

Psychology's Feminist Voices Oral History Project

Interview with Rachel Liebert

*Interviewed by Alexandra Rutherford
New York, NY
March 29, 2012*

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RL – Rachel Liebert, interview participant

AR – Alexandra Rutherford, interviewer

AR – What I need to have you do is state your full name and place and date of birth for the record so that we can identify the tape if it ever gets lost, which it won't because we keep them under lock and key.

RL – (Laughs) Rachel Liebert, and I was born in Auckland, New Zealand, Aotearoa, New Zealand on twelfth of March, 1981.

AR – Great. Ok, well we'll start with our basic question, which is, can you tell us a little bit about how your identity as a feminist developed?

RL – Yeah, I think identifying with the F word started probably during my post graduate honours degree in Aotearoa (New Zealand), and I think I did a course with Virginia Braun and it was on critical qualitative methods and there was a lot of feminist stuff in there. She was a feminist psychologist, and that just totally shook up my world. It was actually almost like a violent process. I just felt like everything I thought I knew about my being and the world, my relationships, just got pulled out from under me. It was quite powerful.

AR – Can you recreate the process of that? How did that happen?

RL – The process itself was mainly through engaging with the readings she had assigned, and then getting us to reflect on those. So we would keep a journal and it was a project in reflexivity, so it was not just critically reflecting on the readings, but thinking about how we interact with them and how they spoke to different relations of power. It was the journal writing part of it, actually, and then at the end of the semester, our assignment was to go back on our journal and analyze our process. It was profound. It was really profound. It was huge for me. It had shockwaves throughout my life. It was massive. From that moment, that made me also cast a gaze back on my past and see a lot of my interactions and a lot of my experiences through this analytic category of gender.

AR – Tell me, what was it in the readings that was causing this kind of transformation in your way of thinking?

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RL – A lot of it was around epistemologies, so kind of questioning truths and looking at the link between knowledge and power and wondering what “real” was. It was also starting to realize that so many of my relationships with people and my experiences of being in the world had been enacted within this, kind of, patriarchal system. So I was, in many ways, complicit in the marginalization of myself and the marginalization of other women and the marginalization of many, many, many other communities in the world. It was both like a coming to consciousness about my own oppression, but I think more importantly, it was a coming to consciousness about the interconnectedness of my privilege with other people’s oppression. It was kind of both. It was really huge.

AR – Wow. Taking yourself back to that time, you said that it caused you to look back on your life through this different lens. Were there specific things in your life that you looked back at and thought, oh, that’s a moment when I did this or when I was implicated in that?

RL – I’m trying to think of when I looked back and saw what I may have been complicit in. I can’t recall. It’s funny, I blocked it. But I looked back and I thought a lot about my childhood, and growing up with my mother on welfare and I had two and then three brothers and we were really, really poor and we grew up in a very, very white middle class neighbourhood. I think I just suddenly looked back and my mum experienced a lot of abuse from my father and from boyfriends after that, which I witnessed as a child and then as a young women. I also witnessed the stigma that she experienced as a single women, within our community, and her strength throughout all of that. And her creativity and her commitment to her relationships and art and to us, to her family. I think it was being schooled and converted to feminism that enabled me to look back and draw on that as the source of expertise that I had been brought up with through my mom. Then at the same time, I started to look critically at the community that I was brought up in, in terms of gendered and classed dynamics. It was huge. It was really huge.

AR – So what happened after? How did that effect where you went from there?

RL – At the time I was working at a large community mental health non-profit, and in New Zealand it’s very common to go to school full time and work, like, 20, 30 hours a week, and so that’s what I was doing. So while I was going through this process of becoming politicized, I was working at this community mental health organization which was very, very, screwed up in terms of its dynamics in the hierarchy, and [there was] a lot of bullying, particularly in terms of my boss [who] was a woman who was diagnosed with having a mental illness and she was the senior consumer advisor. Her job (and I was her assistant), was that we would make sure that people who used the services had their voices heard and got what they wanted out of the services.

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What I witnessed was that this was totally just lip service. As she became more and more vocal about what people wanted, she got bullied and bullied and bullied into madness. Deep madness. I became her personal assistant as well as stepping up and taking on her

managerial responsibilities. I was only 22 or 23 years old and it was a huge NGO (non-governmental organization). As I was learning all this stuff at school and becoming more politicized, it was also giving me these tools to recognize how power was playing out and how injustice was playing out in my workplace. I began to place different systems and structures and move around and became very, very active in trying to change things in this NGO. Then I, too, got black listed. I got my emails blocked. It was very traumatic for a first job out of university, and I, too, got pushed out of the organization.

