



Assessing Mental Health in American Politics: The 1972 Tom Eagleton Affair

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Assessing Mental Health in American Politics:

The 1972 Tom Eagleton Affair

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A Thesis in the Field of History

for the Degree of Master of Liberal Arts in Extension Studies

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Abstract

This thesis explores the intersection of politics, psychiatry, and media by examining the 1972 Eagleton affair. Presidential candidate and democrat George McGovern chose Thomas Eagleton, a Senator from Missouri, hastily as his running mate that July. However, Eagleton lasted for only eighteen days on the ticket after it was revealed that, on two occasions, he received electroconvulsive shock therapy (ECT) to treat his depression a decade earlier. Though many might assume that Eagleton's depression itself was responsible for waning American's confidence in him (and McGovern), this paper argues that it was prior ECT treatment – not depression – that ultimately convinced Americans that he was not fit to run for such a high office. Eagleton would quickly be replaced and continue his career solely in Missouri politics, no longer a household name on a national level. However, the so-called Eagleton affair is still important to understand in that it exposed midcentury American attitudes towards psychiatric treatment and also highlighted the media's role in further stigmatizing mental health conditions and treatment at that time.

Author's Biographical Sketch

Originally from New Jersey, Emily Kaplan attended Hamilton College where she majored in history with a focus on Colonial America. For her undergraduate senior thesis, she explored colonial understanding of meteorological phenomenon during the era of the American Revolution. After graduating, she took a position at Tabor Academy, where she taught a variety of history courses for six years. In the fall of 2021, she started a new position in the history department at Choate Rosemary Hall in Wallingford, CT teaching United States history and Native American Studies. In her eight years of teaching, Emily has expanded her love of US history well beyond the colonial era, developing a special interest in the 1970s, psychiatric history, and immigration history. When Emily is not teaching or writing, she enjoys being out in nature, playing guitar, or relaxing with her friends or her two cats.

Table of Contents

Author’s Biographical Sketch.....	iv
Chapter I. Introduction.....	1
Historical Background	7
Historiography	12
Historiography on Mental Health Issues in Other Politicians	15
Historiography on the Press and Investigative Journalism in the Early 1970s.....	17
Research Methods.....	20
Research Limitations	23
Chapter II. Electroconvulsive Shock Therapy (ECT).....	25
A Brief History of ECT.....	26
Growing Stigmatization in the 1970s	30
Discussions of ECT in the Media around 1972	35
Conclusion	38
Chapter III. Newspaper Reporting During the Height of the Eagleton Affair.....	41
Visual Media and the Eagleton Affair: How the Cameras Caught Eagleton.....	52
Chapter IV. Conclusion	55
Bibliography	62

Chapter I.

Introduction

The January 6, 2021, insurrection at the United States Capitol brought about a fierce call from Democrats to invoke the 25th Amendment to remove former President Donald Trump from office, citing his “absolute inability to discharge the most basic and fundamental powers and duties of his office.”¹ This was certainly not the first time that politicians, medical professionals, and American citizens had called for Trump’s removal based, among other concerns, on his mental fitness. For example, more than 41,000 mental health professionals signed a petition in 2017 that stated, “We believe in our professional judgment that Donald Trump manifests a serious mental illness that renders him psychologically incapable of competently discharging the duties of the President of the United States.”² Psychiatrists pressed this concern despite the commitment of their professional organization, the American Psychiatric Association (APA), to the 1973 “Goldwater Rule,” which holds that psychiatrists should not diagnose anyone, and especially public figures, whom they have not actually evaluated in-person.³

Though Trump is no longer in office, the invocation of the 25th Amendment and questions about his mental fitness served as an important data point in America’s ongoing

¹ U.S. Congress, House, *Calling on Vice President Michael R. Pence to Activate Section 4 of the 25th Amendment*, 117th Congress, 1st Session, introduced in House January 10, 2021, https://www.speaker.gov/sites/speaker.house.gov/files/1.10.21_25thAmendmentResolution%5BFOR%20NTRO%5D.pdf.

² Paul M. Renfro, “Why Dismissing Donald Trump as Mad or Ill is a Major Mistake,” *The Washington Post*, October 4, 2019, <https://www.washingtonpost.com/outlook/2019/10/04/why-dismissing-president-trump-mad-or-ill-is-major-mistake/>.

³ American Psychiatric Association, “APA Reaffirms Support for Goldwater Rule, March 16, 2017, <https://www.psychiatry.org/newsroom/news-releases/apa-reaffirms-support-for-goldwater-rule>.

conversation about the relationship between mental health and political leadership. Today, political opponents and concerned Americans regularly question Joe Biden's mental fitness in office, speculating that he is suffering from dementia and is, as such, a liability in office.⁴ This conversation about leadership and mental fitness became mainstream in 1972, when for 18 days that July, Senator Tom Eagleton ran as the vice-presidential nominee alongside George McGovern. After information leaked that Eagleton had been hospitalized and received electroconvulsive shock therapy on two occasions a decade earlier to treat his depression, American voters lost confidence in not only Eagleton's potential to serve but also McGovern's decision-making. Eagleton quickly removed himself from the ticket, but the ordeal damaged McGovern's campaign enough that he would lose soundly (winning only Massachusetts) to President Nixon that November.⁵

My thesis research seeks to better understand this key moment at which Americans apparently took mental health so heavily into account when voting for their next president and to explore what legacy, if any, this election scandal left for the future of presidential elections. How and why did a prior mental health condition and treatment destroy Tom Eagleton's ability to serve as a potential vice president? Were American voters really that wary of a politician having depression, given their prior acceptance of popular yet melancholic Presidents? What role did Eagleton's ECT treatment have in his removal from the Democratic ticket? And what role did the media play?

⁴ John Zogby, "Let Joe Be Joe," *Forbes Magazine*, April 22, 2022, accessed September 11, 2022, <https://www.forbes.com/sites/johnzogby/2022/04/22/let-joe-be-joe/?sh=7f01a8e14521>.

⁵ Andrew Glass, "Nixon Reelected in Landslide, Nov. 7, 1972," *Politico*, November 7, 2018, accessed November 12, 2021, <https://www.politico.com/story/2018/11/07/this-day-in-politics-november-7-963516>.

The existing scholarship on the Eagleton affair is relatively limited. There have been just two major scholarly articles recently published in journals about the Eagleton affair. Jenell Johnson uses it as a case study to argue that stigma surrounding depression and ECT was “both rhetorically constituted and rhetorically disabling,”⁶ and James Giglio argues that the Eagleton affair led to a more thorough vetting process when Presidential candidates choose a running mate.⁷ The two books that most explicitly discuss the Eagleton affair are from Giglio and Joshua M. Glasser.⁸ Using a biographical lens, both examine the events of July 1972 in detail, and Glasser’s work expands on the historical context of early 1970s America and the Cold War anxieties that Americans brought with them to voting booths that year. Beyond scholarly articles and books, news outlets invoke the Eagleton affair every four years when it comes time for a candidate to choose a running mate.⁹ As one example, questions over the vetting process arose in 2008 around Senator John McCain’s surprising (and ultimately damaging) choice to run with Alaskan Governor Sarah Palin, sparking comparisons to 1972.¹⁰ Overall, Glasser’s work has been the most thorough in addressing the Eagleton affair. However, his analysis of just how much Tom Eagleton impacted the future of American politics, revamped the debate about electroshock therapy, and sparked the connection about mental health and

⁶ Jenell Johnson, “The Skeleton on the Couch: The Eagleton Affair, Rhetorical Disability, and the Stigma of Mental Illness,” *Rhetoric Society Quarterly* 40, no. 5 (2010): 459-478.

⁷ James N. Giglio, “The Eagleton Affair: Thomas Eagleton, George McGovern, and the 1972 Vice Presidential Nomination,” *Presidential Studies Quarterly* 39, no. 4 (Dec. 2009): 647-676. <https://www.jstor.org/stable/41427414>.

⁸ James Giglio, *Call Me Tom: The Life of Thomas F. Eagleton* (Columbia, MO: University of Missouri Press, 2011); Joshua M. Glasser, *The Eighteen-Day Running Mate: McGovern, Eagleton, and a Campaign in Crisis* (New Haven, CT: Yale University Press, 2012).

⁹ Lawrence K. Altman, “Hasty and Ruinous 1972 Pick Colors Today’s Hunt for a No. 2,” *New York Times*, July 23, 2012, accessed November 12, 2021, <https://www.nytimes.com/2012/07/24/us/politics/eagleton-pick-in-1972-colors-todays-vice-president-hunt.html>.

¹⁰ Benjamin Hart, “John McCain Regrets His Palin Pick for the Wrong Reasons,” *New York Magazine*, May 5, 2018, accessed November 11, 2021, <https://nymag.com/intelligencer/2018/05/mccain-regrets-palin-pick-wrong-reasons.html>.

leadership are some important areas upon which he could have expanded further. Thus, my research seeks to not only contextualize and explain the Eagleton affair, but also to delve into its significance in a broader conversation about psychiatry, politics, and media.

While adding to the limited scholarship on the Eagleton affair itself, this research is also important in contributing to the existing historical scholarship surrounding mental health in the mid to late 20th century. Research in this area either discusses changing treatments for mental health conditions throughout the decades, official policies and acts put in place to address mental health concerns, or the psychiatric correlations between madness, genius, and leadership. However, fewer articles detail the history of how Americans *perceive* those with mental illnesses, whether in an elected position or not, and how the media in particular framed these discussions. When historians do discuss changing attitudes on mental illness in this time period, their conclusions are largely the same. For example, as one researcher argues, “The underlying values structure of the 1960s and 1970s helped to create a social climate in which Americans were more accepting of and willing to assist (through individual action or via taxation) those who could not help themselves.”¹¹ More funding for mental health research and de-stigmatization campaigns contributed to more acceptance towards everyday citizens with mental illness in the 1970s. I hypothesize that Americans could not only tolerate living next door to a neighbor with a mental health diagnosis, they could also do the same with someone in a position of great power. However, methods of treatment for mental illness

¹¹ AB Borinstein, “Public Attitudes Toward Persons with Mental Illness,” *Health Affairs* 11, no. 3 (1992): 186-196.
https://www.healthaffairs.org/doi/full/10.1377/hlthaff.11.3.186?casa_token=XOwHBFHWLUYAAAAA%3AGf2uCHAO9Qn3HLtRrOAreOEL--t-oHGSeVEbgT9dD8ORBWyAA3dGbNVPHGnhTFv_SRCjojpoHS8.

mattered to Americans and drove stigma: to use extreme measures, such as ECT, to treat depression meant to Americans that the patient was crazy beyond repair. In short, Americans and the press could be sympathetic and sensitive to depression to a point – that point hinged on treatment.

While my preliminary research led me to hypothesize that the 1972 election was a key example of how damaging the press could be in toppling campaigns over concerns of mental health, and that the press - not stigma - was what ultimately led to Eagleton's demise, further research complicated and dispelled this hypothesis. Instead, I found that the press in the summer of 1972 centered upon feelings of sympathy for Eagleton's depression, doing little to sensationalize Eagleton's mental health diagnosis itself. Instead, Eagleton was ultimately doomed by his decision to undergo ECT treatment, which was clouded by heavy stigma throughout the 20th century. The paper will first detail the history of electroconvulsive shock therapy and explore American attitudes toward it by midcentury. Then, I will analyze the 1972 election itself and the ways in which Americans understood mental health in the early 1970s, given the information provided by news coverage. In particular, I explore how reporters discussed the Eagleton affair as it unfolded in the summer of 1972. I will conclude the paper by analyzing how the "Eagleton Effect" shaped future decisions in presidential campaigns, such as Michael Dukakis' 1988 Presidential bid, and the selection bias that continues to factor into Americans carefully choosing candidates who appear jovial and thick-skinned. In doing so, I hope to emphasize the importance of the Eagleton affair in American politics and further consider what Americans, both 50 years ago and today, can tolerate in their candidates' mental aptitudes, whether those mental health conditions are revealed or not.

In testing my hypothesis, I looked into a variety of sources: work that details the Cold War American psyche, sources that explain the state of mental health stigmatization in the early 1970s, especially as it related to ECT, mid-century American journalism, and of course the Eagleton affair itself. I explored the following primary sources: newspaper articles, editorials, and letters to the editor from the early 1970s and July/August 1972 in particular, transcripts from Eagleton and McGovern interviews detailing the decision to withdraw from the race, television interviews and coverage of the affair, changes in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM), accounts from ECT patients, doctors, and family members, news commentary on reflections from candidates struggling with mental illness in the 1950s and 60s, and commentary from pundits supporting or scrutinizing presidential and vice presidential candidates and their fitness for office.

