

ISTP Newsletter

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LETTER FROM THE PRESIDENT

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We would like to welcome you to this first ISTP Newsletter of 2020, in the middle of an unprecedented global crisis. After an extremely successful and engaging conference in Copenhagen, we now face the challenge of staying safe and healthy in the middle of a pandemic that has shifted our priorities and focuses, imposing its own rhythms on our lives. It has not been long since the pandemic was first declared, but it feels like ages. The theme of the Copenhagen conference resonates strongly with me, as we have all somehow experienced a forced stop and deceleration, and I have felt myself becoming involved in a tensioned and contradictory experience. For those of us that have the privilege of being able to stay at home safely, this deceleration may feel like something that we have long wanted: an opportunity to be at home with our families and focus on fewer issues more deeply; a challenge to the neoliberal way of life based on consumption and debt; and an opportunity to give the planet a break. At the same time, this deceleration is also lived at an accelerated pace, as some of us, in addition to working, have to take care of others, cooking (a lot!), cleaning, fixing our physical spaces, and so on. However, even for those of us who are privileged, this deceleration entails the risk of deepening gender and socio-geographic-ethnic-economic gaps, raising domestic tensions and often violence, and thereby increasing inequalities and vulnerabilities.

In a way, the acceleration accompanies the increase of liberal rights that has been important for instance for the feminist and LGBTQ+ cause; therefore, as psychologists, we should be vigilant about the potential consequences of this deceleration in increasing social and economic gaps, in threatening human rights, but also about mental health.

In particular, theoretical psychology faces the challenge of thinking and theorizing about psychological phenomena and processes from the perspective of both a global and situated crisis. It is true that the pandemic has a global scale, but at the same time, how it is lived, felt, signified, and the consequences and affordances, vary depending on cultural and subcultural contexts and situations. The challenge for theorization is huge, as both generalization and particularization are needed. But, at the same time, we may find ourselves at the start of new ways of thinking, which may project and invent a future, following John Dewey's (1910) idea of the relation between problems and thinking. In this vein, at ISTP, we supported and sponsored the recent conference brilliantly organized by Martin Dege and colleagues at the American University of Paris. ISTP community participated actively in the conference: Carolin Demuth, Ernst Schraube, Athanasios Markavis, Pina Marsico and myself contribute as co-organizers; Athanasios, Ernst, Marie-Cécile Bertau, Floor van Alphen, Ignacio Bresco de Luna, Morten Nissen, Danilo Guimarães, Kieran O'Doherty, Hank Stam, Luca Tateo, Thomas Teo and Paul Stenner participated as keynotes speakers, and many of us attended the conference as participants. It was a unique opportunity to meet and put our collaborative thinking in motion regarding this crisis, which is something that we need to keep doing in the coming months: trying to disentangle the historical, social, political, economic and psychological aspects of this crisis; and questioning our assumptions and opening them up to criticism. In order to do this, we need to work together, and we invite the ISTP community to meet and collaborate in different ways in the subsequent months in order to deepen our understanding of this crisis and its impact on the production of the evolving world. Theorizing in the passage, as a liminal experience, to borrow Paul Stenner's words, is our next challenge.



Antonia Larrain
ISTP President

To do so, we also need to establish and strengthen our collaboration with other communities and societies. I am pleased to announce that a group of ISTP members (James Cresswell, Paul Sullivan, Mary-Beth Morrissey, and Arthur Arruda Leal) are working on a collaboration initiative called "ISTP Affiliates". ISTP Affiliates represents a grouping of teaching and research organizations that focus on theoretical, philosophical and historical psychology, committed to maintaining and developing diverse traditions representing psychological theory. The ISTP Affiliates initiative will enable ISTP to help establish communication and coordinate bridges among other societies and groups.

Unfortunately, our next face-to-face biennial meeting will have to be postponed. The Sacramento conference that was planned to be held in May 2021 will now be held in 2022. We are grateful to Basia Ellis and the local organizing committee for their openness and flexibility, and we look forward to seeing you all in Sacramento. In the meantime, Kyoko Murakami, Ditte Winther-Lindqvist, Dorte Kousholt, Morten Nissen, Andrés Haye and Ramiro Tau are working as the editorial team of the 16th ISTP volume, which, for the first time, will be edited not as a printed book but as volume of an online open-access publication entitled *International Review of Theoretical Psychologies*. I would like to thank Kyoko and the rest of the editors for this volume: it is a crucial work that allows us to elaborate further and disseminate our ideas. I also want to thank Morten Nissen and Michael Arfken, who have been working on the set-up of the online open-access publication.

This issue includes an interview with an expert psychologist in sanitary crises: Dévora Kestel, Director of Mental Health at the World Health Organization (WHO). Moreover, Artur Arruda Leal writes about the pandemic from the place that has recently been declared the new epicenter of the global crisis: South America. You will also find contributions from members that presented as keynote speakers at The Psychology of Global Crises conference, which presentations you will find on YouTube. We hope you enjoy reading the issue and find thoughtful perspectives to consider this crisis from the point of view of theoretical psychology.

Pandemics, chloroquines, athletes, and military coups: The passage of the virus through the open veins of our Latin America (the Brazilian case). How viruses can be uncomfortable details.

Pandemias, cloroquinas, atletas y golpes militares: El paseo de virus por las venas abiertas de nuestra América Latina (el caso Brasil). O como los virus pueden ser incómodos detalles.

