



of legal cases is provided. Key points that are raised in each chapter are reviewed at the end, along with extensive references. A useful appendix provides further access to public agencies for supplementary information.

As is customary, the style of writing is easy to follow, although a minor complaint is that the layout appears somewhat overcrowded. The target audience of the book rightly is the working health professional, who requires clear guidance on how to resolve ethical problems as they arise in child consultation and research.

**Angela Hassiotis** Clinical Senior Lecturer, Royal Free and University College Medical School, Department of Psychiatry and Behavioural Sciences, Wolfson Building, 48 Riding House Street, London W1N 8AA

### Spirituality and Mental Health Care: Rediscovering a 'Forgotten' Dimension

By John Swinton. London: Jessica Kingsley. 2001. 221 pp. £15.95 (pb). ISBN: 1-85302-804-5.

The author of this timely study, who comes from a background in psychiatric nursing and hospital chaplaincy, is currently a lecturer in practical theology at Aberdeen. His achievement is to have written a practical and, in part, evidence-based study of the spiritual aspects of psychiatric practice, both as they are and as they might become.

Daringly, he begins by attempting to define spirituality. He points out that while institutional religion is in decline, all of us, whether enjoying mental health or not, remain centrally concerned (implicitly or explicitly) with meaning, value, transcendence, connecting with others and becoming – 'discovering who we really are'. Merely to explain away these needs psychologically is to distort and impoverish them. Further, and as the rest of the book shows, 'spirituality can... be studied scientifically'. He adds (and this is a significant and recurring theme), 'although our understandings of science may have to alter to accommodate for the new perspectives that spirituality brings to it'.

He teases out the historical and doctrinal reasons why psychiatrists have tended to neglect or pathologise the spiritual, while acknowledging that within our College ignorance of the impact of the religious dimension on our patients 'is a recognised educational issue'. A useful literature survey is followed by a description of the author's study into the 'lived experience of spirituality in the context of depression'. The somewhat unusual though appropriate methodology is carefully described. The results indicate not only the deep significance to patients

of meaning and value, but also provide moving insights into ways of intervening therapeutically, whether or not we share the patient's world view.

A full discussion of how the different disciplines within mental health might collaboratively both assess and answer spiritual need leads to the claim that spiritual care is in part a form of practical wisdom, which is 'as much a way of *being* as a way of *acting*'.

Whatever our own beliefs, we can no longer afford to neglect the spiritual dimension of our patients' suffering. This information-rich and clearly written book charts relatively unknown territory with which we urgently need to become much more familiar.

**Julian Candy** Trustee, Oakhaven Hospice and formally Consultant Psychiatrist, Aylesbury Vale Health Authority

### The Mental Health Needs of Looked After Children

By Joanna Richardson and Carol Joughin. London: Gaskell. 2000. 133 pp. £14.00 (pb). ISBN: 1-901242-48-X.

This is a high-quality publication from the Focus project of the Royal College of Psychiatrists' Research Unit. Thirty-five contributors writing from a variety of perspectives and agency backgrounds provide a wealth of information relevant to the mental health needs of looked after children. Included are statistics, practice tips, information on services and insights from the experience of the young people themselves. I was particularly interested to read that 23% of adult prisoners and 38% of young prisoners have been in care. Also, that a study examining the prevalence of psychiatric disorders in adolescents in the care system in Oxfordshire found 23% to be suffering from a major depressive disorder.

The bulk of the material is organised around case vignettes. An example is

that of a 7-year-old of mixed parentage, who is currently in a children's home awaiting news of his 8th placement. This vignette is used to raise issues of attachment, number of placements, ethnicity and parental mental illness. Organising the material in this way, although slightly confusing to this crusty psychiatrist, is truer to the way problems attach themselves to people in the real world, and may well be more reader friendly for those at whom the book is aimed. I liked the way that each section ends with further reading, details of relevant current projects and initiatives and where to go for help and more information. The back cover states that the book is aimed primarily at foster carers and social workers and I imagine that it will be most helpful to them. However, I also feel that it contains information that should be available to those commissioning, planning and managing services, and to those in education, mental health and youth justice, whose work brings them into contact with these troubled and troubling young people.

**Tony Jaffa** Consultant in Child and Adolescent Psychiatry, Lifespan Healthcare NHS Trust, Cambridge

### Users' Voices: The Perspective of Mental Health Service Users on Community and Hospital Care

By Diana Rose. London: The Sainsbury Centre for Mental Health. 2001. 120 pp.

*Users' Voices* is the latest in a series of recent studies undertaken by service users into their experiences of mental health services. Like *Knowing our Own Minds* (Mental Health Foundation, 1997) and *Strategies for Living* (Mental Health Foundation, 2000), it is a major contribution to our knowledge of service users' experiences of mental health services. *Users' Voices* consolidates and refines what is now becoming the gold standard of methodology for user-led research, through the training of mental health service users in research methodology. In addition, it reaches some important conclusions about service level and individual care standards that fit closely with the National Service Framework (NFS) for Mental Health.

The project trained over 60 interviewees, all of whom were service users, who then interviewed over 500 service users both in the community and in hospital, at seven sites, urban and rural, across England. This is a methodology that embodies a bottom up approach to research, in which service users draw on their own experience and knowledge of local mental health services. The research questions asked are of direct relevance

