as Ryan and Deci write, “eudaimonia [...] refers to well-being as distinct from happiness per se” (p. 145). Given this quote, and the broad theoretical trends that I have identified here, I would suggest that the eudaimonic perspective is not primarily concerned with happiness; instead, eudaimonists are more concerned with well-being.

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<sup>15</sup> In this quotation, wellness and well-being are also being treated as synonymous. For the sake of clarity, I will not comment on this conflation in this thesis.

To summarize, happiness is a subjective state of pleasure for the hedonist. Thus, more pleasure is equivalent to more happiness. In short, the *quantity* of pleasures seem to be the hedonic measure of happiness. This is a perspective that Aristotle would consider “to be a vulgar ideal [which makes] humans slavish followers of desires” (Ryan & Deci, 2001, p. 145). In the eudaimonic sense, on the other hand, “happiness [i.e., flourishing or well-being] is not how one happens to feel at any one moment, but the *quality* of one’s life as a whole, with all its ties to the social world in which it unfolds” (Guignon, 1999, p. 22, emphasis added). Moral judgements are laden in this distinction: the hedonic perspective is construed as crude and pleasure seeking, whereas the eudaimonic perspective is seen as virtuous and wholesome. To distinguish the two perspectives in a simplified way: hedonism proposes that happiness is pleasure; eudaimonism proposes that happiness—well-being—is virtue. *Quality*, as opposed to the *quantity* of happiness seems to be the stamp of eudaimonism.

This is not to say that the eudaimonic perspective is without its critics. Perhaps the biggest issue with the eudaimonic perspective is its insistence on the objectivity of deciding what is worthwhile and virtuous. The important questions to ask become: who decides what contributes to ‘true’ happiness (i.e., well-being)? Who demarcates the ‘non-virtuous’ from the ‘virtuous’ life pursuits? As Darrin McMahon (2008) argues, to live a “life according to virtue or virtues, we must first decide what those endeavours should be” (p. 475). The word “we” here is crucial: how do we decide on, and hegemonically make, these endeavours and how are they constrained by ongoing power relations?

Ahmed (2010) argues that

classical concepts of virtue not only sustain the association between happiness and the good but also suggest that some forms of happiness are better than others. This distinction between a strong and weak conception of

happiness is clearly a moral distinction: some forms of happiness are read as worth more than other forms of happiness, because they require more time, thought, and labour. Noticeably, within classical models, forms of happiness that are higher are linked to the mind, and those that are lower are linked to the body (p. 12).

However, she suggests that “[h]ierarchies of happiness may correspond to social hierarchies that are already given” (p. 12). Because there is an issue with which life pursuits and projects accompany virtuousness, the eudaimonic perspective potentially suffers from a lack of access. That is, a conception of virtue can itself produce difference and hierarchy. In other words, a virtuous life, as conceived under a eudaimonic perspective, seems to assume equitable distributions of material resources. The question is, which subjects have access to the social and political capital to pursue conventional pursuits and projects of well-being that have been deemed virtuous? And, further, what are the political implications of these pursuits and projects?

### **Positive psychology.**

As I discussed in the opening paragraphs of this chapter, positive psychology defines itself in contrast to popular psychology and self-help literature, but it also defines itself against, what Seligman calls, “negative psychology” or “the psychology of misery.” Seligman argues that negative psychology is the traditional goal of psychology: which intends to relieve misery and displace “the disabling conditions of life” (p. 1)—conditions such as depression, addiction, anxiety, and trauma. Positive psychology is, in Seligman’s (2011) view, “a tectonic upheaval in psychology [...] a scientific and professional movement” with the goal of “building the enabling conditions of a life worth living” (pp. 1-2). In contrast to negative psychology’s goal of fixing the ‘bad,’ positive psychology’s

goal is to cultivate the ‘good.’ Seligman repetitively encourages his readers to see the contrast between these two goals:

Removing the disabling conditions, however, is not remotely the same as building the enabling conditions of life. If we want to flourish and if we want to have well-being, we must indeed minimize our misery; but in addition, we must have positive emotion, meaning, accomplishment, and positive relationships. The skills and exercises that build these are entirely different from the skills that minimize our suffering (p. 53).

At the most basic level, in addition to helping people suffer less, is the essential goal: “[p]ositive psychology makes people happier” (p. 2). As the founders of positive psychology, Seligman and Mihaly Csikszentmihalyi (2000), articulate it: “The field of positive psychology at the subjective level is about valued subjective experiences: well-being, contentment and satisfaction (in the past); hope and optimism (for the future); and flow and happiness (in the present)” (p. 5). Cultivating happiness and well-being is the goal of this psychology, however, in the political and economic context of neoliberalism, I am interested in the ways in which Seligman describes, prescribes, and delivers on this promise. I am especially interested in this promise in the context of one of positive psychology’s major insights—an insight which grounds Seligman’s (2011) theories and exercises: “emotions don’t follow inexorably from external events but from what you *think* about those events, and you can actually change what you think” (p. 90, emphasis in original).

Seligman has two primary theories that I will address here, ‘authentic happiness theory’—which he has now officially discredited—and ‘well-being theory.’ These theories provide a framework for identifying the differences, and identifying the overlapping meanings, between well-being and happiness.

I will begin with authentic happiness theory.<sup>16</sup> Seligman (2011) grounds this theory in the claim that “[p]ositive psychology [...] is about what we choose for its own sake” (p. 11). He suggests that there are “three different elements that we choose for their own sakes;” these are: “positive emotion, engagement, and meaning” (p. 11). He argues that lives that are led exclusively through each of the three elements are, respectively, the “pleasant life,” the “engaged life,” and the “meaningful life.”

*The pleasant life* (echoing hedonic philosophy), for Seligman, is a life led around “what we feel: pleasure, rapture, ecstasy, warmth, comfort, and the like” (p. 11). *The engaged life*<sup>17</sup> is the experience, for example, of “being at one with the music, time stopping, and the loss of self-consciousness during an engaging activity” (p. 11).<sup>18</sup> The idea is that one is fully engaged and absorbed by an activity with exuberance and enthusiasm. Seligman suggests that “the concentrated attention that flow requires uses up all the cognitive and emotional resources that make up thought and feeling” (p. 11). *The engaged life*, then, is a life of “identifying your highest strengths and learning to use them more often to go into flow” (p. 12). Seligman proposes that *the engaged life* and *the pleasant life* are opposite kinds of lives given that “if you ask people who are in flow what they are thinking and feeling, they usually say, ‘nothing’” (p. 11).<sup>19</sup> The third and

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<sup>16</sup> I will be citing a summary of Seligman’s (2011) authentic happiness theory found in his book, *Flourish*. For his original theory, see Seligman (2002).

<sup>17</sup> This kind of ‘life’ is similar to Daniel Haybron’s (2013a, 2013b) identification of engagement as a philosophical dimension of happiness.

<sup>18</sup> According to Haybron (2013b), “[f]low is the state you experience when fully caught up in an activity, especially when ‘in the zone’” (p. 309).

<sup>19</sup> I disagree with Seligman’s insistence of a dialectic relationship between pleasant and engaging lives, especially when he utilizes the examples of masturbation, shopping, television watching, and drug use (p. 12). I would argue that people can easily enter a state of ‘flow’ during all of these activities, for instance: “time stopping” during the final seconds of a sports event on television; or “being at one” with the universe during the use of psychedelics; or “the loss of self-consciousness” during masturbation or when one is

final element that Seligman suggests “we choose for its own sake” is meaning, which “consists in belonging to and serving something that you believe is bigger than the self” (p. 12). Seligman refers to this as *the meaningful life*, he indicates that “humanity creates all the positive institutions to allow [for] this: religion, political party, being green, the Boy Scouts, or the family” (p. 12).<sup>20</sup>

Seligman has since improved this theory to step away from ‘happiness’ per se and instead into the realm of ‘well-being.’ He suggests that authentic happiness theory is a “happiology” which is inadequate mainly because happiness—as positive emotion—is not all that we pursue for its own sake. He argues that

[t]he primary problem with [...] ‘happiness’ is not only that it underexplains what we chose but that the modern ear immediately hears ‘happy’ to mean buoyant mood, merriment, good cheer, and smiling. Just as annoying, the title [*Authentic Happiness*] saddled me with that awful smiley face whenever positive psychology made the news. ‘Happiness’ historically is not closely tied to such hedonics—feeling cheerful or merry is a far cry from what Thomas Jefferson declared that we have the right to pursue—and it is an even further cry from my intentions for a positive psychology (pp. 10-11).

We can see that Seligman vehemently wants to distance himself from the idea that positive psychology is only about the *feeling* of happiness. He says that “[a]uthentic happiness theory is one dimensional: it is about feeling good and it claims that the way we choose our life course is to try to maximize how we feel” (p. 24). Seligman has since distanced himself from this perspective. He suggests that happiness, “the old, gold standard of positive psychology is disproportionately tied to mood, the form of happiness that the ancients snobbishly, but rightly, considered vulgar” (pp. 13-14). The transition,

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immersed in a commodity-filled environment. This dialectic seems to serve more of a moral purpose than a theoretical one; that is, some activities are deemed ‘worthy’ of flow, and other are deemed as ‘simple’ ‘pleasure-seeking.’

<sup>20</sup> Notice that Seligman says nothing about participation in activist groups or think tanks as being meaningful life pursuits.

simply put, is a transition from one ancient perspective on happiness to another: from hedonism to eudaimonism. Or, in more contemporary terms: from happiness to well-being.

Seligman’s theoretical transformation—from authentic happiness theory to well-being theory—stems partly from a fear of excluding individuals who are ‘predisposed’ to “the hell of unhappiness” (p. 14). He claims that half of the world’s population are “low-positive affectives”—that is, they ‘innately’ “lack cheerfulness” (p. 14)—thus, with respect to positive emotion, authentic happiness theory excludes these individuals. Well-being theory corrects this by including additional elements that purportedly have no relation to positive emotion, namely, accomplishment and positive relationships. Therefore, in Seligman’s new and improved theory, even the supposed half of the population that are “low-positive affectives” can enjoy well-being—without enjoying the ‘happiness’ (i.e., pleasure) that the other half of the population supposedly enjoys.

Seligman’s new theory—well-being theory—has five elements, each of which meet the following three properties:

1. [The element] contributes to well-being.
2. Many people pursue [the element] for its own sake, not merely to get any of the other elements.
3. [The element] is defined and measured independently of the elements (p. 16).

He argues that the five elements that meet these properties “comprise what free people will choose for their own sake” (p. 16). These elements are: (1) positive emotion, (2) engagement, (3) meaning—the original three elements in authentic happiness theory—(4) positive relationships, and (5) accomplishment. Positive relationships and accomplishment are added seemingly to account for, and supplement those things that give us *more than just* happiness—the theory accounts for things that contribute to *well-*

*being*. PERMA (Positive Emotion, Engagement, Relationships, Meaning, Accomplishment) is a mnemonic that Seligman suggests to easily remember these ‘elements’ of well-being.

Seligman further highlights the importance of scientific validation in his theoretical framework. He suggests that *happiness* is “a real thing” and *well-being* is “a construct” (p. 15). Happiness is a measurable thing, Seligman argues, which is “defined by life satisfaction, where on a scale of 1-to-10 ladder, people rate their satisfaction with their lives” (p. 15). Well-being, on the other hand, has multiple elements, each of which “is a measurable thing” (p. 15). In well-being theory, each of those elements is theorized as “contributing to well-being, *but none defining well-being*” (p. 15, emphasis in original). Seligman uses the language of science and measurement to legitimize his theoretical choices. Happiness becomes *an element of* his new theory as opposed to its central concern. Happiness—that is, positive emotion—is one slice of the well-being pie, whereas “[w]ell-being theory is about all five pillars” (p. 24). Following the eudaimonic perspective, Seligman conceptualizes happiness as only *part* of what it means to be well.

### **‘What-Went-Well’: A Critical Discourse Analysis**

Positive psychology claims to “show what actions lead to well-being” (Seligman & Csikszentmihalyi, 2000, p. 5). Thus, an important idea that I want to grapple with here is the claim that the aforementioned elements of well-being can be built; and therefore, well-being can be built. Seligman writes, “I believe that well-being can be robustly raised. So this [...] is about my search for exercises that actually make us lastingly happier” (p. 32).

In the chapter “Creating Your Happiness: Positive Psychology Exercises That Work,” under the heading “Can Well-Being Be Changed?”, Seligman reiterates that he is “a ‘naughty thumb of science’ person—an empiricist, in other words, who prods and pokes people to get at truth that we cannot see otherwise” (p. 32). He unproblematically assumes that ‘truth’ lies in the use of the scientific method by suggesting that “[t]here is a gold standard for testing therapies—random-assignment, placebo-controlled studies: randomly assigning some volunteers to the treatment group [...] and other subjects to what’s called the control group” (p. 32). He argues that “[t]he same logic holds” for testing drug therapies as “for testing exercises that purport to increase well-being” (p. 32). He uses this scientific validation in the preamble before explaining the exercise in order to legitimize what is about to come; he adds to this legitimation by providing empirical and authoritative reasons that one should utilize this exercise (van Leeuwen, 2008). Before the reader encounters the exercise, it has already been evaluated through the lens of Seligman’s expertise. This technique has effects; van Leeuwen suggests that when experts “address the ‘public’ [...] the mystique of expertise is considered sufficient proof, and the activities of the experts are not disclosed in any detail” (p. 18). The reader is not given any details of the scientific experiment; the fact that it is the “gold-standard” of scientific testing is proof enough that such an exercise “is indeed the actual cause of the improvement” (Seligman, 2011, p. 32). van Leeuwen suggests that, because of this use of language, “the public ends up with a vague and woolly knowledge of these activities, and is therefore likely to reify their results beyond the possibility of critique” (p. 18). The exercise is validated before one knows what the exercise entails.

Under the large heading “What-Went-Well Exercise (Also Called ‘Three Blessings’)” is an opening paragraph that ought to be represented at length here:

We think too much about what goes wrong and not enough about what goes right in our lives. Of course, sometimes it makes sense to analyze bad events so that we can learn from them and avoid them in the future. However, people tend to spend more time thinking about what is bad in life than is helpful. Worse, this focus on negative events sets us up for anxiety and depression. One way to keep this from happening is to get better at thinking about and savouring what went well (p. 33).

In each of the five sentences in the paragraph Seligman uses words like ‘we,’ ‘people,’ and ‘us’ in order to articulate this as a collective issue: *we* think too little about what goes right and *we* think too much about what goes wrong. Seligman also uses repetition to refer to the same element in slightly different ways; for example, in relation to “what goes wrong,” he also expresses the same idea in different ways, such as “bad events,” “what is bad in life,” “negative events,” “anxiety and depression.” By doing so, “[n]ew angles, new semantic features are added each time a new expression is used, gradually building up a more multifaceted concept” (van Leeuwen, 2008, p. 19). Therefore, any semantic differences that existed between these concepts are reduced and generalized into a simple conceptualization of wrongness and badness.

The second paragraph of the exercise also ought to be represented here:

For sound evolutionary reasons, most of us are not nearly as good at dwelling on good events as we are at analyzing bad events. Those of our ancestors who spent a lot of time basking in the sunshine of good events, when they should have been preparing for disaster, did not survive the Ice Age. So to overcome our brains’ natural catastrophic bent, we need to work on and practice this skill of thinking about what went well (p. 33).

The repetition continues in this paragraph with concepts like “bad events,” “disaster,” “Ice Age,” and “natural catastrophic bent.” Thus, as van Leeuwen observes about the discursive effects of repetition, “[a]n ongoing *concept formation* takes place, with the resulting concept fusing the semantic features of all of the expressions used as synonyms” (p. 19, emphasis in original). By calling on the theoretical framework of evolutionary

psychology, Seligman's conception of "bad events" includes those events that originate in 'nature.' However, in centering "evolutionary reasons" about what goes wrong in our lives, Seligman excludes other structural and political reasons why things may go wrong in some social subjects' lives. Additionally, Seligman's simplification of "sound evolutionary reasons" deletes the particular reasons he wants the reader to consider—other than a prehistoric reference to the Ice Age (Ledin & Machin, 2015, p. 8). The result of this, not dissimilar to the nebulous yet commanding reference to the scientific method, is a production of knowledge that is seemingly unquestionable and authoritative (van Leeuwen, 2008).

