The last six months has witnessed one of the most active times in the history of philosophy of psychiatry. The 40th volume of the INPP series was published. The seminal (and weighty!) Oxford Handbook of Philosophy of Psychiatry hit the shelves. We have seen increased attention paid to conceptual issues in mainstream psychiatric journals. We have had several conferences to honour the centenary of Karl Jaspers’ General Psychopathology. Colleagues came to these from all corners of the globe—from Australia to the USA and from South Africa to Chile—with attendance always impressively high; indeed, our second UK conference on Philosophy and Psychiatry was so well attended that the venue’s capacity was exceeded! All in all, 2013 has been our discipline’s annus mirabilis. It is refreshing that our small contribution has also been well received: we take encouragement from your comments about the newsletter as we end our 3rd year as editors on a high note.

**Book Reviews**


Monumental—this is perhaps the word that best describes the new Oxford Handbook of Philosophy and Psychiatry, about which you can watch an interview with lead editor Professor Fulford (pictured above left) by clicking on the book’s front cover image.

Such is its scale, that any short review like this one will struggle to do it justice. For this reason, I make no apologies for opening with my own perspective, which very much reflects my role as a forensic psychiatrist. And indeed there is much within to excite one in my field. From Daniel N. Robinson’s treatise in Section I on ‘The Insanity Defence as a history of Mental Disorder’, to Hanna Pickard’s ‘Responsibility without Blame: Philosophical Reflections on Clinical Practice’ in the final section (VIII), plus a great deal in between. Correspondingly, I do not doubt that a psychiatrist of old age, say, would be similarly enthused by Julian C. Hughes’ chapter on Dementia. Or that a child and adolescent psychiatrist would have his or her interest piqued by R. Peter Hobson’s ‘Autism and the philosophy of mind’. In the same vein, the addictions specialist would surely home in on Owen Flanagan’s ‘Identity and Addiction: What alcoholic memoirs teach.’ I could go on, but I think my point is made: whatever your psychiatric bent, you will almost certainly find something to whet your appetite in The Oxford Handbook of Philosophy and Psychiatry. Which is frankly unsurprising, given that this long awaited reference resource for what is undoubtedly an exciting and ever expanding field comes in at a whopping and comprehensive 1322 pages!
Enough of the adulation—it is time to analyse this volume more critically. Let’s begin with the positives. First, the content. It is both extensive and authoritative: after an introduction that considers what the next hundred years might hold for the discipline, the book delivers eight sections, each of which has its own introduction. The opening section is History. Here, arguments are made asserting the interdependence of the two facets of our discipline—I quote, “Psychiatry cannot function without philosophical pre-supposition and reflection. Philosophy, meanwhile, is impoverished without recognising the forms and limits of the human mind as exhibited in psychopathology and in the onset and recovery from mental illness and disorder”—an inter-relationship well illustrated by subsequent chapters. Section II, Context of Care, examines current assumptions about psychiatry and mental health systems, considering amongst other topics the legacy of prejudice in psychiatry, the dangers of medicalisation and the subtleties distinguishing cure from recovery. Section III (Establishing Relationships) looks at therapeutic relating, how inter-subjectivity influences psychopathology, the problem of other minds and the empathic foundations of clinical knowledge. Section IV, called Summoning Concepts, opens with reflection on how humans beings need concepts. What follows is a multi-faceted re-examination of the complex concept of mental disorder. Section V covers descriptive psychopathology, considering anxiety, depression, body image disorders, delusions and thought interference phenomena. Assessment and Diagnostic Categories are covered by Section VI—the introduction to this section puts it thus: “philosophy of psychiatry overlaps with intellectual territories of philosophy of science, hermeneutics, phenomenology, narrative theory, epistemology, philosophy of mind ... [the] essays which make up this section illustrate many of these challenges, particularised into a dynamic interaction between clinical problems and philosophical problems.” Prodromal psychosis, mania, depression, autism, dementia, addiction and personality disorder all feature. Section VII focuses on Explanation and Understanding and is founded on the premise that psychiatry can claim to be a scientific discipline, but one that requires a more complex philosophical underpinning. This philosophically more difficult section covers the causation of mental illness, whether mental disorders can be natural kinds, biological reductionism and the consequences of operationalised diagnosis. Finally, Section VIII, Care and Cure, looks at how clinicians can benefit from thinking more philosophically, with concepts like Blame and Autonomy put under the microscope. The second major strength of this impressive work is its supplementary web based resource of first hand personal narratives and descriptive clinical accounts of people’s diverse experiences of mental disorder, a rich vein of material that humanises the prime conceptual content. Finally, although it seems churlish to close with a negative, here goes: as I discovered when lugging a copy back home from the Philosophy Special Interest Group’s conference in Edinburgh, weighing in at 2¼ Kg the hardback copy of the Oxford Handbook of Philosophy and Psychiatry is just far too heavy! Perhaps it’s time I invested in a Kindle?

