

their ministry. They successfully look through the eyes of the consumers of health, social and religious services, at what secular and sacred "ministers" offer and how they do it. Simple, sometimes obvious, often poignant stories tell of how it is to be letting go of life, of health, of faculties, of relations and friends. The authors reveal, more by implication than direction, how to be an effective companion to the dying and the grieving. Their illustrations give meaning to the evidence gathered in research (quoted usefully in footnotes and appendices) and point to the kind of skills and attitudes required for effective pastoring and counselling to take place.

This is a remarkable book written by two pastors who have learnt, from those who sought their help, to sit where others sit, and yet retain a critical sense of the problems and the possibilities of being helpers to others.

*Still Small Voice*, written as an introduction to pastoral counselling, attempts a more complex task, the dismantling of some formidable stereotypes. On one hand the image of the pastor as a paternal if not autocratic figure, who issues religious (generally moralistic) injunctions to people, who are like feckless sheep. On the other hand, the counsellor who, satiated by Rogerian non-directiveness, has lost contact with his religious and theological roots. By contrast the author perceives the pastoral counsellor as a skilled, attentive and disciplined listener to the 'still small voice' within each one of us. The one who, by his accurate listening, and the empathy of his responses, helps individuals initiate and then sustain their work of self discovery. Drawing mostly on psychodynamic principles and practices, as they are revealed in the many cases he quotes, the author paints a picture of the counsellor and the client gently pulling back the layers of life's experiences to reveal more of the soul, the psyche and the personality within. At a recent national conference of counsellors an eminent psychiatrist drew upon the example of a lady with multiple social and psychological problems, who formed the centrepiece of an advertisement in this journal in the 1960's. What this woman needed according to the advertisement was stelazine. By the 1970's he mused, psychiatry had decided that she needed more psychiatrists. From the literature of counselling he noted with some relief that the 1980's heralded the novel idea that people themselves were the most effective solvers of their own problems. Sceptical as he was about problems being that solvable by anyone, he welcomed the counsellor's view, their readiness to resist the omnipotence given and sometimes taken by priest and doctor, their reluctance to steal their clients problems with the dubious promise of effective solutions. For most professional helpers, helping people to help them-

selves requires as much unlearning as it does learning. This book is a worthy introduction to that perspective, and a helpful foundation for the would-be counsellor be he priest, psychiatrist or whoever.

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**Physical Illness in the Psychiatric Patient.** Edited by ERWIN K. KORANYI, Springfield: Charles C. Thomas. 1982. Pp 222. \$23.50.

The title of this book is misleading. It is not, as one might assume, principally concerned with the frequency and nature of physical illness amongst psychiatric patients. Instead, it contains chapters on a wide range of topics, including psychiatric complications of chronic physical illness, the effects of medical drugs on sexual functioning, and psychiatric complications of oral contraceptives. Indeed, the book is not principally concerned with anything at all, but is rather a collection of reviews on a range of loosely connected topics in the general area of psychosomatic medicine.

Unfortunately, this quibble is not the major criticism of the book. Although the quality of the contributions varies greatly, the standard is generally rather poor. With a few exceptions, the chapters are rambling uncritical chronologies of studies, or dull presentations of theoretical expositions that have appeared elsewhere.

There are curious omissions. For example, chapters which deal with psychiatric disorder in general practice make no mention of the contributions of either Shepherd or Goldberg; and those concerned with the effects of stress fail to acknowledge the work of Brown and his colleagues. Indeed, the emphasis is most definitely on North American and Scandinavian psychiatry, and vast areas of British psychiatric research are simply ignored. A notable exception is a good review by Sims of the risk of mortality amongst psychiatric patients.

It is not clear for whom this book is intended. The reviews do not provide sufficient methodological detail to be of interest to the researcher; and neither do they draw practical implications which would be of use to the clinician. This is unfortunate because most of the topics covered by this book are potentially of considerable interest and importance.

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**Borderline and Other Self Disorders.** By DONALD B. RINSLEY. New York: Jason Aronson. Pp 322. \$27.50.

The evocative but elusive term 'borderline' has become very fashionable. Is this another me-too book