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Mad, Maddened, and Maddening: A Mad Duoethnographic Exploration of Undergraduate Education

Mad, rendu mad et rendant mad : une étude duo-ethnographique mad du parcours universitaire

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Abstract
Higher education is known to be a hostile environment towards mad(dened) and disabled students, faculty, and staff, who experience high amounts of discrimination, exclusion, and epistemic and institutional violence (Shanouda, 2019). As two activist/scholars with experiences teaching and learning within mad(dening) higher education conditions, we are committed to activism and critique in higher education that cultivates affirming conditions for mad(dened) students through disruptions of the ableist and sanist status quo in higher education. Through a duoethnographic approach (Sawyer & Norris, 2012) that emphasizes the tenets of Pinar's (1994) *currere*—which involves an autobiographical exploration of one's personal experiences within education—this article explores three themes pertaining to undergraduate education: (a) Mad identity, (b) maddened subjectivities, and (c) maddening higher education. We explore these themes through personal and intimate co-writing, with a specific focus on our encounters and learnings with and from mad community, the currently maddened state of neoliberal higher education, and our desire to promote a political *maddening* of higher education. While distilling these themes, we also advocate for their interconnections and weave our life histories teaching and learning in undergraduate education specifically. Throughout our duoethnographic writing, we strive to critique and disrupt the currently exclusionary conditions of undergraduate education while politicizing madness as an identity and coalitional community. We end by providing recommendations for how higher education can create more affirming learning conditions for undergraduate students while creating space mad community and activism.

Résumé
L'enseignement supérieur est largement reconnu comme un environnement hostile envers les personnes folles (ou rendues folles) et handicapées. Qu'elles soient étudiantes, membres du corps professoral ou du personnel, elles y subissent de fortes discriminations

et exclusions, ainsi que des formes de violence épistémique et institutionnelle (Shanouda, 2019). En tant que deux universitaires et militante et militant ayant enseigné et appris dans des contextes d'enseignement supérieur marqués par la folie (ou la production de folie), nous nous inscrivons dans une démarche critique et activiste visant à créer des conditions d'apprentissage affirmatives pour les personnes étudiantes folles, en perturbant le statu quo capacitiste et saniste qui domine l'univers académique. À travers une approche duo-ethnographique (Sawyer & Norris, 2012) fondée sur les principes du currere de Pinar (1994), c'est-à-dire une exploration autobiographique de ses expériences éducatives, cet article examine trois dimensions de l'enseignement universitaire de premier cycle : (a) l'identité mad, (b) les subjectivités rendues mad, et (c) l'université en tant qu'espace rendant mad. Nous explorons ces thèmes par une écriture conjointe, intime et personnelle, en mettant l'accent sur nos rencontres et apprentissages avec la communauté mad et en son sein, sur l'état actuel de l'enseignement supérieur néolibéral, ainsi que sur notre volonté de promouvoir une politisation de la folie dans ce contexte. En développant ces axes, nous soulignons leurs interconnexions et tissons nos trajectoires de vie en tant que personnes enseignantes et apprenantes engagées dans l'université. Tout au long de notre écriture duo-ethnographique, nous cherchons à critiquer et à perturber les conditions d'exclusion qui persistent dans l'enseignement supérieur, tout en affirmant la folie comme identité politique et comme communauté de coalition. Nous concluons en formulant des recommandations pour que l'université puisse offrir des conditions d'apprentissage plus affirmatives aux étudiantes et étudiants de premier cycle, tout en ouvrant un espace à la communauté mad et à l'activisme.

Keywords
Disability; Mental Health; Distress; Mad Studies; Duoethnography

Mots-clés
Handicap; santé mentale; détresse; études de la folie; duo-ethnographie

Introduction

Various researchers and media outlets describe the current state of mental health on Canadian postsecondary campuses as a "crisis" (Andersen et al., 2021). The undergraduate experience for many students involves high amounts of mental distress, often leaving students in a *maddened* state. While discussions of undergraduate students' mental health are occurring more frequently in research, curriculum, and pedagogy (Lister & Allman, 2024), such conversations commonly draw from biopsychosocial and/or biomedical definitions of "mental health" or "mental illness" and rely on notions of "normal" and "abnormal" mental health states. As such, when mental health is investigated within the research literature, it is from a perspective that assumes normative markers of "mental wellness" or "mental health" and thereby does not investigate how sociocultural hierarchies and inequalities are inherently connected with any discussion of mental health, wellbeing, or illness within and outside of the undergraduate context.

Here, we aim to provide discussions of a politicized form of *madness*—one that specifically seeks to challenge and disrupt the disabling and maddening status quo in higher education and undergraduate education, which thereby reinforces the exclusion and devaluation of madness and Mad people and communities.[1] Accordingly, this article engages with both authors' experiences in higher education through an exploration of the

[1] In this article, we use and reference the identity term, Mad, to denote communities of folks who identify with their experiences with mental distress and take a critical stance towards psychiatry and biomedical conceptions of "mental health" and mental illness," including those who might identify as consumers/survivors/ex-patients (c/s/x). While terminology is complex and often an individual experience, we use this term while respecting everyone's various forms of identifying with lived experiences with mental health disabilities, particularly as it pertains to mobilizing identity as a form of epistemic critique and destabilization of medicalization (Gagné-Julien, 2022).

