

Reconceptualizing Mental Illness in the Digital Age

Reconceptualizing Mental Illness in the Digital Age:

Ghosts in the Machine

By

Elliott B. Martin, Jr.

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For Audrey...

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PREFACE

I am a psychiatrist.

A medical doctor, I have undergone specialty training and subspecialty training. After all of which I have had the privilege of forking over \$10,000 more in examination fees, such that I am now ‘board-certified’ in general psychiatry, child and adolescent psychiatry, and addiction medicine. In abstract terms that places me firmly in the rarified air of the so-called ‘triple-boarded’ physician. An uncommon accomplishment that has made my mother very proud.

But my actual day-to-day job setting is a little unusual.

Most people have one of two mental images of psychiatrists at work. The first is in an office setting, often with the patient lying on the couch, and the sober doctor nodding gravely, taking copious notes, and punctuating silences with frequent Hm-hmm’s. The other is the psychiatrist as an impatient, embittered ‘pill-pusher’, barely listening for fifteen minutes before shoving a prescription across the desk and shouting “Next!”

Neither of these is wholly correct or incorrect.

But neither captures exactly what I do.

I direct a team of psychiatrists, social workers, mental health counselors, and recovery coaches employed by the general hospital to manage psychiatric urgencies and emergencies that arise in the general hospital setting. These include issues on the medical, surgical, pediatric, and obstetrics floors, as well as in the emergency room. This typically involves dealing with patients in crisis, and their families, as well as the medical teams’ own frequent crises over having ‘to deal with’ psychiatric (i.e. ‘difficult’) patients in the medical setting. This ‘sub-sub-specialty’ of psychiatry—and one in which, perhaps ironically, I am *not* board-certified—has gone through several iterations over the years. They used to call it ‘general hospital psychiatry’. Then it became ‘psychosomatic medicine’. After that, they called it ‘consultation-liaison psychiatry’. There was then a brief return to ‘psychosomatic medicine’ before its current iteration: ‘medical psychiatry’.

Talk about ‘identity crisis’?

As noted, these are *all* euphemisms for ‘crisis management’. Or as the old tune has it, “You say ‘tomato’...”

What continues to fascinate me about my own seemingly incongruous sub-sub-specialty, however, and even after all these years, is the fact that such a specialty ever even came to be. As the title of my introduction has it, Freud never did this.

The logical, perhaps mildly terrified, query at this point might be: “I’ve heard of mental hospitals, but my goodness, how crazy is my local general hospital?” Let me put it this way. Nationwide, psychiatry is *the* most consulted specialty service in general hospitals. 15-20% of all emergency room visits are for stated psychiatric reasons. This number, when accounting for otherwise unexplained somatic symptoms caused by depression, loneliness, anger, and/or anxiety and/or addiction, is probably closer to 50-60%.

And now of course the COVID-19 pandemic has ramped up these numbers even more so, especially among children. Not from the disease itself, but from the restrictive measures enforced to contain it (in research terms, the ‘confounders’): social isolation, lack of schooling, unemployment, poor nutrition, child neglect, increased substance use, increased domestic violence, increased homelessness, fractured relationships, overall poor medical care otherwise, vigilantism, and the utter reliance on digital media to meet basic human needs.

The true pandemic, unfortunately, is only just starting...

And this is where I often switch my hat, or rather, trade my white coat for sweatpants and reading glasses. Before I went back to medical school I had a previous career as an academic. I was well on my way to completing a doctorate of philosophy. Not in psychology, or public health, or a ‘hard science’, but in, of all things, Near Eastern Languages and Civilizations. I was an ancient language specialist, having passed doctoral examinations in ancient Greek, classical Hebrew, Akkadian, Sumerian, and Aramaic. ‘All but dissertated’, as they say. But completing the doctorate became financially untenable at the time, and I went on to teach high school Latin and Greek before deciding to go to medical school at the advanced age of ‘30-something’. Now ‘ancient’ myself, by medical school standards, there was one advantage to ‘returning’ to school at the age of reason. The tiny bit of wisdom I had accrued. I knew from the outset I wanted to be a psychiatrist. I knew from my experience as an educator that I wanted to be a child psychiatrist.

I had no idea I would end up where I am.

Except...

When I was a resident physician in New Haven, I started a sort of academic club we eventually called the Yale Philosophy and Psychiatry Group. I gathered three faculty advisers, two psychiatrists who had written extensively on philosophy and psychiatry, and one philosophy professor who had written extensively on psychiatry. We coordinated monthly meetings with the departments of philosophy, history of science, psychology, and psychiatry. Together we created a group that grew every month as we met for several evening hours in a conference room in the medical school library. Led by the author, usually, we discussed an assigned paper on some philosophic issue in psychiatry, medicine, and/or healthcare in general. The group was open to all, and advertised to all, and attracted guest speakers from all over the world. We drew in faculty, residents, fellows, medical students, graduate students, undergraduates, and community professionals from all over the region with an interest in any given topic.

