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The celebritization of self-care: The celebrity health narrative of Demi Lovato and the sickscape of mental illness

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journals.sagepub.com/home/ecs**Gaston Franssen** 

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Abstract

Using the threatened yet ultimately reconfirmed celebrity status of pop singer and mental health advocate Demi Lovato as a case study, this article analyzes how celebrity health narratives reflect and produce a neoliberal ideology of individuality in the context of mental health care. It is argued that Lovato has successfully rebranded herself as the embodiment of achievement, self-improvement and confidence by embracing her diagnosis with bipolar disorder and other mental health struggles. Furthermore, the article demonstrates how her celebrity health narrative has been repackaged and reproduced by the merchandizing industry, providing general lifestyle advice about the value of ongoing self-improvement. This convergence between the ‘sickscape’ of mental illness and celebrity culture can be understood as a ‘celebritization of self-care’, which reproduces a hyper-individualized, neoliberal and distinctly gendered ideology of meritocracy, and presents all forms of achievement, including recovery from mental illness, as the result of competitive individualism.

Keywords

Bipolar disorder, celebrity, Demi Lovato, gender, ideology of individualism, mental health, meritocracy, neoliberalism, self-improvement, self-narration

Introduction

In early October 2010, Disney starlet and pop singer Demi Lovato, who had just turned 18, appeared to be on top of her game. She had produced two certified gold pop albums and was playing a leading role in the *Camp Rock* film series as well as performing on the *Live in Concert* world tour of the popular Jonas Brothers. She was seen as an ‘articulate,

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confident, and sophisticated style icon' (Blue, 2017: 101) and a conscientious role model for young girls. In 2009, a popular double biography on Selena Gomez and Lovato presented the two as 'always' setting 'a good example' and embodying an ethos of hard work, innocence and respectability (Rutherford, 2009: 77–78).

Yet on October 28, things suddenly started to unravel for the young star. On board the Jonas Brothers' tour jet, Lovato punched one of the backup dancers, leaving visible bruises on the left side of the dancer's face. Afterwards, Lovato claimed that she 'just lost it' (Bartolomeo, 2010). Within days, the star checked into Chicago's Timberline Knolls treatment center with 'emotional and physical issues' (Cotliar, 2016). Online media were soon buzzing with rumors about a traumatic childhood, alcohol and cocaine addiction, bulimia and mood disorder (cf. Garvey et al., 2010; Goddard, 2010; Williams, 2010). Of course, this turn of events immediately affected Lovato's image as an innocent, kind-hearted, diligent girl star: both her status as a 'Disney princess' (Williams, 2010) and her position as a respectable role model were at risk. Media characterized the sudden twist in Lovato's career in terms of a 'meltdown' (Fuller, 2010); a 'crisis' (Chmielewski and Kaufman, 2010); and even a 'downward spiral' (*Today*, 2010). It seemed that the popular singer was out of control, falling apart and on a collision course with failure.

However – and notwithstanding the events outlined above – from a contemporary perspective it is safe to conclude that Lovato's star status has not only regained its original brightness; in spite of her recent (apparent) drug overdose (Johnson, 2018), it shines brighter than ever. Since 2011, she has headlined several world tours, starred in television shows and produced a series of hit singles and platinum albums. Moreover, Lovato has chosen to embrace her mental struggles as part of her celebrity persona. She has opened up about her addictions, eating disorder and diagnosis with a mental illness on talk shows, claiming that she is 'bipolar and proud' (Weaver, 2017). She has enlightening her fans about the importance of 'self-care' (Ruffo, 2016) and is now even considered to be an 'expert' in 'self care advice' (McNamara, 2017). In addition, she has become a successful spokesperson for the campaign *Be Vocal*, which encourages mental health awareness (*Be Vocal*, 2017; Fox, 2016). Finally, as a performer, she has been 'working through' her crisis by venting her feelings on music albums with revealing titles such as *Unbroken* (2011) and *Confident* (2015); by sharing her story through the documentaries *Demi Lovato: Stay Strong* (2012) and *Demi Lovato: Simply Complicated* (2017) as well as through her book *Staying Strong: 365 Days a Year* (Lovato, 2013). In her Twitter profile of early 2018, Lovato (2017) proudly presents herself as a successful 'Singer, Songwriter, Actress, Entrepreneur, Philanthropist'. Clearly, 'staying strong' has become the key motive in what Richard Dyer would term her 'star text', meaning the sign system consisting of both authorized and unauthorized 'media texts' that together make up the image of the celebrity (Dyer, 1979). As a result, Lovato's post-2010 image revolves around values, such as confidence, self-care and recovery.

It appears that Lovato, even with her recent relapse, has recovered in two ways: on a personal level, she has fought addiction, depression and bulimia and is living successfully with bipolar disorder, while on the level of celebrity, she has regained her cultural status as both an idol and a role model. The foundational questions asked in this article, therefore, are: how has Lovato managed to reconcile her story of psychic breakdown and mental disorder with an ongoing narrative of precarious yet successful self-realization? Which social and cultural systems or code of meanings have regulated the production

and circulation of her image? And what does her story reveal about the articulation of success, celebrity and mental health in contemporary culture and society? Lovato's successful return after her crisis in 2010 is remarkable, particularly if one considers that, for female performers, an all-round comeback after a profound mental crisis is far from assured in celebrity culture. There is a societal tendency – which will be addressed in more detail below – to respond to a mental crisis of male celebrities by invoking the trope of a heroic 'battle' with and strong-willed triumph over mental illness, whereas female stars in psychological turmoil are associated with inherent frailty and instability. In this light, it is telling to contrast the mediagenic passage through mental turmoil in the case of Adam Ant (Harper, 2006), Charlie Sheen (Harris, 2012) or Joaquin Phoenix (Martin, 2015), with the structurally undermined careers of stars such as Judy Garland (McLean, 2002), Courtney Love (Coates, 1998), Britney Spears (Fisher, 2011; Luckett, 2010) or Kerry Katona (Bell, 2008), all of whose careers were irreversibly – and negatively – affected by their mental crises. In addition, the case of Lovato is exceptional in the sense that her breakdown is presented, as will become clear, as an event that has in fact increased her celebrity status, allowing her to reclaim and redefine her success, take 'control' over her life and redirect it toward a 'bigger purpose' (cf. Burlingame, 2014: 64).

