ONLY GOOD PEOPLE GET DEPRESSED

Derek Gale interviews Dorothy Rowe

Dorothy Rowe, the well known psychologist, feminist and author on depression, gave an exclusive interview to Derek Gale. Her new book The Depression Handbook, soon to be published in paperback as Breaking the Bonds (Harper Collins), formed the basis of this interview which originally appeared in a shortened form in GaleMail, the house newsletter of Gale Centre and Bridge Medical Books.

Derek Gale: Your central thesis is that depression is a reaction to bad things that are done to people or which happen to them in their lives.

Dorothy Rowe: Depression is a defence. It is a way of holding ourselves together when we feel ourselves falling apart. We feel ourselves falling apart, whenever we discover a serious discrepancy between what we **thought** our life was and what it actually is. This is terrifying, because a person's whole structure of meaning is invalidated. We are our structure of meaning, so one way to protect ourselves from this terror, very quickly, is to create a structure for it. This structure says: "I am to blame for the bad things which have happened to me and this allows me to be cut off from all outside help".

Derek Gale: Are the people who suffer from depression particularly sensitive and honest or are they particularly weak people?

Dorothy Rowe: Only good people get depressed. Only people who are experts at being good become depressed. These are people who in their early childhood have been shown very clearly by the adults around them that they are not acceptable. If they want to be accepted and even exist, they have to work very hard at being good.

Derek Gale: How young does this happen?

Dorothy Rowe: Very young. I even heard recently that a close friend of mine heard a nurse saying to the six-hour old baby: "You are a naughty boy, you hurt your mummy". That is how soon we start to be told, that we are not acceptable. Sometimes people learn from a series of small events that they are bad people and sometimes this can stem from a single incident. For example, a child who is quite secure in its mother's love and suddenly mother isn't there any more, because she has died and someone like the father or a granny tells the child it is his fault.



Derek Gale: It is quite stunning how insensitive and crazy people can be in what they tell children.

Dorothy Rowe: Yes and part of what we do as children is to forget what happened to us or to deny that it happened and so, instead of thinking to ourselves: "I am being punished by wicked parent", we change it around and say: "I am wicked and deserve to be punished by my good parent".

Dorothy Rowe Photo: Derek Gale

Derek Gale: But surely, parents can't be as bad as you make them out to be? Surely this is just making excuses for lack of moral fibre in your clients.

Dorothy Rowe: Look at what parents actually do. Often they act solely in terms of ignorance. Often it is all they could manage to do at the time. The woman whose baby I have just mentioned, her mother died when she was a child and her father and grandmother told her over and again, that if she had been good and not such a bother to her mother, she would not have died.

The only reason that this mother now knows, that this was not a good idea and a good thing to say, is because she herself has now gone into therapy and realises the damage it did to her.

Derek Gale: I am going to press this point, because it is important when so many people suffer from depression. Reading you, it seems as though every second child was tortured in their childhood.

Dorothy Rowe: In some ways we all are, because we have to learn to fit into society and this is the great dilemma.

Derek Gale: But surely the sexual abuse of children and physical abuse can't be as common as you make it seem?

Dorothy Rowe: I do find it that common. It's not just the people who come to me as clients, but I also find them in workshops for people in the helping professions and counsellors. In these workshops I ask them to look at their childhood experiences and especially those experiences which led them to draw the conclusion that they were in some way bad or valueless. And they tell me a lot of very sad stories.

Derek Gale: I don't think I am giving away any state secrets by saying, that you don't think depression is a biological disease. What interests me, is that there you were in Sheffield, in a very medical model environment. What was it that led you to start challenging that model?

Dorothy Rowe: In Sheffield I was working with Professor Jenner who had this huge research grant to discover the metabolic basis of depression. All the psychiatrists working with him were convinced, that depression was a physical illness. I didn't know anything and could see no reason to question the experts. And when you are with someone who is depressed, it would be absolutely lovely to be able to do something simple for them like giving them some tablets to cure them.

However, some very strange things started to happen. Like: I would be in this huge case conference with as many as 40 people and the patient would be brought in and the professor would very nicely start asking the patient questions. Often one of these questions would be: "How long have you been depressed?" and often the patient would answer in terms of a life event. She would say something like: "Since my father died".

