racy, nepotism and disillusionmen. Castrol exhorts his audiences to support the rectification process, to learn from the mistakes of the past, and to build and improve the socialism that has al ready been developed.

Celebratory speeches on thirty years of the revolution, despite the US embargo, may not be the appropriate forum for a detailed critique. However, this reviewer, in the hope of possibility gaining insights into the Cuban revolution, would have valued a more critical analysis based on the daily realities of people's lives and the very concrete problems inherent in transforming both an economy, and a people's political consciousness.

Considering the subsequent break up of the Soviet Union, pluging Cuba further into crisis, the rhetoric, and the lack of critical analysis, become all the more stark and anachronistic. At the same time, in the light of the global crisis of socialism, it is in some ways revitalising to be reminded of the intensity of conviction of one of the world's greatest revolutionary leaders.

Reviewed by Helen Jackson, Director of Research, School of Social Work, Harare, Zimbabwe.

AIDS and Alcohol/Drug Abuse - Psychosocial Research, D G Fisher (ed) The Haworth Press, 1991, London.

A monograph published simultaneously as *Drugs and Society*, Vol 5 Nos 1 and 2.

This short book (97 pages) contains seven articles addressing the issue of HIV/AIDS and substance abuse in the USA. Two articles focus on ethnic issues, two on intravenous drug use in Alaska, one on gay men, one on procedures in "shooting galleries", and one on the role of health psychologists in AIDS education amongst drug injectors (IVDUs). They present material that will be of use primarily to professionals in the field in the USA.

Several articles are reviews of existing literature, and give an overview of the current situation. Others provide some original research findings.

Fisher et al stress that drug injecting in Alaska is a major problem that needs much wider study. The mean age of first cocaine use in females was reported to be 12,5 years, indicating the urgent need for intervention with adolescents.

Leoutsakas reports that the scale of drug injecting in Alaska is not well documented, and more research is needed into who injects, what is injected, and how behaviours can be modified. Rowell reports that American Indian/Alaskan

native people have high levels of alcohol consumption and high levels of sexually transmitted diseases. HIV/AIDS is still low in Alaska but likely to rise. He concurs with Leoutsakas that much more data is needed on the extent and role of drug injecting.

Des Jarlais et al warn of the expectation of racial prejudice by Blacks and Hispanics/Latinos and other minorities with respect to interventions to make drug injecting safer. They see a lose - lose situation in which interventions targeting at risk minorities will be seen as racist, while non-intervention will be seen as neglect. Blacks and Hispanics have double the reported rate of AIDS of the Whites in the USA, with intravenous drug use reported to be the major primary risk factor. It is linked with high levels of heterosexual and perinatal transmission. The authors' stance is best illustrated by their quoting of Primm of the Presidential Commission on the HIV Epidemic (P6): "If you do something now, you will be accused of racism, but if you do nothing now, in the future you will be accused of genocide".

An article by Martin and Hasin examines the link between alcohol consumption and sexual behaviour among gay men. They report on earlier studies that show a complex relationship between the two. Their own study finds that fairly low risk sexual behaviour (oral sex) increases with reported alcohol consumption, but that high risk activity (anal-sex) does not. However, their study only measures rates of alcohol consumption, and not alcohol use specifically during sexual activity.

Insight into risk behaviours at the time of injection is given by Page et al. They observed first hand the process of selling injectibles and providing needles in a private house used as a "shooting gallery". They confirm that sustained interventions with the proprietors of the "shooting galleries" may potentially reduce risk of HIV. The authors point out that proprietors do not want to see their clientele die of AIDS. The article provides valuable insights into the specific behaviours and risks involved.

In the final article of the book Sorensen advocates the role of health psychologists in HIV/AIDS prevention. He gives a brief overview of the scale of the epidemic among drug injectors, and of the risk factors for HIV/AIDS: needle transmission, sex, drug weakened immunity, disinhibition when "high" and perinatal transmission.

He cites estimates that between 83 800 and 119 100 new cases of AIDS will occur among drug users, presumably in the USA, between 1989 and 1993. Health psychologists have an important role to play. Sorensen supports Rosenstock's (1974) health belief mode, which suggests that knowledge, perceived

personal risk, belief in health care guidelines, belief in personal ability to keep to guidelines, and social support to keep to guidelines, are critical factors in achieving health behaviour change. Sorensen's well written overview could usefully have come at the start of the book and provided a framework for the other articles.

Overall, the collection is worth reading although, with a few exceptions, the articles stress the need for further data and research rather than presenting in depth findings of their own. The content is considerably better than the general presentation of the book itself, which rates very low on attractiveness and originality. This is a great pity. Sorensen's three photographs of awareness campaign media enliven the final pages of the book, but for the most part the layout and presentation are dull. This detracts from the articles themselves, and is a contradiction of the oft-repeated message within the book of the need for appropriate, engaging strategies to break the HIV - drug injecting link.

Reviewed by Helen Jackson, Director of Research, School of Social Work, Harare, Zimbabwe.

The Politics of Race and Gender in Therapy, Lenora Fulani (ed), The Haworth Press, New York, 1988 (120pp, US\$24,95 hbk, O 86656 723 2). A monograph published simultaneously as Women and Therapy, Vol 6 No4.

This book is written for societies where there is racism, and where women are treated as second or third class citizens or worse, not only because they are women but also because of their skin colour. The book acknowledges that some of the issues discussed as the specific struggles of 'women of colour' are also experienced by white women and men. These issues include powerlessness in an elitist society, where people are seen as lower grade persons because they belong to a different race, culture, are poor, unemployed and lack education.

This book will be valued by feminist therapists and people who work with women in development. Therapists who use psychoanalysis may find the book particularly interesting and challenging, especially the section on Marxism, Psychoanalysis and Feminism. This section challenges Freudian ideas concerning women's sexuality and motherhood.

How applicable will this book be to Zimbabwe and other African countries? First, our women do not experience the same problems that women of colour in the USA, experience as a group. Even if a few do, there are strong traditional and cultural ways of dealing with most of the problems that women