ongoing sanist harms of the neoliberal academy towards students with mental health disabilities in higher education. As such, we both critique the biopsychosocial logics of much of higher education mental health advocacy while also providing narratives of our experiences with mental health throughout our respective undergraduate studies as an analysis and critique of sanism within higher education contexts. *Sanism*, or the systemic devaluation and discrimination against people who are constructed as having or otherwise experience mental health struggles, diagnoses, or challenges, is embedded within the neoliberal landscape of higher education, which focuses on standardization, competition, and individualistic approaches to teaching and learning (Snyder et al., 2019). Thus, our stories, writing, and experiences detailed within this article are intentionally political, personal, and epistemic in nature – these experiences are shared with the intention of validating the often-unnoticed nature of sanism within the milieu of undergraduate education in higher education and honouring ourselves as maddened people who have truths and narratives to share to disrupt higher education. While this approach has limitations and we write from our own respective positionalities, through our overlapping experiences, we seek to demand better for all future undergraduate students within a highly marketized, demanding, and competition-oriented higher education context.

We write this article together as two scholars who both research mental health in education and identify as having lived experiences with mental health disability. However, despite these overlaps, we also have different theoretical and scholastic commitments, with one of us identifying as a critical scholar who writes and researches in mad studies and the other focusing on mental health and wellbeing in education through a

biopsychosocial frame. As such, we bring our different experiences, activism, and scholarship together in this duoethnographic (Sawyer & Norris, 2015) article and write across, within, and between our differences through the goal of reflecting upon our varied experiences within undergraduate education as people who both experience and research about mental health disability, and even, madness.

While our experiences might be different, we both critique how ideas of "mental health" or "mental wellness" are constituted through binaries of "sane" and "not-sane" or "healthy" and "unhealthy" minds and people, particularly within education (Castrodale, 2017). As Castrodale (2017) articulates in the context of higher education, "theorizing madness/dis/ability represents a pedagogical site of learning and opportunity to consider the human condition, and repositions dis/ability as a way to conceptually unpack lived human experiences" (p. 62). Reflections upon lived encounters with madness provide the potential to consider how lived experiences within education are shaped and constituted by systems, structures, and institutions, which often rely upon neoliberal hierarchical thinking that only imagines madness as failure and deficit (Davies, 2022, 2023, 2024; Procknow, 2024).

We intentionally deploy the term, *madness*, to describe a multitude of ways of thinking/being/existing outside of compulsory, normative notions "sanity" or "compulsory able-mindedness" (Chapman, 2013) while critiquing the common essentializing of madness solely into constructions of "mental illness" or pathology (Snyder et al., 2019). While we do work within this definition at times—of madness as pathology or constructions of abnormalcy—we also gesture towards imaginations of madness as

affirmative disruption and community. In our writing, we engage with three theoretical conceptualizations of madness—Mad, maddened, and maddening—and describe how each of these theoretical conceptualizations relates to our lived experiences with mental distress within educational institutions, particularly as former undergraduate students with mental health disabilities. As such, while our definition of madness does also overlap with the phrase, "mental distress," we imagine a politic whereby madness can be malleable, coalitional, and potentially world making (LeFrançois et al., 2013). Before we further enter into this discussion, we start with recent literature regarding mental health and disability in Canadian undergraduate education.

Undergraduate Students' Mental Health and Wellness

Mental health within the postsecondary context in Canada has received growing attention over the years, with some research revealing increases in self-reported stress, distress, and mental illness (Fagan et al., 2024; King et al., 2023; Linden et al., 2021). The National College Health Assessment, which is the largest, comprehensive postsecondary student health survey administered by the American College Health Association, is often used within the Canadian context to understand mental health and wellness indicators. The 2022 *Canadian Reference Group Data Report*[2] of the National College Health Assessment III, which included 16 postsecondary institutions and a sample of 11,322 participants,[3] revealed many participants were reporting significant stress, isolation, and loneliness (American College Health Association [ACHA], 2022). When asked about their

[2] This report presents descriptive data for the 2022 Spring data collection period in Canada.
[3] This sample includes undergraduate and graduate students.

last 30 days, 37% of participants reported they experienced high distress. A total of 29% reported they often felt isolated from others, and 57% of participants screened positive for loneliness (ACHA, 2022). With traditional undergraduate students falling within the high-risk age range (15–24) for mental illness (Ishimaru et al., 2023), many students are also being diagnosed with various mental health conditions. When asked whether they had ever been diagnosed with a range of ongoing and chronic conditions by a healthcare or mental health professional, 32% of participants reported they had been diagnosed with anxiety and 25% with depression (ACHA, 2022).

Students experience a myriad of stressors within the postsecondary context. Of the 19 problems and challenges that were examined in the 2022 NCHA III - *Canadian Reference Group Data Report*[4], the most frequently reported were procrastination (93%), personal appearance (64%), academics (60%), and finances (55%;ACHA, 2022). For many participants, these problems and challenges then had an impact on their academics, which is consistent with the broader literature about mental health difficulties having a negative impact on students' academic success (Dalsgaard et al., 2020). In terms of stressors related to academics, research shows that students may experience stress due to different types of assessments such as exams (Hamzah et al., 2018) and presentations (Tsang, 2020), and they may also experience stress about grades in general (Chamberlain et al., 2023). Exam and grade-related stressors as well as academic workload were rated the most severe by undergraduates (MacKinnon et al., 2024).