Taking part in this project was easily the most fulfilling and educational part of my time in residency. Not just the academic camaraderie and open-mindedness of the interdisciplinary group itself, but that it forced me to read more, forced me to think more. And not just about medicine, or psychiatry, but about everything. The experience helped me feel more authentic as a doctor, as a thinker, as a human being.

Later, as a fellow at Boston Children's Hospital, I helped organize and facilitate educational workshops on training clinicians in the art, and lack thereof, of the difficult conversation. (And not just conversations around death and dying and informing people they are sick, but the even more difficult conversations at times around telling people that they are not sick. One of our more popular requests was focused on discussing poor performance with those in training, as well as peer colleagues.) Again, these groups were eclectic, the atmosphere designed to allow everyone to speak freely, to allow participants to discuss their fears and limits as clinicians without fear of workplace recrimination. There was extensive role-playing with professional actors, and clinicians universally feared and praised the experience for how it helped them in their practices and daily lives. Many took these seminars over and over.

These are the types of educational experiences—again, those resistant to standardization—that I believe would be more helpful in creating more authentic physicians, more authentic human beings.

Authenticity will be a common theme in the coming pages.

All of which is to say that I have a background in many different fields, and I bring these to bear in this volume. I have published some traditional research papers, some historical papers and translations, but mostly I have written critically on the fields of psychiatry and medicine.

Why critically? Because psychiatry is at a profound crossroads. The Digital Age has changed *everything*, and the field has yet to acknowledge this. Most research in psychiatry, like the rest of Medicine, tries its contortionist best to marginalize and minimize so-called ‘confounders’, those rudely intrusive patients or factors that either muddy the data or make the data too perfect.

Within this book I make the case that the confounders have in fact become the rule here in the Digital Age, and mental well-being or ill-being cannot be divorced from the environment, whether physical or cyber. The diagnostic manuals are so out of touch at this point as to be rendered quaint.

We need a whole new way of thinking about mental illness.

The COVID-19 experience has only proven it.

I have included an appendix that examines that phenomenon in detail.

Here I stand. I cannot do otherwise.

–*Martin Luther, defending himself before the Diet of Worms, 1521*

I went into psychiatry because I thought it would be more human,
even humane...(but) there were pedophiles, drunks and drug
addicts, borderlines, manics and depressives, passels of psychopaths,
and serial sex abusers—and these were just the psychiatrists—

–*Samuel Shem, Man's 4th Best Hospital, 2019*

Betty runs a trailer park, Jan sells Tupperware,
Randy's on an insane ward, and Mary's on welfare,
Charley took a job with Ford, Joe took Freddy's wife,
Charlotte took a millionaire,
And Freddy took his life.

–*The Statler Brothers, "The Class of '57", 1972*

INTRODUCTION

DID FREUD EVER DO THIS? A PRELIMINARY REFLECTION ON THE EPIDEMIC OF CRAZY¹

You know, a long time ago being crazy meant something. Nowadays everybody's crazy.

—Charles Manson, 2013

I recalled these words of Mr. Helter Skelter himself during an episode at work in which a surgical colleague of mine suddenly threw his hands in the air, folded his arms, and asked me pointblank, “Hey, man, why is the world so crazy these days?” It was an honest question, and the complex, though incomplete, answer spinning about my pinwheeling head, an answer I had been formulating and reformulating for years—that Western society has fundamentally evolved from a repressive nineteenth and early twentieth century climate of hysteria-neuroses to a latter-day fragmented-identity climate of narcissism-borderline—came out instead as a butchered line from another, albeit semi-fictional, psychopath, the original cinematic *Psycho* himself, Norman Bates, “Hey, we all go a little crazy...sometimes”.

Both Manson—within the California penal system—and Bates, within the looser boundaries of celluloid legend, have been subjected, by the rest of *us*, to old-fashioned ‘moral treatment’ for their ‘madness’: that is, isolation from polite society. But this seems out of step with the National Institute of Mental Health’s fairly newly adopted classification of ‘crazy’ as essentially biological.² Indeed, every time I read the federally sanctioned

¹ Originally published as: Martin, Jr., E.B., May 2016. “Did Freud Ever Do This? A Reflection on the Epidemic of Crazy”, *Psychiatric Times*. 33:5, 41-45. The original has been updated and edited for inclusion in this book.

