

therapeutic relationship is a human interaction in which two people affect each other in a complex and personal fashion, and in which one of them (the therapist) uses part of his mind to observe the intricacies of this mutual involvement, and to convey to the other (the patient) something of his understanding of what is taking place. In other words, the transference and the countertransference are interdependent.

This book appears to be motivated by the authors' wish to describe such a state of affairs, and in this task they succeed. They provide an excellent review of the literature (with an inevitable North American bias), and a large number of interesting case descriptions which well illustrate the points they make about the subtleties of the transference-countertransference interaction in a variety of clinical situations (although some of these would be regarded, in this country, as being supportive psychotherapy). There is also a chapter on supervision, looking at problems which can arise in the interaction between the supervisor and the transference-countertransference scenario presented by the supervisee.

Unfortunately, however, the book is seriously flawed by the authors' second main aim. Not content with description, they structure the entire book around an attempt to introduce a quantifiable schema for thinking about and measuring certain aspects of a transference-countertransference interaction. I expect this will appeal to some readers (particularly in North America), but it did seem to me to work against the authors' aim to demonstrate the essentially emotional and human nature of the therapeutic encounter.

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Play Therapy. By VIRGINIA M. AXLINE. London: Churchill Livingstone. 1989. 360 pp. £9.95.

It is a tribute to its author that, more than 40 years after its original publication, this book remains an excellent exponent of non-directive play therapy with children.

The technique was inspired by Carl Rodger's non-directive therapies with adults, the role of the therapist being primarily one of acceptance of the child and his behaviour, the approach non-directive and non-interpretative but active and reflective. The aim is to convey to the child a sense of acceptance and respect, as a means of helping him develop his own sense of dignity, self-worth, and self-confidence, which allows him to modify his behaviour. The eight basic principles of therapy are outlined as: the establishment of rapport, complete acceptance of the child, establishment of a feeling of permissiveness, recognition and reflection of feelings, maintaining respect for the child, letting the child lead the way, not hurrying therapy, and sometimes making explicit some limits to the child's behaviour.

The author gives plenty of valuable examples of therapy, both individual and group-based. Her comments about inappropriate interventions, and her suggestions of better alternatives, are particularly clarifying and helpful. Some of the examples themselves attest to the basic principle that "bringing the child's deviant attitudes into the open can dissolve the need for their expression", or that "some children can almost immediately cease to be destructive once their attitude is understood and accepted". However, the need for systematic evaluation is also emphasised. It is interesting to note that recent work by Kolvin *et al* (*Help Starts Here* (1981). London: Tavistock Publications). Using non-directive group play therapy with children with emotional and behavioural difficulties has demonstrated its therapeutic effectiveness.

This excellent book has passed the test of time. In conjunction with the author's subsequent delightful account of therapy with a 6-year-old boy (*Dibs, In Search of Self* (1964). Harmondsworth: Penguin) it can be strongly recommended to trainees in child psychiatry.

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Loss of the Good Authority. The Cause of Delinquency. By TOM PITT-AITKINS and ALICE THOMAS ELLIS. London: Viking. 1989. 264 pp. £14.95.

This book is based on the awareness that "many narrow-fronted approaches in the treatment of delinquents – so often old ideas in new guises – can never stop the delinquent process". It attempts to convey an understanding of the consequences of the loss of "authority", the latter defined as "that which within a definite area may allow, disallow or insist upon change, with or without any further references". The "good" itself is seen as "a psychic burden often perceived only unconsciously by others", and deemed responsible for determining groups' or individuals' pattern of life and behaviour. The "losing of the good authority" is seen as potentially devastating, possibly leading to various forms of psychopathology and delinquency.

Nine pages of trying to define authority supports the authors' view that "definitions are, by definition, difficult".

Dr Pitt-Aitkins, Consultant Adolescent and Family Psychiatrist, and Alice Thomas Ellis, novelist, add another book to the myriad of books on the possible causes of delinquency. The eight chapters are headed by brief summaries. The various chapters deal in some detail with the meaning of authority, the change of site of authority, the good, its loss and the chance of re-finding it, potential effects of this loss, and the various forms of therapy.

