

knowledge which is not yet filled by accurate research. The North American experience of the use of firearms by adolescents is not one seen in the United Kingdom. However, in other respects, the risk factors, outlined somewhat repetitiously, show that we need to be concerned about the mental health of children and adolescents who at the end of a road of disturbance may either attempt or complete suicide. This book is a helpful contribution to the field, but reveals once again the need for more research particularly into younger children with suicidal ideas. The role of depressive disorders in children and adolescents is stressed, something which in the past has been given a low priority in thinking about suicidal children.

In general this is an excellent book with a good review of the area, although more careful editing perhaps would have saved some repetition. The best chapters were those by Pfeffer on the manifestation of risk factors and that on management by Davidson. The ending of each chapter with a list of references with comments by chapter authors is a practice to be encouraged. This book is to be recommended to trainees in child and adolescent psychiatry and adult psychiatrists on call for general hospitals. However, since it is Canadian I am not sure whether it will be easily available and whether, in fact, British alternatives such as Keith Hawton's books would be more accessible.

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**Clinical Interviews with Children and Adolescents.** By PHILIP BARKER. London: W. W. Norton. 1990. 153 pp. £14.95.

Many clinicians contemplating an interview with a child or an adolescent become panic-stricken and their usual competent interviewing skills evaporate. This can lead to doctors and others actually neglecting to interview children and consequently missing the diagnosis. I therefore approached this slim volume with some eagerness, hoping to find just the text to introduce trainees to the skills of interviewing children. The idea is an original one and in many ways this book admirably meets the needs of trainees and others by simplifying the process and offering the distillation of the experience of a sympathetic and skilled clinician. There are sections on interviewing young children, older children and adolescents, children with special problems of communication such as those who are mentally handicapped, deaf, autistic or psychotic, and a chapter on assessing the suicidal youngster. The structure of interviews including the proper way to terminate contact is given due attention, and this will be of help to novices who find termination the most difficult part of psychotherapy or counselling sessions.

However, in the end I found the book a disappointment. The author seems never to have got clear in his mind what his aims are. He seems to be considering therapeutic interviews as well as diagnostic ones originally and yet he misses them off the list of reasons for interviewing children! On page 12 he states that interviews "that impose change are used rather rarely", betraying his intention not to consider the interviews that aim for change (i.e. therapy or counselling ones). Yet in the chapter on termination, the author is clear that children become attached to those who are treating them and is advising accordingly. Some of the information is misleading. On page 127 he states: "suicide and suicidal behaviour are common in adolescents". It is true that clinicians commonly see such youngsters, but the behaviour is rare in adolescents, the majority of them never evincing such pathology. Those of us who have training responsibilities will find the chapter on interviewing children in most standard textbooks covers most of what we need and the rest must be supplied by example and carefully supervised experience.

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**Time-limited Intermittent Therapy with Children and Families.** By THOMAS KREILKAMP. New York: Brunner/Mazel. 1989. 243 pp. \$41.00.

Health Maintenance Organisations have developed rapidly in the United States in the last decade. They provide a type of medical care which is intermediate between general practice and routine National Health Service out-patient care, at a relatively low cost compared with the health care provided by individual medical specialists in their private offices or at major medical centres. Family medicine, equivalent to British general practice, is available in some areas, but most parents regularly consult a specialist paediatrician about their children, not only for serious illness but also for developmental checks, minor complaints, vaccinations, and advice about feeding, sleeping etc. for infants. These functions are more normally dealt with by health visitors and clinical medical officers in child health clinics in Britain. Each local centre for a Health Maintenance Organisation usually serves a population of between 10 000 and 60 000 people and therefore can provide specialist care on an out-patient basis by employing paediatricians and other practitioners including psychiatrists, psychologists, nurses and social workers.

Kreilkamp describes the therapy provided in the small-child mental health service of a Health Maintenance Organisation in Cambridge, Massachusetts and contrasts it with the much more time-consuming

approaches of traditional child psychiatric departments and private practice where individual psychoanalytical therapy and extensive family therapy predominate. The model he uses may be helpful for American mental health workers who are increasingly required by resource constraints to see large numbers of referrals of relatively psychologically healthy and motivated families. It offers relatively little to typical child mental health clinics in Britain where such families form a minority of referrals. The author admits that the system does not serve families well who are ambivalent about treatment, would not attend reliably, have multiple problems or are abusive.

In contrast to the economical form of treatment, the author's personal style is rather voluble. The meat of the book is contained in the second half which comes alive with clinical examples. He describes an active short-term therapy for children and families referred by paediatricians which draws on behaviour therapy, family dynamics and child development, and he frequently uses a consultation model with parents. He offers a few interviews in most cases, but does make direct contact with families over the telephone. Treatment for these parents whom he describes frequently 'hot-housing' their children, focuses on changing behaviour, limit setting and containing rather than expressing feelings. The aim is to "help them get on with life rather than to understand themselves perfectly". Some technical tips, particularly for adolescent problems, may be helpful to experienced general practitioners and child mental health professionals, but this type of approach should be, and already is, used only selectively in Britain because of the greater morbidity of specialist referrals.

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**Facing Shame: Families in Recovery.** By MERIE A. FOSSUM and MARILYN J. MASON. London: W. W. Norton. 1989. 192 pp. \$9.95.

Fossum & Mason introduce their book by describing shame, an illusive and until recently largely neglected affect, as a dragon; a mythic monster. This description is valuable because it links the negative and positive powers associated with dragons to the often intangible feelings associated with shame. They say shame and dragons are both creatures with "... claws (which) can lock us in a frozen state and devour our ability to verbalise" (p. ix). Yet shame's invisibility can also provoke intense curiosity and a need to know more about oneself and one's family experience; thus possibilities of transformation or metamorphosis (a dragonish capacity) arise.

To develop their argument, the authors draw extensively from their clinical experience with individuals, couples and families. They exemplify the incapacitating nature of shame, and the processes by which it can open pathways to an individual's innermost self; this hopeful aspect no doubt arises *because* the two aspects of shame are noted, and because the authors have developed some feeling for the struggles their patients must undergo when trying to integrate the two. In addition, the authors explore the realm of family relationships where shame is illustrated as both a powerful inhibitor and a potential facilitator of genuine contact between individuals.

This is by its design a fairly wide-ranging book. However, three of the points which are made seem particularly worthwhile.

The first point relates to the origins of shame in families and the transgenerational nature which this affect possesses. That is, shame tends to be passed down the generations in families, which contributes to its illusiveness. Family systems are then inclined to sustain or 'inflict' the experience of shame in powerful and/or unconscious ways.

The second point is associated with the common tendency towards defensive cycles which maintain shame and inhibit relationships. Fossum & Mason represent these diagrammatically, which illustrates the unhelpful interplay between shame and the need to control oneself. These cycles are linked with addictive processes, and this section of the book would be of particular interest to those working with patients for whom addictions are a real problem.

The third point relates to the need for therapists to encounter their own shame in order to facilitate an openness to shame issues, and to the unconscious communications employed by patients and families in this area of experience.

This book is a worthwhile contribution, and would be of particular value to those readers who want an accessible introduction to the multifaceted aspects of shame.

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**Learning and Education: Psychoanalytic Perspectives.**

Edited by KAY FIELD, BERTRAM J. COHLER and GLORYE WOOL. Madison, USA: International Universities Press. 1990. 1016 pp. \$65.00.

This volume comes from the Chicago Institute for Psychoanalysis and consists of 31 papers organised into four sections, each with an introduction reviewing the literature and linking the themes of the chapters. The quality of the papers varies, and it is a book to be dipped into rather than read at one go.