

As diverse and colourful as sex itself

First and foremost, let me just say what a great place to visit the Wellcome Collection is. Conveniently located opposite Euston Station, it's the perfect place to pop in, feed the mind, enjoy the excellent café, browse the bookshop. The Institute of Sexology exhibition runs until 20 September and promises to evolve over that time, with new projects, commissions and events, along with the opportunity for visitors themselves to contribute to the debate around the meaning of sex research in the 21st century.



The Institute of Sexology
Wellcome Collection

Of course there is already plenty on display, enough to while away an eye-opening hour. Presenting examples from the last 150 years, The Institute of Sexology considers the different methods of researchers, activists and campaigners who have taken a scientific approach to the study of sex. Quoting from the programme, 'Whether inspired by the desire to cure "perversions", liberate repressed desires or track disease, these individuals attempted to lift the perceived taboo on the discussion of sex and present it as a legitimate topic for enquiry. The questions they raised, sometimes at great risk to themselves, are still fuelling the debates taking place today.'

These brave pioneers are as mixed a bag as sex itself can be. Consider first the Austrian psychoanalyst Wilhelm Reich. Inspired by Sigmund Freud's desire to treat 'the neuroses springing from our civilisation', Reich – shaped by his personal experience of war and poverty – believed that suffering was caused by external, socioeconomic factors, and that psychoanalysis must take a political stance. Sexual liberation was his path to societal change. How would he achieve this? Well, he discovered blue forms glowing in a culture of ocean sand that had accidentally been heated, and he sought to harness this 'orgone' energy in insulated Faraday cages. In the American post-war era, Reich's 'Orgone Accumulator' became, according to the exhibition, 'an unlikely emblem of self-expression'. It's basically a big wooden box.

Walking round the exhibition, you can compare and contrast Reich's bizarre, almost new-age approach with large colour photos of couples from Bolton who have devised far more prosaic and mechanical routes to sexual expression.

Freud – he of 'sometimes a cigar is just a cigar' fame – looms large in one corner of the exhibition, with his desk and various suggestive antiquities from his personal collection. Again useful and interesting contrasts are evident, this time with the work of Marie Stopes, who built her reputation on provision of explicit practical advice in the field of birth control. 'Don't please think about your subconscious mind', she once said: 'All the filthiness of this psychoanalysis does unspeakable harm.'

There are plenty of other fascinating and influential characters to meet within the exhibition, including Margaret Mead, Alfred Kinsey, Magnus Hirschfeld, Havelock Ellis, William Masters and Virginia Johnson. But for me the centrepiece of the exhibition is Sharon Hayes's film exploring sexuality from the perspective of students at an all-women's college in western Massachusetts. Described as 'part documentary, part lyrical group portrait', the film explores how underlying political conditions inform people's attitudes and self-definition. The students interviewed reveal the reality of living within an institution regarded by some as anachronistic and others as a 'hot-bed' of lesbian activity and activism. Throughout its 38-minute running time, the film reveals sex to be as much about politics as personal inclination. As both come in all hues, it is no wonder this exhibition is such a varied and colourful one. Do visit, take in a drop-in event, browse the archive and appreciate this 'free destination for the incurably curious'.

The exhibition runs daily except Mondays. Find out more at www.wellcomecollection.org/sexology and join the discussion on Twitter using #sexology

Reviewed by Jon Sutton who is Managing Editor of *The Psychologist*



Mystery and memory loss

Elizabeth Is Missing
Emma Healey

Elizabeth Is Missing takes you into the world of Maud, an 82-year old lady, who may have dementia, we are never explicitly told. The novel combines the present day and a time around 70 years ago, linking the disappearance of Maud's friend Elizabeth with the still unsolved disappearance of her sister.

So how do you solve mysteries when your memory is poor? Maud's strategy is to write everything down, but the only problem is she can't always remember what her notes mean. Maud's frustration, combined with the exasperation of those around her, documents the impact of dementia on the whole family.

Throughout the book, we see Maud's memory deteriorating: she goes from shopping for herself, although her purchases seem to revolve around tinned peaches, to being unable to recognise her own daughter. This novel successfully intertwines two mysteries and the fear and confusion of an elderly lady whose memory problems mean that as she is providing clues for the reader, she is forgetting what has just happened. Maud's feelings are a clear focus throughout the book as she doubts her own memories based on the reactions of others: at times, her self-blame can be rather distressing to read.

