ANT497

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Wellness Welded: The Assemblage for Health & Wellness at the University of Toronto

My conscious engagement with wellness programs at the University of Toronto began in September, 2015 – in my fifth and final year as an undergraduate student, and only in order to conduct the research I present here. I am one of many students who was not going to wellness classes, attending MoveU activities, or workshops on managing stress. This was my first encounter with this dimension of campus life, which I'd managed to avoid entirely during my four previous years at the University.

Before entering the field, like any researcher, I had a certain number of assumptions, some conscious, some unconscious. One assumption was that wellness programming at the university was going to be organized, centrally controlled, and have a clear power structure. This assumption was enforced by a discussion with classmates working in Student Life. I learned from them that Health and Wellness is a new division of Student Life which encompasses all pre-existing mental health and physical health programming on campus. I also learned that there is a document, referred to colloquially as The Framework (its official title is the unwieldy "Report of the Provostial Advisory Committee on Student Mental Health"). As I understood it, The

Framework is meant to guide the strategy of Health and Wellness across the entire campus. So, I expected to find a program prescribing coherent treatment stemming from a central, authoritative document. However, while attending a series of Hart House Weekly Wellness classes as part of my fieldwork, I experienced the opposite.

What I encountered were three different aetiologies for why I might be unwell. These aetiologies were symptomatic of disparate (thought not necessarily competing) modes of discourse. In the Mindfulness Meditation classes, I was told that I might naturally be stressed. In Shiatsu Massage Monday, I was given behavioural explanations for perceived physical ailments. In Get Crafty Thursday, I was asked to disengage with electronic technologies,framed as a social determinant of an unspecified modern unwellness, and focus on paper and glue. These are not superficial differences, but fundamentally disparities in how mental wellness is discussed and conceptualized.

How is this deep incoherence justified by central planners? It was one of many moments throughout my fieldwork where I realized that the web of programs, treatments, plans, and actors that I was researching far exceeded the simplistic formulation of coherence I expected to encounter. In response to this issue, I have turned to the concept of assemblage as an tool for analysis of these separate but interconnected parts. My paper is a presentation of my research, analyzed through this lens. My central argument is that the dispersed nature of the assemblage allows for the creation of multiple subject types.

In addition to the assemblage, my analysis uses the concept of *governmentality*, wherein "forms of action and relations of power… aim to guide and shape (rather than force, control, or dominate) the actions of others" (Cruikshank 1999:4). I am concerned with how governmentality functions within the assemblage – how individuals and objects guide each other in the context of

campus mental health initiatives. I am also concerned with the types of subjects the assemblage seeks to produce, the technologies which enact this production, and how these subjects reproduce the assemblage.

Focus and Methods

In describing my methods, I should begin by stating what this paper is not. This paper is not an evaluation of the efficacy of the programs I encountered – at least their efficacy in alleviating anxiety or treating mental illness. I did not engage with students as subjects of care. I did not measure the effects of mindfulness meditation or any other treatment, despite engaging in it myself. As well, this paper is not a critique of any particular mental health practice or ideology. The literature I have used is about power and assemblage rather than mental health.

I am interested in how programs are linked together, rather than the exact content of the programs themselves (although I have been aware and mindful of the content). My focus is, ultimately on power and how it operates through a wide, dispersed assemblage. My methodologies reflect this, as I have focused on the techniques of assemblage and those who practice them.

Much of my research was participant observation. As mentioned, I attended Weekly Wellness classes and activities at Hart House, visiting each activity at least once. In particular, I went to the Mindfulness Meditation class for several weeks over the course of the semester. I attended these classes as a normal participant would, not speaking unless called upon. I also attended two special events. The first was MindFest, a "mental health fair" at Hart House, which took place in October. The second was Minding our Minds, a mental health conference held by

Victoria University. At these events, I attended a handful of lectures and presentations, taking notes about the speakers and audience.

I conducted interviews – some formal, and some less so. I only formally interviewed three people, all administrators. Other interviewees were encountered on a more informal basis. Paying attention to the micro-practices of assemblage made smaller interactions valuable objects of analysis throughout my research.

Finally, I have also made use of some document analysis – particularly The Framework, but also brochures and leaflets from the various classes and events I attended. Following Latour (2005), I consider objects as potential actants, and treat them as such. I consider the material artifacts I have encountered both in form and content, dimension and placement. This extends beyond paper documents to online forms, as well.

