

Brossard, B., & Chandler, A. (2022). *Explaining Mental Illness: Sociological Perspectives*. Bristol University Press, 194 pages, ISBN 978-1-5292-1505-2

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Arising from the desire to reinvigorate sociological scholarship in the area, *Explaining mental illness: Sociological perspectives* by Baptiste Brossard and Amy Chandler presents a refreshing, scholarly and innovative approach to exploring mental health issues in society. Overall, the book aims to outline key explanations from different theoretical positions and offers a rich critical discussion on the social, cultural and political production of mental health problems. The drive to reinvigorate sociological scholarship emerges through the perceived contemporary stagnation in the field, along with new developments and issues, including the way Western psychiatry has expanded, innovated and changed over time. As an advanced textbook, *Explaining mental illness: Sociological perspectives* caters to a wide audience, ranging from postgraduate researchers and academics to clinical and educational practitioners. The refreshing, relevant and invigorating perspectives presented in this book will especially appeal to those practitioners whose work engages with mental health issues in a variety of settings, including counsellors, teachers, social workers, psychologists and physicians.

The introductory chapter of the book outlines a rich landscape of sociological work, describing what the sociology of mental health is concerned with and how social theory can enrich current understandings of mental pathologies and the workings of the mental health system. A sophisticated discussion of the titular notion of “explaining” (p. 4) stresses the point that explanations for mental health and illness—their existence, components, and even appearance—are derived from different epistemological positions, such as social constructivism or realism. With these notions firmly in mind, Brossard and Chandler present the four central chapters of their book: *Social positions ‘and’ mental disorders* (pp. 9–33), *Society as stressor* (pp. 34–63), *The weight of labels* (pp. 64–89), and *The uses of culture* (pp. 90–116). While the structure offers a helpful orientation, it is the creative organisation of the content within these chapters—according to reasonings rather than lengthy, onerous and difficult to comprehend theories—that brings their scholarship on mental health and illness to life.

Social positions ‘and’ mental disorders begins by outlining an important sociological question that serves to frame this chapter: “[d]oes the position someone holds in their society influence and/or result from their mental health?” (p. 9). The discussion that follows introduces several scholars whose work offers insight into this question through critical examinations of how mental disorders correlate with structural factors, such as social class position. Citing numerous studies, Brossard and Chandler contest the causal linkage which associates mental illness with specific marginalised populations (including ethnic minorities, women, the poor, the unemployed, and the LGBT+ community) by demonstrating that, far from being value free or epistemologically neutral, psychiatric classifications reflect the deeply embedded economic, political, and cultural priorities of a still white, male, and middle class dominated profession.

A summarised version of five explanatory models follows, which provides a helpful overview of the main lines of reasoning, including ‘cultural/behavioural’ and ‘stress’ explanations (p. 19). Expanding

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the discussion on the production of mental illness, three perspectives (pp. 21–31)—namely, intersectional, configurational, and definitional—are introduced that offer alternative theories on the production of mental health (for example, social rather than biological markers for mental disorders). This outline serves to draw attention to the way that scholars have utilised theories to examine the nuances and intricacies of human life to produce explanations of mental health and illness for certain social positions. Furthermore, Brossard and Chandler signal throughout this chapter how dominant ideas—such as those on social class and gender roles—have been used by psychiatric professionals to produce expert discourse on mental health. The chapter concludes with a rousing call to practitioners, academics and researchers to consider the various social and economic inequalities embedded within societies (p. 33), rather than merely focus on dealing with the ‘mental health problems’ of an individual or a specific group (for instance, the poor or young people).

Chapter two, *Society as stressor*, introduces the stress paradigm. Drawing on the original definition of stress as “pressure or overburdening” (p. 34), Brossard and Chandler provide a wealth of studies, models, theories and issues (including increasing urbanisation, parenting styles, and marital status) to highlight the complex entanglement between biology and society for explanations of mental disorders (pp. 35–39). Notwithstanding substantive critiques of this paradigm—including its weak universality and measurability (pp. 42–44), along with the abstraction of context, moral conservatism and the lack of novel findings (pp. 45–48)—stress theories continue to dominate explanations of mental illness in sociology. From the literature presented in this chapter, the success of stress theory has relied on one particular element: emotions. The section, ‘From the meaning of stress to the sociology of emotions’, examines two emotions—anger (pp. 56–60) and paranoia (pp. 60–62)—that have been produced as forms of mental unwellness. These examples highlight how mental disorders have become theorised as rooted in the construction of emotions as biological objects of stress. The complex production of mental disorders illustrates the way various powerful actors (including psy-professionals, pharmaceutical companies and hospital staff) individualise, de-politicise and pathologise social experiences—such as violence, poverty, and gender identity (p. 58)—through a range of political, economic and cultural influences which construct stressful emotions as explanations for poor mental health. The chapter concludes (pp. 62–63) with a call for a more nuanced examination of emotions and of the contemporary idea that, in order to overcome stress and be mentally well, happiness must be attained (see also Davies, 2015).