Anyone who works with elderly populations, has a family member with memory problems, or would simply like to learn a little more about the experience of living with dementia, should be advised to read this well-researched book. Key lessons to be learned include the need for patience and humour when interacting with people with dementia.

Penguin; 2014; Hb £12.99
Reviewed by Alys Griffiths who is a PhD student at the University of Manchester and Research Assistant at Bradford Dementia Group, University of Bradford



Much to offer

Towards Organizational Fitness: A Guide to Diagnosis and Treatment
Gerry Randell & John Toplis

Gerry Randell and John Toplis have grappled with the theory and practice of organisational diagnosis and treatment for decades. In *Towards Organizational Fitness* they propose that: 'Work organizations can lose their fitness and become sick, just as people can' (p. 1). This useful metaphor is perhaps taken too far in the final chapter, however, in which a proposal is made for the creation of a Manual for Organizational Diagnosis, a putative equivalent to the DSM series produced by the American Psychiatric Association. Given the manifest differences between a human individual and an organisation, the analogy may break down when subjected to careful analysis.

Nevertheless, Randell

and Toplis provide extremely useful background information on the need for organisational diagnosis and treatment, explaining the importance of a thorough approach and evaluation of possible strategies and treatments when organisations get 'sick'. The book is intended for managers in organisations and it is highlighted as not being an academic text. Clearly though, the book may be of interest to organisational consultant practitioners and occupational psychologists who might very well recommend the book to managers who seek their services.

The authors are to be commended for their concrete examples and

checklists of actions to be considered in each of the phases of diagnosis and treatment options. In addition, a particularly useful pro forma is provided to follow up after an organisational change intervention has been implemented in order to conduct the often omitted but crucial evaluation stage, which provides the answer to the ultimate question: Was the intervention effective? This book has much to offer the manager motivated to learn more about why their organisation is not as fit as s/he would like it to be.

I Gower; 2014; Hb £59.75
Reviewed by Dr Renée Bleau CPsychol, AFBPsS
who is an independent organisational consultant



Gritty, crude and joyful

How to Build a Girl: A Novel
Caitlin Moran

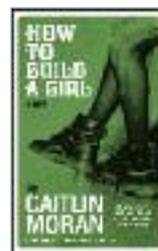
The irrepressible writer and journalist Caitlin Moran continues 'putting the fun into feminism' in her first adult novel. Described by Moran as effectively written to 'give the Big Sex Talk to my 13-year-old self', this charts the self-discovery of teenager Johanna Morrigan in 1990s Wolverhampton. It is semi-autobiographical (as is typical for Moran) and asks the question; 'What do you do in your teenage years when you realise what your parents taught you wasn't enough?' Cue a voyage of exploration and hilarious yet catastrophic errors.

Johanna emerges as a teen from a large, eccentric family in a cramped council house into the convoluted world of music journalism. The book centres on her quest to ultimately rebuild herself, from a 'fat', awkward teen who 'talks like Elvis' to something else, something better. Things do not go smoothly. After quitting school when offered a music critique role, she develops a fast-talking, fast-drinking, Slash lookalike writing alter-ego 'Dolly Wilde' and quickly finds herself acting up to this adult persona. What follows is a modern teenage cautionary tale in every sense: from lighter aspects of embarrassment, male idolisation and music obsession to darker

tales of underage drinking, risky sex, experimental drug use and self-harm. Throughout all these experiences, Johanna is constantly learning and reshaping herself. Although set in post-Thatcher 1990s Britain, the experiences and angst experiences absolutely still resonate in the 21st century.

This is not a book for the faint-hearted! Although it describes teenage experiences, it is billed as an adult novel and is definitely suitable for an older age-group. It is gritty, crude and you will feel immense feelings of embarrassment, frustration and joy at the situations Johanna gets involved in. However she is extremely likeable and zany, living and learning throughout her experiences. Overall, it is about the two most important words a girl or woman can ever say 'Yes' and 'No'. Although she may make choices that she may regret, they were her choices, and isn't that what counts?

