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In *Humanizing Mental Illness: Enhancing Agency through Social Interaction*, Abigail Gosselin explores how mental illness and agency are intertwined and argues that we all have a moral obligation to approach those with mental illness with humility and compassion. The book is an important contribution to our understanding of mental illness and the significance of social connectedness for reintegrating people with mental illness into social life.

First, Gosselin explores the stigma and discrimination that people with serious mental illness often face. Importantly, biomedical knowledge has failed to reduce stigma; in fact, biological attributions of mental illness can increase perception of people with mental illness as intrinsically defective and in need of intervention. Stigma renders individuals with mental illness as Other and can lead to social exclusion and isolation. In doing so, it constrains agency. Internalized stigma, as well as the symptoms of mental illness, also contributes to isolation, which is troubling because social integration is crucial for recovery from mental illness.

Gosselin focuses on the concept of "agency" throughout the book. She differentiates between epistemic agency and moral agency. Epistemic agency involves practices surrounding meaning making and seeking knowledge and entails logical reasoning and evaluating claims based on evidence. Moral agency involves making free choices based on reason and being responsible for those choices. Mental illness and its stigma threaten both epistemic and moral agency and can also compromise individuals' free will if they are overwhelmed by stigma, their symptoms, and the constraints both pose.

While others have more directly addressed the issue of moral responsibility, Gosselin straightforwardly states that the book is not primarily an exploration of the degree to which people with mental illness are morally responsible or to blame for their behavior. She does, however, explore the topic. Other people cannot determine the extent to
which people with mental illness have or do not have agency. In situations in which a person with mental illness, due to their symptoms, engages in behavior that is seen as problematic or has negative consequences, Gosselin argues, we should not approach the situation with blame. Agency is not all or nothing; a person with mental illness may have diminished agency when they are unwell, but this does not necessarily imply that the individual has no agency. Gosselin argues that we should, in cases of a person’s constrained agency, withhold judgment and forgive bad behavior in service of allowing change to occur within the person. We should approach the person with charity and humility.

Most important, Gosselin outlines an approach to interacting with people with mental illness. People are morally obligated to enact certain virtues toward people with mental illness. Beyond epistemic humility and charity, she argues that other aspects of approaching people with mental illness are crucial for their reintegration into social roles. These include open-mindedness, epistemic conscientiousness, compassion, and generosity. If we interact with people with mental illness using these, we can break down stigma and help promote social connectedness and understanding. It is our moral obligation to treat people with mental illness with an open mind, desire to understand, and kindness. We should not place blame but, rather, approach with charity. This is how we humanize mental illness.

I have two major critiques of the book. First, while it is well written and clearly delivered, there are parts that are redundant. Some concepts are repeated throughout, which can provide helpful reminders of arguments made earlier (or later) in the book but which also can belabor the point. Second, from the perspective of a sociologist, sociological discussions of agency typically entail addressing the role of social structure in constraining and/or enabling the agency of individuals or groups. Gosselin does not discuss the influence or potential effect of social status, such as race, class, or gender, on the agency of both people with mental illness and those who may either support or stigmatize individuals with mental illness. Factors like race and social class complicate our understandings of stigmatization and agency within and surrounding mental illness. It would be interesting for future work to explore how identity and social structure intersect and how these influence the applicability of philosophical conceptions of agency (of people with or without mental illness) and socially ascribed responsibility in the case of serious mental illness.

Ultimately, this book is a well-written and compelling read for both academics and people interested in mental illness alike. Gosselin openly discloses her own lived experience with serious mental illness throughout the book, and this openness and honesty is deeply appreciated and is a choice that can address stigma directly. I found her discussion of her own experiences to be illuminating and appropriately interspersed in relevant parts of the book, and her perspective on mental illness is richly informed by her personal experience. Example quotes from other individuals who have experienced mental illness are clear and informative, and she refers to these stories throughout the book. There is a good balance between the conceptual and the concrete, and concepts are discussed clearly and accessibly for those unfamiliar with philosophy. The book is enjoyable to read, is informative, and presents a hopeful perspective.
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