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Who cares for academics? We need to talk about emotional well-being including what we avoid and intellectualize through macro-discourses

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Abstract

This paper explores academics' wellbeing through analysing published sensitive disclosures, bringing to journal space the pain, rawness, and emotional suffering of individuals' experiences. We confront the taboos of speaking openly about mental health and emotional wellbeing in academic institutions, with masculine structures and encroaching neoliberal discourses that create hostile atmospheres unsupportive of vulnerability and uncertainty. We also challenge existing discourses about academics' wellbeing, implicitly burdening individuals as responsible for their pain and creating walls of shame, rather than building new healthy structures. By spotlighting the voices of academics' emotional disclosures, intensified by embodied social inequalities, we plead for openness in formal academic outlets for sharing pre-existing emotional struggles and new wounds created by cruelly competitive, winner-takes-all structures, fortified by neoliberal ideals. Led by individuals' voices and experiences, we make recommendations for supporting academics as an attempt to extract academia from its current perverse state and commit to repair and transformation.

Keywords: academia, neoliberalism, wellbeing, emotions, pain, mental health, inequality

Trigger warning: The moments shared in this piece may be upsetting. Please make sure you're in a safe place before reading in case you are affected by it. We encourage reaching out to appropriate local resources, but if you need urgent support and you are in the UK the Samaritans are available to be called 24 hours a day (116 123). Worldwide support is also available from Befrienders (https://www.befrienders.org/).

A note from the Authors

We are two academics invested in critical management aims, working as lecturers in a Business School in the UK, and we are becoming increasingly concerned about mental health, specifically emotional struggles experienced by individuals within higher education. In approaching wellbeing experiences, we will be brave and spotlight moments that are knowable, but often unspeakable. In writing our paper, we have often critiqued the masculine structures and behaviours that are illustrative of neoliberal academia, and we thus advocate for writing differently in form and structure. We hope to push the boundaries of journal publication, by discussing neoliberal academia's connections with mental health and wellbeing in a non-masculine, non-performative way. We have been inspired by a recent special issue on writing differently (e.g. Gilmore et al., 2019) that has demonstrated how writing serves as a form of activism, and we hope to offer our efforts in this spirit, acting to discuss openly the unwellness among us and to strive for healing.

For connection, rather than academic flourish.

An in-depth study of the intensification of neoliberal values and their effects upon academics' emotions and wellbeing, such as open discussion of anxiety, depression, alienation, and panic, has not been explored widely in journals with raw, embodied closeness. An exception is a small and slowly growing body of literature [remarkable occurrence within masculine publishing structures] exploring how the academic system in business schools

materially, psychologically and physiologically affects staff. One distinguished example is Brewis (2005) who provides a vivid and honest account of the anxiety and depression she has encountered following the interrelations between her identity and academic work. A second remarkable example informing us from a Latin American context is Prasad et al., (2018), sharing the negative health effects, documented as stress, depression and self-doubt, on academics striving for research output and its subsequent accreditation in business schools in Mexico. Predominantly though, literature is infiltrated with critiques of the academic system (e.g. Anderson, 2008; Ashcraft, 2017; Butler and Spoelstra, 2012; Prasad, 2013), and whilst we agree with and learn from these analyses, we lead from the rawness and pain of disclosures to emphasise that structural factors are experienced within the individual, psychological and socio-cultural aspects of mental health and wellbeing. It is the embodied individual who is living these experiences.

In this paper, we explore how the neoliberal academy - disembodied in its assumptions, yet violent in its consequences - affects academics' wellbeing, analysing published sensitive disclosures online and written by UK academics across disciplines. We bring these disclosures into a formal academic outlet in this manner, to share and challenge emotional suffering.

We have included those who write that they have been formally diagnosed with a mental health condition (e.g. depression, anxiety, stress, phobia and bipolar disorder), as well as those who have not been formally diagnosed, so we do not overtly restrict our analysis, as it is clear that experiences of suffering extend far and wide. We have a brief literature review addressing definitional concerns about health and wellbeing, followed by discussion of recent studies of the neoliberal academy. In this background discussion, we give analytical primacy to embodied experiences over wider theories of literature. We assume that readers of this journal are well versed in the knowledge that academic life is being tarnished by a neoliberal,

managerialist logic. Rather than reproduce those debates, we connect to this literature by asking about emotional struggles in academia – that is, the individual's bodily experiences, un-muffled by diverting to discursive analyses. We thus take key existing arguments on the neoliberal shaping of UK academia and attempt to centre the personal, psychological and individual aspects of academics' lives within these arguments by simply asking:

Who cares for us?

Within these neoliberal structures, where are the spaces for our wellbeing, our mental health?

We want to provoke a direct focus upon individual human experience and share stories that can be trusted within a space that supports raw, bodily articulations, by including written accounts. Producing our work in this way may be one means of 'talking back' against neo-liberal forms of performativity (Ruth et al., 2018: 154), pushing normalized journal writing boundaries. We feel there is political value in being disruptive, disjunctive, non-linear and fragmented (Markham, 2005), supporting ourselves in finding courage and strength to endure working within, and attempting to challenge, the neoliberal University.

