

towards the concept that within a Welfare State we should not be asking what is wrong with the offender that he offends or continues to offend, but what is wrong with the system.

Clearly written and presented with excellent short abstracts of each article, this book will be of interest to all concerned in the development of Welfare States and transfer of controls from individuals to society.

T. G. TENNENT.

COMMUNITY SERVICES

Emergent Approaches to Mental Health Problems. By EMORY L. COWEN, ELMER A. GARDNER and MELVIN ZAX. New York: Appleton-Century-Crofts. Pp. 474. Price \$9.

The first five chapters of this symposium summarize current discontent with community psychiatric services in the U.S.A. The authors launch a number of attacks on the principles and practice of contemporary American psychiatry, whether psychoanalytically or biologically oriented. They consider that the service is seriously undermanned, that it discriminates between privileged and underprivileged groups, that it has blocked progress which might have been made, that it over-estimates the value of psychotherapy, and that it is irrelevant to the needs of large numbers of people who ought to be helped. Although there is a good deal of disagreement as to what precisely has gone wrong, one target receives fire from all quarters. What is referred to as 'the medical model' is the villain (or the Aunt Sally) of the piece. In Turner and Cumming's chapter, the model is actually reified—it can accept a notion or earnestly subscribe to an aphorism. Although the medical model is variously described and interpreted, what most of the authors have in mind is a narrow and authoritarian application of the biological concept of disease to psychiatric conditions by doctors who are quite unaware of the social implications of what they do.

This rigid assumption that psychiatrists are unable to use any other model but the one described, however inappropriate the circumstances, gives rise to a fallacy which crops up many times in the first five chapters. Albee, for example, discussing mentally retarded children, juvenile delinquents and young schizophrenic patients, argues that 'once it is finally recognized and accepted that most functional disorders are learned patterns of deviant behaviour, then the institutional arrangement which society evolves to deal with these problems probably will be educational in nature'. This confuses the disease concept itself with the way it is used by a few hardware

specialists. A biological theory of causation is compatible with the most socially progressive forms of treatment, while a social theory of causation is compatible with institutionalism at its worst. Mentally retarded children should receive special education *whether or not* they have organic disabilities. The evidence that schizophrenia is a 'learned pattern of deviant behaviour' is very thin indeed, but *whether it is or not*, schizophrenic patients should not be cut off from the world nor condemned to idleness.

If the authors had recognized the concepts of social medicine and of rehabilitation as complementary 'medical models' to the disease theory, they would have been able to use some of the excellent scientific work now becoming available to illustrate their thesis. The importance of biological factors in severe subnormality is unchallenged, but there is no need to treat a retarded child as ill. Studies of the attitudes of nurses compared with those of house-mothers make it clear that the training of the former makes it relatively difficult for them to provide a rich social and emotional environment for a retarded child. (They have other virtues.) The child's responses to an understimulating hospital ward, on the one hand, and to an environment more like a family home, on the other, provide eloquent witness to the dangers of narrowly treating a disease process instead of considering the total needs of an individual. The problems of juvenile delinquents are not different *in principle* because delinquents are not regarded as suffering from handicaps which arise directly from a biological disease process.

So much attention is given in Part 1 to criticizing 'the medical model', that mental health, the central topic of the book, receives little attention. Turner and Cumming emphasize the importance of 'executive functioning' (for example, employment adequacy), and argue that it is as important to enhance it as it is to uncover the pathological source of symptoms. This is an unexceptionable statement, but it is puzzling that it should be presented as an alternative, instead of a complement, to a disease theory.

Part 2 is concerned with alternative sources of man-power. The helpful work of college students who act as companions to chronic patients in a State mental hospital is described. Other chapters are concerned with training mental health counsellors or human service aides. A fascinating contribution describes Neighbourhood Service Centers in the Bronx, which provide practical help for the poor (ranging from obtaining a service from the appropriate agency to writing letters for clients), organize 'the inactive poor' for 'community action' and attempt to induce lasting changes in the organization of other community

services. The success of the Centers remains to be evaluated. Another chapter of interest is by Gardner, on 'Psychological Care for the Poor'. He presents data from the Monroe County Register which show that patients from lower socio-economic areas receive a poor standard of psychiatric service, and puts forward a proposal for reorganizing the services based on a discussion of the reasons for maldistribution.