In the following sections, I argue that Lovato's newly found status results from a celebrity health narrative (Beck et al., 2015) that productively resonates with two main clusters of narratives: on one hand, the 'success myth' (Dyer, 1979) of celebrity culture, its currently dominant manifestation in the form of a neoliberal ideology of meritocracy (Allen, 2011; Gordon, 1991; Littler, 2013; Rose, 1996a) and its gendered manifestation in contemporary postfeminist culture (Gill, 2007; Gill and Orgad, 2015; McRobbie, 2015; Rottenberg, 2014) and on the other hand, the popular discourse of mental health and emotional work (Nunn and Biressi, 2010; Yates, 2011) and its elaboration in contemporary self-improvement culture (Dolby, 2005; McGee, 2005). In their edited volume on celebrity health narratives, Christina S. Beck et al. (2015) identify three functions of such narratives: education, inspiration and activism/advocacy. What Beck et al. fail to address, however, is their ideological function: the ways in which these narratives supply us with images and ideas about how we should interpret, manage and value mental illness as well as the identities of those who suffer from it. This ideological dimension has been touched upon in numerous thought-provoking publications (see, for instance, Bell, 2008; Fisher, 2011; Harper, 2006, 2009; Holmes, 2015; Projansky, 2014). Yet, the relation between the ideological work of the celebrity health narrative, meritocracy and the sickscape of mental illness has still not been fully explored. How, exactly, do mental health notions such as 'self-care' and 'self-management' resonate with contemporary celebrity culture and the 'enterprise society' at large? If cultural studies continue to entail the study of the ways in which culture 'governs us', in the sense that it regulates social interaction, human conduct and subject positions, as Stuart Hall (1997) famously argued, then this question should certainly not escape our attention.

The story of Lovato's recovery, I suggest, offers a case study of the ideological articulation of the notions of celebrity, individual success and mental health in contemporary society. In line with John B. Thompson's (1995: 293) approach, 'ideology' is here understood as the way in which symbolic forms, circulated through media, intersect with relations of power and forms of subjection or subjectivation. Celebrity culture is an important site of the institutionalized production and generalized diffusion of symbolic goods; as

such, it plays a major role in the constitution of subjects in contemporary society (cf. Dyer, 1979; McDonald, 2012; Marshall, 1997: 64–65). In terms of methodology, my analysis covers the three stages of the analysis of ideology as outlined by Thompson. Although the development of my argument is not as protocoled as his description, my argument does flow forth from a ‘social-historical’ analysis that focuses on the social, cultural and media contexts, a ‘formal or discursive analysis’ targeting semiotic configurations and narrative structures, and finally a critical ‘re-interpretation’ (Thompson, 1995: 281). As celebrity health narratives are public, collective constructs by definition, there is no way to distinguish between the star’s ‘own’, personal narrative and how it is framed, interpreted and recirculated by others; hence, I approach Lovato’s narrative as a conglomeration of celebrity-produced products as well as the commercial framing and public reception of these products. Thus, the analytic emphasis is on Lovato as the subject *and* the object of public processes of self-narration: I analyze sources that contain explicit self-reflection on her life and image as well the way in which these sources have been publicly read and valued by others. My analysis, then, presents a ‘reinterpretation’ of an ‘object domain which is already interpreted and understood by the subject who make up the social-historical world’ (Thompson, 1995: 25). As I am interested in the ongoing, public self-narrative of Lovato, I focus on explicitly self-reflexive materials (bio-docs, interviews, autobiographical writings) rather than on Lovato’s ‘work’ in a strict sense (lyrics, music videos, concert performances). My goal is to demonstrate how the different codes of meaning that regulate our understanding of success, celebrity and mental health in the case of Lovato converge and interlock; and it is for this reason that I pay close attention to the ways in which different elements that make up her celebrity health narrative confirm and strengthen each other.

In the following section, I start by contextualizing my analysis. I explore the historical and cultural connections between symbolic forms signifying individual success, celebrity and mental illness. In the third section, I investigate how Lovato has incorporated her mental health crisis and recovery in her celebrity image. An analysis of the documentary *Stay Strong* will examine how she ‘narrativizes’ (Thompson, 1995: 61) her struggle with mental illness, thereby authenticating her suffering and legitimizing her condition. The fourth section positions Lovato’s celebrity health narrative at the intersection of the celebrity industry and contemporary self-improvement culture, analyzing how this narrative is repackaged by a merchandizing industry as general lifestyle advice. This overall process, I propose, can be reinterpreted as a ‘celebritization of self-care’. In the conclusion, I consider the cultural consequences of the case of Lovato by tracing the ‘sickscape’ (Maturò, 2010) of bipolar disorder and arguing that it is particularly this diagnosis that fits within a broader, distinctly gendered ‘spectacularization’ (Projansky, 2014) of female breakdown and ongoing self-improvement.

Before I turn to the next section, however, two important points need to be stressed. First, bipolar disorder – despite its controversial status as a disease (cf. Maturò, 2010; Moncrieff, 2014) – is a reality for many individuals, suffering from profoundly disturbing symptoms, such as psychotic episodes, mania and suicidal tendencies. It is not the intention of this article to question that reality or suggest that bipolar disorder (nor its former label ‘manic-depressive disorder’; Healy, 2008: 135–160) is merely a social construction or a fad (cf. Paris, 2012). Second, this article does not aim to assess whether Lovato is

‘really’ bipolar or not. My analysis takes as its object the ‘sickscape’ of mental illness, that is, the flow of ‘symbolic goods’, produced and diffused by a variety of media sources, which shape our understanding and evaluation of disorders as the self.¹ As celebrities – being the ‘overtly public individuals’ that they are (Marshall, 1997: ix) – figure prominently in these sources, celebrity health narratives offer the possibility to analyze aspects of this ‘sickscape’. Therefore, by investigating the meanings and values attached to mental illness in such narratives, I am not passing judgment on a specific disorder or an individual diagnosed with that disorder. Rather, my aim is to gain insights into the ideological processes through which we attach values to celebrities’ mental illnesses and how these processes are connected to forms of subjection and subjectivation.

Celebrity, meritocracy and narratives of mental illness

The phenomenon of celebrity can be regarded as an ideology of individualism. As Richard Dyer (1986) observes in *Heavenly Bodies: Film Stars and Society*, stars ‘express the particular notion we hold of the person, of the “individual”’ (p. 7). Dyer (1986) adds that stars ‘articulate the business of being an individual’ (p. 16). The pervasiveness of celebrity culture in contemporary society is such that, as Su Holmes and Sean Redmond (2006) argue, celebrity now ‘characterizes the dominant way in which people are made legible in the public sphere’ (p. 11). Thus, celebrities, in this view, are both the product and constituting elements of a representational regime that regulates the production and consumption of forms of self-narration – they determine *what it means* to be an individual in modern society.

