

Community Care: evaluation of the provision of mental health services. Edited by Charles Crosby and Margaret M. Barry. Avebury: Aldershot. 1995. Pp 266, £39.95.

This book would make an excellent text for those wishing to argue the case of qualitative research into mental health services. However, this is not the book's intention for it is largely concerned with a quantitative analysis of the outcome of long-stay patients who are in the process of being moved from the North Wales Hospital in Denbigh to locally based residential services. The editors, and they are also the main contributors, are the Director and former Deputy Director of the Health Services Research Unit in the University College of North Wales in Bangor. Apart from David Healy, Senior Lecturer in Psychological Medicine, there were no service providers involved in writing this book. This is unfortunately not unusual; writing about community care seems to attract large numbers of interested outsiders but few of the deliverers.

In the foreword it is suggested that the research (supported by Clwyd and Gwynedd Health Authorities) has provided "illuminating feedback to front-line workers and managers, and valuable information also to a wider audience of academic, professional and government bodies". As someone who probably qualifies for inclusion in all these areas I found most of this book illuminating but useless. It illuminates by showing how things should not be done in service research. The research was carried out as part of a "systematic evaluation of the settlement of hospital residents" as part of the All Wales Strategy, a strategy with which I had been previously unfamiliar. This systematic evaluation consisted of recording the state of patients at three intervals approximately three months apart using seven standard instruments. This is really a simple audit exercise but it has been dressed-up as a major item of research. The investigators are like earnest sixth formers doing a scientific project in an area about which they know little at the outset but are keen to impress their teachers with the depth of their knowledge. This shows itself in complex descriptions of simple tasks. Thus the simple audit becomes a "prospective, longitudinal, quasi-experimental design with multiple pre-and-post-resettlement assessments" and the fact that some patients are discharged in stages is described

as an "interrupted time series with replications". Like all good researchers the investigators look at the reliability of their measures and, to be fair, they use appropriate statistical measures and record this extremely well. Some of this information gives rise to some concern, when a correlation of only 0.07 is found for the behavioural item 'absent without permission' which seems to be a remarkably objective piece of information, one begins to have doubts of the value of the data.

However, valuable information might be obtained if the research involved a large number of patients. Unfortunately the concept of sample size does not appear to have concerned the researchers to any degree. Only 65 patients were involved in the sample and this is reduced to 41 for some of the measurements "because of attrition". Because some patients remained in hospital and others moved to different types of community care we finish up with descriptive and qualitative data that continues to be analysed as though it was part of some vast database.

If the investigators were using completely new methodology there might be something of interest here but they are not; they are using most of the measures used in the much larger TAPS study in North East Thames and largely replicating the findings of that study much less satisfactorily.

After wading through this puddle of data (perhaps best described as an overflow from TAPS) it is a pleasure to get to the high ground beyond. The last two chapters are both concerned with the views of the recipients of our services, whom are no longer called patients but given the altogether more offensive name of users. David Healy describes the impact of patients receiving copies of letters written to their GPs over a period of three years. The chapter gives no data about important issues such as treatment compliance that might follow from such an open policy but this novel initiative deserves to be followed closely.

The last chapter by Brian Williams is the best of them all. It reproduces some telling verbatim reports from patients about aspects of their consultation (some of which appear to have been affected by direct feedback subsequently as they appear to have received copies of the letter concerned). Excellent reasons are given why patients express so much satisfaction with services that are clearly unsatisfactory and good examples are given of

lack of respect, over ready dismissal of patients' own views about their problems, and the powerlessness and fear that many patients feel when in contact with mental health professionals. Williams finishes his chapter by suggesting that there are many latent issues that are not currently being addressed by evaluators of community services, and that the "first stage in such a process is to give users a voice and not just a questionnaire". It is a pity his own voice did not carry as far as the Health Services Research Unit in Bangor.

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Psychosocial Processes in Health: a Reader.

Edited by Andrew Steptoe & Jane Wardle. 1994. Pp 525. Cambridge: Cambridge University Press. Hb (ISBN 0521416108) £60.00. Pb (ISBN 0521426189) £24.95

There has been increasing emphasis on the relationship between psychosocial processes and health in recent years and many mental health professionals have been asked to participate in undergraduate medical (and other) courses to elucidate these. While the topic is fascinating, a common difficulty encountered by teachers and students is how to identify papers in the field published in a diverse range of journals. The editors of this text have identified and responded admirably to this problem. This book comprises an edited volume of 31 of the most important papers published on the links between social environment, emotion, behaviour and illness.

To orientate the reader, the authors have divided the book into six sections covering topics ranging from life stress, social support and health; aspects of personality, behaviour and health; to behavioural interventions in medicine. Each theme is set in its clinical or scientific context by an up-to-date review of the literature followed by a set of papers (usually five) covering aspects of the topic. The publications that have been reprinted span the last thirty years and many are classics. For mental health professionals, the sections on psychosocial processes in health, on personality and on behavioural medicine are the most relevant. However, papers in the section on coping with illness include the work

of Steven Greer on psychological aspects of coping with breast cancer, and each section has at least one paper worthy of attention.

Are there any obvious omissions? It is easy to identify other themes that could have been explored. Topics that mental health professionals and particularly psychiatrists may have wished to see included such as the doctor-patient relationship or social inequalities in health would have made lively reading. However, the editors are honest enough to identify other topics that might benefit from exploration, and it is hard to argue that any of the themes chosen should have been dropped to accommodate another subject.

This text comes into its own as a resource book for course organisers and teachers and as a recommended text for students studying medicine, psychology or the health sciences. As access to the relevant research and review papers was previously limited, I anticipate that teachers and students will happily pay the cost of the paperback text and libraries should have one or two hardback copies in the reference section. I found this a valuable text for my own academic work and enjoyed browsing through many of the other pages simply out of interest. It is a valuable addition to a limited field and the editors are to be congratulated for filling this gap.

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Alcohol Policy and the Public Good. Griffith Edwards *et al.* Oxford Medical Publications, Oxford University Press. 1995. Pp 226. £14.95.

Professor Griffith Edwards was given the opportunity of leading an international team of social scientists to revisit the terrain covered in an influential earlier work *Alcohol Control Policies in a Public Health Perspective* (Bruun *et al.*, 1975). Various bodies generously supported the endeavour including the Addiction Research Foundation (Toronto), the Finnish Foundation of Alcohol Studies, and the World Health Organization regional office in Europe. The result is an invaluable compendium of evidence that will inform policy makers about effective strategies in preventing alcohol-related harm throughout the world. Given the evidence contained in this