

**NEOLIBERALISM AND MENTAL HEALTH IN HUNGARY:
GENDERED TREATMENT OF ANXIETY IN HIGHER EDUCATION**

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Submitted to
Central European University
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In partial fulfillment of the degree in Master of Arts in Gender Studies.

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Budapest, Hungary
2018

Abstract

The present thesis investigates the effects of neoliberal governmentality on how anxiety is perceived and treated among Hungarian university students. The research is a case study of the peer counselling group of one of Hungary's largest university, ELTE (Eötvös Loránd University). Based on ten in-depth individual interviews with peer advisors – who are students themselves training to be psychotherapists – the thesis examines how neoliberal reasoning, mediated through post-feminist thought and mainstream psychology, appears in the counsellors' beliefs about mental health, self-management and care work.

The research aimed to provide an example of how individual solutions are offered for larger scale structural problems, for instance by locating the source of anxiety in personal deficiency. The prevalence of anxiety and depression is increasing worldwide as well as in Hungary, and the majority of those affected are women. This thesis argues that this phenomenon is embedded in various structural developments caused by a neoliberal governance. The privatization of mental health services, as part of a larger crises of care work, is resulting in the expansion of self-help. Competitiveness and entrepreneurial logic are promoted for women through gender mainstreaming and what can be referred to as “neoliberal feminism”, while higher education is also a site of these developments, increasing perfectionism and competition, and favoring disciplines based solely on their worth on the market.

The peer advisors themselves internalized and mediated these expectations and neoliberal technologies of the self for their clients, however they also had their criticisms of increasingly atomized views on mental health. They recognized structural, economic problems when discussing their peers' anxiety, nevertheless, they mainly ignored gender as a factor in mental health. I labeled their reasoning a “pessimist” post-feminism, that might be specific to Hungary. While they believed women have already achieved emancipation in their professional lives, they identified the prescriptive nature of gender in the case of men, hindering their possibilities of asking for help. Even though, they conceptualized their methods as gender blind, I argue that women worked as a default category for the advisors, who were mostly women themselves. In connection to this, a gendered division of labor emerged through their work as they provided free mental health services for engineering students, who were predominantly men.

Based on these results future research could further pursue the specifics of the applicability of post-feminism in a post-socialist, Hungarian context. Gender based horizontal segregation in higher education seems to play a significant role in students' mental health and the nature of their anxieties. Special attention should be paid for institutional factors behind engineering students increased levels of anxiety. At the same time the mental health of care workers – such as future psychotherapists – is especially important, as they are preparing for the financial and mental burdens of their work, possibly already during their university years.

Declaration

I hereby declare that this thesis is the result of original research; it contains no materials accepted for any other degree in any other institution and no materials previously written and/or published by another person, except where appropriate acknowledgment is made in the form of bibliographical reference.

I further declare that the following word count for this thesis are accurate:

Body of thesis (all chapters excluding notes, references, appendices, etc.): 22,104 words

Entire manuscript: 25,647 words

_____ (Johanna Hirsch)

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Introduction

In the present thesis I aim to demonstrate through a case study of peer counsellors at a Hungarian university how neoliberal reason, that often defines both the causes and treatment of anxiety and depression, is being internalized by young women and men who themselves are going to be psychotherapist in an era that is internationally characterized by a “crisis of care” (Fraser, 2016a). Meantime, anxiety and depression are being framed endemics (Kolozsi, 2017) affecting women in much larger numbers than men, without generally accepted explanation (Bekker & van Mens-Verhulst, 2007). In promoting ideas of individualized governmentality, I suppose a significant overlap between ideas of mainstream psychology and neoliberal post-feminism, both advocating empowerment through increased independence, working on the self, and practicing affective control (Esposito & Perez, 2014; Gill, 2017). Detectable changes in the psyche of individuals are at the same time deeply embedded in recent structural developments of the decline of the welfare state, the privatization of therapy and the growing popularity of self-care as well as gender-mainstreaming, and the possible rise of “neoliberal feminism” (Rottenberg, 2014).

I believe that the changing realm of higher education could be a site where the presence of anxiety is clearly prevalent, often informed by economic facts of enhanced competition and individual responsibility (Curran & Hill, 2017). What is more, while currently women make up the majority of the students in higher education, their participation is not necessarily followed by increased social mobility (Nagy, 2013), which affects their future related concerns. As a university student myself I can easily relate to the anxiety experienced by students, however I decided that I did not simply wish to investigate attitudes of students. I also aimed to examine the treatment of this anxiety and the possibilities of escaping what I conceptualized as neoliberal reasoning, that is why, the subjects of my research project become peer advisors, psychology students providing free counselling at a major Hungarian university.

I assumed the insights of peer counsellors as both helpers and affected peers could be used for forming alternative modes of advising and therapy. By mapping out their attitudes towards issues of gender and anxiety, we could not only gain insight into characteristics of university culture but also learn about the socialization of future psychologists whose beliefs and work later will influence many in Hungary. I was interested in where the advisors locate the source of their peers’ anxiety and what kind of explanations they provide for their difficulties, also if they detect any structural problems influencing these. In relation to this, I felt it was important to take into account what kind of methods and tools the advisors provide for their clients, and

in what ways do they correspond to neoliberal ideals of self-governance. I also wanted to examine their beliefs on gender and to learn to what extent they internalize neoliberal feminist attitudes or in any way answer to the specific needs of women.

I believe this research might contribute to the existing literature both by investigating a site previously not particularly well-researched and by offering new understandings of some key theoretical concepts. While there are some recent studies on the neoliberal shift in higher education, as an environment defined by competition and individualism (Brown, 2015; Curran & Hill, 2017), there seems to be little attention on the gendered effects of these changes. In relation to this, I hope to shed light on the significance of gender based horizontal segregation influencing students' present and future mental health. Another important contribution might be that I aim to conceptualize the otherwise western-focused notion of post-feminism in a specific, post-socialist Hungarian context, where neoliberal reason appears in altered forms which have been lately referred to as exemplifying "authoritarian capitalism" (Scheiring, 2018).

As regards to the structure of the thesis, I start by reviewing and synthesizing relevant literature that the work of this thesis fits into. First, I contextualize the modern practice of psychotherapy in terms of governmentality and technologies of the self, then in line with this, I examine the effects of neoliberalism on the mental being of its subjects. Finally, I explore the gendered nature of neoliberal governmentality, both on an institutional and an individual level, informed by gender-mainstreaming and post-feminism. After this, I observe the particular context of my research, considering Hungary's political and economic system and its relation to neoliberalism, and in connection to this, the state of Hungarian higher education, as well as of mental health services. I also give a brief description of the peer counselling group that provided the site of my research, and an account of my methodological dilemmas and considerations.

For my research I contacted the peer advisor group of ELTE (Eötvös Loránd University) and conducted ten in-depth, semi-structured interviews with peer counsellors. I based my questions both on the literature I reviewed and my personal experiences. After the transcription I ended up separating my data into two chapters elaborating the two underlying topics that I identified through my analysis. In the first analytical chapter I discuss the main sources of students' anxiety based on the testimonies of the advisors, as well as the tools that is offered to the clients to cope with their anxieties. In the last chapter my focus is on gender stereotypes and the underlying gendered relations that defined the work of the peer counsellors in a broader context of a crisis of care.

1. Literature review

In order to understand what implicit and explicit beliefs lie behind the treatment of anxiety in the context of higher education we have to take a look at what characterizes the overarching ideological atmosphere to which the service provided by peer advisors is fitting into. First, to comprehend contemporary changes in mental health services I start by presenting how Michel Foucault's concepts of governmentality (1991) and technologies of the self (1988) can be understood when examining psychology as a science and practice of psychotherapy, based on the works of Nikolas Rose (1998; 1999). Then, since his observations are mostly prevalent in a neoliberal society, I proceed to considering the possible meanings of the term "neoliberalism" and its significance on subjectivity and mental health. Finally, – as my main assumption is that both care practices and sources of anxiety are rooted in gendered relations – I explore recent developments of institutional and individualized gendered governmentality and feminism imbedded in this culture of neoliberalism.

1.1 Governmentality, technologies of the self and the role of psychology

Governmentality does not mean domination, but rather the managing of populations on both a macro- and micro-level. Foucault frames governmentality as the "contact between the technologies of domination of others and those of the self" (1991, p. 19.). Thus, it manifests in organized practices of institutions facilitating governance (for example institutes of education or healthcare), while the individual itself is becoming active participant in governing herself, internalizing dominant ideas of a valuable life (Foucault, 1991). The instruments of this process are technologies of the self, modifying individuals' inner lives (Foucault, 1988). Individuals work on transforming themselves to perfection and happiness. It is their duty for the state to first develop self-knowledge and then take care of themselves.

Nikolas Rose applied and further developed Foucault's concepts to our contemporary societies, ones that can be broadly labeled as neoliberal. He argues that citizens are not governed through explicit domination anymore, but through subjectification, as they are learning socially valued ways of living by the means of education (Rose, 1999). He believes that this new kind of citizen, responsible for their well-being, is controlled by psychology, a science producing normality. Psychotherapy as a field is making the subject responsible for the creation of itself promoting a culture where there is an "obligation to be free", by celebrating autonomy and self-realization (Rose, 1999). Individuals do not require external policing anymore, however the science of

psychology plays an important role in governance by aiming to eliminate maladjustment on different fields (Rose, 1999).

Another central characteristic of this society is enterprise culture, resulting in an enterprising self, individually working on its personal fulfilment (Rose, 1998). Autonomy, responsibility, and the emphasis on personal choice are key elements of the logic encouraging individuals to shape their own life by making a project of themselves, becoming their own “entrepreneurs” by investing in developing their mental and physical health (Rose, 1998). Paid-labor becomes the principal means of self-actualization for the citizen and the same ethics that are valuable for an enterprise become appreciated on an individual level, such as competitiveness or boldness. Psychology plays a role not only by the means of managing human resources, but through individual therapy as well, utilized to increase assertiveness, while reducing anxiety and dependence in the subject (Rose, 1998).

Rose’s observations are shared by practitioners as well, advocating for critical psychology (Fox & Prilleltensky, 1997). Critical psychologists argue that mainstream psychology reinforces western society’s status quo, while presenting itself as a value-free, objective science. These critiques are important for my own research since I aim to apply the approach of critical psychology to the education of psychology. Critical psychologists’ aim is “to make psychology more of a catalyst for social change and less a hindrance” (Fox & Prilleltensky, 1997, p. 5), as mainstream psychology frames mental health problems as being caused by intrapersonal or interpersonal deficits while ignoring social factors. Similarly, feminist psychology draws attention to how psychology can be a legitimizing tool for the social oppression of women locating causes and cures exclusively in the individual (Wilkinson, 1997). For example, for women in their professional lives it is framed as being a consequence of their lack of assertiveness, low self-esteem or their internalized oppression manifesting as a “fear of success” (Wilkinson, 1997).

1.2 Mental health in the neoliberal state

While not all of these authors explicitly talk about neoliberalism, they all agree that many of these individualizing practices are specific to a certain economic and social order, one we are currently experiencing. There is not one definition of neoliberalism as it has different variants,

depending on location and time period¹, but as a complex system, it can be characterized by market deregulation, privatization, decrease in state - and increase in individual responsibility (Fraser, 2013). While this means less bureaucratic paternalism than in state-organized capitalism – criticized by second wave feminists –, it also replaces the welfare state by a “competition state”. A few obvious results of this are decreased job security and depressed wages (Fraser, 2013) as well as what Nancy Fraser refers to as “capitalism’s crisis of care” (2016a).

Wendy Brown’s 2015 book *Undoing the Demos* mainly tackles how neoliberalism is “undoing” democracy. According to her, neoliberalism is not simply an economic system but a “peculiar form of reason that configures all aspects of existence in economic terms” (2015, p. 17). She believes that neoliberal reason within our culture permeates both education and the workplace as “human capital” replaces labor and entrepreneurship takes the place of classical production. I found her thoughts on higher education particularly relevant for my research as it gives a possible explanation to what lies behind the anxiety and lack of motivation among contemporary students. Brown (2015) argues that despite higher education being more accessible and affordable now than ever, it creates less democratic subjects, since education is becoming only valuable in the process of creating human capital. Knowledge is only valued in terms of enhancing capital, as a form of self-investing for Rose’s entrepreneurial self (Brown, 2015). For instance, liberal arts education is eroding and is labeled “passé” – even though Brown believes those educated in liberal arts were less easily manipulated – new generations are pressured to study business or engineering instead of humanities or social sciences (Brown, 2015).

While both Rose (1998;1999) and Brown (2015) are clearly implying that neoliberal reason is effecting individuals’ mental being, others explicitly wrote about how it affects both mental health and its treatment. In the following, I will present some of these contemporary changes relating to mental health. The overarching argument many authors make is that neoliberalism causes alienation by enhanced competition (Curran & Hill, 2017), as well as anxiety over financial insecurity (Ramon, 2008). While anxiety and depression, as well as new forms of addiction are on the rise (Curran & Hill, 2017), at the same time, their treatment is

¹ Even though it is commonly associated with the politics of Margaret Thatcher and Ronald Reagan, possibly the most genuine forms of neoliberal capitalism were realized on the global south. For instance, in Chile under the rule of Augusto Pinochet (Brown, 2015).

individualized. People are expected to adjust their attitudes and behavior to market demands otherwise it is regarded as personal failure or pathology (Esposito & Perez, 2014).

In a process that some call the “privatization of stress” (Fisher, 2011), even though mood disorders like depression are experienced collectively, people’s distress is depoliticized because of atomization (Fisher, 2011). There are two main changes in parallel in psychiatric care which confirm these observations. The first is deinstitutionalization meaning the closing of psychiatric institutions, as a world-wide phenomenon (Ramon, 2008). At the same time the site of care is changing, illnesses are situated within the individual, thus, are increasingly treated by medication (Esposito & Perez, 2014). What is more, as the responsibility from the state shifts to families and communities and self-treatment is becoming more and more common, possibly because of the costs of therapy, there is a decline in the use of healthcare services (Brijnath & Antoniadis, 2016). Based on a recent research (Brijnath & Antoniadis, 2016) neoliberal ideology can be internalized by the patients themselves, who are developing their own strategies or therapy, while framing their depression as a result of lack of self-control.