The development of the authors' concepts spans theoretical and practical considerations; it involves the

individual, the family, and society at large. Each author's contribution is highlighted by initials preceding each relevant chapter. Some readers might not be familiar with this, and find it somewhat unusual. It takes only a little time though to get used to this particular form of presentation; it then becomes a refreshing novelty, a new form of discussion between the authors and the reader.

The last chapter, on therapy, gives "an account and rationale of some therapeutic techniques developed over many years and many settings". The general reader will find this particular chapter especially valuable; it translates previous concepts into real-life context. Special importance is given to consistently recurring themes; on different levels they are recognised to be identical. These themes deal with interpersonal, historical, inter-professional and other issues; their abstract nature is offset by practical examples.

Some readers will argue with some of the concepts and views of the authors; nevertheless, they convince with their plausible persuasiveness.

The book ends with 50 pages of case notes which elucidate concepts discussed in this book; topics range from arson, sexual assault, and burglary to drug abuse, rape, and shoplifting. These case notes give evidence of the authors' depth of experience; they are highly recommended to the reader in a hurry who might not find time to study the whole book in detail.

About 90% of the 50 bibliographical notes are older than 5 years. The eight-page reference list is thorough.

I did not find this book particularly easy to read; frequent long sentence structures do not further the understanding of the several analytical concepts. I am left with the feeling that fewer pages would have given the book and its message more punch; repetitions on the same theme seem to take the impetus away.

The analytically-inclined psychiatrist will find this book stimulating. The forensic psychiatrist might find briefer discourses on the subject elsewhere. Nevertheless, the book deserves recognition for its thoughtful presentation of a pertinent issue. It deserves a wider readership than the medical profession.

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Foundations of Object Relations Family Therapy. Edited by JILL SAVAGE SCHARFF. London: Jason Aronson. 1989. 488 pp.

Few psychiatrists will be attracted to 24 intense chapters on psychoanalytic family therapy, and therefore many will miss the opportunity of reading this absorbing account of an approach which combines and integrates individual and family therapy in treating all problems from encopresis to schizophrenia.

In this country, family therapy and psychoanalysis have their own separate institutes and training, with minimal creative exchange between the two. Object relations family therapy has developed over the past 30 years to offer a unified approach which deserves serious consideration. In a section devoted to the integration of individual and family therapy, Robert Winer succinctly outlines the hazards of both therapies in isolation: "Family therapy may become preoccupied with interactional process and lose sight of the person; individual therapy may become immersed in the intersubjective intensities of the transference and countertransference and lose track of the life being lived".

Drawing largely on the work of Fairbairn, Klein, and Bion, transference and countertransference remain at the heart of object relations family therapy and insight is seen as essential to change. The concept of projective identification is fundamental to the understanding of intrafamilial psychopathology, whereby intrapsychic conflict in an individual is transformed into interpersonal conflict. Paradoxically, many of the concepts taken from psychoanalysis have greater meaning and relevance as applied here to the family. The authors are therefore quite clear about their theoretical basis, and those willing to accept it will be led into a wealth of convincing clinical illustrations.

Many of these are taken from a group of over 50 adolescent in-patients and their families treated on a residential unit at the National Institute of Mental Health. In fact, half the book deals with issues relating specifically to adolescence. Regarding adolescent development, the primary task of the family is seen to be the promotion of relative ego autonomy and identity formation, leading to individuation and separation which may be impaired by the family's unconscious fantasies. Role allocations for the collusive playing out of these fantasies are then communicated and evoked in the family members by projective identification. Such theoretical considerations are not only clearly described but brought to life with transcripts from family sessions.

Separate sections view marital interaction within the same integrated framework, and also sexuality within the family. David Scharff gives an excellent example of the authors' ability to link theories by developing Fairbairn's libidinal and anti-libidinal ego, with recognition of the techniques of Masters & Johnson, to understand sexual difficulties as somatically expressed failures in fit between internal object relations.

A single chapter looks at sexual abuse, and offers an important approach to the understanding of the loss of appropriate boundaries within incestuous families. For those who find a psychoanalytic approach unhelpful with regard to sexual abuse, Winer's chapter on the role of transitional experience based on Winnicott's work is particularly recommended.

Mindful too of Winnicott, the editor devotes the final chapter to play and the therapist's holding capacity, nicely defined as "the ability to listen thoughtfully, to