

Book Reviews

Delivered From Distraction

Hallowell, E.M. and Ratey, J. *Ballantine Books: New York, NY, 2005. 416 pp. CA \$35.95.*

As a child psychiatrist, I'm often asked to see children who are excessively distractible, impulsive, and restless, who have difficulty focussing and who may have academic problems. Their parents are often at their wits end saying he (and it's usually a boy) doesn't listen or do what is asked. It is my practice to do a comprehensive assessment and get parents to read one of a number of books on Attention-Deficit/Hyperactivity Disorder (ADHD). It has not been uncommon to have the fathers come back and tell me that the books are describing them and it's been a relief to know they are not stupid or bad. The odd one will shamefacedly tell me that they took their child's stimulant medication and that it made a huge difference being able to start and finish a project without getting side tracked.

Studies suggest that about 5-8% of a random sample of the population of children have this combination of symptoms. In the old days, we thought it was a childhood disorder and that people out grew this way of being. Now we know adults can have it too and can benefit from comprehensive assessment and treatment.

I chose to review this book to get a better feel for the parents of the children I was seeing. I liked their first book *Driven to Distraction* because of the emphasis on strategies and that medication was not prescribed as the first and only intervention. The plus is the emphasis on the positive parameters; that all is not doom and gloom and, as the authors state, "ADD is not a mental disorder but is a collection of traits and delineates a way of being in the world." The negative resembles the condition in that I found the book a bit impulsive and espousing diagnostic tests and treatments not generally available or proven as effective.

I liked the organization. The first chapter is a 'skinny' for people who don't read books all the way through. They then go on to describe what it is like to have ADHD and as well, people who are highly effective with ADHD (in fact, like

the authors). After stories, they move on to diagnosis and then treatment. In the treatment section they cover areas that I've not seen written about anywhere, such as going to college, ADHD in families, sex and ADHD, choosing a mate and living with someone with ADHD. The chapters on medications provide a good review of the different medications, pros and cons. They conclude with tips on getting "well enough organized" and what good treatment must include.'

I would recommend this book to patients, their families and clinicians with the proviso that there is a full discussion of diagnosis and how one lives with "this way of being" to get the most out of life. They recommend comprehensive assessment, then multi modal treatment with no quick fixes and emphasize that human relationships are the core of treatment. The appendix also lists other books on the subject along with support and education resources.

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Learning and Behavior Problems in Asperger Syndrome

Margot Prior (editor). *Guilford Press: New York, NY, 2003. 326pp. US \$40.00.*

In recent years, the field of autistic spectrum disorders (ASD) has experienced an embarrassment of riches among the wide variety of books available for families, clinicians, and educators. The best of these accurately reflects the current state of research in this rapidly expanding area and interprets the relevance of findings in terms appropriate to the target audience. Some works are confined to a more academic or abstract level, whereas others are intended to provide more pragmatic assistance; many provide little more than an introduction to this complex field. With so many volumes to choose from, it is a challenge to determine whether a given work has the right expertise behind it, as well as the breadth and depth of content and the particular focus suitable to one's needs. *Learning and Behavior Problems in Asperger Syndrome* is an admirable work that might easily be overlooked under these circumstances.

First, the expertise - Margot Prior, for those who do not know her work, has been one of the more thoughtful contributors to the research

literature on cognition and behaviour in autism for several decades. She is also a very experienced clinical child psychologist, and her immersion in the needs of children and adolescents with autistic spectrum disorders is evident in her editorial choices. The thirteen chapters of *Learning and Behavior Problems in Asperger Syndrome* have been contributed by some of the most noted clinical researchers in the world, a front-line master educator and by the reflections of an adult with Asperger Syndrome. The book is organized in two sections, one concerning assessment and management of cognitive, academic and behavioural aspects of ASD, and the other specifically addressing ASD in the context of schools and the transition from school into adult life. The writing is of high quality overall (with commendably thorough use of citations), and the editing smooth. The result is that what might have been a rather dense and choppy volume is actually pleasant going, although this is the sort of book that one is more likely to absorb one chapter at a time.