Seligman's use of generalization is also a key linguistic move in these first two paragraphs; the word "we" is exemplary of this. In relation to their discourse analysis of promotional university brochures, Ledin and Machin (2015) (referencing Van Dijk, 1998) suggest that

[t]he pronoun 'we' is used ambiguously, which is highly strategic—in critical linguistics it has been shown that 'we' and other personal pronouns and possessives such as 'you' and 'our' are one of the best grammatical categories for the expression and manipulation of social relations, status and power (p. 10).

'We,' however, is coupled with many other generalized concept formations in Seligman's preamble to the What-Went-Well exercise (van Leeuwen, 2008). For example, the words 'right' and 'wrong' are also ambiguous—the reader is given an unclear understanding of what the concepts "what goes right" and "what goes wrong" mean. This generalization leads me to believe that Seligman is intentionally ambiguous in an effort to speak to all of his readers; in other words, the meanings that each reader attaches to words such as 'life' and 'lives,' and binary oppositions such as right/wrong, good/bad, are left profoundly open. The effect of this use of language is also political: it functions to homogenize social

experiences. In this way, then, social subjects are imagined as standing in equitable relations, as experiencing the world and their “lives,” in uniform ways. Seligman also seems to believe that there is minimal reason for social actors to experience ‘bad events’ in the contemporary world—he fundamentally believes that since we are no longer living during the Ice Age, bad events are simply events that social subjects can “learn from” and “avoid.” This belief attributes equal autonomy to all subjects while also encouraging those subjects to accept the status quo. He writes later in the book, “[y]ou have to be blinded by ideology not to see that almost everything is better in every wealthy nation than it was fifty years ago” (2011, p. 79).<sup>21</sup> What does it mean to accept the claim that we are better off than we were fifty years ago? And even if we accept this proposition, it does not follow that we should not continue to be critical of our social world. In any case, I likely fall into the “blinded by ideology” category myself.

Seligman ended the second paragraph by writing, “we need to work on and practice this skill of thinking about what went well” (p. 33). This section of text assumes that to think more positively about our life events is “a question not of obeying but of it being a shared aim” (Ledin & Machin, 2015, p. 10). The third, fourth and final paragraphs describe, prescribe, and legitimize the exercise:

Every night for the next week, set aside ten minutes before you go to sleep. *Write down three things that went well today and why they went well.* You may use a journal or your computer to write about the events, but it is important that you have a physical record of what you wrote. The three things need not be earthshaking in importance (‘My husband picked up my favourite ice cream for dessert on the way home from work

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<sup>21</sup> Seligman justifies this claim by referencing material betterments in the US: increased purchasing power, bigger houses on average, more cars than drivers, more students going to postsecondary school, more music and books, and more attractive clothes and people (p. 79). He also pays lip service to claims of less racism and more women’s rights in the US today than fifty years ago (p. 79).

today'), but they can be important ('My sister just gave birth to a healthy baby boy').

Next to each positive event, answer the question 'Why did this happen?' For example, if you wrote that your husband picked up ice cream, write 'because my husband is really thoughtful sometimes' or 'because I remembered to call him from work and remind him to stop by the grocery store.' Or if you wrote, 'My sister just gave birth to a healthy baby boy,' you might pick as the cause 'God was looking out for her' or 'She did everything right during her pregnancy.'

Writing about why the positive events in your life happened may seem awkward at first, but please stick with it for one week. It will get easier. The odds are that you will be less depressed, happier, and addicted to this exercise six months from now (pp. 33-34, emphasis is original).

Like a doctor prescribing a drug or a treatment, Seligman prescribes this exercise to the reader. The exercise obviously encourages the reader to focus on the positive—to think only about what goes right rather than what goes wrong.<sup>22</sup> In fact, Kingfisher (2013) sees the foundation of positive psychology as “the idea that we should focus on enhancing the positive instead of fighting the negative” (p. 71). Moreover, there is a transition from the use of the collective pronoun ‘we’ to the personal pronouns ‘you,’ ‘your,’ and ‘my.’ By doing so, Seligman also speaks to whose responsibility<sup>23</sup> it is to pursue well-being—since we are already aware that the purpose of the exercise is to “build well-being.” The text transitions from saying ‘we need to do this as a collective’ to ‘you need to play your part in your own well-being by doing this.’ The self, the reader, is positioned as the builder of personal well-being through this exercise.<sup>24</sup> This positioning is a significant instance of Seligman’s deployment of neoliberal hegemony.

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<sup>22</sup> The exercise, notably, does not encourage one to keep a record of all the unjust and cruel things that happen and why these things are ongoing or how to build a collective of activists to protest these things.

<sup>23</sup> The exercise also prompts readers to draw crude causal relationships and to make attributions of responsibility.

<sup>24</sup> We can also see how the terms ‘happiness’ and ‘well-being’ are being conflated in the text. It is true that Seligman argues that happiness is a part of well-being, but he plainly

The reader is also given ‘stage directions,’ or “performance modes” as to how and when to perform this exercise (van Leeuwen, 2008, p. 10): every night, for one week, ten minutes before bed, write or type what went well that day and why it went well. Seligman provides two examples that one might write for this exercise: the ice cream example and the birth example. In these examples, the reader is positioned as having access to particular resources and locations (van Leeuwen, 2008, pp. 11-12): for instance, the reader needs a computer to write about the events; a workplace from which to drive home; a car to stop by the grocery store after work; the money to purchase ice cream; access to the emergency services and medical attention needed to assist in childbirth; social and economic circumstances that are conducive to maternal and infant ‘health’; a home; and a bed to sleep in. Furthermore, in both of these examples, heteronormativity functions as the organizing element to things ‘going well.’ The wife is assumed to be staying at home while the husband is “at work”—reproducing a patriarchal vision of family and society; heterosexual reproduction is centered as an “important” event (p. 33)—which reiterates the value that the dominant heterosexual family unit holds in Western society; and (the Christian) God is declared as omniscient—reminding us that an all-knowing being is protective of those who uphold conservative Christian values.

These examples are important because they signify a hegemonic way of living in a neoliberal world. Seligman argues that writing down what went well each and every night will make one “less depressed” and “happier”; however, by choosing to include these examples, he reproduces dominant conceptions of ‘the good life.’ As Ahmed argues, “[i]f certain ways of living promote happiness, then to promote happiness would be to promote

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conflates the two when he introduces the exercise as something that builds *well-being* and says only that the reader will be “happier” if he uses this exercise—nothing is said about well-being to conclude the exercise. Semantically, the terms substantially overlap.

those ways of living” (p. 11). By making the link between well-being theory and these conservative and dominant ways of living, Seligman is also continuing the eudaimonic tradition of objectively evaluating life projects. Therefore, in highlighting these as examples of ‘what went well,’ Seligman tacitly evaluates these ways of living and reifies them as ‘worthwhile’ life activities—he renders life projects centered on conservative family values as meaningful and virtuous. In short, he renders those projects as the ones that will make us well.

Importantly, Seligman (2011) legitimizes this exercise through the use of ‘common sense,’ by assuming that more happiness and less depression is what the reader wants. We see this elsewhere in the book when he writes, “[p]ositive mood produces broader attention, more creative thinking, and more holistic thinking. This is in contrast to negative mood, which produces narrowed attention, more critical thinking, and more analytic thinking” (p. 80). These ‘facts’ lead Seligman to conclude that “[w]hen you’re in a bad mood, you’re better at ‘what’s wrong here?’ When you’re in a good mood, you’re better at ‘what’s right here?’” (p. 80). In this simplified and unsophisticated dichotomization of positive thinking as good/right and negative thinking as bad/wrong, Seligman relies on credulous and commonsensical agreement from his readers that creative thinking is better than critical thinking and holistic thinking is better than analytical thinking. By placing these ways of thinking into strict binaries, Seligman is suturing ‘good’—creative and holistic—thinking with ‘common sense.’ In other words, the practice of building well-being through this exercise “is regarded [...] as essentially common sense and in little need of legitimation. This of course makes this kind of text all the more important to study. Common sense practices are the most deeply ideological of them all” (van Leeuwen, 2008, p. 20). Crucially, then, my task is to unpack the ways in

which neoliberal hegemony saturates these discourses. In other words, I will illustrate that neoliberal assumptions of individualism, personal responsibility, agency, and other “core values of neoliberalism”—such as being “ready for change, improving performance and being successful” (Ledin & Machin, 2015, p. 8)—are blatantly encouraged in these various texts. This tendency demonstrates the concerning ways that incitements to well-being in my chosen texts uphold the status quo by deploying hegemony. These concerns will be illuminated in the following chapter’s discourse analyses of selected mental health brochures and a Bell Let’s Talk commercial. Only recently have scholars specifically critiqued mental health discourse in a Canadian context (Jhangiani & Vadeboncoeur, 2010).

Before I begin my analysis of the CMHA brochures in the next chapter, I would like to conclude this one by considering the broad meanings that Seligman attributes to happiness and well-being and the ways that these meanings overlap with those presented in classical theories. Like the eudaimonic perspective and Nozick’s thought experiment, Seligman wants to separate his work from the assumption that happiness—understood as positive emotion or pleasure—is what we want. Instead, the driving appeal of his work comes from an encompassing conceptualization of well-being, where positive emotion does not hold such an elevated position. Seligman forwards a theory of well-being, much like the eudaimonists, that suggests not only are some forms of happiness better than others, but also that positive emotion is not the only thing that we pursue for its own sake. Rather, Seligman emphasizes that a combination of the five pillars—PERMA—is what we should be pursuing. Positive emotion, engagement, positive relationships, meaning, and accomplishment are all *a part* of well-being—a *part* of what makes us “flourish.” Recall that the Greek word eudaimonia is translated as “flourishing”; so it should not

surprise us that Seligman's book is titled *Flourish* and espouses the foundational eudaimonic perspective that well-being is more than 'just' happiness. From Aristotle to Seligman, the logic that *happiness-causes exist on a hierarchy* has been coopted to promote the conventional, conservative, and dominant ways of living in the world as those that bring us well-being. In relation to well-being, happiness as an emotion is given a marginal status. In Seligman's positive psychology, happiness retains its hedonistic, "vulgar" meanings, which suggests that there are ways that subjects can be deceived by happiness: some happiness, that is, is better than others. The idea is that well-being, in an eudaimonic sense, includes emotions like happiness, however, it also encompasses particular ways of *managing* emotions, particular habits of thinking, and particular ways of living and being in the world. The preferential use of the word well-being suggests that what these discourses are referring to is more than 'mere' positive emotion. Positive psychology looks to exercise control over these other facets of social life, which makes this discourse all the more important to explore in terms of its neoliberal disciplinary effects. In the eyes of Seligman and the eudaimonists, happiness untethered from the lifestyle they are promoting is somehow wrong or bad. In contrast, those positive emotions that result from a disciplined neoliberal life—that is, a life devoted to personal responsibility, resilience, mental and physical health by cultivating PERMA—is indeed a life that is rewarded with well-being.

### **Chapter 3: The Canadian Mental Health Association and Bell Let's Talk: A Critical Discourse Analysis**

*“To be happy, we must not be too concerned with others”*

— Albert Camus, *The Fall*

By utilizing critical discourse analysis as a methodology, I look to illustrate the overlapping logics of positive psychology and neoliberalism within selected mental health brochures and a Bell Let's Talk advertisement. As I discussed in the introduction, I use Fairclough's (1992) three-level conception of discourse analysis to pay particular attention to “the text” and to connect the use of language therein to an analysis of discursive and social practice. In examining individualized conceptions of well-being and mental health, I take the view that discourses, as van Leeuwen writes, “not only represent what is going on, they also evaluate it, ascribe purposes to it, justify it, and so on” (p. 6). In short, social practices are socially coordinated ways of doing things (van Leeuwen, 2008, p. 6). Furthermore, like Jhangiani and Vadeboncoeur (2010), I argue that this approach

enables a shift from seeing language as a neutral and transparent medium of communication to seeing words, sentence structure and syntax, semantics and meaning potential, discourses, and discursive practices as both reflective and constitutive of particular social, historical, cultural, and political contexts (p. 173).

Therefore, I locate mental health within—not independent of—neoliberal power relations by analyzing it at the level of social practice (Fairclough, 1992). By understanding discourses of mental health as a neoliberal strategy, I look not only to contest conventional notions that certain measures or definitions of mental health are universal, apolitical, and intrinsically valuable, but also to contest the pursuit of personal well-being as an inevitable precursor to a ‘good life.’ I also attempt to illuminate the ways in which

this mental health discourse disciplines readers to conform to hegemonic conceptions of well-being. In other words, I want to consider how a mental health text discursively produces the condition of well-being; I want to consider the ways in which a particular subject is imagined within the text; I want to consider the assumptions that are mobilized therein; and I want to explore the expectations and imperatives that are embedded within the text and how those expectations and imperatives function hegemonically and politically.

The texts that I will be exploring were publically available for download on the Canadian Mental Health Association's (CMHA) website. These texts are presented in the format of brochures that are not only available virtually, but, are also generally available—in physical form—in over 330 locations across Canada (Canadian Mental Health Association, 2014a; 2014b; 2014c; 2014d; 2014e; 2014f; 2014g). The brochures are also available in various other locations, for example: university campuses, healthcare facilities, and other social service agencies. Thus, they are accessible to those with Internet access or to those with access to urban centres (where many of these various locations are situated). The CMHA is a voluntary charity organization (with over 11,000 volunteers) that requires donations from public or corporate sources to function, and since Bell Let's Talk is one of those funders—a rather prominent one—I will also analyze one of their recent promotional advertisements (Bell Canada, 2018b). The CMHA website describes their mission as follows:

As the nationwide leader and champion for mental health, CMHA facilitates access to the resources people require to maintain and improve mental health and community integration, build resilience, and support recovery from mental illness. CMHA branches across Canada provide a wide range of innovative services and supports to people who are experiencing mental illness and their families. These services are tailored to the needs and resources of the communities where they are based. One of the core goals of

these services is to help people with mental illness develop the personal tools to lead meaningful and productive lives (2018a).

I have chosen seven of the many brochures found on their website around which to structure my analysis. I have chosen these not only because of their readability and brevity but also because of the presumed factuality that comes along with texts published by a reputable source. In part, because of the well-established nature of the CMHA, I want to suggest that the same logics that underlie self-help books also underlie these CMHA pamphlets and, more generally, perhaps these logics may also ground professional counselling and therapy. Nevertheless, by analyzing these texts, the ubiquity of the hegemonic assumptions about well-being come to the forefront.

My analysis focuses predominantly, and specifically, on two brochures: Figures 1.1 and 1.2 represent the front and back pages of the brochure entitled “Mental Health for Life” (Canadian Mental Health Association, 2014c), and Figures 2.1 and 2.2 represent the front and back pages of the brochure entitled “Stress” (Canadian Mental Health Association, 2014g). The other five brochures, which have *not* been included as Figures, will also be addressed here, however, these brochures will only be addressed sparingly, and more generically, than the other two. Nevertheless, the seven selected brochures, taken together, convey a general focus relevant to larger numbers of visitors to this organization, thus they target a wide readership with the core assumption that matters such as stress and mental health concern everyone.<sup>25</sup> These choices of brochures are in contrast to others that I could have selected which, for the most part, address particular conditions or specific topics and therefore target smaller and specific segments of the population.

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<sup>25</sup> See Figures 1.1, 1.2, 2.1 and 2.2.

