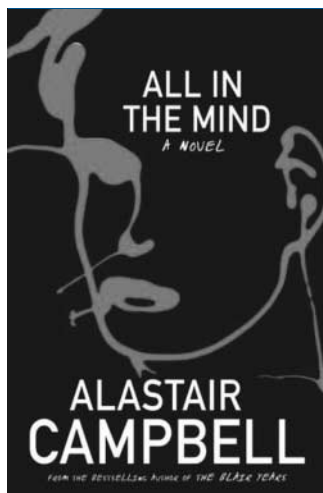


Book reviews

Edited by Allan Beveridge, Femi Oyeboode
and Rosalind Ramsay

**All in the Mind**

By Alastair Campbell.
Hutchison. 2008.
£17.99 (hb). 297 pp.
ISBN: 9780091925789

Alastair Campbell, New Labour's combative former spin doctor, has emerged as an unlikely champion of the rights of people with mental illness. He has recently very publicly discussed his own psychiatric problems – bouts of depression and battles with alcoholism – and he has also campaigned to reduce the stigma of mental illness. In this, his first novel, Campbell describes 4 days in the life of a psychiatrist, Martin Sturrock, a professor of psychiatry in London.

Professor Sturrock uses cognitive techniques and dream analysis, and we sit in with him as he sees his patients and converses with them. The book is structured so that we learn about the individual narratives of Sturrock's patients, as well as finding out more about the psychiatrist and his background. Sturrock's patients include a depressed, reclusive, 30-year-old man, a Kosovan refugee with post-traumatic symptoms following a rape, and an alcoholic cabinet minister who is furtively trying to hide his drinking. The exchanges between the psychiatrist and his patients have a credible air to them. Campbell apparently asked psychiatrists to read earlier drafts, as well as drawing on his own experiences of mental illness and of being a patient. We see how the professor responds to his patients' problems and how he tries to find the right word and tone in his interventions. As in everyday clinical practice, he does not always succeed in making a helpful response and we witness his resultant disquiet and feelings of failure. We also see something of the lives of the patients outside the consulting room, and we hear the imaginary conversations that they conduct with the professor inside their own heads. At times Sturrock is a source of anger, at others he is perceived to be a kindly guide. One patient fantasises that the psychiatrist's own home life must be very content because he seems so sagacious.

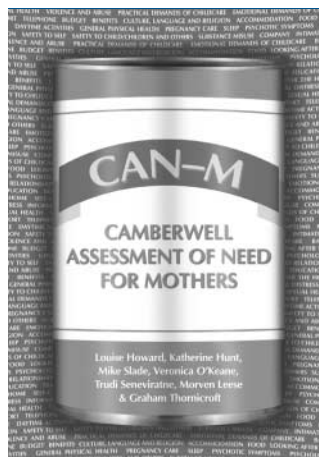
In fact, the professor is in the midst of an existential crisis and is tumbling into a depressive abyss. The novel raises the question of how much time and emotional energy psychiatrists should devote to their patients. In the case of Sturrock, it is clear that his family feels neglected – his wife tells him that he spends all his day listening to his patients but has no time to hear her concerns. Like the fictional detective who is often portrayed as a loner battling with his inner demons, Campbell's fictional psychiatrist has his own torments – he visits prostitutes and is torn

by guilt and the fear of being discovered. Readers may feel that this is a rather hackneyed way of demonstrating the lack of intimacy in Sturrock's marriage. Nevertheless, by the end of the novel Sturrock has succeeded in helping his patients, at a terrible cost to himself.

Campbell has written an accessible and compassionate book that depicts the experience of mental suffering with sensitivity and contributes to the ongoing endeavour to lessen the stigma of psychiatric illness.

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**CAN-M: Camberwell Assessment of Need for Mothers**

Edited by L. Howard, K. Hunt,
M. Slade, V. O'Keane, *et al.*
Royal College of Psychiatrists.
2008. £75.00 (pb). 168pp.
ISBN: 9781904671541

Whether you believe we need needs or not, needs assessment has become a driving principle of modern mental health service delivery and underpins care planning. Several operationalised assessment tools exist, but since its introduction in 1995 the Camberwell Assessment of Need (CAN) has rapidly become a research tool of choice and has spawned several specialist versions.

The CAN-M is the latest of these and succeeds in retaining the simple and accessible structure of the original, while managing that rarest of things, adding without over-burdening. This is important, because one of the great strengths of the CAN is its relative brevity. Of course this can be seen as over-simplification of a concept that is much more complicated than it appears on the surface, but it is clear that the authors of the CAN-M have a sophisticated view of this. They specifically caution that the instrument is designed to identify needs and not to describe them in any great detail.

The CAN-M comes in three formats, a clinical, research and short appraisal version. Service users' and professionals' ratings are recorded and scored separately. The instruments are complemented by authoritative summaries of needs assessment in general, the needs of women with mental health problems around childbirth and the needs of severely mentally ill mothers with children, together with an excellent review of the impact of maternal mental illness on the developing child.

The new domains in the CAN-M, developed following a survey of service users and professionals, are relatively predictable and have face validity (for example, there are domains on the emotional and practical demands of childcare). The results of the development survey and an evaluation survey are described.

The authors suggest that formal training in the use of the CAN-M is not necessary, but they provide a training