

a form of drug misuse with such severe medical side-effects), models of reducing HIV-risk behaviour and transmission in drug users, and a section on the risk incurred by women partners of drug users, which we know to be of great importance from the pattern of the USA epidemic.

The book is well referenced and there is enough recent material here to make it recommended reading for the drug-misuse specialist.

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**Risk-Takers, Alcohol, Drugs, Sex and Youth.** By MARTIN PLANT and MOIRA PLANT. London: Routledge. 176 pp. £10.99.

This book's snappy title and eye-catching cover lead one to expect a juicy content. The introductory chapter is therefore a little disappointing. It outlines briefly the possible factors which may influence use and misuse of psychiatric drugs – a necessary springboard for the rest of the book – but it comes across as a bit thin. This criticism cannot be levelled at the next three chapters which provide a comprehensive review of research to date on drinking and smoking habits, as well as illicit drug use. Each chapter is packed with information about the patterns of use of drugs by young people, and their perception of these drugs at different ages. Helpful summaries throughout reduce a sense of being overwhelmed by data, which at times is contradictory. Many questions are raised by the data which are not always addressed by the authors. For example, hypotheses on why regional and gender differences exist in drinking habits would have added interest. The evidence for adverse consequences and problems caused by alcohol, tobacco, and drug use is comprehensively reviewed in the following three chapters.

Chapter 8 deals with the use and effects of alcohol and drugs during pregnancy. Its brief historical introduction is followed by sections on the foetal alcohol syndrome and the impact of HIV and AIDS. This is followed by a chapter reviewing the evidence on sexual behaviour in young people. Depressingly, the authors conclude that "the bulk of the sexually active population has made few concessions to the arrival of HIV and AIDS", and point out that 'consumer resistance' to safer sex and condom use will mean that HIV infection will continue to spread.

The book realises the promise of its title in the penultimate chapter, where it provides the reader with more intellectual, as opposed to factual, information. The authors argue that risk-taking is a normal part of adolescent behaviour, and review theories on why risk-taking is valued. They conclude that the pattern and extent of risk-taking is influenced by social and cultural factors, but there are strong psychological drives in most

people towards risk-taking. This being the case, it is more effective to try to modify, rather than prevent, risky behaviours. 'Just say no' campaigns, the authors argue, fail to take into account the complex factors which impel people to engage in risky behaviours and can be counter-productive. In their view, harm-minimisation through targeting vulnerable groups with sensible, personally relevant health education is a better way of tackling the problem.

Although a little dry at times, this is a readable and interesting book packed with information.

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**If a Partner has AIDS: Guide to Clinical Intervention for Relationships in Crisis.** By R. D. SHELBY. New York: The Haworth Press. 1992. 227 pp. £14.95.

This book begins with a chapter on how the author came to write it, including descriptions of his initial work in 1985 (with gay men with AIDS and their partners) in his private psychotherapy practise designed to meet the needs of gay men, and the growth of his decision to research the experiences of partners for his dissertation in clinical social work. The format and tone of this book is that of a dissertation, not a clinical manual. There is a dense review of literature on AIDS, mourning, and Kohut's self-psychology, followed by a full account of the author's research methods: three detailed interviews, spread over at least six months, with 32 middle-class gay men living in Chicago or San Francisco; 20 partners, of whom 11 were bereaved by the start of the study; and 12 men who were the ill partners of other participants in the study. From these interviews, Shelby delineated and labelled nine experiential stages gone through by partners, from the time of wondering if their partner is HIV seropositive, to coming to terms with their partners' death. A chapter is devoted to each stage, with many illustrations from interviews, and discussion of variables, for example the partners' own HIV status. Shelby's frequent use of certain words such as "impacting", "dialogue" and "narrative", and many labels such as "hot potato", "the guilts" and "a ray of hope", is distracting, but the descriptive content of these chapters is informative. In the last chapter, the author examples clearly his psychodynamic understanding of problems arising from the interplay between HIV-related loss, emotional development, and present relationships, and the important role that present relationships have in facilitating mourning.

However, reading the book as a whole, I thought the basic ideas and human experiences of uncertainty, illness, and loss were often obscured by missionary intellectualising in the language of self-psychology. In the penultimate chapter, "Mourning Theory Reconsidered", Shelby presents Freudian theory in caricatured form, for