The Bell Let's Talk promotional advertisement conveys a similar focus; that is, Bell delivers a general focus that can be comprehended and appreciated by large numbers of viewers—again, maintaining the central assumption that mental health and illness, directly or indirectly, concerns everyone. A little background information: Bell is “Canada’s largest communications company” (Bell Canada, 2018a). In 2010 they began a mental health initiative that continues to this day known as Bell Let's Talk which is “[d]edicated to moving mental health forward in Canada” by promoting “awareness and action with a strategy built on 4 key pillars: Fighting the stigma, improving access to care, supporting world-class research and leading by example in workplace mental health” (Bell Let's Talk, 2018a).<sup>26</sup> Using their brand to promote mental health awareness, Bell Let's Talk Day is one day each year that encourages people to “join the conversation.” On this day, as their smiley face logo with a virtual message bubble signals, each time a Bell customer sends a text message or makes a phone call, Bell donates 5 cents to mental health programs. Similar donations are made through mainstream social media platforms like Facebook, Instagram, Twitter, and Snapchat. Each time a user watches their promotional video (similar to the commercial that will be analyzed below), uses #BellLetsTalk in a post, or uses their filter on Snapchat, 5 cents is donated (Bell Let's Talk, 2018c). As a result, Bell donated nearly \$7 million on Bell Let's Talk Day 2018; and, since its inception in January 2011, there have been over 800 million social media interactions totalling almost \$94 million in donations to mental health programs (Bell Let's Talk 2018d). Their website makes it clear, graphically, that the number of social media interactions each year has steadily increased since 2011. Because of this, their

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<sup>26</sup> The initiative was “[d]eveloped in partnership with Dr. Heather Stuart,” who was acknowledged with the award of “the Bell Canada Mental Health and Anti-Stigma Research Chair at Queen's University” (Bell Let's Talk, 2018b).

website also suggests “87% of Canadians reported that they are more aware of mental health issues since Bell Let’s Talk began” (Bell Let’s Talk Day, 2018d). Notably, Prime Minister Justin Trudeau contributed to the conversation along with many other recognizable public figures—athletes, television personalities, musicians, politicians, etc.<sup>27</sup>

I am skeptical of the usefulness of these donations for individuals who are structurally disadvantaged and underprivileged by the current neoliberal order. This is to say that the medicalized and individualized conceptions of mental illness that are being forwarded by Bell and the CMHA (and by the mental health programs to which Bell donates) not only do not alleviate the harsh realities that social actors find themselves in, but they also perpetuate a theory of emotion that displaces political, social, and historical inequities. This point will be further unpacked below.

In analyzing these samples of mental health discourse in the Canadian context, I locate this project in the discourse analysis tradition, a tradition that presupposes that social meanings and structures are produced, reproduced, exchanged, maintained, and altered in discourse (Brookes & Harvey, 2015, Fairclough, 1992, 2012; Ledin & Machin, 2015; van Leeuwen, 2008). Discourses, then, do not simply represent the world, but actively construct and transform it. Evidently, the social meanings that circulate from discourses of well-being and mental health will be a primary concern of mine as I discuss the social problems associated with the ways in which these concepts are understood and encouraged by particular discourses in contemporary Canadian society.<sup>28</sup> My

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<sup>27</sup> Conspicuously, there is no mention of the ways in which social media can also have detrimental effects on mental health and well-being.

<sup>28</sup> These analyses, however, may be extendable to a North American or Western context more generally.

interpretation of these texts will attempt to disrupt our ‘common sense’ conceptions of mental health and well-being—that is, I seek to convey the myriad social effects that result from producing and circulating mental health and well-being in these dominant ways, ways that are exemplified and shared by the CMHA, Bell Let’s Talk, and positive psychology. Most fundamentally, I seek to dismantle the self-evident nature that we attribute to life projects of well-being; instead, I seek to show how life projects of well-being are *made* through discourse and more importantly how this *making* structures the way we understand what a ‘meaningful’ and ‘good life’ looks like. An essential step thereafter is to explore how this *making* also has political effects. This step makes the assumption that emotions play a central role in politics (Ahmed, 2004, 2010; Cvetkovich, 2012; Hochschild, 1979), especially in relation to maintaining or unsettling hegemonic social orders and ways of living in the world. Thus, this work finds its link with the emerging ideas in affect studies, in particular with critical scholars such as Ann Cvetkovich (2012), Sara Ahmed (2004, 2010), Lauren Berlant (2011), and Sianne Ngai (2005). Importantly then, this analysis considers the multiple ways in which a particular and ideal neoliberal subject is imagined as the reader of these mental health brochures; it also considers the political implications of the tendency in the texts to represent that subject as apolitical and asocial—that is, without circumstances and histories that might contextualize and politicize mental health (and illness).

Jhangiani & Vadeboncoeur (2010) conducted a similar discourse analysis where they explored the ways in which positive psychological logics have been taken up by mental health organizations and discourse in Canada. They problematize assumptions of psychological uniformity, individualism, and fixed, decontextualized, and “agentic” selves and have become shared by both Canadian mental health discourse and positive

psychology. My analysis mirrors some of their observations; in particular, the use of personal pronouns like “I,” “you,” and “your” in intimate, second-person discourse; the production of a binary between ‘mental health’ and ‘mental illness;’ and the assumption of an “internal locus of control” independent of barriers to individual action when pursuing mental health (pp. 176-180). My analysis, however, makes additional interpretations; for instance, it places a stronger emphasis on the normative and political ramifications of the discourse, as well as a more fundamental critique of the ways in which this discourse expounds a hegemonic neoliberal agenda.

These pamphlets, as well as the Bell Let’s Talk advertisement, can be read in multiple ways and they can convey distinct meanings and messages depending on the social context in which the text is consumed (Fairclough, 1992). The perceived meanings of the texts will also differ depending on the subject position one holds in particular social hierarchies. The assumptions that one brings to the text are important, and therefore the interpretations that I give here will not exhaust all possible ones (Hall, 1993).

First, I intend to offer a reading of these texts from *a naïve standpoint*.<sup>29</sup> This standpoint, like other standpoints, is an interpretation—of course, neutrality is not possible (Fairclough, 1992, 2012). However, reading these texts naïvely at first gives the reader a sense of the basic tenets of the texts. The goal, then, is to convey what the texts ‘say,’ how they look, and what they represent, on their surface. Second, I intend to give *a critical reading* of the texts; that is, to ask the following questions: What assumptions and what conceptualizations are being made in the texts (especially in relation to happiness, well-being, and mental health)? Who is imagined as the reader(s) of the texts? What, if

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<sup>29</sup> Here, I am drawing upon the material-semiotic approach that John Law (2002) uses in his book *Aircraft Stories: Decentering the Object in Technoscience*.

any, are the potential (political, hegemonic, social) effects of the texts? Or, put simply, what do the texts do?

### **A Naïve Reading**

John Law (2002) has argued that it is helpful to approach a text initially with a naïve reading that temporarily suspends what we may know about its producers, context, and target audiences, as well as the disciplinary assumptions that might be brought into the analysis from, in his case, narrative history, or, in this case, sociology. Even though there is no such thing as a naïve reader, and Law acknowledges that a naïve reader is a “methodological fiction” (p. 32), suspending these assumptions and approaching the texts from the imagined stance of a reader who knows nothing about the text’s subject or its readers, he argues, may help “to learn something about how the brochure works” (p. 12) and reveal how its subject is made through various strategies. As Law says, “the thought experiment is this: that we read excerpts from the brochures without making too many assumptions about its character, about what it is telling us, or about its likely readers” (p. 12). Following this approach, I will examine the technical and design aspects that are common to the CMHA brochures before using critical discourse analysis and providing further contextualization.

#### **The CMHA brochures.**

The brochures (Figures 1.1, 1.2, 2.1, and 2.2) are printed on white paper; each brochure is split into eight columns of words, images, or a combination of both; the brochures are written in English and different shades of green and blue are used; some of the colour is embedded behind the words (for example, a pale blue box behind white

text); some of the words themselves are coloured—usually the all-capitalized, and larger font titles of subsections.<sup>30</sup> Aqua-coloured font also appears on the back page of each brochure in a section titled “Do You Need More Help?”, which briefly explains the history and purpose of the CMHA, while also directing the reader to visit their website.<sup>31</sup> The back page of the brochures also shows the CMHA’s logo and slogan; the slogan is presented in the same aqua-coloured (and italicized) font: “*Mental health for all.*” The logo, which is referred to as the “Emerging into Light symbol,” was created by a CMHA consumer and intends to represent “the recovery and resilience of people living with mental illness” (Canadian Mental Health Association, 2018b). The back page also tells us that the “[d]evelopment of this brochure [was] generously supported by Bell Let’s Talk.”<sup>32</sup> Bell Let’s Talk’s insignia is also recognizable at the bottom of the back pages of the brochures.<sup>33</sup>

The front page of the brochures is formatted very simply: there is a big block of colour (in green or blue) at the top of the page behind white font indicating the title of the brochure—in Figure 1.1 or 2.1, for instance. The CMHA’s logo and slogan are apparent at the bottom of the page in blue and green, directly above the website URL ([www.cmha.ca](http://www.cmha.ca)), which is also in front of a block of colour.<sup>34</sup> In between the title of the brochure and the website, slogan, and logo of the CMHA, is an image that takes up about three quarters of the page. The image is in black and white and depicts either one or two individuals. This image serves as the focal point of the brochure because of its size

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<sup>30</sup> For example, in Figure 1.2, the title “Build Resiliency” is coloured in a deep blue, while the text underneath is black and about a third of the size of the title font.

<sup>31</sup> See Figures 1.1 and 2.1.

<sup>32</sup> This, again, demonstrates a reason to also analyze a portion of Bell Let’s Talk discourse—the connection between the two here is both logical and economic.

<sup>33</sup> See Figures 1.1 and 2.1.

<sup>34</sup> See Figures 1.1 and 2.1.

relative to the other elements of the brochure.<sup>35</sup> There are other images depicted in the brochure—scattered throughout—which are all presented in black and white. These other images are also of either one or two individuals.<sup>36</sup>

The majority of the brochures are split into two parts. The first part is typically a section that defines something (an emotion, a condition, an illness); for example, in Figure 2.2, under the title “What is Stress?”, the subsequent sentence reads: “Stress is the body’s response to a real or perceived threat. That response is meant to get people ready for some kind of action to get them out of danger” (2014g). This section usually addresses the reader as a member of an inclusive collective with words like “we” and “us;” for instance, in another CMHA brochure, under the title “What Are Mental Illnesses?”, reads “[m]ental illnesses are health problems that affect the way we think about ourselves, relate to others, and interact with the world around us” (2014d). This section tends not only to convey a matter-of-factness regarding what emotions are, but also how they feel in the body, what their function is, what causes particular emotions, and at what point particular emotions become a problem—this problem is often communicated as a problem for the self *and* for others.

The second part of the brochures shifts from addressing the reader as a part of a collective (“we,” “us,” “people,” etc.) to addressing the reader as an individual—this is done using second-person language (with the words “you” and “I”—the use of the word “I” of course implies the word “you” because the reader is assumed to be reading the “I” as though it is the reader herself).<sup>37</sup> For example, included in nearly all of the brochures is a section titled, “What Can I Do About It?” This section explains the ways in which one

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<sup>35</sup> See Figures 1.1 and 2.1.

<sup>36</sup> See Figures 1.1, 1.2, 2.1, and 2.2.

<sup>37</sup> For example, see Figure 2.2.

can manage, deal with, and control negative emotions (such as anger, stress, and sadness); often in this section, as we see in Figure 2.2, the author communicates to the reader some “common strategies that are helpful for many people.” Typically, the brochure binarizes healthy and unhealthy ways to cope with negative emotions; the healthy ways are usually described as productive, balanced, thoughtful, tolerable, humorous, assertive, peaceful, pleasant, helpful, and manageable; the unhealthy ways are usually described as causing physical health problems, ignoring the problem, uncontrollable, unhelpful, stressful, unenjoyable, violent, regrettable, overreacting, and overthinking. By using the words “you” and “your,” the brochure addresses the reader as the manager of these negative emotions.<sup>38</sup> For example, a longer-term solution posed in the “Feeling Angry” brochure suggests that “[i]f you feel frustrated when people don’t act the way you want them to, remember that you cannot control how other people behave. You can only control how you choose to react to those behaviours” (2014a).

In addition to tips for controlling negative emotions, like Seligman, the brochures also provide suggestions for building well-being. These sections suggest building self-esteem, confidence, support networks, purpose in life, and resiliency and they also address the reader as an individual. For example, in another brochure, under the heading “Building Your Team”, the reader is addressed as “you,” and the possessive “your” is used to instruct the reader to take various actions: “Talk with your family doctor. They are a great resource and can link you to other professionals, if needed” (2014b). The other professionals that are referenced in the pamphlets are psychiatrists, psychologists, counsellors, community health organizers, nurses, social workers, occupational therapists and peer supporters. This represents the construction of an imperative.

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<sup>38</sup> For example, see Figure 2.2.

### **The Bell Let's Talk Day advertisement.**

The latest promotional advertisement of Bell Let's Talk Day was shown before movies at Cineplex theatres across Canada in the spring of 2018, as well as on many mainstream television channels—I observed it in both of these contexts. The advertisement is also readily accessible for those with access to YouTube—I accessed it through YouTube in order to conduct this analysis. I have included two visual screenshots from the advertisement for the reader's reference.<sup>39</sup>

The following four sentences are the extent of the narrative in the 30-second commercial: “What do people impacted by mental illness look like? Like all of us. Mental health affects us all. Join the conversation” (Bell Canada, 2018b). The advertisement, like the CMHA brochures, addresses the viewer as a member of an inclusive collective with the word “us.” There is a soothing yet emotive melody being played alongside many snapshots of individuals, displayed one after the other. Individuals of various skin tones and appearances are pictured in various contexts with the signature Bell blue virtual message bubble next to their head;<sup>40</sup> this, coupled with the central message that ‘mental illness looks like all of us,’ indicates that these individuals are mentally ill themselves. In fact, in small but readable font at the beginning of the advertisement in the bottom right hand corner of the screen, are the words “[t]he people featured are affected by mental illness” (Bell Canada, 2018).<sup>41</sup> The advertisement then directs the viewer to “join the conversation,” reinforcing the claim that mental health and illness does impact and concern *all of us*. Mental health and mental illness are presented as a shared concern that should be discussed by all social actors. The advertisement flips back and forth between

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<sup>39</sup> See Figure 3.1 and 3.2.

<sup>40</sup> See Figure 3.1 and 3.2.

<sup>41</sup> See Figure 3.1.

the words ‘health’ and ‘illness,’ as if to use them interchangeably, however, although there is a suggestion that that the two terms are not equivalent, the advertisement does not define them. The end of the commercial presents a white screen with a big Bell Let’s Talk logo and the words “On January 31, Let’s Talk” followed by the words “Discover their stories” (Bell Canada, 2018b). The advertisement instructs the viewer to “talk” (presumably through various social media platforms) on Bell Let’s Talk Day, and to take interest—from the perspective of enhancing one’s own mental health and well-being—in the stories of the individuals that are represented therein.

### **A Critical Reading**

By crafting a naïve reading of the advertisement and the brochures, I look to set the stage for multiple critical discourse analyses. I will show that my chosen mental health and well-being texts reproduce hegemonic ideas within the discourse of neoliberalism. My analyses locate these brochures within four interrelated themes—or, more accurately, my analyses suggest that these brochures do (at least) four things. The brochures (1) psychologize, individualize, and universalize emotion; (2) produce a decontextualized and depoliticized subject; (3) produce a personally responsible, ‘moral,’ and normative subject; and consequently, (4) discipline neoliberal subjects. By drawing attention to these four themes, we can notice how the moves that Seligman makes in his exercise (discussed in Chapter 2) are intimately related and become more crystallized. My comments on the Bell Let’s Talk advertisement will also be suitably interspersed in these themes. However, before I structure my analysis in this way, I will give some separate preliminary comments on each of the two brochures included here for primary analysis. I examine the two brochures from two viewpoints supported by discourse analysis—(1) the

grammatical structure and content of the title; and (2) the ways that the brochure authorizes the advice it gives—before discussing the imagery in both the brochures and the advertisement.

### **The “Mental Health for Life” brochure.**

The title itself—“Mental Health for Life”—is a nominal sentence, as it lacks a verb. While it still has meaning, what it calls for is unclear for the following reasons: the subject is not a social actor, the lack of a verb means that no action is designated, and the object of the sentence has multiple potential meanings. Since the grammatical subject is “mental health,” rather than a social agent, it excludes social actors (Van Leeuwen, 2008, p. 30). Further, mental health is defined in the body of the text both negatively (i.e. what mental health is *not*) and in ways that are so overarching that its meaning cannot be grasped. “Life” is the grammatical object with which mental health is proposed to have a relation in the title “Mental Health for Life.” But, what does life signify here? Life can have several meanings. Here are three possible interpretations for the object “life”: temporality as the duration of a lifetime; biological and/or biographical entities; a state of dynamism or animation, as opposed to being non-lively, or lacking in dynamism. This third meaning can be further split into biological liveliness, emotional liveliness, or a combination of the two. Finally, the object “life” indirectly signifies in opposition to its relational binary term, “death.”