From there, I took my new tools and my new, fierce outrage and started working for another non-profit. I was a community mental health promoter for young people. Then I started working for an anti-discrimination campaign around madness. What I did was, in this anti-discrimination campaign, while we were on a national level, it was encouraged that we draw on the medical model to reduce stigma and discrimination. With the support of some incredibly inspiring colleagues, we flipped it. The way we saw it was to undermine the medical model. We spoke about things like homophobia and colonization and sexism and racism, rather than medicalization. That was the first place that I channelled all my new energies.

AR – How did that go over?

RL – It was amazing. It was very provocative and we pushed a lot of buttons and raised some quite heated discussions on quite a high level at some points. In some ways it worked, like in the strategic plan for the organization they decided to stop using the phrase mental illness for a while, and things like that. So it was nice. It was myself and a woman called Sam RB, and we got a good reputation. There weren't very many people working in youth mental health from this kind of angle in New Zealand, in Aotearoa, so it was ok. Also I look back now and I think [that] neither of us were seen as a threat. I think what we were offering and what we were doing, people found it kind of exciting and progressive, but not threatening.

AR – Why is that, do you think?

RL – I think because of our queerness and our madness and our youth. We were almost token, I guess, in a way. I don't think we were really threatening power structures. I think if we were, we would have come up against more resistance.

AR – Let me go back a little bit, because you mentioned this politicization happening during a post graduate, so first of all, what was your path to university like? You mentioned coming from a poor background, so how did your path to university go and why psychology?

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RL – Yeah, why psychology? I ask myself that everyday (laughs). Why psychology? Why did I do it? I was really, really, really inspired by my mum growing up and by her values around connecting with people. Also, as I got older and older, I connected much

more with taha Maori which is the indigenous culture, and that's much more about people and relationships. This was my thing. I like people, so I do psychology. I read this all the time from people now thinking about psychology. So I started doing psychology and I just hated it. I just hated it! At the time I had gone through this big shift, so I just remember in my head just feeling like it sucks the life out of life, the human out of human, the soul out of soul. I felt like all I was being trained to do was to take things that I already knew from being a human being and to remember the name of the white man who named it as something first and what year he did it in. That didn't make sense to me. It wasn't rich, and I was really, really disappointed.

There was one class by a man called John Read who took a much more critical perspective on madness. He did like, one guest lecture in this whole year and that inspired me and intrigued me, but it wasn't enough so I quit. I dropped out of psychology and I started taking law instead. Then I realized that law managed to take the justice out of justice (laughs), and I was like, "You know what? Rather than learning rules, I'd rather learn more about connecting with people."

So I went back to psychology and just grinned and beared it. I actually mainly focused on biopsychology and neuropsychology and was quite seduced by that, and I turned out [to be] really good at it because for me it didn't require much stretch. I could learn stuff. I had good study skills and I could learn stuff. And I did well! So I graduated with a degree in psychology and geography, and then I started working at this NGO and decided that I needed to go back to school because things weren't right.

So I went back to school and I was going to go down this same path of doing very mainstream positivist psychology, but a really, really dear friend, one of my closest friends had done a women's studies degree and a psychology degree and she begged me to take a critical psychology course, which is why I took the one with Ginny Braun. I took it, and like I said, it changed my life. But it was also the hardest thing I've ever taken. Not just what it did in terms of my emotions and my politics and stuff, but I've never had to think and try so hard. My grades dropped and I've never, ever been pushed like that before. It was so incredible. So incredible.

AR – So it was a lot different from memorizing neurotransmitters.

RL – Exactly. Which now comes in handy because I'm not intimidated by those models and I can critically engage with them, but so, so, so much more difficult because it's so much more slippery, I think. That's what gives it its awesomeness.

AR – So you took the class with Ginny. Tell me a little bit more about that period of time in your master's. Is this during your master's?

{14:58}

RL – No. In New Zealand, we do an undergraduate degree which took me four years because of all my stopping and changing (laughs), and then I did one year called an

honours year, and so it's called a post graduate honours (I don't know what it's called here) and you just do coursework and a research apprenticeship which I did with a social psychologist. I did a quantitative project. Then I decided to do my master's. That was when everything kicked up a notch. That was the beginning.

