



## International Congress of the ISPS in 2021.

The deadline for receiving bids is 1<sup>st</sup> April 2019, but we would like to receive expressions of interest as soon as possible so that we can send you further information about the bidding process. Contact [isps@isps.org](mailto:isps@isps.org)

### **The International Society for Psychological and Social Approaches to Psychosis (ISPS) will hold its 21<sup>st</sup> international conference in Rotterdam**



#### **Theme:**

#### **Stranger in the city**

#### **On the circular**

**relationship between alienation and psychosis and the healing power of human reconnection**

**Date: August 28<sup>th</sup> - September 1<sup>st</sup> 2019**

**Place: [De Doelen](#), Kruisstraat 2, Rotterdam**

(very near the railway station, ¾ [hour](#) by train from Schiphol airport)

#### **What is ISPS?**

ISPS was founded by Gaetano Benedetti and Christian Müller, two young psychiatrists who wanted a more humane treatment for people with psychosis. ISPS has been organising international and regional conferences since 1956. Learn more about the [history](#) of ISPS.

ISPS carries on promoting psychological and social approaches even in times when it is not in fashion to do so. ISPS has a tradition of dialogue: clinicians from different therapeutic approaches, researchers, people with lived experience and family members are all in conversation with each other through ISPS.

#### **THE CALL FOR PAPERS IS OPEN - You can submit an abstract here**

**The deadline for submitting an abstract is 17th March 2019 at midnight CET**

(Subjects connected to the [themes](#) of the conference will be given priority)

#### **Themes of the ISPS Rotterdam 2019 conference**

##### **Day 1**

On August 28<sup>th</sup> the preconference there will be courses and workshops on the newest developments of different kind of therapy approaches.

##### **Day 2**

On August 29<sup>th</sup> epidemiological researchers and (cultural) experts with qualitative knowledge will try to give an answer to the question: what is the reason that people belonging to minority groups with low status have 5 to 8 times more chance to experience psychosis? And what does that tell us about the dynamic of psychosis when we compare it with the circumstances of people with psychosis who are not from a minority group?

And what to do about it? The afternoon of this day will be spent on approaches that are focused on this problem.

##### **Day 3**

On August 30<sup>th</sup> people with lived experience, family members and clinicians will discuss the alienation between someone who is psychotic and the others. Will non- medical models of psychosis help, or other therapeutic approaches?

##### **Day 4**

August 31<sup>st</sup> will be a day open for the public. The voice of psychosis will be discussed, what does it tell us about society? Is the road to psychosis the same as that of Jihad? What does it mean that the destruction of the world is so often a theme of psychosis? Other ways of organising society, like Ubuntu, will be explored.

##### **Day 5**

The morning of September 1<sup>st</sup> will be spent on new research. The conference will end with a debate.

Registration for the conference will open soon at [www.ispsconference.nl](http://www.ispsconference.nl)

**Welcome to ISPS Rotterdam!**



## ISPS 2019 KEYNOTE SPEAKERS INCLUDE

**Wim Veling** is deputy professor of Psychiatry at the Faculty of Medical Sciences of the University of Groningen. His teaching assignment concerns Psychosis in the Social Context. He works as a psychiatrist and head of treatment for the Psychoses department at the University Center for Psychiatry at the UMCG. Wim Veling's research focuses on causes and mechanisms of psychosis, in relation to the social context in which people live. The social context means the daily living environment, but also the geographical, socio-economic, ethnic and cultural context. Based on this research, he develops new ways of diagnostics, prevention and treatment. Wim's earlier research showed that some population groups with a migrant background in the Netherlands have an increased risk of getting psychosis. This risk was strongly influenced by the ethnic composition

of the neighbourhood in which people live, the extent to which groups experience discrimination and the way in which people deal with social exclusion. He is now working on prevention of psychosis and other psychological problems among young people, in which learning to deal with social stress plays an important role. He is also interested in examining the risk of psychosis in sexual minorities and in low- and middle-income countries. In order to better study the influence of the social context, Wim Veling introduced Virtual Reality (VR) research into psychosis in the Netherlands. He has shown that with VR it is possible to study in detail how people with suspicion and fear respond to social environments that are stressful for them, and how they behave in social interactions. He researches various VR treatments that can help people to reduce their psychological complaints and to function better socially. Wim Veling is closely involved in the care for people with psychosis in the Netherlands. He was chairman of Network Early Psychosis and led the working group of the recently published Care Standard Psychosis.



