



## ISPS AND BIG PHARMA

LETTER FROM THE CHAIR

BY MANUEL GONZÁLEZ DE CHÁVEZ

Saint Augustine stated that "it is bad to look at women, worse to speak to them and even worse, to touch them." Some mental health care professionals seem to have a similar attitude about the pharmaceutical industry.

Although we do not like it, we live in a world where the biological models of mental disorders are the dominant ones and where most of the patients who suffer these disorders take psychoactive medications.



Unfortunately for them, this is generally the only help they receive, that which the medical professionals offer them, that which the pharmaceutical industry continuously updates and the only type of help that many financial managers of the health care services consider to be profitable in terms of cost-effectiveness. But, what should we, the members of the ISPS who defend the use of psychotherapies in psychotic patients in our objectives, do? Should we demonize the drugs and the drug industry as Saint Augustine demonized women or should we look at them, speak with them and touch them without paranoia or other defence mechanisms?

In my opinion, in the ISPS, we should defend good knowledge of psychopharmacology. This may require us to not only correctly prescribe the drugs but also to know which ones are abused drugs and their many limitations.

Furthermore, we should know the biological models that are spread as arrogant dogmas. This is necessary in order to reveal their deficiencies and ignorances and to demonstrate the harm that is derived from such simplistic hypotheses that are far from the lives and persons who suffer these problems. The dominant biologicism is more an ideology than a science. But we should strive to understand it in order to refute it and offer other more extensive, global and integrating models as an alternative that would better explain the factors that participate in the origin of these disorders and the other models that may be of great help to these patients.

However, if the understanding of and attention to our patients make it necessary for us to know well the psychopharmacology and dominant biologicism, what should we do with the Big Pharma industry which is the motor that moves this entire biological circle with its immense benefits? Can we ignore it to exalt our purity? Can we move away from it as the monks and hermits tried to conquer the temptations of the devil in the flesh?

Whether we want it or not, the pharmaceutical industry is part of our world, as is the armament industry and wars, chemical industry and contamination,

financial societies and speculation or political corruption, of which Big Pharma is not devoid of. Although this industry has contributed greatly to the progress and health, they are, as Bertold Brecht would say, some obscure "merchants of pain" who finance and introduce their special interests into the political and health care institutions. This allows them to charge high prices and have immense benefits, promotions without control and clinical trials with shameless biases, doubtful evidence and regrettable concealing of information, and they have left a large part of the medical research and almost all of post-graduate teaching at the mercy of the pharmaceutical industry.

Whether we want it or not, the psychoactive medications and biological models are dominant in current psychiatric care and we, with more global approaches and interventions and combined therapies, are a minority sector. Perhaps we are the avant-garde, but we should be aware that this is not only a scientific debate. We fight against much passivity, simplicity, convenience and important interests. If we want to change the functioning of the health care services, we should form an active part of them, know the dynamics that shape them and influence more to qualitatively improve the future of our patients. We cannot isolate ourselves, acting as the Amish or the hermits of psychotherapies of psychosis. Nor should we hide behind the banner of a testimonial narcissism, that converts us - and not our patients - into our principal objective.



## Editorial

BY BRIAN KOEHLER PHD

### Emerging Neuroscience Research in Schizophrenia

Recent neuroscience research in schizophrenia points to altered DNA methylation patterns in the reelin gene which codes for proteins that are important in synaptogenesis, axonal branching, etc. This is important because many neuroscientists view schizophrenia as a disorder of neural connectivity. We do not usually see actual cell loss (except perhaps in the mediodorsal thalamic nuclei), rather, a reduction in neuropil (axonal and dendritic processes, arborization reduction), which, from my perspective, can be explained by the impact of experience, pre- and postnatally, as well as throughout life, on the CNS. Neurogenesis (the conversion of stem cells into functional neurons or glial cells, i.e., the birth of new cells) is suppressed by stress, as are neurotrophic factors, such as brain-derived neurotrophic factors (BDNF).

A large number of methyl groups attached to the cytosine nucleotide of DNA can lead to gene suppression, whereas demethylation or acetylation can result in gene expression. The former can be detrimental for genes that express proteins which nourish neurons (e.g., BDNF), reelin, glucocorticoid receptors (which help regulate stress reactivity through inhibitory influence on the hypothalamic-pituitary-adrenal axis, leading to reduced cortisol expression), etc. Interestingly, methylation is also increased in socially defeated/depressed mammals. Experiences such as early nurturance from caregivers increase acetylation of histones (which allows for DNA to be transcribed, despite methylation, what we refer to as transcriptionally competent DNA), thereby unraveling the DNA and making it accessible to the process of transcription and the encoding of new proteins.

When we look at the diversity and non-specificity of the neuroscience research in 'schizophrenia,' rather than, seeing a 'schizophrenic brain,' we may very well be seeing a 'socially isolated/defeated brain,' a chronically fearful/stressed/anxious/traumatized/ or depressed/hopeless brain. This has been my hypothesis first presented formally at our 1997 ISPS conference in London and elaborated on since then.

Brian Koehler PhD  
New York University & Long Island  
University/brian\_koehler@psychoanalysis.net

## Objectives of ISPS

- Promote the appropriate use of psychotherapy and psychological treatments for persons with schizophrenias and other psychoses
- Promote the integration of psychological treatments in treatment plans and comprehensive treatment for all persons with schizophrenias and other psychoses
- Promote the appropriate use of psychological understanding and psychotherapeutic approaches in all phases of the disorders including both early in the onset and in longer lasting disorders
- Promote research into individual, family, group psychological therapies, preventive measures and other psycho-social programmes for those with psychotic disorders
- Support treatments that include individual, family, group and network approaches and treatment methods that are derived from psychoanalysis, cognitive-behavioural, systemic and psycho-educational approaches
- Advance education, training and knowledge of mental health professionals in the psychological therapies

## ISPS secretariat

The ISPS secretariat is a link between our members and the executive committee. Until recently, the secretariat was partly hosted by the Centre for Psychotherapy and Psychosocial Rehabilitation of Psychoses (SEPREP), a non-commercial Norwegian foundation and network of users, clinicians and researchers promoting psychological treatment of the psychoses. Since the end of 2006, and after the election of a new ISPS board, SEPREP no longer provides secretarial services to the ISPS. We are very grateful for the secretarial help of Wenche Løyning over the past years.

Antonia Svensson in Athens continues to work part-time as ISPS Organiser. She continues to do most of the work of the secretariat that can be done electronically, as well as maintaining the website, assisting the Editor of the ISPS Newsletter, managing the databases and contact with ISPS members and local groups, as well as answering any queries.

Antonia can be contacted on the [isps@isps.org](mailto:isps@isps.org) e-mail address.

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

### THE ISPS EXECUTIVE COMMITTEE OF 2006 - 2009

- Manuel González de Chávez (Spain), Chair
- Chris Burford (UK)
- Lyn Chua (Singapore)
- Brian Koehler (USA)
- Klaus Lehtinen (Finland)
- Ann-Louise Silver (USA), Treasurer
- John Read (New Zealand), Secretary
- Bent Rosenbaum (Denmark)

### Co-opted Board Members:

- Ivan Urlic (Croatia)
- David Kennard (United Kingdom)

### ISPS HONORARY MEMBERS

- Yrjö Alanen, Finland
- Gaetano Benedetti, Switzerland
- L. Bryce Boyer, USA
- Luc Ciompi, Switzerland
- Johan Cullberg, Sweden
- Stephen Fleck, Germany
- Murray Jackson, UK
- Jarl Jørstad, Norway
- Julian Leff, UK
- Theodore Lidz, USA
- Christian Müller, Switzerland
- Barbro Sandin, Sweden
- Harold Searles, USA
- Helm Stierlin, Germany
- John Strauss, USA
- Endre Ugelstad, Norway
- Lyman Wynne, USA

## Do you subscribe to the ISPS-INT information/discussion group?

The international email group ISPS-INT, which was set up after ISPS Melbourne 2003, is available to all ISPS members. There are over 230 members from over 20 different countries who share announcements and discuss current issues relevant to our field. The group is well moderated and posts are limited to 3 per day.