Dr Steve Ramplin (Consultant Forensic Psychiatrist, Tees Esk and Wear Valleys NHS Foundation Trust)

One Century of Karl Jaspers’ General Psychopathology, Giovanni Stanghellini & Thomas Fuchs (Editors), Oxford University press, 2013

The 40th title in the International Network for Philosophy and Psychiatry book series arrived just in time for Karl Jaspers’ centenary. As expected, it is dedicated to his philosophy and contribution to psychopathology. It is also clear that the editors have successfully gathered together a range of contributors with expertise in different areas of philosophy. From the outset, it is evident that the book takes its subject seriously: after an introduction to Jaspers’ ideas, which rectifies some misconceptions, the editors define psychopathology in both positive and negative terms; believers in psychopathology as a form of symptomatology or nosography will be disappointed. The book itself is divided into three sections.

The first section focuses on the historical and cultural background, in which a wide range of topics are discussed, such as phenomenology and its relation to psychopathology and reactions to General Psychopathology. Of interest here is Jaspers’ critique of psychoanalysis, which was also a topic of discussion in a recent conference at the Royal Society of Medicine.

The second section looks at methodological issues and concepts. Different topics are discussed, from Jaspers’ view on form and content to his relationship with neuroscience. I especially found interesting the approach on explaining and understanding, with its new slant on the notion of causality. The final section covers clinical concepts, such as self, psychosis, mood and delusional atmosphere, with the latter detailing ideas Matthew Ratcliffe recently presented in a conference.

All in all, I found this book a great accomplishment. The reader can use it as a reference, read each chapter individually or study the volume as a whole. If you are at all interested in Jaspers then this book is a must read.

Dr Abdi Sanati (Consultant Psychiatrist, North East London NHS Foundation Trust)
Nikolas Rose is professor of sociology and head of the Department of Social Science, Health, and Medicine at King’s College London. Joelle M. Abi-Rached is a PhD candidate in the history of science at Harvard University. In ‘Neuro: The New Brain Sciences and the Management of the Mind’ they critically examine key developments—theoretical, technological, economic, and biopolitical—of contemporary neurosciences, calling for an open dialogue between human and brain sciences. They provide a well-informed and detailed analysis of the emergence of the neuroscientific paradigm, while setting a series of questions and problems that are important to these debates, including: have advances in brain science really reshaped the ways we are thinking of ourselves, as individuals, as a species and as societies? What is the actual meaning of the proliferation of research in neurobiology? What do all the images generated by brain scanning tell us about ourselves? What are the socio-political consequences of the radical shifts in the ways we consider our mind systems? What is the significance of the very fact that the brain is now anatomized at a molecular level, conceived as dynamic and plastic, rather than static and modular? What are the assumptions of new experimental setups and therapeutic technologies and how are they linked with conceptions of mental illness and attempts to reduce its burden?

Of course, the authors are clearly not the first to recognize these problems, but, as far as I know, the debate has so far been characterized by two views that are opposed to each other. On the one hand, we’ve got the neuro-enthusiasts, who tend to endorse the ‘new’ sciences of the mind and brain, without critically examining some of their conceptual underpinnings and problematic relationships with other fields. On the other hand, we’ve got the neuro-sceptics who won’t hesitate to a priori dismiss the neuroscientific knowledge, disbelieving or ignoring the data, or instead speculating on the ways the data is produced within the sociopolitical milieu. I think both extremities miss the point of critically examining the very fact that mental activity is indeed situated in complex networks of neurons that are dependent on factors that are external to the individual’s boundaries. I am not talking only about the environmental inputs that can supplement, modify and shape a wide range of cognitive acts—I also allude to the idea that we should beware of the multiform cultural and socio-political configurations that can generate radically divergent conditions of application of the basic concepts that we sometimes mistake for naturalistic, unshakeable truths.

Neuro is not a philosophical book in that it does not examine the metaphysical and ontological status of the brain sciences, with their contemporary conceptions of the neuromolecular, the plastic, and the social brain. What the authors do is a sociological work of meticulously reading the data and examining the implications of such important developments, such as those that have started to pose questions on the level of policy and practice in many complex areas, ranging from child rearing to brain ageing. They avoid defensive generalizations and refrain from popular false beliefs that human neurobiology and neurosciences can ultimately set the conditions in the lives of humans in deterministic ways.