**Françoise Davoine** is a psychoanalyst, currently working mainly with patients with psychosis and trauma, and supervising trainees. She has worked for over 30 years as an analyst in public psychiatric hospitals and is also a faculty member of the Ecole des Hautes Etudes in Paris, an institute of social sciences, for many years she led a weekly seminar entitled "Madness and the social link" with her late husband Jean Max Gaudillière. The seminar group focused on authors dealing directly with madness and traumas, like Wittgenstein, Cervantes, and Laurence Sterne's Tristram Shandy. One of these publications was about the encounter of the "Theatre of the Fools" in the Renaissance era and hospitalised patients today. It became the book "Mother Folly", which Mieke Bal, University of Amsterdam, turned into a film with Michelle Williams Gamaker: "A long History of madness". This film shows Françoise Davoine's way of working with the "strangers of the city", patients encountered

on the very site of their exile, from cut out parts of History. Transference in such cases is an interference with analogous zones in the analyst's story, and delusion a way of research for another able to connect a broken social link at the crossroad of their story of abuses and the catastrophes of history which occurred in their lineage. The outcome of a new loyalty, stemming from the pitfalls of classical psychoanalysis, puts into motion an arrested time, frozen on death areas "whereof one cannot speak", but does not stay silent for one shows what cannot be said, looking for an address.



**Dr. Sushrut Jadhav**, M.B.B.S., M.D., MRCPsych., Ph.D., is a Senior Lecturer in Cross-cultural Psychiatry at University College London (UCL); and Consultant Psychiatrist at Camden Homeless Outreach Services & Islington Mental Health Rehabilitation Services, Camden and Islington Community Health and Social Care Trust. He is the Founding Editor of the international journal, Anthropology and Medicine (Taylor & Francis). He is a visiting professor at University of Ghent, Belgium. Dr Jadhav graduated from Grant Medical College, Mumbai, and completed his postgraduate training in psychiatry at the National Institute of Mental Health & Neurosciences, Bangalore.

In his own words: My career in cultural psychiatry has been shaped by a number of factors. These include my personal family origins from a Dalit untouchable caste that sensitized me to stigma and allowed me to define the 'centre' from a 'marginal' position. I attended English convent schools in six culturally contrasting cities of India, during which I was taught Shakespeare, Bible, and good discipline. Stimulating and generous mentorship, both in India and abroad (Professors Somnath Chatterji, Mohan Isaac, R Raguram, Roland Littlewood and Mitchell Weiss) shaped my subsequent career identity.

My research work on cultural experience of depression amongst white Britons in London critically examined and aimed to enhance theoretical underpinning of cultural psychiatry. Findings from my research demonstrate the usefulness of new methods and their broad implications; not just for minorities, but also for a clearer understanding of illness-related experience, meaning and behavior of majority culture patients. Further information [www.ucl.ac.uk/ccs/sushrut-jadhav](http://www.ucl.ac.uk/ccs/sushrut-jadhav) and <https://www.wpa-tps.org/about-wpa-tps/members/sushrut-jadhav>

Photo: Dalit Avatari's singing songs of liberation from oppression in Uttar Pradesh State, India

## Heartfelt thanks to Alison Summers Outgoing Co-editor of the ISPS Book Series

### From the previous series editor

I first got to know of Alison not long after I was appointed as a Consultant Psychiatrist to an Early Intervention in Psychosis service in 2005. I was very keen to meet her as before that I did not know of any other person beside myself in such a post who had a psychodynamic training. It was a great relief and very exciting to find such a fine colleague with similar interests and 'beliefs' in the importance and relevance of psychodynamic understanding to psychosis. I was immediately impressed by her and I think I introduced her to ISPS UK and before long she was putting on a small ISPS UK conference in the North West of England drawing together a number of people who subsequently played an important part in ISPS UK, family members and members with experience of psychosis as well as professionals from different disciplines.



She subsequently organised a really memorable day bringing over the very talented Danish Psychiatrist Lars Thorgaard, not long before he passed away. Lars was brilliant in conveying how to make a therapeutic relationship with people experiencing psychosis and use psychodynamic understanding using everyday words and with such empathy.

