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Book Review: Hunt, D. and Brookes, G. (2020) *Corpus, Discourse and Mental Health*. Bloomsbury.

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Agency, selfhood and responsibility are three topics that permeate the discourse around mental health. The same is true of Gavin Brookes' and Daniel Hunt's book, *Corpora, Discourse and Mental Health*. In this book, the authors examine the language used in online peer-to-peer health-related support groups. They focus specifically on forums dedicated to discussing two eating disorders anorexia nervosa and diabulimia – the latter with a contested diagnosis) as well as depression. In particular, the authors are interested in examining the linguistic choices made by online forum members to express their emotional suffering and to construct their illness and their relationship with it. Online forums are apt because they are spaces where members feel able to discuss sensitive experiences or issues which may elicit stigma in other contexts. Each of the discussed conditions is unique in some respect. Anorexia is marked by a high mortality rate, depression is marked by its high prevalence, and diabulimia is marked by its diagnostic illegitimacy.

Structurally, the monograph is separated into eight chapters. The first chapter serves as an introduction, the second as a literature review, and the third as a methodology chapter. In the body of their analysis, the authors provide three 'case studies', each exploring a forum or set of forums corresponding to one of the three illnesses. These are named *anorexia.net*, *depression.net* and *diabulimia.net* respectively. In the final two chapters, the authors reflect back on the study as a whole. In Chapter 7, they identify points of commonality across the three datasets and link these with higher order discourses in society. In Chapter 8, they reflect on the overall effectiveness of the corpus-based method in the context of analysing language around mental health. For the remainder of this review, I will go through each of the chapters one by one and summarise the key points which I think readers would find interesting.

In Chapters 1 and 2, the authors sketch out the rationale behind their research questions and introduce the reader to the three illnesses. Here, they situate the work among other linguistic studies in recent years looking at online representations of mental health (e.g. Harvey, 2012; 2013; Harvey and Brown, 2021). They also outline key theories and concepts which will inform the analysis. 'Medicalisation', for instance, refers to the ever-increasing phenomenon of diagnosing fairly pervasive human behaviours or responses as pathologies. For instance, what was once viewed as shyness in adolescents is increasingly pathologized as 'social anxiety disorder' or 'avoidant personality disorder'. This detailed, up-to-date overview of contemporary issues in the medical humanities is recommended for anyone beginning research into language and mental health. At the end of this

chapter, the authors also introduce the corpus-based approach, which they distinguish from other methodologies which are popular in the medical humanities (e.g. LIWC).

Chapter 3 serves as the methodology chapter, where choices pertaining to corpus design and construction, as well as the method of analysis are introduced transparently. The corpus, which is separated out into three subcorpora, comprises data collected over a four-month period from online peer-to-peer support groups. At just over 455,000 tokens the corpus is fairly small in size, but highly specialised, representing the discussion around a specific set of topics within a specific genre.

This lends itself for the close qualitative and contextualised analysis which follows. To carry out the analysis, the authors utilise a tried-and-tested approach which has been used to great effect in previous studies. They begin by deriving keywords from each sub-corpus (using the SpokenBNC2014 as a reference corpus). They then calculated collocates of the strongest keywords to determine their usage in the dataset and to identify sites of ideological struggle. Their methodology is simple, yet robust. Indeed, it is refreshing and encouraging to see corpus-based research opting for methodological simplicity but analytic complexity in a culture of ever-increasing lists of ever more complex collocation metrics and significance tests. The authors explicitly acknowledge that “The extended qualitative analysis in the preceding chapters also offers a counterpoise to the preponderance of quantitative, positivist paradigms in research” (p. 297)