² Cuthbert B.N., Insel T.R., 2013. “Toward the Future of Psychiatric Diagnosis: The Seven Pillars of RDoC”, *BMC Medicine*. 11:126. And this continues to expand in quite literally mind-numbing fashion: <https://www.nimh.nih.gov/research/research-funded-by-nimh/rdoc/constructs/rdoc-matrix.shtml>.

agency's updated Research Domain Criteria (RDoC) manifestoes (readily available on its website) I cannot help but recall the infamous bio-behavioral 're-programming' of the original (pre-Bart Simpson) 'il bastard' protagonist, Alex DeLarge, in Stanley Kubrick's 1971 film version of Anthony Burgess' dystopian novel, *A Clockwork Orange*. (For those unfamiliar with the sequence, the 'ultraviolet' nature of this delinquent youth is 'cured' with an experimental psycho-biologic 'treatment': subjecting him forcibly to watching hours of rough-cut violent imagery, set to Beethoven's *Ninth Symphony*, while some unspecified emetic drug is injected into his veins. Afterwards even the thought of violence causes horrific visceral reactions in "Little Alex", thereby molding his behavior—very much against his will—but allowing him re-entry into polite society.)

These now antiquated examples—Manson, Bates, and Little Alex—are almost mundane relative to far more grotesque and recent examples of dime-store pornography, the daily background violence of reality television and ever-streaming 'news' here in the post-historical twenty-first century. But I choose them as illustrative, and foundational, for their contemporary timing with the historical rise of anti-humanism and anti-psychiatry. In other words, in the 1960s and 1970s, psychiatry, represented as Freudian psychoanalysis, was forced, like Alex, like any passive film watcher, into a reactionary position by the sudden, explosively media-driven, *physical* appearance of the 'id'—that part of Freud's tripartite conceptualization of the mind representing unbridled aggression, lust, and fantasy—as frank, if random, reality. (The ego, our daily restraint, and superego, our moral compass, theoretically comprise the other two major structures of the mental landscape.)

Why, even the Marquis de Sade's gut-numbing catalogue of relentlessly horrific perversions, *120 Days of Sodom* (bitterly, if not at least a touch ironically, scribbled on rolls of toilet paper while its author was imprisoned in the Bastille only weeks and days before the inaugural Bastille Day) was released as a feature film as early as 1975. Closer to home, if no less gruesome, the evening news at the same time grew more and more graphic, and cable television eventually emerged as the lewd alternative to the sanitized networks. The contemporaneous British television comedy troupe, Monty Python, perhaps described best the increasingly rapid, fragmented experience of now rampant screen-viewing with their pithy segue from one non-sequitur to another, "And now for something completely different..."

Not far removed from Sade, or Monty Python for that matter, the French postmodern historian, Jean Baudrillard, described the cultural fallout of the 1960s and 1970s—the "orgy," as he unmincingly referred to it in his

1990 work, *The Transparency of Evil*—as the remnants of a Western society so desperate for euphemisms as to have created a nearly perfectly synthetic state;³ that is, a “hyper-real” state, utterly devoid of depth, of any complex interactive meaning. Rather than a layered, textured interweaving of meaning-laden ‘object relations’—as he quotes the post-Freudian psychoanalysts—the world, or at least the world of the 1980’s and early 1990’s, had become a thrown-together pastiche, a superficial collage, of the objects themselves. There is a wonderful example of this two-dimensionality in a 1999 episode of the then contemporaneous animated television series, *Family Guy*.⁴ In it, the lead character, Peter Griffin (an appropriately superficially developed parody of the dim-witted, prematurely aging, effectively emasculated, postmodern television ‘Dad’), overcomes his own worsening agoraphobia by placing a cut-out cardboard box, or simulated television, over his head. This ‘cures’ him, allowing him to re-connect, two-dimensionally, with the world outside his living room.

In such a simulated world, increasingly incapable of the thoughtfulness to respond to it in a deliberate and meaningfully therapeutic way, with patients increasingly “(falling) apart on the couch,” psychoanalysis (the old Freudian ‘talking cure’) certainly faltered.⁵ In a two-dimensional world filled with a much more vast array of grotesqueries than the earlier twentieth century’s pure violence of war and torture, that which initially destroyed the Frankfurt School’s faith in reason—that is, the original critical theorists, established contemporaneously with the defeat of Kaiser Wilhelm’s Germany, the Russian revolutions, and the rise of National Socialism—and gave birth instead to the more enduring anti-humanism and postmodernism, the mind itself fundamentally changed. In 1992, just *prior* to the advent of the Internet, Carl Bernstein put it this way: “For the first time the weird and the stupid and the coarse are becoming our cultural norm, even our cultural ideal.”⁶

³ Wernick, A., 1993. “Baudrillard’s Remainder”.

<http://www.ctheory.net/articles.aspx?id=233>. Baudrillard is critical of these developments, but remained generally full of snark himself, arguably, if somewhat ironically, among the originators of the snark defense mechanism.