Additionally, the CMHA brochures authorize the advice they give to readers. The “Mental Health for Life” brochure describes the CMHA as a “community organization,” a “national charity,” and a “nation-wide leader and champion for mental health” that is well-networked with partners who can provide forms of support to help people access

mental health resources.<sup>42</sup> Given this description, the CMHA does not attempt to authorize their work through expert authority by providing a list of experts and formal credentials. Instead, the CMHA appeals to what van Leeuwen (2008) has identified as “role model authority,” which is often drawn upon in “advertising and lifestyle media” (p. 107). Role model authority exercises influence through peer group legitimation that proposes that people similar to the target audience “adopt a certain kind of behaviour, or believe certain things” (p. 107). Therefore, the CMHA does not make claim to strong forms of authority, but operates in a mode of recommendation (p. 109). The brochure highlights that the CMHA is a well-established and stable organization that has accumulated experience over time by including the fact that it was “[f]ounded in 1918.”<sup>43</sup>

Another way the brochures authorize the advice they give is through subtle moral evaluations. The following are four quotations from the Mental Health for Life brochure:<sup>44</sup> “Remember that all of us have our positive and negative sides”; “Problems and stress are a normal part of life”; “While some people learn these skills during treatment for mental health problems, we should really think of them as skills for everyone”; “Feeling sad, angry, and anxious at times is part of being human.” These statements naturalize the feelings or behaviours that are being targeted in the brochure so that readers will not feel judged. Nevertheless, these statements still make moral evaluations and support the kinds of activities and orientations promoted in the brochure. van Leeuwen argues,

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<sup>42</sup> See Figures 1.1 and 2.1.

<sup>43</sup> See Figures 1.1 and 2.1. The history of the CMHA, which would fall into an analysis of “discursive practice” and which Jhangiani and Vadeboncoeur (2010) briefly discuss, is outside the scope of this thesis. Future research could attend to that history more substantively.

<sup>44</sup> See Figures 1.1 and 1.2.

“‘Naturalization’ is a specific form of moral evaluation, a form which in fact denies morality and replaces moral and cultural orders with the ‘natural order.’ Morality and nature become entangled here, and discourse analytical methods cannot disentangle them. The only criterion for distinguishing between a true natural order and a moral and cultural order disguising itself as a natural order is the question of whether we are dealing with something that can, in principle, be changed by human intervention. And that is not always an easy question to answer” (p. 111).

In each of the cases above, readers are told that some of their feelings or behaviours that are “negative” or “weaker” are “natural” and experienced by everyone, but that they can use tips and tools to manage and perhaps, with “resiliency,” ‘change’ them. Moreover, the brochures present mental health not so much as a health condition, but as a way of being in the world. As Ehrenreich (2009) notes, “positivity is not so much about our condition or our mood as it is part of our ideology—the way we explain the world and think we ought to function within it” (p. 4). This reveals that what the brochure delivers is a way of hegemonically seeing and doing ‘life’ rather than an understanding of what mental health actually is.

### **The “Stress” brochure.**

Much like the previous brochure, the title of this brochure—“Stress”—is a nominalization. Because the title is a single word—a noun—and this noun is a grammatical object—“stress”—and there is no grammatical subject, social actors are again excluded (van Leeuwen, 2008). The title does not tell us who is stressed, why they are stressed, or what the brochure will say about stress. The use of a single word leaves it open to many potential meanings; however, because of the vernacular and versatile use of the word ‘stress’ to describe all aspects of neoliberal life, the reader can relate readily and easily to personal experiences of stress.

The structure of the brochures is fairly standardized, thus, the appeal to “role model authority” and 100 years of mental health-related experience is repeated verbatim in the “Stress” brochure as it is in the “Mental Health for Life” brochure. In this way, the “Stress” brochure also authorizes the advice it gives. However, it also authorizes and legitimizes itself in ways similar to the previous brochure. The “Stress” brochure reads, “[i]f we didn’t feel any stress, we wouldn’t be alive,” and “[s]tress is a part of being human;” these two sentences reiterate the ‘natural’ and essential character of stress. Without commenting on exactly what that stress looks like or what ‘causes’ or contributes to it, the brochure suggests that stress is an intrinsic part not only of our mental health, but also our life.

The brochure, alongside naturalizing the experience of stress, also employs moralizing language to advise the reader to use “helpful” stress to “motivate us” and to “take control” of “unhelpful” stress. For example, the brochure suggests that “[s]ome stress can be a good thing” and be “manageable.” In other cases, the brochure indicates that “people may feel overwhelmed or feel like they can’t possibly fix the problem [...] some people avoid dealing with the original problem altogether, which may make the problem—and stress—worse.”<sup>45</sup> In addition to these moral evaluations, the brochure uses threatening language to further emphasize the importance of managing personal stress levels. The brochure suggests that “[o]ver time, stress can also have a big impact on physical health. Sleep difficulties and headaches are common problems related to stress. People are also more likely to get sick when they’re experiencing a lot of stress.” By warning readers that “[i]gnoring the effects of stress can lead to other [physical and] mental health problems,” and simultaneously suggesting that such effects are “common,”

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<sup>45</sup> See Figure 2.1 and 2.2.

the brochure accentuates the importance of “taking action” to manage one’s stress. Thus, by utilizing moralizing (i.e. “good,” “problems,” “worse”) and cautionary medicalized language (i.e. “health problems,” “sick”), the brochure authorizes and constructs an imperative for the reader to seriously consider the forthcoming advice in the section “What Can I Do About It?”<sup>46</sup>

### **Imagery.**

Another dimension to which I would like to give attention is the imagery in both the brochures and the advertisement. As I observed in the naïve reading section, the photographs in the brochures are represented in black and white. Of the seven brochures that I have selected, there are twenty individuals represented. Ten of them are represented smiling—usually under ‘positive’ headings such as “Can I Prevent Stress?”, “Build confidence,” and “Mental Health for Life.” Ten individuals are shown with neutral facial expressions (or their facial expression are turned away in the image). However, some of the faces that I have read as ‘neutral’ can also be read—especially in relation to some ‘negative’ headings, such as “Feeling Angry,” “Stress,” or “Preventing Suicide”—as frowning or upset.

In the Bell Let’s Talk advertisement, there are sixteen individuals represented. Unlike the CMHA brochures, these individuals are not represented in black and white—they are represented in colour; they are also not represented in a still-image or photograph; instead, they are represented in very short snippets—approximately one-and-a-half seconds—of video where their facial expressions shift ever so slightly. However, the facial shift is rather consistent: the individual shifts from displaying a neutral or

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<sup>46</sup> See Figure 2.1 and 2.2.

content expression to a smile. Of the sixteen individuals represented, only three remain neutral<sup>47</sup> (some, however, begin and remain smiling in their snippet of time). Smiling, subtle contentment, and ease are the dominant facial expressions shown, which can be read as a personal expression of an internal state of well-being, health, or happiness.<sup>48</sup>

There are two noteworthy differences between the images represented in the brochures and the images in the advertisement: (1) the CMHA brochures represent either *one or two* individuals in each image, whereas the Bell Let's Talk advertisement represents only *one* individual in each short snippet; (2) the brochures represent the images in *black and white*, whereas the advertisement is represented in *colour*. I will discuss both of these points preliminarily and elaborate more on their significance in my thematic discussion.

The fact that one or two individuals are represented in both the CMHA brochure images and in the Bell commercial renders mental health and illness an individual pursuit. Instead of picturing a community or collective of people, choices are made by the producers of the advertisement to picture one individual.<sup>49</sup> And, in the case of the CMHA brochures, one or two individuals are pictured—I presume that one of the two individuals is a (familial, intimate, or professional) 'supporter' and the other is 'living with mental illness.' Moreover, in both the brochures and the advertisement, one individual is usually centered and focused, while the other is blurred and marginalized (turned away or on the margins of the photograph).<sup>50</sup> Furthermore, the images in the brochures and the Bell Let's Talk commercial consistently represent one individual as the focal point of the image—

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<sup>47</sup> See Figure 3.2.

<sup>48</sup> For example, see Figures 1.1, 1.2, 2.1 and 3.1.

<sup>49</sup> For example, see Figures 3.1 and 3.2.

<sup>50</sup> There are arguably three exceptions (Figure 1.1 & 2.1; 2014e) to this in the brochures: in these instances, two individuals are equally focused in the photograph.

centered and sharp—with the background, and the supporter in some cases, as blurry.<sup>51</sup>

This choice also tells us something about the logic of mental health and illness in the brochures: the context isn't the focus, the individual is. I will elaborate on this point later.

The images in the Bell Let's Talk commercial use colour and the CMHA pamphlets do not. I have chosen to capture two screenshots of the Bell Let's Talk commercial as Figures 3.1 and 3.2 in an attempt to reproduce the diverse representations that I see as instrumental to the core message of the Bell Let's Talk commercial: mental health affects us all, regardless of social context. The advertisement signifies diversity through representations of individuals with various skin tones, abilities, appearances, etc.—hence the visuals mesh with the message: *mental illness looks like all of us*. Racial ambiguity, however, is directly caused by the choice to depict the images in black and white.<sup>52</sup> Individuals are presented as minds only, devoid of social and historical relations. The eligibility conditions—that is, “the ‘qualifications’ participants must have in order to be eligible to play a particular role in a particular social practice” (van Leeuwen, 2008, p. 10)—are erased in both the Bell Let's Talk commercial and the CMHA pamphlets. These texts represent the social practice of pursuing well-being as being available or “eligible” for everyone, quite explicitly.

The coupling of individualized representations and ostensibly even, but non-particular, representations of diversity might aim for consistency with the Canadian

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<sup>51</sup> For example, see Figures 1.2, 2.1, 3.1 and 3.2.

<sup>52</sup> Following Gillian Rose (2007), I locate these photographs within the genre of documentary photography—the goal of which, quite simply, is “the desire to picture life as it apparently is” (p. 16). Black and white photographs, in this sense, attempts to represent ‘the real,’ or perhaps ‘the essence’ and ‘feeling’ of the image. Rose (2007) discusses how the photograph, as a medium, is linked to truthfulness; as she writes, “[f]rom its very invention, photography has been understood by some of its practitioners as a technology that simply records the way things really look” (p. 15).

policy of multiculturalism. While this visual-textual document claims to be addressing everyone, it does so with generic representations that stand outside of political and material contexts.

I will now explore the ways in which the four aforementioned themes manifest themselves in the CMHA brochures and the Bell Let's Talk advertisement.

### **The Psychologization, Individualization, and Universalization of Emotion**

The brochures take as their starting point the popular presumption of emotional interiority—or as Ahmed (2004) calls it, “the ‘inside-out’ model of emotions” (p. 9). That is, emotions are assumed to be possessed, and felt, by individual subjects ‘on the inside’ and then expressed outwardly. In other words, emotions are unsurprisingly *psychologized* in these brochures. Additionally, emotional expression is mobilized as something to be controlled, managed, or maintained by that subject—an assumption that intersects with the dramaturgical perspective of Erving Goffman (1959). He proposes that one performs particular emotions as though one is an actor on a stage, conforming to the social situation in which one finds oneself. What we are left with, then, is a feeling subject with the capacity to manage particular emotional expressions for the benefit of self and others. Sara Ahmed (2010) illustrates the ways in which this emotional norm is for the benefit of others—she also gives us a sense of the ways in which the emotional expectations of positive psychology intersect with the emotional expectations of this mental health discourse:

unhappy people are represented as deprived, as unsociable and neurotic [...] Individuals must [therefore] become happier for others: positive psychology describes this project not so much as a right as a responsibility. We have a *responsibility* for our own happiness insofar as

promoting our own happiness is what enables us to increase other people's happiness (p. 9, emphasis added).

This benefit, for self and others, is often communicated in terms of recognizing and accepting particular emotions while ensuring that our emotional expressions 'respect' others. We can see this clearly in the following description in Figure 1.1:

Emotional well-being is not about being happy all the time. Feeling sad, angry, and anxious at times is a part of being human. Emotional well-being involves expressing our emotions in a way that respects everyone. Bottling up our feelings doesn't respect our own experiences, just as lashing out because we feel angry may not respect others. Emotional well-being also includes recognizing what influences our emotions, discovering how our emotions affect the way we think or act, taking action when our emotional response isn't helpful, and learning to accept our emotions—even the difficult ones (2014c).

This description conveys an understanding of an emotional norm: there are proper and improper ways to manage our emotional expressions. In short, the brochure *instructs* its readers. It sets out "performance modes": the emotional practices that are expected of us (van Leeuwen, 2008). Thus, respecting others when we express ourselves emotionally, the 'humanness' of feeling sad, angry, and anxious sometimes, and the imperative to take action when our emotional response isn't accommodating, are all examples of the text implementing these performance modes (or "stage directions") (van Leeuwen, 2008). Furthermore, the brochure does not explicitly distinguish positive from negative forms of emotionality, and it does not explicitly suggest that positive emotions are 'normal' and negative emotions are 'abnormal;' but, what it does do, is produce a universal condition of emotion in which all social subjects 'at times,' and rather 'naturally,' feel, and have the capacity to manage, negative emotions.

In this description, a distinction is made between what one feels and what one expresses. A separation is enacted between the private—where emotions occur

‘naturally’—and the public—where emotional expressions are performed depending on situational expectations (Goffman, 1959). Although the malleable quality of these emotional expressions is addressed in the brochures (i.e. one working to express one’s emotions ‘in a way that respects everyone’), the assumption still remains that emotion ‘naturally’ manifests ‘on its own,’ ‘inside’ the individual. The job of the social actor, then, solely becomes how one can *express* those emotions ‘respectfully’ and ‘thoughtfully.’ The core message I read is this: social actors experience emotions ‘on the inside’ and for the sake of their own well-being and the well-being of others, are capable and encouraged to express those emotions ‘responsibly.’ “Emotional well-being” seems to signify what we might mean by responsible emotional expression—thus, one is effectively made responsible for the feelings of others and for the feelings of oneself.<sup>53</sup>

By focusing on emotional expressions as opposed to emotions per se, I hope to underline the foundational assumption in the brochures that ‘internally experienced’ emotions themselves *cannot* be controlled, whereas how we express them and how we respond to them, *can* be. This assumption then gets normatively extended in the sense that these emotions *ought to be* controlled in the *right ways*. Such stoic wisdom is crucial to the logics of both positive psychology and mental health discourses. Further, the pamphlets present emotions—that supposedly manifest on their own—with a universal and individualistic character. In other words, as Jhangiani & Vadeboncoeur (2010) write,

[t]he CMHA text analyzed [...] represent[s] a singular perspective on mental health that reifies the traditional assumptions of a universal psychology of individual mental health. Not only are readers presented with an individualistic version of mental health, but also the authors

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<sup>53</sup> This sort of logic also presumes that an irresponsible or negative emotional outburst or expression will have negative (internal) emotional effects on those who are proximate—including the self. Yet, with this implicit suggestion, the brochure contradicts its treatment of negative feelings as both interior and natural.

appear to assume that all Canadians live within a similar cultural milieu, adopt and utilize similar cultural tools to mediate their actions, and have interpreted and internalized common social and discursive practices uniformly (p. 179).

An individualistic logic of mental health runs through these brochures; as I have noted, the particular use of the words “I” and “you” in the brochures invokes *individual responsibility* for personal mental health. Although the texts begin with the presupposition that this is a collective or shared concern—with sentences such as found in Figure 1.2: “Mental health is key to *our* well-being. *We* can’t be truly healthy without it” (2014c, emphases added)—the texts transition to assumptions of a universal psychology and individualized expectations to pursue mental health.

### **The medicalization of mental health.**

Mental illnesses, particularly depression and anxiety, have become talking points in public and corporate discourse in Canada—mental illness, in general, is increasingly framed as a growing health problem. A key part of this discourse seeks to recognize that mental illnesses are ‘real’ in the same way that physical illnesses are ‘real’; as the CMHA brochure entitled “Myths About Mental Illness” reads: “Mental illnesses [...] are real health problems with effective treatment” (2014e). In short, mental illness (and therefore mental health) has become medicalized. In fact, CBC Radio’s podcast, *Rethinking Depression*, informs us that

[t]he World Health Organization says depression is set to become second only to heart disease as the world's leading disability by the year 2020. An alarming conclusion when you consider the history. One hundred years ago, depression was thought to be extremely rare, with 1% of the population suffering. Today it's often called the common cold of mental illness (O’Connell, 2013).

