

Book reviews

Where Inner and Outer Worlds Meet: Psychological Research in the Tradition of George W. Brown. Edited by T. Harris. (Pp. 327; £60.00.) Routledge: London, 2000.

George Brown is 70 years old. For 40 years he has used social science methods to undertake research in the world of psychiatry, and has progressively explored and expanded the known territory. This book is a Festschrift, edited by his longest standing colleague, Tirril Harris. Festschriften are not easy to get right. They can recapitulate past work and, if well conceived, set it in context, or they can report new research that relates to the honoured figure's earlier themes. The approach of this book is definitely the former. The contributors are previous or recent collaborators or friends of George Brown, ranging down the years from Jim Birley in the 1960s, to Ellen Frank and colleagues in the 1990s, including on the way many others. The most notable of those missing is John Wing. For many years their equally excellent research paths have gone in different directions, but the work on schizophrenia he and George Brown did together as young men in the late 1950s was noteworthy. The volume focuses much more on depression, with schizophrenia concentrated in the chapter by Julian Leff on expressed emotion.

This is a very personal book. The emphasis is on methodology and theory, and putting the work into context, David Mechanic, from the perspective of a distinguished US sociologist, paints the climate in which the work started, and also describes in passing what the Maudsley was like in the early 1960s. Michael Rutter contributes a magisterial discussion of the life events work with a section that should be read by all life event researchers, entitled 'Some key queries on the effects of life events'.

The best chapter, in my view, is the introductory one, of more than 50 pages, by Tirril Harris herself. Deploying an amalgam of her perceptive skills as psychoanalyst, as researcher and as colleague in the work, she describes in detail its evolution, its methods and its themes.

Characteristically, she underplays her own very important contributions to the studies. She conveys a vivid sense of what it is like to work with George Brown, with some redolent phrases, always attributed in part to others. The work has always had a theoretical basis, and the theory has evolved with the findings: a 'grounded theory' with theory induced from the data. He has shown an 'insistence on keeping close to the data', with re-analysis of the old data to test ideas, refinement of the ideas and retesting, in a way that may be a little circular, but is also highly productive.

George Brown's work does show a clear evolution. Starting with social influences on schizophrenia in the 1950s and 1960s, it moved to life events, first in schizophrenia, then in depression. There are telling remarks in the book regarding problems at the start in getting the life events work accepted by others, although it is now classic. The studies then moved to background vulnerability factors, to the role of early factors such as loss in shaping psychological processes such as self-esteem, to retrospective life history research, longitudinal studies, cross-cultural issues. Theory development has been strong. Equally strong has been interviewing methodology, with very long interviews, and detailed, extremely well worked out rating methods. The Life Events and Difficulties Schedule (LEDS) is the best known of these but there have been many others. Tirril Harris describes the continual refinement in interview methods, with team discussion, which may lead to development and validation of new ratings during a study. Brown makes the point himself that good methodology is expensive. Much time in interviewing and rating is devoted to each subject in one of these studies. Training offered to others in the LEDS made the Bedford College unit a Mecca for young visiting researchers from Britain and many other countries.

George Brown has sat happily between sociology and psychiatry for most of his career, enjoying the exposed position. Seen for much of the time by psychiatrists as too sociological, by

sociologists as too methodological and in the camp of medical psychiatrists, he has finished up as a pillar in the academic Establishment of both, as Fellow of the British Academy and of the still young Academy of Medical Sciences. He is intellectual, charming, sometimes argumentative, three times married and a memorable character. It is a pity that the book does not have his photograph, to preserve further the man. In a concluding chapter he gives personal commentaries on some of the earlier chapters, replying to critiques and issuing quite a few challenges. There is plenty of life in the old challenger yet. The chapter is entitled 'Some thoughts on the future of social psychiatry'. That, among other things, is what George Brown is: one of the most influential of British social psychiatrists. Long may he continue to stimulate and challenge.

EUGENE PAYKEL

Outside the Walls of the Asylum: The History of Care in the Community 1750–2000. Edited by P. Bartlett and D. Wright. (Pp. 337; £16.99.) Athlone Press: London. 1999.

I wouldn't argue with the doyen of the history of psychiatry, Professor Roy Porter, when he writes of this book on the back cover: 'If you are looking for new directions in the history of British psychiatry, this is where they are to be found!'

