

## Book Review

### **Bill Yule: Books and Book Reviews – A Meta Analysis**

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Bill Yule was involved as co-author, editor, co-editor or major contributor of 14 volumes. When asked whether I would be prepared to contribute to this Festschrift by reviewing these books, I hesitated but briefly, thanked the commissioner for considering me for the honour, and declined: I have neither the detailed knowledge nor the time for such a mammoth task. Instead, I came up with a counterproposal – that if provided with copies of published reviews, I would be willing to undertake a meta or higher order analysis of what others more competent have made of Bill's work. The analysis would be aimed at identifying common themes, positive and negative, in response to the works, by means of the well-known technique of eyeball analysis, but at least anchored to independent sources. At the same time, this reviewer must admit that a charge of partiality would stick, being a friend, colleague of many years, as well as a research collaborator and joint author of a number of articles and book chapters, a further good reason for depending on published independent reviews wherever possible.

Inevitably, the commentary must begin with *Education, Health and Behaviour*, edited by Rutter, Tizard and Whitmore (1970). Bill, who had relatively recently qualified as a Clinical Psychologist when the research was initiated, was joint author of six of the 21 multi-authored chapters, indicating his substantial involvement in and contribution to the project at a very early stage of his career. The volume documents a groundbreaking project – “The Isle of Wight (IoW) Studies”, a major epidemiological study of child psychiatric disorders with robust and innovative methodologies, respecting good psychometric principles and committed to clinical and educational relevance. It was also a truly multidisciplinary study. Many of the issues it tackled then, such as attempting to secure sound prevalence estimates of psychiatric, physical and educational disorders, are as germane today in service development and clinical practice. The IoW studies constituted then, and remain, an impressive example of applied clinical research.

It was at that time too that Bill's interest in educational problems, their nature and educational and psychological significance, became manifest. The IoW studies, for instance, fed into the debate concerning the existence of “dyslexia”, a concept considered by the authors to be best replaced by something more appropriately operationalized, heralding various debates that still surface: on the merits of using regression equations or other procedures to help segregate specific reading retardation (low reading age relative to chronological age and IQ) from reading backwardness (reading achievement below age level but consistent with general low ability); questioning the conceptualization and the very existence of dyslexia and, by implication, some of the other developmental disorders.

The debate surrounding the validity of dyslexia remains, with Bill continuing in the thick of it: *Perspectives on the Classification of Specific Developmental Disorders*, a collection of papers from an international symposium collated and edited by Rispen, van Yperen and Yule (1998) revitalised the controversies, addressing issues such as the diagnosis and classification of reading, spelling, writing, and language disorders. It is, of course, accepted that individuals

have severe and seemingly specific impairments in these functions, with a developmental course and significant consequences, personal and educational, that require support and help and, if necessary, clinical involvement. The challenge of identification highlighted in the IoW and subsequent studies, as well as the validity of the differing operational procedures for doing so, remain. Nevertheless, whatever other battles the IoW may have won, the dyslexia debate appears now to have been lost on several important fronts: it remains a current psychiatric diagnosis, has statutory status, recognition as a disability in the UK and a condition that, when diagnosed, carries entitlements to special provision through formal education and into employment, a triumph of politics over regression equations! The needs of those with other “specific” difficulties merit similar recognition. Like dyslexia, they are psychologically destructive conditions. It is also worth noting that making the “diagnosis” of dyslexia is a source of income for many. In this context, the issue of proper identification remains especially important and Bill’s commitment to the task is both welcome and necessary.

Perhaps less well known, but still of importance, is *A Neuropsychiatric Study in Childhood*, also published in 1970 as a companion volume to the main IoW study. Bill was joint author with Michael Rutter and Philip Graham, a formidable trio. Assessing children with epilepsy and cerebral palsy, this study further highlighted the psychiatric and psychosocial difficulties of children with these conditions, using a more sound methodology than was common at the time. Indeed, its opening chapter remains an impressive example of critical evaluation – an incisive academic, clinical and methodological analysis of the then current thinking and research on “brain damage” in children. The commentary in the introductory chapter can still enlighten contemporary clinical researchers and practitioners.

Several other important features characterize the two early volumes and constitute the hypotheses to test in the later publications: recognition of the need for good quality research to address clinical problems, highlighting the impact on children, families and schooling, and identifying the service as well as the professional training implications of the findings. Also notable from the outset is the multidisciplinary basis of the work, a feature of many of Bill’s future books, almost all collaborative, interdisciplinary works.

A special feature of both early Isle of Wight volumes, also marking a link for the future, and certainly not a hypothesis, is the indebtedness of the authors and editors to one Miss Bridget Osborne for her work on the IoW studies who, those many years ago, became Mrs Bridget Yule and who, subsequently, has been very important in enabling and supporting Bill’s work.