Depression is ‘on the rise’ and so is the consumption of mental health discourses—such as the texts that I have selected—seemingly in an effort to prevent depression from manifesting ‘in the self.’ The implication being that mental health is increasingly sought after in a cultural and social context in which depression is rendered rampant. In addition, the way in which increasing forms of negative emotion are *made medical* contributes to the rise of depression diagnoses.

Even though his work was published more than a decade earlier than the CBC podcast, Ronald Dworkin (2001) suggests that ‘normal’ unhappiness is being increasingly medicalized and treated with anti-depressants.<sup>54</sup> He argues that “[p]hysicians are being encouraged to think about everyday unhappiness in ways that make them more likely to treat it with psychotropic medication” (p. 86). I am interested in the ways in which a ‘normal’—that is, happiness, or at least non-unhappiness—is produced through the medicalization of unhappiness and how a pursuit of well-being becomes associated with this ‘normal.’ The medicalization and, consequently, the phobia and stigma that we attach to mental illness, perpetuates a situation in which social actors are compelled to consume mental health discourses like those spread by the CMHA and Bell Let’s Talk. As Dworkin’s asks, I wonder what the effects are when “unhappiness is brought into the orbit of medical science?” (p. 88).

When we consider the fact that mental health has an increasing role to play in public discourse and we consider this through the lens of understanding mental health as

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<sup>54</sup> The line between ‘normal’ unhappiness and ‘abnormal’ unhappiness (i.e. ‘real’ mental illness) is admittedly a blurry one. The point here is to suggest that perhaps the categories in which depression is diagnosed are the problem: perhaps the ways in which a binary is constructed between mental ‘health’ and mental ‘illness’ fuels an anxiousness of being labeled ‘abnormal’ and, more importantly functions as a disciplinary method of normalization.

an individual, psychological, and universal problem, we see that medicalization becomes the primary language that we use to make sense of mental health ‘problems.’ Consider the following sentence in Figure 1.2: “Mental well-being is bigger than the presence or absence of a mental illness. People who live with a mental illness can and do thrive, just as people without a mental illness may experience poor mental health” (2014c). This sentence assumes a distinction between ‘mental illness’ and ‘poor mental health:’ this distinction suggests that there are real, provable, labeled, and diagnosable mental conditions that are medically treatable, and there are other, less severe cases of poor mental health. However, importantly, both groups are still represented as having the personal resiliency to thrive and be well. These ‘illnesses’ are ‘possessed’ by an individual in the same way that ‘poor mental health’ is also ‘possessed’ by an individual. This possessive and individualistic language is a trademark of medicalization—this has troubling effects for Peter Conrad (2007); he suggests that

[t]he general mode [of medical intervention] is to solve the problem in the individual, not the society: treat the individual with alcoholism or the disruptive child with ADHD rather than intervene in the environment that produces alcohol abuse or the school system that deems the child troublesome or troubled” (p. 152).

Medicalization *makes* ill-health an individualized problem while simultaneously absolving the social of any responsibility. So, by locating the health problem in the body or in the mind, Conrad says that “[m]edicalization can obscure the social forces that influence well-being” (p. 152). We saw an instance of this earlier with Seligman’s (2011) discussion of “low positive affectives” and “the hell of unhappiness” (p. 14): the idea that something ‘innate’ blocks our happiness is an example of medicalization. The problem becomes depoliticized and individualized—therefore the quest for well-being is located in the individual, not in the realm of the social or the political. Conrad also identifies a

paradox in the logic of illness: the ‘illness’ is imagined as *common* (in an effort to destigmatize it, like Bell Let’s Talk Day’s slogan: “mental health affects us all”) but also as *abnormal* (constructing it as in need of medical or personal intervention, as Bell Let’s Talk, the CHMA, and positive psychology unproblematically assume) (p. 18). The CMHA brochures and the Bell Let’s Talk advertisement exploit this paradox to attract readers who are concerned about their own mental health and well-being. I am interested in tending to the ways in which my chosen texts adopt this language and simultaneously offer mental health advice that is communicated as pertinent to a large number of (or perhaps “all”) readers—advice that reifies hegemonic ways of thinking, living, and managing emotions.

The dominant biomedical system is not the only arena in which such trends are ongoing. “The rise of alternative and complementary health practices,” as Eeva Sointu (2006) notes, “can also be located within these wider societal trends” (p. 331). To be clear, alternative health practices refer to those practices outside the domain of Western medicine, such as, meditation, mindfulness, fitness, healthy eating, and so on. In particular, Sointu points out that these practices are “frequently described as ‘holistic’” whereby “physiological health is conceptualized as a part of a more wide-reaching notion of well-being” (p. 335). Well-being, Sointu suggests, is more than just a medicalized concept. Thus, “well-being is [also] constructed as something that *is available* for even those people who may be terminally ill” (pp. 335-336, emphasis in original). We can see a common thread here: *well-being is quite literally for everybody*. The health of the body (for someone who is “terminally ill”), as we see from Sointu’s work, seems to be independent of well-being—someone who lacks ‘health’ in the biomedical sense, may still possess ‘health’ in the well-being sense. Sointu argues that “[h]ealth as wide-ranging

well-being is explicitly open for personal meaning-making and subjective assessment that pertains, in particular, to how the person *feels* about him or herself. Well-being results from the person ‘being at peace,’ primarily emotionally” (p. 336).<sup>55</sup> The health of the mind is elevated here like the popular self-help advice ‘mind over matter.’ Similarly, Martin Seligman (2008) concludes that utilizing positive psychology advice results in positive health outcomes; he writes: “Subjective well-being, as measured by optimism and other positive emotions, protects one from physical illness” (p. 7). The sense I get is that, regardless of the condition of the body, an optimistic attitude can be independently channelled to combat physical illness. Ehrenreich challenges this notion by reflecting on her experience with cancer and the cultural—and apparently ‘scientific’—obligation to face it with a positive attitude:

What it gave me, if you want to call this a ‘gift,’ was a very personal, agonizing encounter with an ideological force in American culture that I had not been aware of before—one that encourages us to deny reality, submit cheerfully to misfortune, and blame only ourselves for our fate (p. 44).

Ehrenreich suggests that the mind-over-matter approach is a sinister neoliberal formation that makes it compulsory for social actors, no matter what’s happening on ‘the outside,’ to look the ‘inside’ to overcome it. For Ehrenreich, we have to be diligent in the perspective that “mind does not automatically prevail over matter” (p. 205). In other words, matter matters. A smile, for Ehrenreich, is not an indisputable response to troubling realities.

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<sup>55</sup> “How the person *feels* about him or herself” locates well-being (health) as an evaluation, an *emotional* assessment of the self. Which is similar to the way in which Haybron (2013a) conceptualizes *happiness*: “[w]e can think of happiness as a kind of emotional evaluation of [one’s] life” (p. 19). Ultimately, there are numerous overlapping and intersecting logics that inform the discourses of happiness, well-being, and health and they largely share this notion of a subjective, emotional, and eudaimonic assessment of the self.

Whether we are considering biomedical or alternative health approaches (if we can in fact neatly separate these two domains out), both center the mind—the individual’s attitude, will, and behaviour—as the arbiter of personal well-being. We can see that the CMHA brochures and the Bell Let’s Talk advertisement do the same thing. These four discursive formations—psychologization, individualization, medicalization and universalization—are intertwined and share many of the same foundational assumptions. Understanding emotions through this lens produces a subject that is without social, historical, or economic relations that could contextualize and provide nuances to one’s emotional experiences. Similarly, more support, although in different terms, comes from Didier Fassin’s (2012) interrogation of the “inflation” of social suffering, which presents everyone as equally susceptible to it. The language of suffering that now applies to all social actors—regardless of social position, citizenship status, and material circumstance—has supplanted the language of inequity and solidarity and rendered the social structure as flat: as equally affecting all. This equalizing has become a commonplace neoliberal perception—a problematic perception that saturates my chosen texts.

### **The Production of a Decontextualized and Depoliticized Subject**

A key technique used in the brochures is to homogenize emotional experience. The brochures treat emotions as though they are evenly distributed across subjects; that is, emotions are conceptualized as independent of social contexts. However, sociologists of mental health know this is not the case; emotions are stratified and unevenly experienced

by subjects in particular social, and economic circumstances<sup>56</sup> (Branaman, 2008; Hochschild, 1983; Simon, 2008), and access to mental healthcare is vastly unequal (Muntaner, Borrell & Chung, 2008). However, I am less interested in the ‘truth’ or ‘falsity’ of particular social hierarchies of emotionality and access to healthcare as I am with the ways in which these texts enact emotionality and mental health and how those enactments hide these inequities and hierarchies. In other words, I am interested in how this enactment supports the hegemonic ideals of neoliberalism and therefore has veiled social and political investments and effects. A major effect, of course, is that these texts imagine emotion as dislocated from social and political contexts. There is a prime example of this in Figure 1.2:

Mental health is about realizing our potential, coping with the normal stressors of life, and making a contribution to our community. It may be more helpful to think of good mental health as thriving. Good mental health isn’t about avoiding problems or trying to achieve a ‘perfect’ life. It’s about living well and feeling capable despite challenges (2014c).

This section of text deletes the specific and replaces it with the vague; in other words, “normal stressors,” “life,” “good mental health,” “problems,” “living well,” and “challenges” are all words and phrases that lack details. This deletion gives the reader an indistinct representation of the meaning of these sentences (van Leeuwen, 2008). These statements also lack a social actor, which, along with the deletion of the details,

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<sup>56</sup> Emotional experiences (‘on the inside’ and ‘outside’) are always already performances; they require emotion work that corresponds to particular feelings rules (Hochschild, 1975, 1979). However, these emotional experiences, although not ‘authentic’ in the strict sense (because no emotion is ‘authentic’ in the strict sense), have real effects—personally, socially, politically, and historically. A key assumption I am making, of course, is that political realities directly affect personal emotional experiences. Consequentially, my work intends to disrupt the ‘causal link’ that *psychological* realities impact emotional realities (which seems to be the mobilized language of the selected pamphlets) and instead encourage us to pay particular attention to the ways that *political* realities impact emotional realities (Cvetkovich, 2012).

constructs a social world where subjects are equal and stressors are equal (van Leeuwen, 2008, p. 30). The word ‘normal’ here also functions to homogenize and normalize experiences of stress as though there are no divergent experiences of stress in neoliberal social life. Further, the words ‘problems’ and ‘challenges’ are decontextualized, thereby contributing to the normalizing and homogenizing discursive fabric. This kind of formulation presents a subject that shares common experiences of stress with other *like and unlike* subjects. The description deliberately does not account for race-based, gender-based, sexual-based, ability-based, class-based, or other social- or political-based forms of stress. The choice to be vague and give a “woolly knowledge” about what ‘normal stressors,’ ‘challenges,’ and ‘problems’ look like is a choice that maintains the notion of a universal and homogenous psychology (van Leeuwen, 2008, p. 18). In short, the brochures do not identify the violence of neoliberalism, but rather they identify similar patterns of stress, problems, and suffering for *all* individuals; as Fassin (2012) writes, the reader becomes “a spectator of suffering rather than of violence, and the emotion to be felt [is] compassion rather than terror” (p. 25). The violence and terror of contemporary political realities—for some social groups—are buried underneath the façade of equal suffering.

‘Coping’ is another word of interest to me in the above section of text—it is a word that has a strong link to Seligman’s positive psychology. Seligman (2011) refers to something similar when he writes about the psychology of ‘dealing with it,’ which is defined as “learning to function well even if you are sad or anxious or angry—in other words, *dealing with it*” (p. 51, emphasis in original). He argues that this is an alternative approach to pharmacological or other therapeutic interventions. Seligman’s provocation to ‘deal with it’ establishes a link to what Figure 2.1 tells us: “The goal of stress management is to bounce back from problems or challenges and maintain wellness”

(2014g). Both Seligman and the CMHA brochures contend that well-being is about dealing with circumstances, not altering them. ‘Good mental health’ is about coping with any and all circumstances—it is about living with inequities of all kinds and still feeling well. What I would like to suggest, then, is that there are *barriers* to feeling well and these barriers are not exclusively of personal or medical origin—these barriers are socially and politically made and remade. It’s a decisively hegemonic move on the part of the CMHA and Seligman to encourage subjects to *cope with* those stressors that are politically and socially upheld. A couple questions to consider: Whose interests are served when we are told to ‘cope?’ Why doesn’t the CMHA pamphlet read, ‘Mental health is about standing up against stresses that are of political origin; mental health is about socially organizing and radically protesting the structures of domination embedded in the status quo?’ A premature answer: the CMHA deploys hegemony to uphold the status quo—resistance is not particular useful advice from a mental health perspective.

Mental health is defined at length on the CMHA (2018b) website as:

striking a balance in all aspects of one’s life: social, physical, spiritual, economic and mental. At times, the balance may be tipped too much in one direction and one’s footing has to [be] found again. Everyone’s personal balance is unique and the challenge is to stay mentally healthy by keeping the right balance. Mental health is as important as physical health. The World Health Organization (WHO) has always considered mental well-being as an integral part of the general definition of health. WHO defines health as ‘a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.’ CMHA believes that everyone must have good mental health, including people living with mental illness on a daily basis.

The focus of mental health becomes a balancing act between competing normative priorities whereby mental health is not defined in binary opposition to mental illness, but rather as something that each and every one of us “must have.” Mental health, regardless

of social, economic, medical, citizenship, or cultural status becomes obligatory: something we “must” all actively pursue.

This definition brings me back to my prior discussion of imagery. The ways in which images of individuals are represented in both the advertisement and the brochures contributes to this depoliticizing and decontextualizing message. The use of black and white photographs in the brochures; the blurring of the backgrounds and the focusing of the individual; the ambiguity of the subjects’ social and economic circumstances perpetuates the sense that political realities do not matter, only the individuals and how they emotionally respond to situations and the ‘choices’ they make does. The brochures and advertisement combine textual and visual elements that construct mental health as a personal balancing act, independent of politics.

### **The Production of a Responsibilized, Moralized, and Normativized Subject**

The individual that is enacted through the brochures is a culturally, historically, and hegemonically specific one. This specificity matters in terms of the knowledge that is produced in the discourse. Following van Leeuwen (2008), I propose “that all texts, all representations of the world, and what is going on in it, however abstract, should be interpreted as representations of social practices” (p. 5). These knowledges, these representations, that is, the pamphlets and the advertisement, have particular effects in addition to the individualization, depoliticization, and psychologization of well-being and mental health. These pamphlets also produce a subject that *ought to* emotionally manage oneself in hegemonic ways—ways that bring along with it particular moral and neoliberal assumptions. This section will consider the ways in which the texts socialize the ways emotion *should be* experienced and regulated by social actors. Therefore, this section is

concerned mainly with the ways in which the texts function inside a dominant neoliberal framework.

Since the 1970s, the neoliberal paradigm has become more entrenched in North American economic and political discourse. According to David Harvey (2005), neoliberalism “proposes that human well-being can best be advanced by liberating individual [...] freedoms and skills within an institutional framework characterized by strong private property rights, free markets, and free trade” (p. 2). Within that philosophy, then, is a strong emphasis on individual responsibility and agency in the pursuit of well-being; thus, Harvey suggests that neoliberalism stems from the desire “for greater freedoms of speech and of personal choice. More generally, these ideals appeal to anyone who values the ability to make decisions for themselves” (p. 5). Similarly, Gabrielle Slowey (2008) defines “[n]eoliberalism’s ideal citizen” as one “who competes in the marketplace, is self-reliant, and does not act as a drain on the state” (p. xv). Essentially, in a neoliberal world, the individual is centered as the agent of one’s own well-being—mainly through individualism, competition, resilience, and consumerism—and thus, merit and individual will become imagined as the sole reasons for individual success. *If you work hard enough, you can achieve well-being, if you don’t, you can’t.* We can see how the logics of neoliberalism and the logics of positive psychology intersect here; for instance, Ehrenreich (2009) critiques positive psychology by arguing that “[p]ositive thinking seeks to convince us that such external factors are incidental compared with one’s internal state or attitude or mood” (p. 205). Recall Seligman’s (2011) insistence that circumstances and external events are incidental for our emotions compared to how we *think* about those circumstances or events. For Seligman, the way we interpret our material realities—not the material realities themselves—produces our emotional

experience (pp. 89-90). Thus, we can rephrase the neoliberal ethic: *if you have a positive attitude, you can achieve well-being, if you don't, you can't.*

The problem is that “[n]eoliberalism has, in short, become hegemonic as a mode of discourse. It has pervasive effects on ways of thought to the point where it has become incorporated into the common sense way many of us interpret, live in, and understand the world” (Harvey, 2005, p. 3). Most of us believe that holding individuals responsible for the outcomes of their lives—or more simply, their well-being—is just simple common sense, not rooted in a neoliberal hegemonic framework (van Leeuwen, 2008). I have explored how this ‘common sense’ operates in Seligman’s text, but we can also see it shine through in the CMHA pamphlets; for instance, as Figure 1.2 puts it,

[e]ach of our paths to mental well-being will be unique. We all have our own goals, our own challenges, and our own supports. But good mental health is in everyone’s reach. Below, find tips and activities to help you take a look at your own well-being, discover your strengths, and take action (2014c).