If you want to join, e-mail [Antonia Svensson isps@isps.org](mailto:Antonia.Svensson@isps.org)





# Invitation to the Congress in Copenhagen in 2009



*Dear friends  
and colleagues*

Experiencing psychosis usually leads to serious changes and choices in one's life. The persons stuck in psychotic states of mind may lose engagement in their psychosocial network, become encapsulated in extreme anxiety and despair, and lose confidence in their experiences as being real and valued by others. They may even have difficulties in feeling what it is to be an "I", and be bewildered in thoughts and communication with others. The person with a mind in a psychotic state needs contact with stable, reliable, trustworthy, creative human beings who can stimulate hope, social functioning and meaningful perspectives for the patient's future choices in life. These are basic creative goals of psychotherapy and psychosocial interventions.

During the decades in which ISPS has existed, our knowledge and skills have grown steadily concerning ways

to understand and help the persons in psychotic states, explaining the processes by which they develop these conditions and emerge from them. The contribution of psychosocial factors to the development of psychosis has recently gone through a revival. Research in trauma, attachment, and in the developmental pathways to psychopathology, neurodevelopmental research and the cognitive approach to the understanding of hallucinations and delusions, bear witness to this progress. They all add valuably to our knowledge of healthy and pathological developments and to our understanding of the dynamics of curative therapeutic relations and interventions.

It is, however, of utmost importance that more differentiated and detailed unravelling of the optimum methods of treatment as well as improvement in the mental health systems must be achieved before there can be genuine integration with developments that would lead to more extensive and effective psychotherapeutic and psychosocial programmes.

The ISPS Congress in Copenhagen will give space and time for colleagues around the world to present developments in our knowledge, understanding and experience of the proposed themes. Presentations of both clinical experience and research in the field of schizophrenia and related psychoses will take place in symposia, lectures, workshops and discussion panels.

We look forward to let Copenhagen be the frame of the ISPS-congress 2009. **Copenhagen is known as a warm, friendly city, with many cultural events taking place in a well-tempered climate.**

We will do our utmost to provide you with a variety of accommodations and a good social atmosphere in addition to scientific inspirations.

On behalf of the organising and scientific committees

**Bent Rosenbaum**

President of the ISPS Symposium

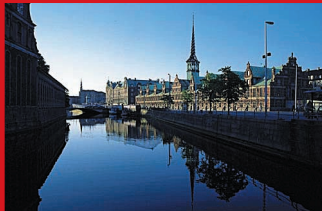
**Susanne Harder**

Chair of the scientific committee

For further information about the Symposium, please add your name to the mailing list on the Symposium website [www.ISPS2009.ics.dk](http://www.ISPS2009.ics.dk) or send an e-mail to [ISPS2009@ics.dk](mailto:ISPS2009@ics.dk)



WELCOME TO  
**ISPS  
COPEN  
HAGEN**



SEE YOU IN  
**2009**



# News from ISPS Local Groups

## Launching of ISPS Switzerland

Late June 2007 we had the pleasure of organising two days of ISPS congress in Switzerland discussing "Psychosis and Trauma". During the first day, we heard a lecture from Dr Priva-docent Philippe Conus from University of Lausanne opening the congress with the very wide approach of the scientific update. Then, the nearly hundred participants could work in workshops mostly organised by the Fondation de Nant and University of Lausanne. Paul Lysaker from Indianapolis described his studies and finally Dag Söderström took up the psychoanalytic point of view on the theme. At the end of the day, we had the formal organisational meeting for the first ISPS Switzerland and we had the great pleasure to welcome Professor Christian Müller who came to support the meeting and the launching of the ISPS Switzerland.



The organising committee of the congress would like to thank the Fondation de Nant for the help and support they gave for organising this congress and especially Mr Daniel Mayer, general director, Mrs Christine Mayor and Adeline Lienhard.

During the second day of the congress, the newly born ISPS Switzerland invited ISPS-US for a joint meeting on the same theme during which we could listen to our American colleges and participate in debating around long term treatment of psychosis. Focus during this day was made on the question of transference and the symptoms of history and we were impressed in hearing Françoise Davoine and Jean-Max Gaudillère from Paris and Larry Wetzler, Brian Koehler and Ann-Louise Silver.

During these two days Professor Ivan Urlic, a delegate from the ISPS-Board, helped us by making contacts and giving his very large experience of the field to workshop and comments during the discussions.



Professor Christian Müller (left) and Dr. Dag Söderström

Doctor Charles Bonsack Privat-docent from Lausanne chaired this first meeting of ISPS-CH during which were elected **the first committee:**

- Dr Dag Söderström, Fondation de Nant, Chairman ISPS Switzerland
- Dr Charles Bonsack, DP-CHUV, Vice-Chairman
- Dr Urs Corrodi, Fondation de Nant, general secretary
- Dr Ana Carila, treasurer

**Members:**

- Prof P. Bovet, Dr Philippe Conus, Dr Isabelle Gothuey, Dr Milos Tadic, Dr Franziska Gamma, Dr Nathalie Koch, Raymond Panchaud, Mark Geyer



Professor Ivan Urlic, (left), Professor Christian Müller and Dr Charles Bonsack

Our ISPS Swiss team is now at work and we have planned our annual meeting in order to grow and make the ISPS Switzerland a centre of excellence for the psychological treatment of psychosis in Switzerland.

Dr Dag Söderström, Chair ISPS Switzerland  
 dag.soderstrom@nant.ch

## ISPS Korea

The new local ISPS group in Korea held its first meeting on June 26, 2007, with the theme "Psychotherapy of Psychoses in Korea". The meeting was held at the Conference Hall of Seoul University Dental Hospital. The event featured about 160 participants from a variety of different professions such as psychiatrists, psychologists, social workers, art therapists, as well as service users, family members and carers.







At the meeting, following the Welcome Address by Huh Chan Hee - the President of ISPS Korea - in part I he presented An Introduction to ISPS and the special lecture on the History of Treatments of Psychoses in Korea. The Essence of Psychotherapy of Psychoses was presented by Rhee Dongshick. In part 2, an impassioned panel using a psychotherapy case study of a schizophrenic girl interviewed by Professor Rhee was held between panelists including family members and service users, which was then followed by a lively question and answer time between Prof. Rhee and the participants.

The new local group already has 50 members and is making plans for future activities.