⁴ “I Never Met the Dead Man”, (*Family Guy*, Season 2, episode 2). Fox Television, April 11, 1999.

⁵ Stone, M.H., 1987. “Psychotherapy of Borderline Patients in Light of Long-Term Follow-Up”, *Bulletin of the Menninger Clinic*. 51, 231-247.

⁶ Good Reads. Carl Bernstein. 1992.

<http://www.goodreads.com/author/show/15445>. Perhaps presciently acknowledging his ‘next career’ as professional Donald Trump critic.

What had given the id its mystical force after all, at the crossroads of Victorian sensibility, *fin de siècle* decadence, and the horrifying discovery of germs, was its unspeakable nature. Similar to the play of shadow and silence in early horror cinema, to the play of the revealed and unrevealed in gothic literature, the id was the Lovecraftian ‘lurker at the threshold’. With the rise of cinema, television, and now the Internet, the id became ubiquitous, and to the point, as noted, of cartoon-kitsch. There is not an image to be imagined that cannot be called forth instantly from the Internet. There is not a fantasy too dark, too repulsive, too unimaginable for the solutionist magic of the Silicon and San Fernando Valleys. For psychoanalysts the question then became: how can symbols even exist in a world without the ‘id’? Conversely, this loss of personal metaphor unleashed the ‘biologic’ psychiatrists, and psychopharmacology—existing well before the end of the century—re-emerged in a media (i.e. advertising) explosion. The expanding-contracting DSM (the *Diagnostic and Statistical Manual*, better known by the True Believers as the ‘Bible’ of psychiatric disorders) reflects this perfectly: a catalogue of two-dimensional snapshots, stills, or pop-ups, of deviance without context.

The id has since found itself well-nurtured within the politics of economic de-regulation as begun in the 1990’s and early 2000’s. Corporate narcissism, arm in arm with increasingly spectacular Hollywood histrionics that have set a stage where the slightest perception of trauma is unbearable and intolerable (i.e. the currently profoundly narcissistic ‘#MeToo!’-generation) has gained a prominent place in the collective awareness. Wealth, too, has entered the cyber-realm, created and destroyed with a keystroke, and the corporate psychopath has gained rock star status.⁷ Logic has been utterly devoured in what has become an ‘id’-iotic world, and how could there *not* be an epidemic of crazy?

The instinctual defense against the raging id, after all, is to run away, to hide, to self-preserve, to self-negate, and depression now is the second most debilitating illness in the world.⁸ While debatable, depression can certainly be conceptualized as pathological self-absorption.⁹ Anorexics are quite literally self-absorbed. Psychosis, marked by excessive paranoia

⁷ Babiak, P., Hare, R.D., 2006. *Snakes in Suits: When Psychopaths Go to Work*. New York: Harper.

⁸ Ferrari, A.J., Charlson, F.J., Norman, R.E., et al., 2013. “Burden of Depressive Disorders by Country, Sex, Age, and Year: Findings from the Global Burden of Disease Study 2010”, *PLOS Med*.

<http://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1001547>.

⁹ Ingram, R.E., 1990. “Self-focused Attention in Clinical Disorders: Review and a Conceptual Model”, *Psychological Bulletin*. 107:156-176.

or hallucinations, leads to excessive defense of the self. Anxiety is all about self-preservation.

Autism is especially interesting here in the Digital Age, increasing in prevalence every year, by definition a disorder of self-absorption. According to all available media outlets, we are already living in ‘an epidemic of autism’. Prior to the work of Drs. Leo Kanner and Hans Asperger in the 1940’s, autism was virtually unknown; now the estimated prevalence is anywhere from 1 in 110, to 1 in 68, and increasing every year. Historically, and almost certainly not coincidentally, this increase is certainly *not* due to ‘greater awareness’ (the current Party line—but believe me, if your kid is autistic you know it). Rather, it corresponds, along with every other ‘spectrum’ disorder, with the rise of media in general, with the establishment of Baudrillard’s two-dimensional hyper-reality as an overall way of being.

But the more *recent*, in fact on-going, *explosive* numbers of autism, in fact correspond *precisely* with the development of the Internet, with the advent of *social* media, and the mass surrogation of children (rather than orphanages, there is the more ‘euphemistically tolerable’ day care and/or the arms of hired strangers, with a corresponding, if ironic, Western cultural de-valuation of boys, with a rate of autism diagnoses now typically four times that of girls¹⁰). Autism also parallels the late twentieth to early twenty-first century cultural educational shift, from efforts to developing readers to developing ‘users’.¹¹ In socio-biologic terms, autism appears to be a hyper-rapidly selected-for trait.