AR – Did you work with Nicola for this?

RL – Yeah.

AR – Ok. So tell us how you got hooked up with her and what you did for your master's.

LR – Ok. Nicola and Ginny are the two critical feminist psychologists at the University of Auckland. We read one of Nicola's papers for this class with Ginny. I think it was the one she did on post-structural discourse analysis.

AR – In PWQ (Psychology of Women Quarterly)?

RL – Yes. So I read that and I thought, "Wow, this is amazing."

AR – Other than Ginny's course, was that your first exposure to critical methods or qualitative methods?

RL – That paper?

AR – Yes.

RL – That paper was given in the course and the whole course was on critical qualitative methods. Then I saw on the website that she does stuff on women's mental health and I was working in mental health. I had actually been reading and thinking a lot about insider/outsider research through Ginny's course. At the time, I was thinking, "Oh, it's best if you do research when you're an insider." I was kind of in that camp.

At that point in my life, I believed that I had a mental illness. I didn't quite identify with it as that, but I had been diagnosed at a young age with depression and had been told (because I had done all this neuro stuff) that I had a serotonin imbalance. I was definitely in those kinds of worlds. I approached Nicola and [said], "I'd like to do a project on young women's depression." And she was like, "Why?" And I was really nervous about talking with her because I was so intimidated and it took all my courage to go and see her, and she [asked,] "Why?" I [said], "Aren't you supposed to do insider work and stuff?" And she really just kindly sat and listened and I remember she just handed me this book by a guy called David Healy called *Let Them Eat Prozac*. It's a book that looks at how antidepressants cause suicidality and aggression and how those adverse effects have been erased partly because of the dominance of the pharmaceutical industry, and constructing how we think about madness and how it should be treated.

{18:04}

So she just handed me this book, and it had just come out, and I didn't know anything about what it was whatsoever and I went away and I read it. It changed my life again. These were huge times, because suddenly, I was like, "Oh my God, the whole serotonergic theory of depression is a myth." I was suddenly liberated from my own biochemistry. I felt so alive and free and angry. I became really committed to this project, to spreading the word and seeing it in terms of social justice.

So Nicola and I decided to craft a project together where I would explore the suppression of evidence of these adverse effects from antidepressants. I interviewed nine people who had had personal experience of having either their loved ones [commit] suicide from antidepressants, or they had become very suicidal or aggressive themselves. I interviewed I think 11 or 12 people [who were] professionals, working in the field or working with antidepressants somehow.

AR – I've read a little bit of this work, but because I have you in front of the camera, would you be able to describe what you found?

RL – Yes. With regards to my interviews with the professionals, I became really interested in how they accounted for continually prescribing the drugs, even though they knew that they caused such serious adverse effects. I looked at how they constructed notions of benefit and constructed notions of risk and how they framed the adverse effects that people got from pharmaceuticals in terms of that it was actually the underlying disorder rather than the drugs. So they would locate the problem.

Gosh, it's hard for me to remember. It feels like it was so long ago now. I looked at constructions of responsibility and notions of evidence-based practice, because they were much more likely to, as doctors and clinicians, they were likely to be really busy and they really located the decisions they needed to make within a very, very, quite oppressive structure in New Zealand where they have to churn out all these patients all the time and make these diagnoses and prescribe all these drugs. The only time that they could really engage with the research that was being produced was through drug company reps or through the research that was produced through drug companies and things like that.

Most of all, they erased the significance of people experiencing these adverse effects by saying [that] it's not the drugs, it's your disorder, or the risks are outweighed by the benefit. Even if you don't necessarily get it from the drugs, the broader public does, and if we let the broader public know about these adverse effects, they won't take them anymore. My project zoomed out very quickly to look at why we, as a society are so invested literally and metaphorically in the use of these drugs that we want to ignore that they have these adverse effects.

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Some of the most interesting work for me was just talking with people informally about my project and they would get so angry with me for doing it. So angry. They felt like I

was undermining the intensity of depression and they felt like I was saying that no one got benefits from the drugs. It was interesting to me how the fact that the drugs could cause these adverse effects didn't seem to be able to co-exist with people feeling like they got benefits. I do critically engage with the notion of benefit, I think it's quite constructed. [I also found it interesting] how people say (I get this all the time with my work now), whenever I critically engaged with categories of madness, people immediately think I'm saying that madness doesn't exist, [and] that people's feelings don't exist. That's absolutely not what I'm saying at all. Absolutely not. So that project was huge. I had some really, very intense experiences through doing it.