Alison and I had a lot of contact when she took the lead in trying to get off the ground a ISPS UK national research programme in supportive psychoanalytic psychotherapy for psychosis, this time using the research experience of another talented Danish psychiatrist and psychoanalyst Bent Rosenbaum who led the Danish research project to publication with its encouraging results I was very impressed with Alison's organisational skills, her firm but so friendly handling of the group of interested persons and getting through a full agenda and how much energy she put into this project and capacity to attend to the tedious detail of the applications. It was a big disappointment to us all that we got knocked back for all kinds of seemingly spurious reasons by research allocation committees and in the end we gave up.

During this time I was the editor of the ISPS book series and I had no hesitation in Alison being at the top of my list when I felt the time was approaching for me to find a successor. I was, of course, delighted when she accepted and agreed to work alongside me for a year or so before I stepped back; it is such a source of satisfaction to me to have started a project such as the ISPS book series and to be able to hand it on with such confidence as I had in Alison and to see its continuing development. It is my impression that her rigour brought the quality of the books to a new high standard and furthermore she took important initiatives in the book series in a) making sure that there was no automatic use of the word schizophrenia and b) developing rigorous guidelines in making sure that if clinical work was described that any person mentioned gave their permission for publication. Amongst others, books published under Alison's editorship include [Art Therapy for Psychosis](#), edited by Katherine Killick, and a book on personal experiences (in press).

Alongside the responsibility for editor ship and co-editorship of the books, Alison, Bent and myself wrote what we regarded as a series of important articles for psychiatrists to help to know about the psychodynamics of psychosis, how to make a formulation of problems related to psychosis and to demonstrate a supportive psychotherapy for psychosis. (Advances in Psychosis Advances in psychiatric treatment (2013), vol. 19, 124-131 doi: 10.1192/apt.bp.111.009126, <https://pdfs.semanticscholar.org/b0c2/ae943e883cb3375c5f04816f024ab891ebb0.pdf> <https://www.cambridge.org/core/journals/advances-in-psychiatric-treatment/article/using-psychodynamic-principles-in-formulation-in-everyday-practice/9E26EFED1AE9B0228C0585DE98B71382>

Alison realised that a psychodynamic formulation is of much greater value than attempting to be precise in psychiatric diagnosis. I remember the fun the two of us had at an ISPS international conference quite a few years ago, demonstrating the value of formulation utilising Freud's Schreber case using masks for the key characters. How she had time to take on and be such an active leader of ISPS UK during this time is beyond imagination! More about this from Alf Gillham, below.

Last but not least, Alison took the lead in the organising committees for the ISPS international meeting in 2017 in Liverpool. My having had the similar role in 1997, the first time the UK organised an ISPS international meeting, I did not envy her taking on this role. The responsibility is enormous. Alison got a really good group to work together and ensure that the responsibilities were well shared out. I think an outstanding aspect of the organisation was the way in which Alison continued her determination to have experts by experience of psychosis and family members taking major areas of responsibility in the organisation and content of the meeting. For me this has been one of the biggest changes in ISPS in the last twenty years and in my view the Liverpool ISPS conference was the most successful yet in this respect.

Brian Martindale,  
Past Chair ISPS, previous ISPS book series editor  
On behalf of the ISPS EC

### From the ISPS UK

I remember well first meeting Alison at the 50<sup>th</sup> anniversary conference of ISPS International. I attended on my 50<sup>th</sup> birthday as a present to myself, as I was so impressed with ISPS and its history. I immediately recognised a fellow soul, who felt the same way about ISPS, and that psychotherapy had much to offer the understanding of psychosis. We both joined ISPS-UK committee at the same time and went on to work together on many projects. When David Kennard stepped down as Chair Alison stepped up to the plate and helped navigate ISPS-UK through some very difficult times. ISPS has much to thank her for this (and David). Always caring and able to listen to all views of the committee, it became and still is a very welcoming family. I know that I consider her a close and valued friend as well as a colleague.

Our last big collaboration was when she chaired the committee that organised ISPS-INT International Conference. A huge undertaking, I somewhat blindly agreed to chair the group putting the programme together. I can honestly say that without Alison's skills with helping with this, the conference would not have taken place. It placed an enormous strain on her, and the success of the conference is due largely to her input. She has left ISPS-UK in the very capable hands of Akiko Hart, another special person. It's great how ISPS attracts such people. We both step down from the committee soon, but it going from strength to strength, a strong legacy, and important family.

