Index

adaptive expectations mechanism, in public sector, 19, 115, 143, 154, 188
affluent democracies, 5
Affordable Care Act, U.S. (2010), 46–47, 107
AFL-CIO. *See* American Federation of Labor and Congress of Industrial Organizations (AFL-CIO)
African Americans. *See also* race, racism and
  Civil Rights Movement and, 112–13
  Great Migration, 112–13
  schizophrenia among, 112
AFSCME. *See* American Federation of State, County, and Municipal Employees (AFSCME)
Alienists
  in France, 72–73
  in U.S., 66–67
Allentown State Hospital, demolition of, 1–6
AMA. *See* American Medical Association (AMA)
American Federation of Labor and Congress of Industrial Organizations (AFL-CIO), 85
American Federation of State, County, and Municipal Employees (AFSCME), 85, 89–90, 94, 97–100, 101–2
American Hospital Association, 104–5
American Medical Association (AMA), 60, 76–77, 83–84
American Medico-Psychological Association, 70
American Political Science Association, 11
American Psychiatric Association (APA), 56, 65, 76–77, 89–90, 97–100, 104–5, 110
  historical roots of, 66–67, 70–71
  Mental Retardation and Community Mental Health Centers Construction Act and, 84
Annales Médico-Psychologiques, 57, 68, 74
anti-psychiatry, 69, 139, 145–46, 147
antipsychotic medications, 14, 40–41, 162
APA. *See* American Psychiatric Association (APA)
Association of Medical Superintendents for American Institutions for the Insane, 67, 70–71
Association professionnelle des médecins des hôpitaux psychiatriques français (Professional Association of French Psychiatric Hospital Physicians), 74–75
Aubanel, Honoré, 71
Australia, mental health care services in, 31–32
Austria, mental health care services in, 36

Barre, Raymond, 135, 141
Basaglia, Franco, 40–41
Bauduret, Jean-François, 122
Beers, Clifford, 69
Belgium, mental health care services in, 31–32, 35–36
Beveridge Report, 58
Bigelow, Newton, 82

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012

Blatz, Albert, 99
Bonapartists, 71–72
Bondevik, Kjell Magne, 182
Bouhaillier, Gaspard, 148
Boulenger, Pierre, 129
Boulin, Robert, 129
brokerage mechanism, in public sector, 19, 114, 131, 139, 154, 188
budget maximizers, in public sector, 19
Byrnes, John, 92

Canada, mental health care services in, 31–32
Carter, Jimmy, 99
Carter, Rosalynn, 99
catchment areas, 61
Centre de Postcure et de Réadaptation de Billiers
  expansion of services in, 1–6
  labor union support for, 3
Le Chapelier Law, France (1791), 74
Charcot, Jean-Martin, 72
Chirac, Jacques, 135
chlorpromazine. *See* antipsychotic medications
Civil Rights Movement, in U.S., 112–13
civil service employment, in France, 76
Clinton, Bill, 107
CMHCs. *See* Community Mental Health Centers (CMHCs), in U.S.
Commission on Mental Health, U.S., 99
Common Program, 137–38, 140–41
community care
  in Norway, 44
  in Sweden, 44
Community Mental Health Centers (CMHCs), in U.S., 45, 46, 80–88
comparative political economy, of mental health care, 7–14
  Anglo-American focus of, 8
  for elder care, 11–12
  in postwar period, 7–8
  in welfare states, 7–8, 10–11
Confédération des Syndicats Médicaux Français, 60, 75, 119, 236
Cooper, David, 40–41
Council for Mental Health, in Norway, 175–76, 179, 184
Covid-19 pandemic, mental health care facilities during
  demolition of, 1–6
  in France, 1–6
Daumezon, Georges, 75, 119
day hospital concept, 61
DDASS. *See* Direction départementale des affaires sanitaires et sociales (DDASS)
Debré, Robert, 126–27
Debré Reform (Law of December 30, 1958), 126–27
decarceration, 51
deinstitutionalization, in welfare state formation, 51
deinstitutionalization, psychiatric, xi–xii
  comparative approaches to, 55–57
  conceptual approach to, 51–54, 156–59
    guidelines for, 52, 53
  core findings about, 187–90
  Debré Reforms, 126–27
  decarceration and, 51
  in France
    administrative circular for, 119–22
    alignment of public workers and managers, 124–28
    alternative approaches to, 145–52
    anti-psychiatry movement and, 145–46
    authority of *l'État,* 147–49
    Common Program and, 137–38, 140–41
    conceptual approach to, 116–17
    cutbacks in psychiatric services, 136–37
    Demay Report, 137–40, 143–44
    development of mental health sectors, 117–23
    double remuneration problem, 127
    expansion of mental health sectors, 123–35
    financing for mental health sectors, 135–44
    Gallois-Taïb Report, 141
    labor unions and, 125
    legal protection for mental health sectors, 140–44
    localist agenda for, 149
    "long sleep" of mental health care and, 122–23
    mobilization of public workers, 124–25
    new mental health sectors, 119–22
    1968 protests and, 124–32
    in postwar health policy, 117
    public managers in, 118–19, 125–28, 134
    public workers' protections, 137–40