What they achieve is twofold: First, they track down, on different explanatory levels, the conditions of what they call ‘a number of key mutations—conceptual, technological, economic, and biopolitical—that have enabled the neurosciences to leave the enclosed space of the laboratory and gain traction in the world outside’. Secondly, they offer a different response from the social sciences by engaging directly with the truth claims and the challenges posed by contemporary neuroscience, stating that ‘we need detailed social research to map out interconnections between pathways for the production of truth and hopes about the generation of profit that have shaped investment, research priorities, and the interpretation of evidence and its implications’. They remind neuroscientists that brains do not exist in individualized isolation and they also remind social scientists that more than a century of empirical research cannot just be ignored and disregarded.

Michalis Kyratsous (CT1-3 Psychiatry, East London NHS Foundation Trust)
Conference Reports

With Jaspers’ centenary prompting celebration within the Philosophy and Psychiatry world, it has been a busy conference season—fortunately, our roving reporters had every conference well covered!

Current and Future: Applications of Phenomenology in Psychiatry (Durham, 20 July 2013)

The first conference of the Jaspers’ centenary was held in Durham, and it proved a trip worth taking as the conference was of a high standard with distinguished speakers—all the more remarkable because the event was free.

Giovanni Stanghellini opened the conference with a speech titled: Incomprehensibility: A New Ethics for Psychiatry. I was impressed by the way in which philosophy, ethics and practice were related to each other in this lecture, which motivated me to read the related chapter in ‘One Century in Jaspers’ General Psychopathology’, where the arguments are given in more detail.

Subsequently, Nev Jones made a case for more people with lived experience to contribute to phenomenology, as occurs in studies on race and gender. Drawing on works of Husserl and Adorno, she asked how long phenomenology can go without first person experience. I should add I heard her again in the Maudsley Philosophy Group, when it was pointed out by Dr Anthony Fry that in reality psychiatrists suffer from mental illness more often than the general population, so perhaps some of the necessary insights could come from within.

There was an also interesting talk by Tim Thornton on description and explanation, and how this topic connects Anglo-American philosophy with phenomenology.

However, the highlight of the day was a phenomenological analysis of auditory hallucinations by Matthew Ratcliffe. First, he provided a critique of the classic account of auditory hallucinations, which does not engage in the phenomenological context within which the voices happen. Using Husserl’s phenomenology of anticipation and fulfilment he not only gave an account of the anxiety associated with auditory verbal hallucinations, but also provided an amazing analysis of delusional atmosphere.

All in all it was an informative day that left the audience with lots to ponder—I look forward to future conferences by Durham University.

Dr Abdi Sanati (Consultant Psychiatrist, North East London NHS Foundation Trust)

Conceptual Issues and the DSM (London, 23 July 2013)

This fascinating symposium was organised by London’s Kings College Philosophy and Psychiatry Forum.

John Sadler began with an account of how DSM-5 reached its current state. He argued that while all diseases are value-laden, particular criteria have particular values. More than being a mere classification system, DSM is a de-facto mental health policy document and it is important that its values and ethics are scrutinised. Sadler criticised this process, for example by noting the disparity between the number of Google hits and peer reviewed articles on a topic.

Katherine Angel’s talk on female sexual dysfunction and its history from Freud to DSM was also interesting in many aspects. For example, it showed that to fully understand DSM we have to go back to the Freud wars. The negative impact of Freud’s phallocentrism on DSM’s categories made a chilling spectre.

Natalie Banner used homosexuality as a litmus test, as it should be excluded from any definition of mental disorder. Her account of the history of the medicalization of homosexuality showed it was not de-medicalized because of new studies or good science. Rather, it was argued that the ‘fact’ side of all definitions does not successfully exclude homosexuality, and the ‘value’ side is dependent on society. In the end all definitions failed and the question was raised as to whether we should abandon attempts to define mental disorder and move from definition to practice.

In an engaging talk, Elselijn Kingma discussed naturalism and normativism in health and disease. She questioned if naturalism provides a value free picture of nature and argued that scientific process is subject to value influences.

Werdie Van Staden’s lecture focused on the “disreputable proliferation in the DSM”. Pointing out fading boundaries between mental disorders and problems of living, he highlighted concealed interests, such as those anchored in political, cultural or financial themes.

The final lecture by Grant Gillett looked at how medically unexplained symptoms challenge ideas of Descartes in the way that they provide a case where the person’s knowledge of the self is actually mistaken and less accurate than how others see him. All in all, a fascinating day.