Assemblage

The assemblage is a powerful concept for grounding our analysis of seemingly scattered individuals that are not organized into a clear hierarchy, and might be members of completely different groups, whose interests might align only momentarily, or conditionally. The assemblage is, fundamentally, a set of parties who cooperate to complete shared goals. Tania Li (2007), describes the following practices as generic to the assemblage:

"1) Forging alignments: the work of linking together the objectives of the various parties to an assemblage, both those who aspire to govern conduct and those whose conduct is to be conducted.

2) Rendering technical: extracting from the messiness of the social world, with all the processes that run though it, a set of relations that can be formulated as a diagram in which problem (a)

plus intervention (b) will produce (c), a beneficial result.6

3) Authorizing knowledge: specifying the requisite body of knowledge; confirming enabling assumptions; containing critiques.

4) Managing failures and contradictions: presenting failure as the outcome of rectifiable deficiencies; smoothing out contradictions so that they seem superficial rather than fundamental; devising compromises.

5) Anti-politics: reposing political questions as matters of technique; closing down debate about how and what to govern and the distributive effects of particular arrangements by reference to expertise; encouraging citizens to engage in debate while limiting the agenda.

6) Reassembling : grafting on new elements and reworking old ones; deploying existing discourses to new ends; transposing the meanings of key terms."

My analysis is informed by these foundational practices, especially forging alignments, rendering technical, and managing failures and contradictions.

Assemblages are messy (especially in large ones like the one I am analyzing) work to align parties is essential. At events, I realized that there was not a single, central hub which coordinated everything. Mindfest, Minding Our Minds, and Exam De-Stressors are all run by different groups. Endorsements and cooperation were common between organizations and institutions. Hart House hosted Mindfest, which was developed by the Department of Psychology. At this event, there were separate booths for each University of Toronto Wellness group: MoveU, Weekly Wellness, Health and Wellness, the Jack Project, and many others. There were also booths for the Ontario College of Art and Design Univeristy and Ryerson University, both partnered with the University of Toronto for the event.

The sprawling and complex nature of the assemblage made ground level investigations

interesting. At first I thought Weekly Wellness was an initiative by the Health and Wellness Centre. Then I saw the MoveU logo on its leaflets, and had to reassess my understanding of the program's place in the network. I met people who were unsure about their exact place in the larger Health and Wellness schemes. During fieldwork I was surprised, again and again, by how scattered these things were. I now perceive the university as dispersed and involving many actors who might not be following the same plans.

Though I did not attend internal meetings by administrators, I was given information about how they work. Administrators from across the campus, but especially those from Health and Wellness Centre, Hart House, and the Faculty of Kinesiology and Physical Education (KPE), meet to discuss strategy and programming on a regular basis. Strategies are coordinated, and programs are implemented, altered, and rebranded. The most important thing, however, is that the many parties are aligned. The Health and Wellness Centre and Hart House are brought together for a common goal – although they are separate institutions, they cooperate, and align with one another.

Even in the most central document behind Health and Wellness, we see this lack of authority. The Framework does not give orders – it gives twenty-two *recommendations.* It functions as a rallying point for discussion (such as at Minding our Minds, and meetings between administrators), but it does not entail the type of authoritative power which a law might. It is unenforceable, and unaccountable. It is governmentality in the purest sense, guiding action rather than forcing it.

In an interview with an administrator from Health and Wellness, I mentioned a wellness program run at Victoria University in a passing comment. This comment was met with an ambivalent reaction from the administrator. He, like another administrator I spoke to, believed

that there are pros and cons which must be weighed when programs are decentralized and scattered. An issue with scattered planning which occurs in an assemblage is that the practices could come into conflict, or overlap. These are problems which are supposed to be resolved through communication. The Framework recommends "coordination" amongst the many parties in the assemblage, and if it is lacking, we end up with duplicate programs.

However, there are strengths to the scattered assemblage. The administrator told me that he believed students would be likely to experience a sort of comfort with locally provided services (e.g. a counsellor in a dorm). As well, the health care provider who understands the local community (in a school as large as U of T) is better able to tailor efforts to the needs of individuals.

Techniques of alignment

Individuals and groups working within the assemblage might have a number of different goals and a wide variety of techniques to meet them. Li (2007a) argues that a common practice in any assemblage is the *forging of alignments* - " the work of linking together the objectives of the various parties to an assemblage, both those who aspire to govern conduct and those whose conduct is to be conducted" (265).