Huh Chan Hee, Chair ISPS Korea  
huhch@unitel.co.kr

### ISPS Croatia

In the beautiful city of Dubrovnik, in the frame of Inter-University Centre, and under auspices of the Croatian Medical Association, Croatian Association for Clinical Psychiatry, Section for Psychotherapy and Psychosocial Treatment of Psychoses, and IGA Zagreb, the 11th School of Psychotherapy of Psychoses was held, May 8–11. The co-organisers of the professional event, Sladjana Ivezic and Ivan Urlic, under the guideline: "Toward Comprehensive Psychotherapy of Psychoses" this year were putting the usual focus on "aggression and psychosis". The main topic was elaborated by presenters that were not only from Croatia, but from Slovenia, Italy, UK, Serbia, Norway, Denmark, Greece, Montenegro, and Singapore, too. Among many very interesting presentations the one of Lyn Chua addressing transcultural characteristics, and the presentation of the National Danish Schizophrenia Project by B. Rosenbaum arose special interest. According to the traditional organizational schedule, every afternoon the working day was ended with discussions in small groups.

After the event the whole day excursion to Montenegro was organised to enjoy the personal experience of very rich cultural heritage and natural beauties.



The 12th ISPS Croatia School of Psychotherapy of Psychoses will be held May 14-17, 2008, with the focus on "Depression and Psychosis". Participants from various countries will be most welcome. For informations send e-mail to:

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Ivan Urlic, Chair ISPS Croatia  
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### ISPS Israel

The Israeli branch of the ISPS is now holding 20 paying members. We had two intriguing and challenging meetings this last year, where members of the group gave a talk and other members were discussants.

The first meeting was in "Lev Hasharon" Mental Health Center, where Avichai Sela, who is an art therapist, gave a most moving talk, "The birth of a doll". During this talk, he beautifully presented his therapeutic work with a chronic patient of schizophrenia who was hospitalized for more than 20 years, and during their work together created a child size, human like, doll. His discussion of this case study relied mostly on psychoanalytical concepts. Smadar Sidi, an art therapist from Shalvata Mental Health Center (SMHC) was one of the discussants and Dr. Yehuda Abramovit, the second discussant, gave a Jungian discussion to the case.

We also had another meeting in Jerusalem, where Lior Biran, an intern clinical psychologist at SMHC gave a provocative, challenging and stimulating talk about his MA thesis which he wrote in the Tel Aviv University. In his talk, "Beyond the reality principle – being Anna Maria", Lior presented a year of therapeutic work with a psychotic disorganized schizophrenic patient hospitalized in an open ward, and in his discussion he combined psychoanalytical insights with contemporary theories from the field of trauma and testimony. He was awarded 'cum laude' for his work and the discussions of Dr. Shlomo Mendlovitz,



Jerusalem

Head of ward C in SMHC, and Orna Wasserman from "Be'er Yaacov Mental Health Center", and from the Israeli Psychoanalytic Society, added important contributions to this fascinating complex point of view.

This coming November we are having Prof. Dori Laub from Yale University as our honored guest. His talk will take place in SMHC on November 22, 2008.

We hope that those two outstanding works will be presented in Copenhagen 2009.

Orna Ophir-Shacham, Chair ISPS-IL  
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### ISPS New Zealand

The New Zealand branch of ISPS continues to flourish. At our 2006 annual conference, we added two full-day skills workshops to our usual array of seminars on research and personal experiences, turning a two-day conference into a three-day occasion. The workshops, on "working with voices" and "addressing spiritual issues", were very popular. We are repeating them this year, in our 5th annual Making Sense of Psychosis conference which we run in conjunction with the University of Auckland (Nov 14–16 – see [www.isps.org](http://www.isps.org) or email [ispsnz@gmail.com](mailto:ispsnz@gmail.com) for details). Our keynote speakers this year include Professor Ritchie Poulton – one of New Zealand's foremost researchers on the causes of psychosis, Mary O'Hagan – a service user and until recently one of NZ's three Mental Health Commissioners, and Paul Hammersley – travelling all the way from Manchester, UK, to tell us about the Campaign to Abolish Schizophrenia as a Label (CASL).

In the meantime we have held our first public meeting other than the annual conference, in August. Our Executive Committee has recently co-opted a representative from the NGO sector (Lyndsay Fortune) and a GP (Dr Denise Dalziel). Denise has already been invaluable in helping our conference gain accreditation status for GP training.



The NGO sector and GPs are both crucially important in supporting a more balanced, integrative approach to services for people who experience psychosis.

Dr Patte Randal – Chair, ISPS-NZ  
 PatteR@adhb.govt.nz

### ISPS India

We have begun to combine the meetings of ISPS-India with other events, such as exhibitions and other cultural events, so that we can attract more people and let them know about the work of ISPS. Six willing participants have promised to join ISPS-India. However, due to incessant rain we will recommence our work after the puja holidays. In an attempt to increase the number of members of our local group, we have talked with the heads of departments of hospitals and will organise our future meetings there so that all the staff can find out about ISPS and its work. Furthermore we are planning to start local ISPS branches in the major cities of India.

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### ISPS Norway

ISPS Norway was established in 2004, mainly thanks to the initiative of Jan Olav Johannesen, then the Chair of the international ISPS. The local board has nine members.

Jan Olav Johannesen was elected the first board leader of ISPS Norway, a position he held until 2007. Thanks to his good work and organizing skills our local group and the national conference have become a significant forum for professionals and others who support ISPS values. Jan Olav Johannesen is still engaged in work for the local group, now as associate board member/international contact.

ISPS Norway now has 120 paying members and attracts some 200 participants to its national conferences. The membership fee is 200 NOK/year. The main activity for our local group has been to organize a national conference every year in accordance with ISPS's objectives. Thanks to the friendly co-operation and support from Sykehuset Innlandet, an enthusiastic group of professionals from Avd. for psykosebehandling og rehabilitering at the hospital has organized ISPS's national conference at Hamar each year.



ISPS Norway is now planning the next national conference at Hamar, Norway, February 14th and 15th, 2008. The main topic is: "The individual experience of psychosis: how to understand and help". Experienced clinicians and researchers will contribute through lectures and workshops,





Winter in the Hamar-district

among them ISPS honorary member John Strauss. Hamar is easily reached, within 1 hour by train directly from Oslo international airport Gardermoen.

ISPS Norway would like to welcome participants from Norway and abroad in a friendly and inclusive atmosphere in the beautiful winter landscape at Hamar. The full program will be available soon. For further information please contact: [Linda.Aaseth@sykehuset-innlandet.no](mailto:Linda.Aaseth@sykehuset-innlandet.no) and check the ISPS website [www.isps.org](http://www.isps.org)

Aud Lien, Chair ISPS Norway  
[audlien@bluezone.no](mailto:audlien@bluezone.no)

### ISPS Hellas

1. Official Constitution of ISPS Hellas and new Board of Directors. On March 31st 2007, the official Constitution of ISPS Hellas was signed by the following founding members. These members are also the members of the new Board of Directors:

- a) Anastassios Koukis, President
- b) Manolis Kozadinis, Vice President
- c) Angela Piergallini, General Secretary
- d) Spyridon Kassidiaris, Treasurer
- e) Nikolaos Plitas, Member
- f) Paraskevi Katopodi, Member.



2. ISPS Hellas is progressively expanding. There are now 36 registered members. In July 2007 ISPS Hellas paid the network fees to ISPS for the first time.

3. ISPS Hellas has already started its first annual seminar on the Psychoses: Theory and Clinical Aspects. The seminar covers two academic semesters each one of which contains one didactic unit (one unit every two months).

4. The second Annual Meeting and Conference of ISPS Hellas was not held on May 2007 as planned. It has been postponed until late November or the beginning of December 2007. The third Annual Meeting will be held as normal in May 2008.