I Ebury; 2014; Hb £14.99
Reviewed by Emma Norris *who is a PhD student at University College London and Associate Editor (Reviews)*



A killer podcast

Serial
WBEZ Chicago

What were you doing exactly six weeks ago today? Where were you? How did you get there? Who did you speak to? So begins the true-crime podcast that has taken the internet by storm. The difficulty we experience in remembering accurately, and our natural inclination to trust this faulty mechanism, is one of the themes of *Serial* (www.serialpodcast.org). A spin-off from an American public radio service, *Serial* began broadcasting in October last year, and is released weekly via iTunes and on the website.

A friend told the journalist Sarah Koenig about the murder of 18-year-old Hae Min Lee. Hae died in Baltimore, on 13 January 1999. The friend said that the man currently behind bars for the crime, Hae's ex-boyfriend Adnan Syed, was definitely innocent. Adnan was there because his lawyer, later convicted for corrupt practices, had deliberately botched the case to earn more money on appeal. Koenig's interest was caught: and so began a year-long investigation that has spread far beyond a possibly dishonest lawyer.

Each episode of the podcast offers us fresh details, through current interviews, archive recordings (including some of the original police interrogations of Adnan), examination of court records and attempted reconstructions. Phone records are pored over, but so too are motives. No stone is left unturned, from the days leading up to the murder, and the day of the murder itself, to the weeks and months after. We hear many voices and many different recollections. Some people cooperate with Koenig; frustratingly, others do not. Multiple and contradictory viewpoints are teased out, as Koenig attempts to construct a story to resolve the inescapable conflict at the centre of the case: someone must be lying.

Serial reflects our basic human desire for a story: for Adnan to be innocent, there must be another, different, story. At one point, she worries that she is being taken in by a charming sociopath. We have to draw our own conclusions. And whilst not specifically either a psychological or even forensic study of a murder, *Serial* is fascinating for anyone interested in the stories we tell ourselves.

I Reviewed by Kate Johnstone *who is a postgraduate student at University College London*



Does '1 in 4' actually reinforce stigma?

Martin Seager reviews his own involvement in an episode of BBC Radio 4's *All in the Mind*

I was recently offered the opportunity to go on BBC Radio 4's *All in the Mind* to make what I consider to be a vital point about a fundamental flaw in the way our society is campaigning against stigma in mental health. I wanted to argue that by using the headline statistic '1 in 4' to refer to all people who have mental health problems, campaigners are more likely to reinforce stigma than reduce it.

This is for two simple reasons. First, by using a single statistic for mental health collectively, something never done with physical health, it is being implied that mental health only applies to a minority, albeit a substantial minority, of people. This is a category error, treating global mental health as if it were the equivalent of specific physical disease and therefore a subcategory of health rather than an aspect of all health. Second, by using statistics in this way we reinforce the false notion that people either have or do not have mental health conditions in a binary fashion. By doing this we encourage people to think 'I am not the one with the mental health problem; I am one of the normal majority, the 3 in 4'. By using figures in this way we exclude the more valid proposition that mental health is always an issue for all people and that we are all on a spectrum of mental health throughout our lives. We are never entirely free of the same anxiety, panic, despair, obsessionality, self-dislike, emotional insecurity, grandiosity and suicidality to which some people are more prone (usually because of more extreme or painful life experiences from childhood onwards). By reporting mental health phenomena as 'binary' rather than as 'continuous' we are not only perpetrating bad science, we are undermining our own worthy humanitarian objective.

I was given the chance to debate these issues in the studio at BBC Broadcasting House with Sue Baker, the director of 'Time to Change', a programme dedicated to ending mental health discrimination, led by the charities Mind and Rethink Mental Illness. Presenter Claudia Hammond and her producer Fiona approached the subject very professionally, and I felt that I was given a platform to get across something I felt passionate about and that was perhaps not easy to articulate in a short space of time. I believe (perhaps because of my own grandiosity!) that I won the debate and that Sue had no real answer to my points, saying that she agreed

with me in principle but felt that the public were not yet ready for such a powerful message. I still cannot agree that 'baby steps' are what is needed to change attitudes, and I believe strongly that even baby steps need to be in the right direction.

My contribution was pre-recorded, and certain things were cut out, primarily for reasons of time. For example, I had made the simple point that in 30 years of NHS practice I never saw anyone who sought help with a serious mental health problem who didn't

also mention other people in their lives whose mental health was more concerning and yet were not seeking help at all. Where were these other people included in the statistics? Were we also counting in these figures the not negligible number of powerful people in our society, in our businesses, schools, hospitals and other organisations that bullied others and exhibited signs of 'personality disorder'? Were we only counting people who could accept their need for help when these were usually mentally healthier than those who didn't? I also didn't have time to say everything that I felt was relevant, such as the fact that men don't seek help as easily as women... where is gender in crude statistics such as '1 in 4'?

