

# Interview



Dr Gareth Owen studied philosophy and physics before starting medicine at the Royal Free and University College Medical School, qualifying in 1999. He subsequently trained in general medicine and clinical neuroscience at Addenbrooke's Hospital, Cambridge, before starting clinical and research training in psychiatry at the Maudsley Hospital and Institute of Psychiatry in 2002. He is a clinical senior lecturer in the Institute of Psychiatry's Department of Psychological Medicine. He holds a Wellcome Trust University Award in Ethics and Society and is Chief Executive of the Maudsley Philosophy Group – a charity that aims to highlight the deep links that philosophy has to psychiatry and the ways in which both can enrich the other.

## What are you working on today?

On a research project involving frontal brain injury and decision-making capacity. It is interdisciplinary and involves working closely with real cases and collaborators in philosophy and law. What I like about this research is that the direction of travel is 'bedside to bench' rather than 'bench to bedside'. We need to keep that line of basic clinical research.

## What is your idea of a perfect mental health service?

I work clinically in Brixton, London, in the Lambeth Home Treatment Team. It is front-line psychiatry and I wouldn't want to work anywhere else right now, but 'perfect' isn't an idea that comes to mind. I'm not at all sure that I would want it to. It is an overrated ideal when it comes to human beings in my view: capable of distorting us. In Lambeth I think we achieve mental health service when we are able to work hard, be alive with interest in people, actively debate cases and imaginatively apply knowledge. I don't think we are at our best when beholden to images of perfect services.

## Which psychiatrist, living or dead, do you most admire?

John Cutting. He sold me on psychiatry. I spent several hours reading his book *Principles of Psychopathology* in a bookshop on Charing Cross Road when I was a neurology trainee and thought: 'This beats neurology hands down'. From that moment on I didn't look back. Cutting had stopped being a consultant at the Maudsley by the time I started training there – a source of sadness for me – although we subsequently became friends.

## What do you consider to be your greatest achievement?

Building a family home.

## What has been your most controversial idea?

I wrote a paper for the *British Journal of Psychiatry* as a psychiatric trainee called 'Are people with schizophrenia more logical than healthy volunteers?' and gave evidence that, when presented with arguments pitting logic against common sense, they are. The view that schizophrenia is some kind of regression to the reasoning of stone-age man or a breakdown in the machinery of basic cognitive processes is not a view that is convincing. Yet both are surprisingly widespread. The study was inspired by a phenomenological psychiatrist called Minkowski who gave wonderful descriptions of what he called 'morbid rationalism' in people with schizophrenia.

## What frustrates you most about working in psychiatry?

I find the erosion of psychiatry as a vocation frustrating (as is happening in all branches of medicine). Linked to this is the marketisation of our National Health Service. I hope that direction will turn around in my lifetime.

## What do you most dislike about the way you are portrayed in the media?

I haven't had many media portrayals. I was interviewed by Joan Bakewell on Radio 4 once and I certainly did not dislike that.

## Which phrase or saying do you use most when speaking to trainees?

Try to understand your patients and read widely because a psychiatrist bored of psychiatry is bored of life – or words to that effect. I also try to emphasise our job as doctors: stepping back, getting the evidence, taking decision-making responsibility.

## What single thing would improve the quality of your work?

More clinical academics researching topics that currently are the domain of the humanities. Current research is highly invested in applying biology and psychology to psychiatry, and these special sciences, although important, won't handle the phenomenon of human agency we deal with in psychiatry. That needs to get more in balance and imaginative funders could help.

## What is the most important lesson that working in psychiatry has taught you?

Getting balance. Freud's insights on self-deception and Plato's allegory on the shadows in the cave are completely incompatible. One opens up our animal natures and the other the opposite. I find psychiatry brings both viewpoints to mind frequently and balancing them is the most important lesson I've learnt. I'm a believer that psychiatry can be a powerful way to wisdom.

## What has been your biggest disappointment?

I felt huge disappointment with the passage of the Health and Social Care Bill. It felt like we were sleepwalking into the loss of a vital social contract.

## What was the last book you read?

I tend to have a few on the go at any one time: currently it's Tom Bingham's *The Rule of Law* and John Gray's *The Silence of Animals*. Bingham's book is a brilliant statement of human rights law from Britain's great modern judge. Gray's book is a subtle demolition attempt on the very concept of human rights. I'm with Bingham – just.

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