

still be stressful, which is why they wish readers 'good luck'. But despite the suggestion that a degree of luck might be needed, anyone new to such court proceedings will be far more prepared having read this chapter than not.

Needless to say, the thorny issue of implementing Deprivation of Liberty Safeguards (DoLS) was discussed at length in a chapter that provided important context by describing the evolution of this legislation and case law. Notwithstanding, owing to a glut of more recent key DoLS judgments, the book is already a little out of date as DoLS case law and guidance have evolved rapidly. It seems likely that an update will be needed soon to keep readers informed of key developments. Nevertheless, there was a good description of practical issues in using and applying DoLS since the *Cheshire West* case in 2014, a case which triggered an upsurge in the use of this legislation. The authors aptly summed up the state of DoLS understanding from further case law since *Cheshire West* by saying it did 'little to ease the quandaries of health and social care staff in their decision-making in relation to deprivation of liberty'.

Another notable chapter was the one on the assessment of capacity, which provided comprehensive and practical advice, breaking the process down into its components and getting into its minutiae, thus challenging the reader to re-evaluate their own methods for assessing capacity. Other useful sections included advice on how to resolve conflict emanating from complex best-interests meetings and on seeking consent. Although not concluded at the time of publication, the latter resonates with the 2015 seminal Supreme Court case of *Montgomery v Lanarkshire* which has redefined the rules of seeking consent and has implications for how clinical negligence will hence be assessed.

All in all, this is an excellent guide which would aid those involved in care touching upon the use of the MCA.

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Motivational Interviewing: A Guide for Medical Trainees

Edited by Antoine Douaihy, Thomas M. Kelly
and Melanie A. Gold

Oxford University Press, 2015, £34.49, pb, 280 pp.
ISBN: 9780199958184

I first encountered motivational interviewing as a trainee when I read Miller and Rollnick's classic 1991 book *Motivational Interviewing: Preparing People to Change Addictive Behavior* and the key concepts have always resonated with me. Although it seems obvious that a man requiring major surgery due to cardiac disease should stop smoking, it is rarely helpful to insist that he does so. People have ambivalent feelings when it

comes to changing entrenched behaviours and it is often better to elicit their own reasons for change. After all, it has been said that people believe what they hear themselves say. Perhaps because of its apparent simplicity, motivational interviewing has become an important technique for most UK addiction therapists and its influence has gradually spread to other areas of practice. Therefore, does the world need another book on motivational interviewing?

This book is written by a group of trainees spanning all specialties of medicine, with the goal of demonstrating how motivational interviewing can fundamentally improve the doctor–patient relationship. Motivational interviewing is a way of being rather than an intervention and the book reminded me of its roots in Carl Rogers' person-centred approach to therapy, based on building empathy, congruence and positive regard. As someone who bemoans the biomedical nature of British psychiatry, I was surprised that it succeeded in reawakening my interest in interviewing skills that not only elicit information but also provide therapeutic insights and direction.

Like the practice of psychiatry, motivational interviewing is straightforward to do but hard to do really well. It is not easy to learn from books and so the editors provide lots of dialogue to illustrate key points, and a series of videos on a linked website. They add personal reflections, as well as illustrations of the integration of motivational interviewing into electronic case records and its use in less familiar settings such as paediatrics. There is also a practical emphasis on how to teach and supervise motivational interviewing in the real world. Their enthusiasm for the subject was infectious and I was left in agreement that learning motivational interviewing should be a priority in medical education.

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Waking Up: Searching for Spirituality without Religion

Sam Harris
Bantam Press, 2014, £20, hb, 245 pp.
ISBN: 9780593074015

Sam Harris has been waiting to write this book for over a decade. This may surprise some. The subject matter – dealing reverently with human spiritual experience – is at odds with Harris' (in)famous public persona as a strident critic of religion. Yet, for the past 20 years Harris, who has degrees in philosophy and neuroscience, has been on a personal quest in search of 'transformative insights about the nature of one's own consciousness'.