On the whole I had a very positive experience of contributing to the programme, which was broadcast on 11 November (listen at www.bbc.co.uk/programmes/b04ntvm). Some previous radio experience helped me to be more comfortable with the technology and familiar with studio etiquette. In particular, I was grateful to Claudia and Fiona for giving me the chance to put across a more positive and normalising vision of mental health campaigning. I was allowed time to read out a list of mental health issues that include all of us – 4 in 4 – and I would like to conclude by reiterating the list here.

- If you ever
- I got rejected, neglected, hurt or badly misunderstood by the adults responsible for your care when you were growing up
 - I experienced favouritism or bullying at home, school or work;
 - I felt like an outsider;
 - I looked in the mirror and felt unattractive;
 - I got betrayed or hurt in a love relationship;
 - I comforted yourself with food, drink, drugs, betting or other activities;
 - I experienced traumatic loss of someone or something much loved;
 - I pretended or fantasised that you were much more adored, important and special (as a good or bad figure) than was true;
 - I felt terror of death, failure or obscurity;
 - I doubted the point of your own existence or wished that you weren't there; or
 - I got devalued or put down because of your looks, accent, class, nationality, race, gender or religion

...then you are indeed suffering from a mental condition. It is called the 'human condition'.

I Martin Seager is Honorary Consultant Psychologist with the Central London Samaritans (mjfsseager@tiscali.co.uk). Read more from Martin in our June 2014 issue <https://thepsychologist.bps.org.uk/volume-27/edition-6/being-man-putting-life-death>



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Actually rather good

Great Myths of the Brain
Christian Jarrett

Since the early 2000s, neuroscience has enjoyed ever-increasing acceptance by the mainstream. We can't seem to go a single week without news of some study or new project that has uncovered or promises to uncover something exciting about the inner workings of the brain. But the downside of this omnipresence of neuroscience is that the concepts and terminology it uses are constantly being co-opted. Pseudoscientists, self-help gurus, scaremongering columnists or basically anyone with a product or agenda to promote can be relied upon to invoke brain plasticity or add 'neruo-' to words to make them sound more credible.

Because of this, Christian Jarrett's *Great Myths of the Brain* seems not only a timely book, but actually a necessary one. Jarrett has attempted to catalogue and categorise all the well-known and not-so-well-known myths about the human brain from past and present, and explain why each one is wrong (or at least inaccurate)

using actual neuroscientific knowledge. Despite the mammoth nature of such a task, he succeeds quite admirably. The book is also very impressive in its scope, covering things like the historical notion that the heart was actually the source of consciousness, to modern-day problems like how fMRI scans are believed to be far more powerful than they actually are. The writing is often very clear but without compromising accuracy or thoroughness, which is an impressive feat in its own right.

But there are some issues with *Great Myths...*, which is perhaps to be expected when you consider all that it's trying to achieve. Jarrett's writing style means he comes across as something akin to an earnest but friendly lecturer, which suits the content well but could

prove a bit off-putting to more scientifically experienced readers. But on the other hand, there are several instances where the content gets more technical than the lay person could realistically keep up with, so it's difficult to say what sort of reader *Great Myths...* is actually aimed at.

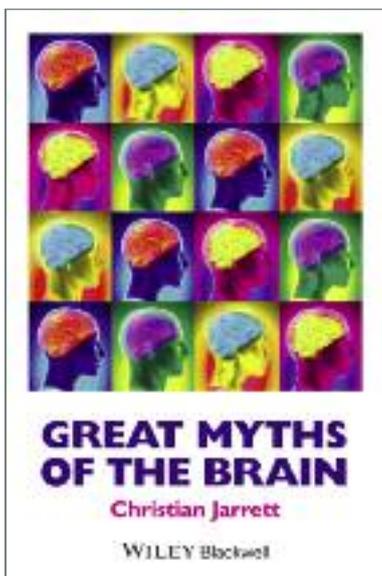
Jarrett also makes a noble effort to group specific myths into relevant sections, but there is some inconsistency with how each section is presented. It makes sense in context, but can be a bit jarring. Jarrett also repeatedly makes the point that our understanding of the brain is nowhere

near as clear-cut as many seem to think, but by labelling things 'myths' it suggests we know they're total fiction, which undermines this point somewhat. Also, alongside notorious fallacies like 'we only use 10% of our brain' are less familiar things, like how language processing was believed to be distributed throughout the brain. It would be a cruel irony if people ended up

learning new brain myths from this book dedicated to combating such things.