Alf Gillham  
ISPS UK Executive Committee

## ISPS Regional group activities Focus on Australia

This has been an exciting year for ISPS Australia as we have continued to present education, training and promotion of psychological and social approaches to psychosis. We were particularly proud to present both a workshop and conference on the theme of Compassion in Psychosis. These events were held in Brisbane and were considered a success as they had good attendance, were financially viable and presented innovative ideas and approaches to working with and understanding people who experience extreme states. As our members are spread around Australia, it's always wonderful to meet people in person at these events and they are a great opportunity to get together, network and share ideas.



International Society for Psychological  
and Social Approaches to Psychosis

Although we worked hard to make the workshop and conference a success, on a personal note, it was a fabulous experience to attend and there was much I learned and will value for years to come. It was a privilege to meet Eleanor Longden and to have her sharing her experience, insights and knowledge in both the workshop and conference. Like many people who know her TED talk, I have found her to be inspiring and courageous. Charlie Heriot-Maitland was also an engaging and knowledgeable speaker – I feel I learned so much from that workshop and found it extremely meaningful and moving. The conference was also a highlight for the year. I felt enormously proud of our treasurer (and now our new chair) Matt Ball and his achievement of Mental Health Nurse of the Year – it is an honour to have him on our board and for him speak at our conference. And we are, as always, in awe of our NZ colleague Debra Lampshire and so grateful to her for attending our events and speaking at our conference. We were excited to have so many presenters from around Australia showcasing their work and sharing their experience – thank you to those who presented and attended.

While the workshop and conference did take up a lot of our energy, we continued to engage in other activities in support of our objectives. We presented an Open Dialogue seminar and training by Nick Putman and Richard Armitage at The Royal Australian and New Zealand College of Psychiatrists (RANZCP) Queensland Branch office. ISPS Australia is grateful to the College for their support and the opportunity to share new ideas on psychological and social approaches with psychiatrists. We believe it's important to build links between different areas and professions within mental health and to look at ways that we can all be working together. We have been pleased to continue our relationship with St Vincent's Hospital in Sydney and support their interest and initiative in Open Dialogue and also to join forces again with Australian College of Applied Psychology in their presentation of a talk by visiting UK Prof Peter Kinderman.

Our Schizophrenia Awareness Week statement "Drop the Label" was also quite successful and was picked up by Mad in America thanks to the efforts of Matt Ball who wrote a blog on the subject. Thanks also go to our Communications Officer Stephanie Mitchell who has been developing our social media profile and managing our new facebook page.

We are also continuing to develop our website and resources and aim to update this over the next 6 months. And as always, we are liaising with presenters to continue our objectives of offering cutting edge training and education on psychological and social approaches to psychosis.

We give thanks to our members for their support and I also want to extend my gratitude to the board for their efforts and dedication to ISPS Australia.

Melissa Connell, PhD, DClinPsych  
Outgoing ISPS Australia Chair

### ISPS Australia - Compassion in Psychosis Conference, 24<sup>th</sup> March 2018 Lived Experience, Conference Highlights by Amanda and Lyn

**Amanda:** this was my first ISPS AU conference, and to be there from the beginning of the dream, be involved in the planning and delivery, and be there in person was such a rewarding and worthwhile journey. Being able to witness all our work as a board come to fruition was rewarding. A highlight was that through promotion of the conference, more people got to learn about us and we have been able to welcome new members.

I really loved the idea of creating a conference space open for all to come together; different clinicians as well as both individuals and family members with a lived experience, and everyone feeling they had an equal place. Through my own circles I had promoted ISPS AU and the conference, inviting and encouraging lived experience colleagues to attend and present, so it was lovely to see so many familiar faces present. I particularly enjoyed hearing from such a diverse group of people about the power of compassion and how useful it has been both personally and professionally in their lives.

Another highlight for me was co presenting a workshop on Compassionate Listening through Peer Supported Open Dialogue. I left feeling I had been professionally nourished with an increased sense of hope for the future.

I found value in the Compassion Focussed Therapy workshop as I was instantly able to apply the theory of the circles, due to their power and simplicity, into my own practice facilitating Hearing Voices Groups. Also, as a result of both the training and the conference, I noticed my own compassionate circle has strengthened and grown. Applying the compassion focused therapy approach enabled me to say 'yes' when asked to use my own lived experience live on radio; what also helped during the interview was the presenter/journalist, Lyn Malcom's real, authentic, respectful

approach, which felt like 'compassionate journalism' at its best.

