

Event-Related Brain Potentials in Personality and Psychopathology: A Pavlovian Approach. By R. C. HOWARD, G. W. FENTON and P. B. C. FENWICK. Chichester: John Wiley. 1982. Pp 112. £12.75.

This is the first book in a series edited by Peter Fenwick entitled *Psychophysiology Research Studies*. The aim is to interest workers in the field of neurophysiology, "to launch new ideas about brain function and its investigation by electrophysiological techniques". The present volume is slim and reports studies carried out on patients at Broadmoor Hospital. Some readers may not totally be aware of the meaning of the term "event related brain potentials". The particular potential studied here is the Contingent Negative Variation (CNV) or more colourfully the "expectancy wave" of Grey Walter, who with colleagues first noted it in 1964. There is a shift in brain activity when a subject is asked to turn off a flashing light following a warning tone a second or so earlier. These potentials could be regarded as a complex type of brain evoked response in contrast to a simple response resulting from a series of clicks or flashes where the patient or subject does not have to make a conscious action.

This is not an easy book to read, and is one directed largely to the specialist; nevertheless it is of considerable interest because it presents information which suggests that the size of brain potentials can relate to a disease such as schizophrenia, or, equally important but more difficult to define, to such concepts as sociability or impulsiveness. These in their turn can relate to clinical outcome in terms of adaptation to a non-hospital life. The paradigms used here, the authors suggest, could have a wide application in the study of personality and psychopathology, but as these investigations were performed on hospital patients of a particular type, we must wait for further information to check this tentative claim.

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The Clinical Interview of the Child. By STANLEY I. GREENSPAN in collaboration with NANCY THORNDIKE GREENSPAN. Maidenhead: McGraw-Hill. 1982. Pp 203. £13.50.

There is a need for a book on this subject, although it is doubtful whether this book satisfies the need, particularly for child psychiatrists in the United Kingdom. The author is a child and adult psychoanalyst working in Washington, D.C. His style is clear and readable. He provides a good perspective of American child psychiatry practice. However, the

contrast in approach between the USA and the UK could be confusing for trainees in child psychiatry in this country.

The book describes the process of the clinical interview and links this with the author's conceptual model of child development: the developmental structural approach. I did not think the attempt to link theory and practice was successful. The virtues of this particular approach were not apparent and could be regarded as another model of child development for the trainee to assimilate.

The book is most successful in its description of the sequence of a clinical interview. The author conveys well his skill in conducting an interview. Trainees may well find some useful ways to negotiate the pitfalls of interviewing. However, the range of psychopathology described in the 11 interviews is limited. Psychotic phenomena are largely ignored. There is no adequate discussion of issues such as how to assess attention, concentration and level of activity in an interview. In addition, the references are rudimentary with no mention of any recent research in this area.

The book cannot be recommended as a standard text on the subject, although it shows how a good clinician practices his art.

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The Evaluation and Care of Severely Disturbed Children and Their Families. Edited by LEON HOFFMAN. Lancaster: MTP Press. 1982. Pp 130. £13.50.

This book describes the work of the Child Psychiatric In-Patient Unit at Mount Sinai Medical Centre in New York. This is a short-term admission unit for children predominately from social disadvantaged backgrounds. The duration of care is 1-3 months. This is determined by the availability of insurance cover for the period of care. The limitations imposed by this are acknowledged.

The main purpose of the book is to describe the treatment philosophy of the Unit. This is based on the milieu approach within the psychodynamic and developmental framework. The individual chapters are devoted to an account of the work of the different disciplines within the Unit. Although the style is clear, many chapters are brief with little attempt to describe the problems involved in in-patient care. Issues such as staff support in a multi-disciplinary team and the conflicts between the child's individual therapist and other staff members are not adequately discussed. Furthermore, it would have been useful if there had

been some discussion of how the Unit evaluates its work with respect to effectiveness and outcome.

Although the book provides a good insight into the organization of the Unit, it is not a comprehensive account of the in-patient care of disturbed children. Philip Barker's *The Residential Psychiatric Treatment of Children* is more useful in this respect.

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Help Starts Here: The Maladjusted Child in the Ordinary School. By ISRAEL KOLVIN, ROGER FORBES GARSIDE, ARTHUR RORY NICHOLL, ANGUS McMILLAN, FRED WOLSTENHOLME and IAN MUIR LEITCH. London: Tavistock Publications. 1981. Pp 436. £25.00.

This is an important book with heightened impact because of the implementation of the Education Act 1981, legislating some recommendations of the Warnock Committee that handicapped children, including the maladjusted, should be educated in ordinary schools as far as possible.

Kolvin and his colleagues, supported by a distinguished steering committee from the DES and a multi-disciplinary project team, set out to find ways of developing mental health services in the community, particularly in ordinary schools, and of evaluating the effectiveness of different types of treatment.

The study concentrates on two groups: two hundred and sixty five seven-year-olds and three hundred and nine eleven-year-olds in six junior and six senior schools. It assesses four major theoretical approaches towards the treatment of maladjustment in schools: behaviour modification, nurture work, parent counselling/teacher consultation and group therapy. New techniques for detection of disturbance and the assessment of results and inter-treatment comparison were required.

The behaviour modification approach chosen, concentrating on individual children, emphasises techniques of social reinforcement rather than material rewards. The nurturing approach, carried out under classroom supervision with groups of junior children and based on the work of Boxall, rests on the concept that by studying the skills of mothers the processes by which socially important behaviours are

acquired can be built into a treatment programme with maladjusted children in ordinary schools. Parent counselling/teacher consultation required co-operative consultative work with parents and teachers involving social workers in schools while group therapy/counselling required social workers, discussion sessions and was based mainly on theoretical concepts from the psychoanalytic, psychodynamic approach. All the work was compared to a concomitant group of control children, and the authors recognize the opportunities for the control group to be exposed to treatment by propinquity.

The results are impressive. All four regimes were effective in reducing target behaviour but, naturally, some were more so than others.

The least effective appeared to be the parent/teacher counselling maybe because this required greater investment of personnel and time than were available to the project team. By contrast the shorter-term treatments (group therapy and behaviour modification) had the best outcomes, suggesting that tact rather than intensity of treatment is critical.

Coming to rather the same conclusion as Rutter (1979), Kolvin and his colleagues conclude that the child's experience in school are critical for psychological adaptation. Their findings emphasise the importance of treatment of children within their ordinary schools, with parental contact taking a relatively secondary place. The study demonstrates how effective carefully thought-through approaches, involving children and their schools as the prime resource, is in reducing behaviours which are of constant concern to parents, teachers, psychologists and doctors. It also demonstrates how school-based intervention can avoid the later need for expensive, disruptive special school provision.

This development of previous, epidemiological surveys highlights the extent to which disturbed behaviour can become prevalent in schools if systems are allowed to grow which insist that all treatment of children with behavioural difficulties in ordinary schools should take place outside their ordinary schools. The demolition of this paradoxical proposition is sufficient justification for the time, cost and energy involved. The results are a significant service to children.

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