Collective action is one of the most researched topics in contemporary social science. Numerous analysts have engaged in the study of resistance movements in different spheres of social action, primarily focusing on discourses relative to self-determination and autonomy. Nonetheless, the study of social movements in mental health has been marginal, as the relevance of psychiatric movements to the general field of contentious politics has slowly faded away after the climax of the 1960s and 1970s. Nick Crossley, Professor of Sociology at the University of Manchester, has filled this vacuum by exploring the vast world of psychiatric social movements active in the United Kingdom over the last fifty years. Although previous articles have provided a contextual analysis of the most well-known psychiatric movements in the political realm of their era, *Contesting Psychiatry* is the first attempt to provide a diachronic study of the major British psychiatric movements, accompanied by the analysis of their formation and progress.

Crossley’s work is not intended as a historiography of psychiatric organisations, but rather as an analytical study solidly based on archival and oral resources accompanied by an etiological framework for collective action. Accordingly, Crossley dedicates the first part of *Contesting Psychiatry* to the development of his model that is largely inspired by Smerlser’s value-added model, according to which mobilization is a gradual process of production which is enriched by contingent factors emerging with the different phases of the process itself. Crossley ‘updates’ the value-added model by critically applying the fundamental elements of this schema, such as structural conduciveness and strain, to the analysis of psychiatric movements.

A major contribution of this work is to provide a framework for the main cultural developments that have occurred in Great Britain over the last fifty years. By contextualizing social movements in mental health in the general climates of contentious politics, the author offers an insight into the evolving trends of British society. Not surprisingly, his employment of network analysis presupposes strong links between psychiatric organisations and other social movements in different fields. This corollary contribution, which is never openly stated by Crossley, is evident in the discussion of the major social movements and their founding ideologies. For instance, the mental hygiene movement, and its embodying organisation, the National Association of Mental Health, is presented to the reader as a reflection of the bourgeois ideals of post-war Great Britain accompanied by a positivist view of psychiatry and a stigmatization of urban working class lifestyle.

Overall, this book is highly recommended for all those readers who are interested in the field of contentious politics, as Crossley skillfully unfolds the processes of formation and the shaping of collective action. Health workers might also find this work extremely instructive for the considerable historical information gathered by the author. Occasionally, *Contesting Psychiatry* might appear excessively technical in those pages dedicated to the development of Crossley’s methodological strategies, but this weakness is balanced by the bulk of the book, which is accessible and pleasant, thanks to the constant presence of appealing narratives.

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