Book reviews
EDITED BY SIDNEY CROWN and ALAN LEE

Understanding and Supporting Children with Emotional and Behavioural Difficulties

This book considers, from a number of different professional perspectives, children’s problems presenting in school.

Teachers refer to ‘emotional and behavioural difficulties’ (EBDs) when describing a group of children who pose a challenge in the classroom. Child and adolescent psychiatrists, meanwhile, refer to ‘behavioural and emotional disorders with onset usually occurring in childhood and adolescence’. These latter are psychiatric diagnoses classified by the World Health Organization in ICD–10. It is readily apparent that these concepts do not describe the same children. The terms are not synonymous, and although there is likely to be overlap between the two categories, the implications of the two expressions are rather different. The majority of children identified as having EBDs will be unknown to child and adolescent mental health services (CAMHS), while a number of those who are being treated by CAMHS with internalising disorders would not be identified by the education system. The average perfectionist with anorexia nervosa, for example, might be the last pupil identified as having an EBD, at least in the early stages. In the educational concept, the emphasis is on management, particularly the need to avoid reinforcement of maladaptive behaviour. It is not surprising that teachers are as concerned about the impact of disruptive behaviour on the class as on the individual’s learning. Child mental health services emphasise the importance of information-gathering and reaching a diagnosis before embarking on management, which tends to have more of an individual or family focus.

The book is arranged in three sections, covering the understanding, assessment and support of children with such difficulties. The first, substantially written by the editor, reviews the major biological and psychosocial theories and the changing epidemiology of emotional and behavioural difficulties. The second covers psychological and psychiatric assessment. The third discusses a range of therapeutic approaches, from cognitive–behavioural therapy through psychoanalytic psychotherapy to parenting therapies. The contributions by Diane Montgomery on classroom management are particularly strong and include a chapter on the special needs of ‘able misfits’, who are often neglected in this area.

Although the individual chapters are interesting and offer good advice, there is a lack of a unifying editorial attempt to address the important issues in the relationship between the disciplines in the management of these children. The chapters written by child psychiatrists, covering assessment and cultural issues, for example, could have been prepared for a book on an entirely different topic. It would have been interesting to see more discussion of the differences in the concepts of children’s problems and of the deficiencies at the interface between education and CAMHS. These include:

(a) the almost total neglect of child mental health issues in teacher training, which leaves teachers confused in distinguishing bad behaviour from illness or disability;
(b) the shortage of time devoted to teaching about schools in the training of child psychiatrists, given that the average child spends 16 000 hours in school between the ages of 5 and 16 years;
(c) the tiny amount of educational psychology provision available to most schools;
(d) the financial implications of identifying children as having special educational needs, which deter schools from initiating full neuropsychological assessments; and
(e) a lack of clarity in many districts about pathways of referral between school, community paediatrics, educational psychology and CAMHS.

Nevertheless, this is a useful book for those working both in child mental health services and in education. It is as interesting for what it does not address as for what it does.

Simon G. Gowers
Professor of Adolescent Psychiatry
University of Liverpool, Pine Lodge
Academic Centre, 79 Liverpool Road, Chester
CH2 1AW

Neurobiology and Clinical Views on Aggression and Impulsivity

The technique of judging a book by its cover gets a bad press, but in this case, it could save you a lot of time. Consider the blurb. It has only four sentences, and the first welcomes its own publication “at a time when violent crime is on the increase…”. Two sentences later, it concludes by reminding those with short-term memory problems that its publication is “timely… in view of the increases in crime in recent years”. If this were a school essay, it would be covered in red ink. The whole book is in need of assertive editing.

This is unfortunate, as some chapters are good and the blurb is correct in its assertion (sentence number 2) that it is “written by experts in their field”.

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However, most of the authors have written more elegantly elsewhere, and the discursive style calls to mind conference proceedings (or, at times, unfocused conversations in the conference bar). Several chapters suffer from a lack of self-criticism. The discussion of comorbidity is one of the least enlightening I have read (in a field where there is plenty of competition for that title). Add to these criticisms the fact that the book lacks a unifying theme, and you have a work that can safely be left on the shelf.

Tony Maden  Professor of Forensic Psychiatry.
Imperial College, The Academic Centre, Uxbridge Road, Southall, Middlesex UB1 3EU

Gender and Mental Health

This very readable book is timely. Contrary to expectations, it is not just another book about feminism and mental health. Instead, Pauline Prior, who has clearly learned about life on the ground beneath the ivory towers of academic social policy units working as a social worker in both London and Belfast, seeks to shed new light on the problems that both men and women have in accessing mental health care. She explores the complex issue of gender and mental health in the context of our everyday world of changing mental health and social policy. This is both a strength and weakness of the work.

Prior draws on recent epidemiological studies to argue that gender patterns in psychiatric morbidity are changing as problems associated with men (substance dependence and personality disorders) are more commonly being regarded as the business of mental health care. Men are also increasingly likely to be admitted to hospital. She asks whether this is due to “increased state surveillance of this group as a perceived threat to public order” or to a real increase in mental distress among men. More research is clearly needed, but a picture emerges of care in the community in which women are more likely to seek early help and get treatment from their general practitioner while men, who find it difficult to express emotional distress, present later and are more likely to be referred. Subsequently, they may develop into those difficult, disturbed patients, well known to the services, who do not comply with treatment, pose a risk and are looked after in the community by elderly, often female, carers. Women, meanwhile, may find it difficult to access other parts of the system, such as services provided for people with substance misuse.

One of the best sections of the book shows how research on inequalities in health reveals that common generalisations about gender and vulnerability are not universally valid when ethnic and socio-economic circumstances are considered. Complex interactions exist between gender, ethnicity and access to services. For those living in a multicultural society the expression and recoginition of distress are more difficult, as the discourses of the dominant culture (in which the psychiatric system is usually placed) may be different from those of the individual’s ethnic group.

Those readers seeking generalisations will not, however, be disappointed. Psychiatrists are not mentioned among the potential readership on the back cover and this is perhaps not surprising although disappointing. It is a pity that statements such as “the debilitating side effects of most invasive medical techniques” creep into the text every now and then. This is particularly regrettable as the author chickens out of a consideration of how non-invasive techniques can be widely provided and indeed of discussion of the evidence of effectiveness of treatment for personality disorder or of whom will provide this treatment. American textbooks of psychiatry are quoted more frequently than their British counterparts, which get a brief mention in order to criticise the inherent sexism apparent in their clinical case examples.

Nevertheless, it is churlish to dwell on these points, which are minor. This is an ambitious book and would provide a good grounding in gender issues and mental health policy for psychiatrists who want to look beyond the perspective of their own profession and understand the broader policy environment. Herein, however, lies the book’s main weakness. The sections on policy, law and crime are too superficial and do not knit well into the main text. I can sympathise with the author’s dilemma in trying to discuss gender in context. However, she does not begin to discuss gender issues at all until page 43!

Overall, this book deals with issues that psychiatrists in training ought to know about and are not tackled well in standard texts. In her conclusion, Prior comments that in the 19th century, when the criterion of potential dangerousness was used to justify admission to asylums, men found themselves inside the mental health system, whereas in the 20th century, when the focus was on ‘illness’, men increasingly found themselves outside the system. Now, once again, we are being asked to focus on potential risk and admission rates for men are once more rising. Another case of back to the future?

Linda Gask  Reader in Community Psychiatry.
University of Manchester, Department of Community Psychiatry, Guild Academic Centre, Royal Preston Hospital, Sharoe Green Lane, Preston PR2 9HT