But these issues are relatively minor. All in all, *Great Myths of the Brain* is such a relevant and necessary book that provides such a valuable function in modern times, it should be recommended even if it was dreadfully written. Luckily, it isn't. It's actually rather good.

█ *Wiley-Blackwell; 2014; Pb £14.99*
Read an exclusive extract from the book, on the 'we only use 10 per cent of our brain' myth, on our new website at tinyurl.com/obt6u7r
Reviewed by Dean Burnett who is a doctor of neuroscience, comedy writer and blogger (see www.theguardian.com/profile/dean-burnett)



A historical snapshot



Broadmoor
ITV

With film cameras allowed in for the first time, this two-part series gives a glimpse into the Berkshire high-secure psychiatric hospital: Broadmoor. Widely reputed as 'Britain's most notorious institution', it is home to the most dangerous and violent male offenders, holding grave or immediate risk to the public or themselves. Unlike with a prison sentence, Broadmoor patients have no set release date. It hosts 15 wards of varying security levels to reflect patients' current mental state and to gently rehabilitate them towards discharge. However, relapse is common, according to behavioural events and medication lapses.

The sensational nature of the crimes and criminals concerned is emphasised throughout. Anonymity is a prominent feature throughout and key to the filming negotiation, with 'front-page news' criminals interviewed with blurred faces and pseudonyms. Background stories are discussed in depth by patients, with horrific stories of childhood sexual abuse, extensive time in care and self-harm.

The series does make positive efforts to represent the turbulent lives of patients to aid understanding for the viewer. However, I feel that an over-focus on past crimes and illness is at the cost of raising awareness of drug and talking therapies used in Broadmoor. Whilst physical restraints and patient rejection of medication is presented, therapies are not shown at any length by psychologists and workers.

Although the second episode was billed as showing how workers prepare inmates to leave, no strategies are actually shown in any depth. Given this unique access to the institution, more emphasis could have been given to rehabilitation efforts practised across support staff. However with Broadmoor scheduled for relocation to a brand new facility, this series does still unarguably provide a historical snapshot of the institution's closing phases. [See also our 'Looking back' article a tinyurl.com/lszx7d3]

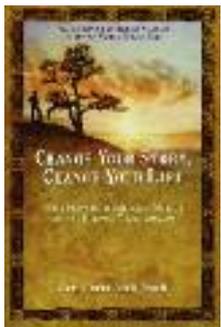
█ **Reviewed by Emma Norris** who is a PhD Student at University College London and Associate Editor (Reviews)

Coherent and accessible



Change Your Story, Change Your Life: Using Shamanic and Jungian Tools to Achieve Personal Transformation
 Carl Greer

Change Your Story, Change Your Life, by Carl Greer, offers a unique insight into a unified psychological and spiritual approach for personal growth. The book combines mystic shamanism and Jungian analysis to produce a fascinating take on the influence of the unconscious mind. Greer argues that the narrative of an individual's life can be used as a mechanism for reflection and mindful change. Through the use of Jungian strategies such as journaling and dialoguing with the self Greer argues readers can better choose the path their life takes. The book's fascinating form of mystic psychoanalysis is genuinely enjoyable, and remains accessible to psycho-savvy academics and less experienced readers alike.



Greer begins by thoroughly introducing the concepts of shamanism and the personal narrative, before highlighting to readers how their current life may be being influenced by themes and patterns of experience. This section sets the reader up well, creating a palpable

understanding of the book's message, which leads smoothly into ways in which the future of this story can be changed. The book takes this concept beyond assisting individuals, moulding a vision for entire societies which can shape their collective futures.