Arthur Arruda Leal Ferreira

Pandemics are great social events. Authors such as Fleck (2010) and Rosen (1958, 1980) have identified this social background of healthcare-related issues, employing concepts such as proto-ideas or socio-historical formations. However, my objective is not to demonstrate that pandemics or public health have a social background, or that the virus is a social construction (a thesis that was adopted in a strange way by negationist sectors). My proposal is to think of the social dimension of pandemics because they constitute assemblages (Latour, 1991, 2005) of heterogeneous elements, including components that resemble human collectives (laws, norms, and public policies), and components that do not (the virus strains in their constant mutations). This approach was used in works such as Tirado et al. (2012, 2015) and Carvajal (2020), the latter being specifically about the COVID-19 pandemic. To understand the composition of the singular Brazilian assemblage, it is interesting to compare it to another singularity in Chile, and perhaps permitting other singularities to come into view. In Chile the advent of the pandemic took place in a moment of complete political effervescence, with the occupation of streets since 18 October and a strong confrontation with the police, yet in Brazil the outbreak developed in a state of greater passivity (albeit one full of anomalies). The contrast between Brazil and Chile is given not only in their starting points that preceded the pandemic, but also in the composition of the elements that they had in common at the beginning: social isolation and the presence of the armed forces. In Chile the military and the police were mobilized to ensure empty streets in the name of a medical quarantine, whereas in Brazil the armed forces, besides occupying an increasing number of offices in the ministries (such as the Ministry of Health), were assembled by minority sectors (with the presence of figures of the presidency) by means of on-site demonstrations (and through social networks) to carry out a military coup, in order to guarantee the free circulation of people. Here we have similar elements: political groups – the military – social isolation – a pandemic, arranged in different assemblages that have different effects. In Chile, this mobilization slowed down the street movements to a certain degree (at least in their on-site forms), but in Brazil it activated a series of collective and remote movements, such as the daily banging of pots,

demands of impeachment and diverse confrontations with the government. These oppositions were caused in many cases by the singular and contradictory bio-policy conducted by the federal government of Brazil: while some sectors of the Ministry of Health and the military tried to increase social isolation (a policy supported by the great majority of state and municipal governments), sectors of other ministries and of the presidency insisted on ending the quarantines (and participated in on-site manifestations against democracy) and on the adoption of contraindicated medications such as chloroquine (also suggested by Donald Trump). Their justifications were that the virus is a real or fictional invention of China (a strange sort of social constructivism), that the disease is only a mild flu, that we should strengthen ourselves through the assimilation of the virus (with the cost of deaths, especially of the elderly!), following our tradition of being athletes or a tough people, since we live happily close to the sewers. The result of these policies has been the dismissal of ministers (two Health Ministers and one Justice Minister) in less than a month, the radical devaluation of the currency (almost 30%), a series of denunciations of interventions in autonomous agencies, such as the Federal Police¹, demands of impeachment, the increase of military officers in the government, and the government's approximation to obscure sectors of the congress: the *centrão* (a group of silent congresspeople that are usually open to negotiations with obscure interests). Shunned and considered corrupt by the current president during the electoral process, this group is now positioned as an ally against the process of impeachment: this assemblage of obscure congresspeople is added to paramilitary groups, agribusiness, Pentecostal churches, and groups supporting free firearm ownership in support of the current government. And, in the middle of these bizarre assemblages, the coronavirus mutations continue to proliferate, almost

as a minor detail, yet one that could effectively establish Brazil as a global power: in the plateau of more the 1200 daily deaths we advance to the position of being an epicenter of the global pandemic. The greatest country in the world... in deaths: as an expression of a bio-thanato-policy characteristic of state racism (Foucault, 2001), emboldened by a minority fascist militancy.



¹ In connection with this process, a judge of the Brazilian Supreme Court allowed free access to a video recorded in a ministerial meeting. What we see is a sort of horror film: the Minister of Education proposing to arrest the judges of the Supreme Court, the Minister of the Economy proud to mislead public servants, the Minister of the Environment taking advantage of the pandemic to relax environmental laws...

Las pandemias son grandes eventos sociales. Autores como Fleck (2010) y Rosen (1958, 1980) ya habían destacado este fondo social en temas salud accionando conceptos como protoideas o formaciones socio-históricas. Sin embargo, mi propósito no es demostrar que las pandemias o la medicina pública tienen un fondo social o que el virus es una construcción social (tesis asimilada de forma rara por sectores negacionistas). La propuesta es pensar que las pandemias son sociales por constituyeren ensamblados (Larour, 1991, 2005) entre elementos heterogéneos, incluyendo componentes más semejantes a colectivos humanos (leyes, normativas y políticas públicas) y otros no tanto (las cepas del virus en su constante variación). Esta concepción esta encarnada en trabajos como los de Tirado et al (2012 y 2015) y Carvajal (2020), esto último, específicamente sobre la pandemia del Covid-19. Para entender la composición de la singularidad del ensamblado brasileño es interesante la comparación con otra singularidad, la chilena, quizás activando la entrada en escena de otras singularidades. Si en Chile, la llegada de la pandemia se mezcló con un momento de total efervescencia política, con la ocupación de las calles desde el día 18 de octubre, con fuerte enfrentamiento de los carabineros, en Brasil esta irrupción se ha dado en un escenario de más grande pasividad (aunque llena de anomalías). El contraste entre Brasil y Chile es dado no solamente por los puntos de partida anteriores a la pandemia, sino por la forma de composición de elementos a principio comunes: el aislamiento social y la presencia de las fuerzas armadas: si en Chile los militares y carabineros han sido convocados a garantizar las calles vacías en nombre de una cuarentena médica, en Brasil, estos, además de ocupar cada vez más cargos en ministerios (como el de la Salud), son convocados por sectores minoritarios (con la presencia de figuras de la presidencia) por medio de manifestaciones presenciales (y por redes sociales) para la realización de un golpe militar para asegurar la libre circulación de las personas. Ahí tenemos elementos semejantes: grupos políticos – militares – aislamiento social – pandemia compuestos en ensamblados distintos y con efectos distintos. Si en Chile, este ensamblado frenó en parte los movimientos surgidos en la calle (al menos en su forma presencial) en Brasil activó una serie de movimientos colectivos a distancia, como los cacerolazos diarios, pedidos de *impeachment* y enfrentamientos diversos al gobierno. Estas resistencias vienen en mucho por la biopolítica singular y contradictoria operada por el gobierno federal de Brasil: si unos sectores del ministerio de salud y unos sectores militares intentaban avanzar en aislamiento social (política encampada por la gran mayoría de los gobiernos estatales y municipalidades), sectores de otros ministerios y de la presidencia insisten en el fin de las cuarentenas (con la participación en manifestaciones presenciales contra la democracia) y con la adopción de medicamentos contraindicados, como la cloroquina (igualmente sugerida por Donald Trump) y las justificaciones son que el virus es una invención real o ficcional de China (un extraño constructivismo social), que es una gripecita, que debemos fortalecernos por la asimilación del virus (¡al precio de unas muertes, especialmente de los viejitos!), cumpliendo nuestra tradición de atletas o de pueblo resistente por vivir tranquilamente cerca las acantiladas. El resultado de estas políticas ha sido la demisión de ministros (dos de la Salud y uno de la Justicia) en menos de un mes, depreciación radical de la moneda (casi 30%), una serie de denuncias de intervenciones en órganos autónomos, como la policía federal², pedidos de *impeachment*, el acumulo de más