In one way or another, celebrity narratives revolve around achievement, social mobility or wealth: they are stories of successful selves. In a contemporary western context, this success takes on a very specific form, as it is the product of both the traditional ‘myth of success’ and an ideology of meritocracy. Grafted on the ideal of the American Dream (Dyer, 1979: 42–43; Sternheimer, 2011), the myth of success suggests that the business of being an achieving individual comes down to a ‘rags-to-riches’ narrative in which a combination of ordinariness, talent, hard work and lucky breaks ultimately leads to success – despite of one’s background in terms of gender, class or ethnicity (Dyer, 1979: 42). This promise of future success is ideologically legitimated by the meritocratic formula of ‘merit = ability + effort’ (Allen, 2011: 368), where merit is rewarded by income or social position. Thus, as Jo Littler (2013) explains, the ideology of meritocracy upholds the illusion that ‘whatever our social position at birth, society ought to offer enough opportunity and mobility for ‘talent’ to combine with ‘effort’ in order to ‘rise to the top’ (p. 52).

However, this is only half of the story of contemporary celebrity, as the ideology of meritocracy receives a particular inflection under the influence of neoliberalism. Social and political theorists have made clear that the neoliberalization of culture and society entails a ‘generalization of an “enterprise form” to all forms of conduct’ (Burchell, 1996: 28–29). The conduct of individuals, too, takes on the form of a ‘managerialization of personal identity’ (Gordon, 1991: 44): neoliberal subjects are expected to ‘enterprise’ their lives and identities ‘through active choice’ and thus to ‘manage themselves’ (Rose, 1996b: 340).

The consequences of this process for the ideology of meritocracy are twofold. First, the quest for merit (i.e. income and/or socio-cultural status) is intensified while becoming highly individualized: within neoliberalism, the individual is believed to be driven by ‘self-motivation’, ‘personal drive’, ‘self-assertion’, ‘self-reliance’ and to engage in ‘self-help’ to become ‘self-made’ (Heelas, 1991: 77–78). Second, an element of competition – considered ‘irrational’ or ‘selfish’ within traditional meritocratic thinking (Allen, 2011: 372–373) – is introduced. The neoliberal subject is characterized as ‘competitive, ambitious, goal-setting and strongly oriented towards free market rewards’ (Heelas, 1991: 77–78). Consequently, meritocracy is turned into a game of winners and losers: within this game, those who lack merit, experience setbacks or fail, must have demonstrated poor entrepreneurship. For if individuals are considered to be “experts of themselves”, to adopt an educated and knowledgeable relation of self-care’, then conversely, those who do *not* succeed can only be understood as failing experts and thus ‘the author[s] of their own misfortune’ (Rose, 1996a: 59). Rosalind Gill and Shani Orgad (2015: 331; cf. Harris, 2004: 9) are right to conclude that this neoliberal rhetoric of ‘self’ – as in ‘self-care’, ‘self-made’ and ‘self-expertise’ – pushes structural, institutional or societal explanations for lack of success into the background. The result of this process is the rise of a hyper-individualized worldview of relentlessly competitive self-fashioning in which all failure, even when it results from socio-cultural stratification, economic disadvantage or chronic (mental) illness, is seen as self-inflicted (Littler, 2013: 68–69). According to Littler (2004), it is this updated version of the ideology of meritocracy that is ‘both reflected in and produced by celebrity culture’ (p. 23).

Here, it is important to keep in mind that the neoliberal ‘business’ of being an individual is highly gendered. Scholars of gender and girlhood studies have convincingly demonstrated that girls and women are positioned as the particular beneficiaries of the neoliberal culture of enterprise and also expected to be the perfect embodiment of its values and ideals (cf. Baker, 2010; Banet-Weiser, 2014; Gill, 2007; Harris, 2004; McRobbie, 2001). Catherine Rottenberg (2014), among others, has traced how neoliberal governmentality has produced an ‘updated’ feminine and (post)feminist subject that ‘is not only individualized but entrepreneurial in the sense that she is oriented towards optimizing her resources through incessant calculation, personal initiative and innovation’ (p. 422). Angela Harris (2004) has influentially characterized these new subjects as ‘can-do girls’: young, confident, self-made women who make ‘projects’ of their ‘selves’; have a ‘star career’; a ‘glamorous consumer lifestyle’ and ‘high standards of physical beauty and grooming’ (pp. 16–18).

In terms of ideology, the ‘can-do’ girl is constructed in two ways. First, through differentiation (cf. Thompson, 1995: 65), that is, by contrasting her to her opposite and ‘other’, the ‘at-risk girl’, whose economic and societal failure is supposedly the result of a lack of self-esteem, poor personal choices and bad patterns of consumption (Harris, 2004: 24–31). Second, the neoliberal female self is legitimized as a new form of subjectivity through a ‘culture of confidence’ that manifests itself in a range of social domains and cultural practices (Favaro, 2017; Gill and Orgad, 2015). Within this culture, girls and young woman are predominantly identified as consumers who are expected to demonstrate their self-improving, entrepreneurial qualities through the consumption of relevant lifestyle products (Banet-Weiser, 2012, 2015; Koffman et al., 2015). The relation between

this neoliberal process of female subjectivation and the culture of celebrity is evident: presented with the spectacle of ambitious, self-made stars – examples in the extant literature include Bethenny Frankel (Leonard and Negra, 2015), Beyoncé (Hopkins, 2017) or Ivanka Trump (Koffman et al., 2015) – young female individuals are invited to work on their life and identity as a ‘celebrity project’ (Harris, 2004: 121).

The final element contributing to the ideological interplay between success, celebrity and health as analyzed in his article – that is, the element of mental illness – plays a somewhat paradoxical part. At first sight, one would expect that public stories of mental distress would be incompatible with the standard celebrity narratives of talent, excellence and achievement. After all, in mental illness it is precisely the self – which was expected to be ‘in control’, to adapt and improve itself, according to the logic of neoliberalism – that is ‘disordered’. The self itself is at risk, and with that, the success of the individual. Yet the connection between fame and mental illness has deep historical roots and realigns itself with the ideology of meritocracy in unexpected ways. In the early modern and romantic period, for example, madness was the mark of the inspired melancholy artist–philosopher and of the genius of the Byronic iconoclastic artist (Stephote, 1998). This association of mental instability with creativity and talent continued into the 20th century (Harper, 2009: 6). Even today, psychic turmoil is often taken as a sign of artistic authenticity. Moreover, stories about stars who ‘make it through’ adversity often reinforce values such as individual autonomy and self-mastery (Lerner, 2006: 8) and end up confirming ‘neoliberal ideologies of meritocracy and competitive individualism’ (Harper, 2006: 314). As such, narratives of mental illness have often been a structural component in stories of success, fame and celebrity.

