

## Book reviews

EDITED BY SIDNEY CROWN and ALAN LEE

### Where Inner and Outer Worlds Meet. Psychosocial Research in the Tradition of George W. Brown

Edited by Tirril Harris. London & New York: Routledge. 2000. 344 pp. £60.00 (hb). ISBN 0 415 20268 X

Described as a tribute to George Brown, this work is more technically a festschrift or, in Hollywood terms, a lifetime achievement award. Brown has been engaged in medico-sociological research since the mid-1950s (when he discovered the prognostic value to mental hospital patients of being visited) and he remains as productive as ever today. On this voyage of exploration, Tirril Harris has acted as first mate to his captaincy; she is also the editor of *Where Inner and Outer Worlds Meet* and has contributed the most important chapter to it.

The intriguing title refers to the discovery of associations between psychiatric disorders and external demographic variables – associations that focus on the mediating processes between the two. Brown suggests that this has helped to close a gap, existing since Durkheim's (1897) work on suicide, that separates macro-level phenomena from the characteristics of individuals. For Harris, Brown's method of working has been essentially to focus on 'meaning' as a way of understanding how people are affected by their social frameworks. But even if causal links are found through the investigator using empathy to grasp these meanings, statistical confirmation is still needed from empirical research. In this way, 'a web of causal factors' is gradually understood.

Ever since Brown & Harris's (1978) landmark work on *Social Origins of Depression*, the question of what role is left for genetics has remained controversial. Birley & Goldberg state here quite baldly that 'George ignores genetic factors in his theorising about depression', but Rutter maintains that 'individuals with genetic vulnerabilities tend to be those who are most susceptible to environmental hazards'.

The Dutch contributors Ormel & Nealeman, however, suggest that 'The prevalence of depression in a particular population . . . may be related largely to [its] social characteristics . . . while the question of who in that population develops depression may be largely genetically determined'. This seems a sensible compromise. Brown himself, while agreeing that social scientists tend to be suspicious of genetics, points to a 'general failure of genetic research to provide an adequate ecological basis for its conclusions'. Since much psychopathology is associated with highly deprived environments, this could be a significant research problem.

For several decades, George Brown's name has been strongly associated with the aetiological importance of life events, and he emphasises here that this approach has tended to reach back steadily in time, so that childhood experience is now included. The contributors from Pittsburgh, however, say that there has been a general failure to distinguish between the effects of childhood adversities on the first onset of depression and any effects on recurrences. In that case, the presumed mediating processes might be markers, rather than risk factors, and the targets for intervention might be wrong. Adverse influences may occur early in life, but the vast majority of adult depressive episodes are recurrences. Furthermore, they point out, an adversity – such as family violence – is rarely a single phenomenon which could be treated on its own; it is usually part of a complex mixture of social factors.

In her introductory overview of the field, Harris emphasises that the 'meaning' involved in responding to a life event is now seen in this work as often having a significant biological component. As a result, Brown has focused particularly on a humiliation/entrapment rating of severe events and has thus 'distanced himself from much of the post-modernist relativism which is increasingly influencing British sociology'. Since several types of meaning may act in conjunction, it is not surprising that for a depressive onset of clinical

relevance to occur, more than just a severe event needs to be present. Showing its everyday relevance, Brown's aetiological model also acknowledges the possible importance of sheer luck.

These essays on diverse aspects of causation, combined with some reports of original data, are essentially for the specialist reader. Tributes are paid to many who have contributed to the overall achievement of what is now a research tradition, but Brown reveals that it nearly came to an end in 1971. The Medical Research Council (MRC) then withdrew its support and it was only American help, negotiated by David Mechanic, that allowed it to continue. Subsequently, the MRC had second thoughts. Faced with the practical problem of how to intervene, the clinician may perhaps feel that the lesson is – make life better for people. Yet in general, that is precisely what clinicians have very little power to do: representations to social services' housing departments tend to evoke little response. Nevertheless, George Brown's work has transformed thinking on the causes of depression, and this volume has done appropriate justice to it, although when it describes the work as 'Following the insights of Schutz about *Verstehen*', it had me puzzled. I thought Schutz was a composer.

**Brown, G. & Harris, T. (1978)** *Social Origins of Depression. A Study of Psychiatric Disorder in Women*. London: Tavistock.

**Durkheim, E. (1897)** *Le Suicide*. Trans. J. A. Spaulding & G. Simpton (1951). New York: Free Press.

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### Promoting Mental Health Internationally

Edited by Giovanni de Girolamo, Leon Eisenberg, Sir David P. Goldberg & John E. Cooper. London: Gaskell. 1999. 190 pp. £25.00 (hb). ISBN 1 901242 37 4

This book originated from an international meeting held in Geneva to mark the retirement of Norman Sartorius. It offers an overview of the many achievements of the World Health Organization's (WHO's) Division of Mental Health over the previous 25 years, during which Norman Sartorius had been at the forefront of its