

subsequent mental development, and the effects of malnutrition which accompanies alcoholism upon mental function.

So far so good, but there are some odd gaps in a compilation which promises in its prestigious introduction that there will be "something for everyone", and includes psychiatrists among that category. For example, in an otherwise highly informative chapter on the economic aspects, there is astonishingly little information about the costs of treatment for alcoholics; perhaps it is inestimable. Psychiatry does not appear as such in the index, though it is clear from the contents list that the last five chapters are about the brain, and even the mind. But the chapter on liver disease has but one brief allusion to neuropsychiatric disturbances, and it is really left to one splendidly clear review chapter by Max Glatt to reveal the present position of the tangled skein of neuropsychiatric therapies for alcohol related disease. He is not very encouraging, but gives an invaluable list of references. What is missing is a critical, cautious and factual statement of the place of all the resources now open to physicians and psychiatrists working together to alleviate an appalling social scourge.

In summary, look here for some, if not most, of the facts, but not to discover effective management ideas derived from them.

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Social Skills Training Manual: Assessment, Programme Design and Management of Training. By JILL WILKINSON and SANDRA CANTER. Chichester: John Wiley. 1982. Pp 148. £14.95, £5.95 (paperback).

As its title suggests, this book sets out to describe ways in which social skills training might be carried out in practice. The authors do not discuss the theoretical rationale underlying their approach, nor do they place this treatment methodology within the broader context of behavioural psychotherapy. This is unfortunate in that the impression they give is that social skills training is a panacea for everyone who has problems in the area of interpersonal relationships. However, the relatively poor results obtained from properly controlled outcome studies indicate that this is not the case. In fact, the most optimistic conclusion that can be drawn from the literature is that social skills training can be an important component of individualized behavioural programmes when carried out with carefully selected cases. By not emphasizing sufficiently the importance of a full behavioural analysis or suggesting how social skills training can be integrated with, for example, cognitive interventions, the authors

have presented a deceptively simple view of the field. Consequently, the unsophisticated reader who attempts to follow this "cook-book" approach with psychiatric patients is likely to become rapidly disillusioned with behavioural methods of intervention.

This book will be of most value to health care workers who already have a sound grasp of behavioural psychotherapy but who are inexperienced at running groups. The authors describe a wide range of exercises, designed to increase cohesiveness and reduce anxiety, which do not often appear in the academic literature. Thus, although one must have reservations about its use as an introduction to the field, this book contains material which will be of interest to clinicians who have the ability to conceptualize interpersonal problems in a behavioural framework, but who occasionally run short of practical ideas when working in the group setting.

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The Claybury Selection Battery Manual. T. M. CAINE, D. J. SMAIL, O. B. A. WIJESINGHE, and D. A. WINTER. Windsor: NFER-Nelson. 1982. £4.65

The Bexley Maudsley Automated Psychological Screening and Bexley Maudsley Category Sorting Manual. W. ACKER, and C. ACKER. Windsor: NFER-Nelson. 1982. No price stated.

The Claybury battery consists of three short questionnaires—measuring direction of interest (extroversion/introversion), treatment expectancy and staff attitudes to treatment. These scales should only be used for research and that with the utmost caution. Little evidence for validity is presented and group scores are based on very small numbers; 11 secretaries, 14 salesmen, for example. Scale construction is only briefly described but appears to be based on unrotated principal component analysis of less than 200 subjects with no cross-validation. These rates are psychometrically weak.

The Bexley tests are notable for being presented on a micro-computer—a PET. However clever this modern presentation is the old fashioned virtues of psychometric practice, well sampled evidence of validity and reliability are lacking. Validity is attested by comparisons of criterion groups but numbers are small and relationships with a variety of other tests are not given. Without adequate psychometric data, this test cannot be recommended other than for exploratory purposes.

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