This research is important in many ways. With more and more Americans diagnosed each year with mental illnesses and with more understanding of the origins, nature, and potential treatments of these illnesses, the reality of individuals living with known mental health conditions while occupying leadership positions will continue to rise. Electroconvulsive treatment in particular is still questioned given the imagery it invokes for so many Americans. Meanwhile, our political climate is ripe with personal attacks in part born out of the ease of access to politicians' private lives. As America has progressed in openly endorsing candidates of so many varying backgrounds, it is worth wondering if we have reached a point at which we could elect a president or vice president who openly lives with a mental health condition, or conversely, whether the "Eagleton effect" is still powerful. Overall, from questions about Donald Trump's

narcissism to Joe Biden's dementia, Americans will continue to take it upon themselves to weigh in both as voters and armchair psychiatrists, all with the help of sensationalized news coverage. Given this propensity to stigmatize those with mental health diagnoses, a more thorough exploration of how and why Americans got to this point is not only important, but very timely.

Historical Background

After John F. Kennedy's assassination in November 1963, most Americans witnessed for the first time in their lives a sudden transition of power: a vice president was sworn in to be the Commander in Chief. The sudden realization that a vice president was just one heartbeat away from stepping into the Oval Office and controlling nuclear codes served as a reminder to American voters that they could never again underestimate the importance of the vice-presidential nominees on their party's ticket. Lyndon Johnson assumed the presidency, and it was during his 1964 incumbent run for president that America witnessed a key intersection of mental health issues, presidential campaigning, and media slander that would serve as an important bookmark for voters eight years later. In the fall of 1964, more than 12,000 psychiatrists were polled for *Fact Magazine*, known for its sensational headlines and commentary on controversial issues. Asked whether Democratic candidate Barry Goldwater was fit to be President, nearly 1200 psychiatrists of the 2,400 respondents said no, leading Goldwater to sue the magazine's editor, Ralph Ginzburg.¹² Though Goldwater would win the lawsuit, Johnson would win the election

¹² Brian Resnick, "This article is why psychiatrists were banned from diagnosing politicians like Trump," *Vox*, May 26, 2017, accessed November 11, 2021, <https://www.vox.com/science-and-health/2017/5/25/15690396/fact-goldwater-rule-article-psychiatrist>.

and serve as Commander in Chief until 1968, when he ultimately passed along to Richard Nixon a legacy of failed policies in Vietnam and a country internally ripe with social upheaval. Wary of their political leaders, American voters hoped that a new decade would usher in political trust, peace, and stability at home and abroad, making the election of 1972 even more important.¹³

As the Democratic Convention of July 1972 approached, political advisors, American voters, and the press wondered if the party's nominee, South Dakotan Senator George McGovern, would have to settle for a less-than-ideal vice-presidential running mate. McGovern was running against incumbent Richard Nixon for President of the United States and had already been turned down by potential running mates and party favorites Ted Kennedy and Walter Mondale. After exhausting a list of potential Democrats for the job, McGovern finally called Thomas Eagleton, a handsome and popular Senator from Missouri. Eagleton, a Catholic and a moderate, had never lost an election (and never would), but posed a risk to the ticket as a lesser-known Senator chosen without a thorough vetting process. In fact, given a history of drama-free vice-presidential picks, McGovern was unaware that vice presidential candidates even required a thorough vetting process at all.¹⁴ This hasty decision to add Eagleton to the ticket would haunt the McGovern campaign for the next eighteen days while Eagleton lasted on the ticket, and eventually contributed to McGovern's embarrassing and historic defeat that November.¹⁵

¹³ Arthur H. Miller and Warren E. Miller, "Issues, Candidates and Partisan Divisions in the 1972 American Presidential Election," *British Journal of Political Science* 5, no. 4 (1975): 393-434, <https://www.jstor.org/stable/pdf/193436.pdf?refreqid=excelsior%3A01f532308ae927cf44a5340ffb528111>.

¹⁴ Giglio, *Call Me Tom*, 135.

¹⁵ Giglio, "The Eagleton Affair."

Though there had been rumors that Eagleton had previously struggled with alcohol addiction, it was Eagleton's past depression diagnosis and treatment that most concerned American voters. It soon became publicly known that Eagleton was hospitalized and received electroconvulsive shock therapy (ECT) to treat his depression in 1960, 1964, and 1966. ECT was, and still is, a relatively common treatment for patients with severe depression and bipolar disorders, as the brief, controlled seizures change one's brain chemistry and provide temporary relief from manic or depressive thoughts and behaviors. However, as the 1960s saw increased advocacy for the deinstitutionalization of mental health patients, Americans suffering from mental illness sought more private, at-home remedies for treatment. Thus, the birth of America's dependence on antidepressants and antipsychotics took hold, making mental illness more mainstream while simultaneously changing perceptions about prior and more aggressive forms of treatment like ECT. The ECT treatment was hardly private for Eagleton, who had already made a name for himself as an up-and-coming Missouri Democrat. Speculations about a drinking problem were taking shape, and perhaps worse, as *Time* reporter Jonathan Larsen wrote in 1968, "He also sinks into depressed states so severe, that, according to friends, he has taken to shock treatments to get himself out of them. We have not been able to confirm any of this...we put it on record only for future reference, when and if Tom Eagleton assumes a position of higher authority."¹⁶ Little did Larsen know that in less than a decade, these reports would shake the nation.

In the days and weeks following McGovern's announcement of his choice of Eagleton, his campaign scrambled to frame Eagleton's depression not as a shortcoming

¹⁶ Larsen quoted in Glasser, *The Eighteen-Day Running Mate*, 65.

of the man himself, but rather a result of hard work and tireless devotion to campaigning. As Eagleton described in a July 25, 1972 press conference,

On three occasions in my life I have voluntarily gone into hospitals as a result of nervous exhaustion and fatigue. A few in this room know me well...and they know me to be an intense and hard fighting person. I sometimes push myself too far. In 1960...Kennedy was running for president and I was a Democratic nominee for attorney general [for Missouri] ... I was in many instances my own car driver... I pushed myself, terribly hard, long hours day and night. ¹⁷

Through these revelations, McGovern assured the American public that he stood by Eagleton “one thousand percent.”¹⁸ In several other press conferences in the subsequent days, Eagleton promised the public that he was completely fit for office and had no intentions of leaving the ticket. Despite McGovern’s public support for Eagleton, he and his campaign advisors expressed deep regret among themselves for their carelessness in choosing a running mate with such a problematic background.¹⁹ Clearly, cleaning up the optics of Eagleton’s image were of the utmost concern for the McGovern campaign.

Meanwhile, some in the press were busy corroborating sources to prove that Eagleton’s character should be rightfully questioned beyond his previous hospitalizations. For example, Pulitzer Prize winning journalist Jack Anderson broadcast a story in which he falsely accused Eagleton of six drunk driving offenses. Though the story was later redacted, it displayed journalists’ (and the American media consumers’) eagerness to highlight any of Eagleton’s shortcomings. When Eagleton sweat, shook, or displayed any sign of nervousness in TV interviews, journalists quickly highlighted these tendencies. In a “Face the Nation” interview, interviewer George Herman voiced his observations, “I

¹⁷ Daniel M. Shea and Brian M. Harward, *Presidential Campaigns: Documents Decoded* (Santa Barbara, CA: ABC-CLIO, LLC, 2013), 100.

¹⁸ Giglio, *Call Me Tom*, 120.

¹⁹ Giglio, *Call Me Tom*, 120.

notice that right now you're perspiring and your hands are shaking."²⁰ By the waning days of July, major news outlets such as the *New York Times* and *Washington Post* were calling for Eagleton's resignation, claiming that he was too much of a liability on the Democratic ticket, largely on account of his ECT treatment for depression.²¹ Finally, on the final day of the month, McGovern noted, "I am fully satisfied that his excellent... health was not a factor. But the public debate over Senator Eagleton's past medical history continues to divert attention from the great national issues that need to be discussed."²² Thus, looking to maintain party unity and redirect focus back to the more pressing national issues at hand, McGovern and Eagleton announced the decision to move the campaign forward without Eagleton. As the Democratic Party would only win one state (Massachusetts) that November, it is easy to retrospectively view the Eagleton affair as one of many missteps in a poorly managed campaign. However, McGovern could not have known at the time that, just as much as he damaged his own campaign, American's (and the press's) preexisting wariness of ECT played as much of a pivotal role in its downfall. With mental health and politics in mind, perhaps not so coincidentally, the APA published the "Goldwater Rule" just one year later, affirming the unethical nature of diagnosing a person without a professional examination for a mental health condition. Certainly, this reflected a call to be more careful and sympathetic when diagnosing and even discussing mental health issues to the American public.

²⁰ Giglio, *Call Me Tom*, 130.

²¹ Frank Lynn, "Delegates in 3 States Say Eagleton Should Quit Race," *The New York Times*, July 30, 1972, <https://www.nytimes.com/1972/07/30/archives/delegates-in-3-states-say-eagleton-should-quit-race-2to1-sentiment.html>.

²² Giglio, *Call Me Tom*, 129.

Historiography

To best contextualize research on the Eagleton affair, three areas of historiographical study are important to understand: the 1972 Eagleton affair itself, the broader connections between politics and mental health since the 1950s, and the state of the press in the early 1970s. While there have been several books and articles written about Eagleton and the Eagleton affair, these works have largely been driven by narrative that covers Eagleton himself, rather than wider sociocultural conversations or arguments surrounding mental health in the early 1970s. While these authors touch upon this essential topic to their work, in writing biographies they understandably argue less about media and mental health at the time. Shorter works detailing the Eagleton affair are helpful in their specificity regarding the topic, like Janell Johnson's discussion of rhetoric and the affair, but do not serve to contextualize the event in a broader conversation about mental health or media at the time. More than anything, my work seeks to better contextualize America's relationship with the press and understanding of mental illness in the early 1970s to better understand why exactly Tom Eagleton's depression cost him a shot at the vice presidency.

Historiography on the Eagleton Affair

Few historians have devoted entire studies to Tom Eagleton or the Eagleton affair itself. James N. Giglio has established himself as Eagleton's most prominent biographer, and looks specifically into the Eagleton affair in his article, "The Eagleton Affair: Thomas Eagleton, George McGovern, and the 1972 Vice Presidential Nomination."²³ Here, Giglio details the events of July 1972 as a Greek tragedy and argues that the

²³ Giglio, "The Eagleton Affair."

Eagleton affair “called into question the slapdash ways in which political parties selected their vice presidential candidates, the criteria employed in the selection process, and, above all, the role that past medical conditions can play in excluding one from consideration for an office potentially one heartbeat away from the presidency.”²⁴ Casting the affair as a major American turning point, Giglio’s work is thorough, as he was able to fully access the collection of both Eagleton and McGovern papers. More so, Giglio’s work is particularly useful in that he utilizes the transcripts of 85 interviews with those who were closest to Eagleton, including family, colleagues, and even George McGovern himself. Building off this chapter of Eagleton’s life, Giglio broadens his scope considerably as he details Eagleton’s entire life in *Call Me Tom: The Life of Thomas F. Eagleton* (2011).²⁵ This work is a chronological and thorough narrative of Eagleton’s life, overall portraying the Senator sympathetically. Both in his article and biography, the sympathetic tone in Giglio’s writing is to be expected, as many of the sources he utilizes are from those speaking about Eagleton posthumously, and thus rather uncritically.

The most thorough look into the Eagleton affair itself is provided by Joshua M. Glasser’s *The Eighteen-Day Running Mate* (2012).²⁶ Here, Glasser meticulously details the events of July 1972 while carefully framing the backstories of both McGovern and Eagleton in a less argument-driven fashion. Glasser, like Giglio, uses a wide range of sources to unravel the Eagleton affair, including portions from Eagleton’s unfinished memoir. Glasser’s approach of combining personal narratives and recollections along with pertinent documents and transcripts from 1972 allows for a thorough look into the

²⁴ Giglio, “The Eagleton Affair,” 648.

²⁵ Giglio, *Call Me Tom*.

²⁶ Glasser, *The Eighteen Day Running Mate*.

affair; he is less inclined to frame the Eagleton affair in the larger context of the early 1970s. Though Glasser does, for example, include interviews from doctors at Barnes Hospital in St. Louis (where Eagleton was treated for his depression), his angle on the topic is far more political in nature, as he harps on the McGovern campaign's shortcomings as much as he does Eagleton himself.

Janell Johnson's article, "The Skeleton on the Couch" article is the only other recent historical analysis of the Eagleton affair.²⁷ Her nuanced approach to the Eagleton affair is thought-provoking and well-researched, offering an analysis of the intersection between rhetoric, mental health stigmatization, and the Eagleton affair. Johnson rightly points out the permanence of mental health diagnoses and makes important distinctions in the language we use when discussing physical and psychological medical conditions. She writes, "One 'has,' or 'suffers from' heart disease. One is perceived 'to be' mentally ill even after successful treatment."²⁸ Her work is important and helpful in that it reminds those exploring the Eagleton affair just how important language is in dissecting perceptions on the topic of mental illness. In other words, to truly scrutinize the rhetoric of the time is also to better understand the deep-rooted beliefs about mental illness in the early 1970s. My work will pull on the threads left by Johnson, expanding the conversation about mental health rhetoric to a broader conversation about how Americans stigmatized mental health and especially ECT in the surrounding decades, and the role the media played in that.