Harris defines spiritual practice as the efforts people make, through meditation, use of psychedelics or other means,

to fully bring their minds into the present. This practice leads to the insight that our sense of having a unified self is an illusion and that this illusion causes us much psychological suffering. Harris aims to convince his reader of this using philosophical thought experiments, discoveries of contemporary neuroscience and personal experience. He also encourages his reader to test these hypotheses about human consciousness 'in the laboratory of your own mind', through meditation practices inspired by Buddhist Dzogchen and Vipassana teaching. He argues that these spiritual insights can be accepted independently of the metaphysical baggage of traditional religion, and laments that until recently they have been under-investigated by an 'impoverished' neuroscience.

The resulting book is an ambitious mosaic: part memoir, part neuropsychology text and part meditation guide. A key strength is Harris' clear, lively and personal writing style, which instils the prose with an endearing conversational air. Many readers will feel, however, that by focusing almost exclusively on solitary meditation practices and psychedelic drug-induced experiences, Harris has omitted important dimensions of human spiritual experience, such as the self-transcendence which may be arrived at when contemplating art or engaging in communal ceremonial practices. Moreover, the occasional barbed criticism of monotheistic religion will deter some readers, but play well to the Harris faithful.

Waking Up is a book for the general public and is not intended to have a clinical application. Why, then, is it being discussed in the pages of this journal? My answer is twofold. First, as psychiatrists we are interested in all dimensions of human experience. Consequently, the growing scientific interest in the mystical/spiritual experience and its potential therapeutic implications is of great importance for our specialty. Second, psychiatrists are humans and all humans may benefit from being reminded from time to time that our conventional sense of a unified self sitting some 2 inches behind the eyes is likely to be a pernicious illusion.

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Deconstructing the OSCE

Duncan Harding
Oxford University Press 2014, £19.99, pb, 128 pp.
ISBN: 9780198704874

This volume contests that it is possible to develop a generic way to approach different Observed Structured Clinical Examination (OSCE) scenarios, regardless of medical specialty. Perhaps surprisingly, it is not filled with possible exam scenarios, but rather looks at the underlying barriers to good performance. In this regard, it provides a behavioural and psychological schema for approaching the OSCE. The book

makes no apologies for aiming at those who have already had a previous attempt at passing the OSCE, and given that pass rates for membership exams are generally around 50–60%, it is a resource available to a great number of doctors in training.

The initial chapters look at the common emotional and cognitive responses which typically follow an unsuccessful examination attempt – they do a good job of validating these experiences and feelings. Subsequent chapters aim to improve general exam strategy. These include the perhaps more neglected areas of good exam performance; for example, how to establish rapport with the actor or patient, and how to run a good study group and learning environment. An especially useful chapter is that which explores challenging scenarios such as 'the angry relative' or 'the crying patient'. Although these passages are brief, practical tips are given to aid communication in these often difficult situations.

In addition, there are worksheets that support the doctor in understanding that the way they think about the exam influences their emotions and, ultimately, their exam performance. The psychiatry trainee will be no stranger to this process; however, I wonder whether trainees from other specialties might find the experience alienating.

This work undoubtedly highlights that poor exam performance is often not related to lack of knowledge, but to cognitive and emotional barriers. As a result, it may provide a good starting point for ongoing study where examination performance has proven problematic.

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Schizophrenics can be good mothers too

By Q. S. Lam
Muswell Hill Press, 2015, £17.95, pb, 200 pp.
ISBN: 9781908995155

To protect her children the author of this book chose to publish it under a pseudonym, Q. S. Lam. However, it's easy to break her anonymity and she accepts it can only be partial. She is a British Bangladeshi artist who has had several psychotic episodes, including postpartum. She has been diagnosed with schizoaffective disorder but prefers to describe herself as having a different sort of brain.

Her friend Stephen Fry has described the book as 'brilliant' – an endorsement displayed on the book cover – and Alastair Campbell has tweeted the same. Artwork and poetry complement the narrative of the author's personal and family history, which includes episodes of psychosis, and the description of the dissociated parts of herself and how she recovers. She does not take antipsychotic medication.

She makes remarks – not always very complimentary – about each mental health practitioner that she has seen over