Fifteen years after her original work, Psychiatric Patient to Citizen: Overcoming Discrimination and Social Exclusion, Sayce returns to the long-standing question of how we defend the rights of a minority in the face of prejudice and demands from the majority. She presents an update on the situation for those with mental illness in the UK and draws together arguments and examples from those working in the field of disability rights. She suggests methods to tackle discrimination and challenges many accepted norms in relation to mental illness within British society.

Sayce draws on Jo Phelan and Bruce Link's re-conceptualised model of stigma as being the whole process of categorising and discriminating against others, rather than merely focusing on the marked individual. She demonstrates through a host of examples how 'social, economic and political power' can be seen to have resulted in stigma and can be influenced to effect real behavioural change within societies.

The book features descriptions of successful, targeted anti-stigma campaigns and campaigns focused on specific societal changes (such as the government’s removal of the requirement that MPs sectioned for more than 6 months must step down). Sayce also summarises interesting research findings that show that ongoing contact between those with and without mental illness in normal environments (such as schools and workplaces) has the most positive effect on community acceptance.

Sayce describes the successes of the disability inclusion model in unifying people to combat discrimination under the ‘disability rights’ banner. However, she goes further to recognise there may be a need for a more detailed approach that acknowledges both the differences within the ‘disabled’ group and also the common experiences and humanity of disabled and non-disabled people. This erodes the distinction between ‘them’ and ‘us’ and encourages full inclusion into society. Through models such as Sen’s capability theory she discusses the importance of promoting individual agency and control and the state’s role in investing in disabled people’s capabilities rather than providing a safety net. She discusses specific methodology for providing the supports required to contribute to this but also gives an insight into the complex challenges that social changes can create, such as the UK government’s much criticised reduction in social security.

Sayce also presents the libertarian arguments that challenge the validity of assessing risk of putative future violence and the existence of a Mental Health Act that differentiates those with mental health challenges from general citizens in terms of deprivation of liberty or compulsion to take treatment. She describes how this position could be seen to violate the UN Convention on the Rights of Persons with Disabilities and then describes the failings of community treatment orders and the rising numbers detained under the Mental Health Act. This well-articulated argument may fundamentally challenge something that is accepted as a necessity by many within society.

Libertarian and capability theories also underpin Sayce’s discussion of the need for a radical restructuring of mental health services, with people with ‘lived experience’ being involved in commissioning, partaking in the delivery of mental health services and individuals having control over personal and pooled budgets. Sayce discusses the current experience of patients who sadly describe mental health professionals as being one of the major sources of discrimination in their lives and emphasises the challenges involved in dealing with such experiences.

Overall, though somewhat dense to read, From Psychiatric Patient to Citizen Revisited provides both a fascinating summary of history, theory and recent social events as well as suggestions for methods of change in relation to the genuine inclusion of those with mental health difficulties in society. This book is compelling, well argued and at times challenging. It deserves to be widely read, particularly by those who are either involved in delivering or developing mental health services.

It is hard to review a book like this without being dismissive or irritated by the author’s remorselessly negative view of psychiatry. But this isn’t just about us. It is a critique of what you might call ‘big psy’ – anyone who provides any sort of service that claims to deal with people with psychological difficulties. Newnes lays about his colleagues in clinical psychology with equal vigour. Much of his ire seems to me to be based on logical fallacies: bad practice is accepted as a necessity by many within society.

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**Inscription, Diagnosis, Deception and the Mental Health Industry: How Psy Governs Us All**

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