As the title indicates, this book is concerned with cognition and behaviour in Asperger Syndrome. The title is not especially helpful in that, despite the use of "Asperger Syndrome," chapter one is devoted to demonstrating the lack of empirical support for any meaningful distinction between Asperger Syndrome and the rest of the autistic spectrum. This point is reinforced by other chapter authors and by Prior herself in her introductory and closing chapters; "Asperger Syndrome" in the title suggests a narrow focus that is not present within these pages. In fact, diagnosis is really not discussed in great detail in any of the chapters, reinforcing the fact that this book is directed to those who work with anyone at the more able end of the autism spectrum. The title also does not convey that this is a book for practitioners (rather than researchers), albeit more sophisticated practitioners. The premise is that understanding of the unique cognitive styles of individuals with ASD, and their behavioural differences, will lead to better teaching, more sensitive care, and more appropriate environmental accommodations, and thereby to enhanced functioning in the real world. Although the context is heavily school-oriented, one has the sense throughout this volume that

the contributors recognize that it is preparation for the world beyond school that really matters.

I recommend this book in the first instance to school/educational psychologists, special educators, and clinical or neuro-psychologists who are involved in assessment and programming for children with ASD. Given the prevalence of ASD, and especially the challenges of working with those (often later-diagnosed) children at the higher-functioning end of the spectrum, this knowledge is absolutely essential to these professionals. The high level of the contributions and liberal and appropriate citation of research makes this book particularly well suited for use in training programs.

For the same reasons, clinical child psychiatrists who are involved in consultation regarding school-aged children will find that *Learning and Behavior Problems in Asperger Syndrome* is an excellent resource. The assessment of cognitive, academic and language skills is well covered in chapters 2 (Reitzel & Szatmari) and 3 (Manjivioni). Following these, Tager-Flusberg's chapter clarifies the role of language and communication in the manifestations of ASD. The next three chapters address the difficulties that are at the crux of most referrals for children and adolescents who have the Asperger Syndrome label: social concerns (Shaked & Yurmiya), circumscribed interests (Attwood) and co-morbid emotional and behavioural challenges (Tantum). Among the highlights of the book are chapters 8, "Remembering School" (Lawson) and 9, "Challenges Faced by Teachers Working with Students with Asperger Syndrome" (Gill). These contributions convey first-person perspectives from the complementary front lines of teaching and being taught. I was also impressed by the chapters by Jordan (10) and Kunce (11), who provide views from the UK and US on school-based strategies and systems that enhance education for students with ASD. These are excellent well-referenced summaries that will direct the interested reader to other sources, in which there may be more details regarding implementation of these interventions. Howlin's chapter 12 addresses the challenges faced by individuals with ASD as they move beyond the school-years, issues only now receiving much attention. Howlin provides a thoughtful discussion of the factors that must

be taken into consideration in the transition to adulthood, while recognizing the limitations of our knowledge in this area.

By not minimizing the complexity of the disorder and by promoting thoughtful problem solving rather than "one size fits all" suggestions, *Learning and Behavior Problems in Asperger Syndrome* becomes a worthwhile addition to the comprehensive ASD library. It goes beyond debates about diagnosis to help clinicians and educators determine what will really make a difference in the life of a young person with ASD, and to make that difference a reality.

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Living with Genetic Syndromes Associated with Intellectual Disability

Marga Hogenboom (Editor). Jessica Kingsley Publishers: London, 2001. 143pp. CA \$30.95.

This book provides descriptive information about common syndromes associated with intellectual disabilities with an emphasis on Down Syndrome, Williams Syndrome, Fragile X, and Rubenstein-Taybi Syndrome. It also includes information about Foetal Alcohol, Prader-Willi, Angelman and Wolf-Hirschhorn syndromes. It is easy to read and contains information that parents of affected individuals would likely find useful at the point of diagnosis. It may also prove to be valuable for education professionals wanting reference material about a particular condition. The main limitation of this book is that comparable information is readily available through a wide array of Internet sources and, in contrast to the book; these are periodically updated with the latest information.

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Mass Trauma and Violence Helping Families and Children Cope

Nancy Boyd Webb (Editor). Guilford Press: New York, NY, 2004. 378 pp. US \$42.00.

I had a particular reason for wishing to review this book. My surgeon husband was about to go to work in a refugee camp where families had fled from a violent regime. In the event that I joined him there, would this book be a useful addition to my library?

Nancy Boyd Webb, editor and author of the opening chapters, is a University Distinguished Professor of Social Work at the Fordham University Graduate School of Social Science and has written on play therapy with children, attachment, trauma and loss and family therapy. The book was developed in the aftermath of September 11, 2001 as the author felt that the professional literature was sparse on topics related to helping children and families cope after terrorist attacks and mass trauma situations.