At the Hub, the front desk at Hart House, my inquiries about Weekly Wellness were met with information not just about those programs, but about all the types of activities available in the building. In interviews, there was a blending between the types of services offered

At the Weekly Wellness activities, participants are offered leaflets and pamphlets for a wide range of activities. Here, we see how another field of power operates both inside and out of the assemblage. The leaflet is a form of document which calls for action. The individual is

directed by the leaflet to another location and time. Within Hart House, leaflets were available at most activities, the front desk, and MindFest, and all relayed to other activities. These leaflets suggest participation not only within the confines of Hart House but activities in linked institutions, like the Shiatsu company which services Massage Mondays, or the meditation school which services Mindfulness Wednesdays. What the leaflets do is create a glue of assemblage. Spatial dispersal and temporal constraint is mitigated through the work of these documents. Its power is not to be underestimated. The leaflet directs the individual, temporally and spatially, influencing action. The leaflet calls us into the assemblage.

I also encountered differences that appeared "vertically". A higher-level administrator used an the language of public health and administration, like that of the Framework. A mid-tier administrator at Hart House invoked national heritage as being a driving force in wellness efforts, citing stewardship as part of that, and providing wellness programming as being one subset of stewardship for the students. An overriding message was that Hart House's heritage, including "documents" like the building's Founders' Pledge, remains important in its operation today. Its cooperation with new plans such as The Framework are conditional and secondary to these grander values and responsibilities. As I have mentioned in the introduction of this paper, individual wellness workers are using varying discourses which point to similar but ultimately differing goals. The job of administration is to pull these goals together into a common goal, aided through the aforementioned practice of rendering technical. By rendering technical, we are met with the following equation:

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Problem a), mental health/wellness crisis in population, met with solution b),
Wellness programming (in all its forms), results in solution c), "Resilient
students" and "healthy campus" (common terms in the wellness discourse
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I've been immersed in). The original problem is clearly not agreed upon universally, but is framed as such. As well, the programming is also not unified, but efforts like The Framework attempt to categorize and rationalize - and to a degree *centralize* - dozens of programs which came about at many different times in many different places, without central planning, and based on a wide range of rationales. When one talks about as broad a goal as wellness for the populace, and as broad a solution as wellness programming, one can smooth over these inconsistencies (another general practice of assemblage).

On the ground level of assemblage, alignment of individual actors is not always effective. I was not aware of or interested in these programs for years, along with thousands of others students. Indeed, failures to align exist, and not just for students outside of the assemblage's purview. After seeing a Hart House gym employee wearing the MoveU logo on their shirt, I asked them if they would be willing to speak about the program which I assumed they were a part of. They responded that they didn't know enough about MoveU to speak about it - they weren't *really* MoveU.

Apparently, one day they had been given a new shirt, and no explanation of what this meant. I spoke to a Hart House employee who told me she had not been informed of what MoveU actually is. To what extent can we say the employee is a member of the assemblage? They have been rebranded without warning, were never given information about what their new brand actually means, and are skeptical about there being any real change whatsoever. I think that the individual's own skepticism, when they told me that they weren't part of "the *real*

MoveU" can be taken at face value. Similarly, in a casual conversation with a volunteer working at a Weekly Wellness activity, it became clear that they were not aware that they were supposedly part of Health and Wellness. Can we really say that someone who isn't aware of the other actors in assemblage is actually a part of it? I might consider these limit cases – it seems that enrolment which exists only in name cannot be effective in successfully aligning an activity or group. Being in the assemblage entails a shared objective, acknowledgement and knowledge of others parties, and willingness to cooperate with those parties.

Another technique of alignment is responsibilization. It was brought up in an interview with an administrator that there must be a *shared* responsibility between student and school. While in the past, focus was on the student to improve their well-being (through the meeting of certain quotas for hours slept or vegetables eaten in a day), there is a shift to the responsibility of staff to recognize when a student should be enrolled into the assemblage. The new, though partial staff-responsibility for the student has two implications. The self-governance of the students is presupposed to be imperfect – they cannot be trusted to seek out appropriate resources correctly without instruction, but once they receive it, they should act accordingly. Students are still responsible for their own well-being to a point – which is never codified, but is based on common sense knowledge that no person other than themselves can enforce certain behaviours (like sleeping pattern and diet).

