



## From the Editor

It is not possible to summarize the August meeting in Florence, entitled *The 4th International Conference on Philosophy and Psychiatry: Madness, Science and Society: Florence Renaissance 2000*. There were simply too many sessions, often five running concurrently, for any individual to cover all of them. Rather than even attempt a summary or overview, I have chosen to capture the quality and spirit of the conference by offering a lovely sample of the presentations, a reflection by our colleague, Jean Naudin, on a year spent in Japan. Written in the spirit of phenomenological psychiatry, the piece offers a fine example of the phenomenological method in action.

The conference opened in high style on Saturday evening, August 26, in the baroque Salone dei Cinquecento of the Palazzo Vecchio, the latter of course situated on the Piazza della Signoria, the center of Renaissance Florence. There were welcoming remarks by Conference Presidents, Drs. Ballerini and Fulford, and opening addresses by P.L. Scapicchio, Past President of the Società di Psichiatria, R.E. Kendell, Past President of the Royal College of Psychiatrists, and Paolo Rossi, Professor of Philosophy, Accademia dei Lincei. We were then feted with an array of English folk songs by a London group that included Bill Fulford (divesting himself of coat and tie for the temporary change of role), and finally moved to the ground level of the Palazzo Vecchio for an opening cocktail party.

On the following morning we resumed to more modest (and more academic) quarters at the Centro Didattico Morgagni on the outskirts of Florence, and the real work of the conference began. The pace was both exhilarating and grinding: concurrent, five-at-a-time panels (each with several participants) interspersed with plenary sessions with one featured speaker, from nine in the morning until six in the evening. The decision was always which panel to attend—and

## President's Column

Psychiatry has always seemed to raise more, and more pressing, philosophical questions than do other branches of medicine. Not only ethical, but conceptual and methodological issues and questions of social and cultural meaning seem unavoidably near the surface here. This was true of psychiatry at the end of the nineteenth century, when the terms of the debate included spiritual issues dismissed today as irrelevant; but it remains true in our time. Ironically, as psychiatric theorizing moves inexorably closer to the biomedical model, and psychiatric practice towards therapies influenced by psychopharmacology, this tendency to spotlight and underscore philosophical questions seems not to abate but to increase.

Cases in point are to be found aplenty in the use of Prozac and other SSRIs alone. Some questions stimulated by the advent of these drugs are familiar from earlier debates, others are fresh—or at least freshly vital in light of new possibilities. An interesting range of these questions shows up in a recent volume of the *Hastings Center Report* (Vol. 30, No. 2, March–April 2000) devoted to Prozac. A theme in that volume contrasts the use of these drugs to treat disorders in the self or psyche with their use for purposes of mere “enhancement” — or what Peter Kramer enthusiastically calls “cosmetic psychopharmacology.”

The self transformation permitted by the SSRIs when they are employed for such enhancement in persons without mental disorder reinvigorates several philosophical controversies. One is the idea that the self may be authentic or unauthentic—an evaluative distinction which requires us to explore not only what we mean by a self but what we deem the criteria of authenticity. Authenticity of self may represent an ideal which is valid—or misguided; attainable—or unattainable; valuable—or over-valued: each matters for philosophical debate.

Closely related are questions of personal identity: how we decide when one self has been transformed sufficiently to be better seen as another, the terms for allowing that one self might succeed another in the same body, and the consequences of adopting such a successive selves metaphysics.

Other questions concern the formation of the self or character. Is our self or character our own creation? If so, should we bear responsibility for a given self or character, and do we rightly take on the decision to effect our own self transformation?

The possibility of speedy, painless psychopharmacological solutions to unhappiness render the meaning and value attached to different states of psychic well-being unavoidable topics. The belief that happiness, contentment or a sense of well-being lose an important dimension when not earned through the kind of effort required by psychotherapy must be examined. So also must the value of a state of happiness not forged of personal suffering. We cannot ignore the possibility that the melancholic's bleak vision of the

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which to sacrifice—and, of course, whether one had the mental space and mental energy to accommodate yet one more intellectual offering.

The conference was impressive in at least two ways. On the one hand the conference participation was both large (in the hundreds) and quite international. On the other hand the range of viewpoints and philosophical orientations was quite varied. The range of presentations was sufficiently diverse that most participants felt that their particular take on the world of philosophy and psychiatry/psychology was decently represented. One

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world may reveal the true nature of our imperfect and meaningless human existence, and that to medicate away such a vision is wrong. The costs in cultural and philosophical terms of reducing the distinguishable forms of alienation, angst, despair, world weariness and sadness to the clinical category of depression also presents itself. So does the notion that the melancholic personality may have an aesthetic appeal which prompts us to overvalue the suffering it brings; that the melancholic may enjoy an unwarrantedly elevated ranking among the different temperaments due to the cultural associations linking the melancholic temperament with depth and brilliance.

The recent flap over Prozac, violent behavior and suicide, revives an equally important set of philosophical and value issues, those about the meaning of suicide and the relation of suicide to mental disorder, (An excellent review of these Ideas is to be found in *Psychiatric Ethics*, newly edited by Bloch, Chodoff and Green (Oxford University Press, 1999).)

