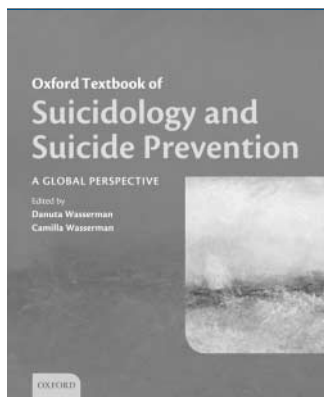


Book reviews

Edited by Allan Beveridge, Femi Oyeboode
and Rosalind Ramsay



**Oxford Textbook
of Suicidology
and Suicide Prevention.
A Global Perspective**

Edited by Danuta Wasserman
& Camilla Wasserman.
Oxford University Press, 2009.
£75.00 (hb). 912pp.
ISBN: 9780198570059

Around the world there are about 1 million deaths from suicide each year. This is more than in all the various wars and conflicts currently ongoing, a fact that would doubtless surprise many, including some policy makers. Suicide is clearly a major public health problem and this new textbook addressing suicide and its prevention is to be welcomed. The editors are a psychiatrist and an anthropologist, widely published in a range of issues related to suicide, who have brought together a distinguished international group of contributors with a breadth of academic and clinical experience in this field.

The strengths of the book are in the breadth of its coverage embracing both public health and healthcare issues as well as giving the reader a truly international perspective on suicide and strategies for its prevention. There is much to be learnt from the shared experiences of authors from every corner of the globe. I was particularly engaged by the chapter on suicide during a time of transition in the former Soviet republics. The ethnic and religious diversity in the post-Soviet countries, as well as the role of alcohol and the anti-alcohol policy in the *perestroika* period, mean the lessons of this chapter have significance well beyond these countries themselves.

It will surprise many readers that the book opens with chapters on suicide in a religious and cross-cultural perspective. The editors defend this decision in the preface, highlighting the fact that suicide is deeply tied up with the individual's existential and social condition; this is also ably argued further throughout the book. Psychiatrists as a group are less religious than their patients, yet strategies to prevent suicide need to 'incorporate the traditional world views of individuals and communities' and their constructions of the meaning of life and death. Thus, psychiatrists should heed the message of these chapters irrespective of their own beliefs.

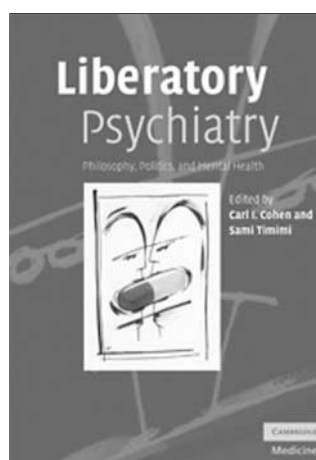
From the perspective of a practising clinician, I found the chapter on the clinical interview as an assessment tool of particular value, as it emphasises being able to understand the patient's 'experiential world' as a crucial part of clinical assessment, complementing standard assessment of risk factors. However, like many other chapters in this book, it will leave the reader thirsting for more.

The book has other weaknesses. Given that the population attributable risk for suicide in people who have a mental illness is 40%, and as one of the authors notes, mental illness is 'an almost necessary but insufficient risk factor for suicide', psychiatrists will be surprised that there is only one 12-page

chapter on major psychiatric disorders and suicide (though this is covered to some degree in other chapters). Other omissions include discussion of mentalisation-based treatments for borderline personality disorder; similarly, discussion of the role of primary care in suicide prevention is weak. Surprisingly in the current political climate, there is little or no mention of suicide as a political act (including suicide bombing). Finally, UK readers will be surprised that this Oxford textbook contains no contributions from the Oxford University Centre for Suicide Research. These comments notwithstanding, this book is a notable addition to the literature on suicide and its prevention and it is highly recommended.

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doi: 10.1192/bjp.bp.109.070151



**Liberatory Psychiatry.
Philosophy, Politics
and Mental Health**

Edited by Carl I. Cohen
& Sami Timimi
Cambridge University Press, 2008.
£37.00 (pb). 306pp.
ISBN: 9780521689816

This multi-author book is a critique of psychiatry and its role in the world. Many authors are from the school of critical psychiatry, which maintains that science and psychiatry are complicit in the oppression of people, because scientific knowledge exists in the context of the prevailing social and political environment and its development requires establishment of institutions, privilege, power, and adheres to normative choices and their values. Science is not value free, but carries the aspirations of those who wield power, and alternative views struggle to achieve legitimacy since their position is powerless within such sociopolitical systems. The authors describe recent changes in the global socioeconomic and political environment and some of the devastating impact that societal structures of power have had on individuals and their health. This is wide-ranging and includes concerns about the role of the pharmaceutical industry, Western practice and service delivery (US-style managed healthcare) which 'commodifies' distress. The book advocates a bottom-up perspective to make sense of these dynamics.

Many readers would object to the denial of professional expertise to alleviate distress. Others would consider the call to dismiss scientific knowledge as counterproductive. We are, however, well reminded that contexts are important, especially since mainstream psychiatry tends to locate problems in individuals – it does not always acknowledge the influence that socioeconomic factors may have on health.

The authors offer a 'constructive postmodernism' approach, which is unconvincing as it appears to have little substance to offer assimilation between traditional/subjective and modern/objective practice. The hegemony of societal institutions is already being