[4] This report presents descriptive data for the 2022 Spring data collection period in Canada.

Canadian research has also found an increase in the proportion of students seeking help from on- and off-campus sources for mental health-related concerns (Linden et al., 2021). The 2022 NCHA III - *Canadian Reference Group Data Report* indicates that 49% of respondents had received psychological or mental health services at some point in their lives (ACHA, 2022). When asked about the last 12 months, this dropped to just over 32%. Students use various on- and off- campus resources for different kinds of support, such as diagnoses (ACHA, 2022).

Disabled Undergraduate Students and Mental Health Disabilities

Statistics Canada's Canadian Survey on Disability [CSD] reveals prevalence data for disability and type of disability. Between the 2017 and 2022 data collection periods, the disability rate for those aged 15–24 (the traditional age of undergraduate students) increased from 13% to 20%. This increase represented the largest increase across all age categories (Hébert et al., 2024). One would therefore expect to see increased discussion of disability and disabled students in undergraduate education. While there is limited information about the prevalence of disability in the Canadian undergraduate student population, data from the Canadian University Survey Consortium [CUSC][5] revealed that in the 2022 first year student data collection, about one third of students reported having a disability or impairment (Prairie Research Associates, 2022).

In terms of type of disability, the CSD identified the most prevalent disability types among those aged 15–24 years were mental health-related (14%), learning (9%), and pain-

[5] This survey looks broadly at undergraduate student satisfaction and student experience.

related (7%) (Hébert et al., 2024). The 2022 first year student CUSC data revealed that of approximately 15,000 students, the most commonly self-reported disabilities/impairments were mental health (31%), neurodivergence (20%), and learning/memory (5%; Prairie Research Associates, 2022). Different datasets using a variety of disability categories make it challenging to obtain an accurate and comprehensive understanding of prevalence (Clarke & Lorenz, 2024).

Much of the research and ongoing discussions related to disabilities and mental health disabilities specifically, focus on accommodations (Barnard-Brak & Kudesey, 2022). While accommodations are important for ensuring disabled students' academic success in higher education (Parsons et al., 2021), discussions of accommodations do not necessarily shift or disrupt the sanist and ableist systems and structures within higher education that continue to exclude Mad and disabled students (Shanouda, 2019). Neoliberal individualism emphasizes competition and standardization within higher education and produces cultures of anxiety, stress, and ongoing feelings of failure within students, faculty, and staff (Loveday, 2018).

Neoliberalism and Higher Education

Despite the origins of higher education being socially imagined as rooted in democratic dialogue and critical inquiry, neoliberalism as a form of governance that emphasizes individualism, privatization, commodification, logics of consumption, and the normalization of structures of inequality and societal hierarchies, is woven into the fabrics of higher education and academia (Giroux, 2024). The corporatization of higher education institutions has led to notions that education can be purchased while the ongoing

workloads and intensifying academic requirements and lengthy years of post-secondary education required for professions continue to extract dollars and labour from students (Giroux, 2024). Thus, instead of conceptualizing mental health disabilities as neutral, objective facts, we can consider how mental health disabilities and distress are produced through conditions within higher education that increase competition, hierarchies, and experiences of inequality under a myth of meritocratic achievement and individual success (Berg et al., 2016). Within this educational structure, students, faculty, and staff burnout, anxiety, depression, and disablement can be symptomatic of larger neoliberal social and cultural conditions that promote ablesanist ideologies and norms (Dolmage, 2017).

When student mental health is addressed within neoliberal higher education institutions, it is often framed as an individual deficit that students must monitor and track to ensure their ongoing academic success and accomplishments within the neoliberal academy (Weinberg, 2021). It is only recently that courses on mad studies and madness have entered into the academy and provided students and faculties with opportunities to critique higher education and to learn about the often maddening conditions of teaching and learning within higher education institutions (Davies, 2022, 2023, 2024; Poole, 2014; Reaume, 2019). However, as student mental health outcomes are reported to be worsening within higher education, institutions often encourage students to take further courses to increase their debt load while providing the institution with enhanced profits (Desierto & de Maio, 2020). Meanwhile, universities continue to deploy notions of "mental illness" to sort and categorize students (Wulf-Andersen & Larsen, 2020), placing attention

towards individual diagnoses instead of analyzing the structural conditions of higher education (Desierto & de Maio, 2020; Wulf-Andersen & Larsen, 2020).

Theoretical Framework and Methodology

Theoretically, this article is in conversation with Mad Studies, which is a theoretical framework that combines theorizing and praxis to critique the ongoing hegemony of the psychiatric and psychological disciplines as ways of conceptualizing and understanding society (Beresford & Russo, 2021). As such, Mad Studies is an "umbrella" term (LeFrançois et al., 2013) that encompasses various forms of survivor, patient, consumer activism and critiques of psychiatry, as well as theorizing that explicitly emphasizes experiences with madness and mental distress as analytics (Morgan, 2021). While Mad Studies has gained prominence in various helping professions, such as social work, for example (e.g., MacPhee & Wilson Norrad, 2022), there is still much work needed to bring Mad Studies activism and theory into education.