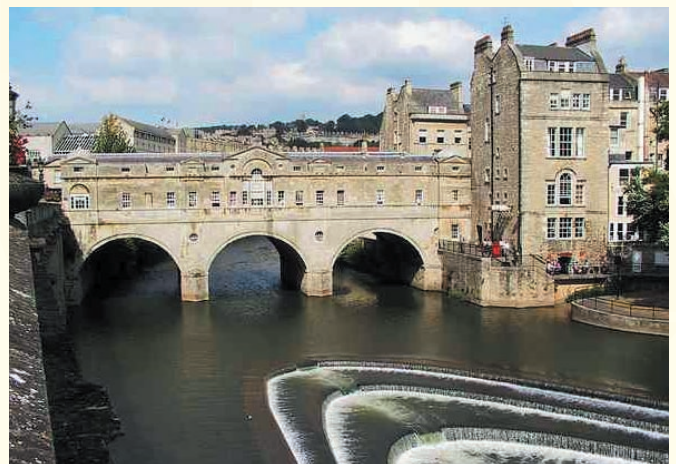
5. ISPS Hellas is about to create its own internet site.

6. ISPS Hellas printed out 500 copies of the last ISPS Newsletter (it was distributed electronically by ISPS last time, as known). The costs were funded through the extra contribution of some of our members.

Anastassios Koukis, Chair ISPS Hellas  
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### ISPS UK

Our biennial residential conference at the University of Bath was a great success in March, when fortunately it was also warm enough for a splendid evening round the Roman Baths in the old city. Courtenay Harding and Johan Cullberg were among our keynote speakers, and the 'star' of the conference was Peter Chadwick, a service user who captivated the 200 people in the audience with his personal openness and his wit and imagery – describing psychosis as the result of "normal psychological processes which come together in a concatenation which is toxic".



From Bath

At the Annual General Meeting (AGM) in March our new committee was announced. We now have 15 elected



members, including 6 newly elected. The committee comprises Janey Antoniou (service user), Trish Barry (social work/carer), Chris Burford (general psychiatry), Gráinne Fadden (psychology/families), John Gale (Hon. Treasurer) (therapeutic communities), Alf Gilham (psychology/assertive outreach), Sheila Grandison (arts therapies), David Kennard (Chair) (psychology/groups), Jen Kilyon (carer), Vasilios Magalios (therapeutic communities), Brian Martindale (psychiatry/psychoanalysis), Dan Pearson (families), Alex Reed (nursing/families), Steve Trenchard (Hon. Secretary) (nursing/workforce development) and Judith Varley (carer).

The AGM also brought to a conclusion the long-standing debate in ISPS UK over its position on the full name of the organization. Two motions were proposed.

- (1) That the ISPS UK supports in principle the removal of the word "schizophrenia" from the full name of ISPS and will work towards this for the 2009 conference.
- (2) That the ISPS UK change its full name to **'The UK Network of the International Society for the Psychological Treatments of Psychoses (including "schizophrenia")'**, to take effect in 2009.

The first was the clear preference of the AGM. This is the more radical but also the one that leave room for further discussion between national networks preceding the 2009 Congress, when the international board which has undertaken to make a decision.

The national scene offers a number of threat and opportunities, with huge pressures on services, but also developments where ISPS UK has the chance of influence. We are now a registered 'stakeholder organization' in the revision of the government's NICE guideline on treatments for schizophrenia, and there is soon to be a national consultation on the Code of Practice that will accompany the long awaited update of the Mental Health Act. A key new and controversial element in the law is Supervised Community Treatment Orders for patients who would previously have been admitted compulsorily. The Code of Practice will affect what treatments they are offered and we need to try to ensure these are holistic and psychological, not just drugs.

Sorry if this is a bit dry but I thought readers in other countries might be interested!

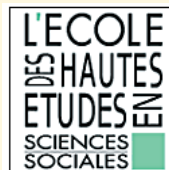
We also have an exciting conference on 1st February on **'Working with Families who live with Psychosis'**.

Please see our web page for more details [www.isps.org/uk](http://www.isps.org/uk)

David Kennard, Chair ISPS UK  
dkennard@ntlworld.com

## ISPS US

ISPS-US made a maturing step, making a trip to Paris, France and Vevey, Switzerland, organized and hosted by ISPS-US members Françoise Davoine and Jean-Max Gaudillière. The warmth and deep



philosophic stimulation made this a wonderfully French experience. On Thursday morning, June 28, we met at the EHESS, L'École des Hautes Études en Sciences Sociales, The School for the Advanced Studies of the Social Sciences, where our hosts have taught for years. The central message was that psychosis is the place to study the social link; the patient is the researcher, working to discover the real story of the therapist, while the therapist studies the interference. The therapist's disclosure can be the turning point, giving back the patient's pride, both individuals having been traumatized or carrying a specific history of trauma, often in commonality. We talked about our own experiences of trauma in the course of therapies, arriving at greater intimacy with each vignette.

On June 29, Françoise led us through a bit of Laurence Sterne's 1759-1769 comic novel, *Tristram Shandy*. "Madness is a war against the monsters, and sometimes we, the analysts, are the monsters."

We then walked together, the whole gang, to the train station for our four hour scenic ride (filled with wonderful conversations) to Vevey, Switzerland, to join in the launching of ISPS-Francophone, at the spot where, in Lausanne, ISPS began fifty years ago. Christian Müller, co-founder with Gaetano Benedetti of ISPS, was in attendance. Dag Söderström organized and chaired this two-day meeting on psychosis and trauma, and will be heading this new ISPS chapter. We had dinner outdoors overlooking Lake Geneva, all of us happy to be there and to be together.



Laurence Sterne



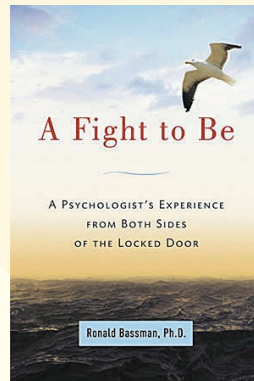


Our annual meeting in New York City will be the grandest and fullest yet, a product of the almost fifteen years of Brian Koehler's and Julie Kipp's hosting of monthly meetings on psychoanalysis and psychosis. On March 14 and 15, at the New York University, the meeting's theme is "**Recovery from Psychosis: Healing through Relationship.**" Our keynoter is Ronald Bassman, Ph.D. "Abandoning Occam's Razor: The art of reconstructing the self."

We recommend his book:

**A Fight to Be: A Psychologist's Experience from Both Sides of the Locked Door**, Tantamount Press, Albany, NY  
[www.ronaldbassman.com](http://www.ronaldbassman.com)

This promises to be a huge congress, well worth the time and effort of a trans-Atlantic flight. I will not summarize the program here, but urge everyone to consult our website, [www.isps-us.org](http://www.isps-us.org) for details.



We are in the final stages of development of our ISPS-US entry into the Routledge/ISPS Series, with a wonderful book co-edited by David Garfield and Dan Mackler, **Medications are not Enough: Working One's Way Out of Psychosis Through Relationships**. The fifteen contributors are all ISPS-US members.

Meanwhile, Dan Mackler has been moving ahead with an ambitious documentary. He is a phenomenal interviewer, and as everyone knows who heard his presentation in Santa Monica, he knows how to hold an audience's attention. I am confident the video will be excellent. Dan wrote the following summary of his documentary, **Take These Broken Wings**.