AR – Tell me a little bit more about the process, both of doing the interviews with the professionals, but also with the relatives of people who had committed suicide and people who felt suicidal themselves. What was that like?

RL – It was such an honour to be invited into peoples' lives and to [see] the outrage and the deep, deep sadness and confusion. [There are] some very clear memories I have of that. There was one woman I remember. I used to drive an old vintage car and I remember driving by myself across the north island of New Zealand, Aotearoa. It took, like, seven hours. I was driving through mountains and valleys and everything. Basically, I was going from coast to coast to meet with this woman whose daughter had suicided from taking Prozac. There was so much...I don't know what the word is...anger or shame or something about the fact that she was trying to draw attention to the fact that Prozac had caused her daughter's suicide that she wasn't even allowed to speak about it in her own community, or even to her own husband who was the father of her daughter who died. So we had to meet in secret in the basement of her friend's house. After [about] three hours of interview, we moved for another few hours to sitting in her car in a car park and [she] just showed me all these files and [there was] a deep, deep, deep connection with a stranger. I was about the same age as her daughter. It was really beautiful and powerful. And then I drove home for seven hours back through the valleys and stuff. But it was a very dramatic moment.

There was that woman, and then there was another woman. People always said to me, "You have to interview people who benefit from the drugs. You can't just get one side of the story," which again I always find is a really interesting argument that people give. Especially when we so often only hear one type of story, right? But as soon as we try to present alternatives, we say that we need to give the full story suddenly.

So there was a woman who, when I was interviewing her about benefits she received from the drugs, I realized through our interview that the couple of times when she had really dramatically changed her dose, she had actually made suicide attempts. I [thought], "Well, who am I to make these connections?" One thing that was definite though, was that she told me during the interview that she was pregnant and still taking this SNRI (Serotonin-norepinephrine reuptake inhibitors). I was really concerned because I knew that the drugs could affect the fetus, but I didn't say anything. Afterwards, I remember journaling about it and thinking, "What do I do? What's my role as a researcher in this

moment? Should I offer her this information?" I knew she had doctors and clinicians and people that she was engaged with and I [thought] she had a support network.

{26:09}

Then I found out about three months later that they had decided that the drugs were harmful and they stopped them and she suicided. She jumped in front of a train, an over-ground train, and she was six months pregnant. At her funeral, there was hundreds of people there and I was there and her clinical psychologist stood up and was saying to everyone [that,] "It's so sad that she died because she had this mental illness, and if only we had more awareness about this mental illness and more people took treatment for it, and if only she'd stayed on the drugs." I was just so devastated that that was how her death was being framed and it just felt so wrong. She had told me other stuff during the interview about things that had gone on in her childhood and both her sisters had suicided. But to have everything in life reduced to a mythical biochemical imbalance [was devastating]. The politics and injustices of those kinds of models were really screaming at me through this project.

AR – Much of your work could be characterized as the politics of mental health and illness.

RL – Yeah.

AR – Clearly there are connections then with feminism, but can you tell me a little bit more about how you connected up your feminism with your psychology?

RL – Yeah, well as you bring that up, it made me realize another really stand out moment for me about becoming kind of converted to feminism was reading Jane Ussher's book *Women's Madness: Misogyny or Mental Illness?* I'm sure it was her book. Very, very near the end, she wrote one line [that was] something about [how] women will be liberated or we'll all be free when we're free from sexual violence, when there's no sexual violence left in the world against women. That stood out to me so strong because it had never, ever, ever occurred to me that that kind of world was possible. It never occurred to me to challenge the existence of sexual violence. Do you know what I mean? I just figured it was the water. So suddenly it was possible and another world was possible [which] made me realize that the world we were in right now needed to change.

It was people like her, feminists who really wrote about madness and stuff that really helped me to bring these two worlds together. But I think of my feminism in terms of my process rather than my content. I definitely don't seek to just have female participants, for example, but I do like to use gender as an analytic category, as intersecting always with race, ethnicity, sexuality, disability and class. In terms of my process, I think of my feminism as really, really helping me to think through things like relations of power to really embrace or value the richness of bodies and feeling and different epistemologies and ways of being in the world that can usually get really marginalized in a really very

heavily positivist discipline. Therefore, [I use] more creative and collaborative research methods.

{30:14}

AR – I was going to ask you to speak a little bit about methods and your take on method.

