



review of the month

Alternatives Beyond Psychiatry

Editors: Peter Stastny and Peter Lehmann

Publisher: Peter Lehmann Publishing

Year: 2007

Price: £16.99

No of pages: 432

ISBN: 9780954542818

This book is mainly composed of stories. Before one reads a word, the faces of most of the 61 story tellers greet the reader from the cover. They promise material that is steeped in personal and collective experiences, insights and opinions. The book is edited by Peter Lehmann (who is also the publisher) and Peter Stastny, who have done a remarkable job in translating and weaving these stories into some kind of coherent whole.

The overall focus is on the provision of care and support to people outside mainstream psychiatric services, or more particularly outside of bio-medical and coercive treatment paradigms. A vast terrain is covered: from personal experience of and critique of psychiatric treatment, accounts of what has helped and hindered in personal recovery, stories of setting up self-help groups and organisations, providing safe places and houses, non-pharmaceutical approaches to care, and potentially coercive and discriminatory legislation and practice.

It is difficult to sum this book up easily. In parts it reads like a *Lonely Planet* guide with specific details developing alternative services (what worked and what didn't, and how funding was secured – or not in some cases – and who to contact for more infor-

mation. Other sections read more like travel brochures providing a tantalising glimpse of a destination, but little information on how to get there on one's own. Still other parts read like personal travel diaries, with stories that will resonate with some readers, and give hope to and encourage others. As one might, expect some contributors are more engaging story tellers than others, some are more ready to cite evidence in academic style or argue rhetorically. The reader is, therefore, challenged to traverse these different styles but the journey is worth it. It is a dense book with very little white space in the 431 pages and I did not find it easy to read from cover to cover. Like a *Lonely Planet* guide I found myself dipping into sections, skim-reading or reading parts according to what drew me in.

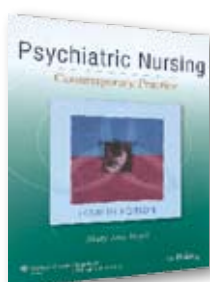
The book is divided, in a fairly loose way, into sections under which stories and accounts (usually around 10 pages long) on each theme are placed. The first section 'Why psychiatry hurts more than it helps' is the shortest but the premise that psychiatric approaches to distress and particularly psychiatric drugs and forced treatment are harmful is a unifying theme that is revisited in different ways throughout the book. Anyone who has a rose tinted view of the history of psychiatry or who complacently characterises the psychiatric enterprise as benignly paternalistic will be jolted by Dorothy S Buck-Zerchin's testimony of forced sterilisation and treatment in Germany, titled 'Seventy years of coercion in psychiatric institutions'. Dorothy provides chilling accounts of five hospitalisations in Germany between 1936 and 1959 and, more positively, writes about 48 years of recovery and an outline of what has been helpful (and not) to her



and others. This translation is of an address at the European Network of (ex-)Users and Survivors of Psychiatry (ENUSP) conference in Dresden in 2007 and is available on-line at www.enusp.org/dresden.htm.

'Actual Alternatives' is divided into three subsections. The first deals with individual strategies and starts with brief accounts from a range of contributors about what has helped them to deal with madness. These are not idealised or romantic accounts of distress or recovery and most readers will find some strategy that might usefully inform their own lives or those of others. Other content areas address 'natural healing' for depression, exercise and advance directives.

The second sub-section provides accounts of setting up and participating in formalised self-help groups such as the hearing voices network and the Icarus project. Those who might be involved in various self-help endeavours will find this section particularly interesting and useful. Health professionals may be drawn more to the third sub-section, 'Models of Professional Support'. This section commences with an overview of the Soteria model developed by Loren Mosher and others in the 1970s in which people with



Psychiatric Nursing Contemporary Practice

Author: Mary Ann Boyd

Publisher: Lippincott Williams and Wilkins

Year: 2007

Edition: Fourth

Price: £40

No of Pages: 976

ISBN: 9780781791694

This book has been designed for student nurses in the United States by scholars based there. Its main aim is to prepare students for National Council of State Board of Nursing (NCSBN) exams.

An overview of how to use the book and its supplementary learning materials, such as case vignettes, nursing diagnosis concept maps and the supporting CD-ROM is initially presented. Early chapters outline the nature of mental health and illness; underlying concepts and principles of contemporary psychiatric nursing practice and mental health promotion.

Following chapters focus on medical diagnoses such as schizophrenia, anxiety, personality; somatoform, eating, substance and sleep disorders and how to deal with them. Topics such as child and adolescence, older adults and care of other populations are addressed before care challenges in psychiatric nursing are examined.

This material is supported by a glossary and appendices that contain assessments ranging from the DSM-IV-TR Classification: Axis 1 and categories and codes; the brief psychiatric rating scale to the Hamilton rating scale for depression.

The book is supported by a CD-ROM, which contains a Spanish-English audio-guide; psychotropic drug monographs and four clinical simulation case studies. One addresses caring for the client with paranoid schizophrenia in an acutely psychotic phase. However, European understandings about working with people with psychotic experiences using normalising strategies such as Romme and Esher's evidence-based interventions and National Institute for Health

what we now call 'first episode psychosis' worked through their crisis with minimal pharmacological intervention. This section also includes accounts of projects from around the world including the Windhorse Project, the user-controlled Hotel Magnus Stenbock in Sweden, the Crisis Hostel Project in Ithaca New York, Runaway House in Berlin, the Second Opinion Society in the Yukon, the Open Dialogue project in Finland and other approaches to dealing with crisis. Not for the first time, I wondered with a tinge of anger, how such patently sensible, respectful, generally preferred (by service users), soundly evaluated (particularly in relation to Soteria), and cost-effective services remain on the fringe of the mainstream or struggle to survive on donations.

