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Foreword (from clinical practice)

Professor Ahmed Okasha

A psychiatrist has said that he did not want to burden himself with philosophy... but the exclusion of philosophy would... be disastrous for psychiatry.

(Karl Jaspers, 1963)

I never imagined that I should find myself writing a Foreword on Philosophy and Psychiatry but I am delighted to welcome this unprecedented textbook. Karl Jaspers, writing at the start of the twentieth century, during what has become known as psychiatry's first biological phase, was keenly aware of the importance of philosophy as a partner to the neurosciences underpinning our discipline. Yet for much of the twentieth century, psychiatry has lost touch with philosophy. It is all the more exciting, then, that as we enter the twenty-first century, and with it psychiatry's second biological phase, this book, and the new philosophy of psychiatry that it embodies, promises, finally, to fulfil Jaspers' vision.

The World Psychiatric Association, along with many other national and subject-based groups around the world, has strongly embraced the emerging discipline of philosophy of psychiatry by establishing a new section for the field. There are many reasons why philosophy is important in psychiatry. First, there are the deep dichotomies by which we are challenged every day in our clinical work and research: the dichotomy of mind and body, of course, to which I return below; but also, and equally important though less well recognised, the dichotomies of universality versus specificity and of collectivity versus individuality.

Second, is the importance of individual and cultural differences. While researchers, intellectuals, scientists and physicians continue their attempts to find formulaic interpretations summarizing our universal human nature, such formulae usually amount more to a series of exceptions than to a "common" description of the world. It is not surprising that the more we move from the pragmatic and scientific to the humanitarian, the more exceptions come to the forefront. Among the many factors involved here, in resisting generalisations, culture is probably the most prominent. But psychiatry is also the one branch of medicine and science in which the uniqueness of individuals can never be overlooked. Each and every school of psychiatry is characterised by a vision of life, and of individual human nature, that differentiates it from other schools, even if this is not acknowledged by

the advocates of the school in question. Psychiatrists and mental health professionals in general, therefore, while never abandoning their attempts to identify a shared explanatory vision of the world, must always proceed without jeopardizing the individuality not only of different cultural regions, but also of individual persons. Understanding the individual is indispensable to understanding human nature. Descriptive generalizations alone do not suffice.

A third reason for the importance of philosophy in psychiatry today, is the growing complexity of our subject. In a typical clinical interaction psychiatrists are centrally concerned with both subjective, mental, first person constructs, and with objective, third person brain states. In such settings the psychiatrist traverses many times the "mind-brain" divide (Kendler, 2001). Therefore, as a discipline, psychiatry should be deeply interested in the mind-body problem, the answer to which, if there is one, cannot be sought without help from philosophy. Unfortunately training in biomedicine is likely to produce impatience with philosophical discourse in this area. Such impatience is driven by the strongly held desire to find *the* explanation for individual psychiatric disorders, a desire that, although fully understandable, is misplaced and may be counterproductive. Our current knowledge, although incomplete, strongly suggests that all major psychiatric disorders are complex and multifactorial. The best that we can hope for, in consequence, is many small explanations, from a variety of different explanatory perspectives, each addressing part of the complex processes underlying "normality" or disorder. Similarly, there are no simple linear models where one thing leads to another and then to another in a one-way causal direction. Etiological pathways are complex and interacting, more like networks than linear pathways.

Recent decades have witnessed the rise in psychiatry of a biological-reductionist perspective. Multilevel models, especially those including mental and social explanatory perspectives, are typically rejected or accepted only with the caveat, explicit or

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implicit, that all the “real” causal effects occur at the level of basic biology (Bickle, 2003). This is understandable up to a point. After all, if we agree that there are no mental processes that are independent of brain functioning, then should not all the causes of psychiatric disorders be reducible, at least in principle, to brain processes? This reductionist perspective is understandable sociologically as a reaction to earlier radically mentalistic programs within psychiatry. It is also appealing because of the ease with which it fits into a medical model. But the biological-reductionist approach is too narrow to encompass the range and complexity of causal processes that are operative in psychiatric disorders.