In thinking with Mad Studies here, we place an emphasis on how our autobiographical experiences with madness—broadly conceptualized as affective, emotional, psychic experiences with mental distress, intensified affects and states, or ways of being that might otherwise be psychiatrized or deemed "abnormal"—can be places for rethinking, reimagining, and critiquing the exclusionary norms and hierarchies embedded within higher education. In particular, Mad Studies exposes how sanist forms of violence—the ongoing exclusion, erasure, silencing, and pathologizing of people who are diagnosed with mental illnesses or otherwise perceived to be "mentally ill" (LeFrançois et al., 2013; Poole, 2014)—are perpetuated within neoliberal, corporatized, and hierarchy-

based systems of institutional governance and assessment within higher education (Procknow, 2024).

Our reflections in this article come from our place as two scholar-practitioner-activists who have lived experiences with mental distress while studying and working within higher education—in differential forms—and as such, seek to think with our experiences as a beginning place for further theorizing and activism regarding the possibilities and potentialities of *maddening* higher education. While neoliberal higher education itself is quite *maddening* in that its very operations can elicit experiences with mental distress and disablement within students and faculty (Davies, 2022, 2023, 2024, for example), we think about the potentialities and possibilities for *maddening* as an intentional praxis that centralizes the subjectivities and needs/desires of Mad(dened) students and educators in higher education. In this sense, *maddening* can symbolize a form of infiltration—a way in which madness as an intentional ethic and praxis—disrupts and hopefully eventually dismantles the very hierarchical structure and scheme of higher education.

Methods: Duoethnography

While we realize that the writing of this paper is a task that involves activism, community, and intentionality, we begin this task by drawing to attention three central themes within our experiences as students and educators in higher education through a duoethnographic approach (Sawyer & Norris, 2012). Following Pinar's (1975) work on *currere*, or autobiographical approaches to curriculum study and theorizing, Sawyer and Norris (2015) describe duoethnography as a form of "dialogic research" that "teaches

individuals how to both act and give meanings to those actions" (pp. 1–2). Duoethnographic approaches to research draw from the autoethnographic tradition (e.g., Ellis, 2004), whereby researchers re-enter and examine their personal and often private past experiences through a cultural frame that allows for analysis of the textual and layered meanings and situation of experience (Sawyer & Norris, 2012). "Experience" in this perspective involves the encounters between researcher and researched, which are layered cultural and social events of re-telling memory within textual and discursive frames (Ellis, 2004). Accordingly, the meanings and associations produced through such collective writing in a duoethnographic approach destabilize notions of the singular, modern "I," are intertwined in meaning and retellings, and are dialogical and intersubjective (Sawyer & Norris, 2015). However, there were important considerations involving being conscious of not using our personal stories to solely re-affirm or amplify theory or not providing the audience with links to understand the relevance of our personal experiences to the overarching argumentation of our paper (Breault, 2016). Moreover, while we describe our own experiences within this paper, we by no means wish to provide a universal notion or conception of our experiences—they are situated, individual, and not to be thought of as applicable or relevant in all situations (Breault, 2016). Indeed, even the recommendations we provide come from our lived experiences and as such must be considered as embedded within our social locations and positionalities.

In our duoethnographic work, we must remain reflexive regarding our positionalities, as well as positions of power and privilege, particularly as it relates to the Mad Studies project. Within duoethnographic traditions, reflexivity and positionality

"requires researchers' continued, intentional efforts to uncover the layers of power and influence their positionalities have over their research projects" (Wiant Cummins & Brannon, 2022, p. 86). Our positionalities involve positions of privilege and marginalization while both being assistant tenure-track professors with experiences with mental distress at universities in Southwestern Ontario. Adam (they/them/he/him/any pronouns) is a white settler queer nonbinary/genderqueer/gender ambivalent activist and scholar with a neurodevelopmental disability and various mental health disabilities, as well as experiences with post-traumatic stress within academia and higher education. Kathleen (she/her) identifies as a white settler queer cisgender neurodivergent scholar with several mental health disabilities. Through both of our positionalities, we engage with this work while not trying to "speak for" everyone.

In what follows, we begin our duoethnography writing, which is categorized through the themes: (a) mad identity and community, (b) maddened subjectivities, and (c) maddening higher education. We employ these themes to organize our reflections into themes about mad identity, the maddening conditions of teaching and learning within undergraduate education, and the possibilities and potentialities for maddening higher education as praxis. We seek to bring together our collective experiences as a form of testimony to the ongoing harms and violent conditions within the neoliberal academy and to strive in solidarity for a different future. As such, we use headings below to organize our writing while also listing the prompt questions we collectively wrote to begin our co-written reflections. These reflections were written together through joint writing sessions at coffee

shops and on Zoom to work in tandem with one another in collective thinking and theorizing.

Results

Mad Identity and Community

What exposure did you have to Mad identity throughout your undergraduate studies? Did you identify openly as a student with a disability and how was your undergraduate experience formative in your understandings of mental health/mental distress/madness?

Adam: For me, I was diagnosed with generalized anxiety disorder, obsessive compulsive disorder, and major depressive disorder within my early years of undergraduate study—these diagnoses came about during a time of great stress within my transition from high school to university studies in music and I eventually experienced assessment for mental health diagnoses at the local hospital where the university I was studying at was located (see Davies, 2024). Before this time, I had only thought of disability as something that was outside of me—I worked in daycamps and after school care programs with children and youth with disabilities and I had yet to really rethink or reimagine my perspectives on disability outside of a charity and medical model approach. However, throughout my early years of moving away from home to university in Waterloo, Ontario, I began to encounter intense mental distress and depressive feelings that impacted my academic studies and social relations—I felt debilitated at times as my grades suffered and I started isolating myself within my residence room. Eventually, I was referred for psychiatric diagnosis and received a plethora of diagnoses. Within my childhood, I had a few doctors and medical practitioners suggest that I might have mental health conditions; however, my parents did

not wish for me to receive a formal diagnosis and were afraid of stigmatization. Still, I was placed in a special education class in grade eleven, although I did not have a formal diagnosis at the time.