Dr Abdi Sanati (Consultant Psychiatrist, North East London NHS Foundation Trust)
Change did indeed happen—and that was before the conference had even started. As the third of three symposia held across the UK this summer marking the centenary of Karl Jaspers’ General Psychopathology, the conference as originally envisaged was cancelled due to concerns about the under-representation of women, minorities and service users. The replacement conference, co-organised by Bill Fulford and Matthew Parrot in close exchange with service users from the UK and the US, then took a rather unusual format for academic conferences, featuring only very brief presentations of pre-circulated papers and leaving plenty of time for discussion and group work.

Also, the organisers had seen to keep the group of attendees small, as well as varied, so in the end a group of approximately 50 people, comprising psychiatrists, clinical psychologists, academic philosophers and service users with and without an academic background, intermingled to discuss ‘how philosophy and psychiatry working together can make change happen in philosophy, practice, the sciences and internationally’. This in itself would already have been an ambitious agenda. But the set-up of the conference added an important point, namely the integration of (the perspective of) service users.

In addition to making the agenda even larger and more complex, this move simultaneously restricted the scope of the debate by silently suggesting that the change that ought to happen is the integration of (the perspective of) service users, not only in psychiatric practice but also in academia. To this end, the conference achieved a lot by being performative—i.e. by practising rather than only abstractly examining the integration of various perspectives. Whilst this did not happen without feelings of uneasiness on all sides, the impression that there was a genuine and shared interest in enhancing understanding of and improving services for people suffering from mental illness prevailed. There was a shared interest in making sense of experiences and in exploring and interrogating what is considered normal. There was also the shared conviction that bringing together different perspectives can be a way to work towards enhanced understanding and improved services.

Since these perspectives range from theory (analytic philosophy, phenomenology, critical theory, etc.), to psychiatric practice (psychiatrists, psychologists, nurses, social workers, policy makers, etc.), and experience (patients, family and loved ones), the question of how to integrate them is especially relevant. In particular, as the workshop made clear, there are some pitfalls that need to be avoided. First, a ‘we-versus-they’ frame of thinking does not help. Theory versus practice, philosophy versus psychiatry, experts by training versus experts by experience: such antagonisms obscure the shared interests and aims and get in the way of collaboration instead of fostering it. Secondly, despite the general aims being shared, it is important to also acknowledge and value the differences and different interests. For instance, emancipation of service-users in academia is different from emancipation of the patients’ perspective in psychiatric practice, and the interests of a (not at the same time academic philosopher) service user and an academic philosopher are legitimately different. Also, the role of involvement in academic work on mental illness needs to be examined. In this respect, it was rightly pointed out that there is a lot of discrimination against academics who have personal experience of mental illness based on the assumption that involvement and personal experience prevent high quality academic work. We think all attendees agreed that this is clearly wrong. Yet on the other hand, involvement and personal experience can equally not be the benchmark for high quality academic work on mental illness in general nor for good philosophy in particular. Of course some philosophy, especially philosophy of mind, can be quite removed from the experience of what it is like to suffer from a mental illness and from psychiatric practice. But also, (auto)biography is not yet philosophy. What is the role of philosophy in psychiatry then, what can it bring to it, and importantly, what can it take from it as well? Since philosophy is good at dealing with meta-topics/questions, some of the topics for philosophy of psychiatry could be ‘what is involvement and what is the first-person perspective?’ , ‘what role does personal experience have in dealing truly with a subject?’ and ‘can philosophy be involved or is it necessarily third-person?’.

Summing up, this conference has been a good start for making change happen by bringing people together and thereby providing the first step to get a true ‘multilogue’ off the ground. In order to overcome the above-mentioned pitfalls, however, it is important to address the question of how we can include all these perspectives whilst acknowledging different interests that are valuable in their own right.

Sanneke de Haan, Department of Psychiatry, Academic Medical Center Amsterdam, Sanneke.deHaan@amc.nl
Dr. Anke Maatz MA MD, Psychiatric University Hospital Zurich, anke.maatz@puk.zh.ch
It was splendid to see so many distinguished speakers in this one day conference, a springboard for many interesting discussions between talks which enormously enhanced the intellectual value of the day. The conference opened with remarks by Dr Anthony Fry, whom I had met in the Maudsley philosophy group—it was a gem seeing him in full action, blending Jaspers with his own long experience in psychiatry.

He was followed by Professor David Goldberg, who after presenting a concise history of Jaspers’ thought, elaborated on how he had moved psychiatry from neurology to a different level. He argued that a substantial amount of what has been written about Jaspers is spiteful and wrong, raising the importance of reading the original text rather than relying on second hand accounts. We knew the influences on Jaspers, from Kant (form and content) to Husserl and Dilthey, however Jaspers used their ideas in a different way.