An introduction on definitional concerns for talking about wellbeing

Depression. Anxiety. Self-harm. Cutting. Burning. Overdose and drug use. Thoughts of death. Low self-esteem. Stress. Crying. Shaking. Numbness. Palpitations. Panic attacks. Unable to enjoy anything. Hopelessness. Sleeping problems. Guilt. Sadness. Shame. Physical aches. Constant worrying. Aggressiveness. Weight gain or loss. Difficulty remembering and concentrating. Dizziness. Agitation. Isolation. Suicide.

These are some of the signs, symptoms and behaviours of struggles with mental health. We utilize the term 'mental health' reluctantly here, to connect to the ongoing reports and publications about suffering that apply this term 'mental health', particularly in the UK

context. We also honour the varied ways that people prefer to discuss these emotional struggles, which could be as mental health, social pain, emotional health, health, wellbeing, isolation, alienation, being excluded, and more…

In this section, we will briefly point to some definitional concerns to highlight key areas of discussion and move towards an overview of the neoliberal academy.

We recognize that mental health is a broad category, ranging from common health experiences to severe, longer-term conditions (Elraz, 2017). We find the mind/body binary problematic, disrespectful to the fullness of emotions and feelings, and the term 'mental health' reinforces this dualism. When this phrase is used, it may refer to a range of emotional struggles, including depression and anxiety. Stress, a popularized and homogenous label, is a potentially dangerous term limiting understanding of human emotional struggle, particularly when organizations perform stress-management initiatives which can deflect responsibility back onto the individual (e.g. Fineman, 1996), masking structural problems and embodied struggles.

Institutional definitions of mental health may convey individualized neoliberal assumptions. The *World Health Organization* (2014: 10) defines mental health as: 'A state of wellbeing in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community'. The International Labour Organization (ILO) (2017) defines workplace wellbeing as: 'Relating to all aspects of working life, from quality and safety of the physical environment, to how workers feel about their work, their working environment, the climate at work and work organization'. This latter definition is more specific to our context, acknowledging the importance of individual's feelings, but perhaps does not go far enough about embodied struggles connected with political and cultural contexts.

Whilst we acknowledge the importance of different definitions for endeavouring to understand the fullness of human experience, we also understand that the intensity of experiences like depression and anxiety can too easily be swept under the umbrella of popularized terms like 'wellness', 'wellbeing' and 'health'. Such terms are often closely connected with taking action against symptoms, rather than focusing on the sources of difficulties. We advocate for learning from the lived experiences of suffering from emotional episodes or longstanding difficulties with mental health in academia. Whilst we adopt the words 'mental health' for immediate connection to other discourses, we also recognize that emotional trauma does not fit neatly within 'mental health', as the words themselves suppress the rawness and intensity of what people share in the accounts we present.

Struggling with health within the neoliberal academy

Some progress has been made in challenging cultures of poor mental health throughout society more generally, via charities in the UK such as 'Time to Change' and 'Mind', but sensitive discussions about emotion and mental health in organizations remain difficult for employees and employers alike. Disclosing emotional struggle may be seen as threatening boundaries around 'appropriate' talk and behaviour in 'professional' working life. Indeed, in our data analysis we encountered recurring themes of shame and fear of being judged incompetent, as well as institutional statements dismissing the importance of acknowledging mental health. These conversations are exacerbated through histories of mental health as a 'disease' and 'madness' (Conrad and Schneider, 1992) necessitating stigmatization, silencing, and disappearing – making invisible the anguish of human struggle.

Alongside this shaming history, there is a growing sense within University cultures that mental illness is 'normal', even an expectation (Aubrecht, 2012). Sensitive media disclosures of academics' struggles with their mental health remain ever-present, yet these

are clouded by a culture of silence at institutional levels, as Guthrie et al., (2017) report suggests, only 6.7% of UK academic staff disclose their mental health conditions. A letter from a General Practitioner (GP) may certify an individual as sick or ill, but this does not guarantee compassion or understanding from other individuals or the organization, nor does it consider the broader work environment that could be contributing to their poor health.

Research in organizations outside of academia highlights numerous factors influencing an organization's response. A *Mental Health at Work* (2017) report commissioned by Business in the Community and UK government, with a nationwide survey of workplace mental wellbeing, indicated that 40% of employers did not want to interfere, 34% were unsure how to start the conversation, 28% were not confident in offering support, 26% had not received the appropriate training and 23% could not start that conversation. These hesitations, compounded by the normalization and stigmatizing history of mental health struggles, intensify the floodgates of emotional struggles, and ultimately the lived, breathed, experiences of torment within individual bodies.

In a recent report, around half of UK higher education academics suggest that their wellbeing and mental health are undermined (Gorczynski, 2018). This sector carries a higher propensity for an individual to develop a mental health problem compared with other working populations (Guthrie et al., 2017). There's also a suicide risk with known factors contributing to this danger, including specific job-related features pertinent to our setting such as low pay and insecurity, and having knowledge of and access to suicide materials and methods (Office for National Statistics, 2017). We were saddened to learn during the writing of our paper of the passing of Dr. Malcolm Anderson, an academic at Cardiff University, for which the coroner recorded a verdict of suicide (BBC, 2018). The report harrowingly states how Dr. Anderson would reply to his 418 students during any hour of the day or night. In responses to messages left for Dr. Anderson, a colleague highlights the prevalence and reality

of mental health in academia that we already suspect: "…I have heard numerous stories from colleagues who feel like they are barely holding on…others have told me that they can't go on anymore, I am terrified that one day it will be one of my friends who won't be able to cope anymore" (BBC, 2018).