The professor would ask: "How long ago was that?" and she would reply: "Three years" and he would say: "So you've been depressed for three years" and the significance of her father's death would be completely ignored. No one investigated and when I had a chance afterwards to speak to the patient I found that this wasn't just a way of locating something in time, but that the father's death was tremendously significant. Often she would say: "I didn't know he was dying. He didn't want me to be upset", so out of this you get, that she didn't see her father before he died, that she had a conflictual relationship with him and had no chance to make her peace with him.

So the ignoring of these things led me to question what was gospel.

Derek Gale: I have sat in these case conferences and I know that it takes enormous courage or enormous stupidity to speak out; which was it with you? Dorothy Rowe: Stupidity.

Derek Gale: In this very difficult situation there must have been a tremendous temptation to keep your mouth shut and draw your salary. So what sustained you in this challenge?

Dorothy Rowe: Just boredom. All the traditional psychiatrists want of psychologists is to do IQ-tests and I was bored with those. You can tell a person's intelligence just by having a conversation with them.

I had discovered Personal Construct Theory and repetory grids and I had also discovered, that if I went into the case conference and said: "I had a conversation with Mrs. Smith last week", this had no validity, but if I arrived with lots of computer print-outs and said exactly the same thing, this was taken seriously.

Derek Gale: Doctors are clearly marvellous people who do wonderful things. How can they be so wrong on this one issue?

Dorothy Rowe: I don't think doctors are right about everything. Anyone with a chronic illness knows, that doctors don't know everything. The problem is that they are used to treating bodies, not people.

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There is a great change among the younger psychiatrists who are working towards a psychotherapeutic approach.

Derek Gale: I must say, that personally I find the younger more liberal psychiatrists more dangerous than the old bastards. In the sense that they pay lip service to treating the whole person and toward psychotherapy, but their actual level of ignorance about how to do it is high.

Dorothy Rowe: Yes, they have problems, in that it takes a long time to qualify and that as Illich pointed out, medical training is terribly disabling.

Derek Gale: Yes, but why should we believe you over anyone else?

Dorothy Rowe: Because what I am reporting is not just what I do, but all the other research. In the Depression Handbook I report on what the research shows and it is quite clear that what psychiatrists say publicly and what their research says and what they say privately are very different things and there is no coherent biology of depression. If, as many American psychiatrists suggest, there is an unlucky gene, we would have to rewrite all of history and our structure of modern day life.

Derek Gale: Do you think the battle against the scientists is winnable?

Dorothy Rowe: I think the scientists' problem is their own personal problem. However, there are scientists who follow their research and are not threatened when the research doesn't turn out the way they expected.

Derek Gale: Do you think the people you are criticising will ever listen?

Dorothy Rowe: Some of them have reasons for not listening and others do listen.

I have had some very reasonable correspondence with scientists over twin studies.

Derek Gale: Are you a crusader?

Dorothy Rowe: Only in the sense, that I am very sorry when I see people suffering unnecessarily. All I am trying to do is present this material in forms which are accessible.

Derek Gale: So why do you bother? What drives you?

Dorothy Rowe: It's very interesting, because the whole thing about depression is, that encompasses everything in our lives: economy, politics and the way we organise society.

Derek Gale: Would it be true to say you don't really know why you are doing it? Dorothy Rowe: On the one hand I earn my living by it, but also I can now answer a lot of the questions I was faced with as a child.

Derek Gale: Your mother was depressed and so was mine. So what do you say to the accusation that you are just in this to cure yourself?

Dorothy Rowe: Aren't we all? If you look at the areas psychiatrists and psychologists choose to specialise in, it always turns out there is something in their past which is connected with it.

Derek Gale: It should be clear for anybody reading your books, that you haven't got much time for the church, the medical profession and psychiatry. Are you just an angry hysterical woman?

Dorothy Rowe: In my thirties I was angry and I am angry with people who have hurt me personally. I know some very kind, good, helpful people who are psychiatrists, but I am against people who cause pain and also against people who are inefficient.

Derek Gale: It is no secret you are divorced. What do you say to people who say that you made a mess of your life, so who are you to tell others how to live theirs? Dorothy Rowe: I am not sure I do tell people how to live their lives. What I do is suggest that people reflect about their lives and ask themselves questions.

Derek Gale: Are you yourself not depressed, because you had the sense to get out of a bad marriage?

Dorothy Rowe: Oh that's just a small part of it. I remember at the time of the break up I had some very strong suicidal impulses. I had a dear friend who I told about these impulses and he said to me: "Dorothy, you will never commit suicide; you like yourself too much."