Dr Allen Beveridge’s talk revolved around the relationship between the ideas of Jaspers and R D Laing, both of whom have the reconciliation of psychiatry and the humanities at the core of their writings.

Professor Matthew Ratcliffe’s speech was as interesting as his lecture had been in Durham. This time he focused on the phenomenological analysis of delusional atmosphere. Showing actualities and possibilities to be co-constituents of experience, he argued that delusional atmosphere has its roots in anticipation. He further approached empathy as a recognition of difference and engaging in patient’s experience, rather than replicating it. For a better account of his ideas I recommend the chapter he has written in One Century of Karl Jaspers’ General Psychopathology, reviewed in this edition of the newsletter.

For psychoanalysis aficionados, Professor Alfred Tauber gave a lecture on Freud and Jaspers. One of Jaspers’ criticisms of Freud was that he treated the mind as an object. He used his phenomenology against something he saw as Freud’s scientism. There was a discussion over Jaspers’ humanities, where he refers to person mental life rather than patient and mental illness.

Professor Thomas Fuchs saw psychopathology as a discipline against organic reductionism, which was dominant at Jaspers’ time. Jaspers’ arguments against both “somatikers” and “psychikers” led to his belief that causal knowledge should not be made into an absolute.

Professor John Campbell continued with his lecture on the dopamine hypothesis, which was in fact very philosophical in that it showed how understanding versus explanation embodies the mind-body problem, but not in an abstract thought experiment but in our real lives.

The day ended with a light hearted debate over the belief status of delusions. I hoped to see more Jaspers in the debate, as it was the theme of the conference, but it was not the case. Nevertheless it was an enjoyable day for which the organisers, especially Matthew Broome and Gareth Owen, deserved credit. Hopefully we will see more philosophy of psychiatry at the Royal Society of Medicine.

Dr Abdi Sanati (Consultant Psychiatrist, North East London NHS Foundation Trust)

Oxford Summer School on Philosophy and Psychiatry (St Catherine’s College, Oxford, 14 to 19 July 2013)

The first Oxford Summer School on philosophy and psychiatry was held at St Catherine's College from July 14 to 19 this year. Sponsored by the Royal College Group, the WPA section and the INPP, it was run jointly by the Oxford Philosophy Faculty and Oxford's Department for Continuing Education on the theme of Mind, Values and Mental Health. Each day included intensive work on a particular topic (consciousness, the self, ancient philosophy, phenomenology and values), a guest lecture and a social event (including the launch of the Oxford Handbook of Philosophy and Psychiatry). Guest key-note speakers included Terry Irwin, Chris Frith, Giovanni Stanghellini and George Graham. There were thirty-one delegates from all parts of the world (including six from Australia), with a waiting list for future events. Feedback was very positive and we believe there is considerable scope for further development of the field through programmes of this kind.

Professor K.W.M. (Bill) Fulford (University of Oxford)
Royal College of Psychiatrists’ Philosophy & Psychiatry Special Interest Group’s Second UK Conference on Philosophy and Psychiatry (Edinburgh, 3 & 4 October 2013)

Departing from tradition, and perhaps to dispel, or at least to challenge, the stereotypical perception that philosophy can be at best navel gazing and at worst intellectually elitist, in addition to a review of this conference in our usual format, we are including the perspective of a self-professed non-philosopher.

Viewpoint from a non-philosopher

Introduction (by Dr Abdi Sanati):
At the recent Philosophy special interest group’s conference I was privileged to be joined by one of my esteemed colleagues, Dr Partha Banerjea. Partha has been a source of inspiration for me and I asked him to write something about his experience of the conference, on both an emotional and intellectual level. It is not supposed to be a report of the conference, but a narrative (and feedback) by an intellectual colleague on his first encounter with the Philosophy SIG conference. Here it goes:

A non-philosopher attends a Philosophy conference and ends up at a bar (sorry, there’s no punch line to this). This bar is around the corner from the main line station at Edinburgh, where this year’s Philosophy Section of the Royal College have decided to meet. In the bar, a middle aged man with a greying Anti-Nowhere League T Shirt sups his pint and tries his hand with the not so local talent. For the uninitiated, The Anti-Nowhere League formed one end (if ever there was such a distinction) of a punk/anarchist scene spanning the late 70's and early 80's, the other being occupied by the resolutely uncompromising sounds of Crass; what they both shared was wanting to offer a starkly different view, at a time where what was on display were the polemics of Thatcherism.