Amanda Waegeli  
Lived Experience Board Member Perspective

**Lyn:** A highlight of the conference for me was being among others who are interested in compassionate approaches. I am all too often reminded of the lack of compassion I often felt when using services and how wonderful it is to know that people like Paul Gilbert, Charlie and so many other clinicians and peers are deeply interested in compassionate approaches. The conference theme struck me on a personal level too, and I was reminded of the fact that learning to allow compassion in was lifesaving for me; historically, I have been my own worst enemy with my inner critic being amplified via a voice I called 'the annihilator', which says it all I guess. When I finally invented my 'compassionate interpreter', it has changed my life and kick-started my recovery, and so listening to all the different presentations at the conference did my heart good for sure. This is the message I would love to see get out there as I strongly believe more as self-compassion is key.

The other part of the conference which was great was the in-between session chats I had with people I know, those I am getting to know, some folk I had heard of or seen in emails, as well as new people too. Another layer which was very special for me was getting to spend time with my colleagues on the board. We meet and do the work or managing ISPS via Skype and email over the years and so getting together in person not only deepened our connection, the flow on effect of it is good for ISPS Australia too. I have nothing but appreciation to our fellow ISPS Au Board Directors for their contribution to us making this fabulous conference come to fruition and also the stewardship of our chair Dr Melissa Connell who led this process.

Lyn Mahboub  
Lived Experience Board Member Perspective

#### **Psychiatrist Snapshot Report by Dr David Ward**

This conference exceeded my expectations. A keynote presentation by Dr Eleanor Longden and Dr Charlie Heriot-Maitland was absolutely exceptional and truly inspiring. This story needs to be heard by all professionals aspiring to or already working in mental health. It is also very important for all medical staff from medical school to the grave.

The additional keynote by Matt Ball telling the story of a mental health professional's experience of the system was again inspiring and informative. All the workshops were informative, thought provoking and practically helpful. To close the day with another inspirational and articulate talk from an expert in lived experience Debra Lampshire, was a fitting tribute to a conference that was truly passionate about enabling recovery from those experiencing extreme states such as psychosis. ISPS continues to deliver and credit should be given to the Australian Chair Dr Melissa Connell.

Dr David Ward  
Director of Adolescent Psychiatry, Metro North Mental Health – RBWH

#### **MEDIA SNAPSHOT REPORT ABC Radio National:**

We were delighted to have ABC *All in the Mind* journalist and radio presenter Lynn Malcom at our *Compassion Focused Therapy for Psychosis Workshop 2018*. She interviewed our conference keynote Charlie Heriot Maitland as well as Board Directors Matt Ball and Amanda Waegeli. The program was accompanied by singer, songwriter, voice hearer and board director extraordinaire Amanda's music *Amanda's Dance*, published by Restless Music. You can listen to the podcast of the program **Compassion therapy for voice-hearing**: <http://www.abc.net.au/radionational/programs/allinthemind/compassion-therapy-for-voice-hearing/9692796>

#### **Petition to the WHO & APA to Drop the Term "Schizophrenia" Brian Koehler PhD, MS**

**My petition to the World Health Organization and the American Psychiatric Association, now has about 6,150 signatures.** I would like to thank every person who signed onto this petition. I am hoping to reach 20,000 signatures before sending it into the WHO and APA. So please if you have not signed, consider signing, and if you support this petition could you please circulate it widely to colleagues, friends, and on social media venues: such as listserves, FB pages, Twitter, etc.

The diagnosis of "schizophrenia" is still based on "expert opinion," there are no biomarkers, genetic or neuroimaging tests which contribute to arriving at a diagnosis. The biological changes observed in "schizophrenia" are non-specific and lacking the sensitivity required to make a diagnosis. As I pointed out in the mid-1990s and to the present, the neurobiological and biological changes observed in persons diagnosed with "schizophrenia" are often non-specific, and overlap significantly with the biological changes observed in persons with early life stress (including prenatal stress), chronic stress, adverse childhood experiences (ACEs), social isolation/social defeat, neglect, etc., including the new emphasis on inflammation and neural connectivity. There is also the confound of antipsychotic agents which are now known to cause some atrophy of neural tissue as well as being cytotoxic to the endothelial cells that comprise the blood brain barrier.

