

MADNESS

IN POST-1945 BRITISH AND AMERICAN FICTION



**CHARLEY BAKER, PAUL CRAWFORD,
B. J. BROWN, MAURICE LIPSEGE
& RONALD CARTER**



Madness in Post-1945 British and American Fiction

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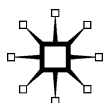
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Madness in Post-1945 British and American Fiction

By

Charley Baker, Paul Crawford, B. J. Brown,
Maurice Lipsedge and Ronald Carter

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Contents

<i>Acknowledgements</i>	viii
<i>Author Biographies</i>	ix
1. Writing Madness, Analysing Madness	1
2. Mental States	18
3. Power and Institutions in Fiction	61
4. Diversity, Ethnicity, Madness and Fiction	99
5. Creativity, Madness and Fiction	130
6. Postmodern Madness	159
7. Literature and Clinical Education	184
<i>Notes</i>	195
<i>Bibliography</i>	196
<i>Index</i>	211

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Nothing Black. His second novel, *Hair of the Dog*, is represented by Bell, Lomax & Moreton, London. In 2008 he was awarded a Lord Dearing Award for Excellence in Teaching and Learning.

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1

Writing Madness, Analysing Madness

Deviant behaviour has always both repelled and fascinated mankind. Interesting to observe are the non-conformists, the sinners or the rebels, who violate society's supposedly normal standards. Social scientists continually debate the definitions and labeling of what is deviant and what is not. But from what better source could one learn about madness, violence, murder, deceit, betrayal, lust, greed, loneliness and depression than in writers such as Sophocles, Aeschylus, Shakespeare, Dostoyevsky, Faulkner, Genet, Nabakov, Burroughs and Stephen King? (Rieger, 1994a, p. 3)

To writers, dramatists, health professionals, and the public at large madness has long been, and remains, a compelling preoccupation. Despite the attention madness has received in both medicine and in popular culture, it remains a diverse and enigmatic entity or experience, defying efforts to comprehensively and adequately comprehend, categorise and manage it. Madness naturally confronts practitioners and researchers in the health and social care disciplines, but it is also encountered by other professionals in, for example, education, the media, and public administration. Most importantly, madness confronts, affects, and afflicts sufferers themselves, alongside their friends, relatives, and carers. The problems caused by mental ill-health, or as we prefer *madness*, have a pervasive effect on how we lead our public and our private lives. Finding ways of understanding the multitude and variety of experiences of madness is as urgent a project as it has ever been.

This book explores one potential source of the understanding and interpreting of madness: fictions published in Britain and the US in the period since the end of World War Two. As Barbara Tepas Lupack

suggests, 'postwar experimental fiction searches for ways to deal with the violence, brevity and rigidity of life and carries to great extremes the themes of combativeness, fragmentariness, coolness and meaninglessness that are the marks of much modern fiction' (1994, p. 169). Literature from Homer to contemporary fiction presents an archive of madness – of bizarre or inexplicable experiences, mental distress, behavioural disturbances, and interpersonal difficulties. Fiction also depicts elements of fantasy, resistance, resilience, tenacity, resourcefulness, and creativity that can be labelled, depending on context and circumstance, either as positive qualities or as deviant entities. Whether we are health and/or social care practitioners, or our private life brings us into contact with people who may be seen to be mad, or whether we will at some time be sufferers ourselves, the archive of individual stories and representations of madness in literature has a vital role to play in our comprehending, mapping, and negotiating of madness. Stories – whether written or verbally narrated – are the most ancient yet often the most effective way of representing experience. They help to make sense of bewildering, consuming, or overwhelming events and experiences. The humanities have a vital role to play in assisting understanding, ameliorating, and offering comfort in experiences of health and illness, and are increasingly being used in the education of doctors and other health care professionals.

We have written this book firstly because we believe that contemporary fiction can help us to understand madness, and secondly because literature that focuses on madness provides a fertile body of material for illuminating and interesting literary analysis. In this book, we explore some of the themes and tropes of madness that occur in post-war American and British fiction, using an eclectic mix of analytical approaches, examining literary style and theme but also attending to the contribution that can be made by theoretical approaches such as postmodernism and post-colonialism. We hope that our deployment of perspectives will help to provide an organising framework that will encourage the future exploration of stories of human experiences of health, illness, and madness.