Implicit in the wording “good mental health is in everyone’s reach” and “find tips and activities to help you take a look at your own well-being” is the idea that the reader, and only the reader, is responsible for one’s “good mental health” and one’s “own well-being.” The individual is *made* responsible through this discourse. Brookes & Harvey (2015) suggest that this kind of responsabilizing neoliberal logic pervades public health discourse in their multimodal discourse analysis of a UK health promotion campaign. They identify a shift: “In recent times, at least from the turn of the twenty-first century, health promotion has changed its emphasis from curing and containing disease to inciting people to take personal responsibility for maintaining their health” (p. 59). They continue by writing,

[t]his shift can be situated within the wider movement towards a neoliberal model of public health in Western societies. The logic behind such an approach is premised on the idea that rates of illness will be reduced if individuals can only be persuaded to practice self-care, that is, modifying their lifestyles in accordance with healthy living advice (p. 59).

This kind of persuasion is magnified by the routine use of moral language in daily life regarding pursuits of well-being (mental, physical, or otherwise). Consequently, the use of the word “good” in the above snippet of the CMHA pamphlet is not innocent. Conrad (1994) shows, for instance, “how a particular aspect of culture, the moral meanings of health-promoting activities, contribute to the pursuit of wellness” (p. 385); he suggests that “[m]orality and health are often linked. Words like health and wellness,” he writes, “have a positive moral valence while disease and illness have a negative valence” (p. 387). Although Conrad’s research concerns *physical* health-promoting activities—such as healthy-eating and exercise—the difference between the physical and mental health have, as I mentioned earlier, become blurred in recent years (Seligman, 2008, 2011; Sointu, 2006). In fact, Conrad found that “many respondents noted looking good is closely related to feeling good. ‘If you look good, you feel good.’ And if exercising makes you feel good about yourself, then you certainly must be doing it” (p. 396). Thus, one is not only obliged to exercise, but, by pursuing physical well-being, one is also simultaneously pursuing mental well-being.

There are also multiple examples of the merging of physical and mental health in my chosen CMHA brochures. In the context of dealing with problematic anger, a long-term solution posed in the brochure entitled “Anger” is to “[m]ake sure you eat well and get enough sleep;” another piece of advice, in the same context, is that “[m]any people find physical activity very helpful. Try going for a walk, playing your favourite sport, or

cleaning the house” (2014a). Similarly, in the context of dealing with stress, a simple solution written in Figure 2.1 is to “[g]et active. Physical activity can be a great way to reduce stress and improve your mood. Activity,” the brochure reads, “could be anything from taking up a new sport to walking. The most important part is that it gets you moving and you enjoy it” (2014g). We see not only the recommendation to be physically active in order to be mentally well, but we can also notice that these recommendations become (rather forceful) obligations: *make sure* you eat well; *make sure* you get enough sleep; *get* active. Further, they become the sole responsibility of the individual—the socioeconomic relations that might constrain the amount of agency that an individual has in the matter of physical activity and mental well-being are not addressed. As Brookes & Harvey put it, “[w]ith its laissez-faire, individualistic values, neoliberalism’s emphasis on assuming personal responsibility for health downplays the significance of environmental factors in the onset of disease and health problems” (p. 59). In short, these discourses conceal the social determinants of health.

We can see, then, that the CMHA pamphlets are a part of, what Conrad sees as a “profoundly moral discourse around health promotion, [thereby] constructing a moral world of goods, bads and shoulds” (p. 385). This begs the question: what are the effects of thinking healthiness and well-being as ‘the good,’ and un-healthiness and illness as ‘the bad’? Especially in the context of thinking happiness, well-being, and mental health as reflective of emotional assessments of the self (Haybron, 2013a; Sointu, 2006), “[t]hese moral evaluations can affect how people feel about themselves” (Conrad, 1994, p. 393). In other words, this kind of moralizing rhetoric has productive—and disciplinary—effects; that is, it produces mental health as ‘the good’ and it produces subjects who will willingly pursue ‘the good.’ Thus, much like the overarching message

of positive psychology, the normative message of this mental health discourse becomes: ‘good’ emotions *should be* cultivated through various habits of thought and lifestyles, whereas, ‘bad’ emotions and their accompanying lifestyles and habits of thinking, *should be* avoided. Additionally, Ehrenreich explains that “we have come to use the words ‘positive’ and ‘good’ almost interchangeably. In this moral system, either you look on the bright side, constantly adjusting your attitude and revising your perceptions—or you go over to the dark side” (p. 195). Similarly, Conrad (1994) suggests “the pursuit of health and fitness becomes a ‘good’ end in itself” (p. 398). Mental health is rendered the ultimate of human values—the purpose of a human life. In that sense, then, these texts enact positive emotions as intrinsically valuable and negative emotions as in need of management—thus leaving the reader compelled to pursue and manage them ‘appropriately.’

Another example is in need of highlighting. In Figure 2.2, a section of text is accentuated: “Stress may feel overwhelming at times, but there are many strategies to help you take control” (2014g). The extent to which some subjects are better equipped economically and socially to ‘take control’ of stress is not a significant concern of the text. Instead, the suggestion in Figure 2.1 is to “[s]tart on the inside”—with alternative health “[p]ractices like yoga, meditation, mindfulness, prayer, or breathing exercises;” these, Figure 2.1 explains, “can help you quiet your mind and look at problems from a calmer, more balanced point of view.” And, with time, the brochure encourages, “these practices can help you manage your response to stressful situations as they come up” (2014g).

I see a concrete link between the advice promoted in this brochure and the ‘outside-in’ theory of emotion forwarded by Arlie Hochschild (1975, 1979). She argues

that subjects conform to feeling rules (which are dictated by social situations) by engaging in emotion work—of which there are two kinds: evocation—to evoke a feeling that is absent—and suppression—to suppress a feeling that is present (1979, p. 561). This kind of emotional process—that subjects actively engage in—is always informed by particular discourses. I argue that these brochures, and the broader logics of well-being that circulate in popular culture, function as a kind of hegemonic emotion management tool. That is, feeling rules and emotional norms are effectively being forwarded in the text—feeling rules that are contained within a key positive psychological assumption: an individual’s circumstances or situation does not have a significant role to play in the emotional experiences of that individual. In other words, the attitude, the perceptions, and the resiliency of the individual are centered as the arbiters of emotional experience. Thus, it is not surprising that Figure 2.2 goes as far as to say that “[s]tress is a reaction to a situation—it isn’t about the actual situation” (2014g).

In a nutshell, the CMHA pamphlets produce a reality in which stress, negative feelings, and mental illness are the result of poorly formed emotional responses—a subject failing to be resilient—not the product of unjust realities. Moreover, the language of resiliency in the brochures—which is fundamentally linked to the agenda of neoliberalism (Ahmed, 2017, p. 236)—hints that an admirable attitude towards poor circumstances is to overcome them. However, Ahmed (2017) contends that there are exigencies to this overcoming:

[b]eing poor, being black, or being of colour puts your life at risk. Your health is compromised when you do not have the external resources to support a life in all of its contingencies. And then of course, you are deemed responsible for your own ill health, for your own failure to look after yourself better. When you refer to structures, to systems, to power relations, to walls, you are assumed to be making others responsible for the situation you have failed to get yourself out of. ‘You should have

tried harder.’ Oh, the violence and the smugness of this sentence, this sentencing (p. 238).

In other words—in Ahmed’s discussion of Audre Lorde’s work—she suggests that “structural inequalities are deflected by being made the responsibility of individuals” (p. 239). Thus, by producing this kind of reality: the social is obscured; the political is obscured; inequity is obscured; and injustice is obscured. By utilizing the advice of the CMHA, the individual is rendered as an apolitical being that can deal with whatever ‘life’ might throw at them; feelings are rendered dislocated from the political and historical realities in which they originate. We learn to manage our emotions in dominant ways through the circulation of these knowledges and I argue that these ways of managing our emotions are politically dangerous. I worry deeply about this intensely depoliticized emotional socialization. Perhaps I should exercise and meditate a little more.

### **The Neoliberal Disciplinary Effects**

The messages and images in the CMHA brochures and the Bell Let’s Talk commercial culminate into a fundamental rejection of contextualizing and politicizing emotional experience; rather, the individual is seen as a manager of negative feelings—an individual that values, and will happily pursue, personal well-being in conventional and hegemonic ways. This stance on well-being has particular effects in addition to crafting emotions as an apolitical matter; it also reproduces hegemonic ways of life—‘the good life’—that intersect with structures, institutions and relations of power, domination and exploitation. These texts reproduce these power relations without naming them as such. In this section, I am mostly interested in extending my discussion in Chapter 2—I will explore the ways in which ‘conventional’ and conservative ways of living in the world are

reproduced as if they are the one's that bring well-being and mental health. I will also explore the ways in which these texts, specifically, and the pursuit of well-being and happiness, generally, deploy hegemony and therefore reproduce the status quo and maintain the ongoing unjust neoliberal order.

In Figure 1.2, a few “tips and activities” are recommended for the reader’s “own well-being”; for example, the brochure suggests that you should “[m]ake time just to be with important people in your life. Make time for simply having fun and enjoying each other’s company, and time for serious conversations” (2014c). Figure 1.2 does not consider the possibility that some may not have time for such activities; they may not even have ‘important people’ to which they can conveniently turn to. Another tip provided by Figure 1.2 is to

[b]e a volunteer. Read to children at your local library, visit people in a hospital or care facility, serve on a committee or board of your favourite charity, clean up your favourite park or beach, or simply help a neighbour (2014c).

Similarly, the brochure does not reflect on the fact that the precarious structure of flexible labour, a characteristic of neoliberalism, impedes some from having the excess time, the job stability, and the financial stability to volunteer or to develop and maintain close relationships. In the same vein, Figure 1.1 tells the reader to

[l]earn ways to deal with your moods. Share joyful news with a friend, and find support when you feel sad. [...] Keep a stack of your favourite funny cartoons, stories, or videos for times when you need to laugh. And don’t forget the power of music to lift you up or calm you down (2014c).

Again, access to time—to enjoy friends and to indulge in entertainment—is not equal across all subject positions; but the brochure seems to present, as a given, that all of its readers have the financial access to purchase entertainment material, and the excess time to enjoy that material. Furthermore, Figure 1.1 recommends, in bold font, to “[c]onnect

with yourself”—to do this, the brochure suggests that the reader “[s]et aside quiet, quality time to be totally alone.” It also mentions that the reader should “[t]ry a breathing exercise” or “do something you love to do, like dancing, going to a baseball game, building a bird house, going for a hike—whatever works for you” (2014c). These suggestions, once again, assume levels of autonomy and opportunity that are not evenly distributed.

van Leeuwen (2008) suggests that “[s]ocial practices are also related to specific locations” (p. 11). Although not explicit, the pamphlets indicate the need for specific social-spatial spaces—a quiet room, in a quiet home—for the elements (listening to music, watching cartoons, videos, or reading stories) of this social practice to occur. The pamphlet also implies that you need a space with a floor to dance on, a garage to build a bird house, a baseball field to attend a baseball game—the transportation to the game, the money to purchase a ticket to the game, too—and a location to go for a hike. In short, the pamphlet imagines subjects as having access to very particular social-spatial sites. The opportunities to pursue this social practice can once again be understood within a framework of eligibility conditions (van Leeuwen, 2008). Not only in terms of which social actors are eligible, but relatedly, what kinds of locations or spaces count, and what kinds of resources are needed to fulfil this social practice; as he writes, “[l]ike participants and locations, tools and materials are subject to eligibility conditions” (p. 12). Thus, what quality of cartoons, stories, music, and videos qualifies as actually contributing to well-being? And what space, in what set of circumstances, meet the demands of this social practice?

Partially, the point I wish to make is that this advice functions as a repetition of the myth of meritocracy. For those individuals who cannot afford to go to a baseball

game, who do not have access to these particular locations, who do not have supportive family and friends to lean on, or those who do not have the time, energy, and resources, to build a birdhouse, to volunteer, or to listen to music, it is deemed a fault of their own making. And because these unhelpful hegemonic discourses circulate so widely and are internalized so deeply, this advice *is* recognizable to subjects that are systematically excluded, although it offers *no means* to its realization. This conversation is therefore about inequity and unequal access to particular ways of living.<sup>57</sup> These kinds of inequities are not random—they are structural: they are to the benefit of some, and to the detriment of others; and they are always embedded in intersections of race, class, gender, sexuality, ability, wealth, and so on (Giroux, 2004). However, the examples in the pamphlets are important to explore—they are important precisely because they show the underlying material assumptions that the pamphlets assume of their readers. These ways of living are pronounced in the CMHA pamphlets and they are pronounced in Seligman’s positive psychology.

But, I want to take this discussion even further. The texts obviously do not consider the larger systemic social and political hierarchies associated with racism, sexism, homo and transphobia, xenophobia, wealth inequality, and other cruel, violent, and immoral elements of neoliberal society that may contribute to personal emotional turmoil. In short, the texts do not speak to the social realities of every subject. However, the texts *intend to target everyone*; in doing so, they have particular disciplinary effects. Looking at it in this way, the pamphlets render these structural conditions as peripheral to emotional regulation. In other words, its neoliberal discursive strength is derived from the

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<sup>57</sup> Although, as will become clear in the conclusion, by no means am I promoting these hegemonic ways of living.

centering of emotional regulation and supplanting of social group membership and material realities. Another way of interpreting it is that this literature instructs its readers to imagine themselves in psychic rather than material terms and is therefore disciplinary. By peripheralizing these material and structural realities, the psychic and mental realities are centered as the realities to manage, to cultivate. The highlighting of mental health as a personal obligation, as a must, is the 21<sup>st</sup> century's most disciplinary tactic.

Of the expansion of both the language of compassion and body of knowledge that he traces from France in the 1990s to present on both sides of the Atlantic, which emphasize a universal social suffering over structural inequality and violence, Didier Fassin argues that

a semantic configuration does not appear out of nowhere. It originates in a specific social world—professional, institutional, cultural—which at a given moment becomes to some extent recognized as an authorized describer of social facts and a competent provider of social responses. In France during the 1990s, the field of mental health played this role. It found the words to articulate social disarray (p. 24).

I would argue, in the Canadian context in the late 2010s, that the field of mental health still plays this role; however, instead of articulating 'social disarray,' these mental health discourses reproduce *psychological* disarray as originating in the mind through psychologizing and medicalizing language while obscuring the social and political circumstances that bring it to life. Further, Fassin's observation reveals a paradox that is relevant to this discussion. On the one hand, well-being and positive emotions are privileged modes of being, but, when these fail, the language of emotional suffering becomes the socially recognized register for expressing what may be effects of the social structure, *while making that structure invisible and removing it from the equation*. That is, not only do the structural inequities become peripheralized or silenced in regards to

psychological disarray, but also psychological disarray is enacted as fixable only at the site of the neoliberal, personally responsible, resilient mind—not at any other site. The social world need not be managed, but the personal emotional world ought to be. What I am suggesting, then, is an inversion—a normative inversion of this—*the personal emotional world need not be managed, but the social ought to be.*

Although I have shone a critical light on conceptions of well-being and the emotional advice in the CMHA pamphlets and the Bell Let's Talk advertisement in this chapter—as well as in Seligman's positive psychology in the previous chapter—in a sense, the brochures do offer some helpful advice in the context of neoliberalism. The underlying claim that there are things in this version of the social world that are out of one's control, for example, is somewhat helpful advice. This is helpful because it further prepares readers for the troubling realities and injustices of neoliberal selfhood. That is, some self-care is indispensable for mental health, especially for social actors who are brutally marginalized and oppressed by neoliberalism. But, once again, let us be careful not to assume that this control over one's self-care (or lack thereof) is evenly distributed across all subject positions: it is important to keep a critical consciousness—"a sociological imagination" as C. Wright Mills would say—towards the ways in which troubling realities that require a care for the self can be located within broader social and political problems—problems that can be ameliorated through social and political action and involvement. Ehrenreich (2009) articulates this point lucidly:

that happiness is not the inevitable outcome of happy circumstances does not mean that we can find it by journeying inward to revise our thoughts and feelings. The threats we face are real and can be vanquished only by shaking off self-absorption and taking action in the world (p. 206).