Derek Gale: What do you think about the notion, that my family are the best people to help me when I am depressed?

Dorothy Rowe: Usually your family is part of the problem and they don't want you to change in ways which might draw you away from them.

Derek Gale: Have you ever been in therapy yourself?

Dorothy Rowe: I have never been in long-term therapy myself, although I have done a lot in the form of training.

Derek Gale: I would say that if you want to be a therapist you've got to have therapy yourself and it is the view of the U.K. standing committee. You don't agree?

Dorothy Rowe: I think it's a good idea to have lots of different experiences. When I was in Lincoln we had a large training budget and we had lots of opportunities for groups and workshops. I did things like Gestalt and thumped cushions which were great fun and I think everybody should do it. I was prevented from developing an acting out therapy by an office which was far too public and I developed my own quiet way of working.

Derek Gale: Do you think this method allows you to work on a deep level? **Dorothy Rowe:** No. A lot of people report to me talking with me and then going away and having very powerful reactions to it. I am involved in trying to get to the abstract principles by which we lead our lives. That can go pretty deep.

Derek Gale: It seems to me that you view psychological problems as moral issues.

Dorothy Rowe: Well, they are. These are questions about how we should live our lives.

Derek Gale: You think that it is important that a therapist should be able to show that his methods work for him or her?

Dorothy Rowe: Yes. If what I am doing is of value it has to be able to work for me in my life. I don't expect therapists to live lives of total happiness, because that just isn't possible. But they should be able to live comfortably with other people.

Derek Gale: Confronted with the idiocy of every day life I get the feeling that you rely a lot on humour.

Dorothy Rowe: Yes. If you can't do anything about it, you may as well laugh at it.

Derek Gale: I don't want to embarrass you, but reading your books and knowing you, you often feel to me a bit like a saint.

Dorothy Rowe: Yes. That's right.

Derek Gale: Serves me right for asking a silly question. But you do have an unusually kind and charitable attitude to people.

Dorothy Rowe: Yes, but it's pure selfishness, because I find that life goes on much easier like that. If people get on together, life is a lot more pleasant and safe.

Derek Gale: In order to get that sort of love from people you have to give a lot. **Dorothy Rowe:** Yes.

Derek Gale: Where does that come from in you?

Dorothy Rowe: My father used to say: "You get back what you give" and I think there is a lot of truth in that.

Derek Gale: Talking of your Dad, I was a bit surprised that you refer to therapists using the masculine pro noun.

Dorothy Rowe: The whole business of pronouns is very difficult but there are a lot of men therapists who are still hung up on the issue of power, so maybe that's why I did it.

Derek Gale: Are you a practising Christian? Christianity comes up a lot in your book.

Dorothy Rowe: If it comes up, it's generally not favourably.

Derek Gale: Well you're a lot less unkind to it than I would be. So I was wondering what your own religious beliefs are.

Dorothy Rowe: My own view is, that we are part of everything that is and that's it. I think if we are ever going to solve our problems as a species, we have got to stop looking for extraterrestrial saviours and recognise that we are all we've got.

Derek Gale: I wasn't going to ask you this question, but it has come to mind now. Do you see religion as a fairly negative influence on a lot of the people you work with?

Dorothy Rowe: Yes, when it is one of those religions which states that goodness is rewarded and badness is punished, because that is what leads to people being depressed. Because this means that when bad things happen to me, I have to blame myself.

Derek Gale: You have written extensively on depression, so why another book and why this one?

Dorothy Rowe: There were a whole lot of issues I wanted to pull together. Firstly the whole step-by-step process of how and why a person gets depressed. Secondly a whole section on all the things we need to look at. So there is a whole section on discoveries. Thirdly the political aspect of the book is the very big battle that is going on with psychiatrists and drug companies mounting enormous propaganda saying that depression is a physical illness which must be treated physically. And they are doing this because the research is coming out with evidence which goes against this view and I wanted to make that public and clear.

Derek Gale: So I am right: you are a bit of a crusader. **Dorothy Rowe:** Well, I think truth is important.

Derek Gale: I was wondering whether your famous last words for a depressed person would be: Don't put me down and don't put my depression down...

Dorothy Rowe: Yes, that would be a good summary of it.

Dorothy Rowe, head of the North Lincolnshire Dept of Clinical Psychology for 14 years, writes, lectures and practises privately.