² En relación con este proceso, un juez de la Corte Suprema de Brasil permitió el libre acceso a un video grabado en una reunión ministerial. Lo que se ve es una especie de película de terror: el Ministro de Educación proponiendo el arresto de los jueces del Tribunal Supremo, el Ministro de Economía orgulloso de engañar a los funcionarios públicos, el Ministro de Medio Ambiente aprovechando la pandemia para flexibilizar las leyes ambientales...

militares en el gobierno y el acercamiento por parte del gobierno a sectores oscuros del congreso: el *Centrón* (así llamado por configurarse como un grupo de diputados silencios y generalmente abiertos a negociaciones con intereses oscuros). Rechazados como corruptos por el presidente actual durante el proceso electoral, este grupo ahora se apunta como aliado en la salvación contra un proceso de *impeachment*: este ensamblado de parlamentares oscuros se soma a grupos paramilitares, del *agrobusiness*, de grupos de iglesias pentecostales y de las armas libres en el sostén del actual gobierno. Y en medio a estos bizarros ensamblados siguen proliferando las variaciones del coronavirus, casi como un detalle menor, pero capaz de lanzar Brasil efectivamente a la condición de potencia mundial: en la meseta de más de 1000 muertes diarias seguimos para el puesto del epicentro de la pandemia mundial: el país más grande del mundo... en muertes: como expresión de una bio-tánato-política propia de un racismo de Estado (Foucault, 2001) y animado por una militancia facha minoritaria.

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The promotion of mental health in times of pandemic. Interview with Dévora Kestel

Ramiro Tau



Dévora Kestel is a psychologist from the National University of La Plata (Argentina) and holds a Master in Public Health from the University of London (England). After three decades of experience in the design of mental health programs in institutions such as the Pan-American Health Organization and in regions as diverse as Italy, Cuba, Albania or Kosovo, she became in 2019 the first woman and the first psychologist to win the position of Director of Mental Health and Substance Abuse of the World Health Organization (WHO), where she designs policies at a global scale

Interviewer: I would like to start by asking you about your professional background: where did you train and what is the path you took to get to the WHO.

Dévora Kestel: I studied Psychology at the National University of La Plata; it was a six-year degree, which in many countries today is equivalent to a "bachelor" and a master's degree. I remember that my final exam in one of those courses was about the famous Trieste deinstitutionalization experience, and I rediscovered that interest, many years after living in Italy. Before my graduation I also worked as a volunteer at the Korn Neuropsychiatric Hospital. And then I decided to go to Trieste, to learn about all that phenomenon around Basaglia...

I: What caught your interest in that process of transformation of the "psy" institutions in Trieste?

Kestel: I was attracted by the fact that I found an alternative to what, in Argentina, in the psychiatric hospital, produced so much rejection, anguish and motivation to change it. In Trieste I found a reality in which people with serious mental health problems lived in more or less assisted groups, assisted in mental health centres, in the community. I found a totally different world that was closer to something that I thought was fairer.

I: And when did you start to collaborate with international organizations dealing with mental health?

Kestel: After an experience in Cuba, I had the opportunity to work in Kosovo, in a project for the reconstruction of mental health system after the war. And then I was offered to stay and work in Kosovo for the World Health Organization. Then I worked in Albania, where I was in charge of the WHO office, which means that I was the WHO representative in the country.

I: You mentioned elsewhere that your activities had become a little distant from psychology. In what way? Because there's definitely a lot of psychological theory in what you do...

Kestel: Well, the fact is that I haven't worked as a clinical psychologist for more than thirty years. And I think what I do today is broader. After my initial training in Argentina, I did a master's degree in public health in London which contributed a lot to what I do. And I imagine that it is normal for anyone of my age to look back, after a trajectory of so many years, and evaluate where were born the particular motivations. Without a doubt, in what I do there is a psychological background, a way of approaching the problems of human beings in a broader way than that provided by medical training, for example. Moreover, the questions I asked myself about diagnostic models, for example, I still have them... They are problems that were born thanks to the training I had in psychology and that are still present in my current work. And obviously mental health is one of the big problems in psychology. In fact, there are more psychologists than psychiatrists on my team, and not because of a decision I made, but as a consequence of the specific work and the type of problems the department needs to respond to. So, of course, psychology has an important role in my training and in my daily work.

I: As the director of mental health at WHO, you are probably experiencing situations that those who previously held your position did not have to deal with. I would like to know what new challenges the pandemic presents to mental health promotion.