Yet, it is not only the face of therapy that is changing, but there are detectable changes in the overall mental health characteristics of the population. Some of these changes might be especially detectable in the site of higher education, therefore they are particularly relevant for the present research. The longitudinal research of Curran & Hill (2017) measured a significant growth in the perfectionism of students in higher education. They believe that a market based evaluation of individuals combined with a belief in meritocracy, and higher expectations from families results in increased competition (Curran & Hill, 2017). As a consequence, younger generations show less empathy and solidarity towards their peers. What is more, perfectionism is related to anxiety and mood disorders; the system present in university environments especially enhances upward social comparison and status anxiety (Curran & Hill, 2017). Valerie Walkerdine (2003) argues that the emotional burden in studying in higher education is coming from entering new places that the individual feels alienated from while there is an inevitable failure that is coded in this process. Psychology and its practices can help after the hardly avoidable “fall” experience in upward mobility (Walkerdine, 2003).

1.3 Neoliberal reason and gendered governmentality²

² Some parts of this subchapter are based on a paper I wrote for the Critical Policy Analysis course titled: *Productive and reproductive work on an occupational level: Why is one more important for the European Union?*

In light of all of this, a key question for me, is how neoliberal reason effects gendered relations of technologies of the self and mental health. Nancy Fraser, in her 2013 book *Fortunes of Feminism* writes about a “hegemonic neoliberalism” (2013, p. 160) that is in a “dangerous liaison” (2013, p. 224) with new forms of feminism. She argues that while second wave feminists’ pursuits for recognition were successful, cultural changes were not followed by institutional changes and material equality. Similar concerns were raised by Jemima Repo (2016) who drew attention to usage of gender equality as a tool for enhancing capital. Women’s participations in the labor-market is now painted as a macroeconomic need, policies often portray women as unused potential that needs to be “exploited”. Gender mainstreaming is used for economic purposes, as a tool for competitiveness and growth regarding women as “an untapped source of economic growth and job creation” (True, 2003, p. 370). Repo argues that the EU’s gender equality policies work as technologies of neoliberal governmentality, operating gender as an “invisible hand” (Repo, 2016, p. 311) for shaping individual lives.³ Policies consider gendered individuals as calculating, rational subjects who are able to transform themselves to be better workers or entrepreneurs (Repo, 2016).

It is still debated if today’s era of “gender mainstreaming” (True, 2003) should be considered post-feminist or perhaps simultaneously a new form of feminism is being established, one that Catherine Rottenberg (2014) refers to as neoliberal feminism. Various tendencies can fall under the umbrella term of post-feminism, that emphasize the “past-ness” of the second wave (Genz & Brabon, 2009). Post-feminist tendencies – which are often labeled apolitical – align well with the neoliberal rhetoric that I presented above. Post-feminism underlines personal freedom and is concerned with the micro-politics of individual choices (Genz & Brabon, 2009). The emphasis is on self-empowerment instead of identifying with a common ideology, while feminism is treated as “common sense” (Gill, 2017).

Rosalind Gill (2017) argues that post-feminism is fueled by neoliberalism and exists within contradictions of the media, advocating for empowerment while harshly critiquing women. Messages of autonomy and agency simultaneously exist with intensive surveillance over women’s bodies and behavior. The emphasis on self-surveillance and self-discipline also manifests in the form of affective policing: insecurity and neediness are unacceptable traits for the post-feminist woman while a “cult of confidence” is requiring them to be daring and positive

³ Repo believes that the unspoken aim of these policies advocating for equality is to modify women’s behavior in order to “optimize biological reproduction and capitalist productivity” (Repo, 2016, p. 307) at the same time.

(Gill, 2017). Catherine Rottenberg (2014) believes that this era might not be entirely post-feminist as some suggest, and draws similar conclusions about what she calls neoliberal feminism. Based on Facebook COO Sheryl Sandberg's bestseller book *Lean In*, Rottenberg warns against this new feminist consciousness advocating for "internalizing the revolution" emphasizing personal change, as if there were no more systematical constraints holding back women. As a result of this, women are to feel guilty if they do not "have it all", or do not thrive for success at all cost (Rottenberg, 2014).

An anthology titled *Governing the Female Body* edited by Laura Reed and Paula Saukko was published in 2010 about the contemporary governmentality effecting not only the bodies but also the mental adjustment of women. I find this anthology especially relevant for my research project as it highlights where post-feminist thought is connected to psychology and psychotherapy which is what I try to "catch in the act" through my research. The authors argue that postfeminist narratives of women's self-empowerment and overcoming of dependency effect their intimate lives, with governance manifesting today in micro-politics (Reed & Saukko, 2010). The entrepreneurial self of women manifests itself in increased consumption and various bodily techniques, while magazine culture frames their everyday distress as stimuli for self-improvement (Reed & Saukko, 2010).

Part of the anthology was a comparative analysis of women's and men's magazines, which found that magazines giving relationships advice for men usually offer tools to gain mastery over *women's* behavior and become "experts" of women's emotional life (Blackman, 2010). At the same time, women's magazine's put the emphasis on women's need to know and be able control *themselves* in the context of (heterosexual) romantic relationships (Blackman, 2010). Another study was looking at the change in anti-depressant advertisements in the last decades (Swenson, 2010). Depression has always been framed as a feminine illness, however, while calming and reducing anxiety was more pronounced in earlier advertisements, lately the promise of enhancing productivity is emphasized. The author connected these changes to the "feminization of labor", which equips the good worker with feminine characteristics such as multitasking or flexibility (Swenson, 2010). Similar observations were made by Oulette and Wilson (2011) in relation to the self-help empire of American celebrity psychologist Dr. Phil, who directs his books at women. This new form of self-help books and websites require increased interactivity yet, while they are using a corporate language, referring to mothers as the "CEOs" of the household they are not questioning pre-existing gender relations. They urge

their readers to self-improve, not only to be active participants in wage labor, but also to be selfless caretakers at home (Oulette & Wilson, 2011).

After reviewing this body of literature, I feel grounded enough to conduct my own analysis at my specific research site. There are several parts where I feel my research can contribute to existing literature. Most importantly, higher education seems to be an active site of the reproduction of neoliberal governmentality, however, there is little research on its gendered elements, or in connection to this, the significance of the students' fields of study on how they experience this governmentality. Another aspect in which this research indicates something new is that I examine post-feminism in a specific post-socialist context, as post-feminism is researched mostly in a western-centric frame. Lastly, peer counselling might be an interesting site to examine these phenomena as while in the case of magazines, self-help books or medicine advertisements there is no possibility of mutuality or feedback, peer counselling is a less hierarchical, more reciprocal space of producing self-knowledge. Before presenting my own analysis I first inspect the broader and particular context of my research.

2. Context of own research

In light of the literature I presented, it is important to consider how these phenomena occur in the Hungarian context, or more specifically, at the site of my research, in a Hungarian university. Therefore, in this chapter, first I try to inspect to what extent the term neoliberal can be applicable in Hungary considering significant political changes of the last decade reflected in various policy measures. Then, I proceed by detailing recent changes in Hungarian higher education and the “gender regime” of its institutions. Finally, I contextualize university peer counselling in the perspective of the current state of psychological care in Hungary.

2.1 Eclectic neoliberalism in Hungary

At first glance, based on the everyday definition of liberalism Hungary seem to be far from a liberal state. In fact, prime minister Viktor Orbán in 2014 in an often cited speech declared the end of liberal democracy in the country and the start of the so-called “illiberal democracy” (Magyar Nemzet Online, 2014). In line with this promise, it seems to be clear that the government is actively dismantling institutions of liberal democracy while establishing a system that can be best characterized by conservatism, populism, anti-pluralism and majoritarian nationalism (Grzebalska & Pető, 2018). Hungary’s illiberalism clearly manifests itself in questions of gender as well, the nationalist-conservative rhetoric is entrenched with traditional beliefs of gendered relations (Grzebalska & Pető, 2018). However, while it would be easy to accept the country simply as an illiberal exception, various scholars (Scheiring, 2018; Szikra, 2014; Vidra, 2018) argue, that examining state policies, Hungary’s case is perhaps more complex and eclectic than that.

Even though the country used to be regarded as a leading example of democratization, now is characterized by democratic “backsliding” (Scheiring, 2018), yet the decline of democratic institutions does not necessarily mean complete disengagement from neoliberal thought or economics. For instance, this administration that advocates against various international organizations is quite benevolent towards transnational companies with a record-low corporate tax (Sheiring, 2018). Authoritarian capitalism might be the term signifying the shift in Hungary, as some claim that “the future of capitalism is not necessarily democratic” (Scheiring, 2018, p. 2) demonstrated by various contemporary examples worldwide.

Historically, after the transition from state socialism to market capitalism Hungary, similarly to other countries of the Central-Eastern European region followed the “blueprint” of neoliberal governance characterized by marketization, privatization, excessive foreign investment, the

domination of multi-national companies and reduction of welfare costs in the 1990s (Philips et al., 2006; Scheiring, 2018). Negative effects of these neoliberal policies included long-term unemployment, increasing poverty, and further social exclusion of Roma people (Vidra, 2018). After the 2008 crisis, post-communist welfare was slowly replaced by a punitive type of workfare state (Vidra, 2018). This “punitive turn” was enhanced by prime minister Orbán, who in 2012 stated that he wants Hungary to be a society based on work, where there is no more need for benefits (Vidra, 2018). These measures do not contradict neoliberal thought completely, nevertheless, they support an intrusive form of liberalism instead of an inclusive one.

Dorottya Szikra (2014) analyzed social policies in Hungary between 2010-2014, during Viktor Orbán’s second administration. Similarly to Vidra (2018), Szikra believes that the current regime’s social policies are eclectic, or even contradictory in nature: they are partly neoliberal, partly neoconservative, and in some cases also étatist (Szikra, 2014). Decreasing social spending in general can be considered a liberal, market-driven approach. Hungary had a remarkably low employment rate in 2010 which was mainly treated by the public work program and the introduction of the shortest unemployment insurance benefit in European Union (Szikra, 2014). Similarly, the obstruction of early retirement as part of the pension reform assumes personal responsibility and the need to be employed in order to be able to sustain a living (Szikra, 2014).

2.2 Higher education in Hungary: economic uncertainty and gendered stability

The eclectic nature of policies that Szikra (2014) mentions can be found in recent higher education reforms as well, even though mostly with neoliberal undertones. In the school year 2017-2018 284 thousand students studied in Hungarian higher education, which means a steady decrease in numbers since the peak in 2005-2006 when there were over 424 thousand higher education students (Központi Statisztikai Hivatal⁴, 2018). There are various changes in the Hungarian education system that might have lessen its fast democratization in the early 2000s, but one obvious turning point was the 2012 higher education reform.

Before, higher education for the majority of students was completely free, but that year the number of state-founded spaces were drastically reduced (Eduline, 2012a). There were some minor palliations from the original law during the last six years, nevertheless the essence stayed

⁴ Hungarian Central Statistical Office (<https://www.ksh.hu/?lang=en>)

the same: students entering higher education have to sign a contract if they do not want to pay a tuition fee (Eduline, 2012a). The contract states that the student has to be employed within the borders of Hungary for at least the same amount of time – in earlier versions double the time – that they spent studying in Hungarian higher education. After obtaining a degree, students have twenty years to fulfil this obligation, if they fail to do so they have to pay back their training costs (Eduline, 2012a).⁵

An important part of the higher education reform, however, was based on neoliberal logic: some fields received more state-funding, while others were deprived of state sources based on their marketability and “usefulness”. The government claimed that the reason behind this is that they want people who can endure with the international competition (Eduline, 2012b), therefore based on market logic more engineers are needed, while less should be spent on humanities or social sciences. In a famous 2012 speech Orbán claimed he does not want more “unemployed graduates brooding in the half-lighted ruin pubs”⁶ which was then interpreted as a reference to students of liberal arts or humanities in general (Eduline, 2012b).

Even if his sarcastic comment reflected the reality in 2012, in 2018 there is proof that unemployment is actually not the biggest problem of students. A recent survey claims quite the contrary: the majority of Hungarian students are already working before finishing their studies (Hámori & Horváth, 2018). Over 35% of those studying in higher education work all year continuously, often more than twenty hours a week, and only half of them works somewhere related to their field of study. 48% of the respondents claimed that they could not afford higher education without working (Hámori & Horváth, 2018).⁷ These are significant tendencies, since time spent with studying a week was much lower among those who were working (Hámori & Horváth, 2018), which eventually might affect academic performance. At the same time drop-out rates are already quite high in Hungary: over one-third of students never finishes their bachelor’s (Szabó, 2018).

Many of these questions affect women and men differently, as even when it is not expressed explicitly, most educational policies are somewhat gendered. For instance, if engineering

⁵ The only way to gain immunity from this law is by giving birth to three children within the twenty years following graduation, which is a truly telling example of the gendered “modus operandi” (Grzebalska & Pető, 2018) of the current system preoccupied with population growth.

⁶ My translation. Original Hungarian: “romkocsmák félhomályában merengő, állástalan diplomások”

⁷ The fact that stipends have not increased since 2007 might also be a factor in students’ desperate financial situation (Szabó, 2018).

programs – where men form the majority – are favored over humanities – where women are the majority – that will have different consequences based on gender. For years now, in Hungary there are more women in higher education than men, and women on average are more educated than men (Fényes, 2009). This is often framed as the one undoubtable success of women’s emancipation (Nagy, 2013). However, even though today every fifth adult woman in Hungary has a degree, their “human capital investment” does not return completely as it is not necessarily reflected in their professional success (Nagy, 2013).⁸

What seems to be clear, is that gender-based horizontal segregation in higher education is essentially unchanged throughout the years (Fényes, 2009; 2015; Nagy, 2013). Women and men choose different fields of study, the dichotomy however, is not as simple as humanities in contrast to sciences, but possibly a more accurate description could be fields that can be considered helping or caring and ones that are technical (Fényes, 2015).⁹ Fields with women in majority are education, healthcare, social sciences and humanities, while fields dominated by men are computer sciences, engineering, and most natural sciences (Fényes, 2015), often referred to as STEM (*Science, Technology, Engineering and Mathematics*) fields (Nagy, 2013). It is not only that traditionally feminine fields pay less, they are also less respected: the feminization of certain fields usually means a decrease in prestige for them (Fényes, 2015).