RL – Yeah. I really, really see the political value of quantitative methods, [but] they're just crazy-making for me if I try and engage. If I try and design a quantitative research project, or even a survey or something, which is qualitative but can still be quite positivist, anything that tries to force our ideas into categories, whether those categories are represented by numbers or not, is crazy-making. I just can't pour our world into there. I find it so, so difficult, so I always go for methods that allow me to blast things out and make very, very diverse connections.

AR – Yes, and that don't force a priori the researcher's assumptions on the data in a way, which is a very feminist thing to have the participants speak from their lives and then only afterwards try and make sense of it, right? As opposed to slotting people a priori into categories and asking them to respond in certain ways.

RL – Yeah! Exactly. So [it's] very emergent. I like really emergent work. It's exciting. It's so exciting. The most recent project I've done with women actually diagnosed bipolar, I did these very in depth, one on one interviews and I actually brought in representations of bipolar that I had found in my archival research and I also brought in all different arguments that I found about the rise in bipolar disorder diagnoses and asked them what they thought, including critical arguments. Together [we] did this collaborative analysis of them. I learnt so much from doing those.

AR – I want to get you to talk about the bipolar project because first of all, I don't know much about it, so I'd like to hear you talk about it some more, but let me go back to your biographical trajectory. You did your master's degree with the SSRI (selective serotonin reuptake inhibitors) study in Auckland.

RL – Yes.

AR – Then, at least from your CV, it looks like you made the jump over the pond here to the U.S. Can you tell me about that decision and transition?

RL – Yes. While I was doing my master's project, I was working at this new NGO on this campaign around discrimination about madness. Part of that was facilitating a youth group called Vibe, which was for young adults who used mental health services. We, inadvertently, were doing a lot of participatory research in a way. We were exploring some of the issues around being diagnosed and issues around using mental health services. We were using explorations of people's lives to build resources to make change in the youth community around conceptions of madness, or how people responded to youth madness. So we made a documentary and we made community murals and

handouts and things like that. As I was doing that work, I [thought], “I love this stuff! Should I keep doing it?” Could I learn how to do it more systematically, because I often felt like I was just jumping [around], and I still do now. Now I’m just kind of enjoying swimming around, but at that point, I [felt like I needed] to be more linear.

{33:54}

I knew about Michelle Fine’s work through doing my master’s. As with so many people, I was completely seduced by it. It’s wonderful. I also had come across Leonore Tiefer’s work in my master’s project around her activism around the pharmaceutical industry (her scholarship and her activism). Both people struck me as straddling this hyphen between the academy and political change. Both happened to live in New York, and I always wanted to go to New York. For me, the only way as a New Zealander that I could get a visa to live here was to go to school. So I applied for a scholarship and got it and came.

AR – Wow. How was that transition for you, personally? Was it your first time?

RL – Yeah. It was amazing! I love it here. Everyone was telling me I was going to find it really hard, but no! The vibe here, the energy just resonates with me. It just felt so right. It was like this is where I’m supposed to be right now. I am very, very privileged to, in a way, have seen my dream come true. I still feel like that actually. It’s been five years and I still feel like that.

AR – Great. The dream continues.

RL – Yeah. I’m not waiting to wake up, but I definitely feel very aware that this is an amazing opportunity.

AR – How did your family feel about your coming?

RL – They’re pretty bummed out (laughs). I miss them a lot and they miss me a lot, especially my mum and I have a twin brother. It’s been a long time. I don’t come from an academic family, so it’s not like they’re stoked that I’m doing my PhD so it balances it all out, you know? My mum [is] lovely, she’s extremely supportive, but she just [wants me to] come home. Like I said, there’s just this huge influence of relationships and family and I feel this huge pull to go home and give back to my community and to make change in Aotearoa, New Zealand, because there are so many injustices there. It gets represented as this idyllic little island and this bi-cultural paradise where it was the first place women got the vote, but it’s exceptionally racist and sexist and homophobic and even saying that is unpatriotic. We’re not allowed to name the injustices in our country because it’s seen to undermine our identity as a people. Yet, by being patriotic and nationalist, we erase the experiences of so many people in New Zealand, including Tangata Whenua, the people of the land.

{37:22}

So I feel very, very, very committed to having learnt these tools here and learnt how to see injustice, and now that I can see in a different way, I'm equipped to look back at the water that I grew up in and be able to see more of what's going on in that it's becoming much more neoliberal there and I need to go back. I miss the land. Very, very much, I miss the land. It's hard to be away. But my family is, well, we're dealing with it.