For the purpose of this article, it is important to note that this ideological link, too, is filtered through the lens of gender. Nina K. Martin (2015: 31) reflects that breakdowns of male celebrities are considered ‘fascinating, demonstrating behavior that shores up stereotypical hetero-masculinity’ (transgression, all-consuming drive, stamina, the demands of ‘method acting’, etc.), whereas female celebrities suffering from a meltdown are associated with failure, mental frailty and hysteria. Likewise, Stephen Harper (2009) observes that popular media representations of men’s struggle with mental crisis are characterized by heroic recovery through ‘sheer strength of will’, while female madness is figured as ‘abjection’ (p. 190). Thus, for both male and female mental breakdown, it is the same ideology of competitive individualism that is invoked as the norm, with clear gendered differences: psychological instability for male artists is associated with perseverance, credibility and authenticity; for female artists, mental breakdown is seen as a sign of failure, inherent instability or a lack of resilience (cf. Bell, 2008; Holmes, 2015; Lerner, 2006: 41–61; McLean, 2002).

The celebrity health narrative of Lovato, as will become clear, takes shape under the influence of the ideological fields of tensions as described above. At the same time, Lovato’s narrative is an exceptional one, as her successful comeback appears to be at odds with the structuring interconnections between success, celebrity and health in contemporary society. As Lovato is a female celebrity, one would expect that her mental breakdown would have fundamentally damaged her career. Unexpectedly, however, the star has opted to make her diagnosis with a self-disorder central to her celebrity self-fashioning, as I will argue in the next section. Instead of transforming her mental illness

into a 'chronic condition', so to speak, that would have structurally undermined her celebrity, Lovato's strategy has ensured that she is perceived as a self-confident artist and a successful entrepreneur of self-care.

The rehab princess: a narrative of self-transformation

In the aftermath of Lovato's breakdown in 2010 and entry into treatment, the tabloid press emphasized the contrast between her former image as a successful Disney starlet and her new image as a 'girl in crisis'. One website, for example, identifies her as the 'fallen Disney Channel princess' (*Wonderwall*, 2011); and in a similar vein, the *Daily Mail* observed a transformation from 'a bright and breezy Disney star' to a 'troubled teen' (*Daily Mail*, 2010). The media seemed particularly fascinated with Lovato as a 'crash-and-burn girl', defined by Sarah Projansky (2014) as 'the can-do girl who has it all, but who – through weakness and/or the inability to live with the pressure of celebrity during the process of growing up – makes a mistake and therefore faces a spectacular descent into at-risk status' (p. 4). Some celebrity watchers began to list Lovato with other 'celebrity train wrecks' such as Britney Spears and Lindsay Lohan (Malkin, 2010), predicting structural damage to the star's career. It was clear that besides the celebrity herself seeking professional help, another intervention was required in order to save her cultural status.

In the ideological field of tensions in which celebrity narratives are produced, the tabloid press often sets the tone in the audience's response to a star's breakdown (cf. Fisher, 2011; Holmes, 2015), but the stars themselves have the power to talk back: they can decide to protect their privacy,² to object to gossip or to confess. Lovato did far more than merely attempt to salvage her reputation: she embraced her mental struggle and diagnosis with bipolar disorder and incorporated them into her celebrity narrative. This process of rebranding was initiated by a series of public confession. Barry King (2008) observes that the confessional mode of the celebrity television interview, in particular for stars whose status is at risk, is 'largely a process of persona affirmation' – a performance that centers on 'self (or product) promotion, image repair and damage control' (p. 122). In Lovato's (2011) case, damage control took the form of YouTube clips in which she confessed that she had spent time in 'rehab' and was dealing with 'issues' that 'many girls of all ages' are dealing with; appearances in popular television shows to 'talk breakdown' (Fowler, 2011) and a narrativization of her recovery in the television documentary *Demi Lovato: Stay Strong* (*Stay Strong*, 2012). Narrativization, according to Thompson (1995: 62), is a very effective *modus operandi* of ideology, as it legitimizes and unifies a series of events by embedding them in a coherent story, while glossing over ideological contradictions and inconsistencies. In this section, I focus in particular on the narrative of Lovato's documentary, as it is arguably the star's most extensive public confession, as well as her most elaborate attempt to rebrand herself by constructing a new 'story' of success.³ The narrativization of Lovato's recovery in *Stay Strong*, I argue, can be situated on three levels: it entails a narrative of private struggle, which authenticates her crisis; a narrative of diagnosis, which reifies and externalizes the cause of her breakdown; and a narrative of self-improvement and self-transformation, which recalibrates her celebrity image.

In terms of genre, *Stay Strong* combines elements of the concert documentary – musical performances; backstage scenes; tour bus footage – with the format of ‘therapy talk’ (Nunn and Biressi, 2010: 55). The therapeutic setting is evoked by close-up shots of Lovato in a spotlight chair confessing to an off-screen interlocutor. The star’s crisis is not only the topic of the documentary, but also determines its plot. In the opening section, Lovato confesses that, already as a very young child, she ‘wanted to be the next young superstar’.⁴ With her grueling work schedule of acting, recording and performing, she ‘did not have any time off’ and ‘just kept putting Band-Aid’s over her ‘issues’. Lovato hints at the possibility that her life, as a result, got ‘a little ... maybe ... possibly out of control’. She goes on to confide that she stopped eating, started ‘purging’ and ‘self-harming’, until an ‘intervention’ was required. The opening section ends with Lovato saying: ‘I just need to work to get it back’. What ‘it’ exactly is, remains unexplained, thus setting the plot in motion. The rest of the documentary revolves around the question of whether – or not – the singer will succeed in getting ‘it’ back.

