

intimate knowledge of the workings of the Council and a particularly wide experience of many countries and communities, this book looks at the lag between institutional structures and the evolution and development of values in the Church in recent years.

The theme is not a new one but this analysis presented by a prolific writer who has pioneered social research into the Church's organization in a number of countries, notably, of course, his own, is clear and illuminating. Apart from the use of sociological terms which are clearly explained, its simplicity and directness make it suitable for a wide variety of readers. Compiled originally for pastors, it has a lot to offer to all who are concerned with what form new structures in the Church might take. It is spiced with personal insights, some of which

can be taken as cautionary tales against freezing evolving values too promptly in new structures that in turn act as restricting forces.

Edited from lectures Canon Hourtart gave at the Pastoral Institute for Priests in the States in 1966 and completed from notes from a congress given at Louvain, the book can be criticized for the fact that one is continually conscious that it is a collection of lectures and the breeziness of style which would no doubt be refreshing to listen to jars a little in reading. More editing, incorporating references, for instance, would have added to the value of the book. At 30s. it is also expensive and one wonders why it was not produced as a paperback which would have stood a chance of getting the wide readership it deserves.

JOAN BROTHERS

**THEORY AND PRACTICE OF FAMILY PSYCHIATRY, by John G. Howells. *Oliver and Boyd*. 9 gns.**

One is hesitant to sit in judgment over Dr Howells. He has been practising psychiatry for very many years, and has established, with great tenacity and organizing power, a unit of 'family psychiatry'; one has no doubt that his unit has great success, and that as a clinician he is respected as a successful pioneer.

Howells claims that 'individual psychiatry' is obsolete: that the individual psychotic or neurotic is merely a symptom of a sick family: he is the 'presenting member'. Diagnosis and treatment must be not of the individual, for this is to collude with the family's scapegoating procedure, by which he is designated as ill, but of the family as a whole. There is little doubt that this is very often true; as a hospital psychiatrist one has to spend many hours in 'group therapy' for example, where the members of the group are a variegated and miscellaneous lot of other patients, who happen to be in the hospital at the same time. This is hardly a group at all, but a haphazard collection of individuals thrown together. How much more incisive and rewarding, and how much more potentially explosive and threatening, would the group be if it was composed of simply the members of the 'patient's' family. This is particularly true when many patients in hospital are wives separated from their husbands, children who are beyond the control of their parents, women who resent the marriages of their children, or senile people who overtax their children and make them feel guilty of neglect. This is a simple truth, which is all too seldom acted upon.

However, there are practical difficulties. To hold two therapeutic groups a week is about all the time a psychiatrist can afford if he is also working in admitting patients, in ward rounds, in community meetings, in individual interviews. If each patient in the group turned out to generate another group, the psychiatrist's work would be multiplied about twelve times. This seems a very ambitious project. However, Dr Howells is an ambitious man. Somewhere in his book he estimated that about 30 per cent of the population require psychiatric treatment. This smacks of empire building. It may be true. But who is going to carry this out? And who is going to treat the psychiatrists?

What is true in Dr Howells' book is not utterly new. The importance of the family has been well recognized for at least twenty years, as many of the papers he quotes in his encyclopaedic work demonstrate. Dr Howells gives the impression of trying to corner the market in family psychiatry, as if he had invented it. But every psychiatric hospital already employs Mental Welfare Officers and Psychiatric Social Workers, whose job it is to interview the families, in their homes. Dr Howells makes a plea for greater liaison between the MWO and PSW in practice, and few would disagree with this. All too often only lip service is paid to family dynamics: they are a kind of ornate flourish to the diagnosis, before the patient is treated with electricity or drugs. (There is a lot of double-think that goes on among psychiatrists.)

