108 BOOK REVIEWS

motives for forming relationships than either of these schools admit, the message does not penetrate.

Learning disabilities, personality disorders and 'organic' brain disturbances are all treated as amenable to correction by artificial perceptuo-motor and self-control tasks, even though clinical trials are admitted to have had doubtful success. Temporal lobe seizures are mentioned as one cause of aggression, but there is nothing on the role of broken attachments and parental or societal factors. This exemplifies a depersonalized institutional approach, one insensitive to the real experiences behind socially disturbed behaviour in an individual child, whether his brain was originally normal or not.

Brain disorders are presented as global failures of chemical or associative processes. Neuropsychological methods are poorly represented. The nature of cerebral functional systems and their development is lost in the muddled concept of 'organicity', for which the Bender Visual Gestalt Test is described as the, "best single screening device". Hyperactivity, attentional and personality disorders consequent on early brain damage are either 'organic', or related to learning, the family, emotional adjustment and socioeconomic factors. Behaviour therapy is evaluated as having more long term successes than treatment by drugs. This chapter projects a limited understanding of brain/psychology relationships.

Neurotic or psychotic emotional illnesses and psychosomatic (or psychophysiological) abnormalities are dealt with in the middle third of the book. They, too, prove intractible to the familiar theoretical constructs.

It is only in the final section, with observational research on the effects of hospitalisation on children, and of childhood illness on parents, and studies of the benefits of readying older children for hospital with exposure to films of what hospitals are for, that one senses a return to a hopeful real world of the pediatrician who is sensitive to his patients as people.

Thus throughout the book the baggage of theory interferes with a pragmatic interest in emotional and social development. Surely pediatric psychology benefiting from the cooperation of the medically and psychologically trained should be deriving new concepts from its own experience of what children want and how they develop. Should it not be trying to assess treatments by epidemiological research, using methods of ethology or sociology rather than those of the psychological laboratory? The psychological science portrayed here does not understand the motivational structures inherent in the normal child and their specific requirements in an environment of human care and companionship.

The book can be recommended for its richly

referenced synopsis of conventional psychological theories against a wide spectrum of clinical applications. It looks towards a much needed new discipline, but fails to provide a coherent conceptual frame for teaching that discipline.

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Handbook of Mental Health Administration. Edited by MICHAEL J. AUSTIN and WILLIAM E. HERSHEY. London: Sage Publications. 1982. Pp 639. £26.00.

The interaction of the clinical and administrative role is probably more important for good patient care in psychiatry than in any other specialty. The aim of this book is to provide guidance on the required skills to clinicians who progress to management roles. At the outset, however, it is necessary to assimilate crucial differences between the American setting described and its British counterpart. Firstly, the authors use the term clinician to mean a trained professional working in the field of mental health and not just psychiatrists. Secondly, there is the implication of a formal transition from clinician to manager in the USA whereas in Britain an amalgam of clinical and managerial skills is normally required of psychiatrists, i.e. psychiatrists contributing to administration do not usually relinquish their clinical roles. In the British context, therefore, the book is probably more appropriate for social work and nurse administrators in the field of mental health who do not currently have clinical

Nevertheless, the book draws out the important differences in orientation between clinicians and managers; principles which illustrate the difficulties of reconciling the clinical and administrative roles for British psychiatrists. The chapter on managing interdisciplinary teams concentrates on the dynamics of the group process that may be used to produce change in the patterns of delivery of care. The following chapter supplements this with clear practical advice on the phases of staff meetings in order that they may be more productive. The consideration of quality assurance also has important points to make on the regular audit of mental health care at a local level.

Much of the book, however, is concerned with American programmes, policies and legislation. The reference list, almost without exception, quotes the American literature. The selective reading of only a few chapters is recommended for British psychiatrists.

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