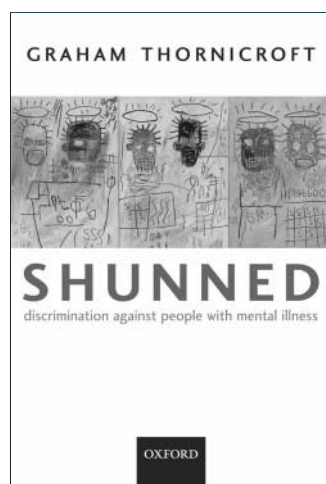


conditions, by ‘the mapping of language onto disorders’. ‘The close study of language contributes to understanding the phenomenology’.

Unfortunately, *Language in Psychiatry* is less successful when it deals with some disorders. It covers pervasive developmental disorders, attention-deficit hyperactivity disorder, psychotic disorders, mood disorders and personality disorders. One wonders why the personality disorder chapter is there – how does their language differ from normal? Schizophrenia is particularly disappointing with nothing explanatory on neologism, stock words and phrases, and so on. There is also the surprising omission of organic disorders such as dementia and delirium, with perseveration mentioned only in the context of schizophrenia. Whereas the linguistics is soundly based, psychiatry is linked to the rather sparse descriptions of DSM–IV rather than to a more general psychiatric text; this is a limitation but it offers the psychiatrist an opportunity to put clinical flesh on these nosological bones. Psychiatrists could better help their patients by adding linguistic analysis, which is well introduced here, to listening to their patients.

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Shunned: Discrimination against People with Mental Illness

By Graham Thornicroft.
Oxford University Press. 2006.
328pp. £24.95 (pb).
ISBN 0198570988

Shunned is a book exploring discrimination against people with mental health problems. It asks a lot of questions, quotes many mental health service users, looks at a huge number of research findings and comes up with some answers. It seems to have been written with a lot of passion for finding ways to defeat the inequality faced by those with mental health difficulties.

As a source of information on what research has been done to study stigma and discrimination, it is second-to-none. I cannot imagine that there is a recent academic paper in the English language that has not been tracked down and studied. It certainly filled in a lot of the holes in my knowledge. However, for all of the quotes from service users, the language and approach does not seem to be aimed at the general public.

The book is divided into areas of the mental health service user's life such as family, neighbours and work, and asks questions about the evidence for discrimination in each of these. There are frequent passages from individuals and their families about aspects of their lives in their own words. It then widens out to cover areas of society, for example mental health services and the media. These are also explored for their attitudes. Towards the end of the book there are suggestions for action that individuals and groups might take to defeat such inequality.

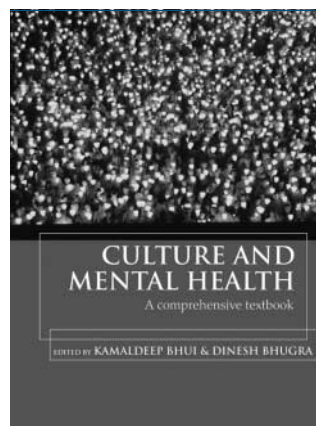
Although I enjoyed reading *Shunned*, I found myself getting irritated by a couple of things. First, the use of quotes from service users/consumers seems to be more important than their cultural context. There are pages where the text discusses one part of the world while the quotes are from another. Does culture count for that little? Also, the same quotes are sometimes used more than once, in one case on two subsequent pages.

The other thing I was uncomfortable with was the assumption that seems to pervade the book that all service users want the same things and want to be integrated into society. There are a substantial number of people among mental health service users who delight in being different, wacky and non-conformist, and others who are happy to live in what others would consider to be a lonely way. We have to acknowledge and explain these people to the general public as well.

Overall, I think this book will be of value to everyone working in mental health. Indeed, it should be obligatory reading for anyone thinking of running an anti-stigma or anti-discrimination campaign so that they can avoid things that have been shown not to work. It could also be a starting point for debates among service users on how they really want to interact with their society. I do not agree with all of it, but I am very glad I have read it.

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Culture and Mental Health. A Comprehensive Textbook

Edited by Kamaldeep Bhui
& Dinesh Bhugra.
Hodder Arnold. 2007.
376pp. £99.00 (hb).
ISBN 9780340810460

All of medicine and medical conditions have to be considered within the context of culture: the culture in which patients and their families live; the culture that has produced the healthcare providers; and the culture in which the doctor–patient encounter is negotiated. From a consideration of lifestyles, sociocultural values and ideas of health, to acceptance of and adherence to medical interventions, both physical and mental health issues are intricately tied to the culture in which health or ill-health is experienced. However, culture has a particular salience for mental health not least because of the fact that many mental disorders are still defined relative to an implicit or explicit cultural norm.