²⁷ Johnson, "The Skeleton on the Couch," 469.

²⁸ Johnson, "The Skeleton on the Couch," 468.

Historiography on Mental Health Issues in Other Politicians

Tom Eagleton was hardly the first politician to struggle with his mental health while in office, though most other American politicians were able to hide their conditions from the press more easily. Nassir Ghaemi's *A First Rate Madness* (2011), a *New York Times* bestseller, discussed the intersection between mental illness and effective leadership, arguing that madness can propel some of the best leaders our world has known.²⁹ From Lincoln's unbearable depression to Kennedy's use and abuse of a concoction of psychiatric drugs for managing a variety of psychological and physical issues, Ghaemi seeks to approach the controversial field of psychohistory in a way that is "scientifically and medically sound."³⁰ As his work is written for a more general audience, Ghaemi jumps quickly from leader to leader without centering his work in as much evidence as one might see in a purely academic piece. Rather, Ghaemi makes reasonable though speculative conjectures about the diagnoses of various leaders by researching their family medical history and the revealed treatments that some of these men received. The Eagleton affair does not fit neatly into Ghaemi's work, as Eagleton's struggles with mental health were far from concealed by 1972, and thus did not need the level of speculation that Ghaemi brings to other characters in his work. However, this work is valuable in providing a glimpse into the frequency with which political figures live in a state of "madness," how their contemporaries understood and reacted to this madness, and how historians can carefully and ethically approach conversations about these figures.

²⁹ Nassir Ghaemi, *A First-Rate Madness: Uncovering the Links Between Leadership and Mental Illness* (New York, NY: Penguin Books, 2011).

³⁰ Ghaemi, *A First-Rate Madness*, 6.

Perhaps a more useful model linking leadership and mental illness is D. Jablow Hersham's *Power Beyond Reason: The Mental Collapse of Lyndon Johnson*.³¹ Careful not to frame the work as either a biography or medical account of Johnson's life, Hersham contextualizes Johnson's life and presidency given ample evidence of events and behaviors that might be best explained through the lens of bipolar disorder. Unlike Giglio, who relies on sources that discuss Tom Eagleton in memory, Hersham's work is useful in that he includes ample evidence from those discussing Johnson's mental states as they were flaring and fluctuating throughout his political career. These accounts represent the stigmatization yet simultaneous tolerance for mental health issues in politicians just several years before the Eagleton affair. Though Johnson's supposed bipolar disorder was not revealed to the American public, accounts and reflections from advisors and fellow politicians give insight into how tolerable it was to combine a mental health condition with the most important job in America. Clearly, there was something different about Eagleton. This work is helpful for my research in that it provides another example of how to ethically approach mental health history, it closely examines a period contemporary to the Eagleton affair, and it shows how different sets of sources and perspectives can add depth to our understanding of how mental health struggles unfold while holding a position of power.

³¹ D. Jablow Hersham, *Power Beyond Reason: The Mental Collapse of Lyndon Johnson* (Fort Lee, NJ: Barricade Books, 2002).

Historiography on the Press and Investigative Journalism in the Early 1970s

Both on TV and in newspapers, the press undoubtedly played a large role in the 1972 Election. Therefore, it is important to frame any work surrounding the Eagleton affair in solid understanding of the state of the press at the time. Any discussion of political scandal in the early 1970s inevitably links to Nixon's Watergate scandal, and therefore scholars who discuss the state of investigative journalism in the early 70s fixate on this episode. However, the Eagleton affair only partly follows the pattern of sensationalism and dirty reporting that one sees in Watergate. In particular, Jack Anderson's lie about Eagleton's drunk driving along with reporters' fearmongering about ECT reflect sensational reporting. Joe Spear is one such historian who argues in *Presidents and the Press: The Nixon Legacy* that the American government regularly misleads and manipulates the press in the news that it shares with the American people.³² His opening lines are stark: "Future historians of the presidential-press relationship will surely regard the decade of the 1970s as epochal. During this period the chief executives virtually mastered the media."³³ Beyond manipulation of the press, Spear explores how politicians of the time carefully crafted a self-image so as to avoid public scrutiny. Perhaps this is why when it came to depression itself, reporters showed restraint. In this vein, Spear's work is important to the research at hand as McGovern and Eagleton, though never Presidents themselves, would have to tread extremely carefully in their relationship with the press at this time. Writing in 1984, though, Spear's work certainly lacks the hindsight that would be necessary to understand a broader arc of the press played such a pivotal role in American politics just years earlier.

³² Joseph C. Spear, *Presidents and the Press: The Nixon Legacy* (Cambridge, MA: The MIT Press, 1984).

³³ Spear, *Presidents and the Press*, 1.

Roger Streitmatter's *Mightier than the Sword* is another useful exploration of the history of the American press.³⁴ Streitmatter's work spans centuries of American history, but is important for my research in its exploration of the rise in and impact of television broadcasts and dogged investigative reporting in the mid twentieth century. As the turbulence of late 1960s gave rise to American skepticism about political motives, Streitmatter argues that political scandal of the early 70s represented "perhaps more than any other time in history, the value of the Fourth Estate joining the official branches of government to serve the American people."³⁵ Using recollections from journalists themselves along with newspaper accounts from 1972-73, Streitmatter dives deeply into the processes by which Carl Bernstein and Bob Woodward investigated Nixon. Though I am careful not to frame my research too closely along the lines of the Watergate scandal, this episode is still a useful tool to understand the motives and methods that journalists used to uncover political scandal at the time. By examining their processes, I have gleaned a better understanding of what journalists' top priorities were at the time. Was it more important to investigate and uncover the truth, or to sell stories through sensational headlines? Or, were both of these motives equally important for journalists at the time? This helped me better understand what might have motivated journalists covering the other political scandal of the early 70s: the Eagleton affair.

The questions noted directly above are central to Matthew Pressman's work in his discussion of the media in the 1960s and 70s in *Media Nation*.³⁶ Pressman's chapter on

³⁴ Rodger Streitmatter, *Mightier than the Sword: How the News Media Have Shaped American History* (Boulder, CO: Westview Press, 1997).

³⁵ Streitmatter, *Mightier than the Sword*, 204-205.

³⁶ Matthew Pressman, "Objectivity and Its Discontents: The Struggle for the Soul of American Journalism in the 1960s and 1970s," in *Media Nation: The Political History of News in Modern America*, ed. Bruce J. Schulman and Julian E. Zelizer (Philadelphia, PA: University of Pennsylvania Press, 2017), 96-113.

this era is an immensely useful (and timely) secondary source in discussing how the 60s and 70s were a turning point in media coverage as the left argued that they were largely being stifled from free reporting, while Conservative critics of the press complained that reporters were too opinionated and subjective in their reporting. Interestingly, the vice-presidential candidate on the Republican side, Spiro Agnew, criticized the press in 1969, saying, “A raised eyebrow, an inflection of the voice, a caustic remark dropped in the middle of a broadcast can raise doubts in a million minds about the veracity of a public official or the wisdom of a government policy.”³⁷ Little did Agnew know that this scrutiny and subjectivity from the press would help his party’s reelection campaign just three years later. Yet, his words are important in reflecting that, as Pressman argues, “The just-the-facts approach to reporting that prevailed in the 1940s and ‘50s crumbled, and journalists began to focus instead on the more exciting work of explanation, interpretation, and investigation.”³⁸ Thus, Pressman provides a much clearer and more detailed context in which the Eagleton affair took shape: one in which the media perhaps exploited Eagleton’s electroshock treatment as a sensational story worthy of an invasion of privacy, criticism, and judgment that would eventually cost Eagleton his place on the ticket.

Taken together, these secondary sources provide a solid foundation for my work ahead, though I will rely more heavily on the primary sources of the time. Overall, given the growing understanding and number of mental health diagnoses in America, and also given the swelling of even more intrusive journalism and access to information, now seems like a particularly important moment to reconsider the events of July 1972.

³⁷ Pressman, “Objectivity and Its Discontents,” 106.

³⁸ Pressman, “Objectivity and Its Discontents,” 96.

Research Methods

Building upon an existing but relatively limited body of scholarship on the 1972 Eagleton affair, my research utilizes primary sources to center the Eagleton affair as a pivotal event in America's recent history with mental health and politics. Luckily, the Eagleton affair seems to be revisited every four years when a Presidential candidate is in the process of choosing a running-mate, so research and sources on this topic are fresh and continue to be revisited and reconsidered. My work seeks to connect many of the overlapping discussions in research on mental health, politics, and the media coverage of these two topics in the early 1970s, drawing new conclusions as to why exactly Eagleton's history of and treatment for depression were so shocking to American voters and damning to McGovern's campaign.

In many senses, I am using a biographical approach to explore this topic and address the social and cultural changes to the American landscape in the early 1970s. A sociocultural political exploration into the Eagleton affair is similar to the methods recommended by Meg Jacobs and Julian Zelizer, who consider the historiography of political history.³⁹ As they explain, in the more liberal and turbulent 1960s, historians moved away from president-centered narratives to explain the age in which they studied, instead looking more into the sociocultural forces of the time. Today, as Jacobs and Zeizler argue, there is "exciting potential for applying social and cultural approaches to politics and conversely analyzing the institutional setting for political battles."⁴⁰ In this case, I will be exploring Tom Eagleton's situation in July 1972 to draw much larger

³⁹ Meg Jacobs and Julian E. Zelizer, "The Democrat Experiment: New Directions in American Political History" in *The Democrat Experiment: New Directions in American Political History*, ed. Meg Jacobs, William J. Novak, and Julian E. Zelizer (Princeton, NJ: Princeton University Press, 2009), 1-15.

⁴⁰ Jacobs and Zelizer, "The Democrat Experiment," 15.

conclusions about 1) the state of mental health stigma – and ECT in particular – in the early 1970s, 2) the ways in which the press covered mental health in national news, and 3) how the Eagleton affair marked a change from prior elections where issues of mental health were not as serious a concern to American voters. With this in mind, incorporating “nonelite groups into...narratives about political history...[enables historians] to consider categories such as gender and race as well as factors such as symbols, ideology, and rhetoric.”⁴¹ In exploring a population of American citizens who are largely forgotten about when discussing politics, I am utilizing a sociocultural approach that will answer my research question by also delving into ideology and rhetoric. Furthermore, in looking at trends regarding mental health in politics over the span of decades, I am more closely following a macro-history approach. Within this macro-history approach, I explore continuity and/or change over a larger span of time, comparing how presidential candidates have chosen running mates and, separately, how Americans have understood and stigmatized mental illness throughout the second half of the twentieth century.

To test my hypothesis, I am looked at a wide range of primary sources found through databases and published books. To access quotes from Tom Eagleton himself, I have utilized the research conducted by James Giglio and Joshua Glasser. However, since much of this paper is centered upon others’ opinions of Eagleton, and not Eagleton’s words themselves, I do not quote extensively from the central figure in this thesis. In addition to less reliable interviews and closed-room recalled conversations with Eagleton and McGovern, I will also be looking into the speeches from political candidates in order to draw conclusions about mental health in the early 1970s based on how these politicians

⁴¹ Jacobs and Zelizer, “The Democrat Experiment,” 8.

explained Eagleton's condition to the American public. While many of these speeches can actually be accessed on YouTube, finding full speeches in video form, rather than just excerpts or written transcripts, on more credible databases has proved challenging. However, when it came to depression itself, reporters showed restraint. Furthermore, Nixon and other major political figures treated Eagleton's depression lightly so as not to seem insensitive, and therefore commented sparsely on it.

For news sources from 1972, both written and print, I am mainly using two databases: *The Vanderbilt Television News Archive*⁴², and *Newsbank: Selected America's Historical Newspapers*.⁴³ Through these databases, I was able to find dozens of newspaper articles and accounts detailing the fears of electroshock therapy in midcentury America. Vanderbilt's collection is key to finding television broadcasts from the Eagleton affair, where I was able to not only explore *what* the media said about Eagleton, but *how* they portrayed the candidate. In this case, visual media says a lot as words are overlaid with videos that either display Eagleton as a jovial, sympathetic character or in a stigmatized fashion (for example, highlighting videos of Eagleton sweating or uneasy), undeserving of a spot on McGovern's ticket. Looking into newspapers adds an interesting historical perspective, as I more easily tailored my search regionally. For example, the ways in which the *New York Times* described aspects of the affair differed from how the *Kansas City Star* supported Eagleton, their local hero, throughout the ordeal. With this in mind, I used a wide range of national and local sources to gain a better understanding of what information Americans were consuming in the decades before the affair, in July

⁴² Vanderbilt University, "Vanderbilt Television News Archive," <https://tvnews.vanderbilt.edu/>.

⁴³ Newsbank Inc., "Selected America's Historical Newspapers," <https://infoweb.newsbank.com/apps/news/easy-search?p=EANX-NB>.

1972, and in the 1980s with questions surrounding Michael Dukakis's mental fitness. Building off of Janell Johnson's research regarding rhetoric and the Eagleton affair, a close scrutiny of the specific language and imagery used in news sources is important to highlight broader themes about mental health stigma at the time, but there is also much to be gleaned from what these news sources leave out of their reporting.

