

Old Black Cloud: A Cultural History of Mental Depression in Aotearoa New Zealand.

By Jacqueline Leckie.

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Reviewed by Catharine Coleborne.

A few pages into *Old Black Cloud* I was struck by the static, black and white photographs of past psychiatric institutions in Aotearoa New Zealand: Auckland Lunatic Asylum in the 1870s, Seacliff, north of Dunedin, around 1917; and the institutions of Seaview, Sunnyside, Porirua, variously in the early years of the twentieth century. These photographic images seem to me an incredibly stark contrast with the lively, powerful narrative of depression as a historical subject in Leckie's detailed account of New Zealand's history of depressive illness as an experience. The images also point symbolically to older histories of mental breakdown derived mainly from institutional records held mostly by Archives New Zealand: these are sources I have used in my own writing.

These images of hospitals startled me after the book's opening paragraphs. Leckie starts with a personal note, explaining her own experiences of depression, as well as that of her mother, Violet. She explains that family dynamics, death and the shock of her role being made redundant by her university employer have (understandably) triggered periods of depression for Leckie, who nonetheless has continued to be a vibrant and productive scholar throughout her career. This personal story connects readers to the scholarship in this book. It is both accessible and profound, tracing intellectual currents of understanding about depression along with public accounts of mental breakdown, and ultimately, how we might collectively know more about it. I imagine the research and writing of this book also signals a life-long curiosity in the questions it pursues, knowing Leckie's previous work on illness, including mental health and hospitals.

As she moves outside the constraints of institutional records, Leckie finds both new evidence and also surfaces well-known accounts of depression. In this way she makes an important contribution to what we know and understand about the wide array of meanings attached to depression and depressive illness. She finds possibility in different historical evidence and also tracks an interesting path through existing scholarship as she engages with the problems historians have grappled with over time. These include questions of "restricted access" to mental health records; diagnoses and concepts in medical knowledge; how to understand the concept of depression for colonial and postcolonial Māori; and how people endured isolation and also perhaps denied mental illness over time, but also how people did not "cope", how depression was severe and debilitating for people, some of whom articulated their "living under water" or "inertia", as one person wrote (p. 10).

Leckie aims to examine "much greater variation of how depression is expressed over time and place, and across cultures in Aotearoa, with individuals having a range of outcomes" (p. 9). To do this she draws not only on her already vast knowledge of New Zealand but also international scholarship, including recent work on histories of depression by American Jonathan Sadowsky whose work reinforces that "archives are not always the best source for unearthing histories of depression", as Leckie summarises (p. 15). Her description of the sources used is helpful for readers to gain an appreciation for the work and challenge of social histories of topics like depression; the painstaking stitching together of everything from the official record to personal writing, medical materials and creative works (pp. 16-17). I have found that institutional records can help historians enter the lives of people with mental illness only so far before their

trails end, sometimes abruptly. Where institutional (asylum) records appear in this book, Leckie uses these with other contextual detail, often examining these in tandem with other evidence.

Leckie's new book therefore disrupts existing ways of accessing the histories of mental illness and also places a spotlight on "depression" itself, neatly finding a way to bring sadness, melancholy and clinical depressive illness into the foreground. Leckie's skill here is in making these ideas about depression highly accessible to readers; much has been written in the larger field of the history of psychiatry about psychiatric diagnoses, changing diagnostic labels and their use, as well as their complexity over time. Leckie achieves an in-depth account of all the ways depression has left its own traces and records, mostly not contained carefully in the archive boxes. Her chapter focused on the "discourse and diagnosis" of depression and the various ways to make sense of conditions such as melancholy, despair, sadness and so on, over time, makes a new contribution to what we know about diagnostic terms situated within the New Zealand social-cultural historical context.

The storytelling in this book is arresting. Leckie has taken an original approach to carving out her chronology and themes within the span of time she investigates, and her detailed research allows her to tell the overall story of depression in New Zealand at the same time as she offers many individual glimpses of depression as people felt it.