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012

role of public employment in political economy, 149–52
Second Debré Reform, 131
sectorization mechanisms, 116, 117–22, 148, 151
as social movement, 145–47
supply-side policy feedback loop, 118, 124, 136
YAVIS phenomenon, 152
length of residence dimension in, 53
measures of, 54
mental health care workers and, 80–82, 157
mental health hospitals and, 108–10
of mental health patients
in France, xii, 51
in Norway, 5
in Sweden, 5
in U.S., 5, 79–80
methodological sources on, 27
structural interpretations of, 8
in U.S.
for community mental health centers, 80–88
conceptual approach to, 79–80
history of, 79–80
Joint Commission on Mental Health, 81–82
managers and, 80–82
under Mental Retardation and Community Mental Health Centers Construction Act, 82–84
negative feedback on staffing provisions, 85–88
public mental health hospitals and, 88–95
public workers and, 80–82
under Social Security amendments, 88–89
supply-side policy feedback, 81, 88–89
trade unions in, 80–82
Deleuze, Gilles, 145–46
Demay, Jean, 137–40
Demay Report, 137–40, 143–44
Denmark, mental health care services in, 36–37
Despinoy, Maurice, 61
Deutsch, Albert, 61–62
diagnosis-related groups (DRGs), 105
Direction départementale des affaires sanitaires et sociales (DDASS), 136–37, 141–42
disability, 34–35, 46, 89, 94–95, 100, 102, 105, 150, 151, 152, 181–82
Doctrinaires, 67–68, 71–72
double remuneration problem, in France, 127
Dowbiggin, Ian, 71–73
DRGs. *See* diagnosis-related groups (DRGs)
dualization, in labor market, 198–99, 203
Duval, Addison M., 86

education systems, national, expansion of, xii–xiii
1848 Revolution, in France, 72–73
elder care, marketization of, 11–12
England. *See* Great Britain
Engqvist, Lars, 47, 159–60
Escalation Plan, in Norway, 160, 179, 182
Esping-Andersen, Gøsta, 190–91, 199
Ewalt, Jack R., 82, 84
Ey, Henri, 129–30

Fanon, Frantz, 40–41, 146
Faure, Edgar, 128
Finland, mental health care services in, 41
Foreningen sveriges socialchefer (Municipal Heads of Social of Services), 169–70
Foucault, Michel, 41, 145–46
France. *See also* mental health care systems, before deinstitutionalization; mental health care systems, in modern era; *specific topics*
Annales Médico-Psychologiques, 57, 68, 74
anti-psychiatry movement in, 145–46
authority of *l'État,* 147–49
Bonapartists in, 71–72
Centre de Postcure et de Réadaptation de Billiers
expansion of services in, 1–6
labor union support for, 3
Le Chapelier Law, 74
civil service employment in, 76
Confédération des Syndicats Médicaux Français, 60, 75, 119, 236
Debré Reform, 126–27
deinstitutionalization of mentally ill in, xii, 51
direction départementale des affaires sanitaires et sociales, 136–37, 141–42
Doctrinaires in, 67–68, 71–72
double remuneration problem, 127
institutional psychotherapy in, 61, 146–47
July Monarchy in, 67–68

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012

France (cont.)
labor unions in, 64–65
Centre de Postcure et de Réadaptation de Billiers, 3
psychiatric deinstitutionalization and, 125
Syndicat de la psychiatrie, 133
Syndicat des médecins des hôpitaux psychiatriques, xii, 56, 65, 77, 117, 118–19, 124–32
Syndicat des médecins français spécialistes du système nerveux, 119
Syndicat des psychiatres en formation, 127–28
medical-social services in, 48
national plan concept in, 131
1968 protests in, 124–32
Second Debré Reform, 131
sectorization in, 48–49, 62
psychiatric deinstitutionalization and, 116, 117–22, 148, 151
Société Médico-Psychologique, 67–68, 71–73
UNAFAM in, 150
within-case process-tracing tests in, 153–55

