The Secret Language of Eating Disorders: The Remarkable Story of One Woman’s Quest to Find a Cure for Anorexia and Bulimia

P. Claude-Pierre


I have always found people who agree to do something then fail to make an agreed deadline extremely annoying. I was horrified by my own behaviour when I found myself doing this very thing when asked to write a review of Peggy Claude-Pierre’s book. So to begin with I would like to make a public apology to the author. This behaviour is somewhat unusual for me, however, and may reflect an overwhelming ambivalence as to my feelings about the book. When it first arrived I read it from cover to cover and found myself agreeing with most of the statements it contained; here was a book that could really help others understand what it felt like to be both a parent of a child with anorexia nervosa and also experience the views of a warm, genuine, and empathic therapist. It was at this point that the ambivalence started to flood in. The most important question I found myself asking was, ‘Is this a book for therapists or parents?’ In many ways, by attempting to bridge the gap, it sadly fails to be appropriate for either.

As a therapist working with young (often very young) people with eating disorders I found nothing new to enhance my practice. This is not because the team I work with already knows the answer (does anyone?) but because the book has very few actual answers and has limited theoretical or evidence-based clinical data. The author accurately describes the torment experienced by the victims of anorexia nervosa and reassures us that if we just ‘hang in there’, providing unconditional love and support, things will eventually change. The therapeutic style seems to be a mixture of supportive psychotherapy, with a soupçon of cognitive behavioural techniques peppered with a flavouring of good old common sense.

I could not disagree with the insightful and empathic description of working with a child gripped by anorexia nervosa. However, I was frustrated by the suggestions that description without prescription would suffice.

Given the lack of satisfaction I experienced reading this as a therapist I was interested to know how parents would respond. One of our senior clinicians had actually forbidden parents to read the book, which of course meant that several had done so. As a co-therapist in the outpatients’ parents’ group I was able to ask for their opinions. These were on the whole less than complimentary. All were depressed beyond words by the graphic description of the suffering their child ‘might’ be experiencing. Far from being non-blaming, they all felt totally responsible for failing to protect their children from falling victim to an eating disorder, which is perhaps surprising as the author is a parent who has experienced this despair.

I am sure there will be some who will find hope in this narrative of a journey towards a greater understanding of anorexia and bulimia. However, the book holds out a hope of cure yet fails to acknowledge that for all her obvious skills the author has not always been successful. Avoiding perfection is clearly stated as a core philosophy of the clinic, yet the text makes it hard to believe that the clinic perceives itself as anything else but. Indeed, there is a sense that if you dare to dismiss this book as excessively sentimental and lacking in rigour, you cannot be someone who truly cares for individuals with an eating disorder. A possibly heretical opinion might be that those who do care will find little to guide them in their own journey towards a greater understanding and knowledge of this frustrating and difficult to treat condition.

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Cultural Worlds of Early Childhood

M. Woodhead, D. Faulkner, & K. Littleton (Eds.)


This book is the first of three readers prepared for the Open University MA Course, Child Development in Families, Schools and Society. The book has an introductory section that serves as a useful guide to the approach adopted in the text and contents of each chapter. Chapters are divided into four parts, reflecting themes. Part One is entitled Development as a Socio-cultural Process; Making Sense of Relationships is Part Two, and Relationships and Learning forms Part Three. Part Four—Cultural Perspectives and Practices—atakes a cross-cultural perspective, discussing children within their socio-cultural milieu and includes case examples from Guatemala, U.S.A., Japan, and the Cameroons.

The basic premise that influences content overall is that culture is an important mediating factor in the nature-nurture interaction and needs always to be considered. Hence any teaching needs to recognise the Eurocentric bias contained in most research and focus on differentiating between universal and cultural specific effects and interactions. The validity of this approach is argued in the first chapter of the book. Part One, which goes on to apply this argument to attachment research, discusses different patterns of shared care and is particularly pertinent in this regard. The particular value of the book, in my opinion, for all students and professionals in psychology and psychiatry lies with this argument on the role of culture that the content seeks to illustrate and teach. Additionally, the book provides a succinct overview on some important issues of early childhood development.