There seems to be heightened focus in contemporary research on why women are not entering STEM fields (Nagy, 2013). Framed in terms of the importance of human capital, STEM fields play an important role in global economic competition; there is an increasing demand for STEM field graduates. In Hungary, engineering and computer science receives priority state support in the last couple of years compared to humanities, law, social sciences or any other field (Nagy, 2013). While some programs target young women to promote studying STEM among them, change only occurs slowly. There are various explanations for this: the “hidden curriculum” discouraging women in earlier stages of education, stereotype threat causing them harder to succeed, or perhaps how a masculine atmosphere, or male-dominated faculty has a negative effect on women’s performance when they choose to study a stereotypically “male profession” (Nagy, 2013).

⁸ Interestingly, studies claim that women tend to believe in meritocracy: that, who studies will be successful, while men are more likely to be less “naïve” and mention other factors contradicting this, when asked about who will be likely to succeed (Fényes, 2009). This easily might be in line with post-feminist beliefs of individual responsibility, as mentioned in the previous chapter (Gill, 2017).

⁹ From a market capitalist perspective, they might also be framed as reproductive and productive fields (Fraser, 2016a).

In the meantime, gender-based power relations are present at other faculties too: horizontal segregation is complemented by vertical segregation as well, meaning that it is hard to find women in positions of power (Fényes, 2009). An exploratory research was conducted on sexism in academic spaces between 2015-2016 at ELTE (Eötvös Loránd University), Hungary's largest university, following sexual assault and rape cases in freshmen's camps discovered in 2014 (Gregor, 2017). Based on the research, vertical segregation is very much present, for instance, no faculty has a female dean and there are more invisible disadvantages for women resulting from an institutional "gender regime" (Gregor, 2017).

12% of female students claimed that they have experienced sexism from their teachers, 5% of them said they even experienced harassment from male professors (Gregor, 2017). Many students emphasized the sexist nature of university parties, or the discriminatory practices of professors during exams (Gregor, 2017). Over all, sexism seemed to entrench the university's environment in various forms. At the end of her report Gregor mentions how legal and psychological help would be important in tackling these problems, however students often do not know about the availability of these services. She also emphasizes the stigma around asking for psychological help and the importance of these services being free as students mentioned that they could not afford a private therapist (Gregor, 2017). As I also believe she raises significant points, in the following I contextualize university counselling's position in the current state of psychological and psychiatric care in Hungary.

2.3 Peer counselling: community-based service in an era of privatization

Looking at the broader context of psychiatric care in Hungary and in the region it is a common argument that in post-socialist countries social disruption and structural uncertainty following the transition period – further enhanced by economic depression and austerity measures since the late 2000s – lead to a decline in mental health conditions (Raikhel & Bemme, 2016). After the end of state-socialism there was a sudden increase in the popularity of psychology¹⁰, especially individual therapy, but also coaching, self-help manuals, related TV shows, magazines, etc. Thus, transition from state-socialism to market capitalism had great effect on the mental health of the population also in the sense that neoliberal ideas of taking care of the self became more present: "we might expect postsocialist societies—settings where people have had to learn to live under radically transformed social and political economic conditions—to

¹⁰ It is important to note that psychology existed in the region long before the transition, in some cases – for instance Hungary – there were pre-second world war traditions of psychotherapy to return to (Raikhel & Bemme, 2016).

become the site of a particularly vibrant concern with the self” (Raikhel & Bemme, 2016, p. 154).

Considering Hungary alone, scholars often refer to a “psycho-boom” that took place in the last 50 years of the country (Pléh, 2016). In 1970 around a dozen people got accepted to study psychology in Hungary, while in 2010 that number was eight hundred, at six different universities (Pléh, 2016). This growth in numbers and popularity, however, brought other changes in the nature of psychology. A key shift in the characteristics of therapy was privatization, and, as a result, the dominance of private practices (Pléh, 2016). Psychotherapy is forced to compete with other forms of medicine and business management as their profiles are increasingly overlapping (Pléh, 2016). In the meantime, the international tendency of deinstitutionalization started in Hungary too; around a quarter of all mental hospitals were closed since the transition (Bugarszki, 2011). While there is still significant reliance on live-in institutions, outpatient treatment is becoming more prevalent, where patients might receive some combination of therapy and medication, however, community based services are less common, provided mostly by non-profit civil organizations (Bugarszki, 2011).

In 2017, a conference was organized in Budapest titled *Can psychotherapy reach the needy?*¹¹ where various experts spoke about the insufficiency of the Hungarian psychiatric system (Magyar Pszichiátriai Társaság¹², 2017). They claimed that approximately 20% of the population is effected by anxiety and depression, yet most of them do not receive any treatment, even though from an economic viewpoint in the long run this causes serious decrease in the national GDP as these people tend to fall out from employment (Kolozi, 2017). Depression is becoming the largest endemic across Europe, and in Hungary too, however, compared to the European average Hungarians consume much less anti-depressants and much more tranquillizers¹³ (Kolozi, 2017). This tendency combined with the fact that state-founded psychotherapy is only available for a small fragment (15%) of all patients, and usually for no more than three sessions, is alarming. Private therapy, on the other hand, might cost 8-10 thousand forints per a 45-minute session, which remains unaffordable for most (Kolozi, 2017).

¹¹ My translation. Original Hungarian: *Eljut-e a pszichoterápia a rászorulókhöz?* (<https://www.lelekbenotthon.hu/2017/08/eljut-e-a-pszichoterapia-a-raszorulokhoz-konferencia/>)

¹² Hungarian Psychiatric Association (<http://www.mptpszichiatra.hu>)

¹³ Numbers are quite shocking. The average Hungarian citizen – infants included – consumes 50 tranquillizer pills each year (Kolozi, 2017).

In their manifesto-like writing Dóra Máriási and Katalin Vida are criticizing mainstream psychological practice in Hungary (Máriási & Vida, 2015). They problematize its individualism, claim of neutrality, and the overemphasis on presenting itself as natural science, combined with its practitioners remaining mostly silent about political issues (Máriási & Vida, 2015). They also address some issues with the training of future psychologists, which they believe reproduces different forms of social inequality. Psychology students need to study further after obtaining their masters' degrees, yet additional training is not state founded, and often only students coming from upper middle-class families can afford them. Therefore, psychology remains a science only accessible for the few (Máriási & Vida, 2015).

University peer counselling takes place in the overlap of these debates. University counselling is explicitly claimed to be directed at those who fall into the category of "healthy" (Szemán & Karner, 2017).

In the context of institutions of higher education, the aim of counselling is making educational activities more effective, reducing drop-out rates to the minimum, and working on the personality development of students entering the labor market which establishes their flexible and fast adaptation¹⁴ (Szemán & Karner, 2017, p. 107).

In Hungary counselling is available in various higher education institutions, for example at BME (Budapest University of Technology and Economics) and at ELTE. At BME around 250 clients are counselled every year. Each applicant has to fill out a questionnaire first, in order to reduce the waitlist, after which clients have the chance to partake in four or eight sessions (Szemán & Karner, 2017). At ELTE university counselling has a history of over 30 years. They mostly provide individual therapy (six meetings) and organize relaxation trainings for groups (Szemán & Karner, 2017). Three full-time and two part-time psychologists are employed who provide mental health services for 28 thousand students and 4500 employees of the university (Szemán & Karner, 2017).

As an addition to this, there is the group of peer advisors recruited from psychology students studying at the university (Dóka, 2012). Peer counselling means a specific form of counselling where the two participants in some sense are the peers of each other: they are the same age or have similar lived experiences. Peer counselling can be beneficial for the advisor as well, as it

¹⁴ My translation. Original Hungarian: "A felsőoktatási intézmények kontextusában a tanácsadás célja az oktatási tevékenység hatékonyabbá tétele, a lemorzsolódás minimálisra csökkentése, a munkaerőpiacra kilépő hallgatók rugalmas és gyors alkalmazkodását megalapozó személyiségfejlesztés" Szemán & Karner, 2017, p. 107).

improves their social competences, and provides professional experience in a safe environment (Dóka, 2012). The peer counselling group of ELTE was established in 1993, today the number of its members fluctuate around 35-45 each year (Dóka, 2012). After being accepted to the group every advisor has to complete 15 hours of basic training which is followed by additional trainings involving different simulations and role-playing helping with practicing empathy and unconditional acceptance (Dóka, 2012).

Although some research was conducted before on the system and everyday work of university peer counselling groups in Hungary, as far as I know this thesis is the first interview-based research on this topic. In this chapter I overviewed literature on Hungary's possible neoliberal governance, policy making in relation to higher education and mental health services as I believe these all define and limit the work of peer advisors and their peers' anxiety. Based on this context, in the following sections, I will present the methodology and the results of my own research.

3. Methodology

3.1 Position of the researcher

When choosing a topic for my research, I struggled a great deal with whose story I am entitled to tell as an outsider. I felt conflicted because I did not want to speak over any marginalized group whose experience I cannot possibly relate to; on the other hand, I was also afraid that if I chose a more privileged group as subject for my research then it becomes somehow less valuable. At the end, I decided to write about mental health, to which as a former student of psychology and as an individual personally struggling with anxiety and depression I felt I could relate to. I have experienced different forms of psychotherapy as a client, while I also did a short, obligatory clinical practice as counsellor at a psychiatric institute, what is more, I am familiar with the education of mainstream psychology: I think I was able to benefit from these experiences when conducting this research.

Still, through the course of research and conducting interviews I often felt guilty - I discussed these doubts with my supervisor and second-reader as well - for criticizing the practice of people my age, who are providing necessary care without any compensation, in their free time. I generally found most of my interviewees likeable and I did not feel authorized to declare that their practices in some ways are maintaining unequal power relations. Nevertheless, I soon had to realize that their views and methods were more complex than that, and they voiced their own critiques as well regarding many social and personal issues. What is also important to emphasize, is how in many cases the interviewees were in a twofold position: they were not only care providers but could also identify with their clients, as they were experiencing similar anxiety first-hand too.

3.2 Considering interviewing as a method

As I wanted to analyze personal attitudes, patterns of thought, as well as to incorporate individual experiences into my research, using qualitative methodology seemed to be an evident choice. While I believe that focus group interviews can provide significant insight, in-depth, individual interviews are perhaps more convenient when the aim of the research is to let the research subjects honestly express their opinion. As there was no one else present at the interviews apart from the researcher and the interviewee, the advisors could even voice their critiques openly regarding their organization or their university. What is more, they felt safe

enough to share some confidential information about their clients, while opening up about their own fears.

There are of course various disadvantages of interviewing as a method which result in the limited possibility of broader generalization of this kind of research. While traditional types of sources might neglect the actual lived experiences of marginalized groups, oral history has emerged as an openly feminist methodological approach (Sangster, 1994). Interview based research does not claim to be objective, and it is clear that the researcher has considerable control over the interpretation of an oral source (Portelli, 1998). This method carries within the importance of multiple viewpoints, which also means that the results are always going to be partial (Portelli, 1998).

The essential question of methodologies using oral sources is about “whose stories get told and how they get told” (Boyd, 2008, p. 185) as a part of larger power structure. In the case of my research for example, by asking peer counsellors about sources of anxiety and questions of responsibility in relation to mental health, it is possible to detect cultural patterns, dominant ideologies that form their lives. The ultimate aim could be emancipating and liberating the subject of the interview, however, the inherently unequal relationship between interviewer and interviewee needs to be recognized (Sangster, 1994). Not being part of a given group might make it much more problematic to conduct interviews with members of the group. The interviewer can never be invisible, thus should reflect on how her interviewees saw her, either when part of the same group or an outsider (Lyon & Chipperfield, 2000).

The participatory model in interviewing emphasizes the importance of rapport in overcoming the strong hierarchy between interviewer and interviewee and to form a comfortable, safe environment (Lyon & Chipperfield, 2000). Upon first meeting building strong rapport is the first step of a fruitful research (Lyon & Chipperfield, 2000). Letting the interviewee choose the place of interview and providing sufficient information about the research project is also part of a more empowering methodology (Yow, 2005). However, interviewer and interviewee should be friendly strangers, rather than friends. What is more, as a feminist researcher, it is important to pay attention to how power is present during an interview (Lyon & Chipperfield, 2000).

Ultimately interview narratives are a result of collaboration between interviewer and interviewee (Lyon & Chipperfield, 2000). However, as interviewers, sharing our own experiences is not at all expected even though it might help in ensuring rapport (Lyon &

Chipperfield, 2000). Reciprocity in conversation is only needed when the interviewee wants it. As interviewer giving positive feedback that what they are telling us is valuable information is necessary, while making it clear that they are not judged for whatever they might be saying (Yow, 2005). However, even nodding on the part of the interviewer needs to be thought through, as a sign of approval might suggest that there are right or wrong answers to the questions (Yow, 2005). Being empathic, paying attention to the clues of the nonverbal communication of the interviewee as well giving enough time for them to think their answers through is also crucial. The interviewer should base additional question on the narration of the interviewee, which requires a more flexible set of interview questions (Yow, 2005).

Becoming aware of how we present ourselves, and understanding that the interviewee – and possibly the interviewer too – wants to show their best face during the course of the interview needs to be considered at the end (Lyon & Chipperfield, 2000). It is important to acknowledge the obvious limitations of oral sources. For real trust to be established more than one interview is needed (Lyon & Chipperfield, 2000). Narrators edit themselves, say what they think the interviewer wants to say, structure their stories to meet the expectations of the researcher (Boyd, 2008). However, even though we should not overgeneralize our results, individual narratives can be relevant on their own (Sangster, 1994).

3.3 Interviewees and building rapport

I conducted ten interviews, all with peer counsellors studying at ELTE. I contacted most of my subjects by approaching them on social media after looking at the website¹⁵ of the peer counselling group where all advisors were listed by name with their pictures. I had prior contact with two of my interviewees, but most of them I did not know before. Nonetheless, almost everyone I approached was open to helping me, perhaps, because they understood that I was an alumni of the same program as well, so they did not think of me as a complete stranger. At the end, I decided to stop at ten interviews, partially because of limited time, partially, because even though every interview brought something new to the research, after a while the answers started to become repetitive, therefore I thought that a few more interviews with people coming from the exact same group could not further contribute to my data significantly.