Analyses of political context and the ills of neoliberalism are valuable, as are studies on academics' working conditions that focus on discourse and macro-political analysis (e.g. Butler and Spoelstra, 2012; Keenoy and Seijo, 2010; Prasad, 2013) as intangible responses to University managerialism (Anderson, 2008). The threats to academics' wellbeing are many: work intensification; job insecurity; expectations to obtain highly competitive grants; REF (Research Excellence Framework) targets, and TEF (Teaching Excellence and Student Outcomes Framework) targets in the UK context. Toxic leadership challenges wellness, manifested in ways like contempt towards frontline staff who carry the University work daily. These threats are shaped by wider longstanding social patterns of inequality and injustice, including gendered, racialized, ageist, classed experiences, augmented by intersecting marginalized identities (e.g. Havergal, 2016; Savigny, 2014).

Consider the REF and journal rankings such as the Association of Business Schools (ABS) list, that are known to damage funding and research cultures (Willmott, 2011), and which are often imposed in internal promotion and other employee assessment criteria. What happens to individuals who live and breathe these cultures and who may reach breaking point, whilst trying to embrace the often-advocated institutional approach of 'rejection sensitivity' (Day, 2011) - learning at an intrapersonal level to regularly and resiliently respond to negative events and circumstances (e.g. a paper being rejected)? How about early career academics striving for journal publication, competing against others with decades of experience and established networks, but still trying nevertheless? And what about our complicity in these activities? Can the REF and ABS list regimes survive without our

participation? And if we admit our complicity in these activities with damaging consequences, are we participating in harming one another? Is this something for academics to care about?

The 'wellness movement' has grown in recent decades, forming around economic, ideological and organizational interests, and operating rhetorically, hiding power relations between management and employees; thus, somebody 'fit' for purpose from an organizational perspective is not necessarily 'well' (Dale and Burrell, 2014). Modern academia has also had its own modern change agenda, especially since the UK Browne review in 2010-2011. This government-led legislative programme saw a large increase in tuition fees, shifting financial responsibility onto students and designated Universities as 'sites of service provision, consumer activity and commodity exchange' (Bailey and Freedman, 2011: 1). These are macro-level changes triggering psychological and spiritual effects seeping into individuals' lives, whereby pains gradually become silenced (Gabriel, 2012). Rather than speaking about academics' poor mental health and wellness, instead mental health in Universities is treated as an individual, isolated, and personal experience, unrelated to the problematic structures and agendas of contemporary Universities (Gill, 2009; Gill and Donaghue, 2016). This approach pathologizes individuals' experiences, emotions and feelings as unsuitable for what the market values as either productive or desirable (Esposito and Perez, 2014). As Askins and Blazek (2017) note, there can be a genuine fear that academics' expression of private emotions might damage their social relationships with colleagues, by highlighting types of work that breed their insecurities, such as teaching a new class for the first time.

Discussions about an individual's 'mental health' might rely on the personal attitudes of line managers, a relationship itself open to power dominance and abuse. Thus, individuals' experiences may be caught in or worsened by a web of institutional violence within

neoliberal academia, which neatly sidesteps collective inward reflection and responsibility. For example, Parker (2014) describes the institutional mechanisms in play that enabled an aggressive change programme in a top European Business School. Whilst Parker (2014) does not explicitly discuss mental health, he suggests that the programme caused the affected academics much 'pain' that collectively could not be resisted. If the academic system affects collective resistance, separating and dividing colleagues, individuals carry this pain in isolation.

It is clear that the wellbeing of academics is affected by multiple performative pressures and emotional demands. However, as Guthrie et al., (2017) demonstrate, literature on academic and researcher wellbeing primarily focuses on workplace stress, rather than explicitly upon other clinically defined mental health concerns. Furthermore, these discussions often focus on one element of the job (e.g. pressured research performance) rather than a more integrated conceptualization of individuals' wellbeing or health. When assessing research performance, for example, evidently what counts is only that which can be quantified and displayed. A recent example is Ruth et al., (2018) who talk about their anxiety when asked for a research portfolio from their University. Their accounts demonstrate outputs as part of an evaluation process, showing their feelings of worry, nervousness and unease about demands with an uncertain outcome, unrelated to their ability, skills, knowledge or work quality (Ruth et al., 2018).

Kiriakos and Tienari (2018: 9) talk about the prevalence of anxiety specifically when writing, as 'we know our academic lives depend on it'. Franco-Santos et al. (2017) have recently evidenced the misalignment between academics' job demands and responsibilities, and the governance of these by institutions, demonstrating negative effects upon individuals' wellbeing. Similarly, Horn (2016) has identified the extensive social and psychological costs of peer-review mechanisms and rejected submissions. This inherent focus on measurable

outputs also redefines human relationships in Universities in transactional terms, as means to the sole end of high performance and productivity (Lynch, 2015). Yet, as Poulos (2017: 8) eloquently notes: 'There is no metric for pain, for anger, for sadness, for joy'.

The prevalence of never-ending ratings, rankings and measures within academia also creates competition between groups and individuals within institutions (who never intended to compete against their colleagues and friends), with such competition intensifying feelings of 'pride, guilt, shame and envy' (Ball, 2000: 4). As we will see in our analysis, permanent rankings can create permanent marks. Rather than academics competing against each other, there is need to care for both ourselves and other scholars with dignity and respect and have some 'ontological empathy' for each other's being (Prasad, 2013).