Taking madness as our key theme, it is evident that many post-war British and American authors have provided incisive, and at times conflicting, insights into a variety of unique and highly individual experiences of madness, attitudes towards those deemed mad, their treatments, and the social networks and institutions within which such experiences unfold. Literature that focuses on madness – sometimes transformed into film and theatre, or serialised for television – plays a crucial role

in shaping public perceptions of madness itself and of institutions and personnel who work to contain and treat madness, and furthermore in forming stereotypes of individuals deemed mad themselves. One of the most well-known examples of this is the enduringly popular film *One Flew over the Cuckoo's Nest* (dir. Milos Forman, 1975), based on Ken Kesey's 1962 novel and recently revived as a successful play (Garrick Theatre, 2004 and 2006). The impact of tales like this on public opinion and knowledge is considerable, yet there is comparatively little systematic scholarship on the meaning and potential value of this body of work as a whole for psychiatry. We adopt a diverse, critical, and non-biomedical perspective on the literary representation of madness in post-1945 British and American fiction throughout this book. We examine the interanimation between fictional narratives and a variety of clinical discourses, while scrutinising the relationship between the novels and their evolving historical and cultural contexts. A novel like Kesey's *One Flew over the Cuckoo's Nest* represents a number of particular preoccupations of its time and, furthermore, has affected images of mental health care, therapy, and policy over the decades since its publication. In situating madness literature in the historical, political, ethical, and social context of the post-war world order and the context of contemporary psychiatric practices, we hope to provide a text that is simultaneously of use to literary studies and to the Health Humanities.

The term madness is, throughout this text, employed deliberately. We believe that the word *madness* represents the social, personal, and cultural context of the term as signifying a number of different meanings for different people. Were we to specify *mental illness* or *mental disorder*, or to name certain illnesses such as schizophrenia, we would be narrowing our focus to one that is mediated through a medical viewpoint. This is not an idea that we are unique in using – Jim Geekie and John Read (2009) suggest that by 'using the term "madness" the experience is wrested from the grip of a select few experts on "schizophrenia" or "psychosis", and portrayed not as a medical condition with an obscure Greek or Latin derived title, but rather as an aspect of the human condition, about which we can all have our say' (p. 16). We follow Geekie and Read's viewpoint throughout this book. *Madness* is a term that actively defies, as do many of the novels we look at, formal diagnostic classification. Definitional precision, or labelling, encourages objectification. This is a trap most keenly felt by the mid-twentieth-century generation of post-colonial theorists and writers – Aimé Césaire, for example, wrote of 'thingification' (1972, p. 21) and similarly, Frantz Fanon was suspicious of a comparable tendency 'to objectify, to confine, to imprison, to

harden' (1964, p. 34). Both of these suggestions have a great resonance with the processes at work in psychiatry, specifically the potential objectification of an individual into diagnostic labels, many of which are themselves contentious *within* the discipline of psychiatry itself.

Psychiatric diagnostics have been applied to perceived instability, disordering, or irrationality of personhood, culture, or society. The term madness has, furthermore, been appropriated or reconstituted to suit different approaches to knowledge and modes of being in the world. For example, madness can refer to particular serious mental illnesses or disorders that impair a person's capacity to function, but it can also be viewed as a social construction or myth (Szasz, 1974). Often it is used as a rhetorical device. We are casting the definition widely by using the term madness because authors of fiction are not necessarily bound by the kind of disorders identified in the latest editions of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-4TR) (American Psychiatric Association, 2000) or *The ICD-10 Classification of Mental and Behavioural Disorders* (World Health Organisation, 1992). We want to remain open to the possibility that madness might confer creative advantages and insights rather than being associated exclusively with distress and disability, as is often the case in the medical disciplines. Indeed, Peter K. Chadwick's book *Schizophrenia: The Positive Perspective* (2009), now in its second edition, convincingly suggests there may be some positive and life-enhancing aspects to the apparently most damaging of madness diagnoses, schizophrenia.

