



Book Review

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Martin Halliwell, *Voices of Mental Health: Medicine, Politics, and American Culture, 1970–2000*. Rutgers University Press: New Brunswick, Camden, Newark, NJ, and London, 2017; xiii + 320 pp.: 9780813576787, \$74.98 (hbk)

Reviewed by: Harry Oosterhuis, *Maastricht University*

This study, on the growing national attention on mental health troubles in the USA between 1970 and 2000, centres on the ways in which suffering was voiced in public through personal testimonies, individual case studies, memoirs, autobiographical narratives, media stories, popularized psychiatric reports, novels and films. Halliwell's main objective is to clarify how the personal experience and expression of mental difficulties were intertwined with government policies, wider sociopolitical issues and American culture. The author carefully explores six areas of mental distress and interrelated social problems: the 'so-called' post-traumatic stress disorder among veterans of the Vietnam and Persian Gulf Wars; drug abuse and alcoholism (as well as addiction to prescription medication such as tranquillizers); dementia, Alzheimer's and the psychological challenges of aging; cognitive and emotional disabilities such as autism; eating disorders and body image syndromes; and depression, bipolar and borderline personality disorders. During the era under study, mental suffering was made visible in a personalized way, to a large extent by celebrities such as actors, entertainers and pop stars; however, the federal government's health policies bore the stamp of direct personal involvement and first-hand experience with such misery as well. The prominent role of several first and second ladies (Betty Ford, Rosalynn Carter, Nancy Reagan, Hillary Clinton and Tipper Gore) in policy-making is striking. Indeed, after Reagan's presidency, his affliction with Alzheimer's was publicized, as was Betty Ford's dependence on alcohol and sedatives, and Tipper Gore's treatment for depression.

Halliwell has processed a huge amount of interesting material, part of which has been largely overlooked in historical accounts of mental health so far. The focus on voices of mental sufferers offers a fresh perspective for a broad readership – not only academics, but also mental health professionals, policy-makers and psychiatric patients themselves. His description of personal stories against the backdrop of shifting health policies is informative and nuanced. His multi-layered study offers a broad scope and is a valuable contribution to the cultural history of mental health as well as policy-making. Finding one's way in *Voices of Mental Health*, however, is not always easy. The author's non-linear argument switches back and forth in time between the ideological agendas, legislation and policies during five presidencies (Nixon, Ford, Carter, Reagan, Clinton). He hints at the recurring contradiction between America's obsession with health and the inadequate distribution of health care, but some more clarification about what was rhetorical and what was implemented would have been helpful. The reader may also feel somewhat lost due to the many summaries of policy and media reports, life-stories,

personal confessions, case histories, fiction and films. More frequent explicatory comments and résumés would have improved the book's accessibility.

Unfortunately, this study does not fully live up to the author's aim to explain the connections between the widespread personalized mental health discourse and broader sociopolitical developments. The book lacks an overall interpretative framework and sustained sociocultural contextualization. Furthermore, Halliwell's argument is somewhat one-sided. His main assumption is that the public expression of mental suffering in accessible narrative forms may serve as a healing force for individuals as well as for a divided society. Voicing such misery may indeed foster compassion and social solidarity, challenge stigmatization and discrimination, trigger support networks of patients, and improve overall provision of care. However, there may also be drawbacks. The aspiration in the 1970s and early 1980s was to make the personal political – for which feminism and gay liberation had paved the way – but in the following decades this logic was inverted: the political was increasingly reduced to the personal, reflecting the neoliberal trend to emphasize private initiative and self-reliance. It appears that the personalized focus on mental health problems, which emerged against the backdrop of the self-absorptive 'me-decade', the civil rights movement, and the progressive ideal of a 'caring society', could also be geared to the neoliberal norm of the autonomous and enterprising individual and the self-interested health consumer on the free market. This shift undercut the ideal of health care as a collective responsibility and civil right, and it entailed the neglect of many deinstitutionalized psychiatric patients – all of which Halliwell only mentions in passing.

Although Halliwell does not fully answer them, his book raises interesting questions. What are the implications for democratic politics, civil society and citizenship, if public issues are overwhelmingly discussed in personal, psychological and increasingly emotional language? In the 1970s and 1980s such discourse may have been liberating and empowering. However, as we have learned in the past decade or so, the same kind of dialogue can be upturned and used to express anger and hate and to stir up division. The book implicitly suggests that there is some sort of continuity between the personalized articulation of mental suffering and psychological inwardness in the 1970s and 1980s, and the polarized identity-politics and cultural wars dividing American society more than ever before. Moreover, the self-searching therapeutic culture of the 1970s and the neoliberal celebration of individual self-sufficiency have both drawn attention away from crucial sociopolitical concerns, such as increasing inequality of opportunities, wealth and income. A comparison of American developments with those in other Western countries would have revealed more of the particularities of American political culture, in which selfish individualism seems to be an asset rather than a fault.

The author's recurring preoccupation with the underlying reality of personal stories about mental suffering also raises important questions about epistemology and methodology. Personal confessions, memories and autobiographical accounts, irrespective of whether they are told by mentally stable or unbalanced individuals, are of course inevitably subjective, coloured or even distorted. The reality behind such stories is often difficult to grasp, while the rationale of exploring their coherence is questionable. This is not denying, however, that such discourse can be informative on another level: insight into the social and cultural meanings through which the personal voices of mental health are inevitably mediated. Such shared meanings are more relevant for historical analysis than whatever the particular 'truth' about individual lives may be. Although Halliwell suggests that psychological and therapeutic talk should reflect some sort of true and consistent self, the individual quest for such authenticity is, of course, a culturally and historically shaped (romantic) ideal, which, in the second half of the twentieth century, has extended from intellectual and artistic elites to the masses. Psychiatry, psychoanalysis, psychotherapy and counselling jargon have permeated popular culture, providing people with vocabulary for talking about the intimate and emotional self.