AR – Let me ask about the connection between activism and academy for you because clearly that has been a tension that you have felt and written about and lived, that is, how to be an activist in the academy. Can you tell us a little bit about that tension for you?

RL – I guess I find that, actually, it's that tension that just propels me forward. There's just this constant questioning of what I'm doing here, what I'm contributing to when I'm in the academy, [and that's] what makes me always seek ways to fulfill what I see is a responsibility and ethic to social change and justice in the community. My research project with Nicola, it was my own reflexive thinking about my process and thinking about ideas of objectivity and subjectivity and how or when politics should enter my project. Going through that process and [realizing] it's always a political project. It's just where we want those commitments to lie or whether we want to witness them. So through Michelle's work, that became framed as a social justice activist project for me. So that was my beginning, and then I was able to come here into this program where many, many people do activism as well as scholarship. I see them very, very much as informing each other. [They're] always informing each other.

AR – Simultaneously as you're combining scholarship and activism, you're also involved in many different forms of activism. Can you talk about a few of those forms?

RL – I guess generally what I have a reputation for is being involved in the New View, which is Leonore Tiefer's campaign to challenge the medicalization of sex, and more specifically what she would understand as female sexuality or female sexualities, especially looking at the role of the pharmaceutical industry but more recently the rising industry of female genital cosmetic surgeries. Again, it was an extremely nervous meeting [when] I first connected with Leonore in 2008, four years ago, and they were just starting to do this project about these surgeries.

I was invited to their initial meeting and she doesn't know this actually, but Nicola (my supervisor from New Zealand) was visiting and I was going to go with her and at the last minute Nicola couldn't go. I was so intimidated by Leonore and by the idea of going that I just freaked out. Then I set myself up and I said in an email that, "I can't come but assign me a task and I'll do it." I pressed send and I was like, "Send! Go! Go!" I sent the email, and then of course Leonore came back and was like, "Alright, here's your task," (laughs).

{41:36}

So I hadn't met anyone in this group yet, but my task was to go around all the female genital cosmetic surgeons in New York City and take photos and scope them out for a

street protest or rally. So I had to take photos from the outside of the building and see what the sidewalk was like, but also go into the reception area and take photos and take material that they had, like promotional brochures, and note down the security.

AR – Wow. A covert operation!

RL – A covert operation. So I dressed in my best Upper East Side hetero-normative outfit and said that I was a medical sociology student at Columbia University and [that] I was really interested in how medical technologies were involved in the liberation of women. I knew that they used a lot of feminist discourse in their promotion of these surgeries, so [I thought] I'll just use it to stroke their egos a little bit. That was my persona and I managed to go around and really intensely document all these different offices. Then when I finally got to the second meeting and I actually turned up, I could contribute something. I had all these little packs of photos with all this information mapped out and Leonore and the other people that were there were just like, "Woah! Who is this?"

So that was my entry into the group. She was just so thrilled that I did what I said what I was going to do. That's actually something I learned quite early on in my life, that if you do what you say you're going to do, or at least try, and then keep communicating about how you're going, then people seem to really like it. It's amazing to me how much it's valued. It seems so simple and obvious.

AR – Sometimes the simplest things are the most effective.

RL – Yeah. Anyway, that was my beginning with New View. So [for that] rally we made, with the help of my roommate, these giant vulva puppets and we did this guerilla theatre performance outside a surgeon's office, and a lot of other campaigning work. Then we had this exhibition called *Vulvagraphics* the following year and we exhibited a lot of local artists who do work around the vulva. So the first time, our angle was raising critical questions around the surgeries, and our angle the second time was celebrating genital diversity, which for me means diversities around sexualities and bodies. The next year we had a counter-conference in Vegas and the main thing I contributed to this year was I co-wrote and produced, with a dear friend of mine directing it, a video called *Dr. Vajayjay! Privatize those Privates!*. It's a spoof video of Dr. Vajayjay training other cosmetic surgeons how to get into the business of the surgeries.

AR – What have been some of the reactions to this work that you've encountered?

