# Navigating "madness" and "fatness": distorted spatiotemporalities in experiences of antipsychotic-induced weight gain

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## ABSTRACT

Psychiatric interventions of 'the mind' have unexpected effects on 'the body': antipsychotic medications used in the treatment of schizophrenia can produce side effects of rapid weight gain. Ironically, in an attempt to contain a chaotic mind, antipsychotic-induced weight gain distorts the spatiotemporal orientation of bodies and expanding bodily boundaries, rendering them uncontained. This thesis is about the double stigma of having a mental illness and becoming obese; it is about being both 'mad' and 'fat', and how people struggle for mental health and healthy weight. It explores how schizophrenia and the side effects of antipsychotic medication coalesce in a 'unique fatness' that produces distinctive experiences of time and space.

Drawing on qualitative data with people who have been diagnosed with schizophrenia and have experienced antipsychotic-induced weight gain, and the psychiatrists, nurses and pharmacists who are involved in their psychiatric clinical care, I examine everyday and taken-for-granted understandings of bodies and bodily boundaries. Rather than reproduce a reductionist and Cartesian foci of the mind and the body, I utilise the conceptual orientation of embodiment and corporeal transgression theory (Blackman 2010) to argue that medication side effects transgress bodily experiences of space and time. In focusing on the embodied effects of schizophrenia and the side effects of medication, participants describe juxtaposing experiences of accelerated time ('racing thoughts') brought on by psychosis, with the decelerated temporality of antipsychotics that 'slow things down' yet simultaneously create voracious hungers that produce heavy bodies. While the antipsychotics might achieve containment of some of the clinical symptoms of schizophrenia, the side effects of antipsychotic medication result in rapid weight gain and a loss of bodily boundaries.

This thesis thus challenges assumptions about the nature of 'fatness' across critical fat studies (as socially constructed) and clinical/public health scholarship (as an effect of biology, behaviour or obesogenic environments). Participants' understandings of weight gain did not rely on explanations of energy in/energy out imbalances, but was articulated as 'truly due to medication', and thus at odds with popular and medical understandings of large bodies.

The failure to conform to taken-for-granted expectations of bodies, bodily boundaries and their positioning in space and time has practical implications for the provision of psychiatric healthcare. My findings expose the disjuncture between participants' experiences and public health initiatives around obesity (eating less and exercising more) and psychiatric imperatives for compliance (taking medications 'on time'). Importantly, in bridging the experiences of madness and fatness, this thesis exposes the limitations of dualism within modern medicine and calls for interdisciplinary engagement that helps to open, rather than close, interdisciplinary understandings of the experience of mental illness, medication side effects and obesity.

## DECLARATION

I, Tara Bates, certify that this work contains no material which has been accepted for the award of any other degree or diploma in my name, in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. In addition, I certify that no part of this work will, in the future, be used in a submission in my name, for any other degree or diploma in any university or other tertiary institution without the prior approval of the University of Adelaide and where applicable, any partner institution responsible for the jointaward of this degree.

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TARA BATES

12 November 2015

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