One of our tasks in this book is to try to gain a theoretical grasp of what depictions of madness in literature might actually mean, and what purposes they serve. Literary appropriations of madness are evident in a wide range of fictional productions. One way of gaining a rough sense of what is going on in these texts is to think about what the author might be doing stylistically *and* thematically with the depiction of madness. In some post-war fiction, the utilisation of madness as an experimental style is evident. For example, William Burroughs's development of the cut-up/fold-in technique produces novels that appear to be formally or textually 'mad' in the sense that the work can at first glance have little sense to it and thus appears to be, literally, the random scribbling of a lunatic (particularly evident in Burroughs, 1959, 1961, 1962, 1964). Yet the development of what we define here as *psychotic texts* is in itself a vital part of the post-war interrogation of both language and of the lack of definitive boundaries between madness and sanity. This becomes particularly apparent when viewed with reference to the questions raised by postmodernist thinkers – indeed, this is a

notion that we return to briefly in Chapter 2 and more thoroughly in Chapter 6. A key focus of ours will be separating those novels that are not formally experimental but which, through their examination of madness, contain sections that appear to mimic madness in some way, and texts that utilise elements of clinically defined madness, such as the psychotic symptom of thought-disordering, in order to develop innovative literary styles.

Broadly, we see two main functions of madness in fiction. Firstly, there is the kind of story where madness is used as a kind of device, a rhetorical or dramatic motif – madness acting as a kind of vehicle for entertainment. Secondly, there are texts where the theme of madness may have been adopted with provocative, informative and/or politically minded motives. In this kind of work, the author actively seeks to engage with, and at times subvert, the dominant cultural, social, and media-perpetuated public construction of madness. We seek to distinguish fiction that can be seen as offering subversive and challenging accounts of mental illness from writing that perpetuates or validates stereotypical, media-generated images of the madman or madwoman. Indeed, a number of fictions demonstrate how madness can be deployed as a comforting projection of social ailments and psychopathologies onto particular individuals who can be easily marginalised or scapegoated. In designating the mad person as Other, a text has the potential to either leave aside, *or* actively engage with, troubling questions about the rather fluid boundaries between madness and sanity.

Another striking feature of the literature we will be drawing upon is the sheer variety of permutations of creative performance that authors may undertake. For example, stories may be written from the point of view of the clinician or therapist, the patient, or some other family member or caregiver. This complexity is compounded when we explore the background of the author and the kinds of experiences they may have had, or have been reported to have had. The author may, for example, be drawing upon their own experiences as a doctor, nurse, service user or carer, or drawing upon experiences of earlier texts that they have encountered. Add to this shifting social, cultural, and political ecologies in both Britain and the US, and the difficulty of making sense of stories of madness becomes apparent.

A further task we have set ourselves is to examine the writer's fictionalised use of madness in the context of his or her own known mental health or illness – this is examined in our chapter on creativity and madness. Furthermore, authors who belong to particular genres or who are identified as belonging to a particular grouping or movement – for

example, the postmodernists – may have in common a shared style and thematic of madness, which their tales consistently portray. We will not be drawing any sharp distinctions between arbitrarily designated literary, ‘highbrow’ works and fiction that is more popular, drawing on a diverse range of authors from Thomas Pynchon to Kristen Waterfield Duisberg, from J. G. Ballard to Sebastian Barry, from Kurt Vonnegut to Clare Allan.

It would be an impossible task to provide a sustained and thorough literary analysis of *all* British and American fictional texts that address madness as a key theme. In our selecting of texts from the quantity that could have been included, we have chosen novels where madness is a main subject rather than a secondary theme. This is not to suggest that we will be focusing exclusively on, or excluding, texts that define madness through a clinical framework. We plan to include texts that do have a more traditional clinical perspective, such as Antonia White’s *Beyond the Glass* (1954) or Lisa Carey’s *Love in the Asylum* (2004), but also those texts that do not seek to confine madness within a clinical sphere, be it institutional or diagnostically definitional, for example Thomas Pynchon’s *The Crying of Lot 49* (1965) or Kurt Vonnegut’s *Slaughterhouse-Five* (1969). Our desire is to explore madness as a whole rather than a more narrowly defined and clinically constructed notion of mental illness. In other words, we will not partake in a game of symptom- or diagnosis-spotting – for example, this character has schizophrenia, that one depression, another has an eating disorder, and so forth. Neither will we concentrate on the application of psychoanalytic theory and criticism – this has been explored by many others, for example Timpanaro (1976), and Frosh (1991). Instead of using frameworks that have been devised to demarcate and classify psychopathology, we explore literary representations of madness in and on their own terms, rather than to see them *only* as versions or visions of the mental illnesses that have been described in clinical and scientific literature and practice. We aim to align ourselves with the fields of Health Humanities and literary studies, rather than producing a dictionary-like list of all post-war texts that mention madness.