Space given to speaking about emotions in higher education literature often focuses on the emotional lives of students (Eisenberg at al., 2013; Woods, 2010) whom academics are expected to care for, rather than considering who might care for academics. Following UK increases in tuition fees, it is clear there is greater pressure to build closer relationships with students for all University staff (Chory and Offstein, 2016), with women taking on a disproportionate amount of the 'domestic', pastoral and care work of Universities (Lynch, 2010). Students' voices are prioritized and especially their expectations of staff (Wong and Chiu, 2017). There is a sense that students' wellbeing is disconnected from an academic's, perhaps a consequence of a neoliberalist agenda that prioritizes students as consumers, pitching students and staff against one another with little interconnection of feelings. If the root, and/or intensification of wellbeing problems is the sickness of the higher education system, then everyone, staff and students will be affected in interconnected ways.

There have been a few recent moving academic self-disclosures within formal academic outlets. Chowdhury (2017) has spoken about his depression encountered when talking to victims of the Rana Plaza disaster whom he felt helpless towards. Prasad's (2013)

work has specifically highlighted the emotional challenges of being a doctoral student and focuses on how institutional pressures become discursively codified. We applaud the courage, risks, and strength of these disclosures. We also question - what about when unwellness permeates every part of our job? Do we have formal academic outlets that will recognize the day-to-day struggles – the micro-experiences which could be hidden, yet also the defining moment breaking wellbeing and potentially departure from the academy? And what if these experiences begin from our doctoral days, into our first permanent (not an insignificant word these days) post, and reside within us for the rest of our time as academics? Research suggests that there are possibilities of resistance:

> Constructing a CMS ECA identity [Critical Management Studies Early Career Academic]– today necessitates perennial, contingent and highly nuanced work of resistance and compliance that continuously calls for creativity, inventiveness, courage, political astuteness and reflexivity as an integral part of the role of this group of academics within the management studies field (Bristow et al., 2017: 1187).

Robinson et al., (2017: 496) have also found that CMS ECA have developed an ability to read, resist and play such demands. Ashcraft's (2017: 43) point about the tensions between the individual and collective structures is crucial, especially if placed alongside the context of wellbeing:

> Read together [neoliberal academia], the tales imply that there is a nefarious public system out there demanding collective resistance, yet we are too trapped in its private webs to rise up and join the fight. In this battle of structure versus agency, the right

side of the dualism may rouse human empathy, but the left side is trending toward victory.

We need to stop these trends.

Our specific aim herein is therefore to understand how UK academics experience their health and wellbeing in response to the pressures and beliefs surrounding today's higher education environment. We centre embodied responses like hurt and regret, which may be discussed in the context of diagnosed mental health conditions. We work toward breaking taboos about scholars expressing pain and vulnerability, to support healthier environments for staff and the students and groups that they serve, including communities in which Universities are embedded.

Some academics are careerist and climb the rungs of the University managerial ladder, indifferent to collective concerns. Yet many academics have a deep affection and love for their work as scholars (Clarke et al., 2012). Herein we would like to hope for, perhaps dream about an open, caring and non-hostile space of relational concern that rekindles our love for pedagogical pleasure, learning and being as academics (Bell and Sinclair, 2014). We explicitly bring wellbeing struggles into journal space and invite our audience to read empathetically – staying with the experiences shared, trying to prevent jumping into 'but it's capitalism that's making us ill… but it's the structures…' Yes indeed, it may be… but let's be with and show presence with the depth of the emotional struggle.

If any of the experiences resonate, as they may well for some readers of this journal, we hope we will have provided a small space for relation and connection, for sharing, for learning. As 'academic' or 'scholarly' as we become – we are always human. As we present individuals' accounts, we move towards an empathy that embraces embodied forms of

struggle, recognizes self-harm, and considers the implications for organizing wellbeing in the academy in the future.

The fluttering of the heart with anxiety, the tears of pain, 'physical' illness resulting from emotional distress – physical deliberately in quotes, as the separation of physical and emotional is an illusion (e.g. Damasio, 2000) – these embodied moments, traumas, waves of distress are not experienced by structures. These struggles do not disappear through intellectualization with a sophisticated focus on discourses. Intellectualization is a defence mechanism explained by Anna Freud (1992), in which anxieties are met with cognitive strategies, cleaving away the intense emotions of the topic, to ease facing hurt triggered by these anxieties. Intellectualization as a defence mechanism, like other defences, may serve its purpose for some time periods and contexts but ultimately is a temporary solution. As scholars, our collective over-reliance on intellectualization may shield us from confronting directly the emotional pains experienced by us and/or our colleagues. However much our suffering may be explained by political contexts and discourses, we cannot sidestep the *lived experiences* of these macro-processes, felt at the level of the body. We could notice when someone has been crying, does not appear to have slept well or is visibly shaking. We thus call out collective intellectualization – a defence readily drawn upon, suitable as it is to the performativity of knowledge work in response to academic expectations. However, its overuse in defending against our anxieties eclipses us facing our embodied troubles, the crying out, the shatterings that are swept away through analyses conducted on high.

