

For anyone concerned about women's issues, and the ways that culture and custom can dictate the most severe mutilation and assault on women, this book is valuable reading. It is also deeply disturbing. Yet in all this, the warmth of the cultures shines though, and the point is made that in a society where daily life for the vast majority is very hard, the agonies of pharaonic circumcision may seem rather irrelevant. For most people, changing the practice is just not a priority issue. For the educated few it can become more central, however, and hopefully their influence over time may increase the prestige and hence acceptability of leaving girls intact.

Reviewed by Helen Jackson, School of Social Work, Harare.

Psychiatric Disability. Clinical, Legal and Administrative Dimensions, Arthur T Meyerson and Theodora Fine (eds), American Psychiatric Press, Washington DC, 1987 (461pp, £30 hbk).

This is a very welcome textbook which attempts to provide a comprehensive, detailed and multi-dimensional approach to the study and understanding of psychiatric disability. The book offers extensive information and bibliographic material on the identified clinical, legal and administrative aspects of psychiatric disability. It is a rich source book which provides a wide range of comprehensive references. However, despite this broad and detailed perspective the book fails to honour its intention and the objective of being cross-cultural. The book is grossly 'disabled' by its 'pathological' and limited American bias.

The book draws from major American sources and references. It is focused on and intended for American practitioners, and specifically tries to address problems arising from or connected to the Social Security Administration Programme of the USA. The only attempt the book makes to give a cross-cultural perspective is the citing of two studies. The first study looks at the long term prognosis of schizophrenia and was undertaken in Switzerland. The second looks at the prevalence of psychiatric disability among the aged, and was undertaken by the WHO in West Germany. Even by the most narrow and restrictive definition this can not be classified as a cross-cultural perspective. Comparing American and European conditions does not give the book a broad cross-cultural base.

The book's major bias is shown in its analysis of the legal and administrative issues of psychiatric disability. These are given in precise American terms and interpretations. The American community is preoccupied with individual rights and freedom. The book goes to extremes to portray, emphasise and safeguard this 'sacred' American attitude. As such, the book is not very useful to people practising in a system which is politically, legally and administratively different from the American system. The aim of the book is to prepare American practitioners for the American environment and conditions under which they will have to practice.

The book fails to address, and is insensitive to, African and Third World countries where cultural values and beliefs in witchcraft and ancestral spirits have a causal effect, and where the traditional healer has both a therapeutic and rehabilitative function. Lack of facilities in most Third World countries make it very difficult to spend time and money on issues like individual rights and freedom.

The book also fails to address an array of Third World problems such as superstition, the absolute or relative absence of mental health facilities, poverty, malnutrition, unemployment and low levels of living generally. These aspects have a direct bearing on the causative factors, diagnosis and prognosis, and the preventive and rehabilitative aspects of psychiatric disability. As such, the book has limited relevance to African and Third World conditions.

In addition to these general limitations the book has specific areas of weakness. The first two sections on epidemiology and clinical pathology (Overview and Clinical Issues) not only adopt a medical model but use confusing and complicated medical terminology which makes the book relevant and useful only to medically qualified practitioners. Open psychological terms would benefit all levels of personnel involved with psychiatric disability.

As indicated above, Chapter 2 refers to purely American definitions, statistics, and prevalence rates, and makes specific and limited conclusions. These conclusions cannot be generalised. Chapter 3 is misleading and is a major let down. The title is "The Basis of Psychiatric Disability", but only two conditions are discussed. Schizophrenic and alcoholic dementia, though major conditions, are not the only conditions in psychiatry. The conclusions drawn from these two conditions can not be generalised across all the other conditions. This is the only chapter in the book tasked to explore the basis of psychiatric disability, yet it frustrates the expectations raised by the chapter heading. However, the two conditions are discussed in a very comprehensive and detailed manner, and extensive references are given.

Chapter 4 is completely divorced from psychiatric disability. Disability is discussed in a completely different and non-psychiatric context. It is a general sociological discussion which analyses the relationship between work and physical disability. This chapter is not very useful and was possibly included to expand the book and give it respectability. The chapter actually breaks the flow of the content, as a sociological issue is thrown into the middle of medical issues.

Chapter 5 contradicts Chapter 3 in terms of the definitions of schizophrenia adopted. It adopts a broad and inclusive definition covering the whole spectrum from Bleuler to the DSM II. The authors could have agreed on a specific operational definition. The chapter also fails to be comprehensive in discussing the disabling social and interactional aspects of schizophrenia. Chronicity is not emphasised and the need for a long term management plan is not highlighted.

Chapter 6 is not linked to Chapter 3 which discussed the basics of disability. However, the chapter tries to quantify the problem and gives useful statistics but fails to utilise relevant research findings, particularly Seligman's (1973) learned helplessness as a key disabling factor. The chapter is also bankrupt in terms of treatment and rehabilitation. It offers only traditional (AA) methods and vocational rehabilitation.

The third section of the book on psychiatric rehabilitation is very useful and relevant. Though addressed to and intended for the American environment the section has wider relevance, and the theories and information given can be applied to African and Third World conditions. Chapters 11 and 12 are very useful and can be applied generally with minor modifications.

The last two sections on administrative and legal issues are specific and only relevant in the American context. These sections cover the interpretation of the American legal system as it affects and applies to the administration of American mental health institutions and rehabilitative programmes. For somebody outside the American system it is difficult to understand the implications and dynamics involved, and to later on adopt and implement some of the recommendations made.

Overall, the book needs to be used with caution and discretion. For teaching and research purposes the book offers some useful but limited chapters and sections. Chapters 11 and 12 are highly recommended and the whole section on rehabilitation is useful. The first two sections on epidemiology and clinical pathology may be used for the general understanding of mental health and disability issues, together with other well established and proven references. The book is rich in bibliographic references which could be used for fruitful research.

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References

Seligman M E P (1974) "Depression and Learned Helplessness" in R J Friedman and M M Katz (eds) *The Psychology of Depression: Contemporary Theory and Research*, Winston-Wiley, Washington DC.

Seligman M E P (1973) "Fall into Helplessness" in *Psychology Today*, June, 17, 43-48.

Magomero. Portrait of an African Village, Landeg White, John McCracken, Cambridge University Press, Cambridge, 1987 (271pp, US\$14.95).

This book is a compelling historical portrait of an African village in the southern region of one of Africa's poorest countries, Malawi. The author takes the reader through 126 years of startling events in the lives of a few hundred men and women who are made powerless by events beyond their control and the poverty they live in. The book has two major aspects. The first is Magomero, as a place in which historians in recent years have focused on the slave trade, Christian missions and their impact, colonialism and ethnicity, land alienation in a plantation economy, resistance and the rise of nationalism, peasant cash cropping and the mobilisation of labour, the struggle for resources between men and women, and the perpetuation of poverty in the period after Independence. The second aspect, as stated in the Preface, is an attempt by the author to record the changes that have occurred in the economy, in custom, in political and personal relationships, and the village's changing relationships with the broader Malawian and Southern African context since 1859. The village story also shows the contradictions between Livingstone's Christian doctrine as a way of establishing legitimate trade and commerce in the region, and the African perception of Christianity as a way to attain self dignity, as seen through the person of John Chilembwe.

The first part of the book covers the period between 1859 to 1863. In this part the author provides a clear but lengthy description of the area, even distances from one important place to another are given, and the origin and meaning of village names made clear. The problem with this part of the book tends to be in this description. Too many names of geophysical features, tribes and individuals are given, making it difficult to master them - particularly as this may not be of value to a non-historian. In this chapter the author shows that the