In a similar, yet quieter vein, it seemed this year (whether other years are any different would be lost on me) alternative narratives to the ones masquerading as the orthodoxy were gently aired; talks, amongst many, included of times past, in which fervour may have dissipated (Laing), conversations of dissidence and repudiation (one could argue contrarian) regarding the multiple conflicted stories around medication, and with a 100 years of Jaspers having passed a number of presentations aimed at not only reviewing what we see clinically in a remodelled framework but placing controversies that made the New York Times front pages in the spotlight with research in mind. Nods to Sartre followed, as did some intellectual gymnastics, allegories to the Theatre performed and ECT was brought to the fore. As with the bands above and their alternative narratives, these could all be conversations that we have at work, yet somehow manage not to. So the breadth was large though what seemed more surprising, given the motley crew of attendees was the level of apparent agreement. The latter was undoubtedly helped/ hindered (delete as necessary) by the length of talks leaving little time for discussion, and when the latter threatened to break out together with dissenting voices, avenues turned into cul-de-sacs. Whether we have good manners to blame or the vestigial remnants of a punitive superego (tongue pressed firmly as you can imagine at this point) lively conversation and, dare I say, Socratic discourse, was somewhat lost.

Had we had our time again, complementing the time people had spent on preparing their talks with equal Q&A could have stimulated an interesting set of ideas; if this had happened, we may have got somewhere with how a quotient of intellectual gymnastics may have played itself out on the clinical coal face, what pure philosophers could add in any therapeutic meeting, setting up a contentious debate, or why there was so much apparent agreement. The latter was undoubtedly helped/ hindered (delete as necessary) by the length of talks leaving little time for discussion, and when the latter threatened to break out together with dissenting voices, avenues turned into cul-de-sacs. Whether we have good manners to blame or the vestigial remnants of a punitive superego (tongue pressed firmly as you can imagine at this point) lively conversation and, dare I say, Socratic discourse, was somewhat lost.

To play on Crass's most notorious piece of output 'how does it feel', a release that raised questions in Parliament at the time, this particular section of the Royal College has within its grasp the intellectual building blocks for what the future may look like. For a non-philosopher (if ever there is such a beast) there was a glimpse of, but not in, a crystal ball. And as to how it felt? It felt good.

Dr Partha Banerjea, Consultant (Child & Adolescent Psychiatrist, South London & Maudsley NHS Foundation Trust)
John Callender, Chair of the Philosophy Special Interest Group, deserves credit for pulling together an impressively varied programme.

The conference opened with a lecture by Professor Bill Fulford, the doyen of Philosophy of Psychiatry, whose talk celebrated Jaspers’ centenary by asking what the next one hundred years may hold for the discipline. Those interested in revisiting his arguments would do well to consult his introduction to *The Oxford Handbook of Philosophy and Psychiatry*, which covers similar territory.

Thereafter, day 1 was divided into parallel sessions, with the main difficulty being choosing which of the two parallel sessions to attend at any one time! In the first session, we both plumped for Ivana S Markova’s talk on mental symptoms as hybrid objects—she deconstructed mental symptoms as having two facets, a semantic element (meaning) and a biological element (neuronal activation), arguing hermeneutical methods are necessary to understand the former. She was followed by Miles Clapham—renowned for his contribution to this newsletter’s Wittgenstein-Asperger debate—who considered the implications of Wittgenstein’s ideas about “private language” on the Mental State Examination.

After lunch, we went our separate ways: Dr Sanati attended a talk entitled “*What is to be diagnosed*” by Jeffery Bedrick, in which he compared the DSM and R-DOC, questioning their presuppositions. Consideration of this is of central importance as the R-DOC criteria are going to guide research in psychiatry in USA (where most empirical research is generated), while the clinical practice in many countries is guided by DSM. The NIMH, which authors R-DOC, makes some assumptions (such that mental disorders are disorders of brain circuits) and aims to devise a system of criteria to demarcate some things as mental disorders. However there is a flaw in the assumption: what if the circuit problems are shared between disorders? NIMH uses chest pain to argue for aetiological classification. It was pointed out that subjective symptoms in cardiology (for example) differ from those in psychiatry; to illustrate, the subjective symptoms of myocardial infarction are not used in its diagnosis. That is, the ‘mental’ in mental disorder an epiphenomenon. This presentation generated the expected heated debate.

In the other session, Professor Eric Matthews considered “Mental Disorder an as Excuse”; as a forensic psychiatrist, this was of particular interest—Professor Matthews’ analysis suggested that we are we are responsible for our own actions, meaning those for which we can convey our reasons for so acting. Conference organiser John Callender then considered “Attribution, retribution and consequences”. Ideas explored included arguments justifying punishment, retributivist arguments and consequentialism. The following parallel session remained in a medicolegal arena, with Elizabeth Shaw’s cogent deconstruction of the recently reformed Scottish mental capacity defences, in which she argued that an opportunity for clarity had been lost by replacing insanity with mental disorder and automatism.