{45:09}

RL – People are usually fascinated by it, and it's funny [because] in a way it's become my identity even though it's not really my kind of research or what I do. To me it's more my activism and my art. It's how I get my creativity out there. By in large, people are ok with it. They're not too uncomfortable with it. They like talking about it. It kind of makes them laugh. Their immediate response is to be judgmental around women who get the surgeries and pretend that they wouldn't, and that those women are stupid [because] if

they're going to fall for the marketing that they kind of deserve it anyway. It's quite similar with a lot of people when we look at representations of women or whatever in the media. Most people think that they're immune to its messages. Most of the people who I directly engage with, that's their response around it. They're shocked. They're shocked that it exists.

Then, indirectly, the kind of feedback that we get from people who leave comments on things or write us emails and the like, they're kind of angry that we're challenging women's choice and undermining the suffering that they feel that women have around their genitals and therefore how they should have the freedom to respond to their suffering through these surgeries.

AR – Which is a response you got, it sounds like with the SSRI work and so on.

RL – Totally. Yeah. It really, really is. I definitely feel like I do very provocative research and activism.

AR – Tell me about the evolution of the bipolar project then. How did that come to be?

RL – It came to be because I was in New York and I suddenly looked around one day and I realized that at least half a dozen of my friends, female friends, mainly queer, many women of colour had a diagnosis of bipolar. And I was like, "How did this happen?" When I worked on mental health in New Zealand, bipolar was a serious mental illness mainly confined to the walls of a mental health institution. Suddenly, it's almost like the diagnosis de jour. It almost felt like the new depression in the way antipsychotics were used was becoming so much the way antidepressants were used, I felt. They were just very, very, very normalized. I wanted to know why. I just wanted to know why, and I really didn't know. Because of my work around SSRIs and depression, I knew to look at the pharmaceutical industry and see what was happening there.

So I had that as one of my starting points and I documented 30 years of representations of the bipolar figure in pharmaceutical advertising. From there I became fascinated and there was just this boom in bipolar and representations of bipolar and then also shifts in how it was represented in the mid '90s. I became really intrigued by what was going on in the world and [in] mental health in the mid '90s, and it was the DSM IV, among other things. Then there was another really interesting shift and reconfiguration of the way it was represented around the turn of the century. So I began to look at as we shifted more into these politics of securitization and risk and starting to manage risk and treat uncertainty, I started to look at how that was also coming through the way we do madness. Researchers and clinicians and people themselves. This is my latest work, trying to see how it's embodied. I've become fascinated by the circulation of risk and how politics and security and surveillance have entered our psyches.

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AR – You are well aware that we live in a particular era in which many, especially younger women your age, disidentify with feminism. I wondered if you could talk a little bit to that contingent. I'm not exactly sure what I want you to say. The question is not loaded, but I guess I want you to talk about why feminism is something one should identify with. What are your thoughts on maybe why people don't?

RL – I am not entirely comfortable with the identity of feminist. I move in and out of it, but at the moment I more think of feminism as a verb with an 's' on the end (laughs). I feel like it's more something that I do and a commitment I have in my process.

AR – As opposed to an identity?

RL – As opposed to an identity or something I have.

AR – It feels too fixed.

RL – Yeah. I think part of that is because I'm totally aware that this is in large part because of the way it's been represented and the politics of the representation, but it's still very, very coded as white and liberal to me. And middle class. And able-bodied. And even to some degree straight, I think. I'm worried about using the category and the word because I'm worried about who it excludes and that's the sense that I get from people, [such as] friends and colleagues and other activists who might be slightly wary of it as an identity or as a noun. But I'm very, very committed to doing feminism and feminisms. I don't know if that sounds too...

AR – No, I understand. I'll maybe just push you a little bit. Do you think it is important or valuable to try and change the connotations of the word?

RL – Yeah.

AR – Or is it enough to say that that was a word that was used in one context and it hasn't changed and so we need to move on, or should we try and re-appropriate the word and make it mean all of the things that you have talked about? I don't know. It a tough question.

RL – Yeah. I like the idea of definitely not throwing it away, but trying to help it. That's what I do in my work, you know, I use it a lot. That is trying to show how it is used in different ways and that it's representation, it's coding as kind of white, liberal, able-bodied, middle class, is a representation that, if anything, has been used to undermine the significance of the movement and the significance of contributions that it's made. I try very much to be aware of the politics of it being coded in that way and of how I am complicit in those politics by maybe not always hard-core identifying as feminist. I even feel uncomfortable saying that, that I don't identify as feminist, because it's like, do I? I don't know. It's just a slippery word and I feel like I just have to be very careful of the context in which I use it because it can signify so much to people and make them really wary and I really respect that distrust that people have. I think in that paper I just wrote in

PWQ with Michelle and Amber, we talked about the importance of both respecting and disproving distrust from communities. I totally respect and get the distrust of feminism and I feel a compulsion or an ethics or something to disprove it, or like the onus is on us to disprove it and actively show that feminism can be something that is inclusive but not homogenizing, and something that can be very radical and politicized. It isn't just about pushing forth this liberal agenda.

