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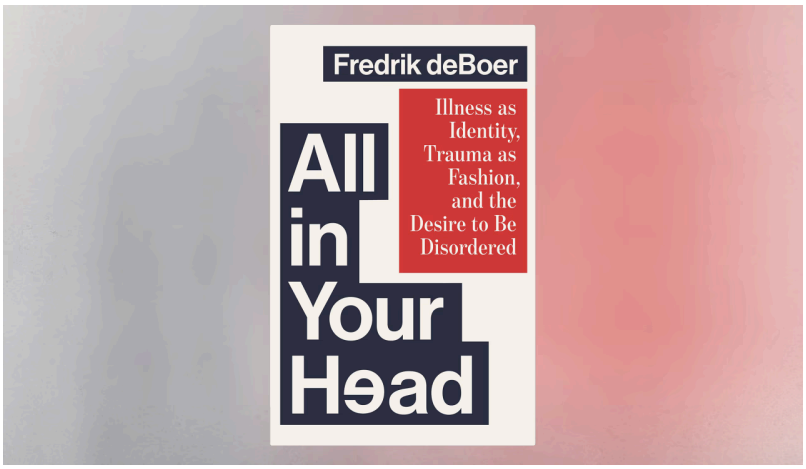
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'All in Your Head' Review: Delusions of Sanity

The mistaken romanticization of mental illness has helped produce a culture that fails to help those most in need of treatment.

By Sally Satel
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Fredrik deBoer's encounters with bipolar disorder began when he was 20 years old in 2002. He became paranoid; his jumbled thoughts piled up on one another. There were wild bouts of energy, physical aggression and crushing loneliness. Close attention to his medication regimen helped bring his illness under control by his mid-30s. He has since written two books on education and social trends. His novel, "The Mind Reels," about a college student with an illness similar to his own, was published in 2025.

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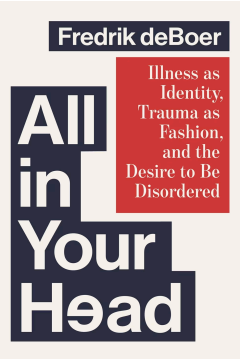
All in Your Head: Illness as Identity, Trauma as Fashion, and the Desire to be

The story of Mr. deBoer's ordeal appears in the early pages of "All in Your Head" as a bid to establish the author's credentials as a cultural historian of disorders like his own.

Disordered

By Fredrik deBoer

Simon & Schuster



He aims, he writes, to discuss the "politics of insanity in the modern world." He targets the antipsychiatry movement for fostering dangerous misunderstandings about psychotic disorders and argues against "the tendency to treat mental illness as an exciting adventure." This misbegotten "romanticization of lunacy in popular culture," Mr. deBoer says, is "one of many aggravations I have nursed for years." By the end of "All in Your Head," those aggravations seem well-justified.

The author traces the roots of the problem to the early decades of the 20th century, with psychiatry's flailing, if well-meaning, efforts to address mental illness via cures that included lobotomies and insulin comas. As Mr. deBoer writes, in an era when the only treatment for mental illness had been custodial care, procedures such as lobotomies were seen as "a chance to return patients to the community, even if with diminished capacities." In the 1950s and '60s, these treatments were displaced by newly approved antipsychotic medications such as Thorazine and Haldol. Meanwhile, exposés of the wretched conditions in state asylums began to get public attention.

These developments prompted an exodus of patients from state hospitals beginning in the mid-1950s and accelerating after federal legislation in the 1960s called for more community-based treatment of mental illness. By the 1990s, most of the old mental institutions had been closed. But although some patients, once medicated, could live rewarding and independent lives, funding for reliable community treatment never materialized, leaving many of the most seriously ill unsupported.

Activists, many of them associated with the counterculture of the 1960s, mounted a backlash to psychiatry as an instrument of social control. (Ken Kesey's 1962 novel, "One Flew Over the Cuckoo's Nest," became a

touchstone for this movement.) Mr. deBoer calls the antipsychiatry movement "a true child of the late twentieth century." While he acknowledges that whistleblowing about abuses is honorable and necessary, he condemns the tactics of many opponents of psychiatric treatment. Some dissuaded even the sickest patients from taking medication. The movement, he writes, was full of "bomb throwers but no builders, screeds but no manuals, critique but no solution."

The book also explores what the author calls the "gentrification" of mental illness. This happens, Mr. deBoer explains, when relatively high-functioning young people come together on social media to lower the threshold for qualifying for a diagnosis. This trivializes conditions such as autism and post-traumatic stress disorder. It siphons resources away from the sickest, encourages overmedication and medicalizes normal variants of human distress.

Why the desire to be disordered? "Claiming a dramatic identity can buy likes, solidarity, potentially an influencer career, inroads into activist circles, and even access to institutional accommodations," the author suggests. "Few identities are more dramatic than The Sick Person."

Such trends distract our attention from the worst of what psychosis can precipitate. "Schizophrenic patients rip out their own teeth with pliers to look for CIA listening devices within them, then die of sepsis," Mr. deBoer writes. "Mothers suffering from postpartum psychosis drown their newborns. Unmedicated bipolar patients stab their spouses due to perceived disloyalty." He rightly insists on a realistic view of how harrowing extreme mental disorders can be.

The book's useful descriptions of significant concepts in the treatment of mental illness include his discussion of anosognosia. The phenomenon, common among people with schizophrenia and bipolar psychosis, is a failure to recognize illness within oneself. "To someone in the grip of psychosis," Mr. deBoer explains, "a delusion is not a hypothesis to be weighed, it's a fact, every bit as real as the ground under their feet." Those

with this condition face a paradoxical challenge. "How do you notice that you're sick, when your noticer itself is sick?" he asks.

Among the author's valuable if broad recommendations, he urges legislation that would establish mandatory follow-up care after the treatment of serious mental illness. "A person can be psychotic on Tuesday," Mr. deBoer points out, "stabilized for forty-eight hours in an ER, discharged with a printout and a bottle of sedatives on Thursday, and be psychotic again by the following Monday." He also argues that involuntary treatment should be easier to achieve, even for those who do not pose a threat of imminent harm to themselves or others. We have come to believe that it is "more respectful, more enlightened, to let the sick slip through the cracks than to require them to accept treatment," he writes. "The grand experiment in maximum autonomy has failed."

The author calls upon organizations of mental-health professionals to "push back against the waves of pseudo-medical trends" by lobbying for better scope-of-practice laws. These would draw a legal line between licensed psychiatrists and psychologists and the "unregulated swarm of 'wellness coaches,' 'trauma guides,' and influencers who currently traffic in the language of therapy without any of the accountability."

"All in Your Head" is a poignant and powerful call to sanity that challenges us to address the pain of those who are so sick they don't even know it, and to protect the vulnerable from those who have made the diagnosis of a mental illness a token of status.

—Dr. Satel is a psychiatrist, a senior fellow at the American Enterprise Institute and a lecturer at the Yale University School of Medicine.

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