Kestel: Before the pandemic, in a conversation I had a year ago with my two predecessors (former directors of the same department) whom I deeply admire, I told them that what I feared most about my new position was that mental health was much more present in the mass discourses, and that therefore the expectations of our work may be higher. Today there is much more discussion about mental health, there are many more actors in this field, while for years it was only the WHO and some NGOs that dealt with these issues at the global level. Recently new actors and voices have appeared, there is more demand and visibility in mental health issues. Now I can say that this fear or concern was nothing compared to what we are experiencing today with the pandemic. The issue of mental health is now omnipresent, and the demands, concerns and worries are countless. The advantage is that at this time the alliances are also being multiplied. There are more actors with whom we work, and that is wonderful, because it means that we do not have to look for answers alone, with our own team. Instead, we are expanding and multiplying our efforts, to produce tools to respond to the problem or to provide guides or materials so that countries have information to use and disseminate as quickly as possible. An illustrative example of this is a material for children that we published very recently (an illustrated

book entitled "[My Hero is You](#)"): two weeks after its publication was translated into seventy languages and is now in the list of the twenty most translated books in history, with its 109 translations. All thanks to the spontaneous initiative of organizations from all over the planet. That happens when you hit the nail on the head, producing something that is seen as necessary: how to explain to children what is happening, on the one hand, and how to disseminate material through a huge network of organizations, on the other hand, in order to have impact. With this I just want to show that the current challenge,

through the work of the solid and respected team I have to work with, is to expand the capacity of collaboration, to involve others.

I: What is specific in this context, unlike any other health crisis context, for the approach in mental health?



Kestel: One of these specific aspects is that the risk factors are more and more diverse, from a mental health point of view. Today we talk about children, adolescents, the elderly, women in certain conditions, potential victims of violence, first responders, particularly health workers, which is one of the very vulnerable groups, but in general no one is exempt, neither from the virus, nor from all the risk factors that surround this global process. How someone deals with isolation depends on a myriad of factors. The same can be said of the social and economic effects, such as unemployment. So, we have a massive phenomenon, but with very particular effects. However, the fear of infection, the mourning for the death of someone close, the loss of a job, or any of these elements gives us the possibility of anxiety, depression, etc. I mean, the problem itself does not change with respect to other crises. What is really new is the simultaneous amount of risk factors. We know, from a recent publication that we made analysing several countries in conflict (of any kind: a war, a natural disaster...), that one out of every five people develops a serious mental health problem. If these numbers are reproduced, as is to be expected, we are going to have a large number of people whose mental health will be affected, some of whom will overcome it once they return to a more stable situation, and in other cases it will continue as a problem that will require professional help. The risk factors are more and more diverse. The symptoms that are generated will not be different.

...the problem itself does not change with respect to other crises. What is really new is the simultaneous amount of risk factors.

I: And what are the concrete demands that you receive from the Member States of the United Nations?

Kestel: On the one hand, requests for information in general: what to do and what not to do. Many states follow our guidelines in the field of mental health on how to communicate and what to communicate. And, of course, all the analysis about why it is expected or normal to have certain reactions that we can link to mental health, such as fear or uncertainty. We try to get these reactions recognized as normal, along with information about care. All the materials we produce on these issues is used extensively. The other level of demand concerns what to do to provide support on mental health in vulnerable groups. At the same time, we try to help countries to incorporate mental health issues into national plans and that is a more specific job, working on a case-by-case scenario. We work with six regions, and each regional office has to do a job that is not a simple linguistic translation, but a cultural adaptation in some cases, an adjustment to the regional realities, first, and then to the realities of each of the countries.

I: Then the guides and documents you produce are not global, they are adapted for each region?

Kestel: No, we produce them at a global level and then the regions, in some cases, make an adjustment. Actually, they are not just guides; we have different kinds of documents for each situation and context.

I: I guess that a key aspect in the construction of these materials must be the choice of terms, because of the different semantic resonances they may have in different cultures. Some governments and media refer to the pandemic using a military language: they talk about a war, a battle, an invisible enemy... do you use or reproduce that language, or do you try to modify it? On the other hand, do you think that this semantic choice may interfere, obstructing or facilitating, the promotion of mental health?

Kestel: I don't think I'm in a position to answer the second part of the question. At the level of our global communication, thinking on the material we publish, we don't use this kind of language to refer to health and mental health in particular. I would not be surprised if it is used at a country-level or by some health authorities, to emphasize that life is at stake in this situation. With regard to the media that reproduce representations and shape a certain common sense, this

should be discussed with some experts from the media world. Although it is true that some journalists are interested in sensationalism, appealing precisely to this sense of urgency. Some colleagues have analysed the ways in which media deal with mental health issues and have shown the implications of this for the production of stigma and forms of discrimination... The implications of these uses should be carefully explored today.

I: Some social psychologists and anthropologists point out that a health crisis such as the current one functions as a revealer of a certain social obscenity: the pandemic would bring to light something that, in a period of "normal life" is veiled, and would crudely show the previous systematic segregation. Thus, the groups at risk today are none other than those who in our global order were already part of a surplus: the overcrowded, the imprisoned, the elderly, the poor, the sick. On the other hand, there is an interpretation that, in the opposite direction, emphasizes the transversal character of the pandemic, showing that we are dealing with a fast spreading virus of global reach, which crosses the borders of all social sectors, without discrimination or selectivity. What is your opinion about this apparent contradiction?

Kestel: I don't think either reading is entirely accurate. With regard to mental health, there is data from some countries that have clearly shown that the virus affects everyone, but certainly the consequences are going to be different according to a number of conditions, for example, social and economic position, marginality, overcrowding or the type of access to health systems. In England, for example, where statistics on minorities began to be published separately, it is clear that there is an association between certain socially disadvantaged sectors and the effects of the virus. Concerning mental health, we can say that what is appearing is nothing new: it is becoming clear that mental health policies are very underdeveloped in most countries. The general health budget assigned to mental health is very low in most countries, and in many of them there are no mental health systems that can respond to daily needs, and even less when these needs increase as a result of a crisis like this one. With the pandemic, it becomes evident what we already knew. So, we cannot say that it affects only the most vulnerable or everyone equally. There is a middle way to read it, because, although it affects everyone, the response will be very different. At the same time, being part of a privileged class or living in a privileged country does not guarantee that one can survive the virus or that mental health will not be affected.