Gallois-Taïb Report, 141
Germany, mental health care services in, 31–32, 35–36, 41
Gingrich, Jane, 11–12
Giscard d'Estaing, Valéry, 135–38
Glasscote, Raymond, 95
Goffman, Erving, 40–41, 108
"Golden Age," in U.S., 55, 58
Goldstein, Jan, 71
Great Britain
mental health care services in, 36
Speenhamland system, 51
welfare state system in, 51
Great Society, 58
Guattari, Félix, 145–46
Guérin, Vincent, 134

halfway houses, in U.S., 95
Harrisburg State Hospital, closure of, 1
health care systems, national. *See also* hospitals; mental health care
expansion of, xii–xiii
hospital data and, 38
for indigent populations, 38
mental health care systems influenced by, 36
typologies of, 36–37
Henckes, Nicolas, 74
Heuyer, Georges, 119, 121
Holmberg, Bo, 170
hospitals. *See also* mental health hospitals
data variations in national health care systems, 38
Harrisburg State Hospital, 1
Mayview State Hospital, 1
pharmaceutical industry as influence on, 40–41
Hulterström, Sven, 167–68

incarceration, mental health care systems and, 60
indigent populations, health care services for, 38
institutional psychotherapy, 61, 146–47
Italy, mental health care services in, 31–32, 36

jails, prisons and. *See* incarceration
Jarvis, Edward, 68
Johnson, Lyndon B., 92–93
Joint Commission on Mental Health, in U.S., 81–82
July Monarchy, 67–68

Kall, Wendy Maycraft, 173
Kammerer, Théophile, 129–30, 138
Kennedy, John F., 62
Kirkbride, Thomas, 68
Knuttson, Gert, 170
Kommunenes Sentralforbund (KS, Norwegian Association of Local and Regional Authorities), 176–77, 184

labor market dualization. *See* dualization
labor unions
in France, 64–65
Confédération française démocratique du travail (CFDT, French Democratic Confederation of Labor), 3, 125
Confédération générale du travail (CGT, General Confederation of Labor), 75, 118–19
Force ouvrière (FO, Workers' Force), 118–19

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012

Syndicat de la psychiatrie (Trade Union of Psychiatry), 133
Syndicat des médecins des hôpitaux psychiatriques (Trade Union of Psychiatric Hospital Physicians), xii, 56, 65, 77, 117, 118–19, 124–32
Syndicat des médecins français spécialistes du système nerveux (Trade Union of Nervous System Psychiatrists), 119
Syndicat des psychiatres en formation (Trade Union of Psychiatric Trainees), 127–28
in Norway, 165, 176–77. *See also* Council for Mental Health, in Norway
in public sector, 19
public unions, 194, 200–1
in Sweden, 166
Kommunal, 173
Sveriges kommunaltjänstemannaförbund (SKTF, Swedish Municipal Employers Union), 170, 173
in U.S., 64–65
American Federation of Labor and Congress of Industrial Organizations (AFL-CIO), 85
American Federation of State, County, and Municipal Employees (AFSCME), 85, 89–90, 94, 97–100, 101–2
Service Employees International Union (SEIU), 3, 97
Lacan, Jacques, 145–46
Laing, R. D., 40–41
The Lancet Psychiatry, 34
Landstingsförbundet (Swedish County Employers' Association), 169–70
Largactil. *See* antipsychotic medications
Law of December 30, 1958, France. *See* Debré Reform
League for Mental Hygiene, 74–75
Leguay, Denis, 141
Lieberman, Robert, 60
Long, Russell, 91

maisons de santé, 72
Making Markets in the Welfare State (Gingrich), 11
Markström, Urban, 171, 173, 174
Mayview State Hospital, closure of, 1
McGarrah, Robert, 102
McGrath, John, 101
Medicaid/Medicare services, in U.S., 46–47
mental health care. *See also* mental health care systems, before deinstitutionalization; mental health care systems, in modern era; mental health care workers; mental health hospitals; mentally ill populations; *specific countries*
comparative political economy of, 7–14
Anglo-American focus of, 8
for elder care, 11–12
in postwar period, 7–8
in welfare states, 7–8, 10–11
cross-national variations in, 4–5
educational services as element of, 13
labor-intensive costs of, 14
national comparisons with, 21–28
incorporation of non-European countries, 24–25
methodological approaches to, 22–28
public labor-management coalitions in, 26, 50–51
over time, 21–28
methodological approaches to, 22–28
in postwar period, 23
services component of, 13
vocational services as element of, 13
mental health care systems, before deinstitutionalization
in France
catchment areas, 61
centralization of, 59–60
Church role in, 59–60
expansion of welfare state as factor for, 58
government funding of, 59–60
initial conditions for, 57–63
institutional journals for, 57
institutional psychotherapy in, 61, 146
maisons de santé, 72
mental health care supply in, 63
private medical practices and, 60–61
race as factor in, 60
treatment for nervous conditions, 72
during the *Trente Glorieuses*, 58, 122, 134–35
U.S. system compared to, 57–78
in U.S.
alienists in, 66–67
catchment areas, 61