Our approach taken

We now proceed with an analysis of neoliberal academic life, moving from intellectualized analyses on high to a grounded, intimately connected approach, by sharing blogs and news articles by individuals that discuss mental health and/ or refer to emotional struggle. We have

included texts posted since 2012, a turning point in the neoliberalism of Higher Education in the UK when tuition fees rose from circa £3000 per annum (pa) to £9000 pa. A detrimental outcome has been a potential negative effect on academics' wellbeing, as they are expected to provide students with more teaching and support without necessarily receiving more time to do so in their workload allocation. Increased instrumentality and undermining the value of learning are also changes from fee regimes that may affect academics' wellbeing, through damaging our sense of purpose.

Our material has been retrieved online using key terms such as 'academics' and 'mental health' and 'wellbeing', being mindful of the debates we have outlined earlier regarding the use of such terms. In the majority, our data has been drawn from sites that include anonymously written material by UK academics *for* other academics, sharing their experiences and tribulations of working in higher education. We have included academics' accounts from all disciplines, because our primary concern is learning from the embodied, micro-level experience in interaction with these neoliberalising discourses. The fundamental similarity of the sources we have included is that they all disclose individual struggle in the public domain. The general methodological, epistemological and moral-political difficulties in researching emotion in organizational settings and particularly with methods such as interviews are long-standing (Sturdy, 2003). However, we believe the value of using widely available online data carries several noteworthy benefits interconnected with our paper aims.

Online data has allowed us a broad landscape of research and expanded dialogue across time and space, which helps to convey the severity of problems experienced in connection with academia. Whilst we would like to consider academic life through the widest possible experiences, ranging from struggles of emotional health to the joys of our successes and fulfilling moments, the focus herein is upon these accounts which help to surface pain of struggles in an embodied way. These excerpts are publicly available, and thus we hope that at

the time of posting, individuals were comfortable with their stories being shared once more. However, we cannot assume this, and thus anonymity without the individual's name or web link offers some privacy, an approach shared with recent online research (Sugiura et al., 2017). We hope that we have cared for these accounts as part of being in the world, and in our roles as researchers, we use our analysis of individuals' stories to propose ideas for 'what can we do' about this crisis and effect change. We have approached these disclosures with the same care towards individuals and analytical rigour as we would any other qualitative sharing of experience, and therefore present them *ad verbatim* from their online original form.

As many accounts were already published anonymously, it has compromised presenting a detailed profile regarding age, gender, nationality, and ethnicity. We recognise that social inequalities affect the experience at the individual level, and we have committed to including some examples when writers have disclosed these experiences. As we explored and chose excerpts to include, we have selected those stories which we understand as connecting to the academic community and resonating with others' experience. Where possible we have also selected academics at a range of career stages - early career, mid-career and senior academics performing varying amounts of teaching, research and administration. As we read through these various texts, we considered these individuals' experiences within the neoliberal context. We have also acknowledged that emotion can be expressed through the body (Sturdy, 2003). Specifically, when individuals mentioned the visible, visceral dynamics of health as expressed through their bodies, these dynamics could be a way of understanding the interplay between their selves and academia.

When conducting our analysis, it was clear that there were several key themes coming out of individuals' accounts, illustrating how they described their pain and problems, who they blamed, and how they tried to self-manage and endure struggles. We have therefore pieced together a selection of individuals' accounts producing an overall narrative that we

think reflects the cumulative and spiraling accounts of despair, at an individual level situated within the higher education setting. We continue to write differently (Gilmore et al., 2019), as part of our aim is to challenge journal writing boundaries by purposely allowing individuals' accounts to speak for themselves. We hope to have created a piece of text and space that shatters the stigma of talking about academics' emotional struggles, avoids labels, and centres academics' articulation of their own struggles and expressions.

Narratives from academics' individual experience…

Disclosures of suffering

> Unsuccessful applications, combined with a perceived lack of productivity since my PhD, have resulted in an overall sense of failure. In a highly competitive field, with its discourse of overworked overachievers who need to be doing all the things all the time, I feel deeply inadequate, and this is also tied in with guilt: I feel I have not succeeded at many of the things I've attempted because I am not good enough, and not attempted as much as I should have, because I am lazy and cowardly…with depression, and with academia, there is no such thing as enough (Anonymous academic, A).

> I'd always feel a modicum of tension before such occasions (teaching a class for the first time) but today was different: my nervousness was so palpable it felt almost beyond control. I had heat rash running up my arms and was struggling to breath. I seemed to have lost my depth perception, as though in the worse stages of drunkenness (Anonymous academic, B).

Left to my own devices and allowed to work at my own pace I could pick through them, prioritise them [tasks]. Instead I feel myself panicking in a ridiculous game of whack-a-deadline… and through all this, I'm scared. That my "enough" is not enough. That I'm not enough – not as clever, not as productive, not as brilliant as my contemporaries… I'm scared that my current workload is unsustainable and that I'll either be hurled or stumble or slip into that cold, despairing place again (Anonymous academic, K).

I have chosen not to disclose the diagnosis and for many years I have hidden the symptoms. They are masked, veiled, denied by me – because being depressed is incompatible with the identity of an academic (Anonymous academic, F).

It's hard to admit it even now, but I was suicidal (a few years ago)…I was written off for month after month. Arrangements were made for temporary cover and a new colleague was brought in on a fixed-term contract to replace me. My teaching and administration were covered. Luckily, my research was in a phase where I was meant to be writing and the only loser was me. This all sounds very supportive, but I was in for a shock when I came back to work. It was made abundantly clear that I had lost the confidence of my line management...I was tarnished: I was perceived as a malingerer taking time out at the University's expense. I was told that the bottom line was the unit's budget, and that it didn't balance because of me. Mental illness had no place in this University workplace. I was an unprofitable inconvenience (Anonymous academic, G).