I: I heard you say that in terms of access to mental health services, there are no countries that can be considered developed?

when you talk about mental health, we are all developing countries

Kestel: That was a phrase from my predecessor who said that 'when you talk about mental health, we are all developing countries'. And it is still true. Recently I was asked if I could name the countries that have a good mental health system... and I don't know them. There are certain areas, not only in developed countries, with very good initiatives, good projects. But one can hardly name a single country that, as such, has a good mental health system that is on a par with the general health system of the same country, for example.

I: Are these deficits due exclusively to political and management decisions, or to a certain lack of theoretical reflection and conceptual support?

Kestel: I think that both aspects. On the one hand, I see a stigma around mental health both from the point of view of the population, the community, and therefore politicians and governments. There may be funding for health research in general, but not so much for mental health research. And that leads to a lack of reflection, and consequently to a lack of evidence based on scientific studies to develop all the necessary capacity to respond to mental health problems. On both levels we have something that is in the way of development or with significant deficiencies. Around mental health issues there is a strong internal conflict, regarding causes,

strategies, consequences... And disagreement is not between a psychologist, a psychiatrist, or a neurologist, it is present at all levels. I always wonder if other areas of health are as complicated as ours. We don't even reach agreements within the same discipline in the same country. This absence of agreements does not help us, as a field of work, because we do not offer a clear message to our correspondents. This is partly due to the complexity of the human being, which is reflected in the complexity of the work we do. And that complexity is partly due to internal divisions, but it is also the result of a particularly complex subject. We are dealing with nothing less than the quintessence of the human being.

I: Divergence on practices seems to mirror the theoretical fragmentation of the field of mental health and, in general, of the so-called “psy” field. In some countries with strong traditions of psychologists and psychoanalysts one could find readings that tend to psychologise the social. In other contexts, explanations in mental health seem to be limited to the socio-cultural dimension. How does an organization such as the WHO position itself, to work at a global level, considering these discrepancies?

Kestel: We have very structured processes for preparing guidelines, which force us to take a series of measures so that the result is as solid and representative as possible. Obviously, there are several biases. For example, one of my challenges since I have been here is to ensure that we do not only involve representatives from English-speaking countries, because that only reproduces the primacy of research from certain regions, with their populations and the definition of their problems, which is never universal. That is a challenge. Not only to avoid theoretical or regional bias, but to promote research which, in low- and middle-income countries, is very little. And if it is low in general, in mental health it is almost non-existent, with few exceptions.

I: According to you, what is still expected from theoretical reflection in psychology in order to contribute to the approach in the field of mental health? Can you identify major gaps or weaknesses?

Kestel: In the field of the promotion of mental health we still need a lot of research and reflection on the effects of the adopted strategies. We need to know what works and what does not work. The analysis of social aspects implied in mental health, the prevention of mental symptoms, among other dimensions, all this is still in its infancy. Much remains to be developed. Now, how much of this is a problem of theoretical reflection or a problem of research in general, I don't know. I

work in an organization that relies on scientific evidence. And all theoretical reflection in this area must come always from data, whether quantitative or qualitative. From the perspective allowed by my position, I see a need to expand the knowledge from which to generate practices that will improve mental health in populations, by outlining interventions in promotion, prevention, treatment, and recovery, based on a public mental health perspective.

In the field of mental health we still need a lot of research and reflection on the effects of the adopted strategies. The analysis of social aspects implied in mental health, the prevention of mental symptoms, among other dimensions, all this is still in its infancy.

Geneva, June 2020

The Psychology of Global Crises: State Surveillance, Solidarity and Everyday Life

During the month of May, the conference "The Psychology of Global Crises: State Surveillance, Solidarity and Everyday Life" was held online. Below we present the synopses of three of the central lectures of the event.

Hermeneutic Injustice and the Global Crises of Psychology

Henderikus J. Stam - University of Calgary, Canada

At the outset I argue that psychology is constitutionally incapable of addressing our current crises. And by current crises I include not only the current COVID-19 outbreak but the protests and soul searching that has resulted from the killing of George Floyd on May 25 which occurred the day before I presented my paper. Racism, the Black Lives Matter Movement and the protests against police violence has resonated in many countries where such protests are allowed, including Canada where police violence and systemic racism have also been a long-standing problems that finally broke out into open demands for justice. By arguing that psychology is constitutionally incapable of addressing both issues I mean that psychology (a) engages in a *rush to expertise*, making pronouncements on the basis of long ago published research that is completely removed from the current social context and (b) is highly individualistic and confusing because it focuses on cognitive and 'internal' processes that frequently miss the point. (Psychologists of course do support anti-racist work or do occasionally make political statements as allies of protest movements, but these are helpful only insofar as they steer clear of psychologizing these issues.) Others have also long criticized the discipline that has done its part to mask the social foundations of our existence by abstracting individuals and then recontextualizing them by repudiating their social constitution. Furthermore, most of our lives in the post-industrial world are currently lived or are concentrated inside a manifold or labyrinth of institutions. Psychology deinstitutionalizes this fully and furthermore deproblematizes this social world by constituting a single social order, a personified, flat notion of "society." And the entire discipline makes of us all ahistorical beings whose lives have never been part of a continuous developing history, a history which itself is also contested.

