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illness, he was cared for by two such specialists, both of whom mentioned the debt they owed him. There are many more.

**Bill Deakin, George Hay, David Goldberg, Brian Hore**

## A perspective from clinical psychology

I was fortunate in being the first lecturer in clinical psychology to be appointed personally by Professor Neil Kessel, shortly after his appointment, and being in his department during the entirety of his career. Thus, it was possible to follow the evolution and attainments of his Chair.

His flair for administration made it possible for new services to commence and actually thrive. Neil had, from the outset, a wide knowledge of clinical

psychology, being first impressed by Graham Foulds, who reflected his own concerns for the needs of the individual patient. He had extensive knowledge of behavioural therapy and neuropsychology. This resulted in fruitful ties with the departments of medicine and neurology at the Royal Infirmary, Manchester, prefiguring what we now know as liaison psychiatry and health psychology.

Neil avoided charisma and preferred a forthright dialectic manner. As a result he generated interest in the acquisition of knowledge and detailed preparation of case histories, presented at the Friday morning case conference, rather than the previous emphasis on phenomenology. The new focus was on techniques of rehabilitation involving an expansion of clinical psychology, as well as psychiatry. The new department at Withington grew to contain more rehabilitation on one site

for serious mental illness and alcoholism that one could possibly envisage today.

It could be regarded as a brief golden age of high-level teaching and care for the individual.

The University Unit of Clinical Psychology commenced in 1974, reaping the rewards of early outline plans devised by Neil and his colleagues, years before. He was, to quote the epitaph of Purcell the composer, "A marvelous man, a very marvelous man". We owe to him our education, or clarity of thought, even-handedness with others, some of whom were, in an unselfish way, aided into careers eventually outside of psychology or psychiatry.

Finally the time in the last century when equal rights were hardly heard of, it can be said that Neil made it possible for many women in psychology and psychiatry to pursue effective part-time careers.

**Alice Huddy**

## reviews

### Is that me?

#### My life with schizophrenia

Scott, A. (ed. Dolamore, S.)  
Dublin: A. & A. Farnar, 2002,  
£8.99 pb, 145 pp.,  
ISBN: 1-899047-91-3

This is the autobiography of a member of a professional, artistic Irish family whose promising career was devastated when, at the age of 20, he developed schizophrenia. In lucid prose, and with deep sensitivity and insight, Anthony Scott outlines the perplexity, anguish and isolation he suffered, and the confusion this brought to his family and friends. He communicates very clearly and in the context of his everyday life not only his paranoid delusions and terrifying anxieties, but the equally debilitating inability to concentrate and to organise his thoughts, and the sheer inertia. The immediacy with which he communicates his pain makes it almost unbearable. He identifies a number of features in his life which supported him and which contributed to his ability to cope with the ravages of his illness. Firstly there was his childhood in a caring family, where he developed as a self-assured, well-educated, socially adroit young man. He believes that this background was a positive resource, and that his family's continued love and support was a central feature. We can readily understand their bafflement as in coming to know and accept the nature of the illness, they are confronted repeatedly with the severe limitations it imposed.

Recoiling from the prospect of their son being relegated to a back ward, they were

fortunate in being steered to Dr David Clark, the pioneering social psychiatrist, at Fulbourn Hospital, Cambridge. Here, the traditional custodial mental hospital apparatus was being dismantled, and the therapeutic community approach forged and implemented. As with the other patients, Tony Scott's individuality and personal skills were recognised and fostered. His next break was his relationship with Nancy, a divorced fellow patient. Courageously (this was the early 1960s), this was supported, his family's understandable reservations were addressed and they were married.

The book continues as a remarkable love story, and is dedicated to their son. The couple set up home in the Cambridgeshire fens, where Tony worked as a bus conductor. The new psychotropic drugs were prescribed as they came on stream and although they kept the psychosis at bay, the side-effects posed very real problems. Nevertheless, the two patients overcame these as they grappled with the increasing complexities of everyday life. The author supplies vignettes where his misreading of social situations and his inaccurate perceptions of others' intentions resulted in misunderstandings, and at times evoked hostility or derision. His core personality, his decency and his good humour shine through as he repeatedly picked himself up and returned to the fray. He subsequently trained as a teacher, and at the age of 36 spent 3 years at Leeds University, where he took an Arts Degree in French Language and Literature. He derived great satisfaction from writing this book, which he hoped would help his fellow sufferers. Then

shortly after returning the proofs, he died from natural causes.

This is an important work for psychiatric professionals. It should stop us in our tracks and centre us again on our patients' humanity. It offers both a headline and a challenge, and indeed provides many, many lessons and causes for reflection. Not least, we should listen carefully to what our patients say. From a neuro-psychiatric perspective and unlike the computer, they can tell us about their cognitive functioning. As Professor Anthony Clare writes in the fulsome Foreword, 'psychiatrists, nurses and community health workers will never read a more revelatory and illuminating insight'.

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### Decisions and Dilemmas: Working With Mental Health Law

Peay, J.  
Oxford: Hart Publishing, 2003,  
£21.95, 217 pp., ISBN: 1841133434

At a time when a great deal concerning mental health law, ethics and practice is in the 'melting pot', this book makes a highly-distinctive and welcome contribution to the debate taking place. The author needs no introduction to most readers of this journal, since she has, over the years, made a distinguished contribution to mental health literature. Most notable of her contributions has been her research into Mental Health Review Tribunal decision-making processes (Peay, 1989) and her edited volume



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*Inquiries After Homicide* (Peay, 1996). The work reviewed here reports on an empirical study of the decision-making processes engaged in by psychiatrists (often in their responsible medical officer capacity), approved social workers and Second Opinion Appointed Doctors (SOADs) in connection with the admission, treatment, detention and discharge of detained patients under the Mental Health Act 1983.