Chapter 4 marks the first analysis chapter, starting with the *anorexia.net* corpus. Here, as in each of the subsequent analysis chapters, the authors examine the strongest keywords via their collocation patterns and identify frequent phraseologies in the forum. This chapter establishes a theme which will continue throughout the remainder of the book: that medical language becomes a useful means for the users to manage agency (and blame), responsibility and selfhood. The analysis abounds with findings that are likely to excite the discourse analyst. Eating disorders are typically framed, not as experiences unique to the user, but medically as definite, objective, independent entities. For instance, users talking about their eating disorder (frequently shortened to the initialism ED) often refer to *the ED* (rather than *my ED*) and use pronouns such as *it* which serves to conceptualise the disorder as an entity which exists, not within the realm of the patient’s own experience but something outside that is separate to them. Often, this ‘thing’ which is ‘outside’ is attributed agency of its own, which is conceptualised as acting against the sufferer. Users, for instance, refer to the ED as having its own *voice*, which *says* things and *talks* to the sufferer. As one user puts it, ‘sometimes the ED voice talks and sometimes the REAL voice talks’ (p. 139). I have also found a similar pattern in my own research into representations of violence committed by people with schizophrenia (Balfour, 2020). As a result, users draw on these grammatical forms to distinguish their authentic and rational self from their ill self. As the authors note, this need to separate an ill and rational self may be

a reaction to widespread stigma around anorexia where people with the disorder are blamed for causing and exacerbating their own illness.

The second analysis chapter, Chapter 5, is concerned with the *depression.net* corpus. A particular strength of this book is a close analysis of grammar, and how different grammatical forms construe different kinds of relationship between a user of the forum and their illness. As far back as 2005, Tony McEnery warned corpus linguists against overlooking grammatical words during an analysis. The authors seem to have heeded this advice carefully, and take a close interest in grammatical collocates, with the view to ‘reveal the ways in which the support group contributors encode not only the condition but also themselves in relation to it.’ (p. 220). In this vein, they take seemingly similar wordings and demonstrate that they exhibit very different semantic profiles. A case in point is their discussion of phraseologies around the words *depression* and *depressed*. While they argue *I am depressed* expresses an identification with the illness (the illness is construed as being part of the sufferer’s sense of self), *I have depression* construes the illness as something external which is possessed. Thus, different phraseological construals extend along a cline of externalisation. They also distinguish the meanings of the phrases *suffer from depression* from *suffer with depression*. While the former, they argue, implies that the illness is the cause of suffering, the latter suggests that both the individual sufferer *and* the illness as suffering together. Both phrases still, however, present the illness as a discrete, external object much aligned with medical discourse. Here, as with the previous chapters, the authors look upon this medicalising language which the users are drawing on with a critical eye. One downside, they argue, of this medical discourse is that it constructs illnesses as an ahistorical entity which exists independently of the sufferer. This construction of reality is useful when a sufferer wishes to reduce their sense of agency and responsibility (and avoid stigma), but less useful in the context of treatment. The medical discourse constructs a reality whereby patients are passive and dependent on medication. It also highlights the biomedical aspects of illness while side-lining other aspects, such as its link to interpersonal relationships (which users of the forum actively discuss) and other non-medical practices which may help alleviate suffering.

The authors also notice a paradox in this forum whereby users would draw on medical language to legitimise their lay diagnosis of another user, yet would, at same time, discredit the view of a medical professional. For instance, after reporting that their doctor refused to grant them antidepressants, one newer member of the forum was urged by a more established member to *find another doctor* to find *the right meds* (p. 202). This particular example showcases one of the strengths of the authors’ approach. One of the difficulties of examining online forum data is that it is a highly interactional medium. Unlike a news article or a series of Twitter posts, the forum is not comprised of one addresser speaking to a number of addressees. Instead, forums are complicated webs of multiple addressers and addressees who are often orienting to each other in complex ways. By not

only looking within but *between* posts, they are able to identify instances where members interact with one another.

Whereas the first two corpora were each drawn from a single forum, the diabulimia corpus is drawn from three forums, owing to the fact that diabulimia is a non-credited illness, absent from formalised medical criteria like the *Diagnostic and Statistical Manual of Mental Disorders* (2013). Partly because of its non-mainstream status, discussions of diabulimia are simply not frequent enough in a single forum and therefore three forums had to be pooled to collect the data. The chapter therefore offers an interesting point of contrast with the earlier studies. Despite its diagnostic illegitimacy, users nevertheless draw on the same medical register to represent diabulimia. Indeed, the term diabulimia itself can be understood as a rhetorical device that makes a case for its legitimacy as a mental disorder. As a portmanteau of two medicalised terms, *diabetes* and *bulimia*, users are, the authors note, drawing on a medical lexicon to characterise diabulimia as a legitimate disorder. The putative illness is also co-ordinated alongside other illnesses which are viewed by the medical community as legitimate, such as *diabetes* and *bulimia*.