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AR – Do you have any - given your sage status now as a senior - advice or words for people who are coming into psychology as a discipline and wanted to do critical feminist work. [Is] there anything that you've learned in your own process that you would want to pass on to them?

RL – Stuff that I've learned from my own process is just total value in connecting with diverse people and really, really listening. Just take much more time to listen than I think we're often encouraged to in the academy, especially in the academy in North America. I think. Also, [don't] just listen but connect with people and do collaborative and shared projects and really try to undo this kind of individualism and competition within the academy. If we can schmoosh the different ways that we produce knowledges out of our different lives, [it] is so generative. Yeah. Connecting with diverse peoples and diverse epistemologies and disciplines. Get out of psychology! (laughs) Be trans-disciplinary. I'm so into that. That would be an interesting question: Can we reclaim psychology? Also, you're making me think. This feminism thing, I really move in and out of it and I think about it a lot. I'll probably look back on this and think, "Oh I can't believe you said that you don't always identify as feminist." But I do feel like it needs to be reclaimed or something and the only way that can happen is with different people, really diverse people, seeing it as useful.

AR – It's a chicken or egg thing though, because as you point out, if it does remain identified with this exclusivity, that is, it excludes certain kinds of people with certain experiences, then how [do we] get those people interested in reclaiming it and redefining it? What has to happen? I'm not sure how to do that either. I think I get befuddled by that fact. I grew up in this liminal space where I'm not as young as you are, but I'm not as old as some other people are and I don't have any visceral reaction to feminism per se as being either exclusive or inclusive. I sort of see it as a blank slate that all kinds of different things fit into, but clearly other people don't have that experience. I'm always curious.

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RL – As you were talking there, it made me think about how feminism can be so useful for finding a point of solidarity and a sense of community. I feel like a lot of people who might be interested in reclaiming feminism or people who might have been excluded from it, a lot of them have their community and their politics under different labels and in different categories and so they don't need it for that reason. But what they are interested

in doing is using gender as an analytic category as part and parcel to the injustices and struggles that they're working with in their community. To me, it's about looking at gender. That's what we share is an awareness of the importance of gender. It's just whether or not we decide to stamp that with feminist and what that does, what stamping it with feminism does.

AR – Is there anything that I haven't asked you about that either of the questions that are there, or anything I haven't asked you about that you would like to have in the interview?

RL – Something that I've really gotten from meeting feminism and moving along my way with it is this valuing of alternative to the mainstream epistemologies. That's what really, really excites me. I think the more that we (we as in feminists) (laughs) can engage with and learn from, like, Afrocentric epistemologies and the indigenous production of knowledge, and spiritualities, and ways of connecting with the land, and doing bodies and feelings, the more that we can make those kinds of connections and engagements I think is cool. That's where there's this potential for just awesome, awesome solidarity. I feel like we need to move out of the academy and not try and use the master's tools, to be honest. I think it's time to not try to be positivists or the "white straight male," but to really form these wicked connections with people who have been doing incredible work and struggling for thousands of years against power and the unjust use of power.

I think it's time to look sideways and that includes with my own work on madness, because a lot of my stuff at the moment is looking at how women's ambivalence around their diagnoses and their treatments is often seen as this obstacle, this problematic thing that needs to be overcome so that then they'll be more likely to have insight into their mental illness and be compliant with their medication. But my project at the moment [looks at] if we interpret those moments of ambivalence, the kinds of questions and feelings that people are having are just so rich in terms of thinking about different ways that we can do madness. That includes madness itself and madness as this embodied commentary with the world. To me, that's a good example of an epistemology that moves beyond positivism and really has something to offer in terms of social justice. I think the more, as feminists, that we can think sideways about what is valuable knowledge and where knowledge is produced, that's so exciting. That's really exciting. Just getting more creative and collaborative in how we think about knowledge [is exciting].

AR – Where would you like to see yourself five or ten years from now?

RL – In the community. Somewhere in the community. I don't see myself being in the tower. [I want to] keep on doing activism and creative, collaborative work. That's what I love. That's what I love.

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