The simultaneous parallel session by Allan Beveridge on R D Laing was both stimulating and full of debate. This interesting talk focussed on young R D Laing and how he helped in understanding patients with psychosis. The way Laing showed how psychiatric language turns patient experience to abstract concepts and causes a distance between patients and psychiatrists was a reminder of how his renowned text “*The Divided Self*” remains relevant to psychiatric practice today. The presentation was balanced and there was a discussion of his much criticised belief that schizophrenia was the result of bad mothering, with the therapist taking the role of a good mother. However, the last word belonged to a member of the audience, who asked “would you like to be treated by Laing?”

Day 2 opened with a second keynote lecture on “*Meaning, Intentionality and Mental Disorder*” by Jonathan Hill. Thereafter, the audience parted again for parallel experiences. I attended Konrad Banicki’s talk on “*Personality Disorder and the unsuccessful attempt to separate character from personality*”, in which he argued that normative elements cannot be disentangled from the personality disorder concept. For example, in antisocial personality disorder, judgments about the criterion of deceitfulness (by way of example) are inherently evaluative. His lecture was followed by a related tripartite presentation entitled “having good reasons not to dislike people with borderline personality disorder”, which considered the role of empathy in relating to individuals with this disorder.

In another parallel session, Deborah Bowman used her experience in theatre and humanities to show how ethics draws from different disciplines, with subjectivity and emotional relations having as much of an important role as rationality. The presentation involved beautiful quotes from literature and theatre, and was an emotionally enriching experience. That much is to be learned by delving into literature and art is something that was also emphasised by Jaspers, making Deborah Bowman’s presentation more relevant in his centenary.
Royal College of Psychiatrists’ Philosophy & Psychiatry Special Interest Group’s Second UK Conference on Philosophy and Psychiatry (Edinburgh, 3 & 4 October 2013) (continued)

Following Deborah Bowman, one of the main contributors to the Scottish Mental Capacity Act, David Findlay, enlightened his audience as to the way in which capacity is assessed in Scotland. He clearly argued that the assessment of capacity is much more than a technical skill, having a significant ethical dimension. Questions such as how much capacity is needed, whether capacity is a matter of degree rather than a dichotomy and the contrast between patients’ immediate wishes versus their lifetime values were given as typical valid unanswered queries. Now that capacity is a buzzword used by non-clinical managers, debates like this are urgently needed.

Lectures by Sean Roche and Mark Sprevak on the extended mind (previous newsletter book reviews have touched on this topic) and by Joanna Moncrieff and Abdi Sanati on the ethics of enforced treatment brought a varied and entertaining event to a close.

Feedback about the event was positive, and I came away from it with my enthusiasm for studying philosophy of psychiatry rekindled anew. On the train back from Edinburgh, I reflected again on the values of the discipline. Some of these are more obvious: skill at debate and argument, for example, which is clearly applicable to one’s day job and particularly welcome in difficult tribunals! But there are other benefits, such as the deeper understanding of one’s subject only attainable by measured reflection on some of the conceptual uncertainties and paradoxes it presents. To me, this was one of the joys of the conference, as there were many such opportunities, both within the sessions but also in conversation between sessions and over dinner.

More than this, however, is the deeply life-affirming nature of philosophical thinking. It is demanding but also rewarding. It repays what one invests, in that it delivers new understanding and broadens one’s perspectives, but also makes one acutely aware of the limits of one’s knowledge (always a grounding experience!). And for me, these were the greatest benefits of this year’s conference.

Dr Steve Ramplin (Consultant Forensic Psychiatrist, Tees Esk and Wear Valleys NHS Foundation Trust), with additional material by Dr Abdi Sanati (Consultant Psychiatrist, North East London NHS Foundation Trust)

News release: Faculty of Philosophy, University of Oxford
Major endowment for Fulford Clarendon Lecturer in Philosophy of Mind at Oxford

A University Lectureship in the Philosophy of Mind, in association with a Tutorial Fellowship at St Catherine’s College, has been endowed in perpetuity following a donation from the Laces Trust.

The Laces Trust is an educational charity with particular interests in philosophy of psychiatry and the endowed post will involve research in philosophy of mind, with particular emphasis on work related to psychiatry, psychology, neuroscience and cognitive science.