The interviewees were mostly masters' students of psychology, only two of them were still in the bachelor's program. Four of them were from Budapest while six of them were from different

¹⁵ Available at: <http://kortars.elte.hu/segitoink/>

rural towns. The youngest advisor I interviewed was 20 years old, while the oldest was 26, with the majority of them being 23-24 year olds, that is, my age group. Most of the advisors specialized in clinical psychology, with some exceptions, who wanted to be developmental psychologists working with children. Seven interviewees were women, and only three of them were men. Even though I wish I could have had more male participants, the reason behind their underrepresentation is indeed simple: men are greatly underrepresented among psychology students and therefore among peer advisors as well.¹⁶

It was possible to establish less hierarchical relationships with my interview subjects since we were approximately the same age and we studied the same subject at the same university at one point. Nonetheless, I was clearly in the position of a researcher signified by my Dictaphone and my set of interview questions printed out. I emphasized how there are no right or wrong answers and they are free to say whatever comes to their mind they do not have to base it on “research” as I was interested their personal experiences. Still, sometimes some of the interviewees kept referring to what they have learnt at the university instead of expressing their own opinions. Male interviewees were especially uncomfortable when I asked them about gender differences, they were notably cautious of what they said.

Before the interviews I created an informed consent form, that I based on ethical research guidelines (*See Appendices 7.2 Informed consent form*). The consent form stated that participation has minimal risks, and offered interviewees to request audio recording or transcript, however none of my interviewees took this opportunity. Regarding ethical considerations, the most problematic issue was that unavoidably they had to talk about their clients even if without any names or particular context. They were willing to share these information, of course within reasonable limitations. I decided not to indicate on the consent form that I was from the Gender Studies Department, because I was afraid that might bias them, and influence my overall results. However, interviewees were interested in my research after the interviews and they reacted mostly positively when I shared my broader research questions with them.

3.4 Interview questions and transcription

I tried to base the questions of the interview on the related literature and my own experiences as well. I collected twenty-two questions, however I was not insisting on posing all of them as

¹⁶ Some of my interviewees – mostly the few men – reflected on the issue of the feminization of their field themselves.

I wanted not to be bounded by my questions but to be able to pose additional ones as new topics came up during our conversation. I assembled the questions following the “funnel” technique, moving from broader topics to more concrete questions (*See Appendices 7.1 Interview outline*). I separated questions into three main groups: questions about peer advising as a practice, questions about anxiety in a university context, and finally questions about gendered differences in anxiety or in experiences with their clients. I did not follow the outline strictly and I added some “helping” questions (in italic) if interviewees found it hard to answer. I did not pose every question at every interview, and I often adapted them to the topics brought up by the interviewees.

The interviews took place at various locations as in my original inquiry I offered to go anywhere that was convenient for them. Therefore, I conducted two interviews in the apartments of the interviewees, two of them came to the campus of CEU, and the rest of them I interviewed in the building of ELTE Faculty of Psychology. Who was in the position of the “host” might have had some importance on how comfortable they felt in the situation. The shortest interview lasted 37 minutes, the longest 74 minutes, most of them were around one hour. I recorded all interviews, on two separate devices for safety, then I transferred the audio files to my laptop. I will delete them after the thesis defense, as I indicated in the consent form. I only made partial transcriptions and detailed notes of the interviews which I listened to multiple times. In the transcriptions I referred to my interviewees by pseudonyms. The interviews were conducted in Hungarian so I had to translate all partial transcripts which means my interpretations might have altered the meaning in some cases, although I tried to stay as close to the original Hungarian quotes as possible¹⁷.

After detailed notetaking from each interview separately I started looking for common points, and reoccurring elements for my analysis. I marked different topics with different colors and returned to the parts in the recordings that I noted as interesting. I transcribed a great number of quotes that at the end I could not fully include in my analytic chapters. When I felt that the quotes covered most of the patterns that I wanted to analyze I aggregated the main overarching topics and separated the quotes into smaller subsections. I ended up with two main themes: issues of self-governance and technologies of the self, and gendered beliefs about mental health

¹⁷ For instance, when referring to a third person the interviewees usually used the genderless “ő” in Hungarian which I translated as “they” in English, that of course is not the complete equivalent in meaning.

and caretaking that occurred separately. Based on these two emerging topics I separated my analysis into the following two analytical chapters.

4. Interviews with peer advisors: neoliberalism and self-management

In the following chapter I aim to demonstrate where university peer-advisors locate the anxieties of their peers, what kind of coping techniques they offer for them and to what extent they consider structural issues when addressing these problems. As I have argued earlier I believe the site of peer advising to be a practical example of how mental health services connect with neoliberal governmentality and how capitalism creates a crisis of care that leads to the individualization of care work. The way I see it, some of my interviewees problematize neoliberal ideology and its effects as a main source of anxiety amongst students, yet they usually view these things as necessary parts of our culture one needs to endure. In line with this, their counselling methods and the kind of tools they are providing for their clients can be understood as independently performed technologies of the self, supporting recent ideals of self-management (Brijnath & Antoniadis, 2016).

Based on my interviews peer advisors have incorporated cultural values of individual responsibility, self-realization and self-efficiency in their work, as their main object was to form students who are able to cope with anxieties on their own. However, the advisors - who themselves are all university students - rarely dared to give definite statements even when asked about their personal experiences. What is more, the interviewees were also very self-aware regarding stereotypes and therefore tended to approach my questions through individual examples, persistently stressing that each “case” is unique and they were thus unwilling to generalize. On the other hand, they were open not only to share some of the knowledge they gained through providing advice but to complete these accounts by describing their own personal experiences with anxiety, university life and career choice.

Although when talking about those who seek help in the peer counsellor groups the interviewees tended to frame the problems of the clients in terms of their personal improvement, when asked about what change could possibly reduce pressure for these students, most of the advisors mentioned systematic problems, urging policy changes on a university level. As most of the advisors I interviewed explicitly argued that they do not see gender as prominent factor in anxiety or its treatment, I separated my analysis of gendered relations into a different chapter tackling what might lie behind their claim of “gender-blindness” and what gendered division of labor operates under the surface of the voluntary care work they perform in their organization (*See: Chapter 5.*).

In this chapter, first I describe the work of the peer counsellors and how it fits into larger institutions and how it is framed as an efficient professional service directed at healthy individuals. Then, I argue that based on the testimonies of the advisors their clients' anxieties are informed by neoliberal economic factors, what is more, in some cases neoliberal logic even influences their interpersonal relations through market logic entering personal lives. I also present what characterizes the peer counsellors' methods, and how they correspond with individualized technologies of the self, both expected from clients and their helpers. Lastly, I present in what ways did my interviewees contradict individualization and self-responsibility by considering some structural problems affecting their peers' mental health.

4.1 Peer advisors at work

All ten of my interviewees were volunteers who applied to the “peer group”, in order to have more practical experience in one-on-one counseling, as well as to be part of a smaller professional community within the university. The peer advising group has a strict admissions process, and one year of training is required after admittance before students can perform individual counseling. Apart from advising, the group also organizes film screenings, board game nights and psychoeducational events as part of a larger community building project. Nonetheless, their main focus is counseling available for every student of the university, from all faculties. Clients can apply using an online form and later an advisor is assigned to them, with whom they can have up to six meetings, which – as most of my interviewees admitted – is not always enough time to offer substantial help.

The number of meetings are of course limited since an important aspect of the peer counselling service is that these sessions are free of charge, which is hardly the case for individual therapy offered by trained psychologists (Máriási & Vida, 2015). In order to be able to define their own limits in terms of counseling all peer advisors are under the supervision of a practicing psychotherapist, who they can turn to in need of advice for progressing their cases. “Intervision” is also a possibility, where they can discuss their cases with their fellow peer advisors whom they do not have hierarchical relationships with. This might be the reason why my interviewees while personally often having no more than five or six clients so far, had a fairly extensive knowledge of various cases they had come across through these intervisionary group meetings.

While first I believed that the interviewees all worked at the same university, ELTE, which, I thought was the only university with peer advising practice, I learned that peer advisors trained there actually had an organization at another major university based in Budapest: BME

(Budapest University of Technology and Economics). Those who wanted to work there had to complete additional training, mainly because – as they explained – students approached them with more specific problems originating from its different profile as a university specialized in engineering and information technology.

One of my interviewees, Bianka (23) was also a member of a similar organization at a third Budapest university, BCE (Corvinus University Budapest), specializing primarily in business and economics training. Student counseling there did not mean individual peer advising as most of the members were not trained in psychology, however their group worked as a complement to the few psychotherapists working full-time at the university. Those advisors who met students from different disciplines all experienced significant differences between students coming from particular fields. They found specialization to be a more defining factor regarding mental health issues and related practices than for instance gender.

“It’s really interesting to observe that, well, this sound stereotypical, but they come with problems that are typically different in nature. At ELTE there’s a lot of this, how to say, more like relationship kind of topics, problems within the family, ‘gate-opening panic’¹⁸, that I’m not sure if I’m at the right place, I’m not sure that I want this to be my profession. So dilemmas about career choices, (...) While at BME, there it’s mostly about time-management, the workload and how to meet the requirements, quite strong stress.” (Gábor, 23)

Later, I will argue that the overarching differences Gábor highlights here between ELTE students worrying about their professional future, and BME students whose anxieties are mostly focused on present time challenges are implicitly gendered. We simply have to take a look at the horizontal gender-based segregation between different disciplines (Fényes, 2015; Nagy, 2013), to see that these question affect women and men differently. In the following section however, I first summarize what general sources of anxiety my interviewees detected among their peers, and what overarching problems they identified as commonly shared causes of their struggles.

4.2 Sources of anxiety

¹⁸ *Gate closing panic* is the Hungarian term for midlife crisis. *Gate opening panic* recently being used for the crisis experienced by youth starting their independent lives. The equivalent term in English would be *quarterlife crisis*.

I argue that the most prevalent sources of anxiety detected by the advisors were based on economic characteristics of the contemporary system, accompanied by a shift in interpersonal relations and possibly even personalities. What is more, in connection to this, because of the same reasoning psychology is also regarded differently, as – similarly to other sciences – it has to be practical to be valued. All interviewees agreed that anxiety was the most common complaint students approached them with in various university settings. The main source of this anxiety – to varying degrees – were academic achievements and progression. Lack of motivation – a possible symptom of depression – was also noticeably common in connection with studying. As Marianna, a long-time member of the peer-advising group put it:

“The anxiety mainly derives from their studies, that it is hard to perform, or it is stressful. Or it is about the future: how they don’t know what they should become with what they are studying, they don’t know where to proceed, or if it is even good for them what they have chosen. Usually the anxiety is mostly related to studies or career.” (Marianna, 23)

All interviewees agreed that the anxiety evoking factors of studying were often intertwined with fears about career prospects and the future in general. While in some cases simply the workload or the difficulty of exams provided the primary source of worrying, it was often mentioned how students felt alienated from their fields of study, as they only chose them because they *had to* choose something, or how their fears derived from the marketability of their future professions.

“Have I chosen a profession from which I will be able to get by in the current economic situation? And one, that will satisfy me intellectually and by all means I will enjoy it?” (Marianna, 23)

These fears seemed to be informed by economic facts of a neoliberal system, advocating for self-realization through finding a suitable profession that has economic value (Brown, 2015; Rose, 1999). As the nature of work and education is changing, and life-long learning is becoming the norm, choosing a field of study is defined by market demand rather than anything else (Walkerdine, 2003). What is more, this market-based ranking of individuals can further enhance competition among students. As a result of strong beliefs in meritocracy accompanied by greater expectations, while those studying in higher education pursuing social mobility can be at even more serious risk of mental health vulnerability (Curran & Hill, 2017).

Dominant cultural values are mediated through institutions of education affecting students’ personality traits (Curran & Hill, 2017). Bianka, one of my interviewees who, in addition to psychology studied human resources at BCE, a university specializing in business and

economics, found some of these changes that she detected in the student community alarming. Based on her description, business-related departments served as a special site and peak example of competitive individualism and its harmful effects, manifesting in interpersonal relationships as well. What she emphasized most was the lack of solidarity and decline in empathy she experienced compared to her classmates studying psychology.

“Because of the competitive spirit there is this thing of not helping or supporting each other. The thing that I observed is that, here [in my old university] we constantly studied together. There the thing is, that everyone goes to these paid consultations, by the bunch, and so many students spend all their money on going to these.” (Bianka, 23)

Bianka’s observations are in line with the findings of a recent longitudinal research study demonstrating the changes in university students’ behavior through the last three decades (Curran & Hill, 2017). Students spend less time on group activities, and more time alone, preferably doing activities that have the promise of instrumental gains (Curran& Hill, 2017).

Another important detectable change among students the increased level of perfectionism as a trait directed both towards oneself and others (Curran & Hill, 2017). Perfectionism in one way or another often appeared in my interviewees’ descriptions of students experiencing anxiety. When oriented at others it entails the fear of being judged and considering social context demanding, and thus is strongly connected to anxiety and mood disorders (Curran & Hill, 2017). Anna, who mostly worked as an advisor for students studying humanities claimed that she only experienced this kind of perfectionism hindering studying in girls, who in some extreme cases even felt like their handwriting was not decent enough – in the occasion someone would borrow their notes. She described how obstructing this perfectionism could be:

“The studying, how hard it is to start, and then five hours pass by, while she’s only staring at the wall, so then [she studies] from 10 pm to 3 am instead. And then the next day, how tired she is. Or that she feels like she doesn’t know it perfectly so she pulls an all-nighter instead. Or how she has to practice [a presentation] to perfection to be able to present it.” (Anna, 21)

In relation to this aim for perfection the advisors had several examples of how the fear of showing weakness was present especially when it came to asking for help. All of them agreed that there is still a significant stigma attached to psychotherapy especially in certain faculties. In some cases, it seemed as if it was not the stigma itself holding students back from using the

advisors' services, but rather doubts about its usefulness. Bianka emphasized how hard it is in some cases to "advertise" psychology.