Leckie's chronology of depression also highlights New Zealand's own histories of colonisation and European settlement (for Māori, this was a disruption that led to both individual and collective experiences of grief, as the evidence shows). In my own experience as a researcher working with graduate student Lorelle Barry in the early 2000s, finding evidence about Māori and mental breakdown reveals much about the impact of colonisation on Māori who were alienated from their land and had their spirits broken by Pakeha institutions. Leckie cites this work but goes further, also linking her primary research to the impactful work of Māori psychiatrist Sir Mason Durie in the twentieth century, as well as expanding our world view of cultural differences and ideas about depression as illness in her chapter "Rāwakiwaki", a word that expresses intense grief, despair and dejection. Here she moves between institutional admissions and a wider communal sense of meanings about depression that adds new knowledge to existing histories.

Immigrants to New Zealand also experienced loss, isolation and fears of distance from their homelands of Britain and Europe. There were gendered experiences of isolation, a theme that historians have pondered closely, and which Leckie again amplifies in her book. Wartime, too, offers Leckie scope to talk about gender in the context of a masculine experience of the "enduring darkness" of war, as well as its aftermath in the form of trauma, the mental and physical impacts of war service for men. Artists and writers who lived with depression form part of a chapter that explores the geographies and landscape of depression as an illness, with attention to the rural experience. Leckie also looks carefully at the forms of support people needed, asked for, and received, as well as how they toughed it out, at times.

Leckie goes on to develop her approach to these themes by using her insight as an anthropologist. She reflects on questions of culture and ethnicity, including the experiences of Pasifika peoples in Aotearoa. Cross-cultural psychiatry is an important and relatively under-examined theme in historical writing about mental health. A lively chapter about "quacks" and treatments for depression adds new and fascinating detail to what we know about depression, health and medical approaches beyond institutional care and treatment, and extends the historiography considerably.

Along the way, Leckie also builds in a discussion of suicide, relevant to depression and depressive illness. Suicide has also been a focus for historians who have examined New Zealand's evidence of suicide via coronial inquests, including Canadian John Weaver with Doug Munro. Suicide piques our curiosity not just because of the sorrow left behind, but because it raises questions about social and cultural experiences in place and time, and yet is also timeless: Leckie notes the current importance of understanding suicide.

I enjoyed the way Leckie crafted her narrative over time and carved out both time periods and a thematic framework to appreciate the history of depression. It allows readers to locate themselves inside well-known narratives of the trajectories of social, cultural and political life, and change over time, but also illustrates the way that depression is not restricted to any one "time", but runs through the "national" experience and looms differently, but also consistently, regardless of external events.

Leckie consulted a wide range of research works to create this book and includes many evocative illustrations that take us well beyond the hospital buildings as institutions I noted at the beginning, including photographs of people, places and medical journal texts and images. There are also poems and pieces of writing scattered as evidence throughout the book. I was privileged to read the Massey University Press "Ten Question Q&A with Jacqueline Leckie" press release as part of my receipt of this volume, which offers some important context for the book and Leckie's approach to it. The book itself is a handsome and substantial volume.

It is difficult for me to do justice to the extensive array of findings offered by this book. I hope people go out and read it and get inside the worlds and experiences of the people Leckie includes. The Epilogue to *Old Black Cloud* also reminds us of the impetus for this history. Recent public health initiatives, demographic aspects of depression and suicide, as well as the implications of a history of depression in the present (p. 237), each pattern Leckie's work here.

The book brings me a deep appreciation for the way sensitive topics can be rendered as narratives that create meanings of our past, while also helping readers to understand and appreciate the depth of peoples' experiences in the present. It pushes us to reflect again on the New Zealand experience, too, yet not, I think, in the sense of an exceptionalist narrative of national depression. Here readers are once again made acutely aware of the wry message delivered in 1981 in the Blam Blam Blam track: "There is no depression in New Zealand", a song that Leckie must also have used as a soundtrack to her ideation of this book.