Book Reviews

AIDS: Individual, Cultural and Policy Dimensions. Peter Aggleton, Peter Davies & Graham Hart. Pp. vii + 260, illustrated. The Falmer Press, London, New York, Philadelphia, 1990. £26.00 Cloth, £11.95 paper.

This book is one of the better examples of a group of books which deal with the medical, psychological, political, social and sexual consequences and implications of HIV infection and AIDS. Significant themes are explored and a wide range of opinions expressed.

Predictably such books are not standard scientific accounts, but rather contain stimulating ideas. Thus this book is not appropriate reading for postgraduate doctors requiring technical information concerning investigation, treatment or diagnosis of HIV infection.

Initially, I wondered why this book had been submitted to a medical journal for review rather than a 'social' journal. However, there is no doubt that doctors who deal with HIV patients will inevitably have to face the paramedical aspects of HIV and for them this book is a useful source.

There are 17 chapters and the topics addressed are the foundation of AIDS knowledge, sexual aspects, judgements concerning HIV patients, male homosexual prostitution, drug abusers and HIV (including needle exchange schemes), prevention strategies in Europe, counselling, and responses of various organisations to AIDS.

The quintessential question is 'How should society/governments/governmental organisations intervene to stop the spread of HIV?' To start to answer this question requires answers to many of the questions addressed in this book.

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'Cabbage Syndrome': the Social Construction of Dependence. Colin Barnes. Pp ix + 232. The Falmer Press, London, New York, Philadelphia, 1990. £25.00 hardback, £10.95 paperback.

This book, written by an author himself handicapped by a congenital familial eye disorder, is a descriptive study of the role of a Day Centre in the life of young people with predominantly physical handicap. The study documents, by means of a semi-standardized interview technique, the way in which users and staff interact and participate in, and themselves control, this sort of service Unit. The conclusion is reached that whilst Day Centres may, at best, facilitate in-house independence, they have little capacity to enable users to extend their skills into the community. Thus disadvantage is reinforced and attendance perpetuated: the 'cabbage syndrome' results. The book points out that this way of operating fails to reverse the long history of bias toward, and segregation of, disabled people in Britain, caricatured by the workhouse and asylum, methods the author considers not only morally but also economically inept. It concludes with recommendations which might help alleviate the problem, finding especially attractive the idea that increased opportunity for participation in and control of the

running and development of the Unit's activities will motivate users, even suggesting that 'participation in the general running of day services must be a necessary pre-requisite of attendance.'

The great flaw in the book is the failure to understand that predominantly physical handicap is often accompanied by mental impairment and that motivation is itself a brain function. Of the 33 day centre users studied, 10 had conditions which of necessity affect cognitive function, probably including drive and motivation, whilst 7 other users are likely to have had some impairment of these qualities: only 2 did not have a condition affecting brain function, and therefore learning.

The recommendations made are eminently desirable, for example: day centres must provide the facilities and services for 'social rehabilitation' for those who require it: users should participate in the general running and organisation of the facilities and services they use within the day centre; user participation in day centre policy making should be mandatory. However, in the population under study, the methods Mr Barnes advises to achieve these goals – 'encouragement', 'assistance', 'enthusiasm', 'mutual agreement' – are doomed to failure, in this reviewer's view, unless delivered in a structured fashion informed by learning and behavioural theory.

The carrot of participation may work for some, including those with a physical handicap that is unaccompanied by mental impairment. However, for many individuals, most obviously those with organic, cognitive and behavioural problems after brain damage, motivation towards behaviour appropriate for increased independence requires a more or less structured and individualized modification programme if progress is to be made. Access to drive and motivation in such people is difficult and requires more than the traditional educational approach advocated by Mr Barnes. If these strategies can be incorporated into Mr Barnes' thinking his ideas may become a real force for change.

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Changing Values in Medical and Health Care Decision Making. edited by Uffe Juul Jensen and Gavin Mooney. Pp x + 195. John Wiley & Sons, Chichester, New York, Brisbane, Toronto, Singapore, 1990. £22.50.

In June 1988 the European Society for Philosophy of Medicine and Health Care met at Aarhus, Denmark. The theme of that meeting, values and medical decisions, led directly to this book. It is more than the proceedings of the conference, however: some contributions were rewritten and others specially invited. The editors, a philosopher and a health economist, contribute the introductory and concluding chapters. Between them are twelve essays, mainly of Dutch and Scandinavian provenance. The unifying thread is the change from paternalism ('Doctor knows best') to autonomy ('consumer decides').

The strength of the book lies in its variety, from the theoretical to the specific (a case study in breast cancer),