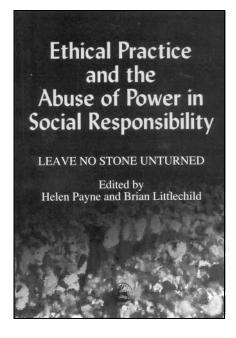
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Ethical Practice and the Abuse of Power in Social Responsibility: Leave No Stone Unturned

Edited by Helen Payne & Brian Littlechild. London & Philadelphia: Jessica Kingsley. 2000. 235 pp. £15.95 (pb). ISBN I 85302 743 X



'Leave No Stone Unturned', the subtitle of this book, is a powerful phrase, summoning up images for me of woodlice scurrying for cover at the first hint of light. And indeed, this is very much the theme of the book to shed light into hitherto dark corners of professional practice of social responsibility. I am less sure about the ponderous term 'social responsibility' in this context, but let us pass on. The book is timely, given the avalanche of child abuse inquiries hitting the headlines. Furthermore, scrutiny more recently has focused not just on residential care workers, but also on the bigger battalions of the medical profession. Some unflinching reflection of the systems in

which we, as psychiatrists, work is surely right.

One acid test of any book is its ability to provoke, to leave images in the mind and to engage in debate, and on this level, the book succeeded for me. A book such as this must be very much of the nature of a conversation with its reader. Your reaction, reader, will depend even more than usual on your experiences, both professional and personal. As a politically involved consultant child and adolescent psychiatrist working in a pressured inner-city setting, I shared the misgivings of many of the contributors. Although misgivings would be a feeble word for many of the users who contributed to the book: outrage and incomprehension would be nearer the mark. The editors hope that readers from the 'social responsibility' professions will shed any defensiveness, but to some extent this aspiration is made more difficult by the unbalanced nature of a few of the chapters. I do not think, however, that the intention of the book was to be balanced; it was to document and make heard the voice of some of those who are all too often unheard in a system that is manifestly unbalanced for many.

The book offers multiple perspectives, each chapter from a contributor who had worked in, or been a recipient of social care, or both. I preferred those chapters in which a composite picture was built up, rather than those based entirely on one, albeit extended, individual experience. The final chapter, however, by Mary Neville, about her serial abuse within the medical system was very powerful and should be required reading for all medical students. To my surprise, no one referred to the now chronologically old but still vividly shocking paper, 'On being sane in insane places' (Rosenhan, 1973). A better illustration of meaning being inferred from context is hard to find. I especially appreciated the thoughtful and respectful chapter from Sue Williscroft, a Leeds Deputy District Judge and family lawyer, about the legal mire into which parents are often uncomprehendingly plunged. The powerful emotions stirred up by child-care cases are helpfully explored by Trowell and Colling, both child and adolescent psychiatrists. They make a plea for the plight of the child to be considered and reflected upon with care in the midst of the ever more adversarial legal system.

This book does not pretend to offer solutions. It addresses the inherent problems

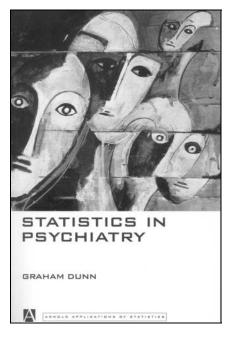
in a system in which power is so conspicuously skewed, and the implications of this for ethical practice. Training, or rather its lack, especially in the social work profession, is an issue that emerges time and time again. So too the need for some sort of independent advocacy for parents. We should not lose sight, however, of another perspective not represented here, of social workers, often themselves in impossible working conditions, struggling creatively, although ultimately unsuccessfully, to work with some parents. The least powerful of all, children, are then the ones who lose out most.

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Statistics in Psychiatry

By Graham Dunn. London: Edward Arnold. 1999. 132 pp. £24.99 (pb). ISBN 0 340 67668 \times



Lazy travellers may choose a package tour when planning their holiday. The adventurous backpacker prefers to explore the destination in depth, has plenty of time and seeks an understanding of the foreign cultures. A third category compromises ambitious travellers with less time, who concentrate on a few highlights, but do not want to be spoon-fed their holiday. Graham Dunn's book fits into this third category.

This book is not a package tour for the traveller visiting psychiatric statistics for the first time, and it requires a certain preexisting knowledge of the subject. Nor will it invite the backpacker to extensive explorations. For those of us who fall into the third category, with a desire to travel a little way off the beaten track, it is a good book. It is certainly useful for researchers who need inspiration with data analysis, or who wish to explore some of the byways and nuances of the world of data analysis. All the statistical methods presented are explained by using enlightening examples, the majority of which refer to studies in depression.

Dunn covers measurement error comprehensively. This is a frequently underappreciated factor that might affect a considerable portion of studies. In the chapter on instrument reliability, Dunn mentions κ for categorical data and then describes a graphical method to show test–retest reliability in a better way than using ordinary scatter plots for continuous data. After this he proceeds to more complicated methods such as analysis of variance and multilevel modelling to account for missing data.

The chapter on instrument validity describes the concepts of sensitivity and specificity and their visualisation in receiver operating characteristic curves. Dunn reports how screening instruments can be assessed when not all subjects who underwent the initial screening are available for validation against a gold standard. Afterwards he moves on to the tricky problem of how to define caseness if you have several diagnostic instruments, but no gold standard.

On the subject of prevalence estimation, Dunn outlines how to proceed in the following situations: (a) determining prevalence when stratified sampling was used; (b) establishing prevalence on the basis of two-phase sampling (first, using a screening instrument and then confirming diagnosis by a gold standard); (c) using a combination of (a) and (b), which is stratification in two-phase sampling. For the latter, weighted logistic regression is recommended and the commands for the Stata software package are given.

The most difficult parts of the book might be the ones of greatest interest, since they address problems that researchers in psychiatry often face: reliability of instruments with quantitative scales, measurement of latent classes, measurement of change and management of missing data. The standard of the book is high and someone who prefers sunbathing on Mallorca might find climbing these summits too exhausting.

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