Philosophy Books for Psychiatric Practice

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No practice takes place in a philosophical vacuum and medicine is no exception … Although the scientific evidence is itself largely empirical, many normative aspects of evidence-based practice are not.

Rani Anjum, Samantha Copeland, and Elena Rocca

Philosophy of psychiatry has rapidly expanded in the past two decades. The literature has been enriched by books that address some of the core conceptual and theoretical issues that are relevant to psychiatric research and classification, including Rachel Cooper’s Classifying Madness,2 Dominic Murphy’s Psychiatry in the Scientific Image,3 Tim Thornton’s Essential Philosophy of Psychiatry,4 Derek Bolton’s What is Mental Disorder?,5 and Peter Zachar’s A Metaphysics of Psychopathology.6 Recently, there have also been contributions to our understandings of psychiatric disorders from phenomenological and enactive perspectives, including Matthew Ratcliffe’s Experiences of Depression,7 Michelle Maiese’s Embodied Selves and Divided Minds,8 and Sanneke de Haan’s Enactive Psychiatry.9

As academic philosopher who also has a clinical background in psychiatry, I am sometimes asked whether there are philosophy books that, further to their insights for research and theory, are especially useful for clinical practice. Hence, in this article, I showcase some recent philosophy books that I think can offer insights for the clinical activities of psychiatrists. The list is neither exhaustive nor restricted to philosophy of psychiatry, but focuses on just a few books from across the contemporary philosophical landscape that I think are especially helpful for approaching issues in mental healthcare practice.

Alien Landscapes? by Jonathan Glover10

In this exceptional book, Jonathan Glover argues that philosophical questioning can help us to understand and treat people suffering from mental illnesses. This includes both the use of philosophical questioning to improve the understandings of psychiatrists and the use of philosophical questioning to enable patients who have been affected by mental illnesses to rebuild their lives. In the opening chapters, Glover interviews people diagnosed with antisocial personality disorder who are held at a forensic hospital in order to explore their values and moral systems. The findings are very interesting and provide more nuanced profiles of the moral systems of people diagnosed with said disorder that challenge the traditional stereotype of the person with antisocial personality disorder as “lacking empathy”. Furthermore, many of the interviewees describe having had disastrous childhoods in which they were emotionally rejected and shown little love, thus providing insights into how their childhoods shaped their values and in turn how their values contributed to their antisocial behaviours. In subsequent chapters, Glover explores the ways in which philosophical questioning can help patients in their recoveries. These include alleviating symptoms that are sustained by value systems that require challenging and helping people whose worlds have been disrupted by mental illnesses to reconstruct their lives.

Mapping the Edges and the In-Between by Nancy Nyquist Potter11

Borderline personality disorder is a diagnosis that is given to a large number of people seen by the mental health services who experience difficulties regulating emotions and managing interpersonal interactions. Childhood trauma is recognised to be a major causal factor in the development of borderline personality disorder and the majority of people diagnosed with the condition are women. In this rich book, Nancy Nyquist Potter draws on her expertise as a philosopher and as a crisis counsellor to analyse many of the contentious concepts, norms, and practices that pertain to this controversial diagnosis.
Applying a variety of theoretical perspectives, including analytic philosophy, virtue ethics, object relations theory, existentialism, and feminist epistemology, Potter critically examines many of the normative concepts that feature in clinical depictions of borderline personality disorder, such as “identity disturbance”, “inappropriate or excessive anger”, “unstable relationships”, “impulsivity”, and “manipulativeness”. Potter’s discussion highlights the problematic ways in which gender norms and social values inform judgements about inappropriateness, exessiveness, instability, and so on. These norms and values can also intersect with other problematic attitudes and structures that result in people diagnosed with borderline personality disorder being harmed by testimonial and hermeneutic injustices. Accordingly, Potter emphasises how the virtues of trustworthiness, giving uptake, and empathy are especially important for clinicians to develop when working with people diagnosed with borderline personality disorder.