Research Limitations

As databases containing Eagleton-related documents (such as transcripts and interviews with Eagleton himself and those closest to him) are accessible online, and as my research builds upon the prior work of historical scholars, the limitations to this project were luckily not extensive. One known limitation, though, when discussing mental health, is that historical records tend to be sparser on this subject so as to protect the privacy and well-being of the individual with a mental illness. Moreover, by 1972, discussions surrounding mental health and ECT treatment were not nearly as common as they are today, leaving a gap in both primary source material and historical research on the topic. Regarding physical limitations to my research, Eagleton's papers are located at the State Historical Society of Missouri and have not been digitized, so my physical distance from these papers proved a challenge as there was not access elsewhere to particular documents that could have been useful to my research.

The sources that I do use require close scrutiny and contextualization, as would be the case with any historical study. For example, one limitation surrounds the validity of the interviews that I will use. Most of these interviews were conducted by historian James Giglio, and though he was thorough in his research and questioning, this does not change the fact that his subjects recalled much of the personal narrative from the Eagleton affair

nearly 40 years later, and several years after Eagleton's death. Thus, these posthumous interviews might have bias in that interviewees might misremember events from 1972, and might be rather sympathetic toward Eagleton now given the separation from the event and change in the ways in which Americans discuss mental health more freely and positively today. Furthermore, when looking at news articles and broadcasts from 1972, it will also be crucial to understand the perspective, intended audience, and motives of the press. These points shed particular light onto the validity of the press's statements and the extent to which their reporting represents the truth of the event. Lastly, while not necessarily a limitation, it is important for me to discuss Eagleton's experience with mental health in a delicate and affirming way, as he still has living relatives who might experience emotion when discussing Eagleton's struggles.

Chapter II.

Electroconvulsive Shock Therapy (ECT)

Perhaps no branch of medicine faces more stigma and scrutiny than psychiatry. Combatting stigma in both patient diagnoses *and* treatment, psychiatrists and mental health advocates humanize patients with mental illnesses while defending the very practices aimed at treating these illnesses. Of course, as with any branch of medicine, methods and techniques to treat illness *should* be scrutinized to ensure safety and efficiency. Electroconvulsive therapy, however, is one treatment for severe mental illnesses that has not been able to fend off its history of stigma, despite continued efforts from psychiatrists to prove its effectiveness. Electroconvulsive therapy, at times referred to as “shock therapy,” is a treatment for severe cases of depression, bipolar disorder, and schizophrenia in which patients are given brief electrical stimulation to the brain while under anesthesia. Though it evolved from more brutal practices of unanesthetized shocks that produced patient convulsions, modern advocates for electroconvulsive therapy see the treatment’s obvious benefits. Certainly, one can feel the sense of frustration from doctors who work to undo decades of seemingly unshakable stigma surrounding the treatment. Medical historian Edward Shorter and psychiatrist David Healy are two of the most well-researched and passionate advocates for ECT. As they write, “So clear are the benefits of ECT for patients who might otherwise commit suicide, or languish for years in the blackness of depression, that there should be little controversy over whether it is safe or effective.”⁴⁴ What has framed ECT’s public reception, where Americans still

⁴⁴ Edward Shorter and David Healy, *Shock Therapy: A History of Electroconvulsive Treatment in Mental Illness* (New Brunswick, NJ: Rutgers University Press, 2007), 3.

bristle at the thought of electroconvulsive therapy? What impact did the Eagleton affair have in changing or crystallizing the public's understanding of ECT? As Tom Eagleton stepped into an already fierce debate about ECT's effectiveness, it is important to fully understand the nature of that debate.

Senator Tom Eagleton received electroconvulsive therapy on two occasions: at the end of his campaign for Missouri Attorney General in 1960 at St. Louis' Barnes Hospital, and again in 1966 (which was not an election year for Eagleton) at the Mayo Clinic in Minnesota. Cheaper and faster than counseling, ECT also "had the advantage of sheltering a depressive at his or her most vulnerable state," which would be especially important for a politician.⁴⁵ Importantly, ECT was not the only method employed by Eagleton and his doctors to treat his bouts of depression; Eagleton also took Thorazine, commonly used to treat mania and psychosis. Yet, reports that exposed Eagleton's struggles with mental illness barely discuss his use of Thorazine, instead emphasizing ECT treatment. Reports on the Eagleton affair thus clearly highlight American attitudes and ultimate rejection of ECT as a viable form of treatment in the early 1970s. It is this ridicule surrounding ECT that eventually sunk Eagleton and the McGovern campaign; how and why that ridicule became commonplace by 1972 is the subject of this chapter.

A Brief History of ECT

The first iterations of ECT were first developed in the early 1930s by Manfred Sakel. Born in 1900 in Austria-Hungary, Sakel injected patients displaying signs of major depression, schizophrenia, or mania with enough insulin to send the brain into

⁴⁵ Glasser, *The Eighteen-Day Running Mate*, 155.

hypoglycemic shock.⁴⁶ Though he was a Jew living in Austria in the 1930s, Sakel continued to refine his methods throughout his lifetime, earning both high praise and intense criticism from colleagues. He eventually moved to the United States in 1936 where he treated patients at Harlem Valley State Hospital in New York. As German psychiatrist Lothar Kalinowsky noted of Sakel's accomplishments, "We can state today that whatever ways psychiatric therapy may take in the future it was the insulin treatment that made psychiatrists therapeutic-minded."⁴⁷ While Sakel's insulin method gained attention of psychiatrists worldwide, Ladislaus Meduna, a Hungarian neuropathologist was also developing a treatment that would be integral to the ongoing development of electroconvulsive therapy in the twentieth century. Rivaling Sakel, Meduna injected camphor into catatonic patients to induce seizures, finding that patients could be smoothly reintroduced into society after multiple treatments.⁴⁸ Meduna's work demonstrated the importance for mid-century scientists to speed up the process of ECT and limit the number of treatments a patient would undergo to feel better.

Ugo Cerletti, an Italian psychiatrist and contemporary of Sakel and Meduna, responded by introducing electricity to electroconvulsive shock treatment. Electricity would be an even quicker means of inducing shock, Cerletti proved, making treatment more efficient and effective. Determining the appropriate voltages and duration of electricity was Cerletti's greatest challenge, as he and his team tested varying electrical charges on animals. On humans, Cerletti would lay a patient on a surgical table, strapped down and biting on a protective mouthguard, and place electrodes on the patient's

⁴⁶ Shorter and Healy, *Shock Therapy*, 13-15.

⁴⁷ Shorter and Healy, *Shock Therapy*, 21.

⁴⁸ Shorter and Healy, *Shock Therapy*, 30.

temples. A seizure would ensue as the electrical current shocked the patient, leading the patient into intense convulsions that would sometimes break bones. Though he could not determine why the treatment worked, his patients showed marked improvement after multiple treatments. Reporters enthusiastically publicized the success of some of Cerletti's first uses of ECT on humans. However, the images of seizure and reports on broken bones counterbalanced what Cerletti saw as indisputable evidence that ECT treatments worked. Thus, in the 1940s and 50s, the image of ECT as a barbaric and punitive treatment was popularized. As Shorter and Healey write, "Public images of electrocutions and capital punishment using an electric chair served to raise concerns, and the whole idea of applying electricity in convulsive doses seemed culturally ill-starred."⁴⁹ Yet, by the 1940s, with war raging in Europe, American psychiatrists took the lead in developing and refining ECT treatment and, despite skepticism from the public, shock therapy became a viable treatment used globally.

In the 1950s, proponents of ECT continued to tout success stories and statistics to further legitimize and defend the treatment. As Dr. William Karliner argued in 1951, "The term 'shock' is misleading and intimidating. Its meaning is different from that used in surgery and internal medicine. Its use in psychiatry stems from its introduction in insulin, therapy. It definitely is a misnomer."⁵⁰ Though skeptics were certainly present in the medical world, the wider world of media had not yet crafted a standard negative image of the treatment. Plus, for a non-scientific American audience, new and exciting ideas about psychiatry took shape in the 1950s, such as cognitive behavioral therapy and pharmaceuticals, leading Americans to feel optimistic that treatments and cures for

⁴⁹ Shorter and Healy, *Shock Therapy*, 35.

⁵⁰ Shorter and Healy, *Shock Therapy*, 6.

serious mental illnesses were indeed possible. As one patient of ECT noted, “I believed in the movies. I believed in Freud and all the marvelous things that psychiatry was supposed to do. I felt tired and discouraged and I wanted to feel more alert and alive.”⁵¹ By this time, electroconvulsive therapy had been refined enough so as to eliminate the terrifying imagery of full-body seizures and broken bones. However, eliminating these side-effects from practice did not necessarily mean eliminating them from imagination.

Naturally, as ECT became more popular in the 1950s, more scientific journals published articles on the treatment addressing both scientific study and debate. As Columbia psychiatrist Lothar B. Kolinowsky wrote in 1949, “Theoretical objections against electric shock treatment are so frequently and so violently voiced that it seems justified to make some general remarks before a detailed discussion of various aspects of the treatment is given.”⁵² Furthermore, from radiologists to anesthesiologists, practitioners involved in this new treatment needed to research further in their fields to effectively implement and address the ramifications of ECT. This was true for American nurses, too, who needed to address the comfort of their patients before and after treatment. For example, this description from Elizabeth Maloney in the *American Journal of Nursing* in 1958 depicts the patient’s perceptions of and anxieties about ECT before treatment. As Maloney writes a guide to other nurses,

The convulsion, which the patient knows will occur, is usually perceived as the ultimate in loss of control of the somatic organization and is likely to be experienced as either punishment or humiliation by some patients. Many are aware that they are present to the observer a far from aesthetic

⁵¹ Elizabeth Wertz, *The Washington Post, Times Herald*, “The Fury of Shock Treatment: A Patient’s View,” December 10, 1972, <http://www.psychrights.org/Research/Digest/Electroshock/PBregginCites/artclTheFuryShockTrtmntPtntvw.pdf>.

⁵² Lothar B Kalinowsky, “Present Status of Electric Shock Treatment,” *Bulletin of the New York Academy of Medicine* 25, no. 9 (1949): 541-53, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1929877/>.

picture, indeed a frightening or disturbing one, and this adds to their emotional discomfort.⁵³

Though Maloney spends most of the article casting ECT as effective and safe, her discussion of patient anxieties is important in that it provides a better understanding of how ECT patients generally would have felt about their own treatments right around the same time that Eagleton underwent treatment. When Tom Eagleton underwent ECT in the 1960s, muscle relaxants and anesthesia would have been used, and memory loss would have been short-lived. Furthermore, the loss of control that Maloney mentions would be one of the greatest critiques of ECT. Yet despite the consistent improvements to the ECT method, the attack on psychiatry, and ECT in particular, ramped up considerably by the late 60s and early 1970s.

Growing Stigmatization in the 1970s

A number of factors account for American's rejection of electroconvulsive therapy as a viable treatment in the early 1970s: film and literature, religion, a growing hippie culture, and the rise of pharmaceutical drugs. Shorter and Healy, seeking to explain and discredit the attacks on ECT, thoroughly examine the factors that contributed to ECT's disfavor by the late 1960s.

When Ken Kesey published *One Flew Over the Cuckoos Nest* in 1962, he never could have imagined the subtle but important impact that his novel would have on a presidential election a decade later. As the book served as a critique of psychiatry, including electroconvulsive shock therapy (ECT), Kesey successfully influenced the

⁵³ Elizabeth M. Maloney, "The Fears and Feelings of the Patient on Electroconvulsive Therapy" *The American Journal of Nursing*, 58, no. 4 (April 1958): 560-562. <https://www.jstor.org/stable/3461437>.

minds of millions of Americans with a particular image of the treatment. As he described the novel's main character, Randle McMurphy after treatment, "They brought him back to the ward two weeks later, bald and the front of his face an oily purple bruise and two little button-sized plugs stitched one above each eye. You can see by his eyes how they burned him out over there; his eyes are all smoked up and gray and deserted inside like blown fuses."⁵⁴ As ECT was used as punitively, not therapeutically, in *One Flew Over the Cuckoo's Nest*, American imagination about the horrors of ECT stuck years later from the popular novel. By 1975, the movie adaptation of Kesey's work solidified the visual assumptions about ECT as a horror-treatment. As Laura Hirshbein and Sharmalie Sarvananda describe the lasting impact of the book and film, "In retrospect, ECT opponents still find the *Cuckoo's Nest* image compelling because it effectively captures the power dynamics they still see as problematic in patients' encounters with psychiatry."⁵⁵ For cynical Americans, ECT must have been another tool that doctors used to take control of patients, and perhaps even society more generally.