One might speculate that the writing of the book was perhaps an attempt to deal with the helplessness such a dreadful event engendered and the gathering of the chapters from the many contributors sought to create and enlighten from a foundation of horror.

Part 1 of the book gives a theoretical framework for assessment and treatment based on the literature on stress and coping, risk and resiliency as well as trauma, attachment and bereavement. Part 11 is entitled "Helping Interventions." There are eight very varied chapters ranging from "Treatment of Childhood Traumatic Grief: application of cognitive behavioral and client centered therapies," to chapters on creating a group mural, on music therapy, sand play, long term grief support groups, and how schools respond to traumatic events.

Part 111 is entitled "Living with Traumatic Memories and ongoing fears." This includes a chapter on the treatment of psychological trauma in the children of military families and another on working with families in the shadow of the troubles of Northern Ireland. Contributors from Israel describe the use of a bridge drawing as an aid to diagnosis of adjustment to trauma in adolescents.

The final chapters are on avoiding vicarious traumatization, therapist self care and the ongoing challenges of trauma treatment emphasizing the need for researchers and practitioners to work closely together. There is a useful appendix listing trauma related professional journals, professional organizations with trauma related training and other trauma resources.

So, what did I learn from this book that was helpful? The chapter on outreach and education to deal with cultural resistance to mental health programs described the Bridge Program

and its attempt to integrate mental health and primary care for the Chinese American Community of New York, York. After 9/11 it developed culturally sensitive screening tools and described the cultural complexities in the detection, expression and treatment of trauma. The inclusion of chapters addressing other cultural groups could be the subject for many further volumes.

In fact, whilst the book perhaps attempted an international perspective it was very much grounded in the experience of previously established US agencies and how they adapted their practice to cope with the trauma and bereavement from 9/11. As such it did not address my prime reason for wishing to review it. However the case studies did reinforce my belief that whilst we may have some framework for understanding and treating traumatized families and children, one should never underestimate both the ingenuity of therapists and families and the power of "therapeutic community" in its widest sense.

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Modelling and Managing the Depressive Disorders: A Clinical Guide

Gordon Parker and Vijaya Manicavasagar. Cambridge University Press: New York, NY, 2005. 247 pp US \$55.00. US Paperback.

Parker and Manicavasagar confront the most difficult clinical disorder in all of psychiatry, and emphasize the observation of their expatriate, Barney Carroll, "to understand depression is to understand psychiatry" (Carroll, 1989 Chapter 3). They know well, by dint of clinical experience and research, the topic about which they speak. The book represents a scholarly meld of scientific and clinical experience brought together by shear, concentrated reflection.

Their text is not staid. Indeed, it begins with an evangelistic and humorous verve. In chapter one, they frame their whole exercise with the light-hearted parody of "A declaration of independence". Copying the US Congress 1776 address, they humorously offer that all depressive disorders are not created equal, that the current model of depression (read DSM and ICD model) should be scorned and considered sufferable nonsense (terms inspired by the

American revolutionaries). Yet their polemic is not simply based on clinical frustration over a consensus description that never quite fits. They offer expert and systematic research of clinical data to show the multiple means by which the current model has failed. Depression is not a single "it" and "it" does not lead, like all roads of Rome, to the diencephalons. They note that descriptors of severity (mild, moderate and severe) are woefully thin and inadequate. The authors allow us to see the unfortunate consequences of our commonly used model, and their data is convincing. An imperfect understanding of depression engenders flawed research, non-specific findings and, perhaps more importantly, "watered-down outcomes" that can make our choice of treatments perilous.

The format of the text is provided in their introduction.

They revisit first the challenging topics of melancholic and psychotic depression dealt with in their previous work (Parker and Hadzi-Pavlovic, 1996). Here they seem to get it right. The reader is reminded that psychotic and melancholic depression are parts of the same entity, carry their own descriptors, are identified by the pathology of their own special neurotransmitters, and have more powerful data to predict their clinical course and best practices for good outcome. These early chapters are a refreshing review, and by themselves, make the book worthwhile.

Their main challenge, however, is the delineation, definition and classification of sub-types of non-melancholic depression. The reader is forewarned that this is the territory of multiplicity, where definitions lose their crispness, and where duty to get it right, leaves one in a meaningless graveyard of over-inclusiveness. The irony here is that where there is so much difference- when all is obsessively accounted for- everything begins to look the same.