The third chapter, *The weight of labels*, introduces labelling theory and outlines its various movements from initial construction to reversal of formulation and eventual softening (pp. 65–68). Notions of ‘normalisation’, ‘medicalisation’, ‘marketisation’ and ‘stigma’ are also examined (pp. 71–76) to illuminate how the production of labels which denote states of mental health or illness rely on the alliance between politics, biomedicine, and economics to categorise human life. Concepts of sexuality, race and age appear once more, highlighting how mental illness labels are aligned with dominant social, political, economic and cultural beliefs, rather than biological processes. Brossard and Chandler also introduce significant scholars here, including Canguilhem, Foucault and Armstrong, to illustrate how labels serve as a technology of modern governance, helping individuals manage others and themselves towards greater performance and productivity in a neoliberal, capitalist society. The final section of this chapter concludes with a series of eloquent and powerful questions that can often be missed or taken for granted by researchers, academics and practitioners, including “who labels whom, how, with what power, in what institution, and with what legitimacy?” and “[h]ow do these labels fragment societies into classes, groups and scales?” (p. 89). Engaging with these explanations for mental illness, therefore, opens up the opportunity to understand how labels serve to target the marginalised—such as young people, women, or those of colour (Cohen, 2016).

The last of the four main chapters, *The uses of culture*, seeks to highlight several complex themes that intertwine explanations of culture and mental disorder. The chapter gives particular attention to the topics of colonisation, discrimination and essentialism (pp. 94–96). For instance, highlighting the tension of

relativist versus universalist positions (pp. 96–99)—the latter exemplified by the Movement for Global Mental Health—the chapter examines how claims to expert knowledge on mental health can function to guide diverse cultures to conform to Western values, attitudes and ways of seeing the world. Rather than viewing explanations for mental illness as purely culturally relative, however, the authors address the gripping questions: “[h]ow do mental disorders ‘circulate’ from one culture to another?” and “[d]oes this circulation flow with existing balances of powers?” (p. 100). Three models—diffusion, inversion and amplification—are presented to explore how various issues and concepts (such as gender roles and beauty standards) (pp. 100–101) operate to shape diverse cultural perspectives, values and attitudes towards Western standards. Therapeutic techniques, cultural wisdom and cultural conceptualisations of individual problems (pp. 101–102) are also mentioned in the light of how biomedical Western knowledge and practices of healing and health have concealed or filtered out other knowledge systems over time (p. 102). The chapter also introduces studies that emphasise how Euro-American imperialism and colonisation can result in significant challenges for a range of disenfranchised groups, including migrants. Alongside a discussion of ‘Illness as cultural expression’, Brossard and Chandler provide three types of integrative models—bio-psycho-social models, ecological niches, and postcolonial and decolonial approaches (pp. 111–114)—which address issues of Western dominance in explanations of mental illness from the perspective of Indigenous and critical scholars.

The book’s concluding chapter draws the discussion of sociological perspectives to a close by exploring how psy-professionals such as psychologists and counsellors make specific understandings of mental health and illness available and desirable in society (pp. 117–118). Here, the authors reiterate their main aim for researchers, scholars and professionals to further examine popular discourses and ideas on mental illness (including the global ‘mental health crisis’) in a critical manner.

I believe that at the very least, Brossard and Chandler’s scholarly work should lead academics, politicians, educators, policymakers and practitioners to consider the possibility that “mental health is not (only) about mental health” (p. 122). Throughout their book, Brossard and Chandler provide compelling evidence for how and why conceptions of mental health and illness are embedded within social relations, organisations, culture and society. As a result, readers are invited to consider a bigger picture of mental health and how explanations for mental illness are not simple, straightforward or unproblematic. While the book could have included specific studies that examine the voices of those with lived experience of mental health systems, I believe that the sheer volume and quality of scholarship exhibited by Brossard and Chandler provides a depth that outweighs such criticisms (perhaps a follow-up book that expands their work into these specific areas—with a title such as *Experiencing mental illness: Sociological perspectives* or *Sociological perspectives on emotions, trauma and distress*—may be in order?). In summation, this book makes a substantial contribution to the sociology of mental health and brings forth a re-invigorated, highly creative and well-rounded level of scholarship. *Explaining mental illness: Sociological perspectives* will prove to be a popular resource for students, academics and mental health professionals.

References

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