

## Helen Barrett reviews *Agnes's Jacket: A Psychologist's Search for the Meanings of Madness*

by Gail A. Hornstein

PCCS Books (UK edition. Ross-on-Wye 2012). PBk. 310 pages. £14.99.

Born in 1844, Agnes Richter, seamstress, was admitted to a lunatic asylum in 1893 and spent the last 23 years of her life there. At some time, possibly around 1895, using the only materials available, Agnes made herself a jacket. Elegantly styled, it reflected her tiny, slightly deformed shape. All over, inside and outside, forwards and backwards, Agnes embroidered it. Though some words have been deciphered, such as *no cherries, crooked, I am not big, I wish to read, I plunge head-long into disaster*, no one has yet fathomed out the meaning or purpose of the letters and symbols. As Hornstein writes (p. xi), 'Agnes's intense emotion and the tattoo-like quality of the text make the jacket feel inhabited, like a suicide note or the scent lingering in someone's clothing long after death. Encountering her jacket feels more like seeing a ghost than inspecting a work of art.'

Since early in her career as an academic psychologist, Professor Gail Hornstein has been intrigued to find out what sense people make of their experiences of madness and, particularly, to understand why their voices have been suppressed and ignored. She has accessed extensive archives of published and unpublished material, including diary records, fuller biographies and autobiographies, witness accounts of treatments, a wide range of art works and innumerable research papers and texts. She has attended many conferences, often run by and for people with direct experience of 'madness', and has met and interviewed a huge variety of people working and living in the mental health arena. With such a vast and varied wealth of material, it must have been difficult to decide what to include and how to weave it all into a reasonably coherent narrative. Yet, in this, Hornstein has definitely succeeded. *Agnes's Jacket* provides a fascinating and rich resource for those seeking meanings in madness.

Perhaps key to this success is Hornstein's remarkable ability to tell a jargon-free story, her focus on first person accounts, and her open mind in respect of the many controversial and often disturbing issues raised. Throughout the book, there is a sense that, despite her 'deeply unsettling' realisation that she is 'in closer agreement with the views of patients than with the professionals who treat them' (p.xxi), Hornstein constantly aims for a fair and balanced view.

With the exception of some practitioners

subscribing to Critical Psychiatry, she is highly critical of psychiatric practices. This criticism includes the ineffectiveness of drug-based treatments, the dangers and seriously negative side effects neuroleptic drugs and other physical treatments such as electro-convulsive therapy (ECT) or insulin-induced comas, and the unhelpful, power-skewed way that psychiatrists negatively

label, invalidate and over-ride their patients' need to communicate. In her view, psychiatrists are too much influenced by pharmaceutical firms who reap big profits, cultivating an ever-growing 'mental market' to the detriment of patients of all ages. It is true that Hornstein might usefully have offered more evidence to substantiate her claims on these issues. Yet her chief aim is clearly to reveal alternative perspectives and approaches.

Much of the book documents the growth of patient-led communication and support networks, especially the Hearing Voices Network (HVN) and Survivors Speak Out (SSO) in Britain, and the Freedom Movement in the US. Mental health workers within the Critical Psychiatry Network and patient-centred approaches like those advocated by the Arbours and Philadelphia Associations also receive a mention.

Throughout, Hornstein forestages the voices of founders and participants in these patient-centred movements. Voice-hearers explain how they have learned to cope with very frightening emotional states not by denying the presence of voices but, rather, by recognising them, talking to others about them and so, gradually, learning to live with and limit their influence. Others talk about journeys taken in developing new ways to cope with emotional distress and to escape stigmatisation. Formerly silent and/or silenced voices of abuse survivors also join the narratives.

All these voices present diverse perspectives and, often, contradictory views. A potent emergent theme is the notion that routes to recovery are rarely predictable or prescribe-able. Each person, each voice, each unique story has its own reality and validity. All they ask is 'someone to be there for me... Why is that too much for us to be asking?' This essential need, Hornstein argues, cannot be met by mental health systems that routinely label substantial proportions of patients untreatable or deluded.

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Dr Helen Barrett, a developmental psychologist with first-hand experience of psychiatric services, has written books and papers on children's emotional development, parenting interventions and family trends.

