The first modern use of the term ‘critical psychiatry’ was probably in Critical psychiatry: The politics of mental health, an edited book by David Ingleby (1980a). This book has recently been reissued by Free Association Books (2004). The new publisher’s blurb suggests that far from being merely a historical document, the book is powerfully relevant to mental health services today. The book makes a strong plea for critical thinking about the conceptual foundations of psychiatry, about its social role, and about the issues of power surrounding mental illness.

The first chapter of Critical psychiatry, entitled ‘Understanding mental illness’, was written by Ingleby (1980b) himself and forms about a third of the book. The chapter critiques the dominant, mainstream biological approach in psychiatry for its overly positivist stance, and instead promotes an alternative interpretative paradigm. In a review of the book in New Society, Peter Sedgwick (1981) commented that ‘the interpretative, anti-scientistic arguments produced by David Ingleby ... deserve an airing’. This sentiment very much agrees with this present book, and these issues will be discussed further in its various chapters.

Sedgwick also noted that Ingleby had failed to obtain a tenured lectureship at Cambridge University for which Sedgwick had provided a testimonial. Sedgwick’s reference was favourable and was partly based on his evaluation of the introductory editorial article and opening chapter for Critical psychiatry, which had been part of the evidence presented to the referees. However, rumours claimed that Ingleby had been turned down because of adverse (indeed hostile) reports from his referees. It is commonly supposed that the hostile report was from Martin Roth, professor of psychiatry in Cambridge at the time and a figure of national eminence, having been the first president of the Royal College of Psychiatry.
Psychiatrists (see chapter 4 for David Ingleby’s own account of this incident).

On hearing of Ingleby’s difficulties in securing tenure every single one of his colleagues in the Social and Political Sciences Committee signed a letter regretting the appointments committee’s decision. In 1980, Ingleby had his second application for upgrading refused by the University. The treatment of David Ingleby stimulated a large and vocal undergraduate protest. In 1982, he moved to Holland to take up a chair in Developmental Psychology at Utrecht University.

Ingleby found a sympathetic social climate in the Netherlands. By the end of the seventies, Holland had become a byword for liberalism and progressive social policies (Ingleby, 1998). However, over recent years, as Ingleby himself notes, ‘there has been a noticeable shift ... away from socially critical perspectives, which are increasingly regarded as an embarrassing hangover from the seventies’. The message of critical psychiatry has become lost in the highly bureaucratic and rationalised state of modern mental health services.

This state of affairs seems timely for a re-statement of critical psychiatry, and this book is intended to provide just such an account. Far from believing that critical psychiatry is merely tied to the liberal social perspective of the 1960s, this book recognises the enduring nature of the debate about mental disorder. Ever since society, in the form of the state, first accepted responsibility for caring for the mentally ill by building asylums, our understanding of mental illness has remained caught in metaphysical questions about the nature of reality. The issues of critical psychiatry are therefore not new. Essentially the problem is the connection between mind and matter and the way it impinges on the relationship between facts and values. This book’s aim is to approach this fundamental issue afresh.

The relationship between critical psychiatry and anti-psychiatry

The title of this book Critical psychiatry: The limits of madness deliberately echoes the original book by Ingleby. It has very similar aims. It resolutely encourages critical thinking about psychiatry and is based on critical theory about the nature of psychiatry.

Yet my book is written at a different time. Ingleby’s book appeared at the end of a turbulent period of cultural criticism of psychiatry, commonly recognised as ‘anti-psychiatry’ (see chapter 2). This critique, perhaps best identified with the names of R.D. Laing and Thomas Szasz, is generally viewed as a passing phase in the history of psychiatry (Tantam, 1991). It is said to be no longer of any influence. The modern