

<http://somatosphere.net/2019/special-issue-the-death-of-the-clinic-emerging-biotechnologies-and-the-reconfiguration-of-mental-health.html/>

Special Issue: The Death of the Clinic? Emerging Biotechnologies and the Reconfiguration of Mental Health

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By Raha Peyravi

The July 2019 issue of [Science, Technology & Human Values](#) has a special issue, titled “Emerging Biotechnologies and the Reconfiguration of Mental Health”.

[The Death of the Clinic? Emerging Biotechnologies and the Reconfiguration of Mental Health](#) (*open access*)

Jonas Rüppel, Torsten H. Voigt

This guest editorial opens with a brief overview of the transformations of medicine and mental health that can be observed since the second half of the twentieth century. New genetics and biotechnologies hold out the promise of overcoming presumed limitations in the field of mental health care, that is, the fact that diagnostic procedures in psychiatry and clinical psychology still largely rely on the narratives of patients and questionnaires, supposedly subjective assessments by physicians and psychologists. It is envisioned that innovative genetic and proteomic tools, (neuro)imaging technologies, and objective laboratory tests for blood biomarkers will enable better diagnosis and treatment of mental diseases. We argue that emerging biotechnologies do not revolutionize mental health, despite their promise to do so. Instead, we observe a pluralization of research and treatment approaches in the domain of mental health. The second part of this editorial discusses the contributions to this special issue on emerging biotechnologies and mental health and outlines how they address some of the gaps in social studies of psychiatry and mental health in the twenty-first century.

[“Now Is a Time for Optimism”: The Politics of Personalized Medicine in Mental Health Research](#)

Jonas Rüppel

Since the completion of the Human Genome Project, personalized medicine has become one of the most influential visions guiding medical research. This paper focuses on the politics of personalized medicine in psychiatry as a medical specialty, which has rarely been investigated by social science scholars. I examine how this vision is being sustained and even increasingly institutionalized within the mental health arena, even though related research has repeatedly failed. Based on a document analysis and expert interviews, this article identifies discursive strategies that help to sustain this vision and its promises: “complexity talk,” “extension,” and “boundary work.” These practices secure its plausibility, protect it from criticism, and maintain stakeholder support.

[Psychiatry and the Sociology of Novelty: Negotiating the US National Institute of Mental Health “Research Domain Criteria” \(RDoC\) \(open access\)](#)

Martyn Pickersgill

In the United States, the National Institute of Mental Health (NIMH) is seeking to encourage researchers to move away from diagnostic tools like the *Diagnostic and Statistical Manual of Mental Disorders* (the *DSM*). A key mechanism for this is the “Research Domain Criteria” (RDoC) initiative, closely associated with former NIMH Director Thomas Insel. This article examines how key figures in US (and UK) psychiatry construct the purpose, nature, and implications of the ambiguous RDoC project; that is, how its novelty is constituted through discourse. In this paper, I explore and analyze these actors’ accounts of what is new, important, or (un)desirable about RDoC, demonstrating how they are constituted through institutional context and personal affects. In my interviews with mental health opinion leaders, RDoC is presented as overly reliant on neurobiological epistemologies, distant from clinical imaginaries and imperatives, and introduced in a top-down manner inconsistent with the professional norms of scientific research. Ultimately, the article aims to add empirical depth to current understandings about the epistemological and ontological politics of contemporary (US) psychiatry and to contribute to science and technology studies (STS) debates about “the new” in technoscience. Accordingly, I use discussions about RDoC as a case study in the sociology of novelty.

[From the Profound to the Mundane: Questionnaires as Emerging Technologies in Autism Genetics](#)

Gregory Hollin

It is widely argued that the final decades of the twentieth century saw a fundamental change, marked by terms such as biomedicalization and geneticization, within the biomedical sciences. What unites these concepts is the assertion that a vast array of emerging technologies—in genomics, bioengineering, information technology, and so forth—are transforming understandings of disease, diagnosis, therapeutics, and working practices. While clearly important, these analyses have been accused of perpetuating theoretical trends that attribute primacy to the new over the old, discontinuity over continuity, and the laboratory over the field. In this paper, I show that in the case of autism, the effects of genomic technologies can only be understood by simultaneously examining the role of questionnaires. Due to shortcomings in clinical diagnoses, genomic analyses could only progress once questionnaires had been developed to address a “reverse salient” within the “technological system.” Furthermore, I argue that questionnaires such as the Autism Quotient have a significance that surpasses the genomic classifications they were designed to undergird. I argue that to neglect the role of mundane technologies such as questionnaires in contemporary biomedicine is to miss complexity, bifurcate old and new, and do a disservice to innovation.

[Neurobiologically Poor? Brain Phenotypes, Inequality, and Biosocial Determinism](#)

Victoria Pitts-Taylor

The rise of neuroplasticity has led to new fields of study about the relation between social inequalities and neurobiology, including investigations into the “neuroscience of poverty.” The neural phenotype of poverty proposed in recent neuroscientific research emerges out of classed, gendered, and racialized inequalities that not only affect bodies in material ways but also shape scientific understandings of difference. An intersectional, sociomaterial approach is needed to grasp the implications of neuroscientific research that aims to both produce and repair neurobiological difference. Following Benjamin’s critique of the “carceral imagination” of technoscience, this article considers how such research may fix in terms of helping, or in contrast, fix by

classifying and reifying, vulnerable subjects. I address the potential for biosocial determinism in linking neural phenotypes and social problems. I use an intersectional approach to consider the presence and absence of race in this body of research and explore how some methodological and conceptual framings of the “brain on poverty” mark poor and minority children for intervention in concert with neoliberal approaches to poverty.

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