Stylistically, Dr Howells has a lot to answer

for. He does not have the vivacity of Aubrey Lewis, not the sympathetic style of R. D. Laing. His book is riddled with flaccid jargon. It is nearly a thousand pages long. It could have been cut to about half the size if only the author could have brought himself to omit some of the more mediocre papers, and, more important, if only he could have avoided such off-putting pseudo-deep generalizations as 'Happenings are often the resultant of many vectors', 'Humanity flows through time, and its dysfunctioning is experienced as anguish in the individual, discord in the family, and "social problems" in society'.

Words I particularly object to are dysfunctioning, ongoing, personnel, liaison, dyadic (what is gained by calling a couple a dyad?), vector therapy (a new vogue phrase to cover removal of a child from its parents: 'this isn't adoption, those days are past: this is vector therapy').

Howells seems to be the prisoner (a) of his ongoing jargon and (b) of his personality: the organizer, the controller, the collector. He cannot discard. He has collected a third of the population as potential patients. And he has collected a formidable mass of research material.

When one examines this material, however, it appears to come from a variety of sources, often only tenuously related to the main framework. The framework itself is spoilt by quasi-geometrical concepts: thus we are invited to conceive the family as existing in five dimensions: the individual dimension; the relationship dimension; the group properties dimension; the material circumstances dimension; and the dimension of family-community interaction. We understand what Dr Howells is getting at, and the commonsense and important points he is making. Why does he have to wrap them in this obscure mantle?

As Dr Howells is seriously concerned to promote a closer relationship between doctors and social workers, it would have been more to the point to include papers written by mental welfare officers or social workers, themselves. But Howells is the victim of the divorce he is trying to fight. Such papers would not have the prestige required. Instead we are treated to dubiously relevant research papers, e.g. on 'Evidence of human hermaphroditism', excellent in themselves, but marginal.

There are snags in family psychiatry, as Dr Howells knows. One is that the family do not come to be treated, and would very much resent overtures, however diplomatically

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masked, to attend the clinic. They fear to change the status quo. And it is hard to give people your 'services' when they do not ask for them. Another snag is that even if the whole family should come, one is then faced with an enormous mass of information. There is no doubt that this greatly enhances one's understanding of the patient's illness: but does it make it any more modifiable? All too often the family is deeply entrenched in its roles and its myths, and while one could collect enough information to write *The Forsyte Saga* or *Buddenbrookes* all over again, it would be arrogant to suppose that a whole family pattern built up over the generations could change as a result of 'insight' gained in a succession of group out-patient interviews.

To sum up: while we may object to Dr Howells' literary style, we have to admit that as a clinician he knows what he is doing. He is well aware of the complexities involved in treating an entire family, but believes that individual psychiatry is short-sighted. Too often the psychiatrist finds himself fighting a battle, either for the patient against his relatives (persuading them that he is ready to return to them) or for the relatives against the patient (persuading him to come to hospital). If this situation and its implications can be explored and explained from the start, many imbrolios that often fester on for years might be avoided. Dr Howells' practice of course runs contrary to that of classical psychoanalysis, where it is believed that the relatives of the

patient should *not* in general be seen, because the doctor is interested not in the relatives themselves, so much as in the patient's view of them. This may be an appropriate policy for psychoanalysis, but not for general psychiatry. If the patient's family can be seen at the outset, this kind of group is more powerful than haphazard groups of hospital patients. To interview the family with the patient may avoid a great deal of the 'false front', or at any rate the entirely different front, that the patient presents when in hospital. One remembers how one had a school personality and a home personality, and how peculiar it felt when the parents actually visited the school: how the mask seemed in danger of slipping. This is the sort of situation that can be made use of. Family psychiatry versus hospital psychiatry: one thinks of the difference between culturing a bacillus *in vivo* or *in vitro*. To see the germ in the test tube is much easier, but one has little idea of its real behaviour and natural history.

Who is going to practise this art? The psychiatrist can have the family in to his clinic, certainly, but the family doctor has, after all, been practising family therapy sometimes for several generations, and he is the man who knows the family in the home, knows its lateral spread and its links back to the grandparents. He may well be the man. Dr Howells' book may encourage a much closer link between the family doctors and the psychiatric hospital.

MILES BURROWS