Indeed, the experience of reality in the 2010’s, now into the 2020’s, for many, is an intense relationship with the self, a little insular, comforting world of one’s union with one’s electronic devices, with one’s ‘music’, both extensions of the self. In psychoanalytic terms, this is the borderline emptiness transformed into an aesthetic/fetishistic experience, transformed into a dyadic relationship not necessarily with fellow humans but allowing for the substitution of *things*, of commodities. Selfies, headphones, meditation. Mass availability of drugs, pornography, and weapons. An aggressive

¹⁰ Sommers, C.H., 2000. “The War against Boys”.

<http://www.TheAtlantic.com/issues/2000/05/sommers.htm>.

This continues relentlessly, with the result that Western males commit suicide, turn to drugs and alcohol, and give up earlier on higher education and professional careers on a far, far grander scale than their female counterparts. But this is baseline now. What makes news is the occasional ‘spike’ in such outcomes for females; this, reported as tragedy. For boys and men it has become farce.

¹¹ Sloterdijk, P., 2013. *In the World Interior of Capital: Towards a Philosophical Theory of Globalization*. Trans. by Wieland Hoban. Cambridge, MA: Polity Press.

anonymity that allows for ‘virtually’ anything, and despite the thousand or so appropriately superficial pages of the current DSM, a thousand more could not possibly cover it all.

And to what end?

This narcissism/autism at its core may be a desire to return to the womb, to attain a state of, if not pleasure, then at least not-suffering, a state of quasi-dissolution, of a sort of eternal life, an immortality equivalent to the repeated airing of a television rerun, or to suspended animation in a cryogenic chamber.

Of course, this is all in the context of otherwise overwhelming distraction. An obscurely defined creativity may have fueled this desire to return to nothingness in the past, but this has become a sufficient, not necessary, condition. Creativity, in other words, used to be the means to the ends, whether these be fetish or masterpiece. But now the ends are readily available, once again as commodity.

The aesthetic experience—auto-erotic gaming, auto-erotic sex, auto-intoxication, auto-mutilation—can be easily had by all, is aggressively and utterly pursued by all, and the result is a fetish-saturated Western world, a world of highly personal-made-instantly-public ‘masterpieces’, so self-absorbed as to be on the verge of disappearance. Witness recent local, state, and federal-level governmental, as well as university-level reactions, near-reverently endorsed by major media outlets—and the authoritarian cyber-superego—to wipe away, quite literally, any inconvenient, if ‘distracting’, history.

“Craziness, therefore,” I found myself thumping the computer mouse like a nineteenth century bible, declaring a resolution to this conversation that began with my colleague several pages ago, “may just be, as economists are fond of describing their own failed predictions, a rational response to an irrational world. Technology after all has evolved astronomically faster than the humanities, shattering the human superego (though arguably since re-created as a massive cyber-superego), fragmenting the ego (arguably the remnants of the previous ‘individual’), and creating a fetish of the id.” (Even Manson has maintained a certain not illogical innocence in the wake of his subsequent ‘image’: “The Charlie Manson that you’ve created, that’s not me. That’s only an illusion in your minds; it hasn’t got anything to do with me.”¹²)

My poor surgical friend looked at me, shook his head, and muttered quite simply, “I am soooooo glad I went into surgery.”

¹² Emmons, N., ed., 1986. *Manson in His Own Words*. New York: Grove Press.

PART 1

A BRIEF HISTORY OF HOW WE GOT HERE

CHAPTER 1

RECONCEPTUALIZING MENTAL ILLNESS IN THE DIGITAL AGE

Do not weep. Life is paradise, and we are all in paradise, but we do not want to know it, and if we did want to know it, tomorrow there would be paradise the world over.

—Fyodor Dostoevsky, *The Brothers Karamazov*, 1879

The Centers for Disease Control and Prevention made headlines (again) in 2018 with its publication of suicide statistics in the US since 1999, noting an overall 30% increase through 2016.¹³ Interestingly, and perhaps most tellingly, the authors point out that more than half of these suicides had no known prior ‘mental illness’, about which they conclude that there is a “need to...prevent the circumstances associated with the onset of mental health conditions”, thereby implicating either ‘undiagnosed mental illness’, or, some sort of (presumed) prodromal period of mental illness during which people are at greater risk of suicide. By “circumstances” I assume the authors mean ‘life’. They do not reiterate the standard laundry list of risk factors *per se*, but do go on to outline the need to “identify” “at risk” individuals, with the broadly rhetorical recommendations of increasing public housing, teaching coping skills, and increasing “a sense of belonging”. Naturally, they go on to recommend expanding treatment access and options, and “further research”.

