

Book Reviews

ALTERNATIVE SERVICES

The Alternative Services. Their Role in Mental Health. By R. M. GLASSCOTE *et al.* Washington: American Psychiatric Association. 1975. Pp xvii + 329. Price \$8.00.

This book derives from a project for the assessment of drug prevention and treatment which was founded by President Nixon's White House Special Action Office. The project was carried out in 1973, by which time the excitement over the 'drug explosion' was fading and the President's concern was elsewhere. The authors wisely reorientated the project towards a survey of the development of 'alternative (i.e. free and volunteer organized) services'. Here, too, they almost missed the excitement. With the end of the Vietnam war the conflict over the nature of American society subsided. Their sober and descriptive approach contrasts with the rhetoric and anger of earlier work such as Clark and Jaffe's *Toward a Radical Therapy*. The first half of the book is a praiseworthy attempt to provide an historic and factual background to a chaotic period, and the second half provides a detailed survey of fourteen services.

The decade before the Vietnam withdrawal was one of turmoil among American youth. Two key and much publicized issues were 'drugs' and 'the draft'. On the campuses the confrontation with authority reached its climax in the killings at Kent State University in 1970. The public over-reaction to the drug issue reflected the fact that for many the use of drugs—particularly cannabis and LSD—was part of a self-conscious attempt to create a life-style which rejected existing values.

It is thus not surprising that during this time the emotional and social needs of the 15–25 age group were not entirely met by a psychiatric service still substantially divided between expensive private psychotherapy on the one hand and state mental hospitals on the other.

The volunteer workers were usually about a decade older than their clients and tended to share their social and sartorial values and life-style. Many services were ephemeral and chaotic. The development included 300 suicide prevention groups, 400 free clinics and 100 residential communities for adolescents. It is difficult to generalize across such a range. The services met a practical need, and at the same time many workers had a moral fervour and proselytizing zeal (albeit for 'counter-cultural' values) equal to that of Major Barbara. Indeed it is appropriate

to look upon these disparate groups as the guerilla counterpart of a Salvation Army.

The campuses are quiet now, and the 'alternative services' have changed with them. Those that have survived tend to be run by salaried workers, often professionally trained, and the volunteers have a temporary or part-time commitment while looking forward to professional or executive careers.

Many of the suicide prevention services operate along the lines of the Samaritans, but without a systematic and rational organization. The Counseling Center, Milwaukee, was founded by a psychiatrist and psychologist and is now supported by state money. The volunteer counsellors are trained and supervised (to a limited extent) by psychologists and social workers. Their activity has much in common with that of social workers and probation officers in this country.

The free medical centres provide a 'walk-in' service and are usually staffed by medical students and young doctors. In American cities they contribute to the care of groups who are ineligible for, or will not use, conventional hospital facilities. Their clientele does not differ markedly from the sort of people I have cared for at the Maudsley Emergency Clinic and the Casualty Department at St Thomas' Hospital.

Other organizations are not so easily paralleled. Focus, a Las Vegas group dealing predominantly with young drug users, relies on techniques developed at Synanon and DayTop. The 'focus of the programme is the 'game' in which the client is 'helped' to 'internalize' feelings of responsibility by group denunciation. One session is described as follows: 'The game was composed of eleven teenage girls, one teenage boy and an adult leader. Many of the youngsters appeared to be quite young and immature. The leader was dressed in a short one-piece leather outfit. She was loud, assaultive, and abusive. She had most of her group terrified. She would pick on a girl and try to break her down into tears . . . all the other girls were coerced to be as abusive as possible . . . to watch the leader, inches away from a twelve-year-old's face, screaming obscenities. . . . Another important perspective on the perception of this game was the nature of the clients. These were not hardcore, adult, character-disorder addicts who had to be blasted out of their behaviour pattern. These were young, scared, impressionable kids.'

In the summer of 1967 Allen Ginsberg, Ken Kesey, Janis Joplin and one hundred thousand young drug users converged on the Haight-Ashbury area of San Francisco. That 'summer of love' gave birth to a slum of destitute teenage drug addicts and criminals for whose needs the city would make no provision. A young physician, Dr David Smith, opened a free clinic, which dealt with 250 clients in its first twenty-four hours. The clinic served as detoxification centre, a medical out-patients and at times a casualty clearing station. A full account of its work is to be found in Smith and Luce's *Love needs Care*.

