

## **Book Review**

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Price, H. (2022). The Language of Mental Illness: Corpus Linguistics and the Construction of Mental Illness in the Press. Cambridge University Press. 314 pages; ISBN: 9781108994040.

With mental health becoming an increasingly important issue, as witnessed by a growing amount of news coverage, an increasing public awareness and a rise in mental illness generally, the language used to describe and discuss these issues takes on a greater significance; after all, it shapes the way we perceive mental health and ultimately act upon it. Though attempts have been made to remove some of the stigma attached to mental health, it appears that no comprehensive research on the language used to discuss mental illness and mental health has been carried out from a purely linguistic perspective. In this, Hazel Price has harnessed the opportunities afforded by corpus linguistics methods (Baker 2006; Hunston, 2002) to obtain a more widely representative picture of how language is used in health (care) communication research contexts (Brookes et al., 2022; Hunt & Brookes, 2020; Sarangi, 2016, 2017), where (critical) sociolinguistic (Heller et al., 2018; Holmes, 2013) and (critical) discourse analytic perspectives (Blommaert, 2005; Fairclough, 2013; Gee, 2014; Wodak & Meyer, 2009) have been taken to address a wide array of topics and genres, including illness narratives, patient-practitioner interactions, media representations of health, and so on.

Hazel Prize has taken up the challenge of filling precisely this gap by analysing thirty years' worth of press articles covering mental illness and mental health, painstakingly sifting through a corpus of almost 45 million words, to which various theoretical and methodological approaches are skilfully applied in an admirable attempt to identify how mental illness is discursively constructed in the British press. The result is a well-managed and thoughtful study which will interest researchers in corpus linguistics and health communication practitioners especially, offering a sound theoretical basis as well as several practical implications for the health community at large.

The book is divided into ten chapters, beginning with a clear and accessible introduction briefly describing previous research on the language of mental illness, setting out research questions and providing a short description of the corpus and an outline of the structure of the book, with details on the conventions used throughout to help readers find their way through the text.

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The first half of the book is mainly concerned with the theoretical background underpinning the study and the methodological approach to the data used, starting from social constructionism and how it applies to Critical Discourse Analysis (CDA). Alongside this, there is a discussion of the various themes related to research on mental health and language and an overview of the literature on how mental illness is represented across a range of text types and analytical disciplines. This is followed by a description of the methodology used, starting from corpus linguistics, with details on the analytical methods and the 1984 – 2014 corpus under study, followed by an introduction to CDA. The author helpfully provides an overview, charting its progress from linguistic inquiry into ideology up to present day research into corpus-assisted discourse analysis, which combines CDA with computational methods. Here, the author focuses on what he calls "naming analysis" and "transitivity analysis", developed further in the second half of the book, and calls into question the legitimacy of previous research in CDA and its over-reliance on interpretation, as well as the objectivity that the automation of text analysis using corpus methods claims to bring with it. The final section of this first half of the book details how the corpus for this study was built up. The author meticulously describes how search terms were generated using Mind's A-Z of mental health and provides a detailed discussion of their interpretation as well as the rationale behind the data covered. There are also, to my mind, some valuable insights into the practical issues of linguistics, programming and the nature of language and an outline of the problems that the interdisciplinary nature of corpus construction poses for the researcher. Arguably, 'seasoned' researchers of corpus linguistics may be tempted to skip fairly quickly through the theory, as they would be familiar with the notions discussed, but will certainly appreciate the robust measures taken to build up the corpus and sort through the data. I believe that researchers in health communication and health humanities, on the other hand, are bound to welcome the steady hand of the author, guiding them through the intricacies of linguistic theory and providing them with additional weaponry to tackle the topic of language in mental health.

