

REACTION

From Tension to Cross-Constituency Solidarity: Coalition Building in Mad Studies; A Comment on Greg Procknow's 'Monopolized Madness'

Holly Harris, MA, PhD(c)

York University, Gender, Feminist, and Women's Studies
hh14uo@yorku.ca

Introduction

As Mad Studies nears its quarter-century anniversary in the academy (Reaume, 2024), it is important to take stock of the field, how it has emerged, established itself, grown, and what has been gained and lost along the way. It is a time for critical reflexivity; a reflection on which voices are included or missing, why that is, and how we can preserve and advance the transformative potential of Mad Studies (Norton & Sliep, 2018). This process of reflexivity has already begun, with scholars raising critiques of elitism and concerns that Mad Studies has increasingly been dominated by academics who wield power based on traditional academic norms and expectations at the expense of broader participation (Costa & Ross, 2022; Reville, 2021). In response, there have been calls to bring Mad Studies back into the community (e.g., Reville, 2021). Additional critiques have emerged suggesting Mad Studies assumes a white Western subject, while simultaneously overlooking or excluding the perspectives of activists with other social identities and from different geographical contexts (Gorman, 2013; Redikopp, 2021). In response, there has been increased focus on advancing intersectional and transnational approaches to Mad Studies and coalition building across social movements (e.g., Beresford & Rose, 2023; Costa & Ross, 2022; Johnk, 2021; Madrid, 2022; Morrow, 2017;

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O'Donnell, 2025; Pilling, 2022). Procknow (2025; this volume) contributes another important critique by highlighting that people who identify as consumers (i.e., people with lived experience of the psychiatric system who partner with professionals to push for system change and greater control over their lives) have been largely excluded from Mad Studies. While I agree that the exclusion of consumer voices is concerning, Procknow (2025) suggests that survivors and anti-psychiatry proponents act as gatekeepers who intentionally exclude consumers. Although this may occur in some instances, other factors may also play a role, such as historic cross constituency tensions and consumers not seeing a place for themselves in Mad Studies due to the dominance of survivor and anti-psychiatry voices. Rather than reinforcing rifts between these constituencies, it is important to find ways to move forward in solidarity. In response, this commentary proposes that Mad Studies embrace coalition-building among the diverse constituencies of the consumer/survivor/ex-patient (CSX) movement to address these exclusions and open new pathways toward more just and liberatory futures¹.

Building on Procknow's contribution, I first highlight the original promises of Mad Studies and argue that excluding consumer voices undermines the field's core goals. I then examine possible reasons for these exclusions, considering tensions among the diverse constituencies within CSX activism. Finally, I propose coalition-building, leveraging ideas from feminist standpoint theory as advanced by Black feminist scholars (e.g., Collins, 2002), as a model for addressing these gaps and emphasizing its

¹ This commentary draws on material from my dissertation proposal and comprehensive examinations completed as part of the PhD program in Gender, Feminist, and Women's Studies at York University.

importance for advancing Mad Studies while strengthening the CSX movement as a whole.

Mad Studies: A Promise of Plurality

Unlike strictly abolitionist or reformist approaches, Mad Studies does not offer a singular answer about what should be done with psychiatry (Menziez et al., 2013; Reaume, 2021). Instead, it embraces ambiguity, honours diverse understandings and approaches to resistance, and recognizes that transformation occurs from multiple angles (Reaume, 2021; Snyder et al., 2019). It centres the experiences, activism, and advocacy of those who have direct experience of the psychiatric system, who work in harmony with allies, social critics, revolutionary theorists, and radical professionals to produce material change (Costa & Ross, 2022; Menziez et al., 2013; Pilling, 2022; Reaume, 2021). At its core, it calls for centering mad experiences as a way to challenge psychiatric reductionism and co-create new understandings and supports surrounding madness and distress. Both consumer and survivor/anti-psychiatry perspectives are key to this goal. However, the exclusion of consumer voices from Mad Studies, while a significant loss to the field's goals, is not surprising given the tensions among the diverse constituencies within the CSX movement.

Cross-Constituency Tensions

Those working for reform from within the system (i.e., consumers) have faced significant critique from those who take an abolitionist approach to activism (i.e., survivors/anti-psychiatry proponents). For example, those who take an abolitionist approach often argue that those who leverage their lived experiences to advocate for change from within are duped into believing the psychiatric system can be reformed or

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has any inherent value (Everett, 1994). Consumers are seen as having internalized their oppression and been co-opted by psy-regimes of power. From this perspective, the values and assumptions underpinning psychiatric systems are fundamentally oppressive and beyond reform (Adame & Leitner, 2008; Morrison, 2005). Abolitionists further argue that engagement of those with lived experience in psychiatric systems often creates an illusion of choice and freedom while masking the realities of coercion and systemic violence (Van Veen et al., 2019). The illusion of choice represents superficial inclusion controlled by professionals, reinforcing and depoliticising existing power dynamics, and making oppression harder to recognize and challenge (Everett, 2000; Harris et al., 2023). Ultimately, abolitionist critics maintain that consumer participation within these systems risks sustaining the very structures of oppression it seeks to change, leaving the construction and pathologization of difference upon which these systems are built untouched (Burstow, 2014; McKeown et al., 2019).