In 1980 Bill and co-editor Janet Carr published the first edition of *Behaviour Modification for the Mentally Handicapped*. Of the accessible reviews, several (Gaylord-Ross, 1981; Hegarty, 1980) see its merits and limitations. Both reviewers highlight the important themes: the clear and positive presentation, grounding in clinical “reality” and usefulness for practitioners. On the negative side, Hegarty (1980) was concerned that the coverage was not linked to more broadly based issues than of concern, particularly to practitioners in education. Gaylord-Ross (1981), while coming down on the side of its strengths, recognized the book’s institutional origins (many of the contributors were or had been working in an in-patient setting), some limitations in technical coverage, and its failure to consider applications in the community in any depth. In the final analysis, the fact that the volume merited a second edition (1987), its title appropriately modified to *Behaviour Modification for People with Mental Handicap*, attests to its usefulness.

Given his interest in educational attainment (achievement in North America) and the clinical consequences of educational difficulties, it is not surprising that Bill became involved in research and the debates on the toxicity of environmental lead and its impact on learning.

Typically, he contributed in collaborative research programmes, the work culminating in the volume co-edited with Richard Lansdown, *The Lead Debate: the environment, toxicology and child health* (1986a), republished in the same year in the USA as *Lead Toxicity: history and environmental impact* (1986b). It is difficult to determine the extent to which the policy and introduction of lead-free petrol are the outcome of such work, but it almost certainly contributed to the debate and the swell of opinion that resulted in the removal of lead from petrol and water pipes.

The following year, two volumes appeared. *The Treatment of Autistic Children* (1987), written primarily by Patricia Howlin and Michael Rutter, was the outcome of a collaborative, multidisciplinary project evaluating a home based, parent implemented treatment programme. The project on which the book is based involved Bill, Lionel Hersov, the late Rosemary Hemsley and myself, in addition to the authors.

The second volume published in the same year is a substantial (over 480 pages) co-edited (with Michael Rutter) collection of 29 papers on *Language Development and Disorders* (1987), seen by one reviewer as a "seminal volume" (Law, 1988), despite voicing reservations about its currency, lack of cohesion and the organization of the material. These limitations probably stem from the absence of coherent theory to provide a suitable framework and the intention of the book: to bring together knowledge from several disciplines to provide a broad and multi-faceted view of language development and its disorders. While assessments of such collections will be idiosyncratic, based on the knowledge and experience of the reviewer, the book is seen as reflecting the needs of the practitioner and the diversity of disciplines with a clinical interest in language (O'Callaghan, 1988).

*Behavioural Phenotypes* (O'Brien and Yule, 1995) attracted a lot of interest. It too is a collection of papers from different authors concerned with behavioural homogeneities (and diversity) associated with genetic syndromes, in particular the cognitive and social features of genotypes. While the behavioural characterizations may not have been robust, with syndrome specificity an issue, the field was given identity, shape and direction for future clinical and research developments through the publication. Hence its significance: as one of the first, if not the first, in the field, with its status as a foundation text being noted by a number of reviewers. While parts of the collection were regarded as dated then and will be more so now, inevitable given the production lag inherent in assembling a book of this type and the subsequent rapid advances in clinical genetics, several of the chapters, particularly the review by Udwin and Dennis, are seen as providing clinicians and researchers with a clear starting point for those with an interest in the area (Bernal, 1996; Kerr, 1996; Skuse, 1998; Wood, 1997).

The final part of this review of reviews will cover a number of publications, a major handbook on phobias and anxiety disorders jointly edited with Tom Ollendick and Neville King (1994), and the various publications on Post Traumatic Stress Disorder (PTSD) in children and young people, a major focus of Bill's research and clinical interest.

*The International Handbook of Phobic and Anxiety Disorders in Children and Adolescents* was the subject of double accolade, a review by Jerome Kagan in *Contemporary Psychology* in 1996. The review is itself a scholarly and pointed piece, recognizing the merits of the Handbook, placing it in its academic, research and clinical contexts and recognizing the comprehensive, scholarly and balanced nature of the contributions. Importantly, however, Kagan castigates the authors "for being unable to break the ideological chains that the DSM classification system imposed on them" (Kagan, 1996, p. 357). Clinical psychologists as a group will no doubt be split with regard to loyalty to psychiatric diagnostic systems as a way of conceptualizing psychological distress and dysfunction: some may have no option or might be financially

constrained. Again, as Kagan (1996) so eloquently puts it, the origins of the psychiatric categorization schemes arose partly out of poverty (of theory) and “the need for psychiatrists to impose a categorization scheme that met the fiscal requirements for third party payment” (p. 356). In the UK, as no doubt elsewhere, psychiatric classification pervades thinking, practice and policy for clinical services. Undoubtedly, categorical classification has some benefits (Rutter, 1976), but at least equally if not more important limitations (Widiger and Clark, 2000).