The authors offer a comprehensive hierarchical model of depression but apologize that their model is inherently flawed as it moves from definition of clinical features (read melancholic depression) to etiology (read the residual categories that are unnamed and nebulous). Despite this, they seem willing to live with the variant sub-categories so defined and so understood. They push on, using their years of clini-

cal experience with depressed patients and various personality models, and offer stress (not new) as the active agent of disease that brings differing types of depression to persons with differing types of personality styles. This is not just a theoretical treatise since they use (see Chapter 9) the North American Five-Factor Model of Personality Dimensions (Costa & McCrae, 1990), filtered through multivariate analyses to emerge with a series of associated variables that are peculiar to depression risk. To this model, they offer their own 89-item Temperament and Personality questionnaire to achieve "eight personality styles". These styles are: the perfectionist, the irritable, the anxious, the avoidant, the self-focused, the self-critical, the rejection-sensitive and the personality type with personal reserve. Each of these styles is specifically vulnerable to its own type of non-melancholic "depression".

If the categories are confounding, the authors seem to recognize the problem and offer what they term a "metaphorical" neurotransmitter model for illustration. But metaphor is meant to be a bridge between what is familiar and what is foreign. In this case, their model, although painstakingly rational and complete, is, in the end, as difficult as the abstract concepts it tries to describe. And worse, eight (8) times offered and eight (8) times explained, the "theoretical" metaphor carries, for the thoroughly obsessive reader, the risk of biological hoax. One must be reminded that it is, after all, a metaphor and not neurobiology.

Finally, compelled by their mission statement, Parker and Manicavasagar offer 8 unique strategies and modalities of treatment for each type of depression (be it Cognitive Behavioral Therapy, Supportive Therapy, Solution-based Therapy, pharmacological treatment etc.). If sincerity is their strength, then the tedium of sincerity is their chief flaw. After a brilliant start and, after an energetic and exciting declaration of independence, the authors are crushed under the weight of their own altruistic mission. They have proceeded with noble intentions, attempting both to define and to describe and then to prescribe. Perhaps it is too much ambition for an otherwise well-written book. Perhaps a simple, bold statement might have been easier: "There are fully 10 types of depression;

eight (8) are peculiar to persons with particular personality styles; and here they are."

Still, however, for the fortunate that give this book a thorough reading, it is - in the quiet of a reading room - akin to mentorship of the best sort. Here one can be impressed with every page. Despite its ponderous title, its myriad of sub-sections and, yes, the difficult metaphorical model, this reader offers a simple but strong endorsement, "Buy this book!"

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Quick Reference: Child Abuse For Healthcare Professionals, Social Services, and Law Enforcement

James A. Monteleone (Editor). Elsevier: St. Louis, Missouri 1998. 317 pp CA \$69.95.

This book is a ring-bound manual that is designed to be a carry-along reference for front line professionals who may encounter child abuse in their day-to-day working lives. Given the title, we can see that it is written to meet the needs of those who may have to identify and describe signs of child abuse, or re-familiarize themselves with the physical details of physical or sexual abuse in the course of their working day. The book functions also like a miniature atlas that relies heavily upon forensic images explicitly depicting the gruelling nature of the cases given the subject matter.

The author has apparently spent a great deal of effort in accumulating full and half page visual images and tables of information including injuries, diagnostic variations, examinations, and/or investigations which can or should be used to document the presence of the sequelae of childhood abuse. In some respects, however, it seems too much like a catalogue of what are grotesques and heinous in the cases of these real life examples of how barbaric some adults can be.

The book is well organized in the manner that it addresses the various types of child abuse. From the essentials of the clinical exploration of an abused victim, the author begins with the visual and then moves onto the radiographic nuances of the investigation. Without saying as much, the author portrays the tools used in reconstructing the story line of a victimized child whose voice is replaced by the sometimes subtle but telltale findings,

which contradict the story of why the child ended up coming to the attention of the authorities.

