Dan Degerman: Diagnosing the Politics of Feeling: Degerman's Arendtian Deconstruction of Medicalised Affect

Book Review: Dan Degerman, Political Agency and the Medicalisation of Negative Emotions, Edinburgh: Edinburgh University Press, 2024, 208 pp., 20,99 GBP.

Dan Degerman's book provides the reader with a *tour-de-force* of the intricate relationship between political agency, emotions, and medicalisation. From the very outset, the author makes it clear that he eschews the individualising tendencies underpinning (predominantly) Foucauldian-inspired inquiries into the structural and discursive power(s) driving the 'psy-professions'. Instead, Degerman opts for a more politically-oriented analytic framework that is heavily indebted to Hannah Arendt's intellectual legacy – so much so that his approach could justifiably be described as a Neo-Arendtian corrective intervention. His primary argument is summarised by the assertion that medicalisation significantly impacts factors that empower individuals to channel their emotions into political action (2024, p.19). Through a meticulously constructed analysis that draws upon an extensive range of interdisciplinary sources, Degerman's work attempts to provide a novel framework for understanding how contemporary society increasingly views negative emotions such as fear, anger, and grief through a medicalised lens, often doing so at the expense of recognising their political significance and potential for concerted action.

The first two chapters constitute a theoretical foundation, wherein Degerman outlines the framework bringing together his three primary targets of inquiry. The crux of his argument rests on two fundamental insights derived from Arendt's thought: (a) that negative emotions must undergo a process of transformation that turns them into public issues to adequately support political agency; and (b) that the end-product of this transformation is fragile insofar as its legitimacy (i.e., *genuineness*) is susceptible to doubt. The former insight is developed throughout the first chapter, starting from Degerman's provision of a nonsovereign definition of political agency as "the capacity of an individual to act in concert with others to shape or respond to a public issue" (p.27). He then argues that emotions support the development and sustenance of political agency across four dimensions, by motivating reflection, driving action, facilitating communication, and sustaining social cohesion (pp.32–34). The second chapter is devoted to the latter Arendtian insight, with Degerman further identifying four "dis/empowering" factors that can either facilitate or inhibit the transformation of negative emotions into public issues, highlighting their fragility: affiliations, spaces, institutions and laws, and conceptual resources (pp.52-68).

Medicalisation, which he defines as "the transformation of negative emotions and apparently emotional actions into psychiatric disorders" (p.10), is similarly argued to act

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in a twofold, dis/empowering capacity, given that it can both depoliticise emotions or help individuals rearticulate them in politically meaningful ways. The subsequent chapters draw upon this framework to explore four relevant case studies.

The third chapter marks the beginning of Degerman's case-by-case incursion, investigating the medicalisation of grief and its impact upon political agency within the context of Brexit. Grief, he argues, is comprised of an array of unpleasant feelings that are not political *per se* (e.g., uncertainty, absence), and thus demand reconfiguration into a public issue. He subsequently traces the ways in which Remainers engaged in this process during the aftermath of the referendum, by way of drawing connections between national politics and their personal experiences through meta-emotional rhetoric (pp.78-82). Degerman also outlines how the media and mental health professionals engaged in medicalising attacks to depoliticise the post-Brexit grief of individuals, by placating them to simply accept the consequences of a democratic vote and alluding to their feelings as constituting indicators of individual pathology (pp. 82-92). The fourth chapter takes on a very similar approach, this time examining how anger was medicalised during the Occupy Wall Street movement. Building on activist testimonies, news media, and court records, Degerman contends that the movement itself facilitated the reconfiguration of anger into a political emotion (pp.98-100), whilst being simultaneously subjected to medicalising attacks that sought to diminish its potential for change by upholding that the encampments were populated by a significant number of mentally-ill people (pp.100-108). Collectively, both chapters work to factually substantiate Degerman's framework, setting the scene for more nuanced discussions in the remainder of the book.

