## **Reviews**

Working with the "Unthinkable" – A Trainers'
Manual on the Sexual Abuse of Adults with Learning
Difficulties. By Hilary Brown and Ann Craft. FPA
(Family Planning Association), 27–35 Mortimer
Street, London W1N 7RJ. 1992. 68 pp. £14.99.

Working with the "Unthinkable" is described by the Family Planning Association as the first manual of its kind. It is targeted at staff who work with people with learning difficulties, and is designed to strengthen staff skills in identifying and responding appropriately to issues around sexual abuse.

Sexual abuse has only fairly recently been recognised as a major problem in people with learning disability. Prior to 1989 there was virtually no mention of it in the British medical literature. In the last three years several authors, myself among them, have published papers which attempt to establish prevalence and explore some of the clinical and legal issues surrounding the problem. The "unthinkable" in the present title comes originally from 'Thinking the Unthinkable', a collection of papers published by the FPA in 1989. This was the first attempt to bring together all the current work being done in this field, and remains a very useful starting point for those wishing to familiarise themselves with this subject.

The manual starts with some useful background information on prevalence studies, although it is a pity they quote only American publications, and then explores some of the reasons for the increased vulnerability of this group. These are suggested to include a pervasive culture of compliance, lack of sex education, separation from natural home settings, continuing need for help with intimate body care, impaired communication skills and the physical inability to defend themselves. They also discuss the difficulties involved in defining abuse, and the problem that some activities, while clearly abusive, may not necessarily be illegal. Some useful advice is given on protecting staff who are being trained from their own feelings about their sexuality, and about any difficult sexual experiences they may have had in their own lives.

The manual has been piloted locally by our training department, who found it to be overall a very useful base to work from. The individual exercises were variable in their usefulness. In particular, the exercises on 'Cause for Concern', 'Legal Speech', 'Allegations', 'Safety Network' and 'A Fine Line' were found to be extremely useful. Criticisms included the lack of guidelines for the 'Safety Network Quiz', advice on coping with disclosures and ongoing

work with people who have been abused. One major omission is that of working with people with learning disabilities who are themselves abusers.

Overall, the impression is that this manual will prove to be an extremely useful and practical addition to the increasing body of work now available to help staff who are likely to come into contact with this very difficult problem in the course of their work.

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The First 24 Hours. By Kath Arnold, Janet Finucane, and Nigel Rothe. Manchester Community Health Council. 1992. Pp. 25. £1.50.

The importance of consulting service users and carers about the planning and management of services has become one of the new orthodoxies of the mental health manager, a situation reflected in the emphasis it is given in *The Health of the Nation – First Steps for the NHS*. However, the importance attributed to consultation is not often turned into practical action – any publication which provides ideas and inspiration is, therefore, to be welcomed.

This short, lucid and honest booklet does both. It first describes the process of organising a meeting between users, carers, voluntary organisations and professionals to discuss the experience of the first 24 hours of admission to a psychiatric hospital. It contains practical suggestions for setting up similar sessions, such as organising for counsellors to be available to users who might be upset by telling their story. Second, the booklet summarises the main proposals that arose out of the meeting, for example, that, "Staff should recognise that admission into hospital is traumatic. People need a better explanation of why they are there and what could happen to them. They need a chance to discuss the reasons for admission".

Nonetheless, the booklet has its limitations. Its brevity means that a number of practical issues to be considered in establishing such an event are omitted (language, rules, reimbursement of expense, etc). Furthermore, the question chosen for discussion seems very limiting. At a time when research is indicating that between 50% and 80% of admissions can be avoided by provision of a range of alternative approaches, it would appear more fruitful to explore