Importantly, my concern with the term "schizophrenia" is that it is highly stigmatizing. There is research showing that if people with this diagnosis believe others know of it, the result is impaired communication (probably due to stress, anxiety and anticipated fears of rejection and the resulting loneliness). The aspects of dangerousness and non-recoverability seem hardwired into the diagnosis in the minds of the public, media and press and in many clinicians as well, despite strong evidence to the contrary. There is also research indicating that the fear of stigma can trigger "relapses" in some individuals. Psychoanalyst Heinz Kohut suggested that the universal fear of becoming mad may be rooted in a fear of losing the resonance and support from the social-relational surround.

Recently, Henderson and Gronholm (2018) in their article "Mental health stigma as a 'wicked problem': The need to address stigma in psychiatry and consider the consequences," published in the *International Journal of Environmental Research and Public Health*, called attention to the significant social problem of stigma and the need for more comprehensive approaches to reducing it.

Park (2016) in his article "Trends in Renaming the Korean Terms for Psychiatry, Schizophrenia, and Epilepsy" published in *Acta Psychopathologica*, noted:

"... the Korean term for schizophrenia was renamed from jung-shin-bun-yeol-byung (literally meaning 'mind splitting disorder') to jo-hyeon-byung (attunement disorder) in 2011 by Korean Neuropsychiatric Association and Korean Society of Schizophrenia Research in order to reduce the stigma of patients with schizophrenia in South Korea. Jung shin- bun-yeol-byung denotes the Korean pronunciation of seshin-bunretsu-byo, which was approved as the formal translation for schizophrenia, in 1937 by Japanese Society of Psychiatry and Neurology. In 2002, seshin-bunretsu-byo was changed to togo-shitcho-sho (literally meaning 'integration disorder')."

Neil Petersen (2016), in discussing the reasons for dropping the term "schizophrenia" in Japan, noted: "For most people in Japan, the term then used for schizophrenia, Seishin Bunretsu Byo ("mind-split-disease") implied an untreatable disorder that people never recovered from and that made people violent and dangerous. The term was also associated with a legacy of inhumane laws present for much of the twentieth century that stripped those diagnosed with schizophrenia of their legal rights and often resulted in them being confined indefinitely in isolation. The connotations of the term made it hard for doctors to discuss the diagnosis with their patients. In 1999, about half of all psychiatrists in the Japanese Society of Psychiatry and Neurology (JSPN) revealed a diagnosis of schizophrenia to their patients only occasionally. A mere seven percent told all their patients about the diagnosis as a rule... So JSPN decided to rename the disorder... Starting in late 2002, schizophrenia became known as Togo Shitcho Sho ("integration disorder") in Japan. Over the next few months, the new term spread rapidly through the psychiatric profession. Within seven months, 78 percent of psychiatrists in Japan were using it... Thirteen months out, 86 percent of doctors surveyed said they found it easier to communicate with their patients using the new term... In 2002, 36.7 percent of patients were informed about their schizophrenia diagnosis. In 2003, that number was 65.0, and in 2004 it was 69.7. The changes weren't limited to the psychiatric profession. The new term also started to work its way into the general public, and into the media. In the ensuing decade-and-a-half, the image of schizophrenia in Japan has started to shed some of the historical weight burdening it down. This year, a team led by researchers from the University of Tokyo analyzed 4677 articles about schizophrenia. They found that the portion of articles portraying people with schizophrenia as dangerous and threatening increased until the name change, then started to decrease... Words can carry deeply layered historical associations, and if we're serious about spreading mental health awareness, we have to keep that in mind."

Finally, I have been reviewing the responses of persons around the globe to my petition. I thought it would be helpful to include a sample of the many posted replies:

"The category is outmoded and there are far more useful ways to understand extreme distress and suffering."

"I'm signing because this label causes deep psychological damage to those individuals obliged to carry it and because anyway there is no disease in the first place, to be thus labelled."

"I think this is a term which is reductionist in its creation and continued use, and while ignoring external reality, other people and events, it treats those it labels as self contained "disease" processes obliged to accept the definition without question or complain."

"When I started work in the psychiatric services [1969], a senior psychiatrist told me that the term schizophrenia was just a coverall name for a great variety of symptoms that we did not understand and that soon it would fall out of use. He was half right; nearly 50 years later, we are still using it, with insufficient knowledge."