On the other hand, abolitionist approaches have been critiqued by consumers for their perceived infeasibility, given psychiatry's deep entanglement with industry, healthcare systems, biomedical discourses, and widespread public support (Diamond, 2013). Consumer activists have further cautioned that, if abolitionist goals were achieved without careful attention to unintended consequences, those currently affected by psychiatric systems of authority could become vulnerable to other forms of oppression. In addition, some consumer activists contend that abolitionists overlook the positive experiences of support some individuals have found within the system (Diamond, 2013).

As Simmel (1908/1950, as cited in Everett, 1994) observed, it is common for members of social movements to direct more anger and critical energy toward one

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another than toward the existing power structures they seek to challenge. It is not surprising that these dynamics have seeped into Mad Studies. The field positions itself firmly against biomedical and psychiatric reductionism, a stance that clearly aligns with survivor and anti-psychiatry perspectives. Consumer advocacy, on the other hand, often involves working within psychiatric frameworks and contexts. This collaboration within existing systems can make consumer voices appear less of a neat fit within Mad Studies. Yet, consumers who work to amplify their voices within the systems that shape their lives promote alternative understandings of *mental health* and advocate for systemic change, which ultimately challenges psychiatric reductionism. Even when engaging within psychiatric frameworks, by foregrounding the relevance of their lived experience, consumers disrupt traditional hierarchies and call for meaningful shifts in power. This begs the question: what possibilities could emerge in Mad Studies if consumer and survivor/anti-psychiatry constituencies overcame their divisions and moved forward in solidarity?

Coalition Building

Many scholars have highlighted the importance of cross-constituency coalitions within the CSX movement (Burstow, 2014; Diamond, 2013). In the context of such coalitions, Burstow (2014) highlights the need to collaborate where possible and to respect and support one another where collaboration is not feasible, without attempting to convert each other. In other words, these coalitions need to be underpinned by solidarity rather than uniformity or assimilation. This is echoed by Diamond (2014, as cited in Burstow et al., 2014), who suggests that we should engage in sensitive coalition

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building that goes beyond each constituency protecting the interests of its own group. I would suggest that this be extended to Mad Studies.

Coalitions within Mad Studies are essential because each constituency draws on distinct standpoints to challenge psychiatric authority in different ways and toward varying goals. Each approach to resistance illuminates different dimensions of the systems they seek to challenge (Maddison & Shaw, 2011), and this plurality can expand what becomes imaginable within and/or beyond psychiatry. In this framing, differences are not problems to be resolved but productive sites of tension that stimulate learning, dialogue, and collective reflection (Harding, 1991).

By bringing these diverse perspectives together, coalitions within Mad Studies can generate a richer, more nuanced understanding of the systems that sustain psychiatric power (Harding, 1997; Steiner, 2012). This shared knowledge sharpens analyses and can inform new pathways to challenge psychiatric reductionism and structural injustice more effectively than any single approach could alone, strengthening the ability and effectiveness of Mad Studies in fulfilling its commitment to bridging theory and activism (Costa & Ross, 2022; Menzies et al., 2013).

Rather than assuming that collective work requires uniformity, a coalitionist approach enables different groups to participate in a shared activism while continuing to pursue resistance through their own political analyses, strategies, and priorities (Hartsock, 1998). For these coalitions to strengthen both the broader CSX movement and the work of each constituency, they must be underpinned by solidarity rather than uniformity or assimilation. Critique across constituencies remains important for identifying limitations, but its goal should not be to convert or vilify different approaches (Burstow,

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2014). By respectfully grappling with the strengths and limitations of each standpoint, constituencies can draw on each other's strengths, mitigate individual limitations, and contribute to more effective forms of resistance.

Conclusion

Procknow's critique of consumer exclusion opens a door for Mad Studies. It highlights a crucial gap in the field, one that, if addressed, can strengthen its transformative potential. Coalition-building across the diverse constituencies of the CSX movement offers a path forward. A path beyond exclusion and tension. A path beyond siloed approaches and each constituency trying to protect its own interests. It creates a path of mutual learning, resulting in a richer, more robust theory that can guide activism and open new possibilities for just and liberatory futures within and beyond psychiatry. In borrowing Morrison's (2013) words, through coalitions we can join "individual voices [and support] the collective ability to speak truth to power" (p. 59).

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