The point is simple: there are real material inequities ongoing in this historical moment, and these cannot—and should not—be overcome by suppressing negative emotionality and looking on the bright side.

## **Conclusion: ‘Bloom Where You Are Planted’: Life Projects and the Killjoy**

*“I’m claiming the right to be unhappy”*

— Aldous Huxley, *Brave New World*

This thesis identified a psychologized, individualized, and depoliticized conception of happiness, well-being, and mental health in Martin Seligman’s positive psychology (i.e. his book *Flourish*), selected CMHA brochures, and a Bell Let’s Talk promotional advertisement. Through embodying traces of the classical Aristotelian perspective on happiness (i.e., eudaimonia, well-being), this project showed that these three approaches share the lens of positive psychology, and uncovered that particular habits of emotion management, conservative ways of living, and techniques of positive thinking underscore their use of the concept well-being. I argue that this advice is hegemonic and weaves effectively into notions of an ideal neoliberal subject—a subject that is resilient, self-sufficient, balanced, and responsible (Harvey, 2005; Slowey, 2008).

In Chapter 1, I discussed the ways in which the ‘inside-out’ and ‘outside-in’ models of emotion tend to center the subject through either the assumption of emotional interiority, or the notion that subjects are moved by social forces. Ahmed’s (2004) theory of emotion, in contrast, proposes that emotion helps to produce the distinctions between subjects and objects and permits the centering of relations and structures, which, unlike the depoliticizing tendency of the former theories, politicizes emotion in a way that challenges universal and individualist assumptions that engulf the discourse of mental health and well-being.

In Chapter 2, I linked the shared dismissal of hedonism—by Aristotle and Seligman—with hegemonic lifestyles and mental management. This linkage, I argue,

hierarchizes some ways of living over others by suggesting that hegemonic ways of living will give social actors a sense of well-being, whereas other possible ways of living are rejected as ‘vulgar.’ Thus, moral judgements accompany what ways of living are the ‘right’ ways in Seligman’s What-Went-Well exercise—these ways of living are often assumed to be upper-middle class, heteronormative, and patriarchal.

In Chapter 3, I expand on the ways in which hegemonic lifestyles are embedded and moralized within selected mental health discourses in Canada while also underlining the ways that politics are eradicated from them. Subjects are most recognizably depoliticized, and their emotional experiences homogenized, in the mottos of the CMHA and Bell Let’s Talk: “Mental health for all,” and “Mental health affects us all,” respectively. By expanding mental suffering to include ‘all,’ structural and material inequities are made peripheral to the well-being of the self. Thus, the violence of neoliberalism is erased and the self is expected to balance and overcome any and all circumstances in the pursuit of mental health.

In relation to the expansion of mental suffering that I have identified here, Didier Fassin (2012) explored national “listening centres” implemented in France in the late-1990s to hear the complaints of the marginalized, however, the language he uses to describe them seems to resemble the discourse of Bell Let’s Talk:

in an era in which social inequalities have continued to deepen, the normalization of social suffering in the public arena and the institution of a national policy on listening do not derive only from new forms of subjectivation resulting in the manifestation of a concern for the misfortune of others; they are also modes of government that strive to make precarious lives liveable and elude the social causes of their condition (p. 42).

Bell Let’s Talk uses this same approach: “to pacify rather than to treat” (p. 40), to focus on the individual ‘victim’ rather than address the structural inequities. In short, the

approach centers the self—not the social—in an attempt to flatten material realities and “make precarious lives liveable.” Although not a national policy per se, Justin Trudeau, the Canadian Prime Minister, has promoted its message (Bell Let’s Talk, 2018c).

Fundamentally then, I propose a relationship between living a neoliberal life—characterized by a strong sense of personal responsibility and agency—and well-being—characterized by a belief that material circumstances play an insignificant role in living a mentally healthy life. The narratives of well-being, mental health, and happiness are woven into the fabric of our social world; they are often the lenses we use to make sense of our purpose in the world. So, when a conversation about a life choice revolves around the future-tense punch line “as long as you will be happy” or the present-tense, “as long as you are happy,” I ask the reader to think twice about what those seemingly common sense words do. Similarly, when we ask someone “are you looking after your mental health and well-being?” what is it that we are asking? Based on my critical analysis, a question that mirrors this one is: “are you conforming to the normative and emotional expectations of neoliberal subjecthood?” These discourses may not be as much about drawing attention to the realities of mental illness as they are about legitimizing and justifying those realities through disciplinary expectations to be psychologically or mentally resilient in any material conditions and despite any structural violence. The naïvety that these discourses display towards the violence perpetrated by a late-capitalist, hegemonic, neoliberal order reproduces and defends that violence. In short, I theorize that this discourse plays a role in justifying structural violence.

I have tried to make a case that mental health and well-being *matter*—the way we talk about them *matters*. The CMHA brochures, Seligman’s positive psychology, and the Bell Let’s Talk advertisement epitomize the core of this discourse and I have shown that,

through the use of critical discourse analysis, these texts have a number of possible effects. I wonder if looking into the reception of these materials through survey or interview methods would tell us anything further about the political implications of these discourses. A limitation of critical discourse analysis is that it cannot tell us the extent to which individuals who consume these various texts have a politicized or social-structural understanding of their suffering. A potential way that this research could be extended is through surveys or interviews with consumers of these discourses to gauge the kind of political consciousness that they may or may not have. However, even these alternative qualitative methods cannot grant us access to the casual relationship between individuals' consumption of these materials and their politicized or depoliticized orientations.

In this thesis, by analyzing these texts at the level of social practice, I have illustrated the critical moments when these discourses are deploying dominant neoliberal ideas (Fairclough, 1992). From these I can forward several conclusions: (1) these discourses rest on the assumption that emotions are natural, universal, and possessive individual expressions of internal states—in other words, they employ the 'inside-out' model of emotion; (2) these discourses expect that emotions be managed in particular ways by the reader that privilege 'positive' ones by adherence to particular social and emotional norms—in other words, they encourage 'respectful' and normative individual emotional expressions, which are characteristic of the 'outside-in' model of emotion; (3) they apply a medicalized understanding of mental health that conceals the social by seeking to solve the problem in the individual—for example, the reader is offered advice on how to control negative emotions like stress and anger. In short, these discourses individualize and medicalize mental health and well-being.

(4) In applying a medicalized framework to mental health, these discourses homogenize and equate emotional experiences—regardless of material realities—by centering the subject and suggesting that “mental health affects us all;” (5) by rendering the social structure as equally affecting all, these discourses depoliticize and decontextualize the reasons for diverse emotional experiences; instead, they suggest that emotional barriers to mental health and well-being are ‘natural’ and erase the uneven social conditions where they may originate; (6) these discourses peripheralize structural, political, and material realities by centering the psychological realities of the subject. In short, readers are compelled, hegemonically, to think of themselves as psychological entities, not political entities.

(7) These discourses moralize the concepts of mental health and well-being by signifying them as ‘good,’ with the intended consequence that everything that is not directed towards mental health is ‘bad’ or misguided; (8) they prescribe hegemonic ways of living, habits of thinking, and emotional management that intersect with dominant conservative lifestyles centered around Christian heteronormativity, patriarchy, and what Sara Ahmed (2017) calls “the violence of the elevation of the family, the couple form, [and] reproductivity as the basis of the good life” (p. 257); (9) in doing so, these lifestyles, along with the emotion management tools that these discourses suggest, are put on a pedestal and normativized—that is, these lifestyles are represented as something we *should* aim towards. In short, well-being is understood as a ‘choice’ that a social actor can and ought to make.

(10) These discourses expect and assume that the reader has the capacity for agency, resilience, perseverance, and personal responsibility—the characteristics of subjecthood that are expected in a neoliberal world. Thus, readers are responsabilized to

adopt an attitude towards their own mental health that first and foremost reveres their well-being, regardless of economic or social circumstances; (11) because of this pervasive depoliticization and psychologization, these discourses recontextualize the pursuit of mental health and well-being as a disciplinary matter, a matter that deeply traverses with a neoliberal agenda perhaps best encompassed by the reader's expectation to conform to the cliché 'mind over matter' in their daily life; (12) fundamentally, subjects are supposed to imagine their emotions, their well-being, and their mental health as independent of social and material contexts, therefore obliging readers to overcome adversities by thinking themselves well despite violent neoliberal calamities. In short, the discourses of well-being and mental health support the hegemonic discourse of neoliberalism.

Mental health, as it is presented in the CMHA brochures, the Bell Let's Talk advertisement, and Seligman's positive psychology, is an instrument of neoliberalism. Therefore, the promotion of mental health and well-being in this way is a complementary violence that perpetuates "the central neoliberal tenet that all problems are private rather than social in nature" (Giroux, 2004, p. xviii). But this critique is about more than just these discourses: this is a *movement*—a movement that unproblematically assumes the self-evident character of encouraging positive emotion while eradicating material circumstances from the equation. What I want to say, then, is that compulsions and obligations to be well are detrimental to the prospects and potential of unhappy resistance. Referencing Audre Lorde's work, Ahmed (2017) suggests that she "shows how making our own happiness our first responsibility can be how we turn away from injustice" and "how caring for oneself can lead you away from engaging in certain kinds of political struggle" (p. 239). Perhaps unhappy resistance to the positive

psychologization of society is needed to contest many of the injustices that plague various Western social subjects and groups. I wish to destabilize the elevation of positive emotions with the retort that negative emotions are particularly politically useful. In doing so, I follow a tradition of feminist, post-colonial, and anti-racist scholars of colour, such as Angela Davis, James Baldwin, Franz Fanon, Cornel West (2017), bell hooks (1995), and Audre Lorde (1997) who recognize the use of negative emotions, such as rage and anger, when fighting hegemony, oppression, and political violence. For example, Audre Lorde suggests that “[w]omen responding to racism means women responding to anger, the anger of exclusion, of unquestioned privilege, of racial distortions, of silence, ill-use, stereotyping, defensiveness, misnaming, betrayal, and coopting” (p. 278). Likewise, bell hooks argues “that rage is at times a useful and constructive response to exploitation, oppression, and continued injustice” (p. 26), and Cornel West suggests that

[t]hese visions, analyses, and strategies never lose sight of black rage, yet they focus this rage where it belongs: on any form of racism, sexism, homophobia, or economic injustice that impedes the opportunities of ‘everyday people’ [...] to live lives of dignity and decency (p. 104).

I wonder how this approach plays out in different contexts for different individuals and collectives. There is complexity here. We cannot, as Ehrenreich (2009) insists, “get outside ourselves and see things ‘as they are’” (p. 196), so how do we go about agreeing on those things? Not only is there debate as to *what* injustices to respond to, but also *who* has the mental and the social-collective resources to respond to those injustices? The care of the self is undoubtedly important; fighting against these injustices is mentally gruelling, however, some subjects are better socially and economically equipped to resist them. The key is that these emotions are collective ones. Further research could attend to (1) organizing individuals and collectives to reorient and focus their rage in constructive,

just, and equitable ways; and (2) the differences in using anger—in terms of social approval and disapproval—to fight injustices for those equipped or not equipped with privilege.

In the public sphere and in these discourses, negative emotionality get constructed as dangerous for the well-being of the self and others; however, I want us to think about the ways in which negative emotionality can be dangerous for the well-being of the status quo. Negative emotions can illuminate the violence of neoliberalism and they can contest the way in which one's social position, one's birthplace, one's economic, citizenship, and political status, for example, largely determines one's well-being. Thus, this project also encourages us to think about the social determinants of mental health and well-being. Negative emotions have the capacity to cultivate critical consciousness, to gather social movements, to encourage political activism, and to mobilize political change (Cvetkovich, 2012)—they can transform this kind of discourse and they can transform the social world. Although, I recognize that negative emotions can also be used problematically; that is, negative emotions can be channeled politically to further perpetuate and justify a culture of exclusion, white privilege, racism, xenophobia, and other social hierarchies. This is obviously an effect that limits other potential political goals. The issue, of course, is how we agree on *what* to transform, and *how* to transform it—how can we imagine new, and other, possible worlds?

Many dystopian novelists have explored the dangerous political effects associated with obsessive and uncanny positivity: novels like George Orwell's *1984*, Aldous Huxley's *Brave New World*, Ray Bradbury's *Fahrenheit 451*, and Margaret Atwood's *The Handmaid's Tale*. In addition, Ehrenreich (2009) argues that, historically, “positive thinking has been a tool of political repression worldwide [...] some of the world's most

mercilessly authoritarian regimes have demanded constant optimism and cheer from their subjects” (p. 201). “Soviet-style Russia,” she writes, “exemplified the use of positive thinking as a means of social control” (p. 202). This kind of scheme is not only historical, as Giroux (2004) writes, today, neoliberalism is much the same in that it “offers no critical vocabulary for speaking about political or social transformation” (p. xix) because subjects lack the critical consciousness to locate their private suffering within the framework of neoliberalism. This thesis is hopefully a step towards enhancing that critical consciousness especially in relation to ubiquitous discourses of well-being and mental health.

By disentangling notions of well-being from our cultural construction of ‘good’ and ‘healthy’ lifestyles, we can open up social spaces for individuals to resist these hegemonic discourses—and, in turn, resist the violent structural forces of neoliberalism. A life project dedicated to social or political change requires an unwillingness to accept the current version of the world—the current political-historical moment. Thus, an unhappy, unwell, or angry attitude towards the world may be a fitting attitude to change it. The seeming incompatibility between projects of well-being and projects of justice indicates the political agenda at work in the discourse I have analyzed. If well-being and mental health are life projects that we choose to foster disproportionately to other projects, we will engage far less in those projects that demand socially disapproved emotions. Consequently, the structural inequities that those ‘unhappy’ projects are intended to target remain steadfast. The violence of neoliberalism persists when the excessive focus of social subjects is on their own happiness, mental health, and well-being. The point is that, through our everyday ‘common sense’ practices, well-being and the status quo become more tightly interwoven.

This thesis, then, offers a normative argument—it represents a call to politicize the language of mental health in a way that attends to the differing social, historical, and political realities of social subjects. This politicization aims to center structural and material inequities, hierarchies and realities as intimately tied to the pursuit of mental health and well-being. Thus, this project’s foremost goal is to spread a critical consciousness regarding our contemporary, popularized, ‘scientific,’ and psychologized views of mental health and well-being.

This thesis also encourages the formation of a new philosophy of well-being; one that is not preoccupied with individual happiness, resilience, and personal responsibility, but, instead attends to the structural inequities in our historical moment; one that does not assume that happiness and well-being are ‘good’ and unhappiness and ill-being are ‘bad,’ but, instead sees the transformational potential of negative emotions; one that recognizes that some do not identify with this neoliberal image of well-being, and, of those who do, some are not positioned to perform it as easily as are others.<sup>58</sup> Because of this recognition, it is a philosophy that demands a critical engagement with the structures that maintain this hierarchy of mental health and well-being by rejecting the tenets of neoliberalism that presume that the well-being of individuals is best advanced through hyper-capitalistic conceptions of freedom and competition (Giroux, 2004; Harvey, 2005). The question becomes how does one live this philosophy? Instead of well-being, happiness, and mental health, what life projects are better suited to this philosophy? How can we open up a

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<sup>58</sup> Which requires, what Ahmed (2010) calls, putting the ‘hap’ back into happiness. She suggests a move from “[t]he exclusion of fortune from happiness”—that is, “all those things that *happen to us*, that cannot as it were be under our control, are excluded from the conditions of happiness”—to “put[ing] fortune back into happiness”—that is, “to show how happiness allows the fortunate to think of themselves as good, virtuous, and wise *despite* their fortune” (pp. 207-208, emphases in original).

space for a vision of the good life that is not obsessed with personal pursuits of mental health and well-being? Can we imagine other habits of thinking, other lifestyles, and other emotional expectations that *do not* see, as their aim, the individualized neoliberal fantasy of well-being?