As an antidote I introduced Achille Mbembe's notion of *necropolitics* and Miranda Fricker's (2007) notion of *hermeneutical injustice* to work out some of these issues. I will not discuss necropolitics further in order to keep to the limits of this brief note. Hermeneutical injustice occurs "when a gap in collective interpretive resources puts someone at an unfair disadvantage when it comes to making sense of their social experiences." Miranda Fricker developed this as an element of her account of epistemic injustice – the latter is composed of testimonial injustice and hermeneutical injustice. I will ignore testimonial injustice here. Fricker provides the following example of hermeneutical injustice; "[A] woman who suffers sexual harassment prior to the time when we had this critical concept, so that she cannot properly comprehend her own experience, let alone render it communicatively intelligible to others" is said to suffer

a hermeneutical injustice. This is a kind of injustice that stems from a gap in collective hermeneutical resources. Furthermore, this disadvantage “impinges unequally on different social groups,” particularly those who are “hermeneutically marginalized” because “they participate unequally in the practices through which social meanings are generated.” One might argue that contemporary politics runs on hermeneutical injustice. I want to turn to the question of just how psychology participates in a form of hermeneutic injustice. Fricker tuned in to this question because of the way in which relations of power, particularly patriarchal power, had constrained women’s ability to understand their own experience. Being outside forms of understanding creates a kind of hermeneutical inequality. It is “the injustice of having some significant area of one’s social experience obscured from collective understanding owing to persistent and wide-ranging hermeneutical marginalization” (p. 154). What is interesting about this form of epistemic injustice is that it is not the work of an agent, it is a structural condition. Unlike Fricker’s other arm of the notion of epistemic injustice, that of testimonial injustice, the realization of hermeneutical injustice becomes regnant when certain background conditions are realized but cannot be articulated in an intelligible way. The person comes up short, can explain neither to themselves or others clearly what it is that is at stake.

In my presentation I was particularly interested in what happens when a discipline, and a professional like a psychologist, reframes experience. On what grounds can this happen? Psychology as a relatively young discipline has wedded itself, and then perfected, a theoretical language that allows itself to replicate, mutate and metamorphose quite rapidly. This is because it is a strictly functional language that can be used flexibly but nevertheless constitutes categories of explanation. (I have referred to this as *indeterminate functionalism* elsewhere.) Think of terms such as personality disorder, cognitive deficit, passive-aggressive, semantic memories and so on. These are vocabularies that psychologists impose on others, created to provide normative trajectories that define us and by exclusion show us what is deviant. But our theoretical categories (including our variables) are normative and historical. What psychological discourses do, once widely circulating, is enable as well as constrain the possibilities of an experiential discourse. At that moment we create the possibilities and the conditions of a *hermeneutic injustice*.

I have discussed some of this in an article in 2015 on what I called the “ethics of shared understanding” where I lay out some of this argument but outside the framework of Fricker’s work. I think that her notion of epistemic injustice is an important corollary. By an ethics of shared understanding I mean that as psychologists we construct concepts, theories and practices that can have real consequences. Hence, we have a responsibility to *the other* for those claims. Psychologists’ claims circulate in a world that is guarded by professional privilege and psychologists are guaranteed a stake in the educational systems and universities of the world, hence providing legitimacy for millions. The responsibility then for reconstituting experience looms large. An ethics of shared understanding is an ethics that should not violate the norms and standards of our communal existence, even if the notion of communal existence is vague. I ground this analysis in Judith Butler’s (2005) notion of ethical violence “or the violence we perpetrate on others when we claim to know them or demand of them a knowledge that we have defined in the first instance” (p. 125). For Butler the opaqueness of the self, our inability to see ourselves clearly, bounds us to relationships with others. So as psychologists we have a power to “install” or “disinstall” the “I” – the strict imposition of a psychological understanding then is a kind of ethical violence.

Psychology is not a neutral bystander. It enables the regimes of truth that make our current politics possible. Psychology is engaged with the formation, distractions and preoccupations of an internal and unique psyche. It continuous the narrative of a sovereign subject, one that struggles for autonomy. A hermeneutic injustice can be committed every time we obliterate the language of experience in favor of some professional code.

References

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Crises and Metamotives

Morten Nissen - Aarhus University, Denmark

What is the relevance of social theory and psychology for this crisis? Despite neoliberal dominance, we can hope for or fear crisis, rather than just an exception; but it is unwise to imagine science to harness these winds of change. Rather, a slow science may help cultivate the wisdom to address deeper crises such as those of climate or of democracy. Psychology is mostly pragmatic and matches the neoliberal 'business as usual'. Especially motivation psychology has been reduced to a pragmatics of self-regulation that blocks the question of meta-motivation: "Am I motivated for motivating myself?"

Critical psychology addresses subjectivity and crisis; but on this issue, it is split up in essentialist humanism versus a post-humanism that avoids the issue. Ute Osterkamp's theory of needs for agency, for participating in forming and developing culture and community, can point a way. It offers a way to think of meta-motives as cultivated collectively, as the urge to participate, also in constituting, framing and transforming - and as basically dilemmatic and contradictory.

Aesthetic practices and the current 'aesthetic turn' are taken up to unfold this. With Rancière, aesthetics is not simply 'the art of' performing given standards, but nor is it inscrutable as 'art for art's sake'. Rather, it is creating dissensus, clashing and transforming 'regimes of sense'. Aesthetic *motifs* can be ways to address and create meta-motives. This is illustrated by the use of aesthetics in attempts to transform addiction counselling in Copenhagen. Attending to *motifs* of aesthetic productions is a way to add 'deeper layers' to an otherwise thin and weak narrative of goal-direction.

Conclusion: In the articulation of such practices, we can help cultivating the meta-motives to confront crises; this is a poetics of knowledge (Rancière), where we engage in communal processes of 'social self-sculpturing' (Stiegler) of passionate communities of care - also as viable alternatives to populism as ways to address the affective dimensions of politics that are often disregarded as we reflect the contributions of science (Mouffe).