Cuckoo's was not the only artistic expression of ECT in the 1960s, as numerous other films and books negatively portrayed ECT. Shorter and Healy sum up the issue by stating, "The problem is that ECT lends itself beautifully to cinematic dramatization. There is the gurney...the searing electrical storm as the patient's body writhes from the electric shock, the hollowed features and lifeless eyes afterward. No movie has ever depicted ECT administered with a muscle relaxant or an anesthetic."⁵⁶ As Hollywood

⁵⁴ Ken Kesey, *One Flew over the Cuckoos Nest* (New York, NY: Penguin Books, 1962), 14.

⁵⁵ Laura Hirshbein and Sharmalie Sarvananda, "History, Power, and Electricity: American Popular Magazine Accounts of Electroconvulsive Therapy, 1940-2005," *Journal of the History of the Behavioral Sciences*, 44, no. 1 (Winter 2008), 2. 10.1002/jhbs.20283.

⁵⁶ Shorter and Healy, *Shock Therapy*, 150.

became increasingly larger and more influential by the 1960s, the importance of these depictions cannot be overstated. Giants of mid-century literature also unknowingly sunk ECT into a deeper hole of stigma. As Joshua Glasser notes, “Millen Brand’s 1968 best-seller *Savage Sleep*, Doris Lessing’s 1971 *Briefing for a Descent into Hell*, and the 1971 American edition of Sylvia Plath’s *The Bell Jar* reinforced Kesey’s portrayal of electroshock – as a harrowing, scarring procedure.”⁵⁷ It did not help that popular writers Ernest Hemingway and Sylvia Plath, who each received ECT, committed suicide in 1961 and 1963, respectively. Though there could be no outright assertion that their experiences with ECT caused their deaths, Americans would, in the least, see ECT treatments are clearly ineffective and perhaps even damaging in both cases.

On a practical level, the rise of antidepressant and antipsychotic pharmaceuticals replaced ECT as the most viable option for treating mental illness, especially for women. As Jonathan Metzl notes, “In the 1960s and 1970s, psychopharmacological medication seemed to burst onto the American scene. Popularized and problematized in the notion that these drugs were ‘Mothers Little Helpers,’ the pills became known as the treatments of choice to the pressures of motherhood, singlehood and other historically specific forms of essentialized womanhood.”⁵⁸ The ease, convenience, and privacy of taking pills thus led to a boom for the pharmaceutical industry. Plus, pills made it so that the doctor no longer held full control and power beyond prescribing medication; the treatment and administering of the pill took place in the absence of the doctor. As Shorter and Healy write, “...Physicians were simultaneously losing confidence in ECT, so the

⁵⁷ Glasser, *The Eighteen-Day Running Mate*, 154-155.

⁵⁸ Jonathan Metzl, “Mother’s Little Helper,” *The Crisis of Psychoanalysis and the Miltown Revolution*, *Gender & History*, 15, no. 2 (August 2003): 240, https://www.med.umich.edu/psych/FACULTY/metzl/07_Metzl.pdf.

[pharmaceutical] companies felt no further need to mention a procedure that was going onto the back burner. Or it may be that the dollar amounts involved in the sale of psychopharmaceuticals were by then so overwhelming that caution was the watchword: don't throw away millions of dollars in sales by reminding doctors that there is an alternative to pharmacotherapy.”⁵⁹ Instead, pharmaceutical companies could pair drugs with talk-therapy, building upon Freud’s midcentury popularity. Furthermore, with pills, doctors could explain scientifically why medications were effective in treating mental illness. Explaining how drugs could target and boost levels of serotonin and dopamine gave legitimacy to pharmaceutical treatments, whereas doctors still could not explain why exactly ECT was effective in treating mentally ill patients (and still cannot today). In part, this explains why Americans could tolerate Eagleton’s decision to use a powerful drug like Thorazine while remaining intolerant of his use of ECT: Thorazine was a popular and understandable choice where Eagleton could maintain power and control in the doctor-patient relationship. With ECT, Eagleton resorted to outdated, barbaric, and inexplicable treatment.

Of religious groups, Scientologists were the loudest opponents of ECT in the 1960s and 70s. With roughly four million members by the early 1970s, Scientology also posed a serious challenge to the practice of ECT. Scientology’s founder L. Ron Hubbard declared that psychiatry, and especially techniques like ECT and lobotomies were “a vehicle to undermine and destroy the West!”⁶⁰ Scientology’s attack on ECT became so successful that it led to the regulation and outright bans of ECT throughout America. As

⁵⁹ Shorter and Healy, *Shock Therapy*, 179.

⁶⁰ Steven A. Kent and Terra A. Manca, “A War Over Mental Health Professionalism: Scientology versus Psychiatry,” *Mental Health, Religion, and Culture* 17, no. 1 (2014): 1-23. 10.1080/13674676.2012.737552.

Edward Shorter notes the impact of Scientology's advocacy to ban ECT in *A History of Psychiatry*, "Utah in 1967 was first to pass such legislation, and by 1983, 26 states had passed some kind of statute, six others issued administrative regulations, and one state was operating under federal court orders."⁶¹ Even today, Scientologists through the Citizens Commission on Human Rights continue to rail against ECT. The CCHR's graphic documentary *Therapy or Torture: The Truth About Electroshock* seeks to expose "...a violent, crippling torture that currently masquerades as a treatment with more than one million people subjected to its vicious abuse every year."⁶² Convulsions shown and described in this film and other Scientologist propaganda look like exorcisms: unnatural and ungodly. One did not (and still does not) need to ascribe to the ideas of Scientology to buy into its rejection of aggressive forms of psychiatric treatment: the propaganda continues to scare patients away with dramatized depictions of ECT treatment.

If ECT did not garner support from the followers of Scientology and the Christian right, it certainly did not get help from liberal, non-religious Americans in the mid-century period. Hippie culture and a general anti-psychiatry movement of the 1960s also dealt a blow to electroconvulsive therapies. In an age where young people were rejecting authoritarianism and becoming more concerned of the growing concentrations of wealth and power in the hands of the few, they likewise grew skeptical of power dynamics in medical care. As Shorter and Healy put it plainly, "For the flower children of the 1960s, there would be no place for sending jolts of electricity through someone's brain."⁶³ Both

⁶¹ Edward Shorter, *A History of Psychiatry: From the Era of the Asylum to the Age of Prozac* (New York, NY: John Wiley & Sons, 1997), 282.

⁶² Director Randall Stith, *Scientology Network*, "Therapy or Torture: The Truth about Electroshock," 2019, <https://www.scientology.tv/series/cchr-documentaries/therapy-or-torture-the-truth-about-electroshock.html>.

⁶³ Shorter and Healy, *Shock Therapy*, 144.

an outright rejection of older generations of Americans and growing skepticism of inorganic and extreme medical practices, hippies of a younger generation who also led the anti-psychiatry movement would have taken to the polls in 1972 extremely skeptical of Egleton and his history of ECT treatment.

Discussions of ECT in the Media around 1972

By July 1972, medical professionals and major media outlets sought to equip Americans with more information regarding shock therapy. While many reports utilized quotes and evidence from medical professionals, other reports were highly polarized and sensational on the topic of ECT. On July 29, 1972, the American Psychiatric Association released a statement that defended ECT, stating, “Electroshock has been a highly effective treatment for moderate and severe depression since it was introduced in 1938. Not only is it a relatively safe treatment, but it has the great advantage of terminating an episode of depression very quickly – sometimes in a matter of days and virtually always within a month.”⁶⁴ Newspapers ran stories the next morning further explaining the treatment to less knowledgeable Americans, balancing their writing to explain the historical pros and cons of ECT treatment. As such, it is common to hear the arguments, or even hints, about broken bones and barbarism in the same articles that attempt to explain ECT scientifically. The same *New York Times* article that quoted the APA’s statement wrote, “a few doctors consider [ECT] a drastic and barbaric procedure.”⁶⁵ Then there is also the language from the *Hartford Courant*’s August 1, 1972 article on ECT,

⁶⁴ Boyce Rensberger, “Psychiatrists Explain Medical Facts in Depression Controversy,” *New York Times*, July 29, 1972, 11, <https://www.nytimes.com/1972/07/29/archives/psychiatrists-explain-medical-facts-in-depression-controversy.html>.

⁶⁵ Rensberger, “Psychiatrists Explain Medical Facts in Depression Controversy,” 11.

which illustrates commonly-held beliefs of the time. As the article notes, “ECT – not a torture routine but a controlled therapy during which the patient is put under a general anesthetic – is now reserved at the institute and other hospitals for special forms of depression.”⁶⁶ The rhetoric and use of the word “torture” here is important, as it indicates the tensions between American imagination and reality. While newspapers generally sought to explain and combat ECT stigma, these small comments reflect that most Americans still saw ECT as torture.

Of course, some of the loudest opponents of shock therapy were those who had previously undergone the treatment. Their stories were gripping and effective for media outlets, as the authors had credibility through first-hand experience and could put their experiences in plain, non-medical language for the ordinary American to digest. Take, for example, a December 1972 article from *The Washington Post and Times Herald*. Reflecting upon the controversy surrounding ECT that summer, the newspaper published a first-hand account from Elizabeth Wertz, a former ECT patient. She describes the experience as follows:

The shock machine, and a table with needles and tubes are wheeled up. First, there's the shot of insulin. Then, the shock to your head. You are terrified. You are clammy and cold with fear. When it is too much your feelings shut off, although your mind goes on recording events around you. The last thing that you remembered is the sharp noise, the peculiar sound of the electric shock machine... You have a convulsion, you moan in an unnatural, animal way, and after the seizure, you go into a coma. You know this, because it happens to others.⁶⁷

⁶⁶ David Rhinelander, *The Hartford Courant*, “Electroshock Once Favored: Drugs Now Preferred,” August 1, 1972, 10, www.proquest.com/docview/551258204/fulltextPDF/3EB801DD4A4844D9PQ/1?accountid=38087.

⁶⁷ Elizabeth Wertz, “The Fury of Shock Treatment – A Patient’s Views,” *The Washington Post, Times Herald*, December 10, 1972.

Wertz later notes, “You turn into a semi-comatose zombie who cannot think, cannot feel, and cannot remember anything.”⁶⁸ While this article was published several months after the Eagleton affair and a month after Nixon’s reelection, it highlights the tenor of media at the time. Clearly, the conversation and controversy surrounding Eagleton’s treatments did not subside with his removal from the Democratic ticket, but instead sparked further debate about the uses – and abuses – of ECT. Berton Roueche of the *New Yorker* also published a series of articles in 1974 that detailed the dangerous power dynamics and barbarism of ECT.⁶⁹ In one, he details treatments that Natalie Parker, a wealthy middle-aged woman, received in 1973. As he quotes Parker discussing the impacts of her ECT treatment, “I was terrified. I’ve never a crying person, but all my beloved knowledge, everything I had learned in my field during my 20 years were more, was gone...I had lost my experience, my knowing. But it was worse than that. I felt that I’d lost myself. I fell on the bed and cried and cried and cried.”⁷⁰ Detailing ECT treatment as outdated and barbaric, Wertz and Roueche painted a standard narrative of the early 1970s where an unsuspecting ECT patient was taken advantage of by cruel doctors who wield the power to not only hurt and punish patients, but to wipe their memories and ruin their lives. Could American voters possibly tolerate a vice-president who suffered this fate? Clearly by the early 1970s, the answer was no.

TIME Magazine published multiple articles in early August 1972 that further reveal American attitudes toward Eagleton’s ECT treatment. A *TIME* survey published on August 7, 1972 revealed that 50% of respondents, when asked “If you think Eagleton

⁶⁸ Wertz, “The Fury of Shock Treatment – A Patient’s Views.”

⁶⁹ Berton Roueche, “As Empty as Eve,” *The New Yorker*, September 9, 1974, 84.

⁷⁰ Berton Roueche, “As Empty as Eve,” *The New Yorker*, 96.

is unqualified, why?” answered “Because he has undergone psychiatric treatment.”⁷¹

Though one cannot separate the diagnosis from the treatment in this case, it is interesting that TIME emphasizes the “treatment” for his psychiatric condition, rather than the diagnosis itself. One can only wonder if voters would have felt more comfortable with someone diagnosed – but untreated – for mental illness. TIME reporters also asked patients of psychiatrist Leonard Cammer, who commonly utilized ECT in his treatments, to assess Eagleton’s fitness for national politics in August 1972, just after Eagleton was removed from the ticket. As their interviewees stated, “I’m glad he won’t be Vice President. The responsibility would be too much. He might fall apart.’ His wife agreed: ‘I would feel edgy about Eagleton as Vice President under the stress of a job like that.” Another patient, a woman considered well on her way to recovery, said: ‘If he became Vice President or President, the pressure he would be under might bring on a relapse.’”⁷² Thus, if former ECT patients themselves could not bring themselves to trust Eagleton, it would be even more difficult to find support in Americans less familiar with ECT.

Conclusion

Clearly, Senator Eagleton stepped into an existing debate amongst psychiatrists regarding ECT that would only be crystallized further in the wake of the 1972 election. As Dr. Fred Frankel wrote in 1975, “The relationship of [those opposed] to those who favor the psychotherapeutic approach in treatment captures the essence of a struggle for identity within the psychiatric profession. A consequence has been the righteous indignation of those who virtually never recommend it, offset by a vehement defense by

⁷¹ *TIME Magazine*, “A TIME Poll: How the Voters Feel About Eagleton,” August 7, 1972.

