

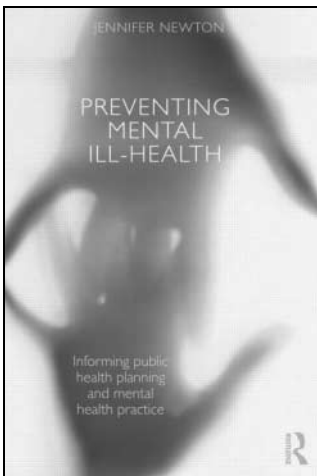
Reviews

Preventing Mental Ill-Health: Informing Public Health Planning and Mental Health Practice

Jennifer Newton

Routledge, 2012, US\$47.95 (pb), 280 pp.

ISBN: 9780415455411



This book covers an ambitious breadth of material concerning the definition, determinants and interventions for prevention of mental ill health. The sheer scale of material covered means that the reader should not expect an in-depth critique of all the evidence presented and this can pose questions around the methodology and conclusions of studies. The author notes that she is an agnostic entering the houses of such new religions as

biological psychiatry and positive psychology. Their differing perspectives occasionally lead to a conflict in argument, which is not always resolved. Psychiatric labels are defended for their contribution to research, while later it is reported that improved understanding of schizophrenia has derived from breaking the diagnosis down into constituent symptoms.

My favourite statistic from the book is the reported finding that 2.4% of women from a Basque-speaking rural area screened positive for depression compared with 11% of women in a Spanish-speaking village in the Basque region. The degree of integration in each community is cited as an explanation, echoing the famous theories of Emile Durkheim around suicides and social cohesion.

Despite a thought-provoking chapter on 'society, status and participation', the focus of the book is very much on the individual's place within society. There is a good discussion of negative consequences of housing policy and a look at unemployment and inequality, but in terms of social determinants of mental health, I was left wondering how to build societies with the kind of integration that seems so protective. For the individual, the take-home message is that what matters is to feel loved, safe, valued and in control.

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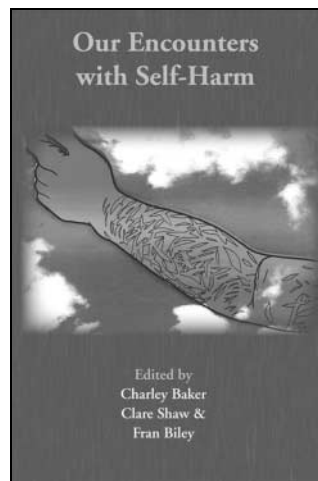
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Our Encounters with Self-Harm

Edited by Charley Baker, Clare Shaw and Fran Biley

PCCS Books, 2013, £18.00, pb, 229 pp.

ISBN: 9781906254636



When I was working as a junior doctor in accident and emergency, one of my favourite jobs was suturing. A pleasant break from the constant decision-making, an opportunity to do something practical and almost artistic, and most of all a chance to just sit down and chat with the patient as I stitched. Despite this, one of my least favourite tasks was patching up those who had self-harmed. Something about the sight of the self-inflicted wounds upset me far more than the most

horrendous accidental injuries; I tried to still be warm and not allow the distress and disgust I felt show, but I did not know what to say and we would often sit in silence as I worked. I had never been taught about

non-suicidal self-harm, what it serves, how to approach it, anything. It was not until I began my psychiatric training that I began to understand it, and became retrospectively frustrated with how I had felt and responded to it earlier in my career. I now ensure I cover this subject in some depth with my medical students, to try to avoid them feeling about self-harm the way that I used to. Alternatively, I could just make them read this book.

Our Encounters with Self-Harm is made up of 37 pithy chapters by different authors. The majority are written by those who have, or still do, self-harm, and others are by family members and professionals (the last of which I found the least educational; an interesting reminder not to dismiss personal accounts in an era where quantitative research often feels the only thing that counts). Most take the form of a piece of prose about the writer's personal experience, followed by a short bullet-point list of thoughts that they would like the reader to take away from it.

These pieces are brave, articulate, occasionally harrowing, and frequently illuminating. Since it is an anthology, unsurprisingly there is a certain amount of repetition within the book. This is no complaint; it serves to reinforce the most common themes such as: accept that this is my coping mechanism, find out what it means to me, look beyond the act of self-harm to treat the person behind it with kindness. Meanwhile, the divergences remind us of other key points such as not making assumptions and remembering that 'everyone who self-harms is an individual, so everyone's self-harm has individual meaning'.