This is a fascinating and important book. Although factual and descriptive, it does not attempt any scientific evaluation of the programmes studied. This is not a criticism, in view of the methodological complexity of such a task. There is, however, no excuse for the absence of reference lists and an index.

The services described are an American response to an American situation. Historically they owe more to a national tradition of missionary zeal and self-help than to the fashionable events the authors document. Inevitably and unfortunately, the commitment is greater to the young and to drug takers than to the elderly or the chronically sick.

The personal qualities of the volunteers often seems excellent, but the emotionally disturbed are also attracted. Many projects involve the use of psychotherapeutic techniques by the naive and untrained. Those beneficent twins, warmth and empathy, were usually conspicuous, but the guards against inadvertent harm and even sadistic and sexual exploitation were often inadequate. Tom Lehter once said that the difference between genuine amateur folk singers and professionals was that the amateurs could not sing. The same does not necessarily apply to therapists. The 'amateur' has an emotional spontaneity that the 'professional' needs to preserve, and the 'professional' a restraint the 'amateur' needs to adopt.

PETER NOBLE

HENRI EY

Des Idées de Jackson à un Modèle Organodynamique en Psychiatrie. By HENRI EY. Toulouse: Edouard Privat. 1975. Pp 308. Price Fr 51.40.

Thus far historians of British psychiatry have been unable to explain why, despite his central importance to conceptual and clinical neurology, and his definitive views on insanity, J. Hughlings Jackson (1835-1911) has not exerted any major influence on psychiatric thinking in this country.

And this becomes even more puzzling when one is reminded that on the continent Jackson's ideas have

been very influential in at least two successive periods. Firstly, by the turn of the century, on Adolf Meyer (who studied under Jackson in London in 1891 before he went to America); on Janet (who also tried to develop Moreau de Tour's notion of 'psychical dissolution') and on Freud (as Professor Stengel has shown). The last shaped his ideas on aphasia and his more general view on the nature of psychological dissolution and regression on the theories of the Yorkshire neurologist. Secondly, during the 1930s, when Jackson's ideas found themselves riding the academic horse once again.

This time it happened under the sponsorship of a young French psychiatrist, Henry Ey, who (together with Julian Rouart) published in *L'Encéphale*, between May and August 1936, a series of articles (two years later made into a book) on the suitability of Jackson's ideas for developing a 'dynamic' neuro-psychiatry. In this work they introduced Jackson's thought to French audiences and highlighted the importance of his then recently published *Selected Writings* (edited by J. Taylor). What most impressed the two French psychiatrists at the time was Jackson's hierarchical model of a Conceptual Nervous System and the four levels of dissolution (corresponding to four degrees of insanity) that could beset its functioning. This he had developed in his classical paper on the 'Factors of Insanities', in which he defined dissolutions as 'reversals of evolution', but (realizing the limitations of the model) also warned 'it would be as absurd to attempt to arrange patients in an asylum on the principle of dissolution as it would be to arrange plants in a kitchen garden on the "natural system" of botanists'.

In their 1938 monograph, Ey and Rouart limited themselves to putting flesh on to this basic skeleton. They did this by psychologizing Jackson's essentially neurological ideas and by postulating a 'principle of dissolution' of the 'psychical activities' which, according to the depth of the damage, could crystallize into a hierarchy of pathological 'structural levels'.

These strata (to use a geological analogy) were considered, from top to bottom, to be: the neurotic, paranoid oneiroid, dysaesthetic, manic-depressive, confused-stuporous, schizophrenic and demential. The French authors felt that all these states were due to a 'uniform' dissolution of the nervous system and were therefore to be differentiated from the 'localized' dissolutions which gave rise to ordinary neurological conditions. In drawing this distinction they also followed Jackson (as indeed the latter had followed W. Cullen who had written along similar lines one hundred years before).

Furthermore, in the 1938 book one can also find although in a very inchoate state, what later on