What the authors neither affirm nor deny is that the risk factors they seek to address have been stable now for decades, and that the ‘treatment’ for mental illness has exploded—with a corresponding de-stigmatization—since 1999, all (inexplicably, maddeningly, if one buys the proposed theories) corresponding with the (dramatic) increase in suicide rate. Also, since 1999, suicidal people do not seem to care that there have been new bestselling editions of the *Diagnostic and Statistical Manual of Mental Disorders* (the self-published, multi-million dollar-generating

¹³ Hedegaard, H., Curtin, S.C., Warner, M., June 2018. “Suicide Rates in the United States Continue to Increase”. *NCHS Data Brief*, No. 309. <https://www.cdc.gov/nchs/products/databriefs/db309.htm>.

required text of the American Psychiatric Association) and the *International Statistical Classification of Diseases and Related Health Problems* (the self-published, multi-million dollar-generating required text of the World Health Organization), as well as the much-ballyhooed initiation of the aforementioned (multi-billion dollar-generating) Research Domain Criteria project at the National Institute of Mental Health, an all-chips-in project *determined* to root out the molecular and biological bases of psychopathology (to date an abject failure, and with no indication that this will be anything but an ongoing failure in the near or far future; post hoc ‘biomarkers’—the best they can do—after all, are utterly clinically meaningless).

Other than their own socio-politically blinded failure to note the correlation between increased mental health treatment, de-stigmatization, and increased suicide, the CDC’s other elephant in the room is the equally unrecognized correlation of suicide with the inception of the Digital Age.

Theodor Adorno—neo-Marxist, Frankfurt School founder in the 1920’s, co-creator (with Max Horkheimer) of the pre-digitally academically viral ‘critical theory’, German-Jewish refugee to America in the 1930’s, eventual hapless patricide of the so-called ‘Left fascism’ he unwittingly helped create across college campuses beginning in the 1960’s—in his seminal 1951 quasi-autobiography, *Minima Moralia: Reflections on a Damaged Life*, writes of the problem of diagnosing “the sickness of the healthy”.¹⁴ Deeply critical of the pre-eminence of reason in discourse, science, and philosophy since the Enlightenment, Adorno ceaselessly pointed out the impossibility not only of living a ‘reasonable’ life within the confines of an unreasonable world, but also that any attempt to do so is made more muddled by the fact that we—children of a ‘scientific’ era—steadfastly refuse to acknowledge this world as unreasonable. He concluded that this ‘delusion’ of an ordered world, amid the post-war wreckage of Europe and Asia, persisted because to acknowledge it would upset the applecart to the point of global insanity.

It is this tension between reason and unreason, whether willfully or unwittingly ignored, made especially prominent against the backdrop of the financial and technological explosions of the latter half of the twentieth century—phenomena utterly uncoupled from any previously reliable socio-economic-political rules of logic—that has since created a pervasive pathologic stew of chronic depression and anxiety. Similar to Sigmund

¹⁴ Adorno, T., 2006 (1951). *Minima Moralia: Reflections on a Damaged Life*. Trans. by E.F.N. Jephcott, New York, NY: Verso.

Freud's delicate balance between the passionately violent id and the morally restraining superego that implicated everyone as being 'mentally ill', Adorno's version, however, has the upper and lower hands reversed. Rather than, or perhaps more appropriately, spurred on by the id desperately chomping at its constraints, Adorno—deeply influenced by Freud—saw the superego less as moral compass than as brutal master, ruthlessly hammering the howling id-beast on the snout, with each blow leading to an ever more (false) sense of security, believing—out of necessity—that the beast was chained too tightly ever to escape.

The problem is, or rather has become, and Adorno saw this, what do we do now that the id, the beast, has, in fact, escaped?

But a small digression is necessary to set the post-historical stage, starting with a few words on 'dignity'. This is important because it is the loss of individual dignity that really is the harbinger of the loss of authenticity, with the subsequent fabrication of identity, leading to the frantic clawing down to the wellspring of depression and anxiety. Dignity is the one essential element to any conception of 'mental *wellness*', or rather, the single most attractive piece of humanity. The problem is, dignity has also become impossible in an indebted, identitarian, quasi-cyber-world.

Up until the early twenty-first century, Plato and Nietzsche were the only major thinkers who discussed at any meaningful length the notion of 'dignity'. Plato used the term, 'thymos', a then medical/psychiatric term for emotions in general that, by his time (fourth century B.C), came to mean more specifically 'a desire for recognition', almost a conceit. Nietzsche (late nineteenth century A.D.), actually a Platonic scholar and career academic—before deciding to think for himself—used the term 'Mut' to describe dignity, from which, curiously, derives the English word 'mood'. Nietzsche's Mut, literally 'courage', is quite delicate, and subject, almost certainly purposefully, to vacillation—from 'Schwermut', or melancholy, to 'Unmut', discouragement or disgruntlement. In other words, dignity itself is quite delicate.