Responsibility was raised in a different interview with the same administrator. They pointed out that there is no accountability between teaching staff and Health and Wellness. A professor is under no obligation to report unwell students to the Health and Wellness Centre. It is expected, however, that the professor would do so out of their own good will. There is a type of soft power in a system of morality where what is perceived to be natural - helping those in need -

is organized. The rational technologies of governance here only enhance that good will. Faculty are asked to adopt systems endorsed by Health and Wellness, and students are asked to participate with sincerity. So, we have a situation where there can be no official means of accounting for individual behaviour or failure to participate. People are not to do as they are ordered, but "following their own self-interest, to do as they ought" (James C Scott, in Li 2007a:275).

This is described in The Framework as a Systems Approach – where "every member of our community – staff, faculty and students – as an agent in changing the dialogue around student mental health…" (Provostial Committee 2014:25). Li (2007b) demonstrates that shared responsibility for an impending crisis can be one method for forging alignment. The Framework presents a growing crisis of mental health - on the one hand a "natural" (11) part of the student experience, yet still "linked to a host of factors, including biological, developmental, social, cultural and environmental." In any case, a call to action. The need to combat mental unwellness is a common goal shared by all actors in the assemblage. An ideal characteristic of the individuals in the assemblage is that they are concerned with this greater goal and strive to fix it. This individual does not exist prior to the assemblage – they are a subject formed within it.

Subjects in Assemblage

As mentioned, I cannot analyze what the ultimate effects of the assemblage are on the student, as it goes beyond the scope of this project. However, it is still possible for me to observe the subjects which are called for in the various programs which have been aligned in Health and Wellness, and the techniques which are meant to produce these subjects. I will first explain the categories of subjects who are to be formed, and then describe efforts to produce those subjects.

Categorization

Before discussing the actual production of subjects, we must examine the models of categorization that precede them and inform them. These are not necessarily successful models, in the sense that they might not be implemented or even acknowledged on the ground level. However, they are evidence of the breadth of this assemblage and the number of subjects who could be enrolled in it, and some of the techniques which I will discuss in the next section are modelled after them.

In The Framework, there are three competing models for categorizing students, with the ultimate purpose of aligning them into the assemblage as subjects of care and engaged subjects who participate in wellness programming and treatment. The first we encounter in The Framework is the Student Mental Health Continuum (fig.1). This model places students into four categories based on their place on a single continuum: Health, Reacting, Injured, and Ill. The students in each category have identifying characteristics, and corresponding "Services and Support" available to them based on their level of need. This model comes from the Council of Ontario Universities (Provostial Committee 2014:2).
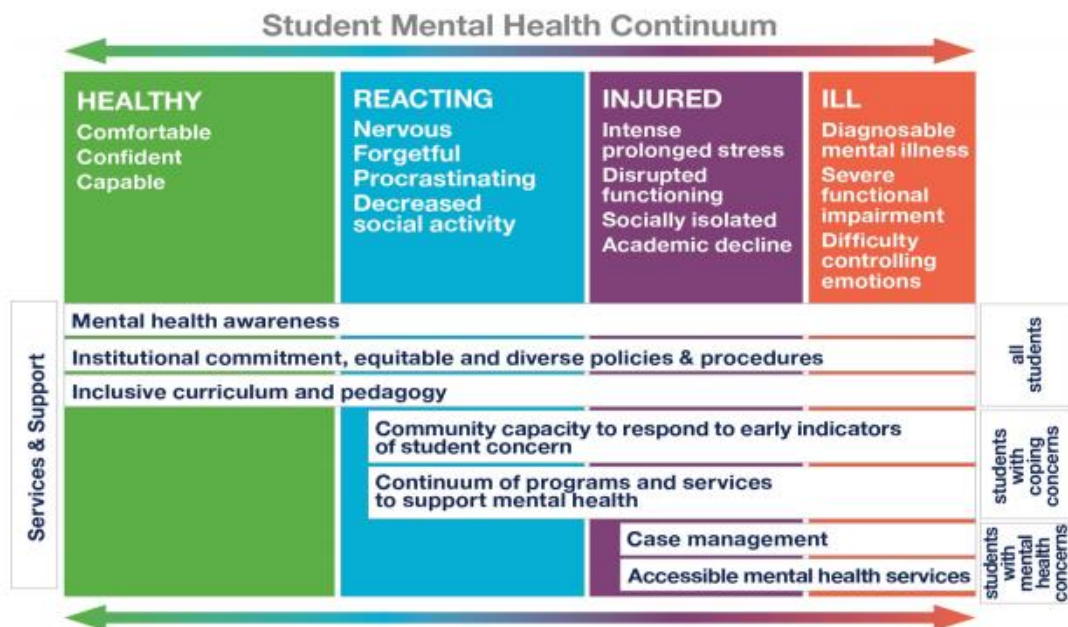
Figure 1: Adapted from Dr. Mike Condra, Mental Health Handbook prepared for the Council of Ontario Universities (COU) and the Framework for Post-Secondary Student Mental Health, CACUSS, 2013, p.8-9.