⁷² *TIME Magazine*, “Behavior: Evaluating Eagleton,” August 14, 1972.

many of those who do.”⁷³ Beyond debate, however, was also a call for further research. In fact, the Task Force to Study and Recommend Standards for the Administration of ECT in Massachusetts was born in the wake of the Eagleton affair. Ultimately, they concluded that enough research had been done to characterize ECT as a viable treatment for mentally ill patients.

Even with increased research, shaking off the stigma of depression was much easier than shaking off the stigma from electroconvulsive therapy after 1972. The former could be chalked up to exhaustion from working too hard and overstimulating the mind, an ailment reserved for the privileged. The latter carried with it images, assumptions, and connotations amplified in various forms of media, from film and literature to major newspaper and magazine reporting. As psychologist and former ECT patient Martha Manning noted in 1991, “Telling people I’ve had ECT is a real conversation killer. People seem to be more forthright these days about discussing depression. Things have loosened up, even talking about medication.... But ECT is in a different class.”⁷⁴ Even psychiatrists themselves could not wrap their heads around the treatment. Highlighting the further heightened stigma surrounding ECT, two researchers at the University of Michigan found in 1973 that ECT patients “further speculated about their own chances for success and survival when they left the hospital in the future. They imagine that they would be treated as second class citizens and subjected to the kind of prejudice that was directed at the vice-presidential nominee.”⁷⁵ Thus, the cyclical nature of the Eagleton affair is evident:

⁷³ Laura Hirshbein, “Electroconvulsive Therapy, Memory, and Self in America,” *Journal of the History of the Neurosciences*, 21 (March 19, 2012): 147-169, <https://doi.org/10.1080/0964704X.2011.577393>.

⁷⁴ Shorter and Healy, *Shock Treatment*, 146.

⁷⁵ Paul G Rossman and Derek Miller, “The Effects of Social Prejudice on Hospitalized Adolescents,” *American Journal of Psychiatry*, 130, no. 9 (September 1973): 1029-1031, <https://doi.org/10.1176/ajp.130.9.1029>.

as heightened stigma surrounding ECT caused the Eagleton affair, the Eagleton affair also further heightened ECT stigma. As Shorter and Healy note, “In Missouri in 1971, seventy patients received ECT at one of the state hospitals; in 1975 only 18 did so.”⁷⁶ ECT almost entirely went out of practice by the end of the decade, with just a few hospital clusters performing the treatment. It continues to survive today, but not without struggle. Doctors prescribing and utilizing the treatment often have to take a defensive posture with their patients, explaining the history of the treatment and undoing the common assumptions that lead to patient anxiety. Though it would take decades for ECT to once more become a viable option for severely mentally ill patients, it still carries with it today images of barbarism and abuse that are not easily shaken.

⁷⁶ Shorter and Healy, *Shock Treatment*, 145.

Chapter III.

Newspaper Reporting During the Height of the Eagleton Affair

This section explores how newspapers covered the Eagleton affair as it unfolded from mid-July to early August 1972. While there is great value in examining media reports on politics, mental illness, and ECT specifically in the decades surrounding the Eagleton affair, an exploration into news coverage as it unfolded offers historians the best way to understand American opinion about it. Reporting on Eagleton, during the month the affair lasted, was mostly straightforward, providing background on Eagleton, seeking to explain ECT, or predicting McGovern's next move in relation to his running mate. In addition, the reporting was for the most part sympathetic to Eagleton. I argue that the rhetoric used to describe Eagleton did not change significantly after the public revelation regarding his past treatment for mental illness, suggesting that Americans understood and even empathized with his depression. Americans were less willing, however, to accept the ECT treatment Eagleton received, due to the stigma surrounding ECT and the fact that Eagleton underwent it more than once. As American reporters clearly called out the carelessness of the attacks on Eagleton's character and expressed fear about the stigma surrounding mental health, they simultaneously explained shock treatment to an American audience that was still horrified at the thought that anyone would have to go to such lengths to treat a mental illness.

On July 13th, 1972, Eagleton stood before delegates in Miami Beach and accepted his party's nomination for Vice-President, promising to restore the office of the Vice

Presidency from “a platform of cheap rhetorical attacks that divide our nation.”⁷⁷ Initial newspaper reports on Eagleton after his acceptance speech highlighted his wit and easy-going nature. As Mary Russell of the *Washington Post* wrote, “The low-key, witty approach is typical of the 42-year-old Eagleton. With his Brooks Brothers suits and button-down shirts (he only recently began to wear striped and patterned shirts) Eagleton reminds some people of actor Jack Lemmon in some of his lighter roles.”⁷⁸ George Wilson of the *Washington Post* also described Eagleton as a “warm, casual, shirt-sleeved, laugh-at-himself senator” in an article discussing the senator’s anti-war advocacy.⁷⁹ A day later, discussing an Eagleton meeting with labor leaders, one journalist noted that he “showed confidence” in “flashing his credentials as a party regular.”⁸⁰

Surely though, anyone could parse out hints of Eagleton’s brash nature in his early speeches on the campaign trail. Eagleton was anything but easy-going on stage, speaking forcefully and angrily at times, frequently licking his presumably dry lips.

Ronald Willnow of the *Boston Globe* described Eagleton’s character for curious

Americans as such:

Eagleton, who has a rollicking, self-effacing sense of humor, is a man who bubbles over with nervous energy. Although he is a relaxed person off duty, he gets terribly tense while at work. In interviews with reporters, Eagleton would pace the floor, searching carefully for the right word, lighting one cigarette after another. His ash tray would generally be filled with butts, most of which had had only one or two puffs taken.⁸¹

⁷⁷ C-SPAN, “Senator Thomas Eagleton 1972 Acceptance Speech,” accessed July 12, 2022, <https://www.c-span.org/video/?74526-1/senator-thomas-eagleton-1972-acceptance-speech>.

⁷⁸ Mary Russell, “Eagleton Adds Witty, Low-Key Style to Slate,” *The Washington Post, Times Herald* July 14, 1972, ProQuest Historical Newspapers, A14.

⁷⁹ George C. Wilson, “Eagleton Among Select Few To Win War With Pentagon” *The Washington Post, Times Herald*, July 14, 1972, ProQuest Historical Newspapers, A16.

⁸⁰ Martin Nolan, “Sharpening up for Campaign '72: Eagleton to woo Meany, Daley,” *Boston Globe*, July 17, 1972, ProQuest Historical Newspapers, 1.

⁸¹ Ronald Willnow, “Politics was a household word for Eagleton,” *Boston Globe*, July 16, 1972, ProQuest Historical Newspapers, 1.

Reports of Eagleton's history of nervous exhaustion had not surfaced by the time these articles appeared, and thus journalists did not ascribe Eagleton's nervous energy to a mental health condition. Instead, Eagleton's characteristics in his work life and personal life could be separated entirely.

The turning point came for Eagleton and the Democratic Party a week later, when Eagleton's history of mental illness was revealed to the larger public. It is important to note that many in the press, particularly in Missouri, had previously heard rumors of Eagleton's mental illness and suspected issues with alcohol. However, with little to substantiate these claims, no reporters wrote on the issue before Clark Hoyt, a young journalist with Knight Newspapers who received an anonymous tip about Eagleton's prior treatment at a St. Louis area psychiatric hospital. Following up on the lead, Hoyt found enough evidence to question Frank Mankiewicz, McGovern's campaign director.⁸² Before Hoyt could publish a damning article about Eagleton, as *Time Magazine* reported, "Aides rushed [Eagleton] into a public admission at a press conference that robbed the Knight papers of an exclusive they had earned through Hoyt's hard digging."⁸³ At a time when, according to the historian Matthew Pressman, "news organizations...needed to reassess their fundamental values and practices," given the decade's uptick in sensational wartime and Civil Rights-era headlines, it is perhaps surprising that newspapers were not quicker or more eager to jump on the Eagleton story. It is also surprising that the mainstream press was not more damning or sensational when it came to Eagleton's

⁸² *Time Magazine*, "The Press: Knight v. Eagleton," August 7, 1972, <https://content.time.com/time/subscriber/article/0,33009,879161-1,00.html>.

⁸³ *Time Magazine*, "The Press: Knight v. Eagleton."

history with depression. One theory at the time was that a left-leaning press eased up on its accusations of Eagleton and the Democratic ticket. As Pressman notes, “Anti-press sentiment among conservatives had been building for several years prior to [Spiro] Agnew’s offensive, deriving partly from a sense that the press was giving less attention to their perspective and more attention to left-wing or radical viewpoints.”⁸⁴ More likely, however, is that newspapers simply did not have the time to gather information and act upon a brand new face in the American eye. Either way, the press held back in making outrageous claims about Eagleton’s mental health, instead focusing equally on McGovern’s decision-making and the future of the Democratic ticket.

Given American’s negative views on shock therapy and their suspicion that patients would be potentially taken over by nefarious doctors, Eagleton assured the public that he never lost his ability to make “rational decisions” while undergoing ECT.⁸⁵ Eagleton also urged, “I’m not too dissimilar from the fellow in the Alka-Seltzer ad who says, ‘I can’t believe I ate the whole thing.’ I do get kind of a nervous stomach situation.”⁸⁶ Some in the press seemed to follow Eagleton’s lead in normalizing his history with mental illness. For example, Clark Hoyt spends the first half of the article that first reported on Eagleton’s depression linking Eagleton’s personality and mental state to his father’s role in his upbringing. Delving into his childhood, Hoyt examined how Eagleton’s father influenced him to be driven, especially in the field of politics. As Hoyt writes of Eagleton’s boyhood in St. Louis, “When other boys were out climbing

⁸⁴ Matthew Pressman, “Objectivity and Its Discontents: The Struggle for the Soul of American Journalism in the 1960s and 1970s,” in *Media Nation: The Political History of News in Modern America*, ed. Bruce J. Schulman and Julian E. Zelizer (Philadelphia, PA: University of Pennsylvania Press, 2017), 102.

⁸⁵ Christopher Lydon, “EAGLETON TELLS OF SHOCK THERAPY ON TWO OCCASIONS: Says He Was in ...” *The New York Times*, July 26, 1972, ProQuest Historical Newspapers, 1.

⁸⁶ Lydon, “EAGLETON TELLS OF SHOCK THERAPY ON TWO OCCASIONS,” 1.

trees and throwing footballs, Tom was downtown watching his father, then president of the St. Louis School Board, preside over stormy public meetings.”⁸⁷ In that same article, Clark quotes a close acquaintance of Eagleton’s from St. Louis. As the acquaintance describes Eagleton, “He’s a thoroughbred type. He’s a very high-strung guy, wound up tight as you wind a spring. I used to be struck by his staccato speech and flitting head and hand movements...but something’s happened. He’s more relaxed now. He’s just plain grown up.”⁸⁸ Casting Eagleton’s depression as something that could be explained by his childhood and also something that no longer greatly impacted him, this article subtly and implicitly stands with Eagleton, doing little to cast doubt on Eagleton’s political abilities. In fact, Hoyt’s strongest hint at Eagleton’s nervousness came through in the following description: “A chain-smoker who frequently takes no more than one or two puffs before stubbing out his cigarette, Eagleton perspires heavily under pressure and his hands and head sometimes tremble.”⁸⁹ Again, Hoyt’s (and other reporters’) choice to not overly sensationalize this story, or to detail the horrors of shock therapy is both surprising and, in many ways, admirable.

One of the most common responses to Eagleton’s admission was sympathy. The New York Times, for example, highlighted the stream of sympathetic letters written after Eagleton’s removal from the ticket. As James Reston writes, “Judging by the torrent of mail that has come into this office in the last few days, there are many of voters in both parties who have been under psychiatric treatment themselves or observed it in their

⁸⁷ Clark Hoyt, “Eagleton--young man in a big hurry: PROFILE IN THE NEWS,” *Boston Globe*, July 27, 1972, ProQuest Historical Newspapers, 14.

⁸⁸ Clark Hoyt, “Eagleton--young man in a big hurry,” 14.