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012

mental health care systems (cont.)
decentralization of, 59–60
expansion of welfare state as factor in, 58
French system compared to, 57–78
during the "Golden Age," 55, 58
incarceration and, 60
initial conditions for, 57–63
institutional journals for, 57
mental health care supply in, 63
milieu therapy in, 61
private medical practices and, 60–61
race factors in, 60
regional differences in, 60
mental health care systems, in modern era. *See also* mental health hospitals; *specific countries*
conceptual approach to, 29–30
critics of, 40–41
differences in supply across countries, 30–41
alternative explanations for, 35–41
centralization/decentralization patterns in, 38
historical legacy for, 37–38
methodological approaches to, 30–35
national budgets and, 31, 32
in France
access to, 48–49
facilities for, 1–6
mental health care supply in, 63
public policy for, 49
sectorization in, 48–49, 62
services for, 31–32, 41, 48–49
general health care systems as influence on, 36
in media, 29
Organization for Economic Co-operation and Development and (OECD), 32–33
typology of, 36–37
in U.S., 63
WHO data on, 30–31, 32
mental health care workers
deinstitutionalization and, 80–82, 157
in France
alignment of public workers and managers, 124–28
mobilization of public workers, 124–25
public workers' protections, 137–40
political influence of, xii–xiii
in public mental health hospitals, 89–90
in public sector, 157
in U.S., 80–82
mental health hospitals, psychiatric care facilities and
during Covid-19 pandemic
demolition of, 1–6
in France, 1–6
day hospital concept, 61
decarceration of, 51
depopulation of, xi–xii
in France
during Covid-19 pandemic, 1–6
demolition of, 1–6
expansion of services in, 1–6
not-for-profit, 98
pharmaceutical industry expansion as influence on, 40–41
population demographics
mental hospitals in relation to, 39–40
for psychiatric beds, 39–40, 158, 187
residents per 100,000 people, 39–40, 158, 187
in U.S.
under Affordable Care Act, 107
AFSCME and, 85, 89–90, 94, 97–100, 101–2
Allentown State Hospital, 1–6
American Hospital Association and, 104–5
American Psychiatric Association and, 89–90, 97–100, 104–5, 110
closure and demolition of, 1–6
cutbacks for, 103–4
deinstitutionalization movement and, 108–10
diagnosis-related groups and, 105
federalism as influence on, 110–11
halfway houses and, 95
managers in, 89–90
under Mental Health Systems Act, 100–4, 111
negative feedback loops for, 104–7
public workers in, 89–90
race as factor in, 112–13
retrenchment of, 95–97
under Social Security programs, 90–95
Mental Health Systems Act, U.S. (1980), 100–4, 111
Mental Retardation and Community Mental Health Centers Construction Act, U.S. (1963), 62, 82–84

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012

mentally ill populations
deinstitutionalization of, in France, xii
NAMI, 150
stigma for, 7
Mignot, Hubert, 119
milieu therapy, 61
Miller, Jack, 92
Mills, Wilbur, 91
Mitchell, S. Weir, 69
Mitchell-Bateman, Mildred, 99
Mitterrand, François, 137–8, 140–1, 149, 151–2
Morel, B. A., 71
Municipal Employers Union, 170, 173
Municipal Social Services Act, Sweden (1980), 169