The fifth chapter shifts the focus away from overt medicalisation to what Degerman calls "hyper-emotionalising attacks" (p.113), examining fear in relation to UKIP and its supporters. He opens with a critique of existing paradigms that denounce fear as a political emotion, arguing that theorists have largely overlooked both its potential to support political agency and the dis/empowering factors that its medicalisation may influence (pp.113-117). Subsequently, through an analysis of media reports, Degerman highlights the rhetoric deployed by opponents against UKIP and its voter base, which drew upon fear-based language to portray these actors as driven by a primitive emotion that prevented them from acting rationally (pp.117-125). In a similar vein, the sixth and final chapter does not focus on a specific emotion, providing instead a comprehensive discussion of political agency within the psychiatric user/survivor movement. Building on a vast array of sources ranging from newspaper articles, psychiatric literature, and the writings of activists, Degerman first gives an overview of successful user/survivor initiatives within the political realm, following up with a summary of how clinicians in the USA and UK have responded to their criticisms (pp.131-136). Following, he discusses the co-optation of user/survivor concepts within hegemonic psychiatric policy and practice, focusing on the depoliticization of recovery to ultimately assert that this appropriation can also have a dis/empowering effect upon the political agency of activists (pp.136-144). Both chapters work to bolster the complexity of Degerman's framework through their assessment of instances where medicalisation either takes a covert form through hyper-

emotionalising attacks, or has been structurally reinforced through diagnoses provided by psychiatric institutions.

The most powerful insight of Degerman's analytic intervention lies in its adept substantiation of the claim that psychiatric diagnoses do not *always* entail a diminishment of one's political agency, as argued in the final two chapters. This proposal finds itself in direct opposition to a longstanding intellectual genealogy within the literature that conceptualised it precisely as such, typified *par excellence* by the anti-psychiatry movement of the 1960s and 1970s, which has been frequently criticised for its lack of insight into the politicallyempowering potentialities of psychiatric concepts. However, Degerman's framework, in particular through his discussions of the user-survivor movement and fear in relation to UKIP, provides a nuanced perspective that acknowledges the dual role of medicalisation for emotions historically overlooked by theory. By integrating these insights into his account, he not only challenges the hegemonic understanding of psychiatric diagnoses and emotions as purely disempowering but also enriches the discourse on the potential for medicalisation to serve as a source of political empowerment. His nuanced approach urges a re-evaluation of the role played by the 'psy-professions' in political theory and practice, emphasizing the crucial importance of context and individual experiences for determining the impact of medicalising discourses and categories on political agency.

While the argument provided and defended by Degerman is compelling, it is not one without its shortcomings. His attempt at clarifying numerous analytical complexities and giving adequate critical consideration to all their aspects is nothing short of commendable, especially given the contentious nature of the issues discussed. However, the near-constant shifting between the empowering and disempowering effects of multiple concepts not only makes for an often-convoluted reading experience, but renders it challenging to grasp how his framework attempts to move beyond mere description. The dual role of medicalisation is a prime example of this challenge. Degerman's discussion of medicalisation, presented through a series of brief explorations, is conceptually intriguing but practically ambiguous. He argues that medicalisation can both depoliticize emotions by framing them as individual psychiatric issues and potentially rearticulate these emotions in politically meaningful ways. Whilst the first half of the argument is very well-substantiated in Degerman's discussions of grief, anger, and fear, the second half is not nearly as thoroughly developed throughout his account of user-survivor movements in the final chapter. A lack of more in-depth exploration of the transformational processes underpinning the empowering dimension(s) of medicalisation undermines the explanatory potential of the framework and thereby raises questions about the full extent to which it could adequately (and positively) support political agency. Moreover, the framework could benefit from deeper and more explicit discussions on practical implications. Addressing these gaps would enhance its potential to aid our understanding of the complexities of medicalisation and its role in fostering political agency.

Overall, Degerman's book provides an incisive and timely contribution to recent debates surrounding the relationship between mental health and politics that have been thrust into the limelight of both public and scholarly attention in the wake of events such as the COVID-19 pandemic – a paradigmatic shift which he often directly engages. For practitioners in the field, Degerman's work provides a vital call to reconceptualise mental health in a more holistic and politically engaged manner that not only empowers individuals, but simultaneously fosters their ability to engage in collective action for social change. For scholars in the humanities and beyond, irrespective of their theoretical inclinations or engagement with Arendtian thought, his book provides a critical foundation for understanding the complex interplay between emotion, medicalisation, and political agency that is both intellectually rigorous and morally compelling, making it a valuable theoretical resource for furthering discussion, research, and policymaking initiatives.

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