"The purpose of *Take These Broken Wings*, a full-length documentary video presently in production, is to show that it is possible to recover fully from schizophrenia (that is, to become completely symptom-free) and ultimately live without any psychotropic medication. The film documents the lives of two ISPS-US members: **Joanne Greenberg**, whose bestselling autobiographical novel *I Never Promised You A Rose Garden* chronicles her recovery from schizophrenia through her therapy with Frieda Fromm-Reichmann, MD; and **Catherine Penney**, whose story of recovery from schizophrenia has been told in *Dante's Cure* by her therapist, **Daniel Dorman, M.D.**, also an ISPS-US member.

Through in-depth interviews with Joanne Greenberg and Catherine Penney, and with various people close to them (i.e. Daniel Dorman, MD; Joanne Greenberg's husband; Catherine Penney's boyfriend; various friends and acquaintances of both women), the film shows not only that both

women were in fact once schizophrenic and no longer are, but also highlights the process by which they recovered. Additionally, the film explores, vis-à-vis their recovery process, the pros and cons of the various psychiatric medications and psychiatric treatments they received. The film also addresses the question of the potential universality of their stories of recovery, that is, the degree to which their stories might apply to others with schizophrenia.

The film also aims to place these two stories of recovery in an historical context, first being the history of American treatment of schizophrenia and second being present-day society's view of schizophrenia.

As regards the first, the film will interweave footage of a variety of therapists, psychiatrists, and mental health lawyers and advocates, most of whom are ISPS-US members, and all of whom have devoted a significant portion of their professional careers to the study and treatment of schizophrenia. Those professionals already interviewed include **Bert Karon, PhD** (author of *Psychotherapy of Schizophrenia*), **Ann Silver, M.D.** (*Psychoanalysis and Psychosis*), **Robert Whitaker** (*Mad In America*), **Peter Breggin, M.D.** (*Toxic Psychiatry*), **Grace Jackson, M.D.** (*Rethinking Psychiatric Drugs*), **Jim Gottstein, JD** (of [psychrights.org](http://psychrights.org)), **David Oaks** (director of *MindFreedom*), **Toby Tyler Watson, PsyD**, **Jessica Arenella, PhD**, and **Kurt Langsten, M.D.** As regards the second, the film will interweave video footage of over 100 street interviews conducted with strangers in New York City regarding their opinions on schizophrenia.

Lastly, this film will be presented in a non-academic format, making it optimally accessible to the general public. To accomplish this I, the filmmaker, intend to make it emotionally gripping, fast-flowing, not overly technical in terms of psychological terminology, and with an arc to its storyline. I consider it vital to present the documentary non-cynically, non-attacking, and with an honest, straightforward, respectful, reasonable, and non-strident tone – presenting facts but respecting patient choice, especially as regards medication. I believe that any deviations from this would detract from the film's healing message.

The executive committee of ISPS-US has decided unanimously to launch a fund-raising drive to support Dan Mackler's magnificent project. Please consider a tax-deductible donation to ISPS-US earmarked entirely or in part for this project. Ninety percent will reimburse Dan for the expenses he has incurred: consultation, travel and accommodations, and equipment expenses. We will not reimburse him for time spent on the project. Ten percent will go to ISPS-US for administrative expenses. Also, we are asking for your help in reaching out to those you know who may want to donate either to Dan's video project.

Meanwhile, the nomination letter for our new slate of officers has gone out. With this, I officially gave notice to the membership that I am stepping down as president. I have served in this role since ISPS-US formed in 1998, and have felt for some time that a non-profit volunteer organization cannot thrive with the same person at the helm year after year. The ambitions of the others who are working for the group become stifled, and they find other things to do.

I feel very good about our group and what we are accomplishing together, and will enjoy it even more when I watch our next group of leaders setting their own sights on overly ambitious goals. I have many very close friendships that have developed in the ISPS-US context, and will continue with them, in some new capacity.

Ann-Louise S. Silver, M.D.  
 asilver@psychoanalysis.  
 www.CAPsy.ws

### New York City Branch of ISPS-US

The New York Branch of ISPS-US continues to meet on a monthly basis (except for August). We are co-sponsored by the New York University Postdoctoral Program in Psychotherapy and Psychoanalysis and meet in a new location at 19 West Fourth Street, Room 102, New York NY on Saturday afternoons from 4:00-6:00pm. The group consists of clinicians, researchers and students from all of the mental health disciplines: clinical social work, psychiatry, psychiatric nursing, neuroscience, psychology and psycho-analysis. At each meeting there is a range of participants from students and those just beginning their careers to very experienced senior clinicians. Our monthly meetings lately have been drawing anywhere from 30 to 40 participants. Each presentation is accompanied by a lively and intellectually stimulating discussion.



The topics have included: psychodynamic theory and psychoanalytic clinical case presentations of persons with psychosis (schizophrenia and bipolar disorder); autism; neuropsychanalytic and phenomenological formulations of psychosis; cognitive-behavioral therapy of psychosis; as well as first hand subjective accounts. Occasionally, we have had speakers from other countries (e.g., Françoise Davoine and Jean-Max Gaudilliere from Paris and John Read from New Zealand) and other states (e.g., Loren Mosher, Max Day, etc.).

The NY Branch of ISPS-US, co-sponsored with the William Alanson White Institute, hosted the annual conference of ISPS-US on November 16 and 17th, 2002. The title was "Beyond the Wall-Psychosis: **Psychoanalytic, Psychotherapeutic and Psychosocial Perspectives.**" We honored Bertram Karon PhD and the keynote speaker was Robert Whitaker.

The NY Branch is sponsoring the ninth annual meeting of ISPS-US. The theme is: "**Recovery from Psychosis: Healing through Relationship.**" We will meet on Friday and Saturday, March 14th and 15th, 2008 at The Kimmel Center, New York University (NYU), which is located at 60 Washington Square South; New York, NY 10012. The Kimmel Center website is: [www.nyu.edu/kimmel.center](http://www.nyu.edu/kimmel.center)



The Kimmel Center

Our keynote speaker is Ronald Bassman, Ph.D. His talk is entitled "**Abandoning Occam's Razor: The Art of Reconstructing the Self.**" The conference is hosted by ISPS-US New York City and co-sponsored by the NYU Postdoctoral Program in Psychotherapy and Psychoanalysis, the NYU School of Social Work, and the Lifespan Learning Institute. The latter will provide comprehensive continuing education credits.

All are welcome to attend the monthly meetings of the NY Branch of ISPS-US.

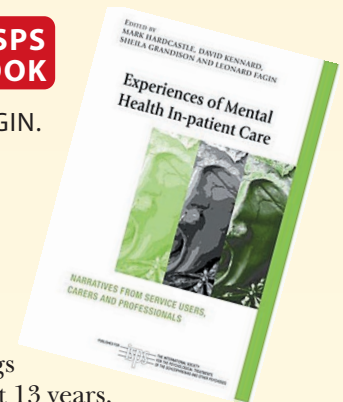
For further information on the NY Branch of ISPS-US contact Brian Koehler at 212.533.5687 or: [brian\\_koehler@psychoanalysis.net](mailto:brian_koehler@psychoanalysis.net)

Brian Koehler PhD



# Experiences of Mental Health In-patient Care

EDITED BY MARK HARDCASTLE, DAVID KENNARD, SHEILA GRANDISON AND LEONARD FAGIN.  
LONDON/NEW YORK: ROUTLEDGE, ISPS SERIES



ISPS-UK members, Mark Hardcastle (consultant nurse), David Kennard (clinical psychologist), Sheila Grandison (Head of Arts Therapies) and Leonard Fagin (retired NHS consultant psychiatrist) compiled this book to complement the policy and research literature in the in-patient care and treatment of severe mental disorders – in particular those with the label of psychosis or schizophrenia. Their intention was to "add the missing pieces of the jigsaw" – to capture "what it is really like to receive or provide services". To do this, they asked a number of people who they knew, or who knew one another, to write their own personal accounts of their experiences of in-patient care. I was struck by the fact that there was not a user of services or a carer in the editorial mix (or at least, no one who acknowledged this as a personal experience). I know ISPS has only just begun to include service users and carers as members, and this is a great step forward in my opinion.

