

REPORTS AND PAMPHLETS

Child Research Behaviour: A Survey of British Research into Child Psychiatric Disorder and Normal Social Development, 1975/1976
Compiled by D. Shaffer. London, Medical Research Council. Pp 85. Index 2 pp. Available on request from the Medical Research Council.

In 1974 the Medical Research Council agreed to support an inquiry into the state of British research into child psychiatric disorder and normal social development in children. Dr David Shaffer was asked to undertake this task, and his report proved so illuminating that the MRC decided to publish it.

The survey was carried out very thoroughly by means of an initial postal questionnaire followed up by personal interviewing of all the child psychiatrists involved together with a number of other research workers. Particularly bearing in mind that studies related to mental handicap in children and to delinquency were specifically excluded (rather a pity, this, because the need for similar information in these areas is great), the quantity of work revealed is impressive. The report described 195 studies, in all of which work was still in progress at the time the survey was undertaken. Since 1974 many of the studies then being carried out have been published in whole or in part, but there is no good reason to think that the overall volume of work has changed significantly.

What constitutes the right proportion of inspiration and perspiration involved in research endeavour is sometimes a matter of dispute, but everyone agrees that rigorous attention to methodology is always required. Concern for the appropriateness, reliability and validity of methods used has indeed informed child psychiatric research in the past decade or two, and this would seem to have paid off. Questionnaires and interview methods which were adequately tested some time ago are now being extensively employed, and the search for new methods continues. The availability of a new method is often enough to inspire research in an area which has hitherto been thought to be inaccessible to inquiry, and in the recent past this has been particularly true of the assessment of family relationships. Real advances have occurred here, and the application of interview methods of assessing family functioning has led to fruitful results.

Now, with the advent of more methods involving direct observation of infant behaviour and parent-infant interaction, a new breakthrough may occur in

our understanding of the importance of relationships in the development of individual personality. For this to occur, however, improvements in our capacity to record interactional data must be accompanied by increased capacity to analyse such information meaningfully, and progress may well be delayed until this difficulty is overcome.

Perhaps the most characteristic feature of British child psychiatry today is the emphasis on total population studies and the opportunity these allow not just for the gathering of prevalence data but also for the detection of important correlations in unselected samples. National surveys of the type pioneered by James Douglas, and more local surveys such as those undertaken in Newcastle and the Isle of Wight, have contributed significantly, although rather differently, in this connection. The local survey allows more intensive and more highly standardized methods to be used and this is necessary if any but the most superficial family data are to be gathered. The national studies have complemented these with analyses showing regional variation and slender links, for example, between educational methods and achievement which would not be demonstrable with smaller sample sizes. This MRC survey shows how ideas and methods derived from them are now being used in more focused studies of particular groups—for example pre-school children, the physically handicapped, immigrants and the seriously disadvantaged. As understandable concerns about confidentiality become more prevalent, it may become more difficult to replicate some of the work carried out on children not attending clinics, but its value seems well established.

Besides methodological and epidemiological studies, research is summarized under a number of other headings—general clinical studies, psychiatric disorder in children with physical illness, later effects of obstetric and perinatal abnormality, treatment studies, the development of children with family and social disadvantage, school influences on behaviour, personality and individual differences, the development of communication and social relationships within the family, and the development of extra-familial relationships, especially attitudes and role-taking formation. The information under these headings probably provides comprehensive coverage of the more purely psychiatric topics and only somewhat less complete information on subjects more peripheral to psychiatry, such as the development of communication. Anyone thinking of embarking on

research in the field will therefore find this a useful and reasonably up-to-date guide which will rapidly put him in touch with the work of others.

In his overview account of the research, the author points to some of the particular strengths of British child psychiatric research at the present time and, in particular, to its interdisciplinary nature. It is certainly true that, at the present time, sociologists, developmental psychologists and child psychiatrists are working together productively. The input of ideas from psychoanalysts, family theorists and social workers and their direct involvement in scientific research must, however, still be regarded as disappointingly small.

A further current inadequacy lies in treatment studies. These are relatively few in number. Drug studies present fewest methodological problems, although even with these the difficulties are by no means insignificant. They are, however, rarely undertaken, and the evaluation of psychotherapy has hardly begun. More worrying is the lack of research effort going into an understanding of the ways in which families cope with disturbed behaviour within their

own system. This is accompanied by a relative lack of interest in evaluating the effects of primary health care workers (family doctors and health visitors), social workers and teachers in ordinary schools. The Court Report recommendations may, one hopes, do something to remedy this deficiency.

The MRC Report's author finds himself in something of a cleft stick in drawing his final conclusions. Since the state of child psychiatric research revealed is rather healthy, can a case for expansion be made? Certainly, as he points out, a great deal of the work reported is concentrated in just a few centres, and the need for an increase in the number of academic departments of child psychiatry and in the volume of relevant work undertaken by university departments of psychology is overwhelming. This is, indeed, no time for British complacency. It is sadly ironic that the child psychiatrist responsible for compiling the MRC review, himself a gifted research worker, has recently taken up a position as head of a large academic Department of Child Psychiatry in the United States.

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