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In the Midst of the Whirlwind: A Manual for Helping Refugee Children

N. Richman

In this short and very readable book, Richman sets out to inform front-line professionals about the issues facing refugee children and families and of ways in which health, education, and social work agencies can be helpful to them. The book, described as a manual, is divided into two parts: Section 1 describes the varied experiences of refugee and asylum seekers, and Section 2 offers advice on how different agencies can support children and families on their arrival. Throughout, points are
The publication is based on the Department of Health 1995 booklet, *Child who may be in danger*. A separate useful framework for referrals involving a trist. A specimen checklist provides a Department of Health, the Association of police, health professionals, through the disciplinary advisory group ranging via practice, and management issues. Refer-chapters on relevant literature, research in series. It is presented as a folder containing as part of their policy London: NSPCC, 1998. pp. 48.

P. Cawson H. Cleaver, C. Wattam, & Assessing Risk in Child with refugees. I will be recommending this book widely to Tier 2 professionals in Newham and feel that I and my colleagues, as mental health professionals, will also benefit from being reminded of the issues involved in working with refugees.

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Assessing Risk in Child Protection


This package from the NSPCC is described as part of their policy/practice research series. It is presented as a folder containing chapters on relevant literature, research in practice, and management issues. References are appended and there is a multi-disciplinary advisory group ranging via police, health professionals, through the Department of Health, the Association of Directors of Social Services, the Social Services Inspectorate, and a child psychiatrist. A specimen checklist provides a useful framework for referrals involving a child who may be in danger. A separate booklet, Ten pitfalls and how to avoid them, is based on the Department of Health 1995 publication Child protection; Messages from research (London: HMSO) plus De-

partment of Health guidelines on integrated working within the field.

The ‘pitfalls’ are:

1. Over-precipitate action because of pressure from high-status referers.
2. Thinking that you have explained something when you have not.
3. Assumptions and prejudices.
5. Not giving enough weight to information from friends, family, and neighbours.
6. Not paying enough attention to what children say, how they look, and how they behave.
7. Focusing only on pressing or visible problems.
8. Not targeting other services to children after an initial inquiry does not show risk of significant harm.
9. Not recognising the need to discuss fears for one’s own safety when faced with an aggressive or frightening family.
10. Not recording information adequately, not checking facts, and not noting reasons for decisions.

All of this is now common ground to those of us who are familiar with child abuse inquiries and with other literature in the field and of work by other relevant agencies such as The Bridge Child Care Development Service, or NCH Action for Children, plus other valuable work by the NSPCC.

This publication takes an honourable place among the available literature: it is clear, coherent, and well-referenced and should be of great value to practising social workers and those with whom they must collaborate in the precarious field of child protection. Recommended.

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Attention-Deficit Hyperactivity Disorder: A Clinical Workbook


This compendium of questionnaires, rating scales, and a structured interview reflects various aspects of assessment procedures developed for ADHD at the University of Massachusetts Medical Center. Previously published in 1991, it is now republished with half-a-dozen extra footnotes all dated 1995 or earlier. It is essentially unchanged since 1991, which means it is still tied to DSM-III-R. It has been a generous gesture since Russ Barkley gives explicit permission for the scales to be photocopied. A truly new edition of this useful collection will be very welcome when it comes.

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Growing Up With Disability


The declared central aim of this book is to allow children to speak of their experiences of being disabled; as the editors put it, ‘their voices have not been heard’.

The contribution by the Chailey Young People’s Group with Sue Virgo shows that listening is, indeed, possible. Like most of the book, this chapter is clearly written, with little redundancy. It tells of a group set up by young people in Chailey Heritage, ‘who will be able to listen if you have a problem, help if you need to complain and put you in touch with someone who can advise you on what to do’. Details are given of the composition of the group, how often it met, and how many people attended and examples are given of some of the topics raised.

While one gives three cheers for the theme of listening to children, there are other quotations that are far too often what one author referred to as ‘illuminative rather than representative’. The impression given is that quotes have been selected to support the writers’ views rather than determining them. This conclusion is reinforced by the frequent lack of information about the children and what else they have said. One chapter is based on interviews with pupils at 12 schools. How many pupils? What kind of schools were they? Where were they? How were the pupils selected? Were they interviewed with a semi-structured questionnaire or by some other means? Was there any attempt to select quotations by any method other than one that would support the author’s opinions?
There is also an occasional dramatic generalisation that weakens the book. It is said, for example, that there is evidence of social and economic disadvantages confronting all Black children in Britain. (Black is defined as any child with at least one parent of African, African-Caribbean, Asian, Chinese, or Arab origin.) All children? Every single one? In another chapter there is reference to ‘devastating evidence that disabled children are seen as not mattering, as not being human.’ All of them? Seen as inhuman by all adults?