The 54 contributors are a group of senior and junior psychologists, nurses, psychotherapists, occupational therapists, people who have experienced psychosis and in-patient 'care' (who may also have professional roles inside and outside mental health services), family members who have become carers, professors of psychiatry, consultant psychiatrists, junior doctors, a chaplain, arts therapists, CEO's, and a "hotel services assistant". The editors acknowledge that these accounts are subjective, and are not necessarily representative. Each has written a personal account or reflection, and/or a personal commentary on a personal reflection. Mostly, each account has a title that conveys a feeling or experiential state – such as "Feeling mis-

understood", "Feeling out of control", "Frustrated and angry", "Feeling helpless" or "Mixed feelings", and is followed by two commentaries. The book is a collection of different perspectives, beginning with a historical account, and moving on to now. It appears to me to be very honest. The result is like a patchwork quilt, made up of small pieces of the human condition – which, of course, we all share, but express in different ways.

As in a quilt, there are some pieces that are appealing, inviting and attractive, some that are less so, and all are somehow connected to make up the pattern, with its sometimes vicious cycles and its sometimes victorious cycles all intermixed. The book is a brave attempt to show the true colours of in-patient settings in all their complexity and paradox – what works, alongside what doesn't work. I think the book is successful in creating a very realistic impression. The problem is, the real world in in-patient care still leaves much to be desired. Much of what is portrayed is distressing, because it conveys the rawness of human suffering, often at the inadvertent hands of those who set out to help. It also conveys the rawness of that same inadvertent misunderstanding as it is expressed by those who are doing their best. On the other hand, as in the real in-patient world, there are those accounts, commentaries and reflections that convey clarity, understanding, compassion and a sense of direction for the future. Hopefully the reader can discern from this mix what really does work and what does not work so well, or does not work at all.

As a person who has experienced psychosis and in-patient 'care', and as

a medical officer working in in-patient rehabilitation settings for the past 13 years, I found this a very interesting and compelling, although at times annoying, book. It is a book full of human emotion, which allows human emotion to be expressed and reflected on, so I feel safe to express my own response to it, because it has created that sense that "it's alright to be human". What annoyed me was that so often the writers of the personal vignettes spoke eloquently for themselves (as people often can, if we are prepared to listen), and sometimes the commentaries – particularly from some senior clinical staff, seemed unnecessary, or (dare I say it?) even patronising, and full of "shoulds" – but even this I found fascinating, as it so accurately reflected the real-world quality – this is what it is really like – even when we are doing our very best, even when we are being as reflective as we can be, we can still miss the mark for some people – such is the human condition. I also found myself annoyed by the use of the term "patient", but that is a personal response, as I prefer to think of "people we serve" (although I know this in cumbersome).

After each of the accounts and their respective commentaries in the three experiential sections in the book (accounts from six service users, accounts from five carers, and accounts from ten service providers), the reader is invited to reflect on a series of questions designed, hopefully, to raise awareness of the issues that have been brought forward, and to help change attitudes and values.

Sometimes I found the wording of the questions exposed attitudes and values that in my opinion still have a custodial, rather than recovery oriented feel (for example "how can one-to-one observations become not only a means of control but an opportunity to engage meaningfully with the patient?"). On the other hand, some questions were courageously provocative and challenging of ethical and moral reflection – for example, after the section in which the following poignant comment is made by a junior doctor "Staff in in-patient settings have to regularly share their patient's severe mental pain. This can lead to a desire in the staff to sedate a distressed patient", the question is posed: "Is it reasonable to forcibly medicate a patient in order to safeguard other patients or staff, the ward atmosphere or to calm unpleasant feelings that he or she might generate in others?"

The book is designed to be used in a number of ways. Individual practitioners like me will find in it some recognition and validation for our own experiences, as indeed I did. In fact, I was encouraged to find that most of what we have been working towards for many years as our own unit has transitioned from custodial to an increasingly person-centred care – "being with" the person in a physically attractive setting, listening to each personal story,

including the family, understanding early and repeated patterns of traumatization of various descriptions, helping to find meaning and purpose, attempting to provide an environment where staff are supported sufficiently, in an ethos of reflective practice, to be able to begin to contain intense unbearable affect, so that it can be translated into a form that is more readily accepted and recognised, which means that the journey of healing and restoration can begin – is described within the patchwork of this book.

The book can also be used as course reading material, and for seminars and workshops, and certainly there are parts of it, including some of the suggestions for role plays, that I will use in my own teaching.

As is pointed out in the editorial summary at the end of section 4, and in this context the comment was in relation to management staff, but could be applied to any of us – "...and staff must come to an agreement that they cannot be everything to all people, that they can only do what they can with the skills and resources available, that whilst there is still some room for improvement, they can only be "good enough".

The problem is, as the book graphically demonstrates, in-patient services have

not been good enough on the whole. And yet, in the book repeatedly the comment is made that this "is not rocket science". For me, the helpful answers came as much from those people who had not been trained to think of themselves metaphorically as "rocket scientists", but instead to recognise that whoever we are, whatever our background and training, we really all do share the human condition, and it's from this perspective that we can be of most service to one another.

The book ends with "things you can do to make in-patient care a better experience" These include – be human, be yourself; tell people what's going on and why; involve patients and relatives in clinical planning; look after yourself; be aware that staff need to recover too; and carry out meaningful practice audits, such as asking "How was it for you?", or "How are you finding things?"

The purpose of this book is to be a positive change agent. I believe that if it is read and used as it is intended, as a tool to stimulate discussion and reflection, much will be learned from it. I will certainly recommend it to my friends and colleagues, and to the people I serve and their families.

Dr Patte Randal  
E-mail: PatteR@adhb.govt.nz

## ISPS-US Annual Conference

### NINTH ANNUAL MEETING:

#### Recovery from Psychosis: Healing through Relationship

Friday and Saturday, March 14th and 15th, 2008

#### The Kimmel Center, New York University

60 Washington Square South, New York, NY 10012

[www.nyu.edu/kimmel.center](http://www.nyu.edu/kimmel.center)

Keynote Speaker: Ronald Bassman, Ph.D.

#### "Abandoning Occam's Razor:

#### The Art of Reconstructing the Self."

Hosted by ISPS-US New York City. Co-sponsored by the NYU Postdoctoral Program in Psychotherapy and Psychoanalysis, the NYU School of Social Work, and the Lifespan Learning Institute, which will provide comprehensive continuing education credits.

### The Ninth Annual Meeting

of ISPS-US ([www.ISPS-US.org](http://www.ISPS-US.org))

will explore the role of relationships in the recovery process from severe mental illness. We will address this subject from a multidisciplinary and multilevel perspective: psychologically, socially, neurobiologically, as well as through first-person subjective experience. We will emphasize presentations of practical import to working clinicians.