The joint post, which will be known as the Fulford Clarendon University Lectureship in Philosophy of Mind and the Fulford Fellowship in Philosophy of Mind, is named after Professor KWM (Bill) Fulford, a central figure in the development of the teaching and research infrastructure of philosophy of psychiatry.

The Vice-Chancellor of the University, Professor Andrew Hamilton, said: ‘The Oxford Philosophy Faculty and St Catherine’s College are extremely grateful for the generosity of The Laces Trust, and for its continued support of philosophy of mind at Oxford.

‘Oxford philosophy is making many contributions to the rapidly expanding field of philosophy and psychiatry – indeed, fifteen faculty members are already working in related fields. Thanks to The Laces Trust, Oxford’s reputation as a leading University in this field will be enhanced even further.’

For more information please contact Tom Moore on tom.moore@philosophy.ox.ac.uk or 01865 276928; or Matt Pickles in the University of Oxford press office on 01865 270046 or matt.pickles@admin.ox.ac.uk.

- The University’s Teaching Fund was established in 2010 on the basis of a £60m gift from Oxford University Press, provided in order to establish a matched funding scheme, primarily in support of tutorial teaching. The agreed cost of endowing a post in perpetuity under the scheme is £2m, with £1.2m provided by the donor and £800k made available from the Teaching Fund itself. More information on Oxford University’s Teaching Fund is here: http://www.campaign.ox.ac.uk/priorities/posts/teaching_fund.html
News release: Faculty of Philosophy, University of Oxford

Major endowment for Fulford Clarendon Lecturer in Philosophy of Mind at Oxford (continued)

- Professor Fulford (pictured on page one of the newsletter) is a member of the Oxford Philosophy Faculty, Fellow of St Catherine’s College, Oxford, and an Emeritus Professor of Philosophy and Mental Health in the University of Warwick Medical School. Professor Fulford has been a leading figure in the development of philosophy and psychiatry. As special advisor to the UK government’s Department of Health, he led on the development of values-based practice in key areas of policy and practice in mental health, work which he is continuing at Oxford and Warwick. A profile and interview with Professor Fulford can be found in the latest edition of the Oxford Philosophy magazine, available at http://www.philosophy.ox.ac.uk/_data/assets/pdf_file/0003/27930/eOP12.pdf

- In addition to the endowment of the University Lectureship at St Catherine’s College, The Laces Trust provided £100k between 2007 and 2012 to fund scholarships for Oxford Philosophy graduate students working in areas of relevance to philosophy of psychiatry.

Forthcoming Conferences from the INPP (International Network for Philosophy and Psychiatry) Website www.inpponline.org and elsewhere:

16th Conference of the International Network of Philosophy and Psychiatry, Bulgaria, 26 to 29 June 2014

The University Center for Philosophy and Mental Health and the Balkan Academy for Philosophy, Psychiatry and Psychology, member association of the International Network for Philosophy and Psychiatry (INPP) will be hosting the 16th Conference of INPP in Bulgaria on 26-29 June 2014.

And Finally, some miscellaneous announcements ...

Book Series

Oxford University Press: International Perspectives in Philosophy and Psychiatry

International Perspectives in Philosophy and Psychiatry is an international book series focusing on the emerging interdisciplinary field at the interface of philosophy and psychiatry. Volumes in the series will continue the broad theme of 'nature' (for causes/explanations) and 'narrative' (for meanings/understandings), building links between the sciences and humanities in psychiatry, but focusing on more narrowly defined topics. For details of the series please see http://ukcatalogue.oup.com/category/academic/series/medicine/ippp.do.

Here is a list of recently published titles from the INPP series:

- **Addiction and Weakness of Will** by Lubomira Radoilska; published November 2013 (estimated)
- **One Century of Karl Jaspers' General Psychopathology** by Giovanni Stanghellini & Thomas Fuchs
- **Emotions and Personhood: Exploring Fragility - Making Sense of Vulnerability** by Giovanni Stanghellini & René Rosfort

Philosophy of Psychiatry SIG Website

Dr Dieneke Hubbeling continues to run the Philosophy Special Interest Group Website. Please support it by visiting: www.rcpsych.ac.uk/college/specialinterestgroups.aspx.

Contributions invited for spring 2014 Philosophy SIG Newsletter—send us your book reviews please!

As ever, we are always delighted to receive contributions and would particularly welcome book reviews and philosophically themed articles—who knows, perhaps our humble newsletter will be the platform from which new Philosopher Psychiatrists will spring. Please send your material to either Dr Abdi Sanati (abstraxion@hotmail.com) or Dr Steve Ramplin (steve.ramplin@nhs.net), preferably by 30 May 2014.