The Psychology of Global Crisis through the lens of liminal experience: Stuck in the middle with Coronavirus.

Paul Stenner - The Open University, United Kingdom

This presentation theorises the Covid-19 Pandemic through the lens of liminality as part of a process social psychology which foregrounds experience and temporality. The pandemic has provoked liminal experiences on multiple levels from the micro-local to the global. Compared to the interpretative frame provided by the concept of crisis - which stresses separation - the concept of liminality helps draw attention, not just to the possibility of progressive change following the pandemic, but to the importance of going through experiences of transition as a pre-condition for such change. The paper includes an analysis of one of UK prime minister Boris Johnson's recent speeches and proposes that the response he has led is predicated upon an elimination of liminality rather than engagement with it. It is suggested that this stance may be an important factor in creating the conditions under which care homes have proved to be liminal hotspots of intensive Covid-19 infection.

Watch this video and enjoy! (a cover-version of a song from the 1970s with changed lyrics):

<https://www.youtube.com/watch?v=OLJ3AXhbj3w>

2nd Call for Papers: ISTP 2019 Conference Proceedings

Thank you for those conference delegates who have submitted or expressed your interest in submitting your papers. Considering the current pandemic situation, we have decided to extend the submission deadline. **The new deadline is 1st September 2020.**

The executive committee has decided on a new proceedings' title as follows: International Review of Theoretical Psychologies: Measured Lives - Theoretical Psychology in an Era of Acceleration.

For the submission guidelines and instructions to the authors, please follow the link:

<https://conferences.au.dk/istp2019/>

The direct link to the pdf is:

https://conferences.au.dk/fileadmin/conferences/2019/ISTP/2nd_call_CPH_instructions_to_authors-2019_istp_proceedings_FIN.pdf

Please feel free to email: society.istp@gmail.com if you have any question.

Look forward to receiving your papers.

Best wishes,
The 2019 Proceedings editorial team

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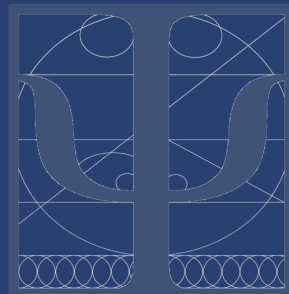
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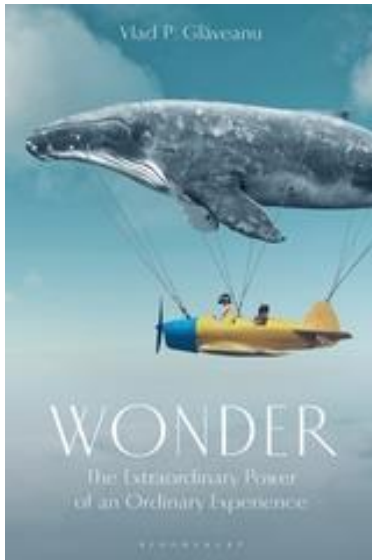
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Upcoming Publications



Glaveanu, V. P. (2020). **Wonder. The Extraordinary Power of an Ordinary Experience.** Bloomsbury.

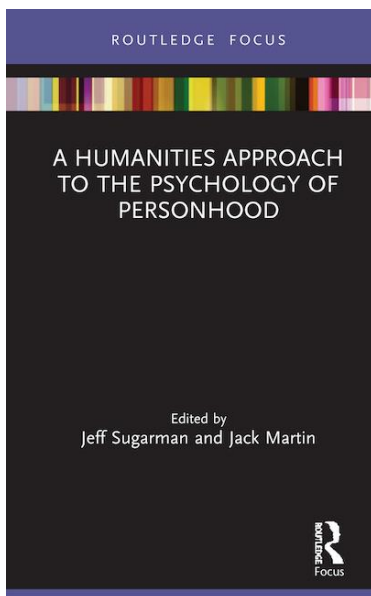
This book is dedicated to wonder and wondering, mundane phenomena that, despite their great value for education and other spheres of human experience, often go unnoticed both inside and outside the classroom. Praised as the origin of philosophy in ancient times, the concern for understanding and educating wonder has been present throughout history. It is not only the case that this basic psychological process opens our everyday experience to what is possible, what lies beyond the here-and-now, but does so with extraordinary consequences. Wonder transforms our experience of the world from early childhood onwards. It is ever-present in children's play and games, it offers constant opportunities for learning and it fuels our creativity. And yet, we know little about this phenomenon, its biological, psychological, social and cultural underpinning, and even

less about how to foster it and harness its benefits in education.

This book fills this gap and gives a scientific yet accessible account of wondering. It proposes a new way of understanding wonder, while at the same time offering practical tools for cultivating wonder within ourselves, our interpersonal relations, and within educational practice.

Order online at www.bloomsbury.com by entering the discount code GLR TW4 on the first page at checkout.

Details here: <https://www.bloomsbury.com/us/wonder-9781350085152/>

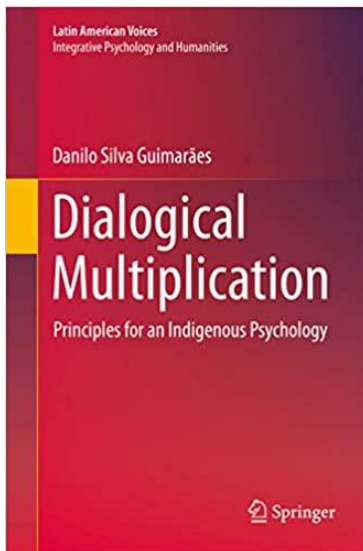


Sugarman, J. & Martin, J. (2020). **A Humanities Approach to the Psychology of Personhood.** Routledge.