Finding an adequate definition of suicide is itself a complex philosophical task, but this is only one of many philosophical challenges posed by suicide. Whether the state should protect a person from inflicting self harm is a question much contested by philosophers, who have identified autonomy and paternalism as values creating opposed policies on this matter. As long as autonomy is not too severely compromised, it is debatable whether the moral and political costs of acting out of paternalism to protect adults from themselves outweigh the benefits of so doing.

Those exposed to clinical realities usually treat suicidal ideation and behavior as the symptoms of an underlying disease or disorder, and as grounds for a diagnosis of depression. But much non-clinical writing suggests a contrasting set of assumptions, in which suicide may be within the repertoire of reasonable responses. People take their lives to end unbearable pain or unsolvable troubles, or because they are convinced of life's meaninglessness or worthlessness, and the usual presumption of rationality seems to extend to those whose reasons for suicide elude rational refutation, as reasons such as these do. From the perspective of such assumptions the burden of proof lies with those categorizing suicide as pathology to explain why it is so categorized, or to show independent evidence of irrationality or incompetence. If the depressed person has other behavior which establishes his compromised autonomy, such as psychotic or delusional thinking, then these

contrasting sets of assumptions may not invite divergent policy recommendations. But our interpretation of suicidal intent in a mind otherwise free of symptoms depends on the controversial relationship between suicide and depression. Only when depression is construed as an underlying pathological entity manifesting itself in a range of symptoms of which suicide is one, will suicidal intent constitute adequate evidence of disorder in the absence of other symptoms.

These differing viewpoints on suicide and its relation to depression should complicate our responses to recent allegations about Prozac. Before evaluating issues of culpability or negligence, it may be important to revisit philosophical and theoretical debates about the nature and meaning of suicide. Psychiatry continually challenges, and calls on, our philosophical assumptions and ideas; it leaves us in no doubt that theory and values often frame psychiatric "facts" of the matter and that philosophical analysis must accompany psychiatry—even biological, psychopharmacological psychiatry—every step of the way

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### Letter from Ankara Philosophy and Psychiatry in Turkey: Growing Hopes ?

It has been over a year since I considered the situation of the interdisciplinary field of philosophy and psychiatry in Turkey under a similar title. It was a regional report that appeared in PPP, with historical considerations and a somewhat detailed account of recent developments in this area ("Philosophy and Psychiatry in Turkey: Godotian Expectations ?" PPP 5: 267-271, 1998). The difference between the second parts of the two contributions may be said to be due to an optimism growing in a relatively short period of time in your author's mind. And although I have been cautious in dispensing with the question mark in the present title as well, I do have justifiable reasons for an optimistic attitude based on more recent developments in this country. I will briefly mention them here in a time order.

First, to be able to meet the institutional demands of the International Organizing Committee of the Florence Conference, we had to form a group in Turkey, preferably in Ankara. The most suitable

place for this would be *Compos Mentis*, a private but academically oriented Psychiatric Education, Research and Therapy Center, which also publishes a periodical, *3P—Psychiatry, Psychology and Psychopharmacology* (in Turkish) (see Örs 1998). Called *The Compos Mentis Psychiatry and Philosophy Activity Group*, it was formed by eight (and mostly young) academicians, coming not only from psychiatry but also from psychology, neurology and deontology. By way of a beginning of activities in this field, we have prepared a program of eight cross-disciplinary monthly presentations for the 1998-1999 academic year, to be made by people in and outside Ankara. Three of these could unfortunately not be realized, however, because those speakers could not come to Ankara, mainly for health reasons. Among the topics that were presented were such titles as "Experimental Psychology and Brain Research", "Two Hemispheres, two kinds of Consciousness: Schizophrenia and Cerebral Asymmetry," and "Salutogenesis: the Formation of Health in Life and Disease." The academic fields of the speakers of the overall program were expectedly diverse: Experimental Psychology, (Brain) Physiology, Psychiatry, Neurology, Philosophy of Science, and Philosophy and Psychiatry.

The last speaker in this first year's series of academic activities in Psychiatry and Philosophy at *Compos Mentis* was Bill Fulford, the title of his presentation being, "The Development of the Interdisciplinary Field of Philosophy and Psychiatry." He had been invited to Turkey to take part in a satellite meeting on the Ethics of Publishing in Psychiatry; and this was part of the 3<sup>rd</sup> Spring Symposium organized by the Turkish Psychiatric Association between 27 April and 2 May at Belek, Antalya, the well-known holiday resort on the Mediterranean Coast of Anatolia. The meeting had been planned on the occasion of the tenth anniversary of the *Turkish Journal of Psychiatry*, and the editors of the three leading journals of psychiatry in English had been invited as panelists. Orhan Öztürk, a retired professor of psychiatry, represented the Turkish journal as its founding editor and the current editor-in-chief. Understandably, Fulford as the fifth participant in the panel was representing PPP, *Philosophy, Psychiatry, and Psychology*. Besides taking part in this joint activity, each editor from abroad was expected to make an independent contribution, a talk on one of their areas of interest, in the Symposium. And the title of Fulford's presentation was, "Philosophy, Spiritual Experiences and the Psychopathology of Delusion,"