Social inequalities, stigmas, gendered health, and historically-oppressive systems

I learned first-hand that disappointment is best case scenario. Many leave with mental health problems, trauma and PTSD [Post-traumatic stress disorder], anxiety and depression, etc. Academia is a violent place for people of color and other marginalized folk (Anonymous academic, O).

As a female academic with depression, I am sure that my experience is quite different from a man's. The stereotype of the hysterical, screaming, emotionally unstable woman rears its head. Being from an immigrant background adds a further layer of difference. There are fears of being an outcast in your own community if word gets out. This, coupled with the lack of therapeutic communities at work and the outsourcing of counselling support for staff to third-party, for-profit, efficiency-led "assistance packages" all means that it is becoming increasingly impossible to "come out" as depressed (Anonymous academic, P).

The perspectives of university leaders on how to relieve the pressure on young academics are often all-too removed from the first-hand experiences of those at the bottom who are most vulnerable to systemic problems: those with chronic mental health problems and physical disabilities, women, BAME [Black and Minority Ethnic] academics, and those whose economic status does not provide them with a financial security net (Anonymous academic, Q).

Another issue was that I felt I didn't have the right to be stressed… I also had always been fiercely independent, not wishing to rely on anyone else, perhaps

because of my upbringing or the stereotypical enactments of masculine bravado (Anonymous academic, B).

Themes of hiding

The kind of generalized anxiety disorder that I suffer from means I get panic attacks (and semi-attacks) that can hit me at an time, whether I'm giving a talk, reading in my office, trying to meet an admin deadline, trying to have a really solid think about something, trying to relax at home…just whenever. They're never so bad that I actually have to stop giving a talk or lecture, but they'll sometimes cause me to end one early, or mean that I have to continue on a sort of autopilot, working around the distraction and giving a less competent performance (Anonymous academic, L).

I would present a smiling confident face to my colleagues, aiming to ensure they saw me as competent, as organized, as productive, as responsible. I smiled, I chatted. I conveyed (I hoped authority). And then I would close my office door, curl up in the corner, and cry silently, only to get up again and present a competent self. Day after day this would happen …I get up, I wash and dress, I have breakfast – something resembling breakfast. I put on the mask and perform the competent academic and adult. Inside, though, I am dissolving. Each moment it is harder to maintain this fiction of calmness, of 'togetherness'… I am caught between anxiety and normality (Anonymous academic, D).

I try my best to be the very opposite of what depressed people are. I become the funniest, the smiliest and the most supportive colleague at work…but if was to speak my truth, it would have been to tell her (a colleague) that I was probably the darkest and saddest of her colleagues (Anonymous academic, F).

In all that time (30 years as an academic), as far as I can remember, I never took a day off sick directly due to my condition. Sometimes I hunkered down at home and worked there instead, and I was lucky to be able to do so. Sitting at my desk, I would try and get on as best as I could, with my black dog resting his head on my lap. I wanted normality, whatever that was. What I didn't want was the feeling of defeat, or colleagues seeing me as a failure. For those who know me and don't know what I've been through over the past 20 years, it's probably surprising to find out that I have had problems with suicidal thoughts, panic attacks and depression. Don't worry, I am no danger to anyone else, and I'm not planning to throw myself off a bridge at any point soon. I may, at some point in the past, have considered it, but many of us have at some point given thought to ending it all (Anonymous academic, M).

Pains and struggles hidden within privileged positions and success

The year before last, so overwhelmed with the sense that I was drowning I attempted to take my own life. Had the ligature I placed around my neck not broken it would all be over. I have told no one about it and no one suspects anything is or was wrong. In truth I have tenure, several books (over 10) and have been successful in generating significant grant income, yet none of this

seems to be enough for the institution. Every week I feel scrutinized, judged and then told to do more (Anonymous academic, C).

I thought for a long time before proposing this blog post. I thought, because my depression hasn't been a bar to my achievement. I've never been bedridden or kept from working by it, despite sometimes constant thoughts in that direction I've never attempted suicide, and I only self-harm very occasionally, my anxiety triggers are largely avoidable and I currently feel relatively OK (thanks, pharmaceutical industry!), it might come across as a bit whiny and unworthy in comparison to the experiences of those with 'real problems' (Anonymous academic, H).

I continue to try to accept that whatever one's mental condition, it is really difficult to maintain the motivation to research independently and look for jobs in an overcrowded field, and that I should value what I have managed to achieve, not berate myself for what I haven't (Anonymous academic, A).

Ongoing struggles

When it gets louder, I take strength from knowing that while I'll probably never beat my anxiety, I can at least manage it (Anonymous academic, I).

I use student-centered approaches, interactive sessions, handouts, powerpoint presentations to take the pressure off and get them concentrating on something other than me. I planned sessions for several months ahead, so I could garner myself some security for when I knew I may feel unwell… I approached my

treatment as if it were a mini research project: uncovering, tweaking, and testing variables, and observing the effects of the interventions of my mind and mood (Anonymous academic, J).