When I received these diagnoses in my early undergraduate years, I did not have any way of conceptualizing disability—or moreover, madness—outside of its common biomedical framework and certainly did not think of my experiences with mental distress and madness as a place of identity and community. My grasp of mental health differences was one clouted in shame and silencing. Particularly, as a music student, I did not feel that I could be open about experiencing mental distress because I knew that the academic and performance expectations in my program of study were high and I did not want to be constructed as incapable or unable to achieve or perform the expectations of a professional musician. As such, I spent some time quietly experiencing depressive feelings, not sharing my inner psychic world and thoughts, and resisting the idea that I could even see these mental differences as a place of strength and difference—that these thoughts and feelings were not necessarily always "bad" or in need of intervention or cure.

Eventually, I started sharing my experiences with anxiety and stress with peers and professors and being more open about my experiences with testing anxiety, in particular. I received accommodations at the university disability accommodations centre and was able to write my tests in a separate room and have extra time and take walks on my tests. While these were helpful scaffolds for my undergraduate studies (and I also received extra time on handing in assignments without question and with support from the accommodations office), I did notice that these accommodations seemed quite

standardized, almost as if extra time on tests and assignments and a separate writing space were the taken-for-granted typical accommodations students get.

Again, I had yet to encounter Mad identity or politics and did not see much disability activism within my respective university campus, either. This was at a time in the 2010s when I know (now) that disability pride and Mad pride were beginning to emerge on university campuses; however, I was not necessarily aware of their existence. While I eventually became more able to share with professors my specific access needs (as they were defined by the university accommodations office), I did not yet feel a sense of pride or identity in my madness and I also often received pushback when asking for accommodations still. I felt alone in my experience and many of my peers would even ask me where I went when I left the classroom to write my tests in my private space.

If I had been able to learn of Mad pride and Mad identity during this time, I might have been able to network with other students who also experienced similar struggles as I did and learn more about supports and community. In particular, given how difficult the transition between high school and university was for me, I could only imagine myself as inherently flawed and undeserving of a university education—that I was not able to perform the expectations of me and was therefore a failure.

Kathleen: I look back on my later high school years as the real starting place in my journey to face and understand my identity around mental health. I lived with a friend and their family in grade 12 and was able to get a family doctor which I had not had previously. I went to the family doctor because of the mental distress I was experiencing. At the time, I knew about the language around anxiety and depression generally, but I hadn't viewed myself as

"having" anxiety and depression. I filled out a questionnaire when I saw the doctor and was told I had anxiety and depression. What did this mean for me? Did this "count" as a diagnosis? Nothing much came about this experience, but it was my first foray into medication. I definitely did not even consider that what I was experiencing was a disability and at the time I thought disability would be much more severe. I did not pursue any support at my high school such as accommodations or an IEP (individualized education program), even though my mental distress impacted my academics. Nobody suggested I do this and I didn't know anything about it. I applied to six universities in Grade 12 and didn't get accepted. I redid some classes and was successful the second time.

The reason I'm starting with my high school experience is because it played a big role in how I transitioned into and navigated through my undergraduate program. I never pursued accommodations in high school and subsequently did not consider I might need accommodations in my undergraduate degree—this wasn't even a thought at the time. I didn't know accessibility/disability offices existed or what they provided for students.

At the time, I thought my mental health challenges were just me being stressed, overthinking things, putting too much pressure on myself, etc. I told myself I could manage it during my undergraduate degree and this perspective was reinforced by others close to me who told me the same. I was sure other students were also just stressed, overthinking things, and putting pressure on themselves like I was. If everyone else could cope, so could I.

During my undergraduate degree, I learned about disability and mental health and wellness in some of my classes because of the program within which I was enrolled. There

were a few times throughout my program where I felt like I had reached a tipping point, and I reached out to either health services and/or counselling services. I had gone to health services to discuss medication and through that saw a medical practitioner a few times for mental health support. Through counselling services, I again saw someone a few times for support. While these were big steps for me, I didn't feel that anything really came of these experiences because at the time, I thought my mental health challenges were too severe or complex for some limited, short-term support—so I didn't really see the point. I had also never been referred to the accessibility/disability office or connected to any student groups focused on mental health or disability. I would say that I knew at this point that something didn't feel "right" or that I might be different in terms of how I felt and the challenges I was experiencing, but I also didn't know how to make sense of that feeling or what to do about it. I did not encounter any student activism or anything about mad studies or mad identity. This is not to say that I would have been ready to engage in such communities, but it likely would have helped with developing a greater understanding of what I was experiencing.

Maddened Subjectivities

How does higher education potentially produce mental distress and/or psychological disablement within people who learn, study, and teach within institutions and how might this challenge the notion that "mental health" is only a biological phenomenon? Does the environment within higher education produce madness?