NAMI (National Alliance for the Mentally Ill, later National Alliance on Mental Illness), 99, 150
Napoleonic Code, 74
NASHPD. *See* National Association of State Mental Health Program Directors (NASHPD)
National Association of State Mental Health Program Directors (NASHPD), 105
national education systems. *See* education systems
national health care systems. *See* health care systems
national plan concept *(carte sanitaire),* in French health care, 131
Netherlands, mental health care services in, 31–32, 35–37
neurology, 72–73, 127, 131
nervous disease/neurosis, 72
neurologists, 56, 69, 70–71, 73, 74, 77, 119, 127–8
New Public Management, 183
New Zealand, mental health care services in, 31–32
Norway, mental health care services in, 23–24, 31–32, 49–51, 146
analysis of, 180–85
community care, 44
Council for Mental Health and, 175–6, 179, 184
decentralization of, 183
deinstitutionalization of, 5, 159–66
Escalation Plan, 160, 179, 182
mental health care workforce, 162
mental health policy reforms, 161, 165, 167
sectorization in, 162–63
geographic variations in, 49–50
"Golden Rule" principle in, 49–50
Kommunenes Sentralforbund, 176–77, 184
New Public Management approach, 183
private, 50
psychiatric nursing homes, 175
public labor-management coalition for, 182–83, 184–85
public services systems in, xii
state funding for, 49–50
Nowhere to Go (Torrey), 29
nurses, xii, 128–29, 131, 132, 134, 140, 146–47, 160, 172, 173. *See also* mental health care workers

Obama, Barack, 107
OECD. *See* Organization for Economic Co-operation and Development (OECD)
Olson, Laura Katz, 91
Omnibus Budget Reconciliation Act, U.S. (1981), 103
Organization for Economic Co-operation and Development (OECD), 32–33

Packard, Elizabeth, 69
Parsons, Anne, 60
patient advocates, in mental health. *See* NAMI (National Alliance for the Mentally Ill, later National Alliance on Mental Illness); UNAFAM *(*Union de familles de malades mentaux et de leurs associations), in France
pharmaceutical industry, 40–41
Pinel, Philippe, 146
Polanyi, Karl, 51
policy feedback, 15, 15, 20–21, 132, 158, 179, 188. *See also* supply-side policy feedback
Pompidou, Georges, 125, 149
private mental health care
in France, 60–61
in Norway, 50
in Sweden, 47
in U.S., 60–61
psychiatric deinstitutionalization. *See* deinstitutionalization, psychiatric

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012

psychiatric hospitals. *See* mental health hospitals
psychiatric-custodial establishment, 52–53
psychiatrists, 46–47, 48–49, 61, 66, 75, 76–77, 82, 99, 105, 112, 123, 127, 129–30, 131–34, 135, 138, 146–47, 150–51, 156–57, 173. *See also* mental health care workers
psychologists, 48, 105, 108–9, 132, 173. *See also* mental health care workers
psychotherapy, 13, 33–34, 152. *See also* institutional psychotherapy
public policy, implications for, 197–200

Quadagno, Jill, 60

race, racism and
  Great Migration of African Americans and, 112–13
  mental health care systems and
    in France, 60
    in U.S., 60
Ralite, Jack, 137–39, 141
Ray, Isaac, 68
Reagan, Ronald, 103, 106, 107
Renaudin, Émile, 71

schizophrenia
  among African Americans, 112
  prevalence rates for, 12
Schuknecht, Ludger, 191, 192
Schwartz, Morris S., 40–41
Schweiker, Richard, 102–3
Scull, Andrew, 7–8, 51
Second Debré Reform, France (1970), 131
sectorization
  in France, 48–49, 62, 117–22, 148, 151
  in Norway, 162–63
  in Sweden, 162–63
Service Employees International Union (SEIU), 3, 97
The Shame of the States (Deutsch), 61
Sharfstein, Steven, 99
Social Security Disability Insurance (SSDI), 94–95
Social Security program, in U.S., 46, 90–93
  Medicaid program, 90–92, 102
  Medicare program, 90–92, 102
  negative feedback to, 93–95
  1972 amendments to, 93–95, 101–2
  expansion of SSDI benefits, 94–95, 102
  psychiatric deinstitutionalization and, 88–89
social workers, xii, 2, 13, 48, 128, 129–30, 132, 134, 140, 171, 173. *See also* mental health care workers
Société Médico-Psychologique, 67–68, 71–73
Speenhamland system, in Great Britain, 51
SSDI. *See* Social Security Disability Insurance (SSDI)
Stanton, Alfred H., 40–41
Stéhelin, M., 73–74
stigma, 7
supply-side policy feedback, 15–21, 42, 96
  cost and wage pressures, 16–17
  in France, 118, 124, 136
  model for, 16, 189
  in Norway, 175–79
  in private sector, 18
  psychiatric deinstitutionalization and, 81, 88–89
  for public services, 17–18
  in Sweden, 167–75
  in U.S., 15, 22–28, 63–64, 156–59
  weak client demand and, 15
Svenska Kommunförbundet (Swedish Municipal Employers' Association), 169–70
Sveriges Kommuner och Regioner (Swedish County and Municipal Employers' Association), 173
Sweden, mental health care services in, 23–24, 31–32, 47–48
  analysis of, 180–85
  community care, 44
  deinstitutionalization of, 5, 159–66
    mental health care workforce, 162, 172–73
    mental health policy reforms, 161, 165, 167
    Psychiatry Reform, 159–60, 167–68
    sectorization in, 162–63
  institutional failures in, 47
  labor unions, 166
    Municipal Employers Union, 170, 173
  at municipal level, 47–48, 169–70
  under Municipal Social Services Act, 169