⁸⁹ Clark Hoyt, “Eagleton--young man in a big hurry,” 14.

families, and regard the dumping of Eagleton as insensitive, unjust and unscientific.”⁹⁰ In describing the content of the letters, Reston continues, “What they are saying mainly is that McGovern and everybody else who agreed with him in the Eagleton case have put a stigma on all psychiatric patients, cast doubt on their reliability, and shut them off from the highest offices in the land.”⁹¹ Not only could Americans sympathize with Eagleton’s plight, they grew concerned about the implications that this stigma would have on a sizeable percentage of the American population. Thus, McGovern had to tread lightly in his decision to remove Eagleton from the ticket, not wanting to appear coldhearted to millions of Americans impacted by their own mental health conditions. Other letter-writers expressed their admiration for Eagleton’s courage. For example, a doctor at Columbia University wrote, hinting at the commonality of depression, “What is so unusual about a temporary psychological depression in an intense, capable, ambitious young man?... What is unusual in this case is that Senator Eagleton had the insight and the courage to recognize this promptly, and equally promptly to find effective treatment.”⁹² Once more, this source reflects the common understanding that depression diagnoses were common within the United States, especially amongst the well-educated. However, none of the letters mentioned in this article (or similar articles) mention Eagleton’s ECT treatment specifically. Of course, many more Americans would have experience with depression than with ECT, but their decisions to omit any reference to ECT show either that these writers were not bothered by his treatment or willing to overlook it – or, perhaps, they shied from dealing with the issue. In any case, the letters

⁹⁰ James Reston, “Psychology And Politics,” *New York Times*, August 9, 1972, ProQuest Historical Newspapers, 37.

⁹¹ Reston, “Psychology And Politics,” 37.

⁹² Reston, “Psychology And Politics,” 37.

reflect an understanding of and support for someone with depression, even while occupying the second most important role in America. Simply put, the issue was not the diagnosis, it was the treatment.

Beyond sympathy, empathy and the sharing of personal experiences ran through articles from July and August 1972. In a shrewd commentary reflecting on the entire affair, Nicholas von Hoffman sees Eagleton in himself and all hard-working white males. He writes about Eagleton,

you threw yourself at the doctors, as we are told to do, and they said modern medicine has a cure for all emotions. They tranked you and told you that your were sick, but maybe the real secret was that you never were, that you were well and depressed because you had damned good reason to be, and maybe we had to howl and drag you off the ticker because otherwise the rest of us careering males would fall into depression, too.⁹³

This empathetic defense of Eagleton is further evidence that American understanding of and identification with depression protected Eagleton from more intense attacks in July 1972. However, a closer analysis of von Hoffman's language in reference to Eagleton's ECT treatment here is telling. Though he uses the term "tranked" (short for tranquilized) in lieu of "electroconvulsive shock therapy," von Hoffman implies an involuntary aspect to the treatment, in which the patient is entirely passive while undergoing ECT. It is thus possible to see von Hoffman's doctors as nefarious, tranquilizing Eagleton against his will while convincing him that he was sick. Once more, depression was cast as normal and simply a product of over-work, but severe treatment for it could not be explained away in such simple, innocent terms.

⁹³ Nicholas Von Hoffman, "Cut the Mustard," *The Washington Post, Times Herald*, August 4, 1972, ProQuest Historical Newspapers, B1.

Journalists also understood and warned of the larger repercussions that the Eagleton affair would have related to America's treatment of mental health issues. Pulitzer Prize winning journalist Tom Darcy wrote a personal editorial in relation to his own mental breakdown in the 1960s. Highlighting the absurdity of Americans' misplaced obsessions with mental illness, Darcy writes, "Eagleton? Total recovery? When will we question the recovery of napalm's child? It is not Eagleton who is paralyzed by the headlights of the onrushing truck...it is us."⁹⁴ Also commenting on the larger implications of Eagleton's admission and removal from the ticket, Mike McGrady of the *Boston Globe* writes,

In a better world, it might not have mattered. In a more sophisticated civilization, it might be as acceptable for a political candidate to reveal a past history of mental illness as to confess now to a bout with influenza. But we are not that far advanced. The shock treatments that Tom Eagleton took several years ago have paralyzed the Democratic Party in 1972.⁹⁵

While McGrady makes clear mention of Eagleton's depression and America's misplaced concerns about mental illness, he ultimately chalks the Democratic downfall to ECT and not simply depression. A Presbyterian minister from Rochester NY complained in a letter to the *New York Times* "that many people who desperately need psychiatric help refuse to seek it precisely because of the fear of the kind of criticism made of Eagleton by the press." He writes, "The sign of both mental and spiritual maturity is a willingness to seek help rather than bulling one's way through a situation, leaving the wounded and hurt on every side. Columns such as yours and the editorial policy of your paper make such

⁹⁴ Tom Darcy, "The Frozen Fear of a Nervous Breakdown -- Bringing It Home," *The Washington Post, Times Herald*, August 6, 1972, ProQuest Historical Newspapers, H13.

⁹⁵ Mike McGrady, "Why Sen. Eagleton got the Ax," *Boston Globe*, August 1, 1972, ProQuest Historical Newspapers, 18.

courage even more invaluable and rare.”⁹⁶ Thus, one finds a willingness, and even eagerness, through the Eagleton affair to have more open and honest conversations concerning mental health. In fact, America was so gripped by mental illness in the summer of 1972 that literary agents sought to capitalize on the moment. Finding Eagleton sitting with literary agents at an Italian restaurant in early August 1972, a Hartford Courant journalist commented on Eagleton’s affability and future plans to write a book on mental health (which never actually came to fruition). As one of the agents explained to the journalist, “Half the country has psychiatric problems or is in need of psychiatric advice. It’s the Senator’s idea. He could make a lot of money.”⁹⁷ British newspapers even commented on America’s fixation on mental illness. As Adam Raphael wrote in the Guardian, “The public reaction of shock, dismay, and storm of editorial criticism was entirely predictable, given this country’s fear of mental illness, its obsession with medical detail, and its conception of the Vice-President’s role in a nuclear age.”⁹⁸

Of course, not everyone followed Eagleton’s lead in attributing his hospitalizations to over-exertion or a weak stomach, and not everyone was entirely sympathetic to Eagleton’s situation or treatment. As Carl M. Cobb of the *Boston Globe* wrote, “No one pretends that electric shock treatment is the therapy for simple fatigue, exhaustion, or a nervous stomach.”⁹⁹ For writers like Cobb, using an extreme treatment such as ECT to respond to a common and perhaps mild ailment seemed ludicrous and even suspicious. Cobb was not the only journalist to question Eagleton’s excuse for

⁹⁶ Reston, “Psychology And Politics,” *New York Times*, 37.

⁹⁷ “Tom May Write Mental Health Book,” *The Hartford Courant*, August 9, 1972, ProQuest Historical Newspapers, 31.

⁹⁸ Adam Raphael, “Skeleton that refused to lie down,” *The Guardian*, August 1, 1972, ProQuest Historical Newspapers, 2.

⁹⁹ Carl Cobb, “Shock therapy not for fatigue,” *Boston Globe*, July 27, 1972, ProQuest Historical Newspapers, 10.

hospitalization. As James Reston writes in response to sympathetic letters on Eagleton's condition, "Usually [letter-writers] do not draw distinctions between the responsibilities of ordinary citizens and the responsibility of the Vice-Presidency, or between people who have had routine psychiatric treatment and those who have undergone electric shock treatment for extreme depression." Here, not only is Reston drawing on the distinction between the roles of ordinary citizens, but he is also touching upon the distinction between routine treatments for mental illness and the much more severe act of undergoing ECT. Thus, while Reston and Cobb can sympathize with ordinary levels of depression, they seem wary of expressing deep sympathy for someone who clearly had struggled with something much more severe than ordinary depression.

The McGovern campaign was eager to deflect attention from Eagleton's mental illness, and one of their first tactics was to throw the question of psychiatric fitness back at Nixon and the Republican Party, as reported by *The Christian Science Monitor* and the *Washington Post*.¹⁰⁰ As journalist Godfrey Sperling notes, "The McGovern people now are calling on the President and Vice President to make a 'full disclosure' of any physical or psychiatric facts that would be related to the positions they now hold. What the McGovern camp is getting at is the report published in 1968, and denied at the time, that Mr. Nixon had once seen a psychiatrist."¹⁰¹ These claims had long been refuted, as the doctor involved urged that he had "physical consultations only" with Nixon.¹⁰² This

¹⁰⁰ "Nixon's Visits to Doctor Recalled By Jack Anderson," *The Washington Post, Times Herald*, July 29, 1972, ProQuest Historical Newspapers, D31.

¹⁰¹ Godfrey Sperling Jr., "Will Eagleton stay on ticket?: Full disclosure urged," *Christian Science Monitor*, July 27, 1972, ProQuest Historical Newspapers.

¹⁰² Sperling Jr., "Will Eagleton stay on ticket?"

purely distracting tactic did not go far, perhaps because Nixon never went to such severe lengths as ECT treatment in response to his supposed mental illness.

Beyond welcoming a distraction about Nixon's history with mental illness, the McGovern-Eagleton campaign also welcomed a more surprising distraction the same week that Eagleton's medical history was revealed. This came in the form of accusations that Eagleton had been arrested on multiple occasions in the previous decade for driving drunk. Until this point, McGovern had stood beside Eagleton "1000%," but as Douglas E. Kneel argues, "The turning came, the McGovern and Eagleton camps agree, with the accusation Thursday by Jack Anderson, the syndicated columnist, over his Mutual Broadcasting Company radio show that Senator Eagleton had a long record of drunken driving arrests."¹⁰³ Interestingly, the Eagleton camp welcomed Anderson's claims. As Kneel reports, "The Eagleton staff saw the Anderson accusations, which they felt were demonstrably false, as a Heaven-sent opportunity to seize the initiative and take the public's mind off the health issue. But the McGovern camp was more skeptical."¹⁰⁴ The fact that the Eagleton camp was thrilled about this accusation says quite a bit about their reluctance to further explain Eagleton's past issues with mental health. In short, they were fine with a damning alcohol accusation if it would take American minds off of ECT treatment. Anderson, a Pulitzer-Prize winning journalist, quickly retracted his claims, stating, "I would not have used it in the [syndicated newspaper] column without documentation. I went on the air with it because I thought that momentarily someone was

¹⁰³ Douglas E. Kneel, "Behind Eagleton's Withdrawal: A Tale of Confusion and Division," *The New York Times*, August 2, 1972, ProQuest Historical Newspapers, 1.

¹⁰⁴ Douglas E. Kneel, "Behind Eagleton's Withdrawal: A Tale of Confusion and Division," 1.

going to get it and I wanted to scope a scoop,”¹⁰⁵ and even apologized to Eagleton on live television. However, the continued negative press on Eagleton, true or not, was enough to push McGovern toward naming a new Vice Presidential nominee. Weeks after the drunk driving accusations, at the same dinner where Eagleton discussed a book deal on mental health, a journalist noted what was on the table, writing, “The happy group at La Scala had no drinking problems – one drink before the Italian food and a little wine.”¹⁰⁶ While issues of alcoholism or shock therapy scared voters, Eagleton could emerge from this ordeal willing and eager to discuss depression.

Visual Media and the Eagleton Affair: How the Cameras Caught Eagleton

TV broadcasts explored the Eagleton issue without sensationalism. Mentions of depression and ECT treatment were presented in an educational manner, as seen in that same Face the Nation broadcast. In it, reporters discuss depression and ECT with a psychiatrist at Massachusetts General Hospital, who reminds the reporter that some of America’s most well-known presidents, such as Abraham Lincoln, lived with bouts of intense depression. At one point, the reporter notes, “There are many people who say that Senator Eagleton’s depression was probably quite severe because he was given electro-current therapy and therefore may not be equipped to carry on the office of Vice President and perhaps even president.”¹⁰⁷ While the doctor’s response was measured and explained the fact that the decision to use ECT did not always equate to a severe

¹⁰⁵ James M. Naughton, “DATA ON EAGLETON REPORTED LACKING: Anderson's Source Asserts He Has...,” *The New York Times*, July 29, 1972, ProQuest Historical Newspapers, 1.

¹⁰⁶ “Tom May Write Mental Health Book,” *The Hartford Courant*, August 9, 1972; ProQuest Historical Newspapers, 31.

¹⁰⁷ KNTX-TV2, “Eagleton Case,” CBS News Election 72 Special Report, July 30, 1972, Posted by Obsolete Video, <https://www.youtube.com/watch?v=gkyQcgEmC4Q>

diagnosis, the question is telling. Once more, Americans were clearly more fixated on the treatment more than the diagnosis, and the fact that Eagleton underwent this treatment on more than one occasion did even less to ensure confidence in Eagleton.

The sympathetic sentiment published in newspapers could be found on-screen, too. On July 30th, Eagleton appeared on *Face the Nation* with journalists John Hart and Roger Mudd. Asked forceful and direct questions, Eagleton once more appeared agitated but confident. David Nyhan of the *Boston Globe* lauded Eagleton's appearance. He wrote, "Eagleton prevailed over the more dangerous public format of all – live questions from tough interviewers...[he] sweats too much, his hands shake in front of the cameras, but he's my kind of guy."¹⁰⁸ In a July 28 Associated Press segment, Eagleton aids carry large cardboard boxes filled with letters both in support of and opposition to Eagleton staying on the ticket. This was in light not only of his mental health revelations, but the allegations of a drinking problem. However, one of the Eagleton aids notes that letters in support outnumbered oppositional letters two to one.