"Well, I feel like from the aspect of marketing this is really hard. Because if I say, come if you need help, then they are like: why would I need help? So this is it, help is not a good buzzword then." (Bianka, 23)

Bianka had the experience at the business school of BCE that psychology was only popular when it meant providing a practical tool for self-improvement. Even some of her peers at the student advising center were more inclined to shift their organizational profile towards offering tutoring in "soft skills" for "future leaders" instead of helping those struggling at the university. These are perfect examples of what Nikolas Rose (1998) refers to as "entrepreneurial self", the phenomenon by which enterprise culture is entering personal lives, making individuals the investors of themselves looking for means to better themselves independently. When Bianka's group organized a series of psychoeducational talks, she had a similar impression of the audience:

"It's also a question of how psychology is looked at. That psychology will attract the people, or that psychology also needs marketing for the people to come? The other thing is that even within psychology it is hard to pinpoint who to invite. (...) Even during the talks they always looked not for the theory, but for the practice. Only for how what I've just heard can be utilized in my little life." (Bianka, 23)

The preference of practical knowledge over theory, especially among students studying economics is in line with what Wendy Brown (2015) finds alarming about recent changes in higher education: where value seems to be only attached to marketable skills, that are easily turned into "human capital". The desire Bianka points out for the students to be in control, preferable with the help of a tangible toolkit offered by psychology, corresponds with descriptions of neoliberal governmentality (Foucault, 1988) and a form of citizenship that requires a high-level of interactivity (Ouellette & Wilson, 2011). Thus, not surprisingly the methods peer advisors and clients preferred corresponded with the capitalist need to be capable of maintaining mental and psychical health independently (Swenson, 2010). The desire of being able to use psychology as a practical tool, possibly without outside assistance was also detectable in clients who sought help from the peer counsellors:

"I had several counselling meetings where it came up that they watch videos on YouTube, they read books, often not only these cheap gimmicky things, but they dig deep into it, to the

actual psychological levels. (...) It manifests itself in how they come, the attitude they come with. So that it's not like: 'Fix me, I'm here, I've put the effort in this by coming here.' and that's it. But also, they're willing to work together." (Gábor, 23)

What Gábor demonstrates here when he explains how his clients are drawn to self-help books and videos is not only exemplifies the individualized operation of the entrepreneurial self but is also telling regarding who do the advisors themselves consider a "good client". In the next subchapter I go into more detail on these expectations for taking care of oneself, that the counselors demand both from their clients and themselves.

4.3 Therapeutic methods and technologies of the self

I argue that in general, the peer advisors located the sources of anxiety or lack of motivation in individual qualities and abilities. They all agreed that the principal aim of peer advising was for the students to gain better self-knowledge that they thought to be essential for healthy functioning. I also argue that there seems to be an increased demand for independent self-care, which is not only expected from the clients, but the peer counselors too, who themselves emphasize the importance of maintaining their mental health as care providers.

All of the interviewees emphasized that they only provide counselling for healthy individuals who might be temporarily "stuck" somewhere in their personal path. As healthy adults, they have the responsibility to make their own decisions, and therefore peer advisors cannot provide them with direct guidance. As the interviewees explained to me, the methodology they use during their sessions is based on Carl Rogers's person-centered therapy. This form of counselling assumes a healthy individual, a *client*¹⁹ who only needs guidance and support on their way to self-realization (Kirschenbaum & Jourdan, 2005).

"We never give explicit advice to anyone, as we usually talk about healthy people. And really, the goal is for them to find the way, for them to find the solution, we are only part of this by supporting them and listening to them and providing an objective standpoint." (Noémi, 21)

What healthy meant however, and where the line was between normal and pathological was not always completely apparent even for the advisors themselves. It is important to note, that while this is not the group's main profile, they also fulfil another function of psychology that Nikolas

¹⁹ When in some cases my interviewees accidentally used the word patient, they corrected themselves immediately.

Rose calls the “human sorting house” (Rose, 1999, p. 136), separating “pathological” and “normal” within their clients. Peer advisors have the authority to suggest students who turn to them to seek additional help, which some of my interviewees framed as one of their key function: to “filter out” those who might fall into the – sometimes vague – category of “clinical” cases. As Anna puts it, the peer advising group fits into a larger network of mental health services and educating their clients on other possibilities is an important part of their work.

“Quite serious problems might occur here at the university, ones that we actually have to forward to somewhere else. Then the topic is more like how we socialize them into therapy. Or we talk about how it’s okay to take medication and that not everyone is going to be an addict right away.” (Anna, 21)

The issue of psychopharmaceuticals was mentioned in different contexts throughout the interviews. One problem for instance that seemed to be important for the advisors was the continuous duty as future psychologists to take care of their own health, as they tended to question the legitimacy of therapists who had mental health issues of their own. One of the interviewees, when looking for possible reasons behind the stigma around psychotherapy emphasized how ideas of practicing mental self-care – compared to taking care of one’s body, – have only become commonplace recently in Hungary, confirming what some refer to as the “psycho-boom” (Pléh, 2016) taking place in post-socialist countries, where economic and political transition brought in new ideas of individual mental health (Raikhel & Bemme, 2016).

“I think this is a rather new idea in this country, at least, that not only physically but also like mentally we practice maintenance on ourselves. And then it comes... that there are professions where this is part of their approach more strongly, that we need that too, to maintain ourselves.” (Hanna, 24)

In this line of thought Hanna expressed something else that might be important to note: this expectation to constantly work on the self is more prevalent in the case of certain fields of study or work, possibly ones that themselves involve care-taking. Some of the advisors participated in some form of therapy themselves and one of them, Noémi was also taking anti-depressants. She was conflicted about whether her being “affected” made her competent in a therapeutic situation or rather was a risk factor in her future work.

“I get depressed too, what is more, I’m also taking a medication for that. So regarding peer counselling too, it’s absolutely not that we don’t struggle with these kind of problems. (...) I feel totally shitty too sometimes, and by the way I have anxiety too. But I don’t think that

this would influence me in all of this, because regardless of this, for someone else I can give that objective viewpoint, that I need the same way.” (Noémi, 21)

Noémi argued that by going to therapy and having stable self-knowledge she can provide help for others. The advisors’ overarching emphasis on self-knowledge exemplifies Foucault’s concept of technologies of the self. The aim of these technologies is mastery over oneself as subjects need to know themselves to be able to take care of themselves (Foucault, 1988). They considered this a key part of their training conceptualizing self-management as something that can be learned (Rose, 1999).

Technologies of the self are the tools of governance, supposedly transforming the person toward perfection and happiness (Foucault, 1988). Governance means the managing of populations, however governmentality for Foucault does not simply equal domination. The individual is becoming an object and a subject at the same time, as governmentality requires active participation (Reed & Saukko, 2010). It is governance acting through the self, manifesting in our intimate, everyday lives (Foucault, 1988). This active participation is especially required in a modern therapeutic situation, in the peer advisors’ case, Carl Rogers’s person-centered method casts a seemingly passive role for the counselor who is supposed to stay back while the client has to be proactive (Kirschenbaum & Jourdan, 2005).

My interviewees’ main argument was that anxiety can be reduced if someone regains self-confidence, however that is the duty of the clients themselves. Stress, as with other forms of personal hardship becomes more and more framed in western societies as a stimuli for self-improvement, a chance for individuals to transform themselves (Blackman, 2010). As Marianna, a clinical psychology master’s student expresses it, anxiety is an inherent part of life in higher education, however, it is necessary for the personal development of the students who this way can prepare for what their future professional work might entail.

“Otherwise I think that it’s not a bad thing that there is pressure at the university and, that one has to perform and that there is a competition, I don’t think that’s a bad thing. So that is a skill too, that you have to acquire. Somehow it has to be filtered out who’s the one who can take it, and who’s the one who can’t. Who is talented enough, or who learns quick enough, or is smart enough to do it with less stress.” (Marianna, 23)

It is important to note how an implicit and lasting hierarchy based on one’s ability to control one’s emotional life appears in her line of reasoning. In order to be able to perform in this tacit competition certain skills need to be acquired. Apart from practical skills such as better time-

management, peer advisors emphasized the importance of being more self-reflective, taking more responsibility for personal decisions and increasing assertiveness in the process of better control over one's mental health. In Áron's description of what personality traits students should obtain to be able to be more successful and resilient in a university environment we can see the contemporary ideal of a productive individual reflected, incorporating sometimes contradictory qualities such as self-confidence and submissiveness:

“To be more assertive, more dedicated and more sociable. They need to be brave, to have a healthy self-confidence (...) besides they need to be open too, and flexible, and humble.” (Áron, 24)

These contradictory expectations align well with the so-called “cult of confidence” (Gill, 2017) advocating again for the individual to exercise self-surveillance and self-discipline in order to be able to face external challenges. While peer advisors seemed to be cautious of openly judging their clients' personal decisions, they supported certain coping strategies more than others. Many of their suggestions involved bodily techniques, different types of work out, yoga, or meditation, which was also part of their regular repertoire during sessions. However, they also encouraged clients to invent or find their own coping strategies.

“That, if they come up with a method. (...) Let's say that they are calmed down if they go out and have a run around the [Margaret] island and then afterwards they can study better. So then it's not that, that they go drinking every night, because that is calming too, but not that healthy.” (Anna, 21)

Based on Anna, it seems to be clear that some of these techniques are more preferable, “healthier”, than others. While most of the advisors only talked about substance use when I directly asked them and saw it in a deeply negative light, Dávid, the youngest interviewee when asked about what can his fellow students do on their own if they cannot see a peer counsellor voiced a different opinion:

“Well they can smoke, or do drugs... [laughs] Absolutely, I think that totally exists, that... because I smoke too, and I don't know, I'm thinking about how good it would be to quit, but 'oh my god, exam period is coming!'. And then, it totally helps.” (Dávid, 20)

Dávid's reasoning sheds light to another important correlation: different substances can be used as self-medicalization and they can easily become an alternative to counselling²⁰, especially when free-of-charge community based service is not available. There is a decline in the use of healthcare services, and self-management is more and more common among those struggling with issues of mental health, possibly due to the high costs of individual therapy (Brijnath & Antoniadis, 2016).

Individuals can develop their own strategies of therapy, however research warns about embracing self-management in the case of depression, for example (Brijnath & Antoniadis, 2016). As neoliberal ideology is being incorporated into the views of patients themselves, they are valuing being in control and being resilient, and so failure to manage on their own is also taken personally, which leads them to blame themselves for their lack of self-control (Brijnath & Antoniadis, 2016). Another approach however, present in the views of my interviewees is the narrative of self-empowerment, through achieving a level of independence.

“The goal is for them to have tools to fight stressful situations, either they come from the competition or either they come from defeat. We are not coaches, so it's rather their mental health that is important, or it is their mental health that is important, period. For them to have good tools for this, to keep their inner harmony, even against challenges.” (Marianna, 23)

Nonetheless, this kind of empowerment's emancipatory potential is questionable. Rose (1999) portrays psychotherapy as the field that made the subject responsible for the creation of itself, as its celebration of autonomy and self-realization produces what he calls “the obligation to be free”. This creation of the self, for instance when employed in postfeminist thought around women overcoming dependency through self-realization against structural barriers, is highly debated (Reed & Saukko, 2010). The conclusion easily might be that the individual's problems derive from maladjustment (Rose, 1999). Peer advisors were usually conflicted about this question of adjustment and above everything else emphasized the importance of autonomic decision, for instance when struggling at a university environment:

“To be honest the goal is neither for them to stay, nor to leave it [the university], but what they personally want. And, that can be measured out, that I don't know, ‘they humiliate me every day, I hate going there’ slash: ‘I would like to be a lawyer and for that it seems like it

²⁰ This quote also highlights the clear connection between anxiety and substance use, which is often used as an explanation for the most obvious gender-based difference regarding mental health: anxiety and mood disorders might be more prevalent among women, yet men have a significantly greater tendency of alcohol and drug abuse (Bekker & van Mens-Verhulst, 2007).

entails this.’ That I’d like to be a lawyer so much that I will endure this, or that I’d not like to be a lawyer after all.” (Anna, 21)

The quote above exemplifies one of the most common dilemmas of mainstream psychology: could individualized help simply mean adjusting individuals to unjust systems (Fox & Prilleltensky, 1997)? This line of thinking is what is echoed for instance in the “neoliberal feminist” catchphrase of “internalizing the revolution” (Rottenberg, 2014). The logic of claiming that personality changes can bring changes not only in the self but its relation to others, was even criticized to a certain extent by some of my interviewees. Bianka, who emphasized the importance of personal relationships and community building in fighting anxiety, claimed that only group therapies can lead to substantial transformation:

“If there is only change in one person that will obviously effect the others too, since they have to connect to them again, it’s just that we give a very big burden to who we helped. Because then they have to fray out their relationships to develop that way.” (Bianka, 23)

Bianka was not the only one, who recognized the downsides of the individualized approach as others also emphasized anxiety being embedded in social and economic relations. In the following section I summarize what structural problems they find relevant and which remained less visible for the advisors.

4.4 Reflections on structural problems

I argue, that in some ways the counsellors did not incorporate completely the hegemonic neoliberal thoughts of an independent, self-responsible individual who can achieve anything by working on their personality. Perhaps due to Hungary’s ambiguous economic and political position (Scheiring, 2018; Szikra, 2014) advisors tended to question the possibility of true meritocracy. Many of them mentioned how coming from rural Hungary or having less educated parents might influence the well-being of fellow students. However, it was striking how almost all of them found gender to be a marginal aspect in this question while other structural factors they found more visible.

While most of my interviewees conceptualized mental health as mainly an individual struggle, possibly embedded in personal relationships, they eventually exposed some structural problems as well. Some of them realized, that when anxiety is seen as an individual issue various socio-cultural factors are ignored (Brijnath & Antoniadis, 2016). For instance, most interviewees, as they often stressed the material basis of anxiety, thought that Hungary’s economy would have

more depressing effects on the students' future prospects. Some of them located Hungary at an especially disadvantageous positionality in a world economic system, and mentioned how for instance the ever-present question of migration – leaving the country or staying – can also be a reason behind their peer's excessive worrying. On the other hand, others emphasized the universality of these economic problems, claiming that “competition” was internationally a part of everyday experience and finding little difference between Hungary and other countries.

“Everywhere in the world there's a problem with this, that there are jobs but not necessarily as much on that level, as much people they train in higher education. This competition can be universal, I would think.” (Marianna, 23)

How Marianna frames the problem seems to confirm my previous argument that no matter how “illiberal” Hungary claims to be, it is still part of a neoliberal world order, based on competition and market logic (Scheiring, 2018). An important addition to this was when some of the interviewees tried to capture in what ways was their generation in a different position than the previous ones.

