

## Review

**Psychiatric Treatment—Art or Science?** A report of MIND's 1981 Annual Conference. London: National Association for Mental Health. 1982. Pp. 73. £2.95.

This lively publication asks and makes the effort to answer the question: Is psychiatric treatment intuitive and creative or detached and objective? One supposes, of course, that were psychiatric treatment clearly effective, nobody would bother to ask whether it was art, science, or whatever. The answer, predictably, is that it is a bit of both. But in arriving at that conclusion, sixteen contributors cover a wide range of topics and make observations that are often fresh and interesting and sometimes provocative.

The tone is set by Lord Elton who, in a brief introductory paper, contrives to cover the history of psychiatric treatment as well as commenting on the organization of mental health services, the importance of prevention in the context of future developments, and the particular challenges presented by the elderly, the alcoholic, the violent, and those in need of active rehabilitation. Professor Sydney Brandon enlarges on some of these themes. He urges us to recognize the value of the National Health Service, and in particular how its structure provides every citizen with both primary care and specialist services as a basic right. He asks us 'not to allow the aspirations of emergent professions, institutionalized doctor-bashing or debilitating reorganizations of services to lead us to throw the baby out with the bathwater and to weaken or abandon this structure'. On the theme of treatment, and the importance of using a treatment while it still works, Professor Brandon recalls the era of insulin coma therapy (which some of us remember as effective, but not for the reasons we supposed) and wonders whether the ECT story may be unfolding along similar lines.

Dr Julian Leff tells of his work with the families of schizophrenic patients, surely an involvement demanding both art and science. He observes that since each individual's personality is different, the therapeutic process is unique and impossible to reproduce exactly for 'scientific' assessment. Moreover, therapists who are creative are usually innovatory, charismatic, and passionate individuals who are convinced of the value of what they are doing. Yet scientific evaluation needs a dispassionate individual who is sceptical about the object of study. This important gap between innovation and evaluation is one that Dr Leff himself is bridging in his own studies.

Dr Fraser Watts tackles the difficult question of what makes a competent therapist or an effective therapy. Recent sophisticated surveys, he points out, have found no convincing overall differences in the effectiveness of different

therapies and he adds: 'What we really need to know is how methods compare in their effectiveness for a particular problem in a particular kind of client.' He might add, 'and with a particular kind of therapist', for he suggests that therapists who are experienced and who show sensitivity and empathy are more successful than therapists who are inexperienced, even if the latter possess high academic credentials and have undergone personal analysis. But this area is full of apparent contradictions. Dr Watts states that in the end 'the personality, attitudes and background adjustment of the client make far more difference to the outcome of therapy than who the therapist is or what method is used'.

Dr Helena Waters, in a thoughtful paper on training, reminds us that psychiatry is not a popular subject among medical students. She adds: 'It may be that psychologically-minded students are not prepared to endure a medical course in order to become psychiatrists.' Similarly, Dr Johnathan Hill asks whether psychiatrists should be recruited from non-medical backgrounds in order to improve the quality and numbers of candidates. And in somewhat contradictory fashion—should psychiatrists be trained to deliver their services in primary care? Dr Victor Meyer, in an article on behaviour therapy, is refreshingly critical of all theoretical models and pretensions, suggesting that their main advantage is helping therapists to believe they understand what they are doing and so do it better.

There are chapters on social work and its mental health task, on social competence, and on the social skills model—a telling critique by Geoff Shepherd. There are all-too-brief considerations of the patient's own experience of treatment and the tendency of traditional ward-settings to infantilize him or her. There is mention of the effect of race and culture on the relevance and acceptance of the treatment offered, and there is an important discussion of the use of drugs and ECT. In the latter, Dr Robert Palmer makes interesting use of the concept of 'stuckness' as a guide to what sort of therapeutic intervention is indicated. Dr Anthony Clare ends the Report with a contribution on the future of psychiatric treatment. He emphasizes the place of research in demonstrating both achievement and continuing need.

As Dr Wilkinson pointed out in his review of its Annual Conference (*Bulletin*, January 1982, 12-13), MIND managed to antagonize psychiatrists in the recent past by its seeming disregard of their problems and concerns. This report may help to dispel mistrust. It is timely and constructive and deserves to be widely read.

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