the format is original, the quality of text is variable and in some cases appears to consist of a mediocre synopsis of the article(s) to which it refers. Few of the questions are in the form of a case vignette, a format which is increasingly being used in the MRCPsych examination, and some of the questions seem unimaginative. The topics covered are comprehensive, and the lazy candidate may be tempted to spend his evenings reading this book instead of the original textbook and papers. This would be a mistake.

It is not clear that this book will succeed in preparing the candidate for oral examination, and it is no substitute for serious study. It could, however, provide light relief in those anxious days before the examination.

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Psychiatry and Religion: Overlapping Concerns. Edited by LILLIAN H. ROBINSON. New Orleans: Cambridge University Press. 1986. 178 pp. £9.95.

"Healing and religion have been separated only for a few centuries". Thus begins Robinson in introducing this collection of ten papers by American psychiatrists dealing with the interface of psychiatry and religion.

Recent American surveys have shown that 90% of the population believe in God. Chapter 10 reviews the literature to see the extent to which psychiatric research assesses the role of religion in the lives of psychiatric patients; reference to a religious variable was found in only 2% of research papers. A number of useful suggestions are made for research to evaluate how psychiatric and religious dynamics inter-relate.

Chapter 6 deals with how to evaluate patients' religious ideation. The different stages of religious development are discussed. There is a need to be able to understand and assess these, and to discriminate whether a patient's religious experiences are normal or pathological. For example, hallucinations may be psychotic and guilt may be neurotic, or both may be appropriate expressions of religion.

Chapter 9 reviews the religious and scientific debate on the origin of homosexuality. The "ex-gay movement" is described; this is a US-based religious self-help group aimed at helping members change from homosexual to heterosexual orientation. There is an interesting breakdown of 50 participants interviewed who consider themselves ex-homosexuals; of these, nine appear to have achieved "stable non-conflicting change in orientation".

Other chapters deal with areas such as psychoanalysis and religion, collaboration of therapists and clergy, the concept of the wounded healer, and the impact of advances in neurophysiology in religious and psychiatric thinking. Although the emphasis is on Judean-Christian concepts of religion, all sorts of areas are touched on and drawn from. The book is peppered with lovely quotes and interesting references from religion, philosophy, and art, as well as psychoanalysis and science. In addition to being enjoyable in itself, it leaves the reader with ideas and encouragement for further reading.

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Preventing Mental Illness. By JENNIFER NEWTON. London: Routledge and Kegan Paul. 1988. 275 pp. £25.00.

The prevention of mental illness has been one of the officially stated aims of many mental health programmes, most notably the American Community Mental Health Programme of 1963. British psychiatrists, on the whole, tend to be sceptical of the claims of the practicality of preventive programmes. This wellresearched and balanced book is therefore welcome. Newton makes it clear from the beginning that there are no easy answers, but continually stresses the importance of understanding the aetiology of mental illness and attempting to develop preventive strategies.

There is a brief historical introduction, followed by a chapter reviewing the epidemiological literature. Chapter 3 looks at the problems of developing a suitable model for prevention; it is seen as reducing the incidence of mental illness among those without symptoms and those with symptoms not severe or extensive enough to be considered cases. Depression and schizophrenia are taken as illustrative examples; various aetiological theories are reviewed in the next two chapters with a strong emphasis on the psychosocial models. In Chapter 6 Newton considers the prevention of psychiatric disturbance in childhood and the relationship between events and symptoms in childhood and the development of mental illness in adult life.

Chapter 7 is concerned with approaches to prevention, and ends with a consideration of the best points for intervention in the actiological process. This is followed by a discussion of the role of social policies, particularly concerning employment and unemployment, and the role of women. Chapter 9 is concerned with preventive intervention with small groups and individuals and gives examples of programmes aimed at vulnerable groups. This is followed by a brief review of preventive programmes within the statutory services in the USA and Britain.

The final chapter considers future strategies, and in particular urges psychiatry to give a professional lead and to supply advice, guidance, and support to the preventive efforts of primary care workers and voluntary groups.