

society live with a home in the city as well as in the country.

In this way it is hoped that D.Psych.H. (University of Zimbabwe) will help to reverse the tendency in developing countries for doctors to lose sight of the immense amount of suffering caused by mental illness and mental retardation, when confronted with problems of developing a general medical service and an effective public health system. It is very much hoped that this one-year course will also serve as an introduction to a full course leading to Specialist Registration for those with the aptitude and will to become full-time psychiatrists. Plans are indeed well-advanced within the University for a higher degree, which could be obtained

within the country, without sacrificing trained manpower to spend long periods in Europe or elsewhere.

The pioneer course is for Zimbabweans. But in spite of (or perhaps because of) the local cross-cultural emphasis in the training, this postgraduate diploma may later be seen as an attractive qualification for those planning future careers in general practice in other countries, including Britain.

REFERENCE

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Reviews

Elements of a Comprehensive Local Service for People with Mental Handicap. Independent Development Council. 1982. Pp. 40. £1.00.

Better Services for the Mentally Handicapped? Lessons from the Sheffield Evaluation Studies. King's Fund Project Paper No. 34. 1982. King's Fund Centre. £1.50.

Development Team for the Mentally Handicapped—Third Report, 1979–81. DHSS. HMSO. Pp. 50. £2.95.

A major problem in developing appropriate services for mentally handicapped people is the rapidity with which thinking has changed, and continues to do so. The emerging philosophy and principles of care are thus embodied in a succession of policy statements, and in consequence many do not reach lay and professional planners in a coherent and complete form. The Independent Development Council, a partnership of voluntary organizations, professionals and consumers, established in 1981, seeks to rectify this in its publication, *Elements of a Comprehensive Local Service for People with Mental Handicap*. Well balanced and easy to read, this amply fulfils its aim to provide an up-to-date and concise guide for lay decision-makers on principles of care and the basic requirements for a good, locally based service. Due emphasis is given to the care of the elderly mentally handicapped, sheltered work for the mildly handicapped and guidelines for maternity units on procedures to be followed in the event of the birth of a handicapped baby—aspects which hitherto have received little attention and the importance of enabling mentally handicapped people to have a say in their own affairs and in the development of services is rightly stressed.

Principles and policies are one thing, putting them into practice is another, and all concerned with the development of services for the mentally handicapped will find much of value and interest in the King's Fund Project Paper No. 34, *Lessons from the Sheffield Evaluation Studies*. This small booklet, which summarizes 13 detailed and substantial reports, is an admirable and much needed example of how to present the results of research in a helpful and readable form for planners and service providers. Drawing upon the Sheffield experience, the Research Director spells out in a refreshingly frank account, the difficulties encountered in translating ideals into reality and the lessons to be learned. He concludes that the key to successful service development is effective partnership between the families, neighbourhood community and public and voluntary service agencies, an accepted basic philosophy, explicit objectives, a workable delivery structure, adequate resources and, above all, sustained commitment.

But according to the *Third Report of the Development Team for the Mentally Handicapped*, this combination is all too rarely found. The Report covers the past two years' work, and may fairly be said to reflect the current scene countrywide. Commenting on the disappointingly slow rate of service developments, the report cites lack of effective inter-agency collaboration and proper strategic planning as major factors. It points out that these must be speedily remedied if the new opportunities presented by NHS reorganization and *Care in the Community* are to be fully exploited and the best use made of scarce resources. The present economic situation is another undoubted factor, its impact highlighted by cutbacks in existing provision in some areas, and in others, completed capital projects (such as new hostels) put into mothballs because of an inability to meet

running costs. Many local authorities have reached saturation point in their capacity to cope with the revenue consequences of joint financing, and new government initiatives for the transfer of funds are welcomed. But as the report stresses, this should not be at the expense of hospitals, which of necessity must remain major service providers for some years to come. The fact is that more money is needed all round. However, despite the general tenor of the report, all is not doom and gloom. Improvements are reported in all aspects of service, there has been a notable expansion in community nursing and the team has seen numerous examples of worthwhile schemes and innovative projects during visits.

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Behaviour Therapy Nursing. By Philip J. Barker.
London: Croom Helm. 1982. Pp. 276. £7.95.

Nurses have come to play an increasingly important role in the delivery of behavioural psychotherapy for a wide range of problems. Suitable instructional texts are few, and this book, written by a clinical nurse-specialist, is an attempt to remedy this deficiency. It contains useful chapters on the assessment of problems and their measurement, and helpful illustrations showing different ways of graphing data, how to make baseline measurements and methods of prompting patients. There are also clear descriptions of many behavioural techniques and, refreshingly, a discussion of cost-effectiveness issues. The penultimate chapter has an interesting appraisal of the various roles nurses can adopt in behavioural programmes as presenters, co-ordinators, practitioners and consultants, the amount of autonomy of each role varying greatly in differing situations.

This book could serve as an auxiliary text for basic and post-basic nursing training, but contains major weaknesses which prevent it from becoming definitive. It never delivers the essential message that behavioural treatments have indications where they are especially useful, and contraindications where the approach is a waste of time. Assertive training is discussed as though it is as applicable to the deficits of schizophrenia as to those of patients with social phobias or with personality disorders. There is never any sense that some classes of behaviour are much more readily modifiable than others. The special problems of subnormality do not appear. Which behavioural methods are to

be given for which patient populations is one of the first things to be learned by any clinician, and cannot be gathered from this volume.

Another crucial defect in this text is its omission of central facets of behavioural practice. Nowhere to be found is a good discussion of how to give exposure therapy for phobic or for obsessive-compulsive disorders. Although the appendix contains a case history of a patient with phobic problems, and much extraneous detail, a nurse gets no idea how to proceed to help those problems in the few hours of care that are needed. The vital aspect of patient's self-treatment and recording of this in homework diaries does not appear. There is no mention of sexual skills training for sexual dysfunction, or behavioural methods of modifying sexual deviations, in which areas nurses can play a major part. Other lack of awareness of the mainstream of behavioural practice is seen in the long discussion of the use of relaxation, which is largely redundant in this field, and of systematic desensitization, which is an out-of-date method. The confident assertion is made that 'severe cases of generalized anxiety can also be treated where the behavioural programme is synchronized with a carefully controlled course of medication', when in fact there is no controlled data with follow-up to support such a regime.

The author rightly points out the similarity of the nursing process to behavioural psychotherapy, in which the problem-oriented approach is a hallmark. However, there is a problem in the definition of the nursing process as 'the principles of clinical management drawn from a study of the needs of the individual patient' (p. 217). Such a definition describes individually tailored clinical management given by a clinician from *any* of the caring professions, not only from nursing, and illustrates the difficulty encountered in trying to isolate what is specifically nursing care as opposed to medical care or psychological care or social work care. A common opinion is that nurses undertake assessment and care while doctors carry out diagnosis and treatment, but we would be hard pressed to find a firm divide between assessment and diagnosis, between care and treatment. There is ineluctable overlap among professional roles, however hard each group tries to carve out its own domain in the incessant competition for resources. The greater involvement of nurses in clinical management is a welcome development likely to lead to better patient care, and this has been amply demonstrated with the behavioural approach.

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