“Our parents they were kind of born into this... after the transition they could work at transnational companies, and workplaces became more mobile, there wasn't a track that they could follow. But I think us, we're a bit in this position, that we have no safety, that if we finish higher education then we're going to have a place to work, and that is like certain.” (Dávid, 20)

Dávid, my youngest interviewee was born almost ten years after Hungary's transition from state socialism to liberal capitalism yet he was still very much aware and not particularly optimistic about the change brought by the new system, reflecting on, how the enthusiastic anticipation of the previous generation turned into anxiety due to uncertainty for current day youth.

When describing economic difficulties, the advisors often simultaneously argued that being anxious could be avoided through better self-knowledge and more responsible decisions, nevertheless they admitted and accepted the fact that uncertainty was a “natural” part of the present economic system. Personal and structural hardships overlapped when they – sometimes unconsciously – raised issues of class-based inequalities. For example, they highlighted the significance of family attitudes in students' performance anxiety, while also acknowledging that class position could further enhance the pressure coming from parents.

“I think it is very typical how when someone’s parents never went to university and that person is not doing that good at the university, let’s say, they have to take an additional year, then [the parents] don’t understand. There are a lot of conflicts coming from that, if the parents have simply never experienced it, then they think it’s a really big thing, taking one more semester, or they can’t handle an exam period, understand that then you have to study 0-24.” (Marianna, 23)

Education is regarded as a means of social mobility, especially in a culture that increasingly emphasizes personal responsibility in achieving one’s personal fate (Rose, 1999). However, the emotional burden coming from the failure – or perceived failure – of completing this mobility is well documented. Entering new places that the individual feels alienated from leads to simultaneous experiences of shame and anxiety (Walkerdine, 2003). Upward social comparison and status anxiety seems to be inevitable in the highly competitive site of universities that the advisors described. Class as an identity category is progressively eroding, and the neoliberal subject is ideally middleclass, thus educational institutions are also tailored for middle class individuals (Walkerdine, 2003). This problem was also brought up by some of my interviewees highlighting the disadvantages experienced by those who have to balance studying with paid labor.

“I think a lot of things are expected... well I don’t know who expects what from who, but this, that you should study, but you should work, but do this too, and do that too. (...) A lot of times these student organizations are the ones that could teach you something that is really useful professionally, but at the same time you don’t get any payment for that. And those who can’t afford that, because they need to make money, for them it sucks to go to a workplace, to work hard for something that actually won’t help you develop professionally.” (Bianka, 23)

Bianka also talked about how status and professionalism is signified in the everyday practices of clothing at the business university she attends, which she thought could be alienating for some. As an additional burden of upward mobility, a middle-class aesthetic is also prescribed for individuals who want to fit in (Walkerdine, 2003). As one of Bianka’s professors told the class:

“[They said] we should see that by the third year our looks are going to change. There’s this thing, that people start to become more briefcase-y. This isn’t the thing for everyone or it’s not the thing everyone wants.” (Bianka, 23)

This example illustrates well the various ways in which a university environment can be stressful through its unspoken expectations of performing certain forms of self-creation. As Valerie Walkerdine (2003) puts it, in this system not only those coming from the working class, but also everyone else falls into the category of “parvenu”, thus all students of a university are in a constant state of “faking it” further enhancing their anxieties. The problem that Bianka draws attention to perhaps is that not everyone has the same possibility of becoming “an entrepreneur” of themselves by investing in their physical or mental “capitals” (Rose, 1998), resulting in an often insurmountable disadvantage in the competition.

Another critique that emerges from these testimonies about the business school’s atmosphere, is that in this world of supposedly rational individuals, making decisions based on calculation and efficiency, emotional relationships and interpersonal support seems to be neglected. In the next chapter however, I argue, that the advisors by implicitly or explicitly gendering these two realms claim that women and men have different possibilities and roles in tackling the anxieties emerging from this underlying neoliberal reason. Thus, even though they did not mention gender among the structural factors affecting mental health, gendered relations are at work under the surface of peer counselling service.

5. Interviews with peer advisors: post-feminism, affective labor and the crisis of care

In this chapter I am presenting the various forms of gendered beliefs that I managed to identify in my interviews with university peer advisors. While they expressed different levels of awareness on certain issues, sometimes interchanging categories of sex and gender, most of their answers reflected a specific kind of post-feminist consciousness. When asked about the gender differences in the anxieties of their peers most of my interviewees found it hard to answer the question, not only because of their heightened caution over using stereotypes, but perhaps because of their solid beliefs, that there were no significant differences between the men and women who approached them with their anxieties regarding their academic progress. They argued that young women and men have the same possibilities as well as burdens that define their mental state. However, in regards to personal life, especially romantic relationships – which they solely thought of as heterosexual – they were more likely to emphasize differences between genders.

Even though in general advisors often denied the importance of gender in relation to mental health, they mostly agreed that for men the pressure might be higher to fight these problems individually, preventing them from seeking professional help. In relation to this, my main observation was that women served as the default category for the peer advisors who were predominantly women themselves, which also meant that their gender-specific problems were often invisible for my interviewees. Individualized self-help however, might also be common among women, especially among those who are expected to take care of their emotional well-being to be able to perform affective care work – such as the peer advisors.

Thus, my concluding argument aims to shed light on both of their views on how the often material basis of anxiety and the system in which they are providing help are deeply gendered in a contemporary crisis of care (Fraser, 2016a). A crisis, in which while the state is “stepping back” families and communities assume responsibility for affective care work that is still predominantly performed by women. In the last section therefore, I argue that there is a clearly gendered division of affective care between different universities, placing additional burden on female advisors, framing engineering students in lack of feminine contact as handicapped.

5.1 Pessimistic post-feminism

Based on the interviews, my overarching perception was, that the peer advisors liked to think of themselves as progressive regarding issues of gender, which in many cases meant that they

refused to acknowledge structural differences between men and women. When I asked them whether they would treat a client differently based on their gender they usually expressed a strong aspiration for gender-blindness. I argue that their relationship to women can be best described through the concept of post-feminism, meaning that they did not recognize gender as a source of structural inequalities, but more as a hindering factor that one can overcome individually through a change in personal attitudes or traits. A reasoning similar to the “neoliberal feminist” idea of “internalizing the revolution” (Rottenberg, 2014). Gábor, for example – one of my few male interviewees – claimed that for him personality played a much more important role in the process of counselling than gender, and he described temperament as something completely independent from one’s gender.

“I rather approach them depending on their character and not their gender. I don’t think [there is a difference]. (...) I don’t approach a girl or a boy differently coming to me, I rather take their temperament or character as a base for that. How open they are, how much they can talk about themselves, how much they are a slowly-warming-up type, these are what I take into account.” (Gábor, 23)

The advisors believed that young women needed the same level of self-confidence as men, as they also have to be able to support themselves independently. In line with this, all interviewees claimed that they would not treat a woman differently in any way than a man if they experience anxiety related to academic performance or professional advancement. However, describing their clients and the main sources of their anxiety the advisors seemed to make a strong distinction between personal and professional life. While they acknowledged some gendered differences in the former, when talking about romantic relationships, in the professional realm of higher education or career choice they rarely saw men and women differently.

As I have shown in the previous chapter, the advisors often emphasized individual anxiety’s embeddedness in economic issues. In line with this, a major fear of their peers they mentioned was of sustaining a living independently that many of them believed to be as pressing for young women as for men. As Marianna puts it in her reply to the question if she would treat a woman or a man differently in counseling she thinks that anxieties of financial independence affect students regardless of gender.

“For example, a guy shows up and talks about how he fears that he won’t be able to get by doing this work, and that he won’t make it, and what will happen to him then. And then a girl comes and with the same deep feelings says exactly the same, that this bothers her just

as much, then I don't think I would react to that differently. So, I think it depends on how they experience it... No matter how much people think that men are breadwinners, today this is an equally legitimate fear coming from a girl, for example that she won't be able to support herself." (Marianna, 23)

Another important argument that emerges from the quote above is Marianna's indication of temporality. Her emphasis on "today" implies that certain beliefs, such as thinking of men as primary breadwinners are in the past. Today, as Nany Fraser words it "the family wage ideal is dead" (Fraser, 2016a, p. 33) as it is practically impossible to maintain a family with the income of only one person. This thought especially does not count as new in the post-socialist context of Hungary, where the two-earner model was commonly accepted reality in previous generations as well (Zimmermann, 2010). However, this might only strengthen beliefs of gender equality being something that already had been realized in the past.

The idea that this generation is more enlightened and progressive compared to previous ones appeared when the advisors were asked about the advantages of peer advising. Hanna claimed that their views as peers were closer to the views of their clients than older therapists' who might have received a different training. The example she used was how peer advisors are more aware when it comes to questions gender and sexuality.

"There can be generational differences. That [older psychologists] grew up in something completely different, they think differently about some things. (...) Let's say about what gender differences are like, or for example these sexual orientations. But perhaps, they fundamentally acquired a different view when they were growing up, while we stand closer to [the clients]." (Hanna, 24)

It is important to highlight the fact that the very first thing that came to Hanna's mind when trying to prove how "modern" peer advisors were was mentioning their knowledge on issues of gender. By this, she was signaling that overcoming gendered prejudices is the natural way of progression that should be unquestionable for all future psychologists if they want to be considered progressive.

Ideas of women being less constrained by social norms underlying most of my interviewees attitudes toward gender reflect what theorist refer to as post-feminism (Genz & Brabon, 2009). Various different things can be meant by post-feminism²¹, the term might refer to the backlash

²¹ It might be more practical, to talk about the "post-ing" of feminism as an ongoing phenomenon.

of feminism in the last decades, but also to the appearance of “Girl Power” in popular culture since the 1990s, at the same time, it is often argued that post-feminism represents a hegemonic ideology in contemporary western societies (Genz & Brabon, 2009). What is certain, is that the “post” in post-feminism does not necessarily signify the complete negation of feminism, but perhaps the outdated nature of some forms of feminism in the eyes of younger generations (Genz & Brabon, 2009).

The most frequent critique of post-feminisms is that they are apolitical and individualistic putting emphasis on choice and self-empowerment, often in line with neoliberal rhetoric. This type of feminism celebrates a positive picture of the confident, successful women turning from “victim feminism to power feminism” (Genz & Brabon, 2009). Another characteristic of post-feminist trends at a time, when in general fewer people are identifying with any political ideology is treating feminism as part of “common sense” that every member of society shares without any reference to a political movement (Genz & Brabon, 2009). Mediated post-feminisms, especially when they are fueled by neoliberal ideas shape individual choices and trough that individuals constructing narratives of the self (Gill, 2017). Self-surveillance, self-discipline as means to individually achieved empowerment are essential parts of this rhetoric.

Post-feminism enters the psychic realm by promoting a “cult” of confidence for women accompanied by what can be referred to as affective control or affective policing (Gill, 2017). Positive emotions are desirable and necessary for women to prevail, while resilience, confidence and optimism are required from them. At the same time insecurity, neediness or need for dependency are deemed undesirable or even toxic (Gill, 2017). Traces of this kind of thinking were easily detectable in my interviews with the peer advisors as they often emphasized the importance of these traits. On the other hand, perhaps due to cultural characteristics of Hungary, or the topic itself, positive thinking in this context was not accentuated throughout the interviews. Differences between women and men were blurred, however, not necessarily in terms of their ability to succeed in life, but more likely in connection to their “suffering”. Advisors believed that young women and men face similar hardships at this age, and even though expectations are high and economic conditions are difficult, gender is not necessarily part of this problem.

“I couldn’t name a theme that is more specific to one gender than the other. I couldn’t say a peculiar symptom that is more specific to the one or the other. (...) Really, all genders can be anxious about all areas of life. About relationships... Perhaps we would rather say that

women [worry] more about human relationships, men more about their career... But I wouldn't even say that, because I saw examples of the opposite on both sides.” (Gábor, 23)

As Gábor presents it, even though some stereotypes would suggest that women are less likely to worry about their careers this is not the experience of the advisors. Thus, what might be another interesting angle to further pursue when analyzing the post-feminism thoughts present in the interviews is how these ideas are specific to a Hungarian or perhaps post-socialist context, where women's ability and obligation to work outside of the home is treated as natural. However, the idea of some form of progression was still important when I asked them about the differences between this generation and the generation of their parents. On the other hand, a particularly interesting point was raised by Eszter when she wanted to tackle generational differences in terms of romantic relationships.

“We are allowed to consider more aspects. It's really not just that for the family project we have to find a matching person somehow, but the first aspect is that it's a matching person, and then perhaps a family can come too. However, this freedom can cause much more anxiety, because there are more options to choose from. Now it's not like you say yes to the first nice guy proposing to you at 22. In that sense, it used to be safer.” (Eszter, 26)

When being asked about in what ways these students' anxiety is specific to this generation Eszter for some reason first associated to romantic relationships, perhaps implying, that it is not professional life where the biggest changes are detectable between generations, but relationships and marriage. She suggests that a potential reason behind this generation's heightened anxiety is their increased number of possibilities. Her example suggests that feminism or empowerment can be one of the driving forces behind this uncertainty. Apart from this, post-feminism was less apparent when advisors discussed topics of “personal life” where they also had ideas of what is natural, or part of “common sense”. It was striking how strangely only two of my male interviewees mentioned pregnancy as a factor in future anxieties, while none of the women brought up this topic.

“In a university environment like this I think for the girls it increasingly comes into the picture that if they would like to have children... Then the longer you study it becomes more of a burning issues when to - so to say - intermit your career, when can you insert [childbirth] into that.” (Áron, 24)

Both times when pregnancy and childbirth came up, it was framed as a problem, a specific problem that somehow only affects women. Áron looked at pregnancy as a necessary pause in

women's career that can enhance their fears of the future. It is hard to tell why none of the female interviewees mentioned this topic, but my hypothesis is that it is due to the naturalization of this issue, meaning that female interviewees thought it to be so obvious that they failed to mention it. Maybe they thought of it as an exception to the "almost complete" emancipation of women.

When asked about in what ways they would treat men and women differently in a therapeutic situation some interviewees expressed more essentializing views on the differences between men and women, as biological categories. Anna for instance, highlighted the importance of evolution and biology and thought, that the reason why she could understand a woman more was because of shared bodily experiences.