Kathleen: I remember how anxious I was about the transition to university. I attended the Ontario Universities' Fair and learned about different schools and their culture. I began

learning more about what it was like to be a first-year university student. I clearly remember hearing high school teachers, guidance counsellors, and university recruiters sharing that students' grades in first year tended to drop 10–15% compared to their high school grades. This narrative was then reinforced when, during my first term in my undergraduate program, several instructors shared lines like "look to your left, look to your right, one of you won't pass this course," or "one of you won't graduate from this program."

I enrolled in a five-year concurrent education program, which consisted of four years of an interdisciplinary undergraduate degree and one year of teacher's college: the program was highly competitive because we didn't have to apply to teacher's college. The program required students to maintain a 75% average to remain in the program. This caused a lot of anxiety: What if I didn't get good enough grades to stay in the program and was "kicked" out? If I didn't get the grades did that mean I wasn't smart enough or good enough to cut it? What other program would I do, or field would I go into if I wasn't in this one? This requirement of needing the grades was a significant point of distress throughout my undergraduate studies. As I neared the end of my undergraduate degree, I applied to graduate school and wondered whether my grades were good enough for that too.

Another aspect of my experience and program was that I had to write exams in a large gym with a couple hundred other students. Exams were always stressful for me even before I got to my undergraduate program. But now, it felt like there was more on the line because of the grade requirement for my program and the weight of the exams on my final grade. I experience memory issues, where things don't always transfer to long-term memory. This meant that I would study for exams really close to the date of the exam, so

that I only had to remember it for a short time. On the day of the exam, my anxiety would be very high and while the exam was taking place, I could feel how anxious I was. I couldn't focus on the exam because of this anxiety and seeing other people writing things down; I couldn't remember what I just learned about the day before because I was stressed. As I sat at the desk thinking about how to work on the exam, I wondered where the exits were if something happened and I needed to get out, and why nobody was monitoring what people were bringing into the exam with them. Because of how difficult these exam experiences were for me, I rarely did very well. I just assumed everybody was anxious and struggled with exams and that my experience was typical—so I didn't think anything of it or do anything about it. I began to be strategic about how I approached my courses to account for doing poorly on the exams. Writing papers came fairly easily to me and I typically did well, so I figured that was where I could make up for the poor exam performance.

In addition to larger lectures, in my undergraduate program we had to do smaller seminars for our courses, and these typically had about 20 students. While the purpose of these seminars was to create a smaller group where students could be "more than a number" and could engage with the material, they made me anxious. What if I was unexpectedly called upon and didn't have something to contribute? I would look bad in front of my peers. I would feel like I didn't belong there. I eventually tried to be strategic like I was with making up for bad grades on exams, and when I read for my classes I would jot down a few things that I could say at the seminar. I would get nervous as the day and time for seminars came closer—would I be able to speak up today? What if I look stupid and people judge me? I would reassure myself that I could do it because of the preparation I

had done. But then, during the seminars I could feel my heart racing and was afraid of judgment… I would think about and visualize myself raising my hand to say something, and then couldn't. I would occasionally check the clock to see how much time I had left to say something. And then, the seminar would be over and I'd beat myself up internally: why couldn't I do it? This was another week of failing to say something. What am I even doing here if I can't say something?

Adam: Similarly, I was in an undergraduate program that required a specific average to stay enrolled in the program. For my music degree, I needed a 70% average overall to stay off academic probation, which proved to be intensely difficult throughout my first year of university studies. While I experienced high amounts of anxiety regarding grades in high school, I was able to leave my Grade 12 year with a mid-80% (A) academic average; yet, this did not maintain itself within my first year of music education studies. Moreover, I experienced a lot of small classes where I would have to sing and perform in front of peers, as well as engage with sight singing and ear training. These technique classes were highly stressful for me, and I failed the first course I had ever failed in my academic career during my first year of university studies. I had to retake this course the following year to stay enrolled in my academic program.

The stress of having to constantly perform for peers—my major was classical saxophone—and also being enrolled in small class sizes where peers were competitively comparing themselves against each other proved stressful. The competitive element of post-secondary music studies was something that I thought I was ready for given I had gone to a performing arts high school for music. However, I noticed that the environment

created a lot of judgment and comparison techniques that impacted my self-esteem and mental wellness (I believe this to be common amongst all performing arts programs). I did not know how to cope with feeling lesser than my peers ("imposter syndrome") and not as successful or capable as a musician. The shame and feelings of self-doubt I encountered through comparing myself to my peers left an imprint on me. This mark or feeling of incompetency left me literally voiceless during vocal and sight singing exams—the thought of singing in front of my peers, who might be assessing and judging me, left me without a voice and struggling to sing. While I understand that music programs involve performance and assessment, the level of constant evaluation by both professors and peers impacted my mental health at times. Although I was able to receive accommodations to write my tests in separate rooms, I did not frequently—or hardly ever—receive accommodations for my performance exams and still was expected to sight sing in front of my peers. Upon asking a professor to perform a sight singing exam in his office instead of in a more public setting, I was denied and told that I would not be receiving such an accommodation. I did not again ask for accommodations for a performance assessment.[6]

The stress involved in completing my degree within the four-year time period - what I thought of as the "typical" time period to complete an undergraduate degree full-time and the amount of time my degree was advertised as taking—became intense as I was often balancing seven courses a semester to complete both my music requirements, as well as the requirements for my minor. Since my desire was to attend a teacher education

[6] I state these experiences because I believe them to be common upon music students at the post-secondary level in all music programs.

program to become a high school music teacher, I also needed a second teachable, which became my minor in history. However, since most of my music courses were chosen/pre-planned for me by my program, I did not have space for my history courses except to take additional classes beyond the required music courses. Completing this high course load while managing my mental health needs felt increasingly challenging.