Whilst literary authors on both sides of the Atlantic were busy creating fictional representations of madness, their colleagues in medicine were also hard at work. The post-war era saw successively larger editions of the American Psychiatric Association’s *Diagnostic and Statistical Manual of Mental Disorders* come into being and, in 1992, *The ICD-10 Classification of Mental and Behavioural Disorders* was published. In these definitive psychiatric texts, mental disorders were progressively

recorded, named, refined, and enumerated. Furthermore, in response to the challenge presented by the anti-psychiatry movements of the 1960s and 1970s, psychiatry had to reassert and re-establish itself to some extent as both a vital and a medical discipline (Roth and Kroll, 1986). Thus the post-war period has seen an increasingly biomedical focus on mental illness within the discipline of psychiatry. In interpolating relationships between literary texts and other contemporaneous material, this book explores the complex interactions between clinical definitions of mental disorder and the depiction of mental distress and mental disorder in fiction. Our approach is not restricted, however, to what could be seen as a potentially narrow account of diagnostic realism, where literary presentations are selected as exemplifying diagnostic categories. Furthermore, to rely too heavily on psychiatric classification or psychoanalytic interpretation would in our view restrict the interpretation of experience via a discourse that compresses human experiences into somewhat reductive, rigid frameworks that themselves have a long and contentious history. Occasionally, however, brief reference is made to diagnosis, psychiatric phenomenology, or epidemiology where it might offer relevant insights, and we critically interpret the use, and indeed lack, of diagnostic and symptomatological naming or specificity in Chapter 2, *Mental States*.

A further invaluable source of insight for this book comes from accounts of the history of psychiatry and its conceptualisation in both Britain and America, which we shall allude to throughout. In addition, with all the popular excitement and debate over drugs such as the antidepressant Prozac through the 1990s, the interpretation of human distress has often been recast in terms of pharmacology (Healy, 1997; Kramer, 1994). These pharmacological developments have created fascinating new opportunities for examining how people formulate and attempt to deal with unhappiness, grief, sadness, and common personality traits – many of which are now deemed medically treatable disorders, such as shyness or, as it is medically known, social phobia or social anxiety disorder (Lane, 2007).

Of course, we owe a debt to other scholars who have gone before us in examining representations of madness in literature. There are publications that address the theme of madness in literature generically, or that reference madness fictions (Ellestrom, 2002; Feder, 1980; Felman, 1985; MacLennan, 1992; Porter, 1991; Rieger, 1994a, 1994b; Thiher, 1999). Authors have also tackled madness literature in particular historical epochs, such as classical literature (Hershkovitz, 1998), medieval and

Middle English literature (Harper, 2003; Reed, 1974), and renaissance literature (Grasi and Lorch, 1986; Salkeld, 1993).

Another large genre of studies, several of which are feminist in orientation, focuses on eighteenth-, nineteenth-, and some twentieth-century literature, drama, and poetry; and on specific authors, sometimes alongside histories of madness (Appignanesi, 2008; Bigler, 1998; Byrd, 1974; Camfield, 1997; Cheng, 1999; Colley, 1983; DePorte, 1974; Duggan, 2000; Gilbert and Gubar, 1979; Ingram, 1991; Lange, 1998; Logan, 1997; Lupack, 1995; Martin, 1987; McCarthy, 1990; Metzger, 1989; O'Connor, 1997; Orlando, 2003; Platizky, 1989; Pratt, 1996; Reid, 2002; Sass, 1992; Senaha, 1996; Showalter, 1987; Small, 1996; Trotter, 2001; Wiesenthal, 1997). Scholars have also looked at the effects of madness novels on the reader (Keitel, 1989), and at specific types of madness in fiction (Furst, 2002; Rohrer, 2005). Finally, there are medical humanities books aimed at clinical *and* literary audiences which are beginning to emerge (Oyebode, 2009c). Our acknowledgement to those that have gone before us will be evident where we draw upon certain literary scholars through this work. We hope that our book will be situated within the growing body of literature that falls under the discipline of Health Humanities.