Seeking support

There are things I try to do: I try to eat healthily, have cut down on alcohol, try not to have drifting, unfocused days spent in my dressing gown, I try to stay in touch with friends, people who will soothe me with mugs of tea and kind words and let me be fretful or silent at them (Anonymous academic, K).

Knowledge is power and we are in the knowledge business so ensure you spend as much time researching your condition as you would a conference paper!...Seek help. What help you need is subjective (for some it is friends, some medication, others the gym), but it is vital to be able to survive the tough world of academia (Anonymous academic, P).

A few months after coming off the drugs completely I was barely managing to function normally, couldn't remember the last time I had a day without crying, and accepted that I needed to go back on sertraline. There comes a point – hopefully sooner rather than later, perhaps when you've finished reading this post – that you must change your thinking about yourself and your work. The sooner you learn to be happy with yourself – your flaws, your quirks, your strengths – the sooner you will become the researcher that you've always aspired to be but have always felt like you may never become (Anonymous academic, A).

Struggles of the body

> Self-harm was my main coping mechanism and the only one that worked... I
> self-harmed before starting because that was the only way I could get the
> words to flow. I self-harmed while I wrote because that was the only way I
> could keep on going. I self-harmed after I finished the chapter because I was
> terrified my work wasn't good enough (Anonymous academic, N).

> During severe depression, the body and the brain can disconnect, and as mine
> severed I found myself lying still for ten, fifteen hours, sometimes longer. I
> was plagued by suicidal thoughts, seeing methods everywhere, the bathtub I
> could drown in, the tree branch outside my room I could hang from, the knives
> I could use to put an end to all this sudden misery. I was put on different
> medications, in and out of hospital; I started self-harming, wrote suicide notes
> and took too many pills (Anonymous academic, E).

We end with the tragedy of Professor Stefan Grimm (2014), who committed suicide
because of being put on performance management after not securing enough funding. His
note that follows demonstrates how emotional struggles can sometimes escalate to fatality:

> On May 30th '13 my boss, came into my office together with his PA and
> asked me what grants I had. After I enumerated them I was told that this was
> not enough and that I had to leave the College within one year – "max" as he
> said. He made it clear that he was acting on behalf of Prof Gavin Screaton, the
> then head of the Department of Medicine, and told me that I would have a
> meeting with him soon to be sacked. In March '14 I then received the

ultimatum email below. 200,000 pounds' research income every year is required. Very interesting. I was never informed about this before and cannot remember that this is part of my contract with the College. Our 135,000 pounds from the University of Dammam? Doesn't count. I have to say that it was a lovely situation to submit grant applications for your own survival with such a deadline. We all know what a lottery grant applications are. There was talk that the Department had accepted to be in debt for some time and would compensate this through more teaching. So, I thought that I would survive. What these guys don't know is that they destroy lives. Well, they certainly destroyed mine. We had four papers with original data this year so far. I was also the editor of a book and wrote two reviews. Doesn't count. This leads to an interesting spin to the old saying "publish or perish". Here it is "publish and perish". Was I perhaps too lazy? My boss smugly told me that I was actually the one Professor on the whole campus who had submitted the highest number of grant applications. Well, they were probably simply not good enough.

Discussion: Organizing and caring for academics

The accounts we have presented in our paper uncover the violent effects of neoliberal academia on academics' wellness, operating in ostensibly disembodied terms by incorporating targets, numbers, assessments, cost-benefit analyses. They are rational and disembodied on the surface, but they are making us sick. There is an endemic culture of shame around our wellness, and many of the academics we have included responded to the deliberations, strategies, and obligations of their work by self-managing and hiding difficulties. Addressing the violence of academia requires discussing directly these embodied experiences, changing Higher Education institutional structures, reflecting on our relational

capacities, and organizing solidarity at work, with love. We work in a highly masculinized, brash, and competitive environment that currently offers little space for cooperation or pastoral care. It imposes emotion rules (Hochschild, 2003), but these are far from indicative of a healthy, happy and well individual. Individuals attempt to take control of their health alone (outside of professional medical help), self-diagnosing, self-medicating and deciding on the best course of action, entangled with the notion that they are "experts" who should not ask for help (Elraz, 2017). We are thus confronting a rhetoric of "self-care", reinforcing that our difficulties and emotional struggles arise from our failure to manage our work and careers responsibly and efficiently. Our biggest concern remains the silence around these struggles: the way many individuals suggest they function yet remain hidden in pain. Care must not be about the individual failing, falling and fixing themselves.

There is tension in making practical recommendations as researchers in an explicitly critical journal, yet it is important to begin searching for ways to address the wellbeing crisis in academia. Taking heed from Contu's (2018) ideas on 'intellectual activism' – we feel we should 'walk the talk' and consider how our academic praxis and critical discussion of the neoliberal academy may offer alternative practices and ways of being. Crucially, it is not only about critical activism for others, but also for ourselves, for what we can offer in service of others is compromised if we remain ill.

