

Buy this book and force every medical and nursing student you encounter to read a chapter from it. I suspect it would significantly improve in the future the care that patients presenting to accident and emergency with self-harm receive. While you are at it, share it with your psychiatric colleagues; a reminder of empathy and a deepening of our understanding of our patients can never go amiss. As one of the contributors writes, 'whatever you learn, get it out there, you never know who might benefit from your own experiences'.

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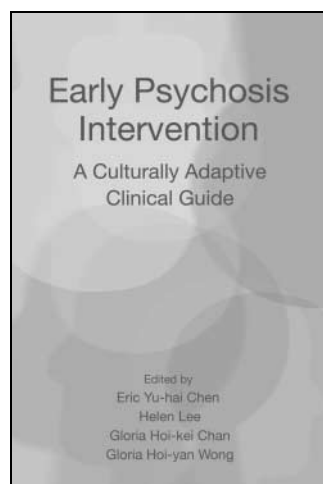
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## Early Psychosis Intervention: A Culturally Adaptive Clinical Guide

Edited by Eric Yu-hai Chen, Helen Lee, Gloria Hoi-kei Chan and Gloria Hoi-yan Wong  
Hong Kong University Press, 2013, US\$50.00, hb, 416 pp.  
ISBN: 9789888139927



This book is written by multidisciplinary pioneers in early psychosis intervention in South-East Asia and is a product of two decades of development in this rapidly growing region, a cultural mosaic. In the foreword, Professor Patrick McGorry highlights that the essence of such intervention is to bring maximum recovery for young people with psychotic experiences.

The book is unique and attempts to connect early psychosis with transcultural psychiatry. The first part

describes service structures of early psychosis programmes in Hong Kong, Singapore, Japan and Korea. The authors define early psychosis afresh by introducing the culturally adaptive translation in Chinese, *sijueshitiao*, meaning imbalance of thinking and perception. The second part discusses the cultural issues in management of early psychosis. The authors tactfully compare and contrast different Asian beliefs of mental illness including Islam (unbalanced lifestyle), Hindu (bad karma), Buddhism and Taoism (attacks by ghosts) and Christianity (demonic possession). The local cultural beliefs may increase duration of untreated illness because patients and families often consult their traditional healers instead of medical practitioners.

The authors present interesting data on public misconceptions about psychosis. They highlight salient points in early psychosis treatment such as recommended dose of each antipsychotic drug, topics to be covered in peer support groups, strategies for family work and medication adherence. I personally found the chapter illustrating the state-of-art information technology and database design very interesting.

I highly recommend this book to mental health professionals who are keen to establish early psychosis intervention services in other parts of Asia, Africa and South America. The authors carefully insert clinical vignettes throughout the book and enrich its clinical relevance. Mental health professionals working for well-established early psychosis intervention programmes may find the culturally adaptive strategies helpful in their clinical practice. In the near future, I hope Professor Eric Chen and his colleagues may consider writing a book on the neurobiology of early psychosis.

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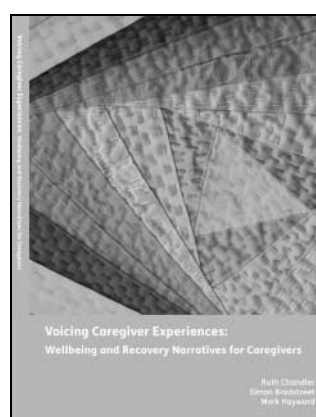
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## Voicing Caregiver Experiences: Wellbeing and Recovery Narratives for Caregivers

Ruth Chandler, Simon Bradstreet & Mark Hayward  
Scottish Recovery Network & Sussex Partnership NHS Foundation Trust, 2013, 166 pp. ISBN: 9780955635960  
Available free of charge at [www.scottishrecovery.net](http://www.scottishrecovery.net)



In this easy-to-read book, ten authentic carer stories of different styles have been collected. Each has different themes, many of sadness and loss, and they describe the roller-coaster ride that most have had to endure until eventually finding stability and some acceptance of the situation in their own and their loved ones' lives. Tips between carers are shared, especially those of encouraging and steering others towards

empowerment both in managing their own, often ignored, needs and to negotiate the fragmented, bewildering and inconsistent care delivery arrangements.

The most notable theme is that of hope. The stories demonstrate the process of finding hope, not a superficial denial of the challenges that lie ahead, but something worthy of respect. This hope is borne in adversity, is effortful and those

who do find it have to overcome years of difficult associations to have future positive expectations.

Another theme is that of the care triangle between service users, carers and professionals. Many speak of how devastating some professional attitudes and practices can be, leaving wounds that take years to heal. Many also speak of positive relationships with professionals that have the capacity to become pillars of strength.

These stories are of heroes, and their own contribution to their relative's wellness is often under-recognised, overlooked and underestimated. In addition, their own care needs are often ignored as their caring role becomes engulfing. Many require active encouragement and permission to attend to their own wellness. When we as professionals see carers presenting as fraught or distressed, we should honestly ask

ourselves 'What would we do?' After reading these stories, I am doubtful any of us, even experienced clinicians, would know what it takes to manage some of the situations described, let alone find the peace than many carers achieve.

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