"Stigmatizing and offers no hope; low expectations of recovery in the US. When someone is told they have "schizophrenia", they are also told they will need medication and disability for the rest of their lives. Then the medication given actually destroys brain function. Wish we had Open Dialogue available in the US like they have in Lapland, Finland."

"Bleuler's neologism is loco parentesis [loco parentis is a legal doctrine describing a relationship similar to that of a parent to a child]."

"For years I didn't want to wake up in the mornings because I felt so bad. This was partly because I suffered so much from the schizophrenia label."

"The life of a hearing voices person is bad enough without the stigma of such labelling."

"Schizophrenia is a poor and almost useless term for some very reasonable experiences to trauma e.g. voice hearing. It does not help understand the person or the content of their experiences; it does not help the individual to be labelled as schizophrenic due to self-stigmatisation processes; the misconception of what the "diagnosis" means is still a contributing factor of public stigma. There needs to be a focus on discussing and describing experiences, not mythical and erroneous concepts of "symptoms"."

### **My petition to the WHO and APA can be accessed at the following websites:**

[www.change.org/p/american-psychiatric-association-apa-drop-the-stigmatizing-term-schizophrenia/nftexp/ex35/v4/644737274](http://www.change.org/p/american-psychiatric-association-apa-drop-the-stigmatizing-term-schizophrenia/nftexp/ex35/v4/644737274)

Spanish translation thanks to Ana Sofia Rodriguez from Mexico:  
<https://discapacidades.nexos.com.mx/?p=65>

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**We are very proud to announce that Professor Jan Olav Johannessen, Chair of ISPS, has won the the Richard J. Wyatt Award!**

The award is given every two years at the IEPA Biennial Conference, to an individual who has made a remarkable contribution to the area of early intervention in psychosis.

Who was Richard J. Wyatt?



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### **The LUC CIOMPI Award 2019 Swiss Society for Psychiatry and Psychotherapy**

The award is given for outstanding scientific work on relations between emotion, cognition and psychosis.

**Luc Ciompi is an Honorary Lifetime Member of ISPS  
You can read more about Luc Ciompi [here](#)**

Further information about the prize - deadline for applications 30th April 2019

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### **Upcoming Events**

**The ISPS has over 20 regional networks around the globe,** many of which organise annual events. Take a look at the impressive range of meetings and conferences taking place this autumn and in 2019.

[ISPS events listing](#)

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### **ISPS Book Series Edited by Alison Summers and Anna Lavis**

**The ISPS series of books illuminates the efficacy of psychological approaches in the treatment of psychoses.**

Written by ISPS members around the globe, these volumes reflect the compassionate and enlightened treatment patients worldwide are receiving.



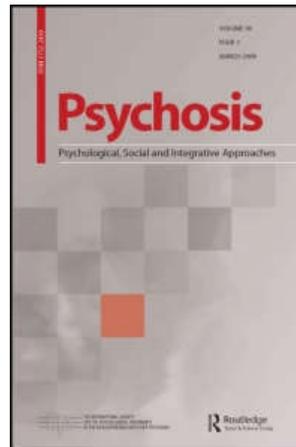
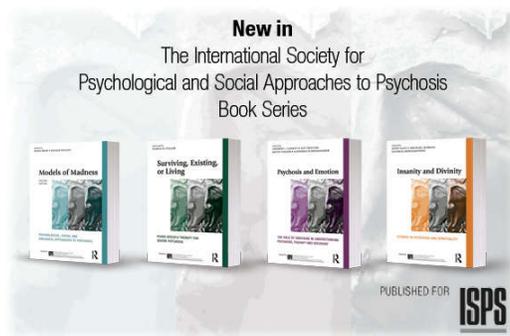
### **ISPS members receive a 20% discount when ordering through Routledge**

Some of the books will be controversial and certainly our aim is to develop and change current practice in some countries. Other books will also promote the ideas of clinicians and researchers well known in some countries but not

familiar to others. Our overall intention is to encourage the dissemination of existing knowledge and ideas, promote healthy debate, and encourage more research in a most important field whose secrets almost certainly do not all reside in the neurosciences.

There are over 20 books published in the series. Some books have been translated into Chinese, Italian, Russian, Spanish and/or Swedish.

[Find out more](#)



ISPS [www.isps.org](http://www.isps.org)