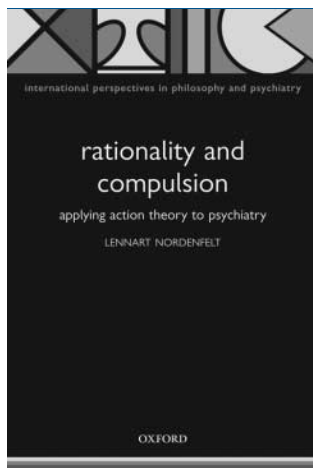
Given its importance to mental health, it is surprising that the traditional way of considering culture often does not go beyond a discourse on ‘culture-bound syndromes’ or on ‘masked’ depression or ‘somatisation’. Typically, an insufficient focus on the various contextual factors that may produce differences in the experience and expression of psychological distress leads to the hood being taken for the monk: differences that have their origin in poverty or in the ways health systems are organised are ascribed to the broader culture in which patients live.

This book represents a departure from that beaten track. A textbook on culture and mental health that has chapters on epidemiological method and mental health law is truly unique. This book is not about the reification of 'culture-bound' syndromes nor is it constrained by a narrow definition of culture. Rather, it presents evidence, much of it from legitimate cultural representatives, for why the experience of psychiatric syndromes and the treatment for such have to be considered within the context of the culture of the patients experiencing such syndromes.

The result is an impressive opus that lives up to its promise of being comprehensive. The first part of the book has chapters dealing with basic sciences and provides a much-needed grounding for readers who want to be able to critically review what they read in the literature regarding, for example, cross-cultural studies. The second part has chapters, of varying lengths and details, dealing with cultural aspects of mental health in various regions of the world. However, the section flips between nations (Russia, South Africa, etc.) and regions (West Africa, South Asia, etc.), thus, perhaps, losing some consistency of organisation. That notwithstanding, this part of the book is a treasure trove, drawing on local experiences and sensitive analysis of the ways in which culture, in the broadest sense, shapes the experience of mental disorders and the delivery of services to those affected. An informed discussion of culture in the context of mental health must avoid inflation of differences as much as their deflation. This book strikes the right balance and deserves wide readership among practitioners and trainees.

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Rationality and Compulsion

By Lennart Nordenfelt.
Oxford University Press. 2007.
224pp. £29.95 (pb).
ISBN 9780199214853

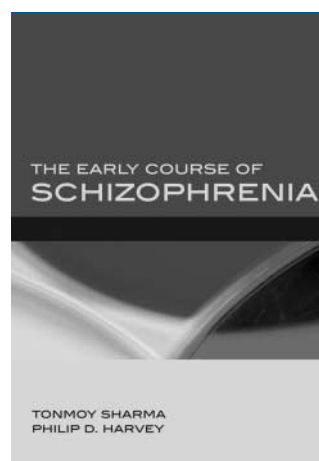
Rationality and Compulsion is a very useful resource for those philosophers of mind who might wonder what the practical dimension of their work is, and to those psychiatrists who are interested in the philosophical issues raised by the study of mental disorders. Nordenfelt has the great merit of writing clearly and developing the book around a very transparent structure. First, he combines his insights in philosophy of action and philosophy of health to create a solid theoretical apparatus, and then draws from that some conclusions about rationality that he applies to the case of compulsion. The theses put forward are well-argued and overall convincing, although the reader sometimes gets the impression that they are being rushed through a very intricate terrain and not made totally aware of the implications of what they are tempted to agree with. But this is inescapable in an ambitious work such as Nordenfelt's.

My concerns are of a different sort. The book does exactly what it says on the tin: it applies action theory to psychiatry. Methodologically, this is a fairly safe option. Take a theory which explains when certain actions are rational, and use it to answer the question of whether a certain type of behaviour occurring in a certain type of mental disorder can be legitimately characterised as an instance of intentional behaviour which satisfies the relevant norms of rationality. If you think the theory works, and has advantages over its competitors, then you will get a good illustration of it by throwing in some interesting examples from psychiatry, where an initially puzzling phenomenon is made clearer by the application of the theory of your choice.

However, this is a classic case of imposing independently motivated theoretical distinctions onto real-life problems without properly acknowledging that the analysis of those problems can feed back into the theory. The study of mental disorders does not simply illustrate how elegantly our theoretical commitments can provide answers to questions about intentionality and rationality. Rather, it helps us redefine what intentionality and rationality are. Regrettably, there is little of this feedback loop in Nordenfelt's work.

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The Early Course of Schizophrenia

Edited by Tonmoy Sharma
& Philip D. Harvey.
Oxford University Press. 2006.
264pp. £29.95 (pb).
ISBN 0198568959

There was a shift surrounding schizophrenia in the latter decades of the 20th century which continues today, away from a research and therapeutic nihilism, towards optimism in gaining understanding of aetiology as well as effective treatments. Quite right too, you might say. The lack of a single genetic culprit being identified has not dented this enthusiasm, and the scope and quality of research in the area is vast and increasing.

The market for new texts in schizophrenia, therefore, is growing at an equal pace, and it can be difficult to decide which should be a priority to read (and to buy).

Many a text on the market is little more than a collection of loosely connected review papers and conference transcripts which make the heart sink on opening – what can be inspiring to listen to is not necessarily easy to read.

The Early Course of Schizophrenia, however, is much more than this and is one of the best on the market at present. It is clear in its aims and scope, focusing on recent advances in basic and clinical neurosciences relevant to schizophrenia. It is easily accessible in size, yet manages to cover most individual topic areas in considerable detail.