Moving forward to more recent 'history', Francis Fukuyama, having famously declared the end of history with the fall of the Berlin Wall in 1989—as symbolic of the final, global victory of neo-liberal democracy—in the early twenty-first century eschewed the word play of Nietzsche in favor of resurrecting 'thymos' as the best representation of the 'modern' (postmodern?/post-historical?) concept of dignity, qualifying it either as 'megalothymia', the need to be superior to others, or 'isothymia', the need

to be equal to others.¹⁵ He concludes that isothymia is the best to be hoped for—and indeed preferred—now that liberal democracy is consolidating its final triumph. (In current medico-psychiatric parlance, *dys*-thymia is a diagnosis of chronic, baseline depression; *cyclo*-thymia is a diagnosis of chronic, baseline manic-depression.) In other words, Fukuyama’s ‘dignity’ is a pre-digital formula, a lowest common denominator in the algorithm. And he almost certainly does not intend this in a basic human rights sort of way, but rather in a neo-liberal-capitalist-treadmill-drink-your-weekend-beer sort of way. A post-historical ‘opium of the people’ (ironically, just as opium, in fact, *was* becoming the opium of the people).

(And less ironically than coincidentally, 1989 saw the introduction to market of the first selective serotonin reuptake inhibiting antidepressant medication, Prozac. It is no exaggeration to state that this medication revolutionized psychiatry, psychology, and much of medicine. Prozac was the first easily prescribed—i.e. non-lethal in overdose—psychotropic medication with results on par with weeks of psychotherapy. A rare colossal, contemporaneous win both for Big Pharma and Big Insura, and a stage-setter for the digital era.)

And just what is meant by ‘liberal democracy’ in the ‘age of reason’?

By Fukuyama’s time, the end of the Age of Reason (synonymous with the Enlightenment) and the beginning of the Digital Age, the most appropriate description would seem to be a sort of minimal electoral process in a state premised on allowing global ‘free markets’ to ‘cloud’ over its territory with minimal regulatory disturbance.

Or, as current critical thinker, and founder of the original Radio Alice, Franco Berardi—from whom I borrow the term ‘identitarian’ as applied not just, as originally pejoratively intended, to right wing extremists, but to left wing ‘fascists’ and neo-liberal ‘solutionists’—describes it, liberal democracy here in the Digital Age equals ‘absolute capitalism’, with a corresponding, corporately manipulated progression in social mindset: from the unfocused ‘multitude’, to the loosely organized ‘network’, to the militarily precise (and deadly) predatory ‘swarm’.¹⁶

(Berardi’s conceptualization of the on-line community at-large as a dangerous, vindictive, and sadistic ‘swarm’, or Swarm—and a major inspiration for my own interpretation—is more fully elaborated upon by

¹⁵ Fukuyama, F., 2018. *Identity: The Demand for Dignity and the Politics of Resentment*. New York, NY: Farrar, Straus, and Giroux.

¹⁶ Berardi, F., 2015. *And: Phenomenology of the End*. Cambridge, MA: MIT Press.

current Korean-German cultural theorist, Byong-Chul Han.¹⁷ In the previous century the analogy would have been Orwell's ruling pig class from his *Animal Farm*, in which the post-revolutionary porcine oligarchs come slowly to adapt the old totalitarian ways they purportedly previously despised. Or as they amended their constitution to fit their 'progression': "Some animals are more equal than others." Certainly, this makes one consider the neo-fascist pride in which younger generations now blithely, I daresay proudly, speak of their own 'cancel culture', the Digital Age-equivalent of Orwell's 'unpersoning' from his grander opus, *1984*. But the sheer numbers of those 'canceled' thanks to the digital era now does make the 'swarm' analogy much more appropriate. The attitude change within a single generation is remarkable. When I was a student reading Orwell, the very idea of institutionalizing the restriction of intellectual freedom was considered so repugnant that his works were almost laughable for their non-subtlety.

(Yet, here we are...)

He was confronted by a vast anger...but it was inert...It was other people's anger...He clenched his fists, he strode along, but nothing came. The anger remained external to himself.

—Jean-Paul Sartre, *The Age of Reason*, 1945

So, what went wrong? At least as far as epidemic mental distress?