In *Stay Strong*, Lovato’s struggles with the pressures of celebrity are visually enacted – as the first level at which her recovery is narrated. In a series of scenes, the viewer is offered an insiders’ perspective on her battle with bulimia and body image issues. The documentary follows Lovato as she attends a large, lively Thanksgiving dinner party with her family. Surrounded by family members filling their plates with food and eating, Lovato suddenly breaks down and says: ‘I feel uncomfortable’. The next scene shows the star in bed the next morning, feeling ‘sick’. She admits that she started to worry about her weight, but then corrects herself and points at the real reason of her distress: ‘Society puts pressure on people in the spotlight to look a certain way and to stay thin’. This enactment of Lovato’s struggles has the effect of authenticating her crisis, as the audience is offered a glimpse behind the façade of life in the spotlight – with its unrealistic beauty standards – and is made a witness to Lovato’s off-stage, very ‘real’ struggles.

A second level at which Lovato’s recovery is narratively performed is through her diagnosis with mental illness. As Lovato is filmed while giving a motivational talk at Timberline Knolls Treatment Center, she confides to her audience that it was at the Center that she ‘found out’ that she was ‘bipolar’. This confession is framed with images that appear to illustrate Lovato’s experience of being diagnosed and that invite a similar reading of the diagnosis from the viewer. The illustrations include images of medical textbooks being leafed through, with close-ups of a list of symptoms and isolated words, such as ‘bipolar’ and ‘illness’ moving along the screen. The effect of this particular audiovisual framing is that the illness is rationalized and externalized: bipolar disorder is presented as a medico-scientific phenomenon – a condition that is not inherent to the subject experiencing it, but that can be found in a medical textbook. The cause of the star’s breakdown and transgressive behavior, in other words, becomes exteriorized, as it can be medically explained.

On a third level, *Stay Strong* can be read as a narrative of self-transformation: it outlines the story of a star discovering her ‘true’ value as a celebrity and role model. This self-transformation is performed backstage as well as onstage, and is confirmed by Lovato’s voice over. A key scene is one in which the singer, in preparation for a performance, leads her team backstage in a joint prayer. Tellingly, she not only expresses the hope that ‘we do our best performance possible’, but also requests God to ‘take whatever

pain is inside these audience members [and] let them have fun tonight'. Another scene depicts Lovato onstage, performing; talking over these images, Lovato confirms that she 'wasn't given this voice just to sing', but that 'there is a bigger picture and that is to use your voice, inspire people and to get people through their day and problems and to pick people up when they are down'.

With that insight Lovato's confession ends, and so does her self-transformation: her ambition is no longer just to become a 'young superstar', as she once believed, but to help her fans through their problems. Moreover, it becomes clear that 'it', as referred to by Lovato in the first few minutes of the documentary – the 'it' she wanted to 'get back' – is the image of a young, professional, hardworking, success-oriented individual, fully in charge of her own career. Effectively, Lovato's televised confession functions as an instrument of neoliberal governmentality as described by Heidi Rimke (2000): in the act of public self-disclosure, the 'constructed and tailored narrativization of the self' essentially 'does the work of self-invention' (p. 70). Put differently, *Stay Strong* is a representation *as well as* a performance of a process of self-management, producing an updated, better 'self' for Lovato. The star has incorporated her 'at-risk' status into a 'can-do' narrative, thus rebranding herself, in the words of a *Rolling Stone* journalist, as 'pop's rehab princess' (Morris, 2013).

Other postcrisis performances reveal that *Stay Strong* is part of an ongoing celebrity health narrative. In interviews and public appearances, the singer frequently talks about the effects of growing up with 'the pressures to be thin' (Fowler, 2011). On her Twitter and Instagram accounts, she posts personal reflections on mental illness and body image issues, accompanied by 'body love' messages and hashtags (cf. Gill and Orgad, 2015: 330), such as #SelfLove, #RiseAbove and #Confidence. Medicalization of mental illness is also part of this ongoing narrative. Lovato frequently emphasizes that 'there wasn't anything wrong with me', but that she 'just had a mental illness' (Heiser, 2015) and that 'there's a medical reason for all of it' (Michelle, 2012). Her bipolar disorder is invoked as an external cause that, in retrospect, explains behavior unbecoming to her image as a confident young woman who is 'in control' of her life and career.⁵ Thus, a structural distinction is made between the self and the disorder that affects it. Finally, Lovato's narrative of self-transformation – from a Disney starlet to a celebrity who embodies values such as resilience, empowerment and self-improvement – is also a recurring element in her postcrisis performances. Her ultimate goal, Lovato claims, is that 'her voice will inspire others' (MacMillen, 2015) and that 'all of my fans [will leave] feeling empowered' (Toomey, 2014). This calling is confirmed by a structural slippage between her role as a vocal artist and her role as the voice of organizations that raise awareness of mental health issues.⁶

This recalibration of her image has found a willing resonance with her audience and has boosted her cultural power. Her experiences with mental illness have become a highly valued part of her celebrity persona. In fact, for *Time Magazine* Lovato's transformation into a mental health advocate was one of the main reasons to include the singer in the 2017 list of 'The 100 Most Influential People', as 'her courage, honesty and willingness to use her own experiences to help others', according to the magazine, 'are what make her a *true* star' (Huffington, 2017, emphasis added). Even more than before, the audience seems captivated by the glamorous image of a celebrity who is successful as a

singer, actress and role model; whose productivity is unwavering and who is in control of her career. The appeal of this celebrity health narrative is that it celebrates a neoliberal ideology of meritocracy. Precisely by overcoming crises and setbacks, and by being able to remain productive – even under the pressures of the media, the market and mental illness – Lovato becomes a shining example of the neoliberal, self-managing subject as described by Harris (2004): a ‘can-do’ individual who is ‘flexible, individualized, resilient, self-driven, and self-made and [...] easily follows nonlinear trajectories to fulfillment and success’ (p. 16).

In this sense, a feature article on Lovato published on the website of *Self* is particularly striking. ‘Experts stress’, the author argues in the context of the star’s recovery, ‘that it’s possible to manage bipolar disorder’ (Miller, 2016). Subsequently, he drives the point home by presenting Lovato as the embodiment of successful self-management: ‘Demi Lovato is an excellent example. By coming forward about her condition, she is helping eliminate stigma, educating the public and helping people see that it is possible to lead a successful life with bipolar disorder’ (Miller, 2016). Revealingly, Lovato is praised not so much because she demonstrates that it is possible to live *well* despite her diagnosis with bipolar disorder, but because she is living proof that one can live *successfully* with a mental illness.

