Book Review

Psychology, Mental Health and Distress
John Cromby, David Harper & Paula Reavey

Reviewed by David Pilgrim

This book was the winner of the British Psychological Society’s Book Award – Textbook Category in 2014.

Sadly, all too many textbooks written for and by clinical psychologists inherit and reproduce psychiatric positivism. These books about ‘abnormal psychology’ simply offer a summary version of the most recent epistemic fallacies from DSM, thereby reifying and legitimising untenable categories. This conservative trend is also evident in books from therapists who are clinical psychologists, as well as their complicity with the naive realism of projects like the ‘Layard initiative’. Academic careers have been built around research and writing about, for example, CBT for ‘schizophrenia’ or ‘depression’, etc. (The series editor can then build up a list by adding more and more diagnostic labels.) All this is a dreary indictment of clinical psychologists hanging on to the very medical model that they complain about.

The appearance of this book has broken the mould just at the right time. Psychiatric positivism has been in crisis for a while but the debacle over DSM-5, which has now become a critical international debate, has flushed out the preposterous state of psychiatric orthodoxy. Surely the time has arrived for trainee clinical psychologists to draw a line under this past. They can now throw away the stuff noted above written by their alleged elders and betters (we really cannot keep blaming psychiatrists), look at more intelligent ways of formulating the unique experience and behaviour of their clients, and developing holistic research frameworks sensitive to social context. If there is to be 21st century version of British clinical psychology, this can only come from the sort of radical break from the past that this book offers its readers. It is clearly written and deploys devices like case examples and boxed pieces of text to engage the reader. The background of the authors as creative teachers comes through strongly, and loose ends are used as points of debate and even expressed uncertainty, rather than opportunities for didactic certainty. We all know that, in truth, much of the time in open systems we are not sure what is going on and why. We are also not in a position to know that there is a predictable technical fix for human misery (such as the daft prescription of a set number of IAPT appointments to ‘cure mental illness’). This book allows the reader to explore how we have arrived at such ridiculous rhetorical claims from events like the ‘Layard initiative’ and its naive realism, typical of British empiricism and the orthodoxy it spawned in clinical psychology, not just psychiatry.

For me, the only loose end is that the authors tend to use ‘distress’ as a blanket experiential attribution. An understandable
reaction against the stigmatisation from psychiatric diagnoses has possibly created that warmer but fuzzier amalgam counter-discourse of ‘distress’. However, what the mental health industry currently deals with much of the time (both coercively and voluntarily) is the risk management of people who are distressing to others. Thus, unintelligibility and incorrigible egocentricity are recurring socio-ethical challenges for the mental health industry (acting on behalf of those who are, by common consent, ‘normal’). An undifferentiated notion of ‘distress’ dodges this difficult truth. To my knowledge, no society is indifferent to these deviations from norms that entail being distressing to others and are not only about reported distress from the identified patient. So much of this book, correctly, is about relationality, rather than deficits inside the closed system of the skin-encapsulated patient. That is great, but a consequence of such a position is that ‘distress’ does not exhaust our consideration of what relationships contain from a psychosocial perspective. We must also deal with rule transgressions and role failures in normative contexts, and so a richer vocabulary and set of contextualised concepts is required.

Notwithstanding this reservation, the fourteen authors who join the three core ones have together created a brilliant collection of chapters. In my view, this should now be the default course text for all trainees. At last, we can junk those dreary textbooks called ‘abnormal psychology’. At last, psychologists are given the resources to think both critically and psychologically by this beautifully produced and intelligently composed book, fit for the new battles to ensure about mental health in the 21st century.