Reviews

Families Caring for People Diagnosed as Mentally Ill. By Christina Perring, Julia Twigg and Karl Atkin. London: HMSO. 1990. Pp. 62. £5.30.

Caring for persons with chronic mental disorders in the community has been viewed from two distinctive perspectives: first, from the perspective of the carers and the stresses imposed upon their lives; secondly from the perspective of the sufferers and the stresses imposed on their lives by the carers. The concept of family burden deals with the former, while that of expressed emotion addresses the latter issue. Few studies have adequately addressed the crucial interaction between these two opposing viewpoints. Even fewer have accounted for the impact of life events and persisting stress associated with social deprivation on the burdens of illness and caregiving. Finally, only one study has addressed all these issues and has successfully provided a comprehensive family-based intervention programme that deals with all these sources of stress with a combination of patient and family education, case management, 24-hour-a-day crisis intervention, patient and family stress management, and specific psychological strategies for specific problems of both patient and family members.

This publication purports to take an authoritative review of family care. However, it merely addresses the issue of carer burden, and fails to deal with the complexities of this issue. Taking this tack inevitably draws attention to the negative aspects of caregiving and fails to recognise the reciprocity of caring relationships that, despite inevitable emotional distress, is considered a rewarding experience for the majority of carers. Indeed, this review supports the finding that in all studies that have provided families with the alternative of continuing to care for their disabled relatives or have them cared for in mental hospitals, only a tiny proportion have opted for the hospital alternative. However, where services are deficient (most surveys) relatively clearly express reasonable needs that can be readily met by cost-effective methods of family-based care. It is scandalous that despite repeated research demonstration of the benefits of comprehensive case management involving carers as well as sufferers, a nationally-funded health service has not yet adopted such methods on a widespread basis, whereas any minor advance in drug therapy receives massive promotional support funded directly by NHS patients to commercial interests (i.e. 10% of the drug bill).

Despite these limitations, this book makes interesting reading for all those concerned with developing effective services for the mentally disorderd.

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Directions for the 1990s: A Variety of Perspectives. GPMH. 1990. Good Practices in Mental Health, 380–384 Harrow Road, London W9 2HU. Pp. 31. £3.95.

This slim volume is a collection of seven papers from a conference held in October 1989 to discuss the implications of the Government's proposals for mental health care, then known only through leaks and somewhat cryptic ministerial statements. The succeeding 12 months have seen the publication of the community care White Paper *Caring for People* and a sheaf of draft implementation documents and the passage through Parliament of the NHS and Community Care Act (1990). The initial extraordinarily tight timescale for the full implementation of the proposals has also been slipped from April 1991 to April 1993.

Throughout the country managers and service providers have had to accommodate to some new realities. The 'contract culture' is now beginning to take root, although its organisational implications are still seen only dimly by most people working within the services. The requirement set out in *Caring for People* on social services authorities to produce community care plans in consultation with health authorities, family practitioner committees (sic), housing authorities, private and voluntary sector providers, service users and carers has prompted even the most recalcitrant health and social services authorities to begin a dialogue.

Given that all the participants in community care for the mentally ill are on a steep learning curve, is there anything in these papers of lasting interest? A variety of perspectives are promised, and some predictable responses are delivered. An NHS manager (Chris Born) expresses concern over the proposed transfer of responsibility from NHS to local authority, while enthusiastically adopting the purchaser/provider divide and case management. A social services director (W. B. Harbert) worries about the apparent influence of the Royal College of