The editors, lecturers in law and the history of medicine at Nottingham University, have impressively marshalled 19 contributors for the 12 chapters. They are all, or have been, with the notable exception of the much mourned, late Professor of Child Psychiatry William Parry-Jones, historians and sociologists at British Universities.

The book is the first, to my knowledge, which provides rich research on many areas of care in the community over a lengthy time period in Britain and Ireland. I suppose I would have preferred its subtitle to read 'A History of Care in the Community 1750–2000' for, however excellent the book, it is not comprehensive.

Each author provides material in an area of expertise. The eighteenth century is represented by chapters on Scottish and learning disability

care. The nineteenth century is represented by chapters on domestic care of the mentally ill in the early part of the century in England; family care in mid-century North Wales; boarding out in Scotland in the second part of the century; legal aspects of care of the violent patient in Devon, England during the second part of the century; domestic treatment of puerperal psychosis in England; and management of the criminally mentally ill in Ireland. In the twentieth century, learning disabilities are examined in the 1913–1945 era; the post-war era is well covered by three chapters on mental health services in Britain and Ireland.

The book seeks to address four main themes as it deals with the above variety of topics. First, that community care persisted even after the asylum era began, with the 1845 Lunacy Acts making the establishment of County Asylums mandatory. Sturdy and Parry-Jones in 'Boarding-out insane patients; the significance of the Scottish System 1857–1913' show that the system of boarding patients in households to whom they were not related, persisted into the twentieth century. Hirst and Michael in 'Family, community and the lunatic in mid-nineteenth century North Wales' show that patients were 'farmed out' for money to Welsh farmers. This did not occur so much in England and not at all in Ireland.

The second theme is of 'family power'; Walsh in 'Lunatic and criminal alliances in nineteenth-century Ireland', showed how admissions to Ballinasloe Asylum were based on the desire to protect the family's property rights as well as care of the patient. Houston's 'Not simple boarding: care of the mentally incapacitated in Scotland during the long eighteenth century' shows how the family negotiated with the authorities over conditions of care. Marland's 'At home with puerperal mania: the domestic treatment of the insanity of childbirth in the nineteenth century', emphasizes how the family influenced the type of treatment the patient received. Melling, Forsythe and Adair showed how family care was not necessarily more humane than asylum care in 'Assessments of crime, violence and welfare in admissions to the Devon Asylum 1845–1914'.

The third theme is that the boundaries between asylum and community care were blurred. Suzuki in 'Enclosing and disclosing lunatics

within the family walls ... in early nineteenth century England' identifies cases where, as in '*Jane Eyre*', patients were locked away in a darkened room. Melling *et al.* are of the view that it was the difficulty supervising care in the community which led the Commissioners in Lunacy to encourage the building of the asylums. The book argues that there is a history of surveillance of care in the community long before the increasingly controlling programmes of care seen in the late 1990s.

The fourth issue is that of community care and the health care professions. The editors state that the asylum movement has rightly been seen as the midwife to the new psychiatric profession in the nineteenth century. But even then, psychiatrists like John Bucknill and Alexander Morison believed that institutional and community care should co-exist. The editors argue that families used to be the main protagonists in the provision of care. Now professional interests have taken over from the family, at least in public policy and perception.

I recommend this book. A further edition would benefit from chapters on mental health provision in the inter-war years and not just chapters on Scottish and learning disability care in the eighteenth century. The editors state: "'Care in the Community'" holds the dubious distinction of being universally supported in principle, and universally condemned in practice. And there is much to condemn ... what's more, since Community Care has never been properly defined, there is no standard measurement to evaluate its success and to remedy its shortcomings. This book hopes to contribute to a more complex understanding of Community Care' ... It does.

DOMINIC BEER

'*They're in the Trade ... of Lunacy. They "cannot interfere" – They Say*': *The Scottish Lunacy Commissioners and Lunacy Reform in Nineteenth-Century Scotland*. By J. Andrews. (Pp. 108; £8.00.) Wellcome Institute for the History of Medicine Occasional Publication, No. 8: London. 1999. (Orders to Mrs Tracy Tillotson, The Library, The Wellcome Institute for the History of Medicine, 183, Euston Road, London NW1 2BE.)

This is a relatively short work when compared with Jonathan Andrews' contribution to the History of the Bethlem Hospital. In fact, he himself writes 'My research on the Scottish Lunacy Board represents only a rather cursory, interim survey', using the Board's Annual Reports and Minutes rather than records of other authorities who dealt with the insane. It is, nevertheless stamped with his customary thoroughness. A total of 352 footnotes accompany 66 pages of text and he has consulted many primary and secondary sources.