Aftermath by Susan Brison

Many people who are treated for mental health problems are survivors of sexual violence. Sexual violence is both an important causal factor in the development of mental ill health and a deeply disruptive experience that can result in a devastating loss of trust in others. Unfortunately, psychiatric services sometimes fail to attend sensitively to this aspect of the person’s suffering and often overlook how the clinical encounter might compound the person’s sense of vulnerability, which can lead to the experience of retraumatisation. Susan Brison’s powerfully honest book recounts the violent sexual assault that disrupted her world and transformed her sense of herself. It offers a vivid narrative account of the silencing, isolation, and unmaking of one’s sense of selfhood that are occasioned by the experience of trauma, including how such unmaking led Brison to reassess the value of her own training as an academic philosopher. The book also offers a reflection on recovery as a process of remaking one’s sense of selfhood. Given the seriousness of the topic and the honesty with which Brison recounts her trauma, this book is a challenging and sometimes harrowing read, but it is extremely valuable for anyone whose work involves addressing the mental health needs of survivors of sexual violence.

Psychiatry and Philosophy of Science by Rachel Cooper

This short book by Rachel Cooper remains one of the most accessible guides to philosophy of psychiatry. It covers key conceptual, epistemological, and metaphysical issues in psychiatry from the perspective of philosophy of science, including the concept of mental disorder, explanations in psychiatry, relations between theories, and values in science.

Although this is predominantly intended to be an introductory book on applied philosophy of science, it contains some insights that are clinically relevant. For example, the chapters on explanations in psychiatry examine the diverse approaches that psychiatrists use to explain symptoms, while the chapters on relations between theories include some thoughts on how psychiatrists have to navigate different and sometimes incommensurable theoretical perspectives, including biological, psychological, and social perspectives. Moreover, these chapters also clear up some common misconceptions about the mind-body problem, for example, by offering a modest defence of a philosophically respectable form of dualism and by urging caution against drawing too many metaphysical conclusions from empirical neuroscientic findings. The final chapters serve to remind psychiatrists of the ways in which the theories and practices on which they rely are influenced by values and interests.

A Philosophical Disease: Bioethics, culture, and identity by Carl Elliott

Medical ethics is increasingly recognised as a core part of the curriculum in medical education and doctors are required to be able to handle diverse ethical problems in the clinical setting. In this fascinating collection of essays, Carl Elliott explores a range of philosophical and ethical issues raised by healthcare practice and policy. Writing in a characteristically playful style, Elliott emphasises the dilemmas and complexities involved in the cases discussed, which highlight the potential limitations of the theoretical frameworks that are traditionally used to approach these issues. Especially relevant to psychiatric practice are the chapters that explore the various relations between identity, authenticity, responsibility, competence, and mental ill health. While some readers may not be fully persuaded by Elliott’s “general antitheory of bioethics”, this book is extremely valuable for offering an alternative and nuanced way of thinking about ethical problems in clinical practice that appreciates how messy and complex these problems are.

Trans Care by Hil Malatino

This final book may seem more directly relevant to my own clinical interest in gender affirming healthcare, but there is a good reason why it is also highly relevant to psychiatric practice. Trans people are a group who are made to suffer serious prejudices, barriers to social inclusion, and threats to their basic rights, which place them at substantially greater risks of mental health problems and suicide. Furthermore, these can be exacerbated when healthcare services are unwelcoming and reinforce problematic sex and gender
binaries that fail to capture the rich diversity of people’s ways of being. Hence, as well as beginning from a position that accepts that trans women are women, trans men are men, and nonbinary identities are legitimate, anyone working in mental healthcare ought to be mindful of the social barriers faced by trans people which make them vulnerable to the aforementioned harms. In this little yellow book, Hil Malatino offers a vivid and philosophically rich account of how difficult it is for a trans person to navigate a society that is relentlessly cisheteronormative, including a healthcare system that is “economically inaccessible, geographically dispersed, and rigorously gatekept”. Malatino draws on feminist care ethics to examine the networks of care that trans people have set up in light of these systemic barriers and failures in healthcare provision. In addition to providing an understanding of the healthcare challenges faced by trans people specifically, I found this book extremely helpful for thinking more generally about how the mental health problems experienced by people from socially oppressed groups are shaped and sustained by the unjust and unwelcoming contexts wherein they are situated.

References