We are honored to have as our keynote speaker Ronald Bassman, Ph.D., author of "A Fight to Be: A Psychologist's Experience from Both Sides of the Locked Door."

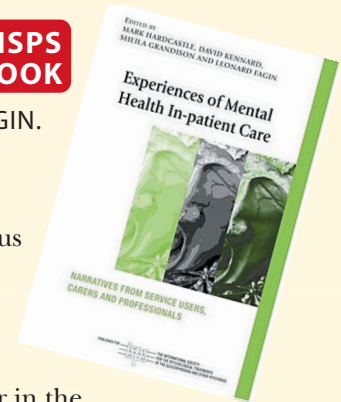
For further information contact Brian Koehler (chair) at [brian\\_koehler@psychoanalysis.net](mailto:brian_koehler@psychoanalysis.net) or 212.533.5687.





# Experiences of Mental Health In-patient Care

EDITED BY MARK HARDCASTLE, DAVID KENNARD, SHEILA GRANDISON AND LEONARD FAGIN.  
LONDON/NEW YORK: ROUTLEDGE, ISPS SERIES



Entertaining, interesting, intelligent and practical are some of the expressions that define this book

The text, structured into three main sections, reviews very personal experiences that have occurred during the patient's stay in a psychiatric ward from the different perspectives. These different points of view are developed respectively in each one of these three parts which include patients, their families or caregivers and the medical professionals that attend to the patients.

Through the narrations of different authors, we approach the perceptions and interests generated by this setting. Following that, two commentators speak about each account from different approaches. They try to stress what we should learn from each illustration in order to improve the stay, handling and care within the hospital settings.

Two more sections are added to this central core. The first one includes the historical context and perspective of the book while the second one gathers the recommendations and messages of the editors to improve the approach, relationships and stay during the admissions.

Direct presentation of personal experiences allows us to enter into a not-known world in an enjoyable way. This provides us with the perspective of our patients and their family members whose vicissitudes form a part of our daily work. The only way to approach them is through knowing and understanding them. Could any hospital ward exist where we do not have to deal with matters such as boredom, loneliness, humiliation, control, sex, lack of understanding. Furthermore, it is not uncommon to find the families asking why this is happening to them or speaking about their feelings of frustration or despair.

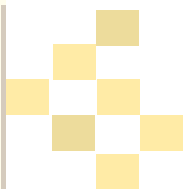
However it is our perspective reflected in the experiences described by the workers that feelings of tension, frustration, confusion, fear, lack of training are frequent among those of us who provide care to these patients. It is not so uncommon to find that these are discussed, in this case in this book, avoiding the creation of affective barriers and of communication that prevents the possibility of establishing a future therapeutic contact.

The simple structure of this book does not in any way make it a synopsis of individual cases, but rather each chapter is developed in a subtle way towards a specific purpose, that dedicates some space, at the end, to a series of

questions that make us reflect on situations, events and feelings that appear in the day-to-day experiences of a psychiatric ward. Even more, the authors provide exercises that encourage the reader to go deeper into their answers and their practical application.

All of the above not only make this book an accurate and recommended instrument for those of us who work within this context but also an extremely useful one. It is almost essential for the education of professionals, whatever their discipline, who are going to pave their professional career within the hospital setting. They are generally the most vulnerable and defenseless when faced with the range of feelings and sensations that can be set off in a hospital psychiatric unit. This book should even be required reading for those who, although they have solid training, want to make a professional change and enter further into, or take an interest in, the exercise of care in a hospital setting.

Ignacio García Cabeza  
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**ISPS** is pleased to announce that all members (of ISPS international or any local group) **can now order books in the ISPS series at a 20% discount.** All payments must be made by credit card in sterling (£UK), and you will be charged for postage. For more information about how to take advantage of this offer please contact Denise Rolland, [admin@ispsuk.org](mailto:admin@ispsuk.org)

## Models of Madness

### Psychological, Social and Biological Approaches to Schizophrenia

EDITED BY JOHN READ, LOREN MOSHER AND RICHARD BENTALL

**Models of Madness** shows that hallucinations and delusions are understandable reactions to life events and circumstances rather than symptoms of a supposed genetic predisposition or biological disturbance. Models of Madness promotes a more humane and effective response to treating severely distressed people that will prove essential reading for psychiatrists and clinical psychologists and of great interest to all those who work in the mental health service.

1-58391-905-8 2004 400pp. £55.00 / \$80.00 hbk 1-58391-906-6 2004 400pp. £19.99 / \$28.95 pbk

## Psychoses

### An Integrative Perspective

JOHAN CULLBERG

**Psychoses** provides a unique perspective on the challenges associated with understanding and treating psychoses, bringing together insights and developments from medicine and psychology to give a full and balanced overview of the subject. Johan Cullberg draws on his extensive experience working with those suffering from first episode psychosis to investigate issues including vulnerability factors, phases of psychosis, prevention, the potential for recovery and contemporary attitudes to psychosis. Particular attention is paid to how therapeutic interventions can either support or obstruct the 'self-healing' properties of many psychoses.

1-58391-992-9 January 2006 368pp. £55.00 / \$100.00 hbk 1-58391-993-7 January 2006 368 pp. £19.99 / \$35.95 pbk

## Evolving Psychosis

### Different Stages, Different Treatments

EDITED BY JAN OLAV JOHANNESSEN, BRIAN V. MARTINDALE AND JOHAN CULLBERG

**Evolving Psychosis** explores the success of psycho-social treatments for psychosis in helping patients recover more quickly and stay well longer. This book incorporates new and controversial ideas which will stimulate discussion regarding the benefits of early, need-adapted treatment.

1-58391-722-5 February 2006 320pp. £55.00 / \$100.00 hbk 1-58391-723-3 February 2006 320pp. £19.99 / \$35.95 pbk

## Family and Multi-Family Work with Psychosis

EDITED BY GERD-RAGNA BLOCH THORSEN, TROND GRØNNESTAD AND ANNE LISE ØXNEVAD

**Family and Multi-Family Work with Psychosis** provides a practical step-by-step guide for professionals treating psychosis using family work. The authors draw on over ten years of experience working with family and multi-family groups where there are members with a psychotic disturbance. They provide helpful guidance on vital issues, including setting up initial group meetings, crisis intervention plans, group structure, problem solving and communication in the group.