Fukuyama, and the generation of theorists caught between reason and digitalization, quickly lost the forest for the trees as global markets suddenly spun violently out of control. Neoliberal democracy had indeed won the day, and it plowed forward recklessly in its self-laudatory, over-confident, futurist, solutionist, ill-thought out plan to digitize (save?) the globe. As Berardi details, the dogmatic Enlightenment-Judeo-Christian notion of physical labor and time-measured value—a fair wage for a fair day's work—stable doctrine for two centuries, in fact buttressed by the subsequent industrial revolution, was replaced literally overnight by the now conjured value of 'neuro-labor'. This is labor that was (certainly) only fantasized about by the early American robber barons, but as never imagined, or accounted for, by the early socialists and anarchists. That is, a labor *freed of all time constraints*—randomly assigned wages for ill-defined work. In other words, where the daily lives of most Western people in the

¹⁷ Han, B.-C., 2017. *In the Swarm: Digital Prospects*. Trans. by Erik Butler, Cambridge, MA: MIT Press.

prior two centuries were governed by the ‘natural law’ of capitalist economics—that is, the irresolvable conflict (dialectic?) between profits and wages—everyone, managerial class and below, at least still shared the mutual end of measurable and reasonable compensation.

Isothymia.

In digital markets, however, the dominant force is not the manufacture of goods, but the manufacture of stimulation and excitement, of *simulation*, of finance itself, of invisible products (with invisible value paid for with invisible money). There is little reliance any longer on the manufacture of necessary goods but of psychologic commodities, services designed not to meet unmet needs, but very specifically to create desire, often for ‘needs’ that one had previously been totally unaware of (until the appropriate advertising blitz, and ‘buzz’ of the Swarm, awoke that realization). ‘Globalization’ is the buzz-word, most frequently with a positive spin.

But the willfully ignored flipside of globalization is deterritorialization, the loss of cultural boundaries, the loss of (true) identity, the loss of belonging, and perhaps most de-centering of all, the loss of control of political entities.¹⁸ Global corporate entities—larger and more powerful than any single country—have replaced governments and run roughshod over the planet and beyond. (This is not a new phenomenon, of course. The Dutch and British East India Companies in the sixteenth through twentieth centuries, followed by major American oil companies from the twentieth century until now, [and really, any entity representative of colonial power] had, and have, governed *de facto* the Second and Third World territories in which they have operated, dictating a sort of corporate law over their [what are in fact] fiefdoms, utterly self-policed, utterly overriding the nominal indigenous governments.)

What *has* changed is the process. The historical dialectic has been replaced by the informatic algorithm. But where the dialectical process, for better or for worse, was at least guided by human thoughtfulness, the algorithmic process is a ‘formula in the machine’. It will not allow for thoughtful intrusion other than a few predetermined ‘choice’ points in the algorithm. And this is not due to defensiveness or spite, but rather due to artificial intelligence’s sheer inability to process human semantics and subtlety. In other words, although dissent is allowed, in fact at times a veritable celebrated social and social media event (witness the so-called ‘Occupy Movement’ of 2008-09, or the ‘Arab Spring’ of 2011, already

¹⁸ Berardi, pp. 58-110.

more distant memories than they have any reasonable right to be), it is ephemeral at best, effectively meaningless, effectively impossible.

The individual mind in such circumstances is also rendered ephemeral, meaningless. But no less desperate. Identitarianism, right-wing, left-wing, anywhere in between—the common theme, from whichever direction, being self-loathing—offers a temporary respite, offers temporary but quite conditional ‘love’, the equivalent of an ambivalent prostitute’s bosom. There is some sterile human contact, association through common loathing rather than common love, and the melancholic mindset remains the same.

In this context, the greatest global shift/disruption is that, despite the continued profound, if re-branded (shiny, happy, multi-colored, multi-gendered, screen-friendly neuro-laborers in neatly pressed clothes), reliance on what is essentially slave ‘productivity’, the ‘global’ economy is no longer premised on physical labor. As re-stated earlier in this introductory essay, the ‘developed’ economy is now powered by psychic/cognitive neuro-labor. (This does not mean the body is no longer important; quite the opposite, in fact, as the body—the ‘organism’, to borrow pioneering neurologist Kurt Goldstein’s apt early twentieth-century metaphor for the war-wracked human body—is the limiting factor in maintaining enough cognition to perform its expected tasks. This is a critical point for the current conceptualization of medicine, and we will get to this later.)

What is the real significance of this? In such an environment the potential for profits is now infinite, the (cyber-)space in which corporations operate is now infinite, and most importantly, time itself is now infinite. Not ‘Time’, the metaphysical construct that has flummoxed philosophers since ‘time immemorial’, but ‘time’ as you and I daily experience it. That is, not the infinity of time extending into the future or the past, but the infinity of time compressed into the present moment.

That is, the competitive ‘worker’ is wired in 24/7. The competitive ‘consumer’ is wired in 24/7. There are no more empty spaces, no more empty seconds. As Berardi asserts, neural networks have become increasingly exhausted in this context, and the psychological effects of the maelstrom, the “shitstorm”, according to Han, have been absolutely devastating.