Part 3 deals with new approaches in the schools. There are chapters on enhancing the teacher's mental health function, primary prevention in the classroom, and the early identification and prevention of emotional disturbance in a public school. Two experiments are also described. In one, by Iscoe and others, mental health consultation is made available to certain schools but not to others. Results of the comparison are not yet available. In the other, by Gildea, Glidewell and Kantor, no advantage could be demonstrated when a school-centred mental health service was introduced. This chapter is particularly rewarding because of its unusually scientific approach to evaluation.

Community psychiatry as practised in the National Health Service receives little mention in this book, and the political philosophies which account for so much of the difference between British and American services receive no mention at all. Many of the approaches to community mental health which are described will be unfamiliar to British readers. There is no doubt that some of them will find an application in this country, and the book should be read for a foretaste of things to come.

J. K. WING.

The Halfway House Movement: A Search for Sanity. By HAROLD L. RAUSH with CHARLOTTE L. RAUSH. New York: Appleton-Century-Crofts. 1968. Price \$5.50.

The Halfway House in the United States is the equivalent, except in its economic arrangements, of our psychiatric hostel. In both countries these houses were established to provide the former mental hospital patient with a transitional step on the way back to community life. They aimed to repair the desocializing effects of hospital admission, and prepare a former patient to meet again the stresses and expectations of daily life.

They were an outgrowth of the mental hospital whose practice the hostels reflect or reject in differing degrees. Evaluation of their success is difficult, for they are only one stage in a patient's readaptation and their residents are always highly selected. At present they are judged by the way in which their residents' lives resemble or differ from that of the

mental hospital patient. The authors devised a questionnaire which sought information from forty halfway houses about their residents, staff, aims and rules. From the information gained, the houses can be arranged in a series extending from those which, in values and practice, resemble the hospital to those which explore new methods of social care in a residential setting. The questionnaire elicited much practical information about the buildings, costs, staffing, and so on, which will be of interest to those who operate, use, or intend to establish a psychiatric hostel. But the book goes further than this. The authors, not satisfied with a discussion of the practical and administrative advantages of the Halfway House, go on to examine the theoretical possibilities of this new form of residential care. For them it is not only a transitional step for the ex-hospital patient, but a transitional stage in the evolution of new patterns of psychiatric care. This is the important point.

It is no criticism of the book that the authors do not examine the implications of the current proliferation of services geared, like Halfway Houses, to the needs of those who can accept middle-class social values. But someone will have to think about care for the unco-operative, untreatable, anti-social patient.

DOUGLAS BENNETT.

GENERAL PSYCHIATRY

Modern Perspectives in World Psychiatry. Edited by JOHN G. HOWELLS. Edinburgh: Oliver and Boyd, Ltd. 1968. Pp. 787. Price £8 8s.

This is a large star-studded 800-page volume. The editor is careful in his preface to point out that it is not a text book, but one volume of a series aimed at presenting authoritative surveys of growing points in psychiatry. This volume is limited to two main themes, dividing the book into halves. The first part is largely devoted to surveys of experimental, anatomical, biochemical and neurological aspects of neuro-psychiatry; the second to the general clinical field. Perhaps the most useful thing this reviewer can do, having spent several worthwhile hours scanning the book and sampling the reading matter, is to present a list of the authors and their subject matter together with occasional comment. There are twenty-six sections in the book.

The first chapter provides a succinct comment by L. S. Penrose on our present knowledge of schizophrenic genetics. His survey, made without reference to the recent Scandinavian twin reports and to Heston's study, concludes wisely and in an heuristically valuable way with a clear statement of the