The novel material and depth of thought creates an engaging text that challenges more stringently academic interpretations of real-life experiences, and offers a consistent alternative through transcendental thinking. The arguments laid out are not demanding, and *Change Your Story, Change Your Life* is unoffending and unapologetic in its more spiritual approach to personal growth. Whilst the language of spiritualism in Greer's book may disagree with more ardent academic standards, it remains coherent and accessible; and even experienced psychologists can be ensnared by the novel interpretations and interesting arguments presented.

| Findhorn Press; 2014; Pb £11.99

Reviewed by Rory McDonald who is a writer and researcher at the University of Central Lancashire



The tip of the iceberg

The Paedophile Next Door
 Channel 4

'Paedophiles, it seems, are everywhere in Britain today... Predatory paedophiles operating at every level of society... the well-known cases are just the tip of the iceberg.' After this rather alarmist opening from historian and documentary film maker Steve Humphries, I waited for the 'this is the popular view, but the reality is more complex', but it never came.

According to Humphries, 'the evidence suggests they are all around us'. In fact, retired policeman DC Jonathan Taylor tells him, 'We haven't even got in the boat to go and see the tip of the iceberg.' More authoritative evidence wouldn't have gone amiss, nevertheless I can agree with Humphries that 'to keep our children safe, we need to understand much more about paedophiles'.

Humphries meets Dr Sarah Goode, a former lecturer in medical sociology, who feels she lost her job due to her controversial views on 'a completely hidden population' of so-called 'virtuous paedophiles': men who are committed to living a law-abiding lifestyle. The filmmaker is initially sceptical, but he comes to accept that we should encourage as many potential paedophiles as possible to seek help before they become offenders.

Pushing this perspective persuasively is Eddie – actually his real name I think, with Humphries describing him as 'brave or reckless'. Eddie describes his rough 'age of attraction' as 'four, five, six'. He doesn't want to act on his impulses, he can't imagine he would have that within him, but he is concerned that 'people are waiting for you to offend before they help you'.

Forensic psychologist Professor Corine de Ruiter appears briefly in order to compare paedophilia to having diabetes: 'It doesn't go away, you have to deal with it.' Dr Goode argues that 'somebody who realises that they are a paedophile has to make a choice about how they are going to live their lives. At the moment, the only message that they're hearing from us in society is "you're a paedophile, you're an evil monster, we hate you"... that's not a deterrent, that doesn't keep children safe.'

I would have liked the film to do more to explore the implications of these views for encouraging people to come forward for support and treatment, and what that would actually involve. But instead of looking forward, Humphries tended to hark back to the 1970s and 80s, in search of the climate and power structures that have apparently allowed paedophiles to lurk around every corner.

There was a lot to cram into one hour here: the documentary could easily have stretched to two parts, and Eddie probably deserved an hour all to himself. As it was, the compressed offering left me frustrated. Dr Sarah Goode was described as a 'lone voice in Britain in her attempt to change our attitude towards paedophilia'. I seriously doubt that she is, and I longed to hear more from professionals and practitioners on the front line about what interventions are currently in use. I thought Circles, described in passing as 'a community scheme that claims a 70 per cent success rate in preventing reoffending', deserved more detailed consideration, as did Prevention Project Dunkelfeld, a German effort to provide clinical and support services to those who are sexually interested in children (see Letters, p.2).

A film like this is bound to be disturbing, uncomfortable. It should be. But almost as disturbing as the survivor testimony and interview with Eddie was the lack of detail on how Humphries' conclusions could be put into action.

| Watch at www.channel4.com/programmes/the-paedophile-next-door

Reviewed by Dr Jon Sutton who is Managing Editor of *The Psychologist*



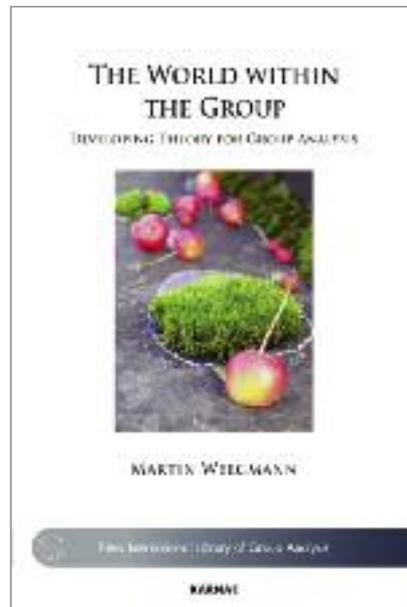
Where in the world is therapy?