This book reminds me of the fact that despite professional training, I would hazard a guess that most of us are not easily sensitized to the barbaric and heinous nature of the trauma that some children experience. From the viewpoint of a mental health professional this manual is at most a reference book that we would hope we would never have occasion to reach for. The author deserves a lot of credit for the thorough attention he has paid in his effort not to exclude any of the types of child abuse victims from his audience's awareness. Since this subject is normally hard enough to confront when one has to, it is a feat of substantial worth to academia that the author has laboured to make this a valued reference. Having said that, it is important to say it was difficult to review this book because of very graphic and detailed description of an uncomfortable topic.

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Racism in Mental Health Prejudice and Suffering

Kamaldeep Bhui (Editor). Jessica Kingsley Publishers Ltd: London, UK and Philadelphia, PA. 256 pp. CA \$44.95.

Discussion of racism and psychiatry were quite prominent in the 1970's, fuelled in part by the greater racial awareness and sensitivity following the peak of the civil rights movement, and increased attention to the impact of social issues on the psychopathology and upon the care of psychiatric patients, at the interpersonal as well as the systemic levels.

Race was discussed as a contributor to psychopathology and to psychic distress, by its contribution to the individuals' subjective experience of the world, and by the way the world/society related to the individual. It was also discussed in terms of its clinical impact at the levels of assessment and diagnosis, the therapeutic process, and the systemic levels of planning and the delivery of care. Racism was seldom linked to immigration status and to culture, (in the sense of Western versus other cultures), but it was more linked to ethnicity and social class, with the primary dichotomy

being white versus black.

The current book is an edited text of chapters in which eight chapters were fully written and one co-authored by the editor and almost all by UK psychiatrists, writing from the perspective of their knowledge and experience of the issues in mental health among Britain's immigrant minorities of non-European backgrounds.

In the opening chapter entitled "Feeling for Racism," the author outlines how his 'raw' personal experiences of being misidentified and of being the direct victim of racism, stimulated his interest in his topic and led to his writing of this book. This is quite a revealing look into the subjective experience and insight of a very sensitive and reflective person. He comes to recognition of the "violence" of racism, in which, he "soon learnt that whatever I thought my substance to be, whoever I thought I was, this was always quite different from the ascription to which others invested me" and that, "It was easier to be who I was perceived to be, rather than who I was/am." This condenses a seminal experience of racism.

The subsequent five chapters are devoted to the discussion of important theoretical and conceptual issues about: racial discourse; the nature of prejudicial beliefs; psychosocial and psycho political aspects of racism; the legacy of Frantz Fanon, and the contemporary representation of racism and mind.

Four chapters, including, one by a patient, focus on the individual experiences of racism in the mental health system from both the patient and the clinician perspective. The patients' discussions and suggestions are particularly poignant. A chapter on the provision of mental health services for London's ethnic minorities provides a good case study with identification of important issues and suggestions from lessons learnt. The book concludes on a reflective note, about contemporary dilemmas and wise suggestions regarding essential elements that should be included in the future of mental health care, particularly as it relates to a serving of ethnic minorities.

The content strongly reflects the importance of racial issues at all levels of serving the mental health needs of the major ethno cultural groups, including the South Asians, Afro-Caribbean's, Africans, and the Chinese, as

well as the outcome of various studies and service delivery approaches to serving these populations.

Over all it is a mature and serious reflection on racism as a factor in mental health, that critically examines the British experience, informed by the American experience during the socio-cultural revolution of the civil rights movement and beyond...as well as by careful consideration of relevant ideas from sociology, psychology, and psychoanalysis. It tackles difficult questions such as the definition of ethnicity, race, and racism (which are often thought with demagoguery and circularity). It does not shy away from difficult issues such as the difficulty of justifying the claim of racism and whether the victim may contribute to his own experience of racism. It also addresses the reason for the clinician's involvement in the process of taking action against racism.

In the struggle with these issues and questions, the authors' very poignantly convey the frustration of the clinicians in dealing with racism in practice. We identify with them, and agree that the elimination of racism may be unachievable. That rather than being a reflection of psychopathology...it maybe a natural human proclivity to divide the world into the other and us, that this has historically dangerous consequences and therefore needs to be raised to a level of awareness and very actively resisted.

The current approaches to working with ethnic minorities of "cultural awareness" and "cultural competence," are seen by the author as a corporate trick to reduce the extra efforts and the resources required to deal effectively with racism in mental health.

The strengths of this book include the inclusion of the patients' perspective. One potential weakness is that there is some unevenness in the level of scholarship among the chapters. But this was less than I anticipated in a multi-authored text on this topic. The book will be of interest, and easily read by anyone working with a multi-ethnic clientele and should be required reading for anyone in the field of mental health.