Realize your worth: the celebritization of self-care

Self’s article on managing bipolar disorder already indicates that Lovato’s celebrity health narrative has market potential. Such a narrative can be essentially adopted and marketed as a lifestyle product that helps to sell a company’s message, which, in the case of *Self* (2017) – which presents itself as the ‘ultimate wellness resource’ – is that the ‘motivated woman’ can ‘reach any goal by tapping into her greatest source of strength, [namely] herself’. That a celebrity’s image can be turned into a commodity is, in itself, nothing new. According to Olivier Driessens (2013), commodification is one of the pillars of celebritization, as celebrities ‘produce and help to sell other commodities’ (p. 643). Put differently, the celebrity is a ‘commodity fetish’, embodying a quasi-natural and self-evident surplus-value: by buying the products the celebrity promotes and endorses, the audience can consume the ‘mystical and quasi-religious status’ attributed to the celebrity (Redmond, 2014: 54). In the case of the article in *Self*, the inclusion of Lovato’s story of successful recovery contributes to the journal’s commodity-sign with its connotations of wellness, achievement, confidence and empowerment. Through buying the issue, reading the article, and taking Lovato as an example, a reader can quasi-magically become an ‘active woman’ who is able to tap into her ‘greatest source of strength, herself’.

This commodification of Lovato’s story is part of what Micki McGee (2005) calls ‘self-improvement culture’. Self-help and self-improvement have always had deep roots in American culture and society (cf. Dolby, 2005), but according to McGee, self-improvement culture fosters a specific idea of the self. In line with insights into about neoliberal meritocracy and its ideal, self-managing subject, McGee (2005) observes that individuals in contemporary society are incited, paradoxically, to discover their own, inherent talents, while simultaneously being stimulated ‘to invest in themselves,

manage themselves, and continuously improve themselves' (p. 12). This endless work of self-assessment and self-betterment results in what McGee (2005) describes as a 'belaboured self' that 'presents itself as overworked both as the subject and the object of its own self-improvement' (p. 16). Ultimately, as the criteria for improvement become 'ever more materialistic and aesthetic' (McGee 2005: 22), the incentive to continuously self-invest is harnessed in the service of the market: the consumption of lifestyle products becomes the preferred technique of self-improvement. The commodification of Lovato's narrative of reconfirmed celebrity, then, fits squarely within the rise of the market of self-esteem or self-confidence as signaled by scholars such as Sarah Banet-Weiser (2014) and Gill and Orgad (2015). Within this market – as has become clear in the second section of this article – girls and women are offered symbolic goods that supposedly improve their self-esteem and provide them with the 'confidence' required to realize their full potential.

In the case of Lovato, however, something is added to the ideological formula of the commodity-sign. Here self-improvement (in the context of daily life) is not only connoted with success and celebrity, but also with recovery (in the context of treatment after a mental crisis). This adds another layer to her celebrity health narrative, as it aligns it with a widespread 'therapeutic culture' and its popular discourse of a 'trauma', 'empowerment', 'personal goals' and 'self-care' (Illouz, 2003: 156–177; Nunn and Biressi, 2010: 53–54; Yates, 2011). The merchandise strategy that characterizes Lovato's celebrity health narrative, I argue in this section, can thus be interpreted as a 'celebritization of self-care' – her comeback story is repackaged through the self-improvement industry and sold as mental health advice. This results, as will become clear, in an ideological coalescence of the competitive individualism of celebrity culture; the fostering of emotional well-being; and recovery after a mental crisis. A closer look at Lovato's (2013) motivational book *Staying Strong* – as an example of merchandise that can be situated in the tradition of self-help – brings out how this celebritization of self-care takes shape.

Accompanied by a journal edition with blank pages for the reader to fill (Lovato, 2014), *Staying Strong: 365 Days a Year* is a motivational book that supplies its reader with a full year of daily inspirational thoughts.⁷ Every day starts with a quote from a variety of sources, ranging from Hollywood icons and philosophers to pop music lyrics and Buddhist philosophy. These quotes form the starting point for a single-paragraph reflection by Lovato herself, followed by a personal 'goal' for the reader. The overall aim of these daily tasks appears to be improving personal psychological well-being, varying from 'Do one thing that someone has always told you that you couldn't', to 'Let something or someone toxic that you've been holding on to go' (pp. 201, 198).

Two narrative threads dominate the book. The first one is made up by the celebrity's biography. Through her daily reflections, Lovato remembers being 'determined' as a 5-year old to become 'the next Shirley Temple' (p. 215); experiencing abuse as a teenager (pp. 25, 57, 236); struggling with 'body-images' (p. 117); a 'mood disorder' (p. 30) and 'bulimia' (p. 400); engaging in substance abuse (pp. 31, 51, 286); entering treatment (pp. 84, 238); being diagnosed with bipolar disorder (p. 50); starting recovery (pp. 176, 256, 294); entering sobriety (p. 103); becoming an advocate for mental health awareness (pp. 240, 304) and finally, realizing that there is a 'bigger purpose' – using her voice to 'help people get through their problems' (p. 399). This narrative reproduces the biographi-

cal account offered in the *Staying Strong* documentary and affirms Lovato's image as successful, resilient and self-made, in both her personal and professional life.

The second narrative thread is addressed to the readers and outlines a project of self-transformation to which they are expected to commit. This project is situated squarely within the self-improvement culture as described by McGee, and is characterized by the same paradoxical relation between self-acceptance and self-improvement. On one hand, *Staying Strong* conveys the message that accepting oneself is fundamental for the reader's emotional well-being. Lovato repeatedly calls upon her readers to have trust in the belief that they are 'worthy' (pp. 153, 279, 283). Accordingly, they are advised 'to stay true to who you are' (pp. 99, 245, 380). The ground for this belief in one's inherent self-worth, the singer explains, is that 'each one of us' is born with an 'inherent power' that is 'not only meant to change our lives but the greater world around us' (pp. 184, 188). The idea is that, in principle, every individual is self-sufficient, as 'you have everything you need inside of you to live the life you have always dreamed of' (p. 38).

However, in contradiction to the above, *Staying Strong* also emphasizes that the individual's inherent power is *not* enough to live a successful life. To bring talent to fruition, ambition, dedication and, most importantly, hard work are required. Lovato reminds her readers with great insistence that 'you have to work hard to get anything in life' (pp. 226, 239, 328). This 'hard work' also includes work on the self: every day, readers should 'set an intention to better yourself' (pp. 185, 251). The singer presents her own success story as an example to follow, claiming that she 'continually [strives] to be better' (p. 123) and that all her achievements result from this. She states: '[E]verything I've achieved in life came to me because I knew what I wanted and I went for it wholeheartedly' (p. 106).