Buy this book and force every medical and nursing student you encounter to read a chapter from it. I suspect it would significantly improve in the future the care that patients presenting to accident and emergency with self-harm receive. While you are at it, share it with your psychiatric colleagues; a reminder of empathy and a deepening of our understanding of our patients can never go amiss. As one of the contributors writes, 'whatever you learn, get it out there, you never know who might benefit from your own experiences'.

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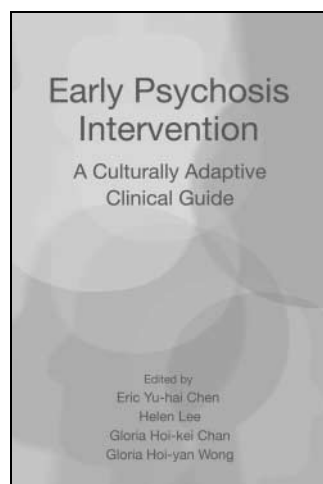
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Early Psychosis Intervention: A Culturally Adaptive Clinical Guide

Edited by Eric Yu-hai Chen, Helen Lee, Gloria Hoi-kei Chan and Gloria Hoi-yan Wong
Hong Kong University Press, 2013, US\$50.00, hb, 416 pp.
ISBN: 9789888139927



This book is written by multidisciplinary pioneers in early psychosis intervention in South-East Asia and is a product of two decades of development in this rapidly growing region, a cultural mosaic. In the foreword, Professor Patrick McGorry highlights that the essence of such intervention is to bring maximum recovery for young people with psychotic experiences.

The book is unique and attempts to connect early psychosis with transcultural psychiatry. The first part

describes service structures of early psychosis programmes in Hong Kong, Singapore, Japan and Korea. The authors define early psychosis afresh by introducing the culturally adaptive translation in Chinese, *sijueshitiao*, meaning imbalance of thinking and perception. The second part discusses the cultural issues in management of early psychosis. The authors tactfully compare and contrast different Asian beliefs of mental illness including Islam (unbalanced lifestyle), Hindu (bad karma), Buddhism and Taoism (attacks by ghosts) and Christianity (demonic possession). The local cultural beliefs may increase duration of untreated illness because patients and families often consult their traditional healers instead of medical practitioners.

The authors present interesting data on public misconceptions about psychosis. They highlight salient points in early psychosis treatment such as recommended dose of each antipsychotic drug, topics to be covered in peer support groups, strategies for family work and medication adherence. I personally found the chapter illustrating the state-of-art information technology and database design very interesting.

I highly recommend this book to mental health professionals who are keen to establish early psychosis intervention services in other parts of Asia, Africa and South America. The authors carefully insert clinical vignettes throughout the book and enrich its clinical relevance. Mental health professionals working for well-established early psychosis intervention programmes may find the culturally adaptive strategies helpful in their clinical practice. In the near future, I hope Professor Eric Chen and his colleagues may consider writing a book on the neurobiology of early psychosis.

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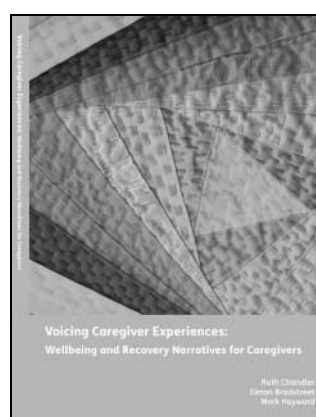
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Voicing Caregiver Experiences: Wellbeing and Recovery Narratives for Caregivers

Ruth Chandler, Simon Bradstreet & Mark Hayward
Scottish Recovery Network & Sussex Partnership NHS Foundation Trust, 2013, 166 pp. ISBN: 9780955635960
Available free of charge at www.scottishrecovery.net



In this easy-to-read book, ten authentic carer stories of different styles have been collected. Each has different themes, many of sadness and loss, and they describe the roller-coaster ride that most have had to endure until eventually finding stability and some acceptance of the situation in their own and their loved ones' lives. Tips between carers are shared, especially those of encouraging and steering others towards

empowerment both in managing their own, often ignored, needs and to negotiate the fragmented, bewildering and inconsistent care delivery arrangements.

The most notable theme is that of hope. The stories demonstrate the process of finding hope, not a superficial denial of the challenges that lie ahead, but something worthy of respect. This hope is borne in adversity, is effortful and those