Ideally, we would be able to provide answers and imaginative ways to address the institutional structures that cause us so much pain and change them so that managers are willing to challenge existing performative discourses fixated on careerist self-interest. With regard to individual struggles of wellbeing, we do not have medical expertise, and it is not our place to make prescriptive statements. Instead, our aim in this part is to lead from published disclosures, to provide some practical suggestions about 'What can be done?' that we as academics (and our readers) can move toward, for alternative ways to care for

ourselves and our community. Enacting these will not be easy. Honouring personal and professional values in a neoliberalized environment is rarely comfortable, with structures antithetical to caring. Change will also be challenging as every experience is unique and deeply personal. A first step is inspired by extracts such as this one:

> So what can we, or anyone, do? The first step is clear: we need more good quality (anonymous) research to get a grasp of how pervasive a problem this really is and evaluate the support in place. Maybe shining a light on the situation this way, the wall of silence will start to fall down and we can set about making positive changes… There's us – individuals working in academia…If the first time we become aware that a colleague is deeply unwell is when they are forced to take time off, we're surely missing something (Anonymous academic, R).

We must start with *noticing* and *acknowledging* suffering, followed by organizing that willingly cultivates a safe, fair environment where mental health and wellbeing can be spoken about proactively. Mental health awareness and training should be provided for all University staff, and tailored to the higher education setting, considering the job, its tasks, challenges and milestones. Acts of compassion can also be sporadic and without formal direction and thus we should create spaces that enable connections and relationships outside of rigid hierarchies (Madden et al., 2012). We need to create, organize and advertise shared spaces, perhaps like world cafes, where we can come together and understand that seeking support in academia is normal and encouraged. Such spaces should be open to all, not just those who self-identify with an illness.

The insular nature of mental health and wellbeing make it inherently difficult to change, but we can't continually ignore deafening whispers crying for help. We need to ask about each other, listen to that person's answer and ask again if needed. Disclosure of emotional struggles may paint the impression of faltering performance, which must be returned to the required level of outputs. We must create an academia where disclosures instead lead to care and collective reflection. The expectation or pressure of self-care evidently provides a ripe environment for breeding the already internalized harrowing negativity, with devastating consequences for day-to-day struggle, and in some cases, finality of life. The effectiveness of this self-care approach as a coping mechanism is terrifying; some individuals become more than adept at deploying these strategies in relative silence, and organizational and structural ills remain unchanged whilst suffering continues. We need to call out and 'name and shame' specific institutions when we learn and hear of indifference to suffering, and we need to do that collectively, including with possible union support.

Institutional power-holders need to step up and practice inclusion, an avowed aim in higher education discourse, starting from recruitment:

> What are the particular barriers raised for persons who may not perform best
> in heavily social environments like interviews and campus visits? And what
> are those barriers costing all of us — all of us in academe? (Anonymous
> academic, S).

We need to listen to friends and colleagues who have left, from formal exit interviews to published disclosures like this one:

> Loss often involves a lot of self-blame, shame, second-guessing and

endless asking why and what's wrong with us and why the fuck are

we never good enough anyways? (Anonymous academic, V).

The shaming in academia leaves institutional violence intact. Those in power can step up and imagine different modes of knowledge production. Criticality and intellectual rigor are possible without shaming. See for instance Gabriel (2009).

Narrow assessments of scholarship and unchecked bullying must end, as demonstrated by experiences such as these:

There began a period of what I now with hindsight see as bullying. It didn't seem to matter what I said or did, but it was wrong and I was continually called to account…Every suggestion I made about new initiatives or new directions was dismissed. I felt completely de-skilled and robbed of the professional pride I have always taken in my work. It was very damaging for my hard-fought for recovery. Stigma cast a very long shadow over my professional life.…much of my academic practice was negated, rendered negative or simply invisible... (Anonymous academic, T).

The way valued research is equated with grant capture, that is how knowledge is reduced to money. If our value is measured less in terms of the quality of our teaching and the way we work with knowledge, and more in terms of grant capture, can we really say we are engaged in academic activity? (Anonymous academic, U).

Workload models may provide spaces for reflection and potential change, decentring metrics and committing to individual strengths for contributing to knowledge and our communities. We advocate that they need to be relative to each person's experiences, abilities and wellness. Competitive logics must stop. We must firmly help ourselves by raising our finger and learn to say, 'that would likely be too much for me', before it is too much. We need to treat individuals as individuals, play to their strengths and support them in becoming the best judge of their abilities. As such, mental health must be interweaved into any discussion that assesses academics' performance, including probation and promotion decisions. The best approach would be proactive whereby we talk about what would enable that individual to thrive and maintain wellness.

Our piece has hopefully made some small inroads into talking about mental health, emotional health, struggles of pain in academia. Emotional pain does not discriminate. It can happen to any of us. We recognize that specific individual struggles are gendered, racialized, classed, in connection with institutional and societal discrimination. We call for more critical studies which connect individual voices and embodied struggles across geographic locations. We are aware that the wellbeing of Professional Services staff in academia, doctoral students, and colleagues in precarious posts need separate space for study, to learn from their experiences and transform structures toward justice.

Academics continue to speak out, often anonymously, and disclose emotional, mental health struggles. We honour these disclosures, and we need to do these colleagues and ourselves justice by taking responsible action, to ensure wellness. Clearly academics' health beliefs are connected to wider social discourses of academia that influence how we think, and how we feel we ought to think. Threats to life, to longevity, to experiencing peace and happiness, torturous experiences hindering a person's ability to seek help - we need to talk about these moments of pain more.

If not now, when?

As shared in a disclosure –

Surely, in an academic world concerned with knowledge and justice, there must be a solution beyond "Suck it up and deal." It's not just those with mental disabilities who need this; we all need this (Anonymous academic, S).

…. But who is listening?

And, who cares?

Acknowledgement

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