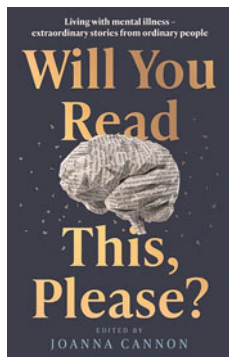


Book reviews

Edited by Allan Beveridge and Femi Oyeboode



Will You Read This Please?

Edited by Joanna Cannon
The Borough Press. 2023. £14.99
(hb). 224 pp.
ISBN 9780008519971

The title of this book, edited by Joanna Cannon, has one of the clearest messages for people with, or without, psychiatric disorders, and my response to all those who contributed is – thank you for letting me read this.

When I first opened it, I had some doubts, largely because there were so many contributors. Twelve people with different psychiatric illnesses and experience of services were paired with twelve talented and well-known writers to produce each chapter. At first, I wondered what the role of the writer could really be, but there is something special about a person who listens to words and can then convey them in a way that is easily understood by others. I think that this is what happened in most of these stories, so that they became less of a simple tale and more of a conversation between two people. They are explanations, both by a person and also for that person.

As someone who has experienced severe mental illness, I was cautious, as it can be tempting to over-compare one's own experiences with those of others. I have had both perinatal mental illness and bipolar disorder, so found those chapters especially hard and interesting to read. However, the wide range of stories offered gave a great deal more to think about.

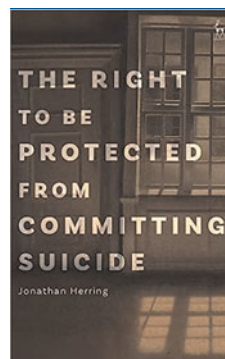
In many chapters, trauma plays a clear role; there are also presentations, such as emetophobia, that might easily be missed by a psychiatrist looking for more usual diagnoses. Other influences, such as cults and gaming, are mentioned and we need to be alert to these, as well as understanding gender. There is a high prevalence of obsessive–compulsive symptoms and it is clear that these are not always obvious unless sought out. This book helped me to learn things about which I knew less.

It is also important to know what treatments people have been offered – or even had forced on them – and what their thoughts were, looking back. Aversion therapy, given to one individual, was appalling to read about, more so when it was acknowledged at the end of the chapter that conversion therapy is still available in the UK.

Ultimately, this was a book of stories about people, not just about their mental illnesses. I think it is this that makes it so compelling, and I am left wondering what happened next to each of them.

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The Right to Be Protected from Committing Suicide

By Jonathan Herring
Hart Publishing. 2022. \$104.12 (hb).
288 pp.
ISBN 9781509949045

This book expounds the view that suicidal people have the right to receive treatment and for reasonable steps to be taken to ensure they are protected from killing themselves. The book is very well structured and written in an engaging conversational style – with passionate and evocative accounts in places. This ensures that it will readily resonate with clinicians. The text is punctuated with plentiful realistic hypothetical examples to illustrate points and concepts. Although primarily looking at suicide in the UK it readily draws on global aspects. It makes no bones about the 'woeful failure of funding of mental health services in the UK [which means] that suicidal people are denied the support and help they desperately need'.

The chapter on the definition of suicide is enlightening as to how complex debates around this can be. Another chapter examines in detail the complex phenomenon and causes of suicide. This was eruditely written, bringing together the complexity and nuances of causative factors while noting 'somewhat dispiritedly' that the ability to predict suicide remains elusive and 'no better than it was 50 years ago'. It saliently notes that we remain a long way from any form of predictive test. One of the main chapters looks at ethics and suicide. The key concept of autonomy is explored in detail and is a thread running throughout the whole book. Although concluding that few suicidal decisions are 'sufficiently autonomously rich to fulfil that justificatory role', I felt there was very balanced discussion for and against this conclusion.

Two chapters look at the legal aspects and responses of suicide, including the Mental Health Act, Mental Capacity Act and the Human Rights Act – Article 2 of which being the basis for the book. These are essential reading for clinicians, especially the juxtaposition of autonomy and the application of the MCA, i.e. whether a person has capacity to take their own life, which can be for many a vexing proposition. Herring argues in favour of the view that all suicidal people have the right to be prevented from suicide but there are limits on the circumstances in which the state is responsible for the breach of those rights. This is clearly analysed and described in detail. Herring accepts that there are resource issues in this being applied.

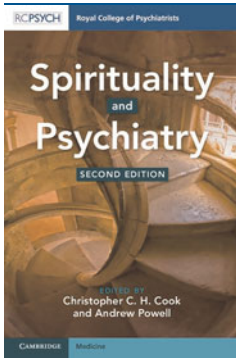
He opines that the importance of suicide prevention has largely been lost and should be recognised as a major social justice issue. One of the strongest chapters examines suicide prevention. It provides a compelling evidence-based review in advocating for suicide prevention strategies being best placed outside that of compulsory detention, which is often thought of as a primary preventive process.

Although clearly advocating a particular line of thinking, Herring has, however, provided a balanced review of this important topic. The preamble describes it as a 'ground-breaking' book. I am very much inclined to agree with this. I would particularly recommend it to core and specialist trainees in terms of being a deep-dive review of this topic, as well as a revitalising text for consultants.

Editor's Note: Though it is notable that the title runs against the current view that we ought to desist from using the term 'commit suicide'.

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Spirituality and Psychiatry

(2nd edn) Edited by Christopher C.H. Cook and Andrew Powell. Cambridge University Press. 2022. £39.99 (pb). 418 pp. ISBN 9781911623304


Psychiatrists routinely ask patients about personal matters: their most intimate relationships, their sexual practices, their trauma histories and more. But psychiatrists are often reluctant to explore spirituality and religion with patients. Should psychiatrists and other mental health clinicians do so?

The authors of *Spirituality and Psychiatry* answer with a resounding 'yes'. Most straightforwardly, this is because spirituality, conceived broadly as the human encounter with matters of 'fundamental or ultimate importance' (p. 5), is integral to who patients are. Whether or not this encounter manifests in specific beliefs,

communities and practices that might be called 'religion,' clinicians do not properly know unless they are willing to ask patients – especially as many patients may withhold disclosure of their spiritual and religious commitments if they fear that their views will be disregarded or censured. The book equips clinicians to explore spirituality in a pluralistic society through a range of assessment tools. It later describes a range of spiritually inflected psychotherapies that may be helpful for certain patients, and wisely highlights the capacity of spiritual practices and communities to harm as well as to heal.

But the delight of this book is that it does so much more. Replete with clinical descriptions, *Spirituality and Psychiatry* is less a dissection of spirituality than a vision of how beautiful and empowering mental healthcare can be when approached in a humane and spiritually open way. To give a few of many examples: Susan Mitchell and Glenn Roberts offer thoughtful reflection on listening, learning and collaboratively discerning alongside patients experiencing psychosis. Drawing on qualitative research, Glòria Durà-Vilà and Simon Dein distinguish depression from the spiritual phenomenon of the 'dark night of the soul'. Gwen Adshead humanely considers the opportunity of forensic psychiatrists to act justly and compassionately toward offenders, attempting 'to transform narratives of cruelty and madness into narratives of regret and hope' (p. 202). I approached the text expecting a rather dull psychiatric textbook. I left it with a renewed vision of the kind of clinician I want to be.

The text will be useful for psychiatrists and other mental health clinicians who seek to deepen their knowledge and proficiency in engaging matters of spirituality. It will also be useful for chaplains and faith leaders who are interested in matters of mental health. But it will more broadly help any clinician who, perhaps mired in the bog of everyday practice, simply desires a breath of fresh air.

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