"Well there are these things that happen to girls, and there are those that happen to boys since our entire evolution and biology is different. Therefore, probably... well not that I can empathize with them better, I wouldn't say that, but perhaps I can understand them better (...) For example, if I was pregnant and a pregnant woman would come to me I could understand her better than a male therapist." (Anna, 21)

Her example being pregnancy is also interesting when considering ideas of post-feminism, as while there was almost a post-feminist consensus on how professional life or studies were not significantly affected by gender, the same advisors saw immutable and unquestionable differences when it came to their "personal life". Romantic relationships were mentioned sometimes as possible sources of anxiety as something that is expected from students to have.

"Bringing in the topic of romantic relationships... that let's say in the case of boys – but obviously for girls as well, but the other way around –, that they should have a girlfriend. That would be the ideal university student, who goes to parties, performs well and in addition to all of that [is in a relationship]." (Áron, 24)

What is easily detectable even in this short quote is the overarching heteronormativity that was also present in most of the interviews. This was the case when asked about if they would treat women or men differently who come to them as clients. They often expressed heteronormative views in relation to therapy, as they mostly associated to sexuality when I asked them about dynamics in a counseling situation. Marianna brought up her own experience of going into therapy with an older male psychologist who she felt she developed romantic feelings for.

“Later we learnt about how practically you always become a little bit in love with your therapist, be it a woman or a man. But if they are from the opposite sex, then it’s even easier, not to say when they are the same age as you are. There’s simply this situation, where you’re very vulnerable and you tell things that you wouldn’t necessarily tell even your friends. And there is always a tiny little hierarchy, since you’re the one asking for their help. Of course this isn’t real attraction, but there’s some intimacy in there.” (Marianna, 23)

Later she added how relieved she felt when one of her male clients told her that he was gay which for her meant an exception to the rule of being attracted to one’s counselor. Considering these heteronormative assumptions of the advisors it is not surprising that – female interviewees especially – often had a heightened awareness for the presence of men in therapeutic situations. In the following section I demonstrate through some examples how they treated women as a standard when characterizing anxiety.

5.2 Women as the default category of counselling

I argue that women – who were the majority of both counselors and clients – served as a default category for mental health when I asked peer advisors about their experiences in counselling. While the advisors could not reflect on women’s specific sources of anxiety or their specific expression – as they thought of them perhaps as “natural” and obvious – they paid much more attention to men and their gendered relation to their “inner world”. This of course might have harmful effects by making women’s gendered restrictions invisible, a phenomenon that might have been informed by post-feminist thought of gender-blindness.

Most of the advisors I asked came to the conclusion that more women applied to partake in individual sessions than men. While some of them believed, that a possible explanation of this is simply that women take up higher percentage of university students overall, most of my interviewees presumed more complex reasons behind this observation. Some of them supposed that women are more likely to suffer from anxiety than men, which is in line with most research both on anxiety as a trait or anxiety in a pathological context. Most anxiety disorders such as panic disorder, generalized anxiety disorder, somatization disorder or agoraphobia are more common and chronic among women than men (McLean & Anderson, 2009).

There is no scholarly consensus on the sources of these differences, however, men being less “progressive” than women, being still bounded by strict gender roles was the most popular explanation present in the interviews, as an answer to why they are less likely to be found in

therapy. Even though for the advisors it was “obvious” that men no longer had to be primary breadwinners, some of them thought that men themselves are less likely to accept this change. Eszter, who worked as a peer-advisor at BME, felt this was common among her engineer clients:

“Now I’m thinking back to my clients, that they have this, that still they are preparing to be in some sort of breadwinner role. That, ok, it’s obvious that this is the 21st century and their girlfriend or wife will make money to, but anyway, they are the ones who have to assume this, that they are the financial security, or I don’t know.” (Eszter, 26)

She again highlighted the importance of temporality, suggesting the existence of a linear progression regarding gender relations, that some men who do not “get with the program” are still struggling with. This was only one aspect however, of how the advisors viewed men as handicapped compared to women. They thought men were restricted by strict gender roles that permitted them from help-seeking. This idea is in line with theories highlighting low levels of professional help-seeking affecting men or those with higher levels of masculinity. They argued that hegemonic masculine norms like self-reliance, independence and emotional control undermine help-seeking behavior in general (Berger et al., 2013). Anna extended this approach to both displaying emotions and asking for help:

“Maybe [there is a difference] on the level, that anxious girls are more likely to come to us than anxious boys. (...) Maybe for boys it’s harder from the perspective of desiring to keep this manly, masculine status. That they don’t complain and they don’t worry, they just do everything right. Well then they don’t have anyone to turn to with this (...) maybe for the girls it is easier to talk about this.” (Anna, 21)

As we can see it in the quote above some of the interviewees explicitly named masculinity as the main source of the problem. When directly asked about gender differences in general, introspection and taking care of one’s mental health, interviewees usually did not believe that there was a gender based difference in the performance of self-care. Most of them presumed that men can detect mental health issues just as good as women can, yet, they are discouraged from talking about their negative emotions and a higher level of independence is expected from them.

Some of the advisors saw some gendered differences between the expression of anxiety as well, again focusing on men. They mostly agreed that for men it was harder to express their feelings,

some, such as Anna believed, that instead, their anxiety was more likely to manifest in somatic symptoms:

“In boys it’s more likely to manifest in severe physical symptoms or in feeling unwell and for them it’s harder to piece it together, why it is happening.” (Anna, 21)

This however, contradicts research (Thakur et. al, 2015) showing that somatization disorder is actually more common among women than men. Nonetheless, this argument exhibits how most of the interviewees thought of men as being in lack of some abilities that women might already possess and, as a consequence of this, they were perhaps in the need of women’s help. While because their post-feminist tendencies informed by neoliberal beliefs made the advisors regard women as independent and not in the need of outside help, the same post-feminist awareness did not affect their views on men implying that men on the other hand, might need women or femininity to better take care of themselves.

In connection to this, it is also important to highlight how women were treated as default not only in the role of the client but in the role of counsellor as well. Some of the advisors – mostly men, who were aware of their positions as being the “anomaly” – reflected on the fact that women are overrepresented in the field of psychotherapy and as a result in the peer advising group as well. In accordance with their views on gender the advisors view women in positive light in terms of care, some, like Áron even claimed that they are naturally better at caregiving when trying to explain how women “took over” psychology.

“This was the same type of a male profession like most sciences were a long time ago. (...) Why is it like this? Maybe because the stereotype is a little bit true, that women essentially ... That femininity includes emotions more... That they find them more important and after that, their skills are better. Partly, that they find it important, partly that they can also handle it. Communication skills are generally better among women, I think.” (Áron, 24)

In line with what I presented earlier, they not only emphasized that women were somehow better in this field, but what is more, they once again painted men as being more restricted by harmful gender roles than women:

“They say that dealing with our inner world, emotions, social dynamics, women are more receptive to these. And then, if it is true or not, I can’t tell, but there’s a meme, a social meme in people’s head, that we should leave emotions for women. You know, that if you, as a man, start crying, or open up to one of your pals, then ‘are you gay?’ (...) There is strange inhibition

on many men I think, and this one reason why I think less of them choose this field, many repress this side of themselves.” (Gábor, 23)

It is important to note how most of the advisors therefore acknowledged gender as a prescriptive system, however, mostly as a disadvantage affecting men, while implying that women have an easier task when asking for help. Noémi was the only one among my interviewees who talked about women’s disadvantages in this prescriptive system. She highlighted the importance of gendered socialization in relation to education as well. She emphasized the challenges women who study in traditionally male-dominated fields face using the example of the anxieties experienced by one of her peer clients, a young woman studying engineering, continuously questioning her own competences.

“A girl, who studies engineering should not question herself constantly, that this isn’t right for her. This can originate from that we do not socialize girls for the same things as boys. Don’t try to push girls and boys towards certain specializations, because later, if they choose a certain profession that really can cause them terrible anxiety.” (Noémi, 21)

This quote raises another important aspect of where gender might be present in the question of university peer advising, which is the significance of gender-based segregation between different disciplines. In the following section I take a look at the implications of this gendered division of labor that can be rationalized through stereotypes expressed by some interviewees earlier, considering women naturally better care-takers than men.

5.3 Gender under the surface? Productive and reproductive work on an occupational level

As I have explained it in the previous chapter the advisors I interviewed originally all studied psychology at the same university, ELTE, however they had established a sub-group at another Budapest university BME specializing in technology and engineering. Those who worked at both sites claimed that there were significant differences between the two groups of students regarding their problems and main sources of anxiety. This was especially apparent when I asked the advisors about what causes *them* anxiety and they went into great detail about the future burdens of care-work that they are expecting to face. My argument here is that psychology students’ – who are mostly women – fears are very much different from for instance engineers’, since they have to reckon with both material and emotional disadvantages. Yet, individualization and self-help seems to be the answer to these problem, because psychology students – as helpers in general – are expected to take responsibility for their own well-being.

Engineering students however, fitting into the stereotype of the not-yet “emotionally emancipated” men, regarded as less independent, are often painted by the advisors as in need of the care provided by women.

While my interviewees claimed that they did not perceive much difference between their clients based on gender I was certain that there are still structural differences between men and women at play that they are unconsciously ignoring. Gender might not be obvious on the surface when tackling anxieties around emerging adulthood, but it is nonetheless inherently present in some structural relations that are perhaps most tangible through horizontal segregation in higher education. All of my interviewees highlighted the disparities they have found between the students of different faculties emphasizing how they have had distinct fears. While some of them – including the students I interviewed studying psychology – were anxious about the profitability of their field of study and their possibilities after obtaining their degrees, other students’ concerns were mainly focused on present-day challenges as they were less likely to doubt the usefulness and marketability of their future professions.

“While at ELTE the subject of anxiety is what it will be good for what I’m studying, how it will be useful, anxiety at BME many times comes from that people are not in a supportive university environment. That the professors are not student-centered, there is terrible pressure about the curriculum and everything, and there, anxiety mostly comes from that I think.” (Marianna, 23)

Those who worked as advisors at both ELTE and BME all agreed that engineering students’ anxiety was more closely related to institutional factors and the high expectations of the university while those studying humanities, psychology or pedagogy had fears about their future prospects, losing motivation due to doubting their decisions of their chosen field of study. It seemed like students were quite aware of the economic realities they are facing and they calculated with these prospects. In the case of psychology, those who wanted to be clinical psychologists – as most of my interviewees – knew that clinical positions in hospital environments were often underpaid compared to having a private practice.

“Even, if we specifically take a look at this profession. If I’d like to be a therapist, then indeed the reality is that I will make 130 thousand forints²² at a clinic, that is if I get lucky enough to get a clinical position.” (Áron, 24)

²² Per month.

Hanna expressed similar feelings when she talked about psychology students need to change working profiles based on market value, describing a phenomenon, that might sound familiar by now, as described both by Nikolas Rose (1999) and Wendy Brown (2015). Her description highlights the hardship of being torn between what was in the beginning altruism or general interest when choosing a profession and possibilities of sustaining a better living.

“And that too can be grinding when you realize that practically because of the money you will be forced to take a position somewhere else. And this is totally grinding that if you went through that five years than you’re probably to some extent sure about this thing, that you enjoy this and this matches you. And then, still, you are forced somewhere totally different.” (Hanna, 24)

Another aspect that might enlighten the complex relationship between gender and mental health in this context was mentioned by one of the youngest interviewees, Anna, a 21-year-old peer advisor coming from smaller village in western Hungary. Anna, who while completing her masters in clinical psychology and volunteered as a peer advisor, also worked part-time at a psychological helpline. She was not even discussing anxieties of her own, nevertheless she brought up one of her main fears about her future: the danger of burning out. She conceptualized burnout as something that needs to be acknowledged before starting one’s career in order to develop the appropriate tools to fight it.

“I think it is better to start this this early, to improve yourself in this. That it’s not sure that you will always be successful and it’s possible that this will happen 15 years from now, but there is a danger of this in this field of work.” (Anna, 21)

At first glance, it might seem surprising that someone at the age of 21 is already calculating with the prospect of burning out, however a psychology student might have learnt about the statistics showing how burnout syndrome is especially common among those providing care related work and affective labor (Dreison et al., 2016). Thus, choosing a field of study that falls into the broader category of reproductive work – such as being a psychologist, healthcare professional, or educator – entails not only material, economic, but psychological disadvantages as well, for which often the individual herself is held responsible for, as self-caring subject. Gender inevitably enters this discourse as those fields of study that are undoubtedly considered productive in a competition-based neoliberal economy, such as STEM (Science, Technology, Engineering and Mathematics) professions are mostly chosen by men, while women take up the majority of those studying to become care workers (Fényes 2015; Nagy, 2013).

As the example of Anna shows, doing care work means preparing for the emotional burden of that work beforehand, by practicing self-care. As I argued in the previous chapter the counsellors believed taking care of their personal mental health was essential condition of their work as future psychologists. Of course, peer advisors might serve as an example of how care can be shared and communal, yet their work is not reciprocal and is not paid, making them part of a larger system of nonmarket affective labors²³.

It can be fruitful to observe this division of labor in the framework of what critical theorist Nancy Fraser (2016a) calls capitalism's crisis of care. Fraser believes that today we are experiencing a major crisis of social reproduction (2016b). Unpaid social-reproductive labor is an essential condition to any waged work, functioning as "social glue", yet Fraser compares the treatment of care work to how nature is treated in capitalist societies: it is taken for granted as if it was unlimited and inexhaustible (Fraser, 2016a). Historically reproductive work was continuously attached to women and the rise of capitalism further strengthened this gendered division between productive and reproductive forms of work. In our current capitalist society where power is expressed mainly through money, being unpaid structurally subordinates care workers to those who earn wages (Fraser, 2016b).