Figure 1

The second model is one championed by an administrator who I interviewed. It is the Dual Continuum model (fig.2), wherein mental health and illness are differentiated - along two continuums - rather than opposite ends of a single continuum. This model allows two outputs: the student can either be flourishing or languishing. The flourishing student has "optimal mental health". The languishing student has "poor mental health". The flourishing student could have a mental illness and still be mentally healthy, while the languishing student could have no mental illness. This model was developed by the sociologist Corey Keyes (12).

Figure 4: Dual Continuum Model of Mental Health and Mental Illness; MacKean, 2011.

Figure 2

Finally, we have the "Systems Approach" (fig.3). In this model, students are funnelled into three categories: "all students", "students with concerns about coping", and "students with mental health concerns". At each level of this funnel, there are elements meant to support that student, ranging from "institutional structure: organization, planning and policy" to "crisis management". Ideally, the result of the funnel is one unifying subject position: the "Supported Student". Importantly, the systems approach supposes that every person on campus becomes an "agent" (25).
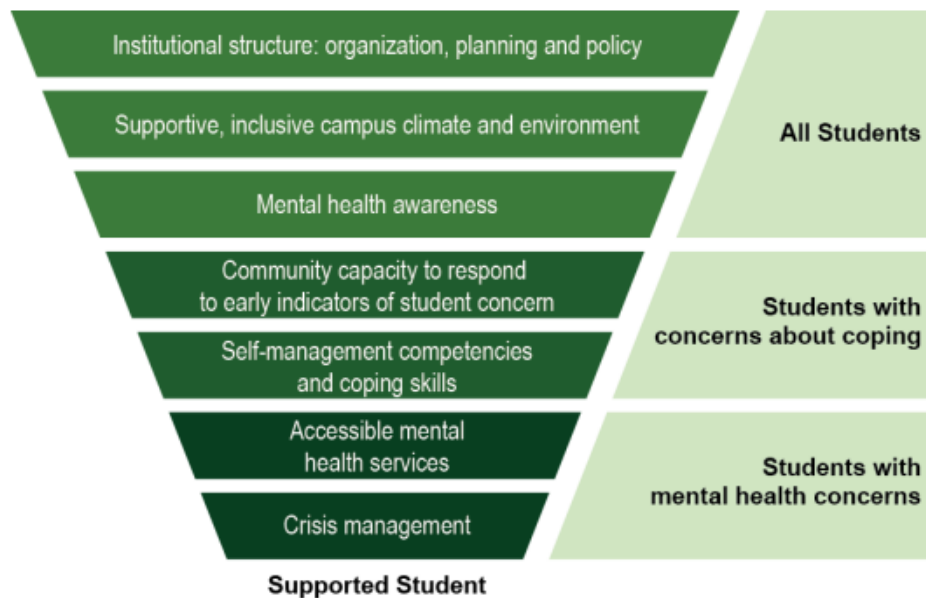
Figure 5: Framework for Post-Secondary Student Mental Health, CACUSS, 2013, p.8-9

Figure 3.

Obviously, some of these categories are mixed and some are logically contradictory. When I confronted an administrator about these discrepancies, I was told that this was not an issue as long as we don't see The Framework as prescriptive (this was surely management of seemingly fundamental contradictions). Instead, the document and its contents act as potential starting points for a discussion about mental health. Again, we see here that any authoritative power held by The Framework is suspect, even to those working within the system. Instead of being a *plan*, it is a catalyst for certain action of assemblage. The direct power of The Framework over students and staff is weak, unlike the law over a citizen. Consequently, its ability to produce subjects according to the aforementioned models is limited. There are, however, other actors which do hold such abilities.