In this insightful set of essays, the concept of the psychological humanities is defined and explored. A clear rationale is provided for its necessity in the study and understanding of the individual and identity in a discipline that is largely occupied by empirical studies that report aggregated data and its analysis. This book is aimed at upper level undergraduate and postgraduate students and scholars of psychology, particularly theoretical psychology, philosophy of the mind, and those from a humanities background interested in exploring the concept of the psychological humanities.

20% Discount Available - enter the code SCI20 at checkout*

Details here: www.routledge.com/9780367278359



Guimaraes, D. S. (2020). **Dialogical Multiplication. Principles for an Indigenous Psychology**. Springer.

This book presents a theoretical framework developed to support psychologists working with indigenous people and interethnic communities. Departing from the cultural shock experienced as a psychologist working with indigenous people in Brazil, Dr. Danilo Silva Guimarães identifies the limits of traditional psychological knowledge to deal with populations who don't share the same *ethos* of the European societies who gave birth to psychology as a modern science and proposes a new approach to go beyond the epistemological project that aimed to construct a subject able to represent the world free from any cultural mediation.

According to the author, the purpose of cultural psychology is to produce general psychological theories about the cultural mediation of the self, others and world relationships. Based on this assumption, he argues that to achieve this aim, cultural psychology needs to understand how indigenous perspectives participate in the process of knowledge construction, transforming psychological conceptions and practices. In this volume, the author presents his own contribution to open cultural psychology to indigenous perspectives by discussing the theoretical and practical implications of the notion of dialogical multiplication for the construction of work in co-authorship in the relation between psychology and indigenous peoples.

With the growing migrations around the world, competences in psychological communication across cultures are more demanded each day, which makes *Dialogical Multiplication – Principles for an Indigenous Psychology* a critical resource for psychologists working with interethnic and intercultural communities around the world.

Details here: <https://www.springer.com/gp/book/9783030267018>

PSYCHOLOGY THROUGH CRITICAL AUTO-ETHNOGRAPHY

Academic Discipline, Professional
Practice and Reflexive History

IAN PARKER



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Parker, I. (2020). **Psychology through Critical Auto-Ethnography: Academic Discipline, Professional Practice and Reflexive History**. Routledge.

This unique book is an insider account about the discipline of psychology and its limits, introducing key debates in the field of psychology around the world today by closely examining the problematic role the discipline plays as a global phenomenon.

Ian Parker traces the development of 'critical psychology' through an auto-ethnographic narrative in which the author is implicated in what he describes, laying bare the nature of contemporary psychology. In five parts, each comprising four chapters, the book explores the student experience, the world of psychological research, how psychology is taught, how alternative critical movements have emerged inside the

discipline, and the role of psychology in coercive management practices. Providing a detailed account of how psychology actually operates as an academic discipline, it shows what teaching

in higher education and immersion in research communities around the world looks like, and it culminates in an analytic description of institutional crises which psychology provokes.

A reflexive history of psychology's recent past as a discipline and as a cultural force, this book is an invaluable resource for anyone thinking of taking up a career in psychology, and for those reflecting critically on the role the discipline plays in people's lives.

His lecture for the launch of his book is here: <https://awryjcp.com/index.php/awry/issue/current>

There is an interview with Ian about his book here:

<https://www.madinamerica.com/2020/03/psychology-not-think-interview-critical-psychologist-ian-parker/>

Details here: <https://www.routledge.com/Psychology-through-Critical-Auto-Ethnography-Academic-Discipline-Professional/Parker/p/book/9780367344177>



Lamiell, J. T. (2020). **William Stern (1871-1938), Eclipsed star of early 20th-century psychology.**

In *Oxford Research Encyclopedia of Psychology*. Oxford University Press.

In the literature of mainstream scientific psychology, German scholar William Stern has been known primarily (if at all) as the inventor of the intelligence quotient (IQ). In fact, however, Stern's contributions to psychology were much greater and more consequential than this. In this all-inclusive article, I have sought to provide readers with a fuller appreciation for the breadth and depth of Stern's work, and, in particular, for that comprehensive system of

thought that he elaborated under the name "critical personalism." Drawing frequently on translated quotations from Stern's published works, and on his personal correspondence with the Freiburg philosopher Jonas Cohn, I have endeavored to show how Stern was much more than "the IQ guy." During the first 20 years of his academic career, spent at the University of Breslau in what is now the Polish city of Wroclaw, Stern founded that sub-discipline of psychology that would be concentrated on the study of individual differences in various aspects of human psychological functioning. He also made major contributions to that sub-discipline referred to at the time as "child" psychology, and laid the foundations for a comprehensive system of thought that he would name "critical personalism." After relocating to Hamburg in 1916, Stern continued his scholarly efforts in these domains, taught courses both in psychology and in philosophy at the university that opened its doors there in 1919, and played major administrative roles there in the institutional homes of both disciplines until forced to flee Nazi Germany in 1934. The present chapter highlights ways in which, over the course of his scholarly career, Stern boldly opposed certain trends within mainstream thinking that were ascendant during his time.

Details here:

<https://oxfordre.com/psychology/view/10.1093/acrefore/9780190236557.001.0001/acrefore-9780190236557-e-523>

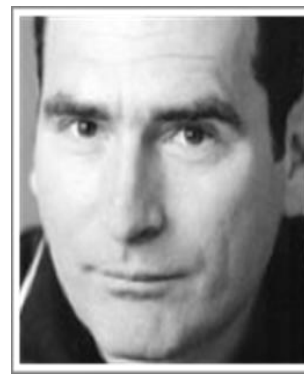
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Note from the editor

Dear ISTP member,

One of the objectives of our Society is to share and disseminate academic activities related to theoretical psychology. That is why we invite you to send us any information about the launching of new books, journals, open calls, courses or academic meetings, among other events. Through our communication channels, and especially through our newsletter, we will be able to spread the information you send us.

I look forward to receiving your messages.

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