A short review cannot do justice to the rich (and sometimes disquieting) material contained in Peay's careful critical analysis. Her 'subjects' consisted of 106 participants; 52 psychiatrists from the Faculty of General and Community Psychiatry Division of the College, 14 SOADs and 40 approved social workers. The study examined whether, given identical case materials, individual and paired decision-makers reached similar decisions about the application or non-application of the law, and, more critically, whatever the nature of the decisions made, how these decisions were justified by the parties

making them' (p. x). Peay's intention (having stated 'that this is an odd book . . . having neither the methodological rigour of a research report, nor the analytical rigour of a scholarly text') was to attempt to recapture the sense of 'anxiety, excitement, curiosity and discovery experienced by those participating in the research' (p. xi).

Three 'manufactured' cases and accompanying videos formed the basis of the research material. These concerned Mr Draper, 'A Case For Admission'; Mr Wright, 'A Case For Discharge'; and Hazel Robinson, 'A Case For Compulsory Treatment'. The manner in which the mental health professionals in her sample reached their decisions is described in meticulous and fascinating detail. Significantly, one of the major findings concerned the confusion demonstrated by a number of the professionals about the correct application of the law. Another major finding was the role played by what Peay describes as a 'cautionary' approach to decision-making. Perhaps one of the

most important points made by Peay in her concluding chapter is that 'the research findings should not be judged merely by the nature of the decisions made, but, as importantly, if not more importantly by the reasons the practitioners gave for these decisions'. In her Foreword to the book, Lady Justice Hale (who will be known to many readers in her former academic role as Brenda Hoggett), describes the book as 'fascinating', a statement which I echo wholeheartedly. I think this book is a 'must' for all who are thoughtful about the compulsory powers afforded in the current mental health legislation.

PEAY, J. (1989) *Tribunals on Trial: A Study of Decision-Making Under the Mental Health Act 1983*. London: Clarendon Press.

PEAY, J. (ed.) (1996) *Inquiries after Homicide*. London: Gerald Duckworth.

Herschel Prins University of Loughborough

## miscellany

### Research study: Felix Post

The Wellcome Trust has granted Dr Claire Hilton a short-term Research Leave award in the History of Medicine to research 'Felix Post (1913–2001) – a biographical study'. Dr Hilton would be most interested to hear from anyone who has memories of Felix Post, who may have known him in his early life in Berlin, as a medical student at Bart's, interned on the Isle of Man, as a doctor in the Army, or at any later stages of his career in psychiatry, especially in Edinburgh in the 1940s or at the Maudsley Hospital from 1947–1978. Dr Hilton can be contacted by phone until 31 October 2004 on 07976 768542 or

0208 959 6063; by e-mail (claire.hilton@nhs.net) or by post: Mental Health Service for Older Adults, Mental Health Centre, Northwick Park Hospital, Watford Road, Harrow HA1 3UJ.

### Second Opinion Appointed Doctors: Mental Health Act Commission

The Mental Health Act Commission (MHAC) is responsible for the appointment of doctors to undertake the Second Opinions under the powers of Part IV of the Mental Health Act 1983. The Commission invites consultant

psychiatrists of at least 5 years' standing to apply for appointment to its panel of available doctors. There has recently been a significant increase in fees payable to Second Opinion Appointed Doctors. The Commission is particularly looking for doctors in Cumbria; Morecambe Bay; Lancashire; Wales; Gloucestershire; Hampshire; Surrey; Sussex; Kent; Suffolk; and Norfolk. Application forms are available on the Commission's website ([www.mhac.trent.nhs.uk](http://www.mhac.trent.nhs.uk)) or from the Commission's Office. Applications should be sent to Paramjit Thamu, MHAC, Maid Marian House, 56 Hounds Gate, Nottingham NG1 6BG (e-mail [thamup@mhac.trent.nhs.uk](mailto:thamup@mhac.trent.nhs.uk); tel 0115 943 7100 ext. 158).

## forthcoming events

**The Joint Meeting of the Transcultural Special Interest Group and the Faculty of Psychotherapy, Royal College of Psychiatrists** will be held on Thursday, 30 September 2004 at the Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG. For application and programme details, please contact Lisa Kass (e-mail: [psychiatry@qmul.ac.uk](mailto:psychiatry@qmul.ac.uk); tel: 020 7882 7727).

Applications are invited for Semester One of the **MRCPsych Course** run by Univer-

sity College London. **Part I** takes place on Monday afternoons commencing 6 September 2004 and **Part II** takes place on Tuesday afternoons commencing 7 September 2004. The course has been updated in keeping with the Royal College of Psychiatrists syllabus and includes mock exams, theme specific revision sessions, and patient perspectives. For further information and an application form please contact Lydia M. Clinton, the Course Administrator (tel 020 7679 9475; e-mail [mrcpsych@ucl.ac.uk](mailto:mrcpsych@ucl.ac.uk)).

The University College London Department of Mental Health Services invites applications for a two-year, part-time **MSc in Psychiatric Research** course starting in October 2004. The MSc is intended for senior house officers and specialist registrars in psychiatry. It provides a thorough and very practical training in the research skills relevant to psychiatry. The aim is to equip graduates to do research at doctoral level and apply for research posts in university departments. The first year consists of work-