Thus, the ideological gist of *Staying Strong* is that self-acceptance comes through ongoing self-investment: one's inherent worth can only manifest itself by working hard to improve oneself. 'Success is becoming who you really are' (p. 241), Lovato states. Becoming who you are, in other words, is becoming better than you were; 'the best version of yourself that you can be' (p. 257) – more ambitious, more determined and more accomplished. The ambiguity of the goal presented for May 6 captures the dilemma: 'Take a moment to realize your worth' (p. 157). One reading of this goal is that it is a reassurance that all individuals can feel confident about themselves, as they have an inherent self-worth. On another level, however, it can be read as an imperative to maximize one's potential: without the hard work of self-realization, 'your worth' will remain limited forever.

As *Staying Strong* interweaves biography, general life advice and the story of her recovery, 'success' comes to mean at least three things: fame, emotional well-being and successful recovery from a mental crisis. This is an example of semantic coalescence that, as has been pointed out before (Yates, 2011), occurs when celebrity culture and therapy culture intersect. Ideologically, all forms of achievement are thereby 'standardized' (cf. Thompson, 1995: 64): they are presented as ultimately the same and all attainable via the same strategy of self-improvement: '[Think about] how you can continue to improve and enrich your life each and every day', Lovato maintains, '*whether you are in recovery or not*' (p. 253, emphasis added). The popstar further explains that general emotional well-being requires the same attitude as making it through recovery. In the end, well-being in life is apparently not very different from being an artist – the star suggests

that ‘we’re all artists who have been given the inherent power to create and shape our own lives’ (p. 217). However, what is glossed over in this ideological parataxis of celebrity, well-being and recovery, is the way in which the competitive entrepreneurialism of celebrity culture becomes the model for all other types of achievement. ‘Making it’ as a celebrity is short-circuited with ‘making it’ in life generally – and subsequently with ‘making it’ through recovery.

The celebritization of self-care presents any type of ‘doing well’ as the result of personal ambition and responsibility, and conversely, any type of limitation as the result of individual failure. Indeed, the emphasis on one’s own responsibility in *Staying Strong* is striking: ‘Your life today is what *you* make of it’ (p. 34).⁸ At one point, the singer invokes the image of the ‘ladder of success’ – a ‘classic meritocratic trope’, as pointed out by Littler (2013), because ‘it is a device which can only be used individually’ (p. 54). Lovato’s (2013) use of the image stresses the strategic element: as we climb up ‘our personal ladders of success’ (p. 171), she maintains, we should not let others interfere: ‘Is there someone in your life who keeps trying to get in the way of your success? It might be time to have a talk with them or let them out of your life’ (p. 191). This is the ethos of neoliberal meritocracy: success is the result of competitive self-realization, while any lack of success – by the same logic – is a consequence of individual failure. Although this is an ethos that may find a ready ear with many, it is bound to be unhelpful for those struggling with social inequalities, economic disadvantage, or, as in this case, chronic mental illness. Talia Weiner (2011), for example, has argued that discourses of self-management are highly problematic in the context of bipolar disorder, as patients themselves experience the ‘managing self’ as profoundly elusive and discontinuous. Meritocratic ideologies can even have counterproductive and harmful effects in the context of mental illness: Nicolas Rüsç et al. (2010) found that the internalization of meritocratic worldviews in persons with mental illness (such as bipolar disorder) results in self-stigmatization and increased feelings of guilt and shame.

The ideological connection established in *Staying Strong* between celebrity, psychological well-being and recovery is indicative of a broader strategy to promote celebrity merchandizing as a therapeutic instrument. An example is the 2016 video game app *Demi Lovato: Zombarazzie Adventure*, in which the player is supposed to ‘help Demi and her dog slay hoards [sic] of Zombarazzie (Zombie-Paparazzi)’ (*Zombarazzie*, 2016). The game may seem to be simply a celebrity-themed tile-matching puzzle game, but Lovato claims that it can also be considered as a self-help tool. Distraction in the form of mobile phone apps, she maintains, can be beneficial for individuals with self-harming tendencies. *Zombarazzie Adventure*, according to Lovato, has been produced with this in mind: ‘It’s cool to be able to come out with games for phones that can maybe be a distraction for someone when they’re thinking about doing something that can be harmful to themselves’ (Mizoguchi, 2016).

A similar blurring of boundaries between merchandizing strategies and therapeutic discourses manifests itself in the advertisement campaign for *Devonne*, Lovato’s skin care line. The advertisement text to the *Devonne* (2017) products underlines that, for the star, ‘skincare is self-care’, continuing: ‘It is an act of self-worthiness and a vehicle on the road to longterm love’. Again, celebrity culture, self-improvement and recovery (‘the road to longterm love’) are fused into symbolic goods that offer consumers the idea of

overall success and mental stability, as the *Devonne* line is promised to ‘bring out the best version of you, with the best version of your skin!’ (*Devonne*, 2017). Such merchandise urges consumers to become ‘belaboured selves’, as McGee (2005) would argue, engaged in an ongoing project to ‘realize’ their inherent self-worth with the tools offered to them by the celebrity industry.

Conclusion: there is no finish line

The story of Lovato demonstrates the paradoxical cultural status of celebrities: they embody success, glamor and beauty; yet at the same time, society fosters a fetishistic fascination for their downfall. As Heather Nunn and Andrea Biressi (2010) observe, it is not just success and achievement that fuels the celebrity story, but rather ‘suffering, dysfunction or the personal flaw, once concealed but now revealed to the public’ (p. 53). In Lovato’s case, the narrative is driven forward by the threat that mental illness poses to her ongoing success. Indeed, gossip magazines and celebrity news sites eagerly anticipate new crises, resulting in items with suggestive titles such as: ‘Fears that Britney Spears and Demi Lovato Will Go into Meltdown’ (*CelebsNow*, 2012); ‘Demi Lovato Headed for Another Meltdown’ (*CelebDirtyLaundry*, 2016) and ‘Uh-oh! Demi Lovato Had a Major Meltdown on Twitter’ (*SHEmazing*, 2016). To a certain extent, then, Lovato can be seen as yet another example of a ‘spectacular girl’ as described by Sarah Projansky (2014): a female celebrity-at-risk that provides audiences with an ongoing media spectacle, much like Britney Spears, Lindsay Lohan or Courtney Love.