It has been suggested that particular changes in discursual and linguistic strategies for representing character or characters evolve over time and may be shown to be connected with, and to some degree determined by, changing historical, social, and cultural contexts (Bex, Burke, and Stockwell, 2000; Bhaya Nair, 2003; Emmott, 2002; Simpson, 1993). Our commitment is to examine the cultural context, function, and literary-linguistic features of fictions that focus on madness – fictions in which period-specific concerns, hope, fears, and desires are played out textually. The work of fiction is, to us, embedded within specific contemporaneous issues, which the novel then reflects, refracts, and attempts to navigate. As part of our non-affiliated and eclectic literary criticism, we interpret how different factors – such as point of view, characterisation, and the construction of dialogue and interaction – are crucial in the literary representation of behavioural and psychological elements of madness.

In the course of our explorations into post-war madness fictions, five main areas of examination have evolved, and these thematic spheres form the chapters of the book. In Chapter 2, we aim to provide an overview of madness in fiction. We briefly explore some of the existing critical literature on madness and fiction; illuminate some broad thematic concerns via a review of relevant fictions; and excavate the relationship between mental symptoms – or rather, the behavioural and psychological

reporting and appearance of signs of madness – and their literary representation. In this chapter we refer to novels such as Doris Lessing's *Briefing for a Descent into Hell* (1971), Patrick McGrath's *Spider* (1990), Paul Crawford's *Nothing Purple, Nothing Black* (2002), Marge Piercy's *Woman on the Edge of Time* (1976), Kurt Vonnegut's *Slaughterhouse-Five* (1969), and Theodore Dalrymple's *So Little Done: The Testament of a Serial Killer* (1995), among others. This chapter suggests that in fiction, the *content of experience* rather than the *form of a symptom* is of more importance to characters than the ability to name and diagnose their experiences within psychiatric diagnostic frameworks. This notion is of importance to clinical practice. If we explore the individual's *own* meaning of their experiences and the concomitantly individual social and personal connotations and implications of these experiences, this may yield alternative and more creative ways to bring relief, or methods of using such experiences in a creative or positive manner: this again is beginning to be focused on in clinical literature (Geekie and Read, 2009). Attending to the content of an individual's experience may well be more constructive in terms of their recovery from distressing or destructive experiences and impulses. Even where people have patterns of symptoms which *could* be diagnosed as mental disorders according to the American Psychiatric Association or World Health Organisation criteria, this does not have to be the only way to proceed in terms of the management – and indeed *self*-management – of these experiences. Novels are an important source of ideas for deconstructing supposedly pathological states of mind that can, we suggest, inform both clinicians and a more general readership, enabling and promoting more diverse and individualised approaches to management and/or treatment. This section encompasses a wide variety of authors who are not seeking to comment exclusively or explicitly on the thematic issues addressed in our other chapters. The writers on whom we focus here are largely concerned with the experiences of individuals; how unusual mental experiences manifest themselves; their relationship to past events in the individual's life; how encounters with madness are experienced; and how such occurrences are either resolved or managed.

In Chapter 3, we explore how literary representation as a social practice may promote the empowerment or disempowerment of people with mental illness by reflecting wider debates surrounding individual autonomy and the role of institutions. We know that psychiatry is a potent agency of social control (Zola, 1972). The broad and far-reaching power of psychiatry has, interestingly, led to a diagnostic hierarchy, which actively excludes certain psychiatric diagnoses such as personality

disorders – despite UK policy suggestions to the contrary (National Institute for Mental Health in England, 2003) – from accessing certain treatments. This is one example of a power process in psychiatry that enables a form of double-discrimination, with an individual potentially excluded from and/or discriminated against both socially *and* within the very system that has designated them as personality disordered – indeed, personality disorders are one set of psychiatric diagnoses that, it has been suggested, psychiatry dislikes working with, partly due to issues of treatability (Adshead, 2001; Brown and Crawford, 2006; Lewis and Appleby, 1988). Some have argued that the psychiatric system is similar to the judicial system – sanctioned by, and sheltering under, the auspices of the state.