I do not intend to propose an overarching political response to the material inequities, realities, and catastrophes that neoliberalism has magnified; but I do intend to propose a personal one—one that individuals can use to disrupt hegemonic assumptions about happiness, well-being, and mental health.<sup>59</sup> To conclude, I wish to explore Ahmed's (2010, 2017) figure of the killjoy as a personal response to neoliberalism's entrapment of mental health and well-being. Ahmed (2017) says that "[w]e need to be unsettled by what is unsettling" (p. 243). We need to be conscious of, and unsettled by—in an intersectional way—structural, institutional, and state violence. Ahmed uses feminism as an example of a lens through which we can be conscious of *sexist* structures and thus labels her figure the *feminist* killjoy. Ahmed (2010) gives us a description of this feminist figure in relation to "the performance of good feeling in the family":

Say we are seated at the dinner table. Around this table, the family gathers, having polite conversations, where only certain things can be brought up. Someone says something that you consider problematic. You respond, carefully, perhaps. You might be speaking quietly; or you might be getting 'wound up,' recognizing with frustration that you are being wound up by someone who is winding you up. The violence of what was said or the violence of provocation goes unnoticed. However she speaks, the feminist is usually the one who is viewed as 'causing the argument,' who is disturbing the fragility of peace (p. 65).

The killjoy "spoils' the happiness of others; she is spoilsport because she refuses to convene, to assemble, or to meet up over happiness" (p. 65). She disrupts the well-being of others by identifying violence, and in doing so, "[t]he exposure of violence becomes

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<sup>59</sup> As the feminist mantra goes: *the personal is the political*.

the origin of violence” (p. 68). The effects of this are undoubtedly political: conversations about structural violence are censored and silenced. This indicates the primary political problem with making happiness and well-being the center of our life projects and it indicates the ways in which these discourses therefore also have political ramifications. It seems that a life project dedicated to well-being is incompatible with one dedicated to social justice. This is partially because well-being, as I have shown here, *is* compatible with neoliberalism, but social justice, as Giroux points out, *is not*. Giroux (2004) suggests that “common sense assumptions that legitimate neoliberalism’s alleged historical inevitability have to be unsettled and then engaged for the social damage they cause on all levels of human existence” (p. xxv). Neoliberalism is violent precisely because it shrinks human rights in favour of consumer and market rights and freedoms: “private interests trump social needs, and economic growth becomes more important than social justice” (p. 106). This set of ideas is violent—the question is: *how can we create a world that values social justice and collective action over personal mental health and well-being?*

It may seem like the obvious conclusion is this: in a social world that expects an unwavering personal responsibility and commitment to life projects of well-being, perhaps, instead, we have a responsibility to be unhappy, to be unwell in a social world that is unwell and unjust. However, as Ahmed (2017) suggests, “even if survival for killjoys requires refusing to make joy (or its heavier friend happiness) into an aspiration, it does not mean we have an obligation to be sad or unhappy either” (p. 249)—instead, maybe “[w]e need joy to survive killing joy; we can even take joy from killing joy” (p. 248).

This thesis has therefore produced a number of critical questions that could be explored in future research: What are the political ramifications of producing a

psychologized emotional reality that conceals neoliberal power relations? To what extent do moral and normative expectations to mental health and well-being support neoliberalism and deploy hegemony by blocking unhappy resistance in pursuit of social justice? Perhaps, like Ahmed (2013) says, we should not adjust to an unjust world; perhaps, as she says elsewhere, “*we must stay unhappy with this world*” (2010, p. 105, emphases in original). Perhaps not being well will stimulate social change and justice. Perhaps happiness does not bloom from within. Perhaps instead of an obligation to bloom anywhere, the call is to refuse to bloom in a social and political world that resembles this one.

I will close with another home and garden sign: ‘*Happiness is not a destination. It is a way of life.*’ Is this a way of life we should be pursuing?

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## Appendices

### RECOGNIZE YOUR EMOTIONS

Emotional well-being is not about being happy all the time. Feeling sad, angry, and anxious at times is part of being human. Emotional well-being involves expressing our emotions in a way that respects everyone. Bottling up our feelings doesn't respect our own experiences, just as lashing out because we feel angry may not respect others. Emotional well-being also includes recognizing what influences our emotions, discovering how our emotions affect the way we think or act, taking action when our emotional response isn't helpful, and learning to accept our emotions—even the difficult ones.

**Activity: Identify and deal with your moods**

Find out what makes you happy, sad, joyful or angry. What calms you down? Learn ways to deal with your moods. Share joyful news with a friend, and find support when you feel sad. Physical exercise can help you deal with your anger or anxiety. Keep a stack of your favourite funny cartoons, stories, or videos for times when you need to laugh. And don't forget the power of music to lift you up or calm you down.

### SPIRITUAL WELL-BEING

Spiritual well-being means getting to know ourselves, discovering our values, and learning to be at peace with who we are. It also involves finding and connecting to something bigger than ourselves and living with purpose. Spirituality can give us meaning and solace, help us overcome challenges, and help us build connections with others. This may mean religion for some, but it doesn't have to—it's really about how we feel on the inside.

**Activity: Connect with yourself**

Set aside quiet, quality time to be totally alone. Try a breathing exercise: count your breaths from one to four, and then start at one again. Or do something you love to do, like dancing, going to a baseball game, building a bird house, going for a hike—whatever works for you!

### DO YOU NEED MORE HELP?

Contact a community organization like the Canadian Mental Health Association to learn more about support and resources in your area.

Founded in 1918, The Canadian Mental Health Association (CMHA) is a national charity that helps maintain and improve mental health for all Canadians. As the nation-wide leader and champion for mental health, CMHA helps people access the community resources they need to build resilience and support recovery from mental illness.

Visit the CMHA website at [www.cmha.ca](http://www.cmha.ca) today.

## MENTAL HEALTH FOR LIFE



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[www.cmha.ca](http://www.cmha.ca)

Figure 1.1 “Mental Health for Life” CMHA Brochure (front)

Mental health is key to our well-being. We can't be truly healthy without it. It involves how we feel, think, act, and interact with the world around us. Mental health is about realizing our potential, coping with the normal stresses of life, and making a contribution to our community. It may be more helpful to think of good mental health as thriving. Good mental health isn't about avoiding problems or trying to achieve a “perfect” life. It's about living well and feeling capable despite challenges. Mental well-being is bigger than the presence or absence of a mental illness. People who live with a mental illness can and do thrive, just as people without a mental illness may experience poor mental health.

Each of our paths to mental well-being will be unique. We all have our own goals, our own challenges, our own talents, and our own supports. But good mental health is in everyone's reach. Below, find tips and activities to help you take a look at your own well-being, discover your strengths, and take action.

Mental well-being is bigger than the presence or absence of a mental illness.

### BUILD A HEALTHY SELF-ESTEEM

Self-esteem is more than just seeing your good qualities. It is being able to see all your abilities and weaknesses together, accepting them, and doing your best with what you have. Self-esteem means recognizing your unique talents and abilities, and using that confidence to follow your goals and interests without comparing yourself to others.

**Activity: Build confidence**

Take a good look at your good points. What do you do best? Where are your skills and interest areas? How would a friend describe you? Now, look at your weak points. What do you have difficulty doing? What makes you feel frustrated? Now, which list was easier to write? Remember that all of us have our positive and negative sides. We build confidence by developing our weaker areas and regularly reminding ourselves of the things we're comfortable with and proud of.



### BUILD POSITIVE SUPPORT NETWORKS

Good relationships take effort, whether it's relationships with family members, friends, or other important supporters. It takes courage to reach out and time to build trust. But social support is a very important part of mental health. People in our networks can offer many different kinds of support, like emotional support, practical help, and alternate points of view. Support can come from family and friends, neighbours, co-workers or classmates, faith communities, clubs or support groups for specific problems.

**Activity: Make time**

Make time just to be with important people in your life. Make time for simply having fun and enjoying each other's company, and time for serious conversations.

### GET INVOLVED

Being involved in things that really matter to us provides a great feeling of purpose and satisfaction. You make a difference, no matter how big or small your efforts. Getting involved connects you with others in your community who share similar interests or values and connects you to groups of people you might not normally meet. It can help you learn new skills, build confidence, and see your own experiences in a different way.

**Activity: Volunteer**

Be a volunteer. Read to children at your local library, visit people in a hospital or care facility, serve on a committee or board of your favourite charity, clean up your favourite park or beach, or simply help a neighbour.

### BUILD RESILIENCY

Resiliency means coping well with problems, stress, and other difficult situations. Problems and stress are a normal part of life. Situations like accidents or illness, unexpected life changes, and conflict happen to everyone. Resiliency is what helps you look at the situation realistically, take action when you can make changes, let go of things you can't change, and recognize the helpful supports in your life. Your resiliency toolkit might include skills like problem-solving, assertiveness, balancing obligations and expectations, and developing support networks. While some people learn these skills during treatment for mental health problems, we should really think of them as skills for everyone. You can learn more about these skills online, in books, through community organizations, or through your health care provider.

**Activity: Build your own toolkit**

Set aside time to think about the resiliency tools you already have. This might include skills like structured problem-solving or people who can help you during difficult situations. Remember to include strategies that have worked for you in the past. Keep your list on hand and use it as a reminder when you need help. It's also a good way to see where you might want to build new skills or supports.

Figure 1.2 “Mental Health for Life” CMHA Brochure (back)

- Start on the inside. Practices like yoga, meditation, mindfulness, prayer, or breathing exercises can help you quiet your mind and look at problems from a calmer, more balanced point of view. With time, these practices can help you manage your response to stressful situations as they come up.
- Get active. Physical activity can be a great way to reduce stress and improve your mood. Activity could be anything from taking up a new sport to walking. The most important part is that it gets you moving and you enjoy it—it shouldn't feel like a chore. If you experience barriers to physical activity, try talking to your doctor or care team for ideas.
- Do something you enjoy. Making time for hobbies, sports, or activities that you find fun or make you laugh can temporarily give you a break from problems. Listen to music, read, go for a walk, see a friend, watch your favourite movie, or do whatever makes you feel good. This can give you a little mental distance from problems when you can't deal with them right away.

### CAN I PREVENT STRESS?

Stress is part of being human—no one can eliminate all stress from their life or prevent stress from ever happening in the future. The goal of stress management is to bounce back from problems or challenges and maintain wellness. All of the above strategies can help you take control of stress so it doesn't control you in the future. Remember to practice them often, even when you're not feeling stressed. That way, you'll know exactly what works for you. It's also much easier to deal with difficulties when you're in control and know that you can deal with whatever comes up.



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## STRESS



[www.cmha.ca](http://www.cmha.ca)

Figure 2.1 “Stress” CMHA Brochure (front)

We all talk about stress, but we're not always clear about what it is. Stress comes from both the good and the bad things that happen to us. If we didn't feel any stress, we wouldn't be alive! Stress may feel overwhelming at times, but there are many strategies to help you take control.

**Stress may feel overwhelming at times, but there are many strategies to help you take control.**

### WHAT IS STRESS?

Stress is the body's response to a real or perceived threat. That response is meant to get people ready for some kind of action to get them out of danger. But most of the threats people face today aren't something that they can fight or run away from. These threats are usually problems that people have to work through.

Some stress can be a good thing. It can motivate us to focus on a task or take action and solve a problem. In this situation, stress is manageable and even helpful.

When stress is unhelpful, people may feel overwhelmed or feel like they can't possibly fix the problem. In these cases, some people avoid dealing with the original problem altogether, which may make the problem—and stress—worse. It can be very hard to concentrate, make decisions, and feel confident when a person experiences a lot of stress. Many people experience physical sensations like sweating, a racing heart, or tense muscles. Over time, stress can also have a big impact on physical health. Sleep difficulties and headaches are common problems related to stress. People are also more likely to get sick when they're experiencing a lot of stress.

Stress is a reaction to a situation—it isn't about the actual situation. We usually feel stressed when we think that the demands of the situation are greater than our resources to deal with that situation. For example, someone who feels comfortable speaking in public may not worry about giving a presentation, while someone who isn't confident in their skills may feel a lot of stress about an upcoming presentation. Common sources of stress may include major life events, like moving or changing jobs. Long-term worries, like a long-term illness or parenting, can also feel stressful. Even daily hassles like dealing with traffic can be a source of stress.

### WHAT CAN I DO ABOUT IT?

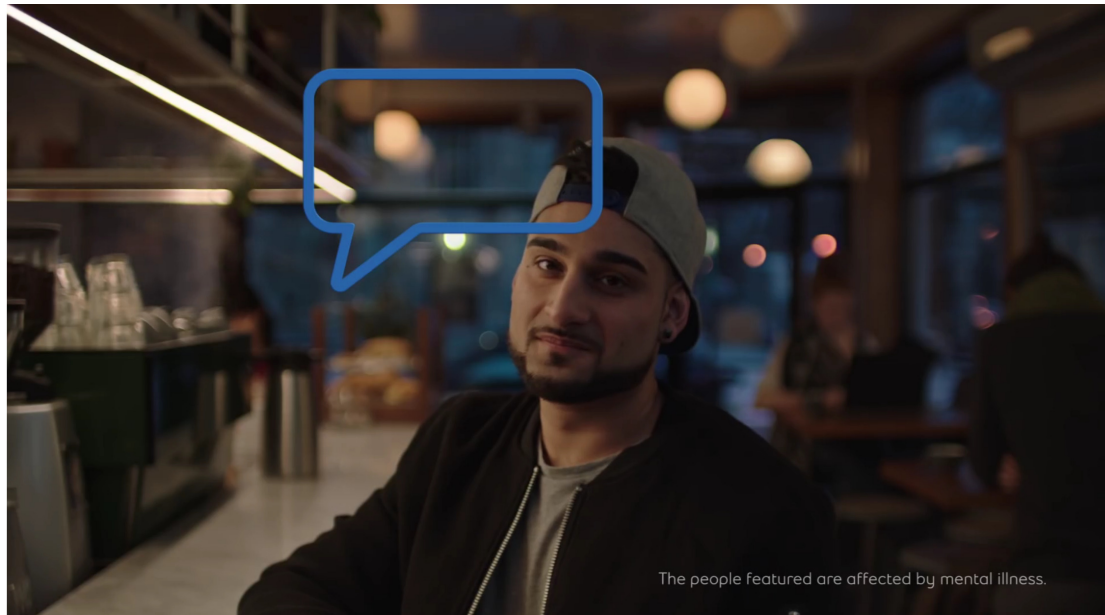
Taking action is the first step. Ignoring the effects of stress can lead to other mental health problems.

There is no one right way to deal with stress. The tips below are common strategies that are helpful for many people. Try them out and see what works best for you. Remember to look at both short-term and long-term solutions when you're dealing with stress.

- Identify the problem. Is your job, school, a relationship with someone, or worries about money causing stress? Are unimportant, surface problems hiding deeper problems? Once you know what the real problem is, you can do something about it.
- Solve problems as they come up. What can you do, and what are the possible outcomes? Would that be better or worse than doing nothing? Remember, sometimes solving a problem means doing the best you can—even if it isn't perfect—or asking for help. Once you've decided on a solution, divide the steps into manageable pieces and work on one piece at a time. Improving your problem-solving skills is a long-term strategy that can help you feel like you're in control again.

- Talk about your problems. You may find it helpful to talk about your stress. Loved ones may not realize that you're having a hard time. Once they understand, they may be able to help in two different ways. First, they can just listen—simply expressing your feelings can help a lot. Second, they may have ideas to help you solve or deal with your problems. If you need to talk with someone outside your own circle of loved ones, your family doctor may be able to refer you to a counsellor, or you may have access to one through your school, workplace, or faith community.
- Simplify your life. Stress can come up when there are too many things going on. Learning to say no is a real skill that takes practice. Try to look for ways to make your to-do list more manageable.
- Learn helpful thinking strategies. The way you think about situations affects the way you respond to them. Unhelpful thoughts, such as believing that everything must be perfect or expecting the worst possible outcome, can make problems seem bigger than they really are.
- Learn about stress management. There are many useful books, websites, and courses to help you cope with stress. There are also counsellors who specialize in stress. There may be stress management courses and workshops available through your community centre, workplace, or school.

Figure 2.2 “Stress” CMHA Brochure (back)



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Figure 3.1 Bell Let's Talk Day Advertisement (snapshot 1)



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Figure 3.2 Bell Let's Talk Day Advertisement (snapshot 2)