

carries the danger that popularity will be confused with distinction and that the diffident or awkward personality might be penalised.

Should the system continue? Like it or not, I suspect that changes are on the way. I recommend everyone to read this pamphlet before it becomes an historical document and then they can make up their own minds.

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Mental Health Care for Ethnic Minority Groups.

By J. Renshaw. London: Good Practices in Mental Health (380–384 Harrow Road, W9 2HU). 1988. 13 pp.

In the ethnic minorities in Britain there are some people who, for cultural or racial reasons, are particularly vulnerable to mental ill-health, and/or experience difficulty in utilising the established help services. The NHS and the medical profession have been slow to recognise their responsibility to provide appropriate services for those people. That is also true of the psychiatric services in most places, but not everywhere.

Therefore a publication in the 'Good Practices' series on Ethnic Minorities seems like good news. Such a booklet ought to be a guidebook for those who are working in this field and those who are not yet but ought to start. It ought to describe projects and initiatives in various places, in sufficient detail to indicate what is good about them and what general applicability they might have. It should enable the reader to follow up points of interest by further study or personal enquiry.

Sadly, these hopes are not fulfilled in this publication. The author identifies six statutory services (in Birmingham, Bradford, and various parts of London) and eight voluntary agencies (in Wolverhampton, Cambridge, and six in London); we are not told the criteria of inclusion, nor why others (which certainly exist) have been left out. The descriptions of those included occupies a little less than two pages of typescript. Most of them are

sketchy, they contain little or no hard data, there is no attempt at evaluation, and no information that could not be obtained from a telephone call. (Perhaps that is how it was obtained by the author. But without any evaluation, how can they be described as "good" practices?) "Identifies" is scarcely the right word for such references as "*Some institutes for training in psychotherapy incorporate special training in . . .*" or "*A few of the London Boroughs have developed policies to promote appropriate care . . .*" Which ones, for goodness sake? There is no index or list of contact addresses.

These examples of (presumably) Good Practice come towards the end. The preceding eight pages (most of the text) purport to be an overview of what is known about minority mental health problems. They start with a paragraph boldly headed "The facts". Alas for good intentions: the facts quoted are very selective, and some of them are wrong: (Dean *et al's* study did not find a 500% excess of West Indian admissions. Rack, Cox, Rathwell & Phillips have not reported – or even carried out – studies with "similar findings". What happened to all Cochrane's research data? A paragraph which begins "*Some startling recent work . . .*" goes on to claim that black people have "*a staggering tenfold chance of being diagnosed schizophrenic*"; believe it or not, that paragraph ends without giving any identifying reference *at all!*).

The second part ('The Interpretations'), and most of the subsequent parts, are a similar mishmash of opinions, some attributed, others offered as the author's own, many of them very sound, none of them new, some wise, others simplistically banal, many of them already expressed more lucidly in the source-books and articles.

What a pity. There isn't a readily-available guidebook to service provisions in this area, the few technical bibliographies are not easy to find, and the CRE publication with the same aims (*Aspects of Mental Health in a Multicultural Society*) is well out of date. This booklet might have been very useful. But it isn't.

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