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012

public labor-management coalitions, 170, 184–85
public services systems in, xii
Swenson, Peter, 76–77
Switzerland, mental health care services in, 31–32, 41
Syndicat de la psychiatres (Trade Union of Psychiatry), 133
Syndicat des médecins des hôpitaux psychiatriques (Trade Union of Psychiatric Hospital Physicians), xii, 56, 65, 77, 117, 118–19, 124–32
Syndicat des médecins français spécialistes du système nerveux (Trade Union of Nervous System Psychiatrists), 119
Syndicat des psychiatres en formation (Trade Union of Psychiatric Trainees), 127–28
Szasz, Thomas, 40–41, 108

Taft-Hartley Act, U.S. (1947), 64
Thorazine. *See* antipsychotic medications
Thornburgh, Dick, 102–3
Torrey, E. Fuller, 29
Tosquelles, François, 125–26
Toulouse, Edouard, 74–75
Trente Glorieuses, in France, 58, 122, 134–35

U.K. *See* United Kingdom (U.K.)
UNAFAM *(Union de familles de malades mentaux et de leurs associations),* in France, 150
United Kingdom (U.K.). *See also* Great Britain
mental health care services in, 36–37
United States (U.S.). *See also* mental health care systems, before deinstitutionalization; mental health care systems, in modern era; Social Security program; *specific topics*
Affordable Care Act, 107
Association of Medical Superintendents for American Institutions for the Insane, 67, 70–71
civil rights movement in, 112–13
community mental health centers in, 45, 46, 82–88
Great Society in, 58
halfway houses in, 95
Joint Commission on Mental Health in, 81–82
labor unions in, 64–65
AFSCME, 85, 89–90, 94, 97–100, 101–2
American Medical Association, 60, 76–77, 83–84
under Taft-Hartley Act, 64
mental health care services in, 31–32, 45–47
access to, 45–46
under Affordable Care Act, 46–47
Community Mental Health Centers, 45, 46
Medicaid/Medicare services, 46–47
under Social Security program, 46
Mental Health Systems Act, 100–4, 111
Mental Retardation and Community Mental Health Centers Construction Act, 62, 82–84
National Alliance on Mental Illness, 99
Omnibus Budget Reconciliation Act, 103
President's Commission on Mental Health, 99
Taft-Hartley Act, 64
welfare state system in, 58
race as factor in, 112–13

Waldeck-Rousseau, Loi, 74
Walker, Alexis, 64
welfare state
definition and scope of, 4
deinstitutionalization of, 51
expansion of public employment, 193–94
expansion of service arm in, 190–93
in France, 58
models of, 10–11
Polanyi on, 51
political logic of social service distribution in, 195–97
Scandinavian/Nordic, 23–24, 156–59, 163, 165, 194
theoretical implications for, 190–97
typology of, 10–11
in U.S., 58
race as factor in, 112–13
welfare workforce. *See also* labor unions
evolving definition of, 202–4
political influence of, xiii

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012

welfare workforce (cont.)
scope of, 5–6
supply-side policy feedback, 15–21, 42
cost and wage pressures, 16–17
model for, 16
for public services, 17–18
weak client demand and, 15
wage bargaining and, 203
WHO. *See* World Health Organization (WHO)
within-case process-tracing tests
in France, 153–55
in U.S., 114–15
World Health Organization (WHO), 22, 54, 61
The Worlds of Welfare Capitalism (Esping-Andersen), 190–91
Wurf, Jerry, 98–99

YAVIS phenomenon, 152

Downloaded from https://www.cambridge.org/core. UNIVERSIDAD AUTONOMA METROPOLITANA, on 12 Nov 2026 at 19:49:02, subject to the Cambridge Core terms of use, available at https://www.cambridge.org/core/terms. https://doi.org/10.1017/9781009499866.012