1-58391-726-8 / 978-1-58391-726-8 2006 152pp. £55.00 / \$90.00 hbk  
1-58391-727-6 / 978-1-58391-727-5 2006 152pp. £18.99 / \$33.95 pbk

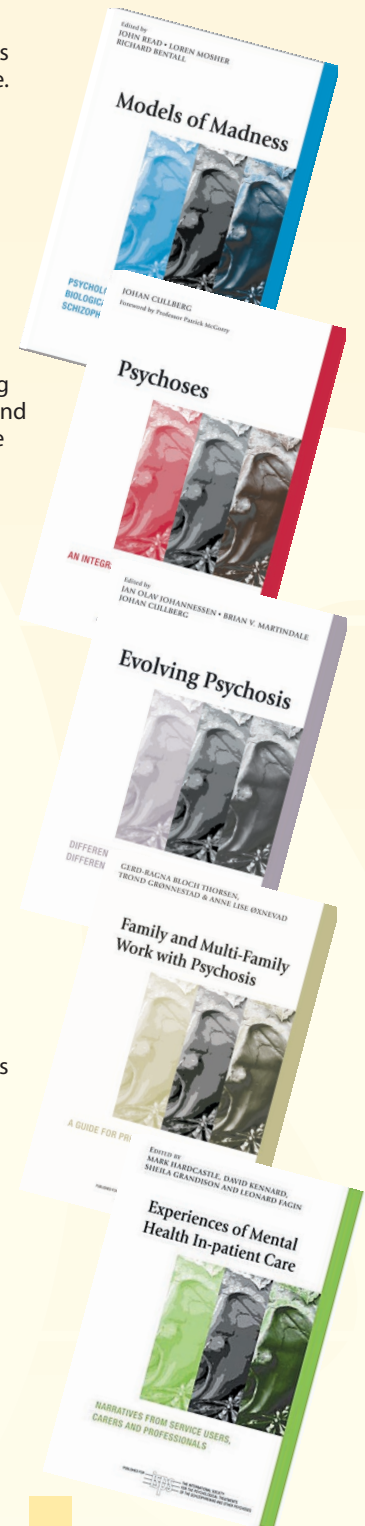
## Experiences of Mental Health In-patient Care

### Narratives from service users, carers and professionals

Edited by MARK HARDCASTLE, DAVID KENNARD, SHEILA GRANDISON, LEONARD FAGIN

This book offers an insight into the experience of psychiatric in-patient care, both from a professional and a user perspective. The editors highlight the problems in creating therapeutic environments within settings which are often poorly resourced, crisis driven and risk averse.

March 2007: 280pp  
Hb: 0-415-41081-9 / 978-0-415-41081-6: £55.00 / \$96.00  
Pb: 0-415-41082-7 / 978-0-415-41082-3: £19.99 / \$34.00



PUBLISHED BY ROUTLEDGE



NEW 2009

## ISPS Journal

Plans for the new ISPS Journal, "Psychosis: psychological, social and integrative approaches" are on schedule for the first edition to be published in early 2009, in time for our Copenhagen congress.

There will initially be just two editions a year but we will consider increasing that as time goes on. Partly as a result of a survey of members at the Madrid congress the journal will include not only scientific research papers about treatments and causes but also first person accounts from therapists and from people diagnosed psychotic.

ISPS members will not need to subscribe individually as the journal will be covered, from 2009, by a slightly increased membership fee. The more members we have, the lower the cost of the journal to each member so keep recruiting !

Also please get your University and Hospital libraries to subscribe in 2008. And those of you who are researchers or have interesting first person accounts start thinking about submitting an article in 2008.

John Read

## NEW JOURNAL ANNOUNCEMENT for 2009

### Psychosis: Psychological, Social and Integrative Approaches

**Routledge are pleased to announce the forthcoming publication of a new peer-reviewed journal.**

Official Journal of the International Society for the Psychological Treatments of the Schizophrenias and other Psychoses (ISPS) [www.isps.org](http://www.isps.org)

#### Editorial Board includes:

- Professor Jukka Aaltonen** - University of Jyväskylä, Finland
- Professor Richard Bentall** - University of Wales, UK
- Professor Johan Cullberg** - University of Stockholm, Sweden
- Dr. John Gleeson** - University of Melbourne, Australia
- Professor David Healey** - Cardiff University, UK
- Dr. Sladjana Ivezić** - University of Zagreb, Croatia
- Dr. Jan Olav Johannessen** - Stavanger University Hospital, Norway
- Dr. Brian Koehler** - New York University, USA
- Dr. Frank Margison** - Manchester Mental Health and Social Care NHS Trust, UK
- Dr. John Read** - University of Auckland, New Zealand
- Dr. Bent Rosenbaum** - Copenhagen University, Denmark
- Dr. Ann-Louise Silver** - Washington School of Psychiatry, USA
- Dr. Douglas Turkington** - University of Newcastle, UK
- Professor Jim van Os** - University of Maastricht, The Netherlands

Volume 1, 2009, 2 issues per year

#### Aims and Scope

**Psychosis** fills a crucially important gap in mental health literature, namely research focused on the psychological treatments of psychosis (e.g. cognitive-behaviour therapy, psychodynamic therapy, family therapy etc.) and the psycho-social causes of psychosis (e.g. poverty, drug abuse, child abuse and neglect, distressed families, urban living, discrimination, war combat, rape etc.).

The journal will publish papers on both quantitative research (e.g. rigorously designed outcome studies and epidemiological surveys) and qualitative research (e.g. case studies of therapy and first person accounts of psychosis and experiences of people with psychosis in the mental health system).

**Psychosis** will be inviting research and commentary papers on:

- descriptions and illustrations of psychotherapy and other psychological treatments for people diagnosed with schizophrenia and other psychoses;
- the integration of psychological and social understandings and treatment approaches into all phases of recovery;
- evidence-based treatments including individual, family and group therapies derived from a range of models including psychodynamic, cognitive-behavioural and systemic, and from a range of disciplines including art therapy, nursing, occupational therapy, psychiatry, psychology, social work etc.;
- training and knowledge of mental health professionals in the psychological and psycho-social interventions in the treatment and prevention of psychosis; and
- conceptual analysis and ethical considerations related to diagnosis, treatment and rehabilitation issues.

For further details please visit  
[www.informaworld.com/psychosis](http://www.informaworld.com/psychosis)



## What is your contribution to the next newsletter ?

Visit our website: [www.isps.org](http://www.isps.org)

- Your local ISPS group and its activities ?
- Meetings, congresses or workshops ?
- New approaches in psychological treatments of psychoses ?
- Research that you are involved in ?
- Questions that you would like to discuss ?
- Please send material for the ISPS newsletter and the ISPS website by e-mail to: [isps@isps.org](mailto:isps@isps.org)

## How to become an ISPS member and enjoy membership rights

The **ISPS** draws together individuals who are interested in the psychological therapies for psychosis. We aim to promote much better knowledge of the psychological approaches and better integration with pharmaceutical approaches. We organise regular conferences and publish books on the psychological approaches to psychosis.

### ISPS local groups

Several local ISPS groups exist worldwide and we are now represented on all five continents. Some of the local groups organise regular presentations and meetings and produce their own newsletter. To see if there is a local group in your country or for information on how to start up a local group of ISPS please e-mail Antonia Svensson at [isps@isps.org](mailto:isps@isps.org)

### Who can become a member?

Anyone who is interested in our field – students, nurses, psychiatrists, psychologists, arts therapists, occupational therapists, psychotherapists, professors, managers, service users and carers, and specialists in the different psychological approaches.

### What are the benefits of membership?

- You will receive the International ISPS Newsletter twice a year
- You will be kept informed of conferences and be entitled to reduced rates at ISPS conferences
- You can join one of our many e-mail discussion groups
- If you join through a local ISPS group you may also receive their local newsletter and information about local events

## How do I become a member ?

Individual membership of ISPS costs \$70 per year for members from developed countries and \$35 for those from under-developed countries.

Further discounted rates are available to students/unemployed persons: \$35 for those from developed countries and \$17.50 for under-developed countries. ISPS also offers institutional membership and individual membership through local groups.

For details of which countries have local groups and how to pay your membership fee please e-mail

Antonia Svensson at [isps@isps.org](mailto:isps@isps.org)

## See you in COPENHAGEN 2009



The 16<sup>th</sup> International Symposium of ISPS

Visit our website  
[www.isps.org](http://www.isps.org)