Much of Bill’s work is rooted in a “disorder” conceptualization, from the earliest days on the IoW studies through the studies on specific learning difficulties to his most recent contributions on PTSD, reflecting in part the advantages such a conceptualization brings to research. Traumas with a psychological aftermath, like many other human “clinical” phenomena, have been colonized by the categorical psychiatric classification, witness perhaps more to political power than to theoretical, clinical and other meaningfulness. Accepting such a use of “disorder” has not however diminished Bill’s very substantial contribution, academic, clinical and policy-wise, and, as I am confident he would say, the ultimate evaluation of such systems will be determined by what we will learn from research – where the empirical evidence leads us.

Bill’s expertise on the effects of trauma is highly regarded and internationally recognized not only as a result of his research and publications, but because of his personal commitment and direct involvement in national policy (for instance as a member of the working group to establish the NICE Guidelines on PTSD – NICE, 2005), prevention (Yule and Gold, 1993), teaching, a charitable trust (Children and War Foundation), training and face-to-face clinical work with children and young people. Much of my knowledge of his involvement comes from innumerable “Personal Communications” over the years, in catch-up telephone conversations, the occasional dinners and other social events, all snatched between his visits to Bosnia-Herzegovina, Iran, Sri Lanka and other places riven with strife or hit by disaster, or, every so often, the comparative tranquillity of national and international conferences.

Trauma, whether through natural disasters, accidents, human brutality or otherwise, is ubiquitous, possibly the most prevalent source of psychological distress in the world today. Wars, brutal regimes, pandemics, and small and large-scale accidents will unfortunately ensure a never-ending requirement for competent assessment and effective interventions for traumatized children and adults. And while many traumas can never be prevented, organizations, services and individuals can be better prepared for when they arise. To this extent, the book written with Anne Gould, published by the Gulbenkian Foundation, *Wise Before the Event: coping with crises in schools* (Yule and Gould, 1993) is, in some ways, possibly one of the most important publications Bill has been directly involved with. For a start, it struck a chord with the national press (*The Times*, 12/7/1993; *The Guardian*, 7/7/1993) as well as local newspapers (such as *The Doncaster Star*, 19/7/1993) and with many professional publications and organizations (*Head Teachers Review*, 1993; *Pastoral Care (Gentry)*, 1994); the *Times Educational Supplement*, 1/4/94). Secondly, it is consonant with Bill’s long-standing commitment to making research findings applicable to clinical and educational tasks, doing so in a manner that is clearly accessible to non-psychologists. Thirdly, while much of his work has focused on post-trauma intervention, *Wise Before the Event* is clearly geared to prevention. Fourth, its advice comes across as comprehensible, relevant and readily implemented in schools (Duffy, 1993). Finally, the booklet was made available to all schools in Britain through the philanthropic Gulbenkian Foundation, in itself an impressive distribution. Although the booklet may now need to be clarified in the light of the recent NICE (2005) guidelines, particularly in relation to single session debriefing (p. 114), not many

publications founded in clinical research and experience in their day would have scored as well on so many important criteria!

The next two volumes complete the bibliography. The first is a book authored with Stephen Joseph and Ruth Williams, *Understanding Post-Traumatic Stress: a psychosocial perspective on PTSD and treatment* (Joseph, Williams and Yule, 1997). The second is an edited collection of papers from different authors, titled *Post-Traumatic Stress Disorder: concepts and therapy* (Yule, 1999). The reviews come from diverse sources (including one in Dutch and another in Hungarian, neither of which I have attempted to incorporate here – with apologies to their authors).

What comes across in a review of this group of reviews is of an in-house (the house of course being the Institute of Psychiatry – perhaps more of a warren than a house) approach to PTSD. This takes the form of a psychosocial theory, regarded as an emergent rather than an organizing theme for the volumes. Both volumes are positively reviewed (Duff, 1998, 2000; McManus, 2001), again with clear themes emerging of what I would regard as a hallmark of Bill's involvement, the use of research and clinical experience to inform the chapters that in turn have a focus on clinical application.

Bill has always remained a practising NHS clinician and this has given his views, writing and editorial work, his academic contributions and research, their credibility and relevance. This Review celebrates this diverse, productive, influential and continuing contribution through a not insubstantial number of books in developmental psychopathology. Bill's primary role, apart from any chapters he contributed, was that of co-author, co-editor or editor. While editors have some control of the material that eventually gets published, the combination of contracts, advance publicity, deadlines and an unwillingness to offend colleagues means that edited volumes are not always the best medium for evaluating an editor's contribution to a discipline. Nevertheless, edited volumes do allow topics to be highlighted and drawn to the attention of practitioners and policy makers. They can give substance, meaning and direction to a topic, with the calibre of the co-editors and authors willing to contribute a sign of the regard in which their peers hold the editors. The volumes that Bill edited or co-edited received the mixed reviews probably typical for this type of publication. On key criteria such as co-editors, topicality, direction setting, clinical relevance and contribution, the books Bill was singly or jointly responsible for score highly. They also reflect the esteem in which he is held and his overarching commitment to good research applied in response to the clinically encountered needs of children, young people and those involved in their care.

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