As was the case in newspapers, TV journalists also raised questions about the broader implications of the Eagleton affair and the ways that TV journalists operated in potentially destructive ways. As David Nyhan notes, "Sad but true, the tapping of one's forehead to suggest a politician is loony is more damaging than rumors that he steals or runs around with women. We understand and condone thievery more than emotional depression."¹⁰⁹ Nyhan added of role of the press, both in TV interviews and during news conferences, "The tortured probing of his past has left the press as well as the public

¹⁰⁸ David Nyhan, "Eagleton stands tall in TV test," *Boston Globe*, July 31, 1972, ProQuest Historical Newspapers, 11.

¹⁰⁹ Nyhan, "Eagleton stands tall in TV test," 11.

wondering about the gauntlet we force our leaders to run.”¹¹⁰ Even Tom Eagleton’s brother, Mark Eagleton, commented on the larger implications of the Eagleton affair, “[My brother] no longer really has a health problem. That’s in the past and he hasn’t had any problem for six years. I see no reason he should have any problems in the future. I think it may affect the mental health program in the United States. We’ve reverted back to the Dark Ages again.”¹¹¹

It is easy to assume, as we so often see today, that mental health stigma along with an opportunistic and overly-sensationalized press ultimately crushed Eagleton’s chances of remaining on the McGovern ticket in 1972. Taken together, whether articles supported or opposed Eagleton’s vice presidential bid, it is clear that ECT, not simply depression, was the elephant in the room that summer. As a former Democratic opponent stated on Face the Nation, “When you’re vice president you’re only a heartbeat away from president and when you’re president the pressure is much greater than any campaign you might be making. And if a campaign was too much, certainly an atomic attack or something... you couldn’t wait for the president to have a shock treatment before he could make a decision.”¹¹² Americans had tolerated and even readily admired previous depressed presidents. What distinguished Eagleton from his political predecessors was that he was brave enough to address it, and unlucky enough to step into an intense national conversation about psychiatric practices.

¹¹⁰ Nyhan, “Eagleton stands tall in TV test,” 11.

¹¹¹ David Nyhan, “Eagleton stands tall in TV test,” 11.

¹¹² KNTX-TV2, “Eagleton Case,” CBS News Election 72 Special Report, <https://www.youtube.com/watch?v=gkyQcgEmC4Q>.

Chapter IV.

Conclusion

While the Eagleton affair lasted only eighteen days, it quietly contributed to how Americans would view mental health, psychiatry, politics, and reporting for the rest of the twentieth century. One could even think of the Eagleton affair as a turning point for how presidential candidates run their campaigns and, in particular, vet and choose a running mate. This concluding section focuses on what came about Tom Eagleton himself, and how, though most do not recognize his name today, he left an indelible mark on America's relationship with the issue of politics and mental health.

Tom Eagleton returned to Missouri and was re-elected to the Senate in 1974, and again in 1980. Clearly, the Eagleton affair did little to shake Missourians' confidence in his leadership abilities. However, Eagleton would not be cleared of accusations against him. In 1980, Eagleton's own niece, Elizabeth Weigand, attempted to extort money from him by threatening to share information about a rumored homosexual affair in Key West, Florida. Eagleton categorically denied the claims and explained to reporters that his niece planned to turn the money over to the Church of Scientology, coincidentally the same church that railed against ECT in the 1970s and 80s.¹¹³ Meanwhile, in the Senate, Eagleton was a key figure in passing the Clean Air Act and the Clean Water Act, and also co-authored the Hatch-Eagleton Amendment in 1983, which argued that "A right to

¹¹³ Alice Noble, "A niece of Sen. Thomas F. Eagleton, D-Mo., testified..." UPI Archives, October 23, 1980, <https://www.upi.com/Archives/1980/10/23/A-niece-of-Sen-Thomas-F-Eagleton-D-Mo-testified/5601341121600/>.

abortion is not secured by this Constitution.”¹¹⁴ Eagleton’s health also came into question again as his career wound down. In 1984, just after Eagleton announced that he would not run for re-election in 1986, he sought treatment for depression once more. As one journalist and long-time friend wrote with the same sympathy and concern seen amongst reporters a decade earlier, “those of us who have known [Tom]...have been concerned about his health... He appears worn, tired, and often shakes as he speaks.”¹¹⁵ According to biographer James Giglio, Eagleton visited a psychiatrist earlier that year and was diagnosed with bipolar 2 disorder and subsequently prescribed Lithium and Wellbutrin, both mood disorder medications.¹¹⁶ Fortunately for Eagleton, he could respond to his bout with mood disorders in the privacy of his own home, using a means of treatment that was not just accepted, but popular, at the time. By the end of his Senate career, the *Kansas City Times* celebrated him, writing, “‘The Tom Eagleton Years’ produced the kind of politician the system is supposed to produce but so rarely does.”¹¹⁷ Through it all, reporters could separate the politician from the man, demonstrating that the same tolerance that Americans had for depression in politicians in 1972 did not wane a decade later.

If nothing else, Eagleton’s removal from the Democratic ticket reignited conversations about mental health treatment in the United States. According to a 1973 statement from the National Alliance on Mental Health, the Eagleton affair called for efforts “to put an end to the stigma long associated with mental illness, so that no person

¹¹⁴ Human Life Action, “Human Life Amendment,” <https://www.humanlifeaction.org/issues/human-life-amendment/>.

¹¹⁵ Giglio, *Call Me Tom*, 190.

¹¹⁶ Giglio, *Call Me Tom*, 190.

¹¹⁷ Giglio, *Call Me Tom*, 197.

shall be deprived of the right to fill any role in life for which he is capable solely because at some time when troubled he sought and secured professional assistance to help solve his problem.”¹¹⁸ The conversation about mental health even made its way to the White House, where Rosalyn Carter advocated not only for the better treatment of mental health patients, but also for the media to show more care in its reporting on mental health. As she stated,

Mental patients are not inmates and are rarely dangerous period they need support and understanding as they struggle to make new lives for themselves. The media can play a constructive role in educating the public about these issues, and they have a special responsibility to help eliminate the myths and the misconceptions about mental illness.¹¹⁹

Clearly, public perception about mental illness and treatment had not shifted radically in the 1970s, perhaps in large part because of sensational media depictions of psychiatric hospitals and barbaric treatments. By the 1980s, American tolerance for mental health in a political realm would once more be tested.

Eagleton was certainly not be the last politician to struggle with mental health controversies while on the campaign trail or in office; a similar issue arose during the 1988 Presidential election between George HW Bush and Michael Dukakis, a Democrat from Massachusetts. During that campaign, a political organization led by Lyndon LaRouche Jr. claimed that Dukakis was suffering from depression. The Dukakis campaign did not get any help in alleviating the controversy when President Reagan referred to Dukakis as an “invalid” and argued, “I do believe that the medical history of a President is something that people have a right to know, and I speak from personal

¹¹⁸ *Hospital and Community Psychiatry*, “NAMH Says Eagleton Affair Underscores National Need for New Mental Health Effort,” 24, no. 2 (February 1973): 119.

¹¹⁹ *Hospital and Community Psychiatry*, “Reflections on the Media and the Mental Patient,” 30, no. 6 (June 1979): 415.

experience.”¹²⁰ While there was no evidence for Dukakis’s poor mental health, and though he denied the rumors unreservedly, he saw a dip in the polls that July and still claims that it negatively impacted the campaign. As Dukakis remarked in 2014, “The whole thing was nuts...it certainly had an effect on the campaign; there’s no question about that.”¹²¹ Once more, the important distinguishing factor for American voters seemed to be the severity of Dukakis’s depression, which could be judged by the clinical response. It was permissible for Dukakis to have suffered from depression, just as millions of his constituents would have; the controversy would remain short lived for Dukakis because nothing was ever revealed about the treatment he received to treat the depression. As Louis Appleby highlights this point, “Consequently the Democrats’ defense walked the kind of diagnostic tightrope under which many psychiatrists prefer to have a safety net. OK, their man may have been depressed but not clinically depressed, no sir.”¹²²

Dukakis would lose the election soundly that November but, along with his wife Kitty, has remained a mental health advocate. In fact, both have become staunch advocates for the promotion of ECT, as Kitty used it to treat her depression in 2001. As Governor Dukakis reflected on the treatment, “By that time, the treatment had changed dramatically. But in the ‘50s, there was no question that that was what the treatment was like. But by ‘75, there had been many, many changes. And they continue to refine the treatment and make it better and better and better.” When asked why they are now so

¹²⁰ Andrew Rosenthal, “Dukakis Releases Medical Details to Stop Rumors on Mental Health,” *New York Times*, August 4, 1988, <https://www.nytimes.com/1988/08/04/us/dukakis-releases-medical-details-to-stop-rumors-on-mental-health.html>.

¹²¹ John Martin-Joy, MD, Sagar Vijapura, MD, and Jonathan E. Carey, JD, “Michael Dukakis on Politics and Mental Health,” November 12, 2014, <https://vimeo.com/355116763>.

¹²² Louis Appleby, “Dukakis’s Disease,” *BMJ* 298 (February 18, 1989): 465, <https://www.jstor.org/stable/29702354>.

passionate about advocating for ECT, Mrs. Dukakis replied, “Well, part of the reason is that there is so much misunderstanding and still has been even in the media. There had been very difficult articles to read that were full of untruths about the treatment.”¹²³

Eagleton never took part in this sort of advocacy for ECT, or any mental health treatment. As it had damaged him so badly in the summer of 1972, perhaps it was best for him to leave any discussions of the treatment in the past.

Since the Eagleton affair, polls have consistently indicated that any revelations of mood disorders would have severe impacts on candidacies. According to a study conducted in 2002, “24 percent of respondents would not vote for a political candidate with a mood disorder, and an equal percentage ‘might not vote’ for such a candidate. Further, 25 percent said they believe that people with mood disorders are dangerous.”¹²⁴ This means that Presidential hopefuls must be extra cautious when vetting and choosing a running mate, or anyone associated with their campaign. According to Lawrence K. Altman, the lasting legacy of the Eagleton affair “is the microscopic examination of the lives and records of potential vice-presidential candidates, a ritual involving teams of lawyers and consultants and reams of medical and financial records that the candidates are obligated to produce.”¹²⁵ But even thorough examination will not stop divisive public opinion about the vice presidential candidate. Take Sarah Palin, for example, who ran with Republican nominee John McCain. Steve Schmidt, the chief strategist for the

¹²³ David Green, “Kitty Dukakis: Electroshock Therapy Has Given Me A New Lease On Life,” NPR Morning Edition, January 17, 2017, <https://www.npr.org/2017/01/17/510204486/kitty-dukakis-electroshock-therapy-has-given-me-a-new-lease-on-life>.

¹²⁴ Eve Bender, “With Politics and Mental Illness, The More Things Change...” American Psychiatric Association, November 1, 2002, <https://psychnews.psychiatryonline.org/doi/full/10.1176/pn.37.21.0010>.

¹²⁵ Lawrence K. Altman, “Hasty and Ruinous 1972 Pick Colors Today’s Hunt for a No. 2,” *New York Times*, July 23, 2012, <https://www.nytimes.com/2012/07/24/us/politics/eagleton-pick-in-1972-colors-todays-vice-president-hunt.html>.

McCain campaign ended up regretting his role in choosing Palin, as she “was manifestly unprepared to take the oath of office should it become necessary.”¹²⁶ Clearly, lessons drawn from 1972 remain in the minds of campaign strategists but are merely guideposts. Furthermore, the digital age has complicated vetting processes (not just for Vice Presidents, but for any office), as access to information and records becomes more readily available to the public. In short, American voters today have significantly more information about the personal lives and records of candidates and do not hesitate to base their opinions upon knowledge of a candidate’s personal matters.

More recently, speculation about politicians’ psychiatric diagnoses have become a weapon to smear a political opponent, as both Donald Trump and Joe Biden could attest. For example, in September 2022 a former Trump lawyer referred to him as a “deeply wounded narcissist,”¹²⁷ while questions about President Biden’s mental fitness and potential dementia regularly appear in more conservative commentary. While both have weathered the storm of accusations about their declining mental health, neither has ever confirmed a diagnosis or mentioned seeking any treatment for a mental condition. While details of physical health are readily shared, one must wonder, could candidates ever again share details of their mental health history without putting their careers in jeopardy? For as far as everyday Americans have come in opening conversations and advocating for mental health de-stigmatization for friends and loved-ones, the idea of embracing the intersection of political leadership with a mental health condition – beyond

¹²⁶ Jonathan Capehart, “Steve Schmidt’s brutally honest assessment of Sarah Palin,” *The Washington Post*, March 12, 2012, https://www.washingtonpost.com/blogs/post-partisan/post/steve-schmidts-brutally-honest-assessment-of-sarah-palin/2011/03/04/gIQA9ewZ7R_blog.html.

¹²⁷ Samira Asma-Sadeque, “Trump ‘deeply wounded narcissist’ says former White House lawyer,” *The Guardian*, September 10, 2022, <https://www.theguardian.com/us-news/2022/sep/10/trump-narcissist-white-house-lawyer-cbs>.

depression treated with drugs – seems tenuous. Perhaps in some ways the Eagleton affair actually represented the waning moments of American tolerance for mental health – of course, so long as the treatment was not severe.

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