In place of biological reductionism, Engel (1977), McHugh and Slavney (1986) and others, have been strong advocates of explanatory pluralism, in which mutually informative perspectives—social and psychological as well as biological—are combined in approaching natural phenomena. This is a powerful approach. Yet each of these perspectives assumes the natural science paradigm that Jaspers termed “explanation”. This brings us, therefore, to a fourth reason for embracing philosophy in psychiatry. For psychiatry needs a pluralistic approach that engages not only with the explanatory paradigms of natural science, but also, as Jaspers insisted, with the paradigms of human understanding.

The need for a fully pluralistic approach in psychiatry, an approach fully encompassing Jaspers’ twin demands for human understanding as well as for scientific explanation, has never been more urgent, both at an individual and at a cultural level. At an individual level, a long clinical tradition and much empirical evidence point to the importance of first person mental processes in the aetiology of psychiatric disorders. Loss, for example, cannot be dealt with adequately without understanding the meaning of loss for a particular grieving person, whatever explanatory insights we may have into its underlying basic neurobiological mechanisms (Kendler *et al.*, 2003).

At the level of culture, the importance of human understanding as well as scientific explanation is reflected in a large body of descriptive literature showing that cultural processes affect psychiatric illnesses. Culture gives *meaning* to events, where the same event may mean different things in different settings. The importance of cultural differences has been neglected even in bioethics (Okasha, 2000). Here, perhaps, it is understandable, although certainly to be resisted; and the strongly international nature of the new philosophy of psychiatry, drawing equally on the mutual strengths of different traditions around the world (Fulford *et al.*, 2004), is very much to be welcomed in this respect. But that cultural differences should have been so marginalized in the biosciences is surely remarkable. There is, no doubt, a sense in which culture ultimately exists as belief systems in the brains of individual members of a cultural group. But it is unlikely in the extreme that the cultural forces that shape psychopathology will ever be efficiently understood at the level of brain biology. After all, even chemistry, although today reducible in principle to physics, cannot be efficiently explained in terms of interactions between electron shells!

And chemistry, correspondingly, continues to thrive as a discipline that is deeply connected with, but still independent of, physics.

Scientific explanation and human understanding are not incompatible, of course. The pluralistic approach has sometimes been wrongly interpreted as a model in which disparate factors act independently to affect risk. However, even at the level of scientific explanation, the reality is more complex. The actions of basic biological risk factors for psychiatric illnesses are modified by forces acting at higher levels of cultural abstraction, such as the rearing environment, stressful life experiences and exposure to other cultural forces. Furthermore, environmental risk factors modulate the effect of biological risk factors in causing illness. For example, genetic risk factors for major depression increase the probability of interpersonal and marital difficulties, which are themselves known risk factors for depression. The relationships between causes (explanation) and meanings (understanding) in psychiatric illness are thus not one to one. Genetic risk factors can predispose to a range of different psychiatric disorders, depending on the action of other factors, including the meaning and significance of events for an individual, creating a many-to-many aetiological linkage rather than a one-to-one pattern (Kendler, 2005).

Critical processes in the mind-brain system therefore, as Jaspers so clearly recognised, can only be captured through an understanding of the higher organizational levels of these goal directed systems. This means that working in the field of psychiatry inevitably involves us in some of the most important and perplexing questions facing the human race. But it also means that, with Karl Jaspers at the start of the twentieth century, our hope at the start of the twenty-first century should continue to be for the development of psychiatry as a genuinely humanitarian discipline that will in turn allow us to use future scientific advances to good effect in helping our patients and their families. We have to be modest while being challenged by the complexity of the human brain-mind interaction, and with great humility accept that full understanding thereof, if at all possible, will call for the integration of multiple disciplines and perspectives. This book will take us an important step towards achieving that goal.

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