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# Book reviews

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**Mental Health in Black and Minority People: The Fundamental Facts.** By NEENA S. RALEIGH. London: Mental Health Foundation. 1995. 48 pp. £9.

British interest in 'transcultural psychiatry', the quasi-academic euphemism for the mental health of Black and ethnic minority people, is now reflected in a College Special Interest Group. Job advertisements for consultants in inner-city areas frequently carry a disingenuous rubric of "opportunities for research in transcultural psychiatry" or even as a "post in transcultural psychiatry".

As a discipline, transcultural psychiatry has been criticised for resting on dubious clinical and academic grounds. Despite its glossy lay-out and extra-ordinary price, this Mental Health Foundation booklet provides an introduction to the current controversies: notably the high rates of schizophrenia identified in African Caribbeans, both among migrants and their British children, but little on the high rates of eating disorders and parasuicide among British Asian women. Those areas where Black people have less illness than White Britons are ignored, despite their potential significance. Despite a large number of published academic papers in transcultural psychiatry (over 300 by my count) and four critical books written for British professionals, this is the first accessible digest: written, one presumes, for patients and their families, and for community workers, journalists and others.

Carefully, at times blandly, worded, the publication pays banal tribute to the current government's policy statements, but sidesteps the more tricky epistemological and political issues. One hundred and eighteen familiar references back up fairly accessible graphs on rates of illness in the larger groups with reasonable conclusions as to the state of professional disagreement. Certain issues are not considered, notably eating disorders, immigration law and the assessment of refugees and survivors of severe trauma, and the issue of 'selection' in migration (whether migrants are possibly not representative of the communities they leave through particular economic or political patterns of migration or flight). That certain minority groups somatise and stigmatise psychological distress is asserted rather than demonstrated, not surprisingly following our virtually complete ignorance of the understandings of self, illness and therapy in any ethnic group, the Whites included.

Racism is acknowledged throughout but with little suggestion of how it intersects with British institutions or with the development of individual self-identity. One limitation is that there is no attempt to evaluate the large numbers of local 'minority mental health' projects which I suspect collapse after a few years' funding, leaving behind reports which are seldom read and which generally repeat the extensive antecedent literature.

*Mental Health in Black and Minority Ethnic People* will provide a brief but useful introduction to the literature for junior psychiatrists. The Mental Health Foundation is studying whether it will be accessible to users and non-medical groups. Psychiatrists would doubtless have preferred a more nuanced analysis but they are not the intended readership.

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**Down's Syndrome Children Growing Up.** By JANET CARR. Cambridge: Cambridge University Press. 1995. 202 pp. £17.95 (pb). ISBN: 0521 469333.

Down's syndrome is the most common chromosomal cause of mental retardation. This volume describes the longitudinal study of a cohort of young people with Down's syndrome born in one geographical area of south east England in one year from 1963 to 1964. Fifty-four babies were part of the initial study and were matched with a non-disabled baby. The subjects were first seen at 6 weeks old, then on six occasions until the age of 4 years, and then again at 11 and 21. The book focuses on the data collected at age 11 and 21 years.

The initial aim was to undertake a brief developmental study of infants with Down's syndrome but the project was expanded to be longitudinal and to include effects on the family. Information on the family, services, the management of the individual with Down's syndrome, their behaviour, health and life style were collected through semi-structured interview.

The most striking feature of the study looking at families was the great variability. Few adverse effects were detected as indicated by marital discord and well-being of the siblings. Behavioural problems persisted over time with a tendency for the young person to become easier to manage

as they became older. The problems occurred independent of management strategies. However, the nature of the interviews limited more in-depth study of the variables involved.

The main difference with their non-disabled peers was in close adult relationships, friendships and employment as young adults. Having a serious relationship was the norm for the controls at 21 but only one in four of the people with Down's syndrome had such a relationship.

This is a clearly written book with useful summaries at the end of each chapter. It provides invaluable information about the development of young people with Down's syndrome and their families over time. This is one of the main advantages of a longitudinal study and is particularly pertinent to individuals with developmental disorders. Although the cohort is small in number, the quality and validity of the data collection has stood the test of time. The research questions that are asked at the commencement of a longitudinal project may no longer be relevant 30 years later, however, the outcome of this study has a great relevance to both clinicians and researchers in the present. Each chapter provides a longitudinal perspective relating childhood data to adult data.

This particular cohort have done well over time and one of the criticisms of the study may be that the author was the main investigator keeping close contact with the families. Longitudinal research is not for the faint hearted. The perseverance and motivation shown by Janet Carr is remarkable. I would recommend this book as a necessary part of any library collection in research and training institutions working for individuals with life long developmental disorders.

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**Troublesome Children.** By JALAL SHAMSIE. Etobicoke, Ontario: Institute for the Study of Anti-social Behaviour in Youth. 1995. 55 pp. Price not available.

This short booklet is devoted to the description of three disorders defined by the DSM-IV classification system: Attention Deficit Hyperactivity Disorder, Oppositional Defiant Disorder and Conduct Disorder. The aim is to describe the three supposed disorders in a brief form that will be accessible to the wide variety of very busy professionals who are likely to encounter children with these conditions. The text reads like a concise medical textbook, with these three entities taking on the role of well described and

defined medical syndromes. This extends even to the statement: "there is a great deal of comorbidity" (page vii). Wouldn't it be accurate to say that the disorders may merge into each other, the jury is still out and that the entities do not have the defining characteristics of physical diagnosis?

The sections on treatment are equally cut and dried and very prescriptive. There is little guidance on the management of children in general, or of ways one might understand their distress or even how one might pull together the special needs of an individual child in a given situation. The medical diagnostic approach has many uses in adolescent work. This is not one of them.

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**Community Psychiatry in Action: Analysis and Prospects.** Edited by PETER TYRER and FRANCIS CREED. Cambridge: Cambridge University Press. 1995. 167 pp. £27.95 (hb). ISBN 0-512-47427-2.

This short but important book contains the essence of a symposium held in 1993 between the main researchers in UK Community Psychiatric care – i.e. since National Health Service reforms began.

Nine senior authors contribute to the debate. Peter Tyrer begins the book with a useful overview of the essential components of Community Psychiatry and identifies and compares pieces of relevant research. He finishes the book with a thought provoking chapter on future research strategies – a must for all would-be grant applicants.

Francis Creed provides a comparative overview of UK evaluation studies in Community Psychiatry, a chapter which should be recommended by the College as mandatory reading for psychiatric trainees. Each of the main UK research studies in Community Psychiatry is studied in depth, describing the research design and outcome, and with useful discussions of problems faced and implications for the future.

The importance of this book lies in the fact that all researchers/discussants are practising clinicians with a wealth of experience in service delivery. Isaac Marks provides a synopsis of the Daily Living Programme for the seriously mentally ill (London), Christine Dean describes the evaluation of a complete community service (Birmingham), Peter Tyrer describes early intervention studies in psychiatric emergencies (London), Brian Ferguson describes evaluation of psychiatric services – The Merits of Regular Review (Nottingham) and Tom Burns describes a home-based assessment study (south London).