The next section addresses how the needs of groups such as families, children and adolescents, people from non-western cultures, those with dementia and men who don't conform to stereotypical views of being men might be better addressed through different ways of knowing and approaches to care. The section on respecting and supporting people with dementia was memorable to me and one that I will recommend to nurses and students along with other parts of this section that have immediate practical application. The next section entitled 'Realizing alternatives and humane treatment' also has practical import and outlines a range of projects and organisations which support, encourage and agitate for alternative care and humane treatment. Those with any interest in human rights and advocacy will be fascinated and heartened by accounts of how forced drugging or 'involuntary treatment' has been successfully challenged in some jurisdictions, others will be interested in the legal status of advanced directives or

be drawn to join one of the many advocacy organisations described.

The final section and three short chapters address 'why we need alternatives to psychiatry'. These reiterate the limits to neurobiological explanations of illness, particularly as exclusive models for helping people, the dangers associated with somatic treatments and the destructiveness of coercive treatment. They raise questions about the extent that the psychiatric industry can be reformed and outline a case for the development of alternatives both within and external to mainstream psychiatric services.

Alternatives Beyond Psychiatry will be of enormous value to any psychiatric and mental health nurse interested in extending, reforming or developing his or her practice in ways which enhance personal choice, and enable recovery. The sustained criticism of bio-medical explanatory models and coercive care will make some readers uncomfortable but hopefully this discomfort might be channelled into exploring in greater depth some of the alternatives that have been tried, tested and shared in this volume.

This is a book about people and personalities as much as about practice. It will assist in building networks or communities of interest and support. Some people might be moved to engage with some of the organisations represented or contact some of the writers. As a book of mostly stories it is incomplete. There will inevitably be a need for another volume in a few years to check in with the people and the progress of their various projects. I hope at that time the book is many times bigger and what now counts as alternative or beyond psychiatry is centre stage.

Richard Lakeman

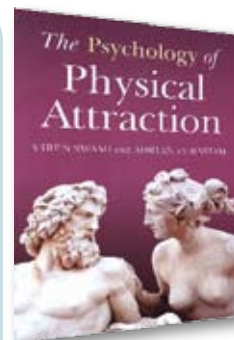
and Clinical Excellence guidance are generally absent. The section also contains stereotypical photographs and a narrative that is tailored to an American audience.

The book's 976 glossy pages are contained within a heavy hardback cover, which indicates that, despite including the aforementioned portable CD-ROM, this tome is heading for the library reference section. Once there, this book could potentially gather dust, not for any other reason than its American target audience. However, before colluding with Oscar Wilde's observation that 'we have really everything in common with America nowadays except, of course, language', I would like to make some positive comments. Aspects of the book's content

could be 'translated' to make them more useful to a UK audience.

For example, the overview of psychosocial theories and biological foundations of psychiatric nursing is comprehensive. It is also refreshing that psychopharmacology and biological interventions are given a high profile. If all pre registration nurses were robustly taught to undertake assessments as advocated, perhaps UK service users would experience an objective appraisal of their needs more routinely. Moreover the inclusion of family intervention and ideas to promote this are provided throughout; likewise I enjoyed the learning points taken from notable Hollywood films.

Catherine Gamble



The Psychology of Physical Attraction

Authors: Viren Swami and Adrian Furnham

Publisher: Routledge

Year: 2007

Price: £9.99

No of Pages: 248

ISBN: 9780415422512

Before reading this book, my limited understanding of evolutionary psychology in relation to what constitutes physical attraction was that the approach offered a more palatable explanation than Freud of why I married someone who bore an unnerving resemblance to my mother.

The authors provide an informative and authoritative exploration of the evolutionary, social and cultural psychology of physical attractiveness, concluding that 'a true evolutionary approach to psychology must embrace diversity, both at the individual and cultural levels'.

In addressing the key question of what it is about others that we find physically attractive, the book provides an overview of evolutionary psychology citing research that supports the view that men have evolved to find desirable cues that indicate reproductive value, while women lean more towards resource potential. The limitations of such a purist approach are acknowledged through a critical analysis of social and cultural determinants and an acceptance of the need to recognise the interaction between biological, cultural and individual factors.

Each chapter includes a series of informative tables, photographs and diagrams that explain complex ideas and concepts. The analysis of numerous studies is substantiated by an exhaustive reference list, and concluding paragraphs summarise the key issues addressed.

In spite of citing research suggesting that medical and mental health professionals treat attractive people differently to unattractive people and that the prejudice associated with 'obesity stigma' can increase vulnerability to depression and low self-esteem, the text does not have a nursing focus, nor is that its intention. Nevertheless, the book could appeal to anyone who has an interest in the science of physical attractiveness and may help to explain why some people with mental illness continue to experience stigma, prejudice and a relative lack of opportunity in society today.

Mark James