What about the enigmatic and lengthy title? This comes from a poem written by a patient, Margaret G., from the Glasgow Gartnavel Asylum who bitterly bewailed the ineffectiveness of the Lunacy Board:

'What are Commissioners? – no good –
They're in the Trade – it's understood –
And like the Board of Lunacy
They 'cannot interfere' – they say.
(What may their duty be I pray?)
Appeal to Statesmen? – They reply
This vile Slave Trade to ratify
Endorse this wholesale villainy'

It is fascinating to note, however, that *The Lancet* of 1857 claimed that the Commissioners had been 'endued with almost despotic attributes', and that their 'star chamber' or inquisition-style power not only appeared 'rather strange to free born Englishmen', but also 'at variance with the national feelings of Presbyterian Scotland'.

Andrews argues that the Commissioners actually had little power: 'like their English counterparts, the Lunacy Commissioners were primarily watchdogs of the law with very little teeth for enforcement at their disposal'. They refined and supervised the certification process. They could remove patients to an asylum if ill-treatment was proved. But they had little power once patients were in the asylum. Even their recommendations regarding the buildings went unheeded – their campaign for a new bathroom and dining halls at Glasgow Royal took nearly 20 years to come to fruition.

Commissioners such as Sir Thomas Clouston, speaking in America in 1894, claimed to have effected a 'sea change in public and official feeling' to their activities and to the insane. Andrews warns against any such 'self-justifying'

account that used dubious statistics such as the high death rates in poor houses as an argument for the asylums. Being a Commissioner was part of the political patronage system. That is not to say that the members of the Board did not work hard. One Deputy Commissioner visited 1000 patients per year. The legal members of the Board, unlike their English counterparts, did not visit the patients. The links between public and private asylums were not as great as in England. Andrews states that there was much less 'trade in lunacy' than in England. The Commissioners favoured Boarding Out patients with non-related families and most Commissioners visited the ancient psychiatric village community of Gheel in Belgium as a source of inspiration and guidance for non-asylum care. The Commissioner-Psychiatrist W. A. F. Brown however, was anti-private care and Andrews argues that the more medically dominated Scottish Board was sympathetic to the Medical Superintendents of the asylums. In England, they put up resistance to the Commissioners. In Scotland, rather than being at odds with them, Andrews quoting the historians Scull and Mellett writes: the Commissioners connived to bolster 'a hegemony for doctors in public asylums'.

DOMINIC BEER

The Mind Within the Net: Models of Learning, Thinking and Acting. By M. Spitzer. (Pp. 359.) MIT Press: Cambridge, Mass. 1999.

Mathematics has the image of being the most abstract aspect of natural philosophy – the discipline least likely to be affected by the vagaries of fashion. In fact, fashions in mathematical theory change as fast as hem-lines. It seemed only a moment ago that we were being assured that chaos was the new beige, and that the flapping of a butterfly's wings in Hy-Brazil had more of an effect on the English weather

than human-induced global warming. Even in a discipline that the layman thinks of as pure and number-based, it seems that inventing a catchy phrase is of crucial importance. If neural networks had been called something like convergent networked computer systems it is, perhaps, less likely that Spitzer would have written this particular book. As the brain has a highly complex modulatory system, rather than simply consisting of an enormous networks of neurons, and a computer 'neurons' transmit pure numbers, while a real neuron operates by adding the voltages that incoming signals produce, and, when the combined strength of these reaches a certain threshold, sending out a pulse of its own, which may bear no apparent relationship to the frequencies of the incoming pulses, I am not entirely convinced of the validity of the fundamental argument presented here.

In spite of this, however, I think that the book is to be recommended. Computer networks, vector transformations and the algebra of matrices are not, in themselves, sufficient to simulate the human brain, but they do provide an interesting model. The model may not be entirely biologically plausible, but it is intellectually stimulating and Spitzer is an intellectually stimulating writer. I am still a bit dubious about the relevance of the first two parts of the book – the basic principles of neural networks, although they are clearly explained, in non-mathematical terms. I found myself to be much more interested in the third part – applications, which discusses the disordered mind. This section moves from semantic networks to the first stages of a holistic integration of neurobiology, neurocomputation and psychotherapy, rounding off with some kindly words on child care and development. Any reader with an interest in new developments in the study of the brain will find something to chew on here.

MARTIN GUHA