During a time of intense mental health distress, I met with higher administration in my program to discuss my mental health concerns about both the program and me, individually. I appreciated this opportunity to meet and chat about the distress I was experiencing and felt welcomed and affirmed. However, I did feel a bit like I was "confessing" my inner thoughts and feelings to people who might not fully understand what I was experiencing and I also worried about reputational damage towards me as a current student in the music program. I left the meeting feeling that I had just blurted out thoughts and feelings that I had yet to share with many people in my life and I was unsure what changes—if any—might come from such sharing.

Maddening Higher Education (Recommendations)

How can we consider madness as a praxis? How might considering madness and mad disruptions create more affirming spaces in higher education?

Adam: Thinking with, working within, and entering Mad Studies has provided pedagogical recommendations that I continue to think about in my teaching and learning practices in higher education. As a Mad person, I benefit from these practices and hope that other Mad or maddened students might; however, I feel that these practices are useful for everyone in teaching, learning, and pedagogy. For example, Costa and Ross (2023) argue that Mad

Studies *is* praxis, meaning that Mad Studies "is a vehicle through which Mad theorising operates to achieve the political goals of the Mad movement" (p. 4), meaning that it inherently provides tools for collective liberation. In my ongoing reflections and engagement with Mad Studies, I consider praxis as inherently linked with the liberatory politic of Mad theorizing—theory and praxis are intertwined. One cannot just write about Mad Studies while engaging with higher education in a fashion that is antithetical to the politics of Mad liberation.

As such, while I have reflections and ideas for further maddening higher education—maddening in the sense of disrupting, rethinking, expanding and dismantling (LeFrançois, 2017) —I consider these recommendations also about creative ways of making and taking up space for Mad(dened) people within higher education while trying to navigate a system not made for their/our flourishing. The question becomes one about if Mad Studies writing and activism can truly work "within" the structures of higher education in its neoliberal ethos—this is one that many of us are considering (Costa & Ross, 2023). However, while we occupy space within systems not made for our survival, we try and deconstruct and dismantle such systems while navigating our existence on the inside.

For me, maddening higher education is a political and ethical goal: one that involves asking larger questions, such as "What is the purpose of education—higher education—and what kind of collective work do we seek to achieve within this system?" as well as "What do we consider the aims of teaching and learning and what kinds of classroom communities do we seek to cultivate that allow for everyone to flourish?" (Davies, 2022, 2023, 2024). In these questions, we must consider the kinds of emotional

and affective responses that we do and do not expect and welcome into the classroom. What are our pedagogical responses to students who might experience anxiety, panic, or even maddened states in the classroom? How might we create such spaces without resorting to psychopathology or psychiatric diagnostics as criteria for inclusion and support? These are beginning questions I have.

Another question I have, which I continue to think about, is *what is maddening higher education as a praxis?* I think that there will be debate and contention about this given that some of us are working to expand the currently existing systems in higher education to be more affirming and inclusive of Mad(dened) students, such as through improved accommodations and goals that will produce higher academic outcomes, and some of us are attempting to dismantle the neoliberal hierarchical structures of higher education. Are discussions of academic outcomes and success for Mad(dened) students antithetical to a Mad Studies politic? As Mad Studies expands in its politic and usage, there is a potential risk of depoliticizing its radical critique of higher education and standardization.

Kathleen: My experiences from my undergraduate degree contribute to who I am now and my work in different ways. With teaching, because I struggled (and continue to grapple) with understanding my identity around mental health/distress/madness, I acknowledge that my students may also be similarly experiencing identity-related questions. I know that some students identify as disabled and have formal accommodations through accessibility/disability offices, that there are many students who identify as disabled who don't access accommodations, and that there are students who may experience mental

health challenges and distress and who do not identify as disabled or Mad. How can I make sure that I am keeping all these students in mind in my teaching? I draw on the principles of Universal Design for Learning and think back to my own undergraduate experiences to consider how I can improve my teaching for students. How can I carefully consider how my assessments are designed given high-stakes exams can be distressing? Can I provide an option of assessments for students to choose from? For smaller classes like the seminars I experienced, how can I provide opportunities for students to engage and participate in different ways? This could be oral contributions but also written contributions in online discussion areas, for example. I might also do small group activities that provide opportunities for participation with a few classmates, rather than in front of the whole class.

To me, maddening higher education is partly about challenging some of the narratives around grades that I heard when I was an undergraduate student. How can I provide a supportive space that allows and encourages students to take risks in their learning and think outside the box, without having to worry about getting "kicked out" of their program? Part of this is designing tasks and assessments in a scaffolded way where I can provide formative feedback along the way, to set students up for success on their summative assessments. This is still a hard one though because students are very aware of how important grades are. I think this is why we're increasingly seeing conversations about practices like ungrading.