Both types of institution wield ultimate in power through their legitimised and legal abilities to remove the freedom of those who stray from the agreed norms of society, particularly when those straying are *doubly* Other in terms of madness *and* ethnic background, as we explore in Chapter 4 (Cochrane and Sashidharan, 1995; Lipsedge, 1994; Littlewood and Lipsedge, 1982). Notions of risk and dangerousness are further practical reasons for the incarceration of individuals and the sanctions that psychiatry can impose. The theme of dangerousness and mental illness is popular in fiction and features in the work of writers as diverse as John Fowles (1963), Ian McEwan (1997), Patrick McGrath (1996), and John Katzenbach (2004) to name but a few – not to mention the array of crime or thriller novels that use psychopathy, violence, murder, and often sexual deviance in a highly sensationalised form. Examining in detail the fictional representation of the relationship between mental illness and dangerousness would take another volume in itself, and hence is only briefly discussed in this book, but this interest in the interweaving of madness and dangerousness further brings together the interrelationship between psychiatric and judicial powers. When described in novels, the struggle against incarceration and purportedly therapeutic regimes – which may appear to the sufferer (and perhaps the reader) to be oppressive, unintelligible, and even damaging – can provide an illuminating way of making sense of conflict, concordance, coercion, and compliance in mental health settings.

We begin in this chapter by drawing upon fiction that examines the historical development of psychiatry as a discipline, and we build up a picture of how madness came to be constructed in the moral and medical sense, looking at Sebastian Barry's *The Secret Scripture* (2008), *Human Traces* (2005) by Sebastian Faulks, T. C. Boyle's *Riven Rock* (1998), and Pat Barker's *Regeneration* (1991). We then draw upon Erving Goffman's

seminal work on institutions, *Asylums* (1961), in order to examine the functions, types, and abuses of power that occur within asylum settings through Ken Kesey's *One Flew over the Cuckoo's Nest* (1962). We also use Goffman to explore fictional representations of alternatives to asylum care following the closure and de-incarceration of psychiatric patients that has occurred in recent years, looking at Paul Sayer's *The Comforts of Madness* (1988), Bebe Moore Campbell's *72 Hour Hold* (2005), and Clare Allan's *Poppy Shakespeare* (2006), among others. We end this chapter by considering how other factors involving power, such as family structure and gendered expectations, impact upon madness, in particular in Antonia White's *Beyond the Glass* (1954).

Chapter 4 of the book concerns the literary representations of madness in terms of race or ethnicity. Just as there has been growing public recognition of injustices, inequalities, and prejudice in the law in relation to ethnicity and diversity, psychiatry has been accused of biases against various groups within the wider population. For example, concern has been expressed about the over-representation of ethnic minorities in psychiatric institutions, and inconsistencies in the processes of care and the treatments administered (Burke, 1984; Montsho, 1995). Thus, one of our concerns in composing this chapter was to examine whether there were any predominant forms of 'common sense' (as referred to by Gramsci, 1971) in fiction about, or written by, people from specific ethnic groups or with a non-Western cultural heritage. One reason for beginning with this as an opening question is that there is a long history of concern as to whether American and European definitions of 'good mental health' (Hinsie and Campbell, 1970) are suffused by the assumptions of powerful groups in society. The yardstick by which both professionals and popular culture measure mental health is imbued with these assumptions. Consequently, the experience of ethnic minorities, and more importantly, the way this experience is construed by mental health professionals, may mean that some individuals are more likely to be treated against their will, subject to more invasive and disabling treatments, and altogether alienated from the mental health care system. In the light of the over-representation of young black men in forensic mental health settings, and their disproportionate likelihood of compulsory detention, a number of scholars proposed that this was partly to do with the stereotypes held by workers in the health care and mental health systems (McGovern and Cope, 1987; Lipsedge, 1994). The sadly commonplace narrations of young black males seen as antisocial, dangerous, aggressive, lawbreakers, lazy, and so forth were argued to be crucial in their higher rates of confinement and their being subject to

more compulsory and invasive treatments (Cochrane and Sashidharan, 1995; Lewis, Croft-Jefferys, and David, 1990; Littlewood and Lipsedge, 1982; Rack, 1982).