In Chapter 7, the authors review their findings and identify points of commonality between them. Again, the implications of medicalised language on the forum take centre stage. In many ways, therefore, the book covers similar ground to the landmark study carried out by Mishler (1984) who, examining doctor-patient interactions identified a clash between two discourses, 'the voice of medicine', spoken by the doctor, and the 'voice of the lifeworld', spoken by the patient. While, using the 'voice of medicine', the doctor saw the patient as an entirely physical entity, composed of bones and organs, the patient, via the 'voice of the lifeworld', saw their illness as a psychological experience, wrapped up with notions of selfhood and responsibility. Evidently, this voice of medicine is not only the prerogative of healthcare professionals, as Mishler noticed, but has increasingly been internalised by the wider public.

In the final chapter of the book, the authors review the usefulness of the corpus-based methodology and embrace self-reflexivity by reflecting on various limitations of their study. They highlight that their findings are limited only to technology-literate individuals who use online forums, and not, people who suffer from these illnesses more broadly. Like much corpus-based research, the authors also highlight that their study has only been concerned with the most frequent and salient linguistic patterns in each dataset. By only observing statistically significant frequency differences they were not able to examine more idiosyncratic phraseologies. While true, we must remember that corpus linguists cannot achieve everything at once. A corpus linguist must always choose between 'depth' and 'breadth' (Koller and Mautner, 2005:218).

This would not be a fair review were it not to offer some minor criticisms and make suggestions for further research. Admittedly, these are very few in number. Despite the three disorders being framed as distinct, there was some repetition between the points

being made across the three analysis chapters. For instance, the discourse around all three disorders contained a fairly restricted set of lexico-grammatical features (definite and indefinite articles, relational processes etc.) which suggested the prevalence of a medicalisation discourse. This is a result of the study examining frequent patterns which emerge from each dataset separately and not taking an explicitly contrastive stance (p. 4). One way of building on this research would be to take a more contrastive approach and consider unique forms of suffering which users of each forum express. Indeed, some of the patterns identified have also been noted in previous research, notably Harvey (2012) and Hunt and Harvey (2015). The unique contribution of this monograph, therefore, is to highlight some broader themes (i.e. a discourse of medicalisation and neoliberalism) which emerge from looking at forums around three different mental disorders separately. I also felt that some additional themes beyond medicalisation and neoliberalism emerged fairly consistently in each analysis. For instance, paradoxical language and thinking emerges consistently throughout (e.g. p. 207, 273). Future research in the discourse around mental health might critically examine these paradoxes and explore the link between paradoxical thinking and mental suffering.

In summary, this is an excellent contribution to scholarly research around mental health. The book presents a series of three case studies which offer systematic analyses of the most frequent phraseological patterns to talk about mental illness. Each draws attention to the increasing prevalence of medical language in public discourse, highlighting how users often engage in a balancing act of medical and non-medical discourses, and illustrating the significant implications these can have on agency, responsibility and selfhood. By choosing to focus on eating disorders and a mood disorder, the studies serve as a useful starting point, a guide and a model for other scholars who are beginning to take an interest in mental health discourse. Moreover, the implications of their research are potentially very important. What makes mental disorders unique is that doctors cannot use technologies to 'look inside' a patient in the way they can for some other more obviously 'physical' illnesses. You can press a stethoscope to a patient's heart to test for a heart problem, but you cannot do the same to test for schizophrenia. By making sure medical professionals understand the ways sufferers use language to communicate their experience of illness, and the implications these messages have, they may be able to identify and treat such illnesses in a more bespoke and nuanced way.

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