A second theme to the book is the social model of disability, i.e. disability is a social construct. ‘People are disabled by discrimination and prejudice, not by their bodies … the social experience of disabled people can be understood in terms of disadvantage and restriction, not physical incapacity.’ A corollary is that ‘it is not useful to separate various impairment groups—people with visual impairment, with physical impairment, with learning difficulties—as has been the practice of charities, schools and so on’.

Readers who are comfortable with this theory will enjoy this book; those who feel that it is an oversimplification of what is actually a complex problem will be irritated. But the second group should not be put off, for there is, here and there, an acknowledgement of the multifactorial nature of disability. The first chapter recognises differences between people; it sees a need for a ‘balance between understanding disabled people as individuals and members of a disadvantaged group, and between realising the commonalities and respecting the differences’. There is even an argument against using a blanket term such as ‘the disabled’. In the last chapter Sheila Ridell concludes that there were, in her study, differences between the experiences of young people: in her case those with sensory and physical impairments are compared with those with learning difficulties.

Maureen Oswin’s historical perspective is helpful, and the chapter on child abuse by Helen Westcott, pointing out the vulnerability of some children with an impairment, contains a salutary warning. Judith Cavet’s discussion of leisure and friendship is thoughtful and balanced; she makes the point that one can go too far in the direction of inclusion to the extent of denying an opportunity to meet one’s peers: ‘The school of thought that saw socialising with disabled peers as potentially devaluing has been increasingly challenged as inherently disablist.’

Right at the end of the last chapter there is a point made that could well have come earlier: there is an ‘iterative relationship between impairment and the social, economic and political context in which it is experienced’. Exactly.

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Truth and the Child
Ten Years On
E. Blyth, M. Crawshaw, & J. Speirs (Eds.)
Birmingham: British Association of Social Workers, 1998. pp. 84. £5.95 (pb).

This book is an anthology of contributions from a range of people who have strong beliefs about the rights of the offspring of donor-assisted conception. Some feel those rights should extend to all parents telling their children if they are born as a result of use of donor gametes. For others, this extends further still to believing that the offspring should have access to the identity of the donor. The authors come from a variety of professional backgrounds or have first-hand experience on a personal level.

This is not a scientific book: all the authors start from a position of belief and the arguments are developed from these views. Inevitably, there can be no control group: if the donor gift has not been discussed with the offspring, it is not possible to explore with the offspring whether or not they feel disadvantaged. Some contributions are too polemical, whilst others are persuasive. The argument that genetic information is becoming increasingly detailed and that donor offspring will require access to this seems particularly powerful. Other articles that discuss identity and autonomy also make cogent cases for giving more information to the offspring. Reading the personal experiences is moving and fascinating.

The book will help people embarking on the use of donor gametes to decide whether to tell their offspring of the nature of their conception. All those involved in the provision of donor-assisted conception, health professionals and donors alike, would gain by reading this and contemplating the rights of the offspring. The book may be helpful in highlighting the tensions that can arise in families where a child suspects they do not belong and the parents can only respond with increased anxiety because of the burden of secrecy. The book continues the pressure for more information to be held about donors. More importantly, it throws down the gauntlet: what will we tell 18-year-old offspring when the law gives them the right to ask for information in 2008?

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Behavioural Approaches to Problems in Childhood
P. Howlin (Ed.)

This book provides a very welcome addition to the literature on psychological interventions with problems in childhood and a much needed update on behavioural methods. It includes comprehensive theoretical and practical reviews of behavioural work with problems associated with developmental disorders, with an emphasis on comprehensive assessment and individualised programmes. Chapters cover autism, learning disabilities, communication and language disorders, and sensory difficulties. Chapters on hyperactivity and conduct disorders provide very useful background for commoner behavioural problems.

This will have a broad appeal as a text and is particularly recommended for all professionals working with child development and disability teams and their trainees.

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