I don't remember there ever being conversations about mental health, distress, or madness from my professors themselves and their connections to such concepts. But

what that does is limit representation for students—students don't see or hear that others have similar experiences. Although my identity around these topics has been evolving for years, it was only a couple years ago that I had a psychological education assessment and parts of my identity were validated. Because of this assessment, I increasingly now view activism around these topics as one of my responsibilities, in the hopes that students can see that there are faculty members who have connections to mental distress and madness. Outside of the classroom, I also advocate for more inclusive teaching and learning spaces and policies. To me, it is a combination of inside and outside the classroom work that contributes to a maddening of higher education.

Discussion: Mad, Maddened, and Maddening Approaches to Higher Education Praxis

Mad

Throughout our undergraduate experiences, we were not presented with the possibility of identifying *with* madness or that Mad could be an identity and place of community and activism. However, it is not enough to merely bring Mad identities and politics into higher education—if such a thing can be fully possible—due to risks of tokenism and co-optation. In their writing about Mad Studies in social work education, MacPhee and Wilson Norrad (2022) note how "the co-opting of social justice language and resistance approaches, that originated with the Mad and c/s/x movements, by healthcare and psychiatric treatment models has transformed concepts of recovery, resilience, and empowerment into depoliticized ideas that objectify this population" (p. 40). As such, while we advocate for increased awareness of Mad politics and identities in undergraduate and higher education settings, we also are cognizant that such advocacy must come with a

commitment to the politics and community of Mad Pride and Mad Studies. However, as academics, we have had to seek out and find community and did not have Mad Studies or Mad Pride within our purview as students. We question why it is that we did not encounter Mad community or theorizing within our respective undergraduate programs of study.

Maddened

We are well aware of how the neoliberal conditions of higher education madden students and others and lack of care and support for students with mental health disabilities. Sanist spaces, such as higher education, which require performances of compulsory able-mindedness (Chapman, 2013), are often located as sites of reason and rationality (Dolmage, 2017). Accordingly, for those who fail such expectations or are positioned as outside of rational personhood, there is an almost taken-for-granted exclusion, or an effort, as Dolmage (2017) articulates, "to ensure that students who move, think, or express themselves outside of a narrow set of norms will not thrive or survive in college" (p. 35). Accordingly, institutions themselves, and their policies for accommodations (who does and does not qualify for accommodations and the labour involved in receiving access to accommodations) and the neoliberal competitive and hierarchical climate of grading and assessment, often *madden* and thus exclude students whose psychological and/or emotional distress is deemed outside of the bounds of the institution. Within our stories, encounters with assessment practices that perpetuated stress, such as standardized examinations and verbal presentations, the requirement of ascertaining specific averages to remain registered in programs, and competitive scholarly

atmospheres, which encouraged competition and evaluation amongst and between peers, produced stress, anxiety, and ultimately, further psychiatric treatment and intervention.

Maddening

Through our experiences as undergraduate students who encountered mental distress and difference, we consider more caring and affirming pedagogies in our practices as current university faculty. By maddening higher education, we seek to cultivate a climate where our students can feel supported, particularly as they navigate any episodic encounters with madness. Given that higher education functions through a temporal timeline that has strict deadlines and due dates, we aim to have our practices encourage a culture of understanding and care so that students can still be academically successful while navigating stressors and disabilities. Cranford and LeFrançois (2022) describe how a maddening approach, in the context of social work, is "thus wedded to individualistic, coercive, controlling, pathologizing, and neoliberal interventions" (p. 79). Through these pedagogical interventions in our teaching, we are not only seeking to cultivate a more accessible environment for our students, but *madden* the notion that some students, faculty, and people are "unfit" for higher education or do not belong.

Conclusion

In this article, we have provided duoethnographic reflections on three themes from both our undergraduate learning experiences and our current teaching of undergraduate students as faculty members through the frames of (a) mad, (b) maddened, and, (c) maddening. We provide these themes to both describe and retell our lived experiences as mad(dened) people who have navigated teaching and learning in undergraduate

education. We draw from our lived experiences in our teachings and pedagogy to provide an affirming and mad-positive approach to teaching that asks students to consider themselves as what Snyder et al. (2019) term *knowledge producers*, whereby students are able to question, contest, and learn by knowing that their knowledge and experience is "welcome and even necessary to the success of the course" (p. 491). Through this, we hope to cultivate a teaching and learning environment that values Mad experience and knowledge. Through this work, we acknowledge that much of our recommendations are informed by our lived experiences and positionalities. Thus, further work is necessary to engage with the intersectional experiences of those who navigate higher education with mental health disabilities from a multitude of racial, gender, and class-based identities.

As Castrodale (2017) articulates, Mad pedagogies and praxis in higher education necessitates "openness, respect, curiosity, and reciprocity" (p. 57). These are tenets we strive to embed within our teaching as we reflect on experiences within undergraduate education that involved loss, shame, feelings of failure, and ultimately, exclusion. While our undergraduate learning experiences were not always affirming in ways we needed, we now have opportunities to be curious and inquisitive about and critical of the ongoing systems of ablesanist exclusion within higher education. Our hope in co-writing this article is that we can continue to bring awareness towards how many of us navigate trying systems of exclusion within higher education and still remain within its periphery as faculty and employees. Even as faculty, accommodations and required access needs are difficult, if seemingly impossible, to receive for our various psychosocial disabilities, and yet, we persevere and continue to teach and practice through an ethic that centers care and

inclusivity. In this, we hope that, despite the ongoing dominance of academic ableism (Dolmage, 2017) and neoliberalism within higher education, there might be possibilities for ongoing change in the future.

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