



review of the month

Alternatives Beyond Psychiatry

Editors: Peter Stastny and Peter Lehmann

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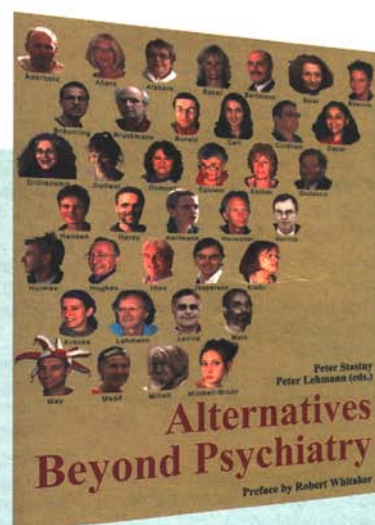
This book is mainly composed of stories. Before one reads a word, the faces of most of the 61 story tellers greet the reader from the cover. They promise material that is steeped in personal and collective experiences, insights and opinions. The book is edited by Peter Lehmann (who is also the publisher) and Peter Stastny, who have done a remarkable job in translating and weaving these stories into some kind of coherent whole.

The overall focus is on the provision of care and support to people outside mainstream psychiatric services, or more particularly outside of bio-medical and coercive treatment paradigms. A vast terrain is covered: from personal experience of and critique of psychiatric treatment, accounts of what has helped and hindered in personal recovery, stories of setting up self-help groups and organisations, providing safe places and houses, non-pharmaceutical approaches to care, and potentially coercive and discriminatory legislation and practice.

It is difficult to sum this book up easily. In parts it reads like a *Lonely Planet* guide with specific details developing alternative services (what worked and what didn't, and how funding was secured – or not in some cases – and who to contact for more infor-

mation. Other sections read more like travel brochures providing a tantalising glimpse of a destination, but little information on how to get there on one's own. Still other parts read like personal travel diaries, with stories that will resonate with some readers, and give hope to and encourage others. As one might expect some contributors are more engaging story tellers than others, some are more ready to cite evidence in academic style or argue rhetorically. The reader is, therefore, challenged to traverse these different styles but the journey is worth it. It is a dense book with very little white space in the 431 pages and I did not find it easy to read from cover to cover. Like a *Lonely Planet* guide I found myself dipping into sections, skim-reading or reading parts according to what drew me in.

The book is divided, in a fairly loose way, into sections under which stories and accounts (usually around 10 pages long) on each theme are placed. The first section 'Why psychiatry hurts more than it helps' is the shortest but the premise that psychiatric approaches to distress and particularly psychiatric drugs and forced treatment are harmful is a unifying theme that is revisited in different ways throughout the book. Anyone who has a rose tinted view of the history of psychiatry or who complacently characterises the psychiatric enterprise as benignly paternalistic will be jolted by Dorothy S Buck-Zerchin's testimony of forced sterilisation and treatment in Germany, titled 'Seventy years of coercion in psychiatric institutions'. Dorothy provides chilling accounts of five hospitalisations in Germany between 1936 and 1959 and, more positively, writes about 48 years of recovery and an outline of what has been helpful (and not) to her



and others. This translation is of an address at the European Network of (ex-)Users and Survivors of Psychiatry (ENUSP) conference in Dresden in 2007 and is available on-line at www.enusp.org/dresden.htm.

'Actual Alternatives' is divided into three subsections. The first deals with individual strategies and starts with brief accounts from a range of contributors about what has helped them to deal with madness. These are not idealised or romantic accounts of distress or recovery and most readers will find some strategy that might usefully inform their own lives or those of others. Other content areas address 'natural healing' for depression, exercise and advance directives.

The second sub-section provides accounts of setting up and participating in formalised self-help groups such as the hearing voices network and the Icarus project. Those who might be involved in various self-help endeavours will find this section particularly interesting and useful. Health professionals may be drawn more to the third sub-section, 'Models of Professional Support'. This section commences with an overview of the Soteria model developed by Loren Mosher and others in the 1970s in which people with

what we now call 'first episode psychosis' worked through their crisis with minimal pharmacological intervention. This section also includes accounts of projects from around the world including the Windhorse Project, the user-controlled Hotel Magnus Stenbock in Sweden, the Crisis Hostel Project in Ithaca New York, Runaway House in Berlin, the Second Opinion Society in the Yukon, the Open Dialogue project in Finland and other approaches to dealing with crisis. Not for the first time, I wondered with a tinge of anger, how such patently sensible, respectful, generally preferred (by service users), soundly evaluated (particularly in relation to Soteria), and cost-effective services remain on the fringe of the mainstream or struggle to survive on donations.

The next section addresses how the needs of groups such as families, children and adolescents, people from non-western cultures, those with dementia and men who don't conform to stereotypical views of being men might be better addressed through different ways of knowing and approaches to care. The section on respecting and supporting people with dementia was memorable to me and one that I will recommend to nurses and students along with other parts of this section that have immediate practical application. The next section entitled 'Realizing alternatives and humane treatment' also has practical import and outlines a range of projects and organisations which support, encourage and agitate for alternative care and humane treatment. Those with any interest in human rights and advocacy will be fascinated and heartened by accounts of how forced drugging or 'involuntary treatment' has been successfully challenged in some jurisdictions, others will be interested in the legal status of advanced directives or

be drawn to join one of the many advocacy organisations described.

The final section and three short chapters address 'why we need alternatives to psychiatry'. These reiterate the limits to neurobiological explanations of illness, particularly as exclusive models for helping people, the dangers associated with somatic treatments and the destructiveness of coercive treatment. They raise questions about the extent that the psychiatric industry can be reformed and outline a case for the development of alternatives both within and external to mainstream psychiatric services.

Alternatives Beyond Psychiatry will be of enormous value to any psychiatric and mental health nurse interested in extending, reforming or developing his or her practice in ways which enhance personal choice, and enable recovery. The sustained criticism of bio-medical explanatory models and coercive care will make some readers uncomfortable but hopefully this discomfort might be channelled into exploring in greater depth some of the alternatives that have been tried, tested and shared in this volume.

This is a book about people and personalities as much as about practice. It will assist in building networks or communities of interest and support. Some people might be moved to engage with some of the organisations represented or contact some of the writers. As a book of mostly stories it is incomplete. There will inevitably be a need for another volume in a few years to check in with the people and the progress of their various projects. I hope at that time the book is many times bigger and what now counts as alternative or beyond psychiatry is centre stage.

Richard Lakeman