2011

*From Madness to Mental Health: Psychiatric Disorder and its Treatment in Western Civilization.* Greg Eghigian (Ed.). Reviewed by Christopher Hudson.

Christopher Hudson
*Salem State University*

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Although this book is modestly cast as an anthology of writings on the history of mental illness and its treatment, it also introduces the study of the history of the idea of mental illness, of the many controversies, and especially, the history of inhumanity associated with it. Its fifty-five selections, ordered chronologically, span most of recorded history, from biblical selections to the debates on the Diagnostic and Statistical Manual of Mental Disorders. The selections are effectively organized into four eras: The “pneumatic age,” spanning the ancient world, as well as medieval and early modern Europe; the “age of optimism,” encompassing the Enlightenment, the development of the asylum, until the introduction of psychoanalysis; the “militant age,” focusing on the impact of the two world wars and the subsequent perversion of psychiatry under Nazi Germany and the Soviet Union; and the “psychoboom,” covering the proliferation of therapeutic modalities in the last half of the twentieth century. The selections vary dramatically and include biblical poetry, first person accounts of mental illness, administrative memoranda, legal documents, academic discussions, statistical summaries, and clinical observations.

Each part and each selection is introduced by succinct editorial comments that aim at providing background and context. These comments emphasize the ways that psychiatric theories draw on prevailing metaphors and technologies such as the early pneumatic theories involving the four humors or, in the 19th century, electrical and neural theories, and more recently, informational and computational approaches to cognition. Current theories of chemical imbalances involving the neurotransmitters will remind many readers of the Hippocratic theory of imbalances involving the four humors. Eghigian’s comments also highlight the ways that current controversies, such as the nature vs. nurture debate, date back many centuries. A pervasive theme involves what some might regard as an anti-psychiatry bias, focusing on the long history of psychiatric abuse and support for oppressive regimes.
The book includes some limitations. Several of the selections from the classical era, ones that have such indirect relevance to the subject, require more cogent introductory remarks to establish their relevance and implications. Omission of two key writers—Clifford Beers and William James—both associated with the Mental Hygiene Movement at the opening of the twentieth century, is disappointing. The treatment of the relationship of spiritual experience with mental illness, although included in places, could have benefitted from a more in-depth selection, perhaps a first person account, such as Vaslav Nijinsky’s, or a theoretical discussion, perhaps Roberto Assagioli’s. And finally, the collection might have included a better balance of material on the role of the major mental health professions, not just psychiatry and psychology, but other professions, such as social work.

The book’s strengths clearly outweigh its limitations. Its use of personal narratives is a major strength, as it extends the multiplicity of perspectives represented in this work. There are a variety of selections that most readers would otherwise be unlikely to read, ones that provide insight into a variety of historical developments. Discussions of antiquated diagnoses, such as monomania, lypemania, and neurasthenia are all of considerable interest, as well as the treatment of key cases in the development of mental health law, such as the M’Naughten Rule or the case of Elizabeth Packard. Its treatment of the history of the asylum, in America, Europe, and Bengal, is compelling, and includes a patient newsletter that discusses patient unhappiness about the visits of sightseers in an upstate New York asylum in the late 1800s. The search for cures in the first half of twentieth century, through intentional malarial infection, insulin coma, hydrotherapy, and lobotomy, is not light reading. The selections on eugenics, on the Nazi extermination of patients “living a life unworthy of life” in the 14f2 and T4 programs, and of the hospitalization of dissidents under the Soviet Union are particularly shocking and revealing.

Given the breadth and span of the history of mental disorders, public superstition and ignorance about them, and the many attempted remedies, whether barbaric or well-intended, it is not surprising that some key topics may not have been covered by this anthology. Nonetheless, this is an invaluable

Ian Marsh cares about suicide and the people who are affected by it. After working for ten years in the field of suicide prevention as a member of a community mental health team, Marsh has produced an exhaustive analysis of the social, historical, cultural, and scientific practices that have constructed the contemporary clinical understandings of suicide in the field of suicide prevention.

In order to create an opening for alternative approaches to suicide prevention, it is necessary to understand how suicide has been discursively constructed as pathology and how this construction has affected how suicide is treated, experienced, and managed. For Marsh, this requires a Foucauldian approach that attends to the performative role of discourse in shaping the material reality of suicide. In part I, through archival analysis of policy documents, journal articles, books, reporting guidelines, newspaper articles, and first-person accounts, Marsh details how “suicide is discursively constituted, by whom, with what authority, by what means and to what effect” (p. 9).

In part II, Marsh introduces the contemporary regimes of truth that frame suicide prevention. To situate this discursive framing, he draws on medical and psychiatric understandings that describe suicide as “arising as a consequence of mental illness, a form of pathology or abnormality situated within the individual” (p. 65), as well as on accounts of suicide from the news media, and from literary figures struggling with suicide. According to Marsh, suicide is discursively constructed as pathology, stemming from material and mental forces that reside within an individual body. The suicidal subject is understood as either fully determined by a “chemical imbalance” or acting