Techniques

At the Minding Our Minds conference, I attended a presentation by two administrators from Health and Wellness. It was essentially a training session, where attendees learned key elements of the "Identify, Assist, Refer" model endorsed by the Health and Wellness Centre. The speakers focused on indicators of potential mental illness. We were taught to watch for these indicators in others, and then engage with them in a proper manner. Part of the presentation was the screening of a short animated video arguing that empathy was a superior method of communication than sympathy. As well, we were presented with the Dual Continuum and its potential implications.

Later, in an interview, one administrator expressed a desire for all students and faculty to have a foundational knowledge in mental health literacy - knowledge that would be delivered in the form of workshops like the one I attended. In particular, they believed that it would be beneficial for every individual on campus to understand the warning signs of the mentally unwell. When I asked whether they wished this sort of training were mandatory, they had mixed feelings. While they would like to see the entire population educated, they would be reluctant to train people who weren't attending voluntarily and enthusiastically.

This is an important point. What the assemblage calls for is the student subject who volunteers their time and effort. The ideal student is the one who seeks care and participates in the assemblage. The subtly of governmentality must again be stressed here. No one has the authority to send an anxious student into treatment – discipline cannot be exercised in this regard. The student's desires must be shaped in such a way that they use the services of the school by their own volition. To paraphrase Foucault, their *conduct* must be *conducted.* The fundamental logic is easy to grasp: surely, the student wants to be well. The student must be encouraged to act in a certain way to maintain or achieve wellness.

What we might expect to meet here is a form of humanitarian gaze. As Mostafanezhad (2013:489) has argued, "the humanitarian gaze contributes to the perpetuation of an 'us' vs 'them' power dynamic". Indeed, there are some areas where this type of divide takes place - professors are to look after students in this framework. In many cases, however, the divides begin to blur. The student who is a subject of care might also refer others to care. There is no "us and them". Consider the case of MoveU. It is a student-led initiative which aims to invigorate the student population through movement. Typical events include exam de-stressors, where a team of MoveU representatives will run workshops in yoga or hold push-up contests for students in the middle of exam weeks. I see this program as particularly interesting - the gaze is internalized and dispersed. It is the perfect embodiment of the Systems Approach: "U" is "you" and the "University". The boundary between caring for and being cared for is malleable, and students can occupy both sides simultaneously.

A better way of analyzing subjectivity in the assemblage is one of dispersed gaze. The student enrols themselves correctly and is guided to the extent that they become self-reliant and able to guide others. Following Cruikshank's assertion that "[d]emocratic citizens… are both the effects and instruments of liberal governance" (1999:6), I argue that the subject of wellness is an effect of assemblage and an instrument of it. The ideal subject volunteers, and recruits or enrols others, forging alignments on a micro-level, and contributing to the success and renewal of the assemblage.

Following Tania Murray Li (2005)'s cautions "that planners must situate themselves as experts", I was mindful of how administrators positioned themselves. In some sense, they were planners, and did see themselves as having a greater scope in their knowledge of mental health and their expertise in organizing and coordinating programs. But they would also defer to

specific expert knowledge in their discussions of mental health – the knowledge of

psychologists, psychiatrists, sociologists, and others. Again, this segregation became complicated

at a ground level. The people who attended Weekly Wellness events were not all students – as I

realized when I met an administrator in one of the classes.

Conclusion

I was not aware of most of the programs, initiatives, or even Student Life, for the four

years I went to this school prior to this research. Upon finding them, I had to question whether

Health and Wellness even constitutes an assemblage, or is simply a brand slapped across a wide

set of practices. As I have demonstrated, these practices are not random. This assemblage has

practices for forging alignments to meet shared goals, and techniques for producing ideal

subjects. Failures exist in alignment, on an individual level and amongst parties, but the

assemblage is surprisingly sturdy. While there is no clear hierarchy and minimal authority, the

assemblage has an overall sense of communal will, working towards a broad objective, and

calling on outsiders to align.

A possible future path in this research is an expansion into the study of students. This

would allow us to see not only the technologies meant to produce subjects, but their results.

Another option is the deeper study of what I have already observed. Many questions remain

unanswered. If I could see how the micro-dynamics of administrative planning are carried out

(by sitting in board meetings, perhaps) I would be able to witness practices of alignment, first-

hand.

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