The second half is dedicated to results and discussion. Here the author argues that, even though 'mental health' and 'mental illness' have generally been dealt with as meaning one and the same thing, they are two distinct terms whose meaning has shifted over time. In exploring their usage in the corpus, the author points out that while these terms were conceived of by the World Health Organisation as belonging to opposite ends of the scale, 'mental health' has now become a euphemism for 'mental illness' and is being gradually replaced by the relatively new term 'wellbeing'. Naming analysis is then used to explore the labels associated with mental illness in more detail, with a description of the various initiatives such as the *Time to Change* campaign, which has attempted to de-stigmatise mental illness by prescribing alternative forms of language use, such as person-first as opposed to identity-first language, (e.g. referring to a person with mental illness instead of a mentallyill person). Interestingly, the findings suggest that in fact there was little difference between the two in the press, with both of them generally being used in a positive context – challenging stigma and focusing attention on adequate care – somewhat at odds with previous thinking by campaigners. The author goes on to investigate the labels 'patient', 'sufferer' and 'victim' to show how they are generally associated to specific illness types, so that people with posttraumatic stress disorder are often described as 'victims' and people with Tessuto Page | 3

schizophrenia as 'patients', which of course may affect the way they are perceived. The author also finds that people with mental illness are increasingly labelled as statistics or quantities, a favourite weapon employed by the press to sensationalise the news, but one which also has the clearly negative effect of depersonalising people with mental illness. The book also looks in detail at the term 'suffer', frequently used to describe people with mental illness, and the term 'experience', identified by anti-stigma initiatives, like the aforementioned Time to Change, as a preferred alternative. Through a mixture of quantitative and qualitative analysis, the author seeks to explore whether there is in fact any linguistic basis to justify claims that 'experience' may indeed be a less problematic term than 'suffer'. Her findings suggest that 'suffer' is almost always attributed to others, thus removing agency from the subject, and that has a generally more negative value, and, importantly, is used to describe situations over which people have no control and thus no possibility to rectify the cause of the suffering. 'Experience', on the other hand, would appear to convey a sense of 'lessons learned', so that people are better equipped to deal with something through experiencing it, and generally occurs in contexts where people have greater control over the condition they are experiencing. The author thus concludes that what *Time to Change* intuitively suggested may indeed result in taking some of the stigma away from mental illness.

Before the monograph's conclusion, we are provided with fascinating insight into how some specific mental disorders are represented in the press through keyness and prototypical text analyses. First, the symptoms associated with each disorder are identified before a quantitative analysis of the relative keywords is performed across the corpus, and a qualitative analysis is carried out on the most prototypical text relating to each specific disorder. Findings reveal that though coverage of some symptoms may indeed be accurate, many symptoms are over-represented with some symptoms being practically absent, thus giving a distorted picture of the reality of mental illness. If we take, for example, Post Traumatic Stress Disorder (PTSD), the data suggest that the press do generally present the range of symptoms associated with PTSD, but then that these are also most often discussed in the context of war and crime. with little attention paid to other large groups of people who experience this condition but still manage to function, not least of all women experiencing birth trauma, who make up a large part of this category. When it comes to bipolar disorder, articles tend to focus on a narrow range of symptoms – such as mood swings, highs and lows, etc. – but very rarely mention other symptoms like hallucinations or hearing voices. The press also makes frequent recourse to stories about celebrities with bipolar disorder, like Catherine Zeta-Jones, which may admittedly help familiarise readers with the disorder, but still do not tell the whole story. A similar pattern is found with the representation in the press of obsessive-compulsive disorders (OCD). The data reveal that the press tends to focus on certain specific aspects of the disorder, like washing and cleaning, with little mention made to other symptoms; as a result, the myth that people experiencing OCD are constantly washing and cleaning is reinforced, with a whole range of other symptoms being overlooked. A short section of this part is also dedicated to collocation analysis using Sketch Thesaurus, which reveal some symptoms and links between illnesses that failed to emerge through the keyness analysis. Arguably, this could have been included at the outset of this part and discussed in more detail alongside keyness, thus providing a more complete picture of how the press represents specific disorders, but there is no

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doubt that it will constitute an avenue for further research. The author concludes the book by briefly discussing findings and the extent to which the research questions have been answered, presenting limitations and future directions for this research and, importantly, offering some practical implications.

This book definitely marks a first step in a very interesting research direction, which could include further study into specific disorders and a more extensive investigation into some of the prescribed terms suggested by initiatives like *Time to Change*, which though well-meaning may lack solid linguistic grounds for their choice. A study of the language of mental health used in the wider public space of online communication would also be welcome to engage a broader community of practitioners working within the field of mental health communication. On the whole, this is a thoroughly researched and accessible book, which will be a vital resource for those in the field of language and health.

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