It was gratifying to see that the British have devoted significant resources and effort to this issue, at all levels, including to serious academic study. All Canadian physicians, including

child psychiatrists, even though it is not child focused, should read the book. As a highly multicultural and multiethnic society, racial insensitivity, racial prejudice and frank racism in mental health will increasingly surface and demand more open attention.

This insight into the British experience might be helpful in this regard.

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Sensory Perceptual Issues in Autism and Asperger Syndrome Different Sensory Experiences Different Perceptual Worlds

Olga Bogdashina. Jessica Kingsley Publishers: London UK, 2003. 217 pp. CA \$36.95.

Bogdashina presents a very convincing argument that many of the behavioral patterns seen in people with Autism and Asperger Syndrome have a different sensory perceptual experience than people without these conditions. The experiences may involve hyper- or hyposensitivity, fluctuation between different "volumes" of perception or difficulty interpreting a sense. Any, and frequently several, sensory modalities are affected in an individual.

The book starts with many clinical examples of unusual sensory perceptual experiences of people with these conditions. The book then provides one approach to assess sensory integration problems and establish interventions to eliminate problems and enhance the individuals' strengths. In my clinical experience, understanding the child's sensory experience and directing interventions to assist the child become more comfortable in his or her world, is a major part of treatment.

The majority of the book describes the issues on "Possible Sensory Experiences in Autism", "Perceptual Styles", "Cognitive Styles" and "Other Sensory Conditions". There is only limited information about interventions. It would have been preferable to have a larger chapter to describe interventions that follow post identification of child's difficulties with sensory experiences. The key point that the interventions must be individualized for the specific child could have been better emphasized. The information from the chapters devoted to "Treatment" and "Recommendations" would then balance more convincingly.

This book is easily understood by both parents and professionals. It is well referenced. The Table of Contents and the Subject and Author Indexes are easy to use. This book may be a good place to start learning about the altered sensory experience of people with Autism or Asperger Syndrome.

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Splitting Up: Enmeshment and Estrangement in the Process of Divorce

Alvin Pam and Judith Pearson. Guilford Press: New York, NY, 1998. 448 pp CA \$73.00.

This book offers a comprehensive view of divorce, its precursors, its dynamics and the consequences that may result for all concerned.

The text opens with these words: "A love relationship never when it ends." And on page 15 we read: "The process of marital separation is one of the most stressful events that can occur in a life time." These two sentences set the scene for the rest of the book, which takes a wide-ranging look at divorce: its antecedents, the process itself, and the varied consequences that may result.

In Part I, five chapters look at the process of divorce from various points of view. Chapter 2 is an interesting review of the "dynamics of the couple system." The following three chapters provide a detailed review of how the divorce process may unfold. Part II of the book is entitled "Jealousy." Chapter 6 deals with the issue of "infidelity versus jealousy: the social history of a dialectic", as the authors put it. Chapter 7 is on "the geometry of the eternal triangle" and Chapter 8 discusses what happens when marriage ends in a love triangle.

Part III reviews various serious negative

reactions that may occur as a result of "rejection in love." Its four chapters deal with, respectively, suicide; "crimes of passion"; psychosomatic reactions; and sexual dysfunction after breakup. The three chapters in Part IV explore in detail various aspects of the effects of divorce on children. This section of the book will be of particular interest to child psychiatrists.

In Part V the authors discuss how the breakup may be resolved. The options are "letting go" or reconciliation. The two chapters in Part VI, the final part, deal with the psychotherapy of marital breakup and "the issue of guilt" - who or what is to blame for marriage failure.

Splitting Up is an amalgam of the authors' experience and an extensive review of the relevant literature, with the latter predominating. The book has 476 references. These range widely. Those cited even include Shakespeare and George Bernard Shaw, each of whom, as might be expected, had something relevant to say.

The authors present a well-written, balanced, non-dogmatic view of the issues they discuss. Although this book was published in 1998, it remains relevant today. The dynamics, and consequences, of divorce do not change much over time. While the social and cultural attitudes to divorce do change, the pace of change is quite slow.

This book is likely to be of interest to all who work with divorcing couples and those who are contemplating divorce; and with children and other family members who experience its impact. It also contains much food for thought for all who reflect on the state of Western society.

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