The World Within the Group: Developing Theory for Group Analysis
Martin Weegmann

For many psychologists, taking context into account is taken for granted. This is also true for most applied psychologists. However, this was not always the case and powerful reductionistic theories, whether to the brain, instincts or drives, still exist. There have been powerful critiques of reductionism from philosophy for almost a hundred years. Some of this has entered psychology, while some of it has not.

Group analysis had its origins in psychoanalysis, which would in its worst form reduce everything to the unconscious. Yet group analysis did not do this and embraced social theory in the broadest sense. However, it has also mostly steered clear of philosophy. Martin Weegmann, in this engaging and penetrating book, challenges group psychotherapy to look again at itself and renew itself through philosophy.

As such, the themes are not surprising. What is the human subject and how are they formed? As humans we may be social beings, but does this stretch to the very fibre of our sense of self? Equally if we are formed by the social, how do we respond to the social? Thus politics is not something that merely happens in Westminster and affects our services and pensions. It is there in our clinical spaces, in



the ways we conceptualise problems and it is also buried in minutia of the symptoms we see and respond to both in ourselves and in the individuals we seek to help.

Weegmann devotes an entire chapter to those who are excluded by society and in the past by psychotherapies. So homosexuals, addicts and the homeless are given attention, and the social matrices that surrounded these exclusions are explored. While it might horrify us now that our theories denounced and avoided these individuals, the more important and challenging questions are: Who are we excluding now? Who do you or your service reject and pass to others? Who do you think can't be helped? These are difficult questions, but they are the challenges of this book.

So although this book is about group analysis and group psychotherapy, it is really a challenge to all psychologists to consider who they are, where they stand and how they want to conduct themselves in a complex world. For Weegmann argues, the world is not out there, it is right here and in all of us. I would add that it is also an

excellent introduction to some complex philosophy.

| Karnac Book; 2014; Pb £24.99

Reviewed by Ryan Kemp who is a clinical psychologist at CNWL NHS Foundation Trust

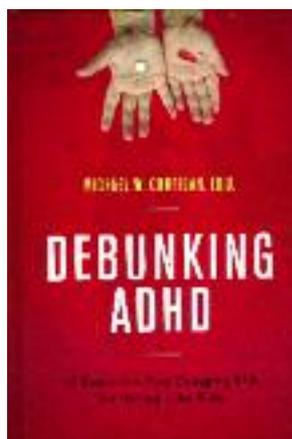


Labelling children

Debunking ADHD: 10 Reasons to Stop Drugging Kids for Acting Like Kids
Michael W. Corrigan

In *Debunking ADHD* Michael Corrigan sets out his stall very quickly in a polemical style by quoting ADHD-related figures such as '41% increase over the last decade' of the diagnosis (page xi). He links with the current 'medicalisation of childhood' debate by noting that ADHD is one of a stable of 'highly questionable' labels that are either misdiagnosed or over-diagnosed. Many researchers are in agreement with Corrigan that childhood is being pathologised and that we are increasingly looking at children with a 'clinical gaze' further exacerbated by the DSM-5.

This book is written for parents and details pertinent issues such as the side-effects of the medication prescribed for



ADHD (e.g. high blood pressure, diabetes, facial ticks, depression, etc.). For a progressive practitioner in the UK, what is disappointing about the book is that he references IQ as a way of highlighting normal

distribution when discussing what is standard behaviour and uses language such as 'mentally challenged' (p.11). If labelling children is the central issue that we are discussing, IQ has to be part of that debate as does the language that surrounds those children who require support to access the curriculum or their social context better. It is worth noting that Corrigan states later in the book that educators cannot solely rely on standardised tests to aid the support of young people (p.171).

Writers on education topics acknowledge the importance of whole-school approaches to supporting mental health, emotional and social development as well as school achievement and how these can be used to work with children

and young people with a variety of profiles. Corrigan in parallel with this notes the need for good relationships within schools and particularly in the classroom setting. He further suggests schools want a reflective leadership team that influences the ethos coupled with a well-rounded curriculum.

Corrigan's book strikes the right note by moving away from a 'within child deficit' understanding of children and young people but possibly needs to consider the bigger picture of labels.

| Rowman & Littlefield; 2014; Hb £18.95

Reviewed by Maura Kearney who is a Depute Principal Educational Psychologist in Glasgow