However, as has become clear, Lovato does present an exception to this rule. Unlike celebrities such as Spears, Lohan or Love, whose postcrisis status has become fundamentally precarious, the ever-present risk of relapse no longer poses a real threat to Lovato’s success. On the contrary, the star has managed to rebrand herself as the embodiment of confidence, self-improvement and recovery by incorporating her crisis, diagnosis and treatment into her celebrity image. This ‘celebritization of self-care’ results in a conflation of celebrity, general emotional well-being and recovery from mental illness. As such, it reproduces a hyper-individualized, neoliberal ideology of meritocracy that presents all forms of achievement – including recovery from mental illness – as the result of competitive individualism. It is this process, as I hope to have shown, that explains why her narrative meets with more sympathy and success than the stories of some of her famous co-sufferers: the need for self-care and the project of recovery from mental illness do not undermine her image as a productive and enterprising young star, but, on the contrary, they form the core values of that image.

The cultural implications of this celebritization for self-care reach beyond the specificity of the Lovato case, as it points to a more widespread, yet unexplored cultural tendency in celebrity culture. Other examples of stars who have actively, structurally and successfully incorporated their mental struggles in their celebrity narrative, for instance, are Lady Gaga (post-traumatic stress disorder), Brooke Shields (postpartum depression) and Portia de Rossi (anorexia). Some researchers point out that parasocial interaction with celebrities who, like Lovato, have disclosed their health issues may reduce social distance and negative stereotypes (Casey et al., 2003; Wong et al., 2017). However, celebrities’ confession and public affirmation of their diagnosis, as has become clear, can

signify much more than merely a call for awareness or a process of damage control (cf. King, 2008): these are instances of a fundamental recalibration of the celebrity image in terms of a successful care for the mentally vulnerable self. Mental health self-management, in other words, has been harnessed in the service of what one might call ‘celebrity image management’ (Mendelson, 2007).

A further, closely related implication of the story of Lovato is that it sheds a new light on the gendered nature of celebrity narratives of mental illness. After all, the star’s ‘recovery’ as a celebrity breaks radically with the tendency to associate the psychological turmoil of male stars with purposiveness, strength of will and artistic authenticity, but to equate the mental breakdown of female celebrities with instability, failure and hysteria. Intriguingly, Lovato, as a female artist, manages to embrace her mental illness while continuing to be perceived as ‘in control’, highly productive and self-directed – notably, without her femininity being publicly questioned. Although it is still an open question whether or not Lovato’s recovery remains an indirect demonstration of stereotypical hetero-masculine (or, alternatively, postfeminist) values, it is clear that the traditional story of a celebrities’ mental breakdown is not as straightforwardly gendered as some consider it to be.

A final insight that can be considered likely to be more generalizable beyond the case study of Lovato pertains to the ideological connection between neoliberal meritocracy and the sickscape of mental illness. The symbolic forms circulated through the celebrity health narrative of Lovato map out the contours of a general sickscape of bipolar disorder that turns out to spectacularize and affirm the discursive structures of late capitalism. The cyclical nature of the disorder ensures there will be new depressions and crises, necessitating constant self-monitoring and self-management strategies. In a way, therefore, the celebrity’s success is revealed to be of a cyclic, bipolar nature as well: the suggestion of body image issues, lack of self-worth and loss of self-control are essential for her success, allowing the star to confirm – again and again – her brand’s core values: confidence, effort, achievement (‘making it’) and self-improvement. In her book *Bipolar Expeditions: Mania and Depression in American Culture*, Emily Martin (2007) argues that in ‘corporate America’ in general, ‘manic depression’ can even be regarded as an ‘asset’, as the bipolar individual is considered energetic, adaptive, continuously changing in innovative ways – in short, ‘a creative chameleon’ (p. 216). In her documentary *Stay Strong*, Lovato confirms that ‘work’, indeed, never ends, as recovery ‘takes constant fixing’. She goes on to connect this insight to her career experiences and states that ‘there is no finish line’: there will always be ‘one more tour, one more album, one more movie’ to make. Tellingly, the opening scene of the more recent documentary *Demi Lovato: Simply Complicated* (2017) finds the now 25-year-old star confessing that she was, in fact, ‘on coke’ during the production of her first documentary *Stay Strong* (2012) – but that she is now truly focused on her recovery. Lovato’s public response to her relapse in 2018 appears to match this pattern once again: responding to speculations in the tabloid press, the singer maintains that she is ‘working hard on [herself]’ (Ivie, 2018). The spectacle of neoliberal individuality that Lovato offers, then, is one of productivity without end and constant self-fixing.

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Notes

1. In a similar vein, Bunton (1997) identifies a dominant discourse of ‘popular health’ and Harper (2009) points to a ‘cultural politics of madness’. For reasons of clarity and consistency, I prefer the term ‘sickscape’, a term which I loosely borrow from Maturo (2010: 237–238).
2. Compare Catherine Zeta-Jones’s reluctance to be the ‘poster-child’ for bipolar disorder (Beck et al., 2015: 51–63).
3. In the more recent documentary *Demi Lovato: Simply Complicated* (*Simply Complicated*, 2017) mental illness appears to be pushed into the background of Lovato’s celebrity narrative, with more attention paid to her struggle with substance addiction and her eating disorder.
4. All following quotes from Lovato in this section, unless otherwise indicated, are taken from the documentary *Stay Strong* (2012); all transcriptions are by me.
5. With statements, such as ‘Oh, my God, it’s not me, it’s my brain’ (Morris, 2013), Lovato even seems to suggest that bipolar disorder is in fact a disease of the brain and therefore not different from a purely somatic illness. In another interview, she states: ‘My “diabetes” happens to be my mental illness. And when I work out, when I take my therapy, when I take my medications, for me, that’s my treatment plan, that’s my insulin’ (Peachman, 2014). Although the idea that bipolar disorder is a brain disease is popular in its current ‘sickscape’ (Maturo, 2010), it is far from being generally accepted in medical and psychiatric circles (Moncrieff, 2014).
6. That Lovato is the face of the *Be Vocal: Speak Up for Mental Health* campaign is an obvious example of this, as is the repeated suggestion that she has been given her singing talent ‘for a reason’: ‘If I can use my voice to speak to one person, or one family, then I’ve done my part’ (Toomey, 2014; cf. *MentalHealthy*, 2011).
7. All quotes in this section, unless otherwise indicated, are taken from Lovato (2013).
8. Cf. Lovato (2013): ‘Only you can reach your goals’ (p. 39); ‘Change comes from within, not from other people’ (p. 340); ‘Live life for yourself and everything else will fall into place’ (p. 287).

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