

The papers presented are diverse in style and content. The first three describe how the symposium was set up with a parallel programme of performing arts at the Cockpit Theatre. Professor Segal then provides an informative account of the development of special education and integration of the arts into this from an international perspective.

Poitevan writes an exciting chapter on how seeing people with mental disabilities being creative is a potent method for changing attitudes, and that such expression can be used by those with disabilities to reveal difficulties within the organisations or institutions that they are involved with. This may, of course, be quite a challenge to those institutions. He also describes the challenge to the individual with a disability, in that coming to terms with newly discovered aspects of themselves may be threatening and requires the individual to be supported.

Poitevan writes from his own experiences but some of the other authors' experiences do not directly relate to this client group. This makes their writing less powerful. This is not the case, however, with Taylor, who describes with great enthusiasm and lots of examples, how the arts allow the expression of emotion and so facilitate change, which may take many forms, such as, in self-image, concentration and skills. As an experienced counsellor and speech therapist she describes her work in the UK with people with mental disabilities, and her experiences in Israel.

This book is interesting to dip into. The importance of leisure activities and the creative arts is recognised by us all, but is sometimes neglected when thinking of the needs of people with disabilities. This book will be a welcome addition to the libraries of those working in this field. It is short, easy to read and some chapters are outstanding.

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The Roles and Tasks of Community Mental Handicap Teams. Edited by STEPHEN BROWN and GERALD WISTOW. Aldershot, Hampshire: The Press Office. 1990. 130 pp. £25.00.

This slim volume is the report of a conference in Loughborough in 1986, organised by the Centre for Research in Social Policy at Loughborough University and the British Institute of Mental Handicap, when the two editors were Research Fellow and Co-Director of that Centre. The conference proceedings are readable, interesting and appear to lose nothing in the transcript. It does, however, seem a pity that over three years have passed since the conference, but there is still much that is pertinent today.

Community teams started around the early 1980s when community-care needs were being addressed, and

effective delivery of care in the community was to be the antidote to a decade of poor and fragmented services in institutions. It is also important to remember that multidisciplinary teams were used first in mental handicap services while teams in other services such as general psychiatry and drug addiction have followed in their wake.

If community teams are indeed the linchpin of the community-based service then they cannot afford to be fragile or vulnerable in the hands of the ignorant or powerful. The honeymoon is over and teams must address their dynamics and the work done, with sophistication, as in this text, so that service delivery to the client and carers is the best that can be offered within the resources and done with informed inspiration.

There is no one model for such a team, a matter of strength in my view but of concern for some. In some services community teams are at the periphery of another strong part of the service while in other places the team may represent the total service. Some teams have a planning function and others do not. What seems clear is that audit must now be part of the work of any team.

Teamwork is never easy but this book can help teams to remedy their ills and, for robust teams, point the way to further endeavours. It is a thoroughly useful book for teams to own and for libraries to stock. There will be few who will buy this text for themselves for a price that can only reduce the size of an already small market.

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A DSM-III-R Casebook of Treatment Selection. By SAMUEL PERRY, ALLEN FRANCES and JOHN CLARKIN. New York: Brunner/Mazel. 1990. 416 pp. \$42.50.

Although the DSM classification system in psychiatry has received great support among research psychiatrists and been a major influence on the revised psychiatric classification in the *International Classification of Diseases*, it continues to attract criticism from clinicians. Despite formal diagnoses using the DSM classification being mandatory in many parts of North America, the labelling process is often seen as a sterile academic exercise that serves the whims of bureaucracy but is of no value to the patient.

This book, together with its predecessor, *Differential Therapeutics in Psychiatry* (1984) aims to put flesh on the DSM skeleton. It adopts a standard format whereby each of 53 cases is described in terms of five axes; the setting where the treatment occurs, the format indicating who takes part in the treatment (varying from individual to family therapy), the time taken to complete treatment and the frequency of sessions, the approach (which describes the range of psychological