enormously, from that which does not interfere significantly with normal day-to-day activities to the most distressing states of anguish and despair which are difficult to resolve. Very easily a grieving person may misinterpret the many physical and psychological symptoms inherent in grief, and so develop secondary fears of illness, thereby accentuating their suffering. It is so important to explain the mechanism of grief and to interpret its clinical symptoms to those who experience them. Yet what a challenge it is to devise a format which conveys the message effectively, so that it can be assimilated at a time of great distress, covering the essential themes briefly without oversimplification or ‘talking down’ to the reader.

The Bereavement Information Pack negotiates these problems with considerable success. It deals successively with the initial features of acute grief, then the range of symptoms encountered in the fully developed reaction, giving special consideration to grief following sudden death and suicide. A very useful comprehensive list of helping agencies is also provided. Perhaps more could have been included about the process of helping and the ways in which people get better. How simple listening, if necessary to the same topics over and over again, is part of the healing process, and the sufferer should not be embarrassed about needing to share things in this way. We need an answer to the cry of despair ‘What’s the use of seeing you. You can’t bring him back’.

The Information Pack is succinct and readable, and it should be useful for both helpers and sufferers alike. Will it reach out effectively to the majority of grieving people, many of whom will find it difficult to concentrate on any kind of written text, or may be visually impaired? Its excellent message will find a wider audience if it were also produced in audio form.

In a brief text such as this, it would be churlish to comment on omissions, but I was sorry to see that C. S. Lewis’ A Grief Observed was not mentioned. It contains insights into the experience of grief which always move an audience. For example, part of Lewis’ anguish was a fear, itself eventually resolved, that his memory of his dead wife would become distorted by his recurrent attempts to remember her:

“slowly, quietly, like snow flakes . . . like the small flakes that come when it is going to snow all night . . . little flakes of me, my impressions, my selections are settling down on the image of her. The real shape will be quite hidden by then.”

Lewis’ loss of faith was another feature of his distress: “meanwhile, where is God?”.

And finally, restored feeling of closeness to the dead person seemed in his case to follow on resolution of the acute distress of grief, a point which can be used to encourage those who feel guilty at taking any steps toward feeling better:

“and suddenly at the very moment when, so far, I mourned least, I remembered her best . . . It was as if the lifting of the sorrow removed a barrier”

Perhaps I should concede that there must be many other moving accounts of grief, and these quotes are idiosyncratic to me.

GETHIN MORGAN, University of Bristol, Division of Psychiatry, 41 St Michael’s Hill, Bristol BS2 8DZ


It can no longer be claimed that the College neglects to provide guidance on the use of the Mental Health Act. This sophisticated training package illustrates the complexity of the task. The written material, 94 pages with a large typeface in a robust loose leave binder, reviews the Mental Health Act (England and Wales) 1983, and makes only passing reference to the provisions in the two other legislative regions of the United Kingdom. The 41 minutes of video, on the other hand, will be useful wherever patients are compulsorily detained and treated.

The text makes clear that patients may be detained on the grounds of their health alone. Those responsibilities of the responsible medical officer (RMO) which cannot be delegated (e.g. in the authorisation of Section 17 leave and the certification of consent on Form 38) are given appropriate emphasis. However, the medical orientation is not fully maintained, for example, in stating that “the MHRT must hold a hearing and must in particular hear and take evidence from the applicant, the patient . . . and the hospital managers . . . ” There is no reference to the duty of the responsible authority to provide an up-to-date medical report (Rule 6, Schedule 1B), on which the RMO is likely to be closely examined.

Inevitably events have overtaken the editorial process, which has clearly had a long period of gestation. The text takes note of the Crime (Sentences) Act, the Criminal Justice and Public Order Act and the Sex Offenders Act and refers to the likely publication of a revised Code of Practice by the end of 1997. It does not include any reference to the implications of L. v. Bournewood, which is now to go to appeal, with an unavoidable further delay to the revised Code of Practice.

This package is designed as a tool for those running training sessions on the Mental Health Act and for those in more isolated sessions “who may wish to use distance learning”. The written

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material, not much more readable than the Act itself not withstanding the profusion of bullet points, serves as a useful expanded index to the Act itself, the Regulations, the Memorandum, The Code of Practice, and authoritative references, such as the Mental Health Act Manual by Jones. There is also an 18 question multiple choice quiz (with the answers provided), a statement on the treatment of anorexia nervosa, based on a recent Mental Health Act Commission guidance note, a review of risk assessment from the College Report by the Special Working Party on Clinical Assessment and Management of Risk, a glossary, and 18 pages of material which can be used by a tutor to prepare overhead transparencies or slides.

The video is of professional quality. After a jingle and a babble of what sound like parliamentary voices, there are four parts: admission, treatment and consent, discharge and aftercare. Each part is introduced by statements voiced from different perspectives, any one of which could be the subject for an extended debate. Three of these main topics are illustrated by a telling drama sequence, in which neighbours and relatives display rather more overt emotion than the two presumed patients seen. Experiences of after care are described in a short documentary. The video does not include any health warning, but the text makes clear it is designed to be used as part of a structured teaching session for which detailed guidance is given. Outside such a well-structured context, which the subject deserves, and supported by direct supervised experience, the video sequences could increase the apprehension of trainees in this difficult area and add to a reluctance to engage in clinical work which involves the use of the Mental Health Act.

This is a laudable effort, prepared with the support of the Department of Health and St Andrew’s Hospital, Northampton, which deserves to be widely used in the training of membership candidates and the preparation of Section 12 (2) doctors. The video, if used as intended in structured teaching sessions, should be of value in any legislative framework.

MAX HARPER, Beaufort House, The Model Farm, Wolvessenewton, Chepstow, Gwent NP6 6NZ

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**New Council Reports**


To inform the planning of new acute in-patient units for adult mental health.

**CR63** Gender Identity Disorders in Children and Adolescents: Guidance for Management, £5.00, April 1998

Offers guidance in the management and therapeutic interventions with children and adolescents and their families.

**CR64** Managing Deliberate Self-Harm in Young People, £5.00, April 1998

Provides guidance on managing young people up to the age of 16 (including young people with learning disabilities) who deliberately harm themselves.

*Available from Booksales, Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG (Tel. +44 (0)171 235 2351, extension 146). The latest information on College publications is available on the INTERNET at: www.rcpsych.ac.uk*