The crisis described by Fraser possibly includes not only physical care but perhaps the deeply privatized field of psychology as well, especially if we acknowledge the statistics showing a greater prevalence of anxiety and mood disorders or the problem of psychiatric care being more and more privatized (Máriási & Vida, 2015). I was surprised how most of the interviewees only when asked directly about questions of money mentioned how being free of charge is among the main advantages of peer advising. On the other hand, when asked about it they have all admitted that the accessibility of free therapy is highly limited in Hungary. However, they found the prices reasonable when observing from the psychologist's point of view:

"On the one hand I totally understand how much psychologist are asking for, I really get it that they have to ask for that, for renting a room, and etc., this is part of the service. But at the meantime the average Hungarian person can't afford this." (Áron, 24)

What is also important to note then, apart from how reproductive work is devalued and is performed "behind the scenes", is how therapeutic work and counseling also fits into a larger

²³ Of course the picture is more complex than simply stating that women are the ones that give care while men are earning money, especially if we consider how today, the majority of those training to be psychologists are women, and this line of work – when performed not in state-financed institution, but market-based context – actually has the prospect of being well-paid (Máriási & Vida, 2015).

tendency of the increased commodification of intimacy (Boris & Parrenas, 2010). As we are experiencing an intense proliferation of both paid and unpaid labors some forms of labor question the strict separation of categories such as home and work, or productive and nonproductive. Intimacy occurs in specific social contexts, and is shaped by relations of gender, class or race: this type of work is often a nonmarket activity, and tacitly considered the role of women (Boris & Parrenas, 2010).

Peer-advising can be considered as intimate labor, and a peek example to illustrate the mechanisms at work in the advisor-client relationship could be psychology students working at BME. As I mentioned it earlier the interviewees highlighted the differences between engineering students and themselves, by claiming that engineers had a university environment enhancing their anxieties, while at the same time they also emphasized that their worries mostly concerned with present challenges in contrast to psychology students worrying about their future prospects.

“If we look at BME, then what’s totally important this work overload, that the students are terribly suffering with. That they’re incredibly loaded and they’re receiving a great deal of negative criticism. There, I think this is rather where it would be worth it to change something. Because [otherwise] they can find employment really easily with what they’re studying.” (Noémi, 21)

As Noémi suggests, some structural changes might help reducing the pressure from these students, yet based on the testimonies of the advisors working at this university there is little change on the side of teachers or the institution, however an additional agent, a well-established network of therapist and peer-advisors are present to help them. What is more, their service is extremely “popular” among the students, my interviewees confirmed that there are often more than a hundred people on the waitlist to be able to meet with a counselor. It is also important to highlight that the majority of these clients so eager to be able to talk to – not necessarily to a therapist, but even to a psychology student in training – are men, which seem to contradict some of the interviewees and my own anticipation regarding men’s help-seeking tendencies. The only explanation, here articulated by Eszter is that it is common knowledge that being a student at this university is extremely burdensome, which perhaps loosens the stigma around asking for outside help.

“BME extremely sucks, one can crack there, so to say, really. These first year students, they are totally worn out. (...) They don’t have a life beside it, and I think then it’s not about ‘oh

it's embarrassing or not', but that 'I feel so shitty that I have to apply for counselling'.” (Eszter, 26)

Another aspect, that was raised by Eszter – who was one of the oldest members of the group working with BME students – was the problem she thought gendered segregation played in the well-being of her clients. She emphasized the importance of men being without female contact, which in light of how advisors view men as in need of feminine help to be able to take care of their mental help, was a severe disadvantage. Eszter talked about how some clients she felt were simply helped by the presence of a woman listening to them.

“Obviously, it's a likely line-up that the peer advisor is a girl and the client is a boy. (...) I think for him [a client] it meant a lot that so to say a woman paid attention to him, and could accept him, this kind of narcissistic or, I don't know, otherwise terribly boastful guy, [a woman] who was not his mother. (...) To a certain extent, this is an emotional relationship that is created here, so from this angle I felt like, that on this level this was likely an exceptional experience for him. Something that can at least help him, for what I already said, that he would not look at girls as this separate, unreachable strange mass, who one can't talk with...” (Eszter, 26)

This additional, hidden work that Eszter exemplifies demonstrates how counseling can be easily classified as affective labor, especially in the context of these *boys* who often “never had a girlfriend” as Eszter added later. This relationship involves emotional labor, which means that workers have to perform certain emotions as part of their everyday job, constantly manipulating their feelings until they arrive at a state of “deep-acting” and actually embody those emotions (Boris & Parrenas, 2010). In addition to this it is also important to emphasize, in line with how the interviewees thought of taking care of themselves, is that “social reproduction refers not only to the care of others but also to the care of the self” (Boris & Parrenas, 2010, p. 7), meaning that the present and future work of these advisors requires distinctive self-regulation and technologies of the self to achieve it.

In the system of advising that I described in this chapter there is a gender-based division of labor which is often justified by benevolent sexism. If we take a look at who is counselling who, it becomes clear how it is very much gendered even in the eyes of advisors themselves. Engineering students – most of whom are men going against the stereotypes of men's help-seeking behavior – have a waitlists to be able to participate in peer-advising since there are not enough trained psychologist working on campus. A campus, that is a masculine environment,

not only in terms of the professors and students being predominantly men, but perhaps also in the practices that put unbearable pressure on these young men. It is easy to frame this problem by claiming that the students need outside help, perhaps the affective care of women who in the eyes of the advisors themselves – informed by post-feminist ideas – were capable of doing market based paid-work as well as were naturally better at taking care of their emotional well-being. Because of this, men's anxiety received more attention while restrictions and pressures affecting women's mental health were obscured or taken for granted in what the advisors seen as gender-blind treatment.

6. Conclusion

In the present thesis I aimed to critique the harmful individualism advocated by both neoliberal post-feminist thought and contemporary mainstream psychology. The intention was to demonstrate through a case study how these pervasive, hard-to-locate ideologies are incorporated by individuals who then unconsciously reproduce them against themselves and others, in an era, when explicit domination is replaced by different forms of governmentality. The initial thought that set off this research was that women in general and in my immediate environment tend to have similar mental health problems, for instance issues of anxiety, that is significantly more prevalent among women than men (Bekker & van Mens-Verhulst, 2007). My hypothesis was that in addition to this, the science and practice of psychology that has a long history of sexism, might further enhance this, possibly by individualizing a problem that has structural origins. I also presumed that the present hegemonic system of neoliberalism as a larger economic and cultural factor has effects on both the mental well-being of individuals and their treatment, especially when even some forms of feminism advocate for mental change and increased participation in anxiety-evoking activities of self-fulfillment.

Based on the analysis of the interviews I conducted with university peer advisors, counselling students struggling with their mental health I came to the following conclusions. I found peer advising indeed, to be a practical example of how psychotherapy is entrenched with neoliberal governmentality. The advisors themselves incorporated ideas of individual responsibility, competition-based self-realization and supported the notion of self-management through different technologies of the self. They emphasized how their service was for healthy individuals, who needed to work on themselves and acquire practical skills to be able to preserve their mental health. However, even though their ideas of a healthy, successful individual were mostly in line with the expectation of a competition-based concept of higher education they also critiqued some parts of this culture and its possible harmful effects. What is more, many of them problematized some structural problems, affecting the mental health of their clients, often in the context of economic inequality. Therefore, I believe that the advisors were not completely blind to the damaging effects of the present economic system. However, they did not find gender to be a relevant structural factor, perhaps because they saw gender equality as a question of rather cultural than material emancipation.

Regarding questions of gender, the counsellors strictly separated personal and professional life, and believed that there was no difference between women and men concerning the latter. I believe that their views on gendered relations reflected a certain type of post-feminism informed

by both neoliberal values and specific Hungarian attitudes, arguing that women and men have to face the same amount of hardship in order to prevail in this system, causing their anxieties. What is more, in the therapeutic situations they regarded women as the default category, emphasizing only the characteristics of men seeking help, who they believed to be in a disadvantageous position regarding their mental health. Thus, part of their post-feminist reasoning was that while women are emancipated enough to have the same possibilities and burdens as men, men fall behind in terms of self-care and emotional support.

I believe that gender was inherently defining of the system in which they performed their services, fitting into larger tendencies of the feminization and devaluation of care work. As a result of horizontal occupational segregation women make up the majority of both peer counselors and future psychologists who in this case provided affective care in the masculine environment of engineering students. While men's anxiety gained increased visibility, gendered constraints and expectations affecting women were somehow neglected or taken for granted in what the peer advisors regarded as gender-blind treatment. The problem with this attitude could be that it does not take into account women's special needs and challenges. The advisors themselves could serve as an example of this, who by doing care work, not only face material disadvantages but are exposed to increased emotional burden influencing their overall mental health, that they are expected to take care of independently. Individualized methods, focusing on "enterprising" the self cannot abolish structural causes of anxiety, however, peer advising as a form of counselling based on a less hierarchical arrangement still has the possibility to become a site where communal support can arise among students facing similar problems.

Limitations and further research

As all research's, my thesis results have many limitations. The aim of this research was to provide a case study, therefore should simply be regarded as such. I only inspected one highly particular site, the peer advising group of a Budapest university, consequently my observations are valid within this narrow context. What is more, as I had rather limited time to conduct this research my sample consisted of only ten people, possibly not even representative of the peer counsellor group, not to mention all psychology students. Regardless of sample size, qualitative, interview-based research will always have its limitations, as in many ways it is based on interpersonal relations, and my subjective interpretations. The data presented in this thesis is also mediated in the sense that all interviews conducted were translated from Hungarian to English inevitably modifying original meaning.

Due to the explorative nature of this research however, various topics emerged during the interviews that I had limited space and time to pursue, but might form the basis of future research. One of these themes is the specific form of Hungarian post-feminism, I labeled “pessimistic”, as it does not necessary regard work as empowering for either women or men, yet considers them equal in terms of everyday suffering. I believe it would be worth it to investigate how neoliberal post-feminist affective policing is contradicting cultural norms in Hungary. Another important observation is the difference in student’s mental health and their help-seeking tendencies based on their fields of study. This might especially be important to pursue in the case of the engineering students at BME, since based on my interviews their high levels of anxiety could be preventable by changing institutional norms that cause severe distress. Lastly, a reoccurring topic that should be researched more in the Hungarian context is the case of “wounded healers”, as doing care work while being affected by issues of mental health seems to be a common problem that not only practicing psychologist have to face, but possibly even students are already preparing for in advance.

7. Appendices

7.1 Interview outline

0. Information on the topic of the research, signing the consent form

1. Introduction: demographic details (age, place of birth, etc.) /studies and future plans

On peer counselling

2. Could you tell me what exactly is peer counselling who are you and what do you do at the university?

3. In what ways is peer counselling different from other types of counselling? *What are the advantages/disadvantages?*

4. Why did you become a peer advisor? *What makes someone suitable for this position?*

5. What are the most common reasons students turn to your organization?

6. Who are the people who ask for your help? Do they have any common characteristics? Do you think there are certain groups who are more likely to turn to you? *Who are overrepresented?* What might be the reason behind that?

7. Who might be those who never get to you? Why?

8. Ideally what is offered by peer advising? Does everyone need it? *What are the characteristics of those who does not need it?*

On anxiety

9. What do you think, what causes the anxiety of university students/your peers? How much can you relate to their anxiety? *Where does the pressure come from?*

10. Do you think there's anything specifically Hungarian about this?

11. In what ways is it different in this generation than the others?

12. To what extent/ in what ways is the university an anxiety evoking environment? Is this unavoidable?

13. What do you think who can be especially sensitive to/at risk this anxiety?

On the role of gender

14. Based on your experiences is there a difference between women/men/others regarding anxiety? In what ways?
15. In what ways is the subject of women's and men's anxieties differ?
16. To what extent do they express it differently? *Can you say examples?*
17. Can anyone recognize that there is something "wrong" with them, or others warn them?
How easy it is for them to ask for help?
18. Do they leave "satisfied" after the six meetings? *What does it depend on?*
19. Do you approach/would you approach women and men differently when they come to you?
20. Do you think that your gender has any significance in therapy? In what ways?

Additionally

21. Who is responsible, who could do something for the students to be less anxious/stressed?
22. What can those, who doesn't want to come or can't come to peer counselling do instead?
Do you see anything else that could help them?

7.2 Informed consent form

INFORMED CONSENT FORM

Thesis research of Johanna Hirsch, Masters Candidate

Central European University

This is to certify that I, _____, agree to participate in the research being conducted by Johanna Hirsch Masters Candidate at Central European University. My participation in this project is voluntary, and I may refuse to participate, withdraw at any time, and/or decline to answer any questions without negative consequences.

A. PURPOSE

I have been informed that the purpose of this research is to investigate anxiety and counselling in university settings in Hungary. This research is being performed for a master's thesis under the supervision of Éva Fodor, associate professor and pro-rector for social sciences and humanities at Central European University.

B. PROCEDURES

The interview(s) will be recorded and the audio from the interview(s) will remain in the private care of the researcher for transcription purposes. Written transcripts will be included in the final publication of the research, unless otherwise indicated by the interviewee, and all files of the audio recordings will be erased at the conclusion of the research process. Interviewees will be provided with a copy of the audio files if so desired. In the resulting papers and publications, the interviewee will not be identified by her/his name, a pseudonym will be used in place of her/his real name.

C. RISKS

There are **minimal risks** to participation in this interview. However, the interviewee can withdraw their participation from the interview at any time without prejudice. During the interview the interviewee may request to stop the recording at any time to discuss or clarify how she/he wishes to respond to a question or topic before proceeding. In the event that the interviewee chooses to withdraw their participation entirely from the project during the interview, any tape made of that particular interview and any previous interviews will either be given to the participant or destroyed, along with any transcripts made from previous interviews.

If so desired, the researcher will provide the interviewee with copies of the recorded interviews, and any/all related papers and publications written by the researcher.

D. CONDITIONS OF PARTICIPATION (please initial to give consent)

_____ I understand that I am free to withdraw my consent and discontinue participation at any time without negative consequences.

_____ I agree to have my interview(s) recorded

_____ I agree to the release of the transcript(s) of my interview(s) for the purpose of publication

_____ I request copies of _____ all recorded interviews, _____ the final publication of the research

To be sent to me at the following email address: _____

_____ I request to be informed of any future attempts the researcher pursues to publish the research following submission of the master's thesis

E. INTERVIEWEE'S COMMENTS

Please identify below any desired restrictions related to the collection and publication of information from your interview(s).

I HAVE CAREFULLY READ THE ABOVE AND UNDERSTAND THIS AGREEMENT. I FREELY
CONSENT AND VOLUNTARILY AGREE TO PARTICIPATE IN THIS STUDY.

Interviewee Signature:

_____ Date: _____

Interviewer Signature:

Date:_____

I WILL BE GIVEN A COPY OF THIS FORM FOR MY OWN RECORD

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