One of our initial research questions for this thematic area was whether the sense of injustice found in the protest novels of mid-twentieth-century Black American literature had informed black and ethnic minority authors' accounts of the mental health system too. However, our initial expectations were confounded by what we found in the novels we selected and read for this chapter. Instead of overt critique there was a remarkable degree of acceptance of both the institutional approaches and the intellectual frameworks of mental health care, psychiatry, and psychology. In Bebe Moore Campbell's *72 Hour Hold* (2005), we expected some critique of coercive tendencies in legal and mental health care systems. Instead, the message of the novel is that the legal, psychiatric use of 72-hour holds is insufficient for effective treatment, leading to the assertion that longer periods of compulsory detention and medication are needed, as if these are unproblematically beneficial. In Alice Walker's *Possessing the Secret of Joy* (1992), one might find the stage set for a critique of European and North American models of psychological understanding, along with the critique of female genital mutilation. Yet a post-colonial reading of this novel suggests a remarkable degree of accord with Jungian psychology – elsewhere criticised for its frank racism (Dalal, 1988; Howitt and Owusu-Bempah, 1994) – and a somewhat one-dimensional view of African peoples and cultures. Leslie Marmon Silko's most famous novel *Ceremony* (1977) is of particular interest in Chapter 4 because of its depiction of madness associated with the aftermath of warfare, and because of the ethnic variations in therapeutic treatment approaches to what we now term post-traumatic stress disorder. The brutality of mental health treatment and its infliction along ethnic lines is made much clearer in Marge Piercy's *Woman on the Edge of Time* (1976) where Connie Ramos, a woman of Hispanic heritage, is subject to increasingly invasive and bizarre treatments, set against the background of a grim, dehumanising hospital environment. The contribution of traumatic experiences of oppression to confusing and peculiar experiences, fragmentation, and dissociation is explored in Toni Morrison's *Beloved* (1987), taking as its backdrop the abolition of slavery. The difficulties of forming a sense of self and building supportive social relationships for people haunted by traumatic memories, both of what those who owned them subjected them to and what the experience of slavery made them do to one another, are explored. These two novels contain elements of the

bizarre or fantastic, such as time-travel or paranormal activity, yet are equally nuanced and compelling when describing material inequalities and oppression. The persistent theme running through a number of the books explored here is the notion of cultural identity and how this may be impaired or enhanced within social networks. That theme provides the background for this chapter.

Chapter 5 presents an overview of the broader context of research into the relationship between mental illness and creativity, before investigating a selection of novels that focus on this theme. There is currently little on illnesses such as schizophrenia or depression and their relationship to creativity, and this chapter examines the less scrutinised world of contemporary fiction and pursues a fresh, up-to-date examination of creativity and madness. Briefly discussing relevant historical and contemporary perceptions of the 'mad genius', the chapter goes on to consider the dilemmas and contradictions that arise in terms of individual creative production in the context of periodically debilitating mental states, and asks whether there is anything more to be learned from examining creative genius and mental disorders. First, it looks at novels that explore creativity and madness in relation to notions of social, semiotic, and personal fragmentation. Here, we consider Doris Lessing's *The Golden Notebook* (1962), Jenny Diski's *Then Again* (1990), *The Quickening Maze* (2009) by Adam Foulds, and Sylvia Plath's fictionalised autobiography *The Bell Jar* (1963). Second, we consider how madness and creativity can be thought of as offering some kind of consolation for the author in light of tragic personal experiences such as living through the suicide of a partner, or experiencing psychosis. Here, we look at Melvyn Bragg's *Remember Me* (2009), Patrick Gale's *Notes from an Exhibition* (2007), and Clare Allan's *Poppy Shakespeare* (2006). Finally, we examine how the theme of creativity and madness can be interpreted as representing the writer and the literary critic as engaged in a 'mad' coupling or *furor scribendi* – a rage, frenzy, or madness of writing that, at times, borders on mortal combat. As well as re-presenting forms of clinically recognisable madness, Patricia Duncker's *Hallucinating Foucault* (1996), Susan Hill's *The Bird of Night* (1972), and William Golding's *The Paper Men* (1985) develop situational kinds of madness in critiquing the obsessive pursuits of critics against the defences of the creative writer.

Overall, Chapter 5 signals that the use of the madness and creativity tropes in contemporary fiction remains open and versatile. These tropes are part of a growing genre and take a number of perspectives, suggesting a rich trading route for future fiction and ensuring that