
Book Reviews

Compiled by Susan Savva and Griffith Edwards

Publishing Addiction Science: A Guide for the Perplexed

T. F. BABOR, K. STENIUS & S. SAVVA, eds
London, International Society of Addiction Journal Editors, 2004, 203 pp, \$22.35, ISBN 9241592249(WHO)/095485750X (ISAJE)

There are clearly many different ways to publish addiction research, and it is now possible to consult this impressive co-publication of the World Health Organization and the International Society of Addiction Journal Editors to help decide. There is information here for those who wish to avoid wasting valuable time. This is a compendium of sensible advice on matters which bear directly upon decision-making, such as where to publish.

As I progressed through the text, my opinion of the value of the guide developed. Stimulated by this material, I found myself reflecting on how I make decisions about literature citation and other aspects of manuscript preparation. I recalled correspondences with journal editors, including requests for revisions suggested by reviewers, and wondered how my own considerations informed these encounters. This text has much to say on the process of construction of research reports, as well as finding a destination for them.

There was a further insidious effect, promoted particularly by the later chapters on ethical issues. I found myself being provoked to examine the nature of the research enterprise itself, including the ways in which creative study design may be assisted by the published addiction science; and also the ways in which discussion of study findings may seek reference points in what is already known. This book is strong in underlining that individual decisions about research take place in institutional contexts and inequalities in access to knowledge are profoundly global in reach.

Although very satisfying overall, I was still left wanting more! There is material to guide selection of specialist as opposed to disciplinary and generic journals. I found myself wishing for a generic companion to the very detailed sections on specialist journals. I presume, by its nature, that this would be a very difficult undertaking, but one which would create a truly comprehensive text. I had no other quibbles.

This book serves as a good introduction to the scientific process in addiction, as well as a publication guide. It

will help those who are new to addiction science at stages even earlier than personal concern with publication decisions. I will continue to use it as a reference text. I particularly liked the tone of the text: the 10 authors and editors have combined to create a straightforwardly *encouraging* read, for anyone with any interest in addiction science, and not only for the perplexed!

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Note: The book is distributed by National Clearinghouse for Alcohol and Drug Information, Rockville, MD, USA. \$24.35 including shipping and handling in USA; tel. 1 800 729 6686 and ask for inventory item BKD510. Additional charge for international shipping. Outside USA, tel. 1 301 468 2600.

The Troublesome Legacy of Commissioner Lin. The Opium Trade and Opium Suppression in Fujian Province, 1820s to 1920s

JOYCE A. MADANCY
Cambridge, MA and London, Harvard University Asia Center, 2003, 448 pp, US\$50/£32.95, ISBN 0 674 01215 1

Anyone interested in whether policies can curb or even eradicate drug use might turn to episodes of history for suggestions, and policy bodies reviewing the literature have found some encouraging examples, including stimulant use in post-war Japan and alcohol consumption in First World War Britain [1]. Broad lessons about the importance of public support, changes in fashion and attitudes to law and authority have been drawn, but without in-depth original research it is been difficult to distinguish the precise role of policy.

This intriguingly entitled book gives detailed attention to the motivations and mechanisms of China's most effective campaign against opium smoking. Launched in 1906 and lasting with revolutionary interruptions until 1920, the author places the suppression within a three-dimensional picture of Chinese social, economic

and political life over the transformations of 100 years. By concentrating on the pivotal province of Fujian, Madancy's original research shows how the deep roots of the opium economy, rather than the addictive qualities of the drug, eventually defeated the campaign, reversing its victories.

During the 19th century, the British government pursued cynical and aggressive trade policies towards China, smuggling in opium from India and waging two Opium Wars to gain greater trading access. While Madancy does not shy away from this shameful history, nor does she fall into the common cliché of characterizing the Chinese as mere victims of British imperialism. Exploring contemporary sources, she subtly shows the ambiguity of popular attitudes towards opium, the role of Chinese merchants in the trade, and the integration of the drug into Chinese culture.

Parallels might be drawn with contemporary western tobacco companies who have been accused of similarly exploitative tactics in developing countries, but their critics might well bear in mind the complex processes involved in consumption choices: although supply and marketing can create an unequal power relationship, this does not mean that their targets are mindless automata or that creating demand is a simple, one-way process.

So who was Lin and what was his 'troublesome legacy'? It was the Commissioner's stand to prohibit opium in 1839 and his public confiscation of 20 000 chests of Britain's smuggled opium that led to the first Opium War and China's defeat. In the author's words, 'His doomed struggle against a militarily superior power came to symbolize Chinese dignity and righteousness and, by contrast, reveal the greed of the British opium merchants and corrupt Chinese officials he tried in vain to dislodge.' Many years later, the 1906 suppression campaign relied heavily for enforcement on voluntary groups such as the Fujian Anti-Opium Society, whose deft move of appointing Lin's great-grandson as its first leader enabled it to capitalize on his ancestor's spirit to breathe nationalistic and imperialistic life into their activities. By this time, however, domestic opium production outstripped imports.

Although the book starts in 1820, seven of the nine chapters take place in the 20th century. Its account might have been easier to follow with the addition of a simple chronology and some reordering of material, but these are minor detractions from an accessible, expressively written and extensively referenced book.

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Over the Influence: The Harm Reduction Guide for Managing Drugs and Alcohol

P. DENNING, J. LITTLE & A. GLICKMAN
New York, Guilford Press, 2004, 328 pp, £13.00, ISBN 1 57230 800 1

Following her groundbreaking text on psychotherapy within a harm reduction (HR) practice [1,2], this second book by California psychologist Patt Denning (with Jeanie Little and Adina Glickman) once again stakes out new territory in this thoughtful, comprehensive, and pragmatic self-help book for drug users and their families—an embattled constituency that needs all the compassion and well-informed help it can get. *Over The Influence* remedies all the hyperbole (that mixes so badly with the real risks of drugs) and reminds us of users' multiple agendas and contradictions.

Atypically it examines drugs' benefits, both real and perceived, and draws a conceptual map to help users navigate a world full of good intentions and bad science—shrouded in ignorance, misinformation and prejudice—including a table of psychological, medical and social 'benefits' of different drugs, e.g. staying up to get work done, overcoming inhibitions to meet new people, helping with stress, muscle spasms or cancer chemotherapy. Viewing the drug user 'as a patient' [3] implies an ethical responsibility to understand this side of the equation.

HR psychotherapy has now had several years to try out its new clinical model in practice, working with continued drug use by clients. While abstinence is an acknowledged goal, in HR this might mean stopping more dangerous drugs and forms of use, replacing them with safer ones. More often the goal is 'substance use management', instilling (or restoring) vital elements of control and minimization of risks. The many individual and social compensations of drug use for the user are the root of the patient's real dilemmas—how to achieve drugs' benefits with less risk. To this end the book offers methods for achieving change: 'How do I know exactly what my problem is?'; 'what is necessary, manageable, tolerable?'. If the patient says 'I probably smoke more pot than I should', is the response to tell them they must stop altogether?

Other chapters explain basic HR principles: 'not all drug use is abuse'; 'the meaning of variations in levels of use and the natural history of my drug use'; 'is addiction all or nothing?'; 'how do I know exactly what my problem is?' and 'if we are not addicts, where's the harm?'; 'so why

do I keep using?'; and a guide to the socially normative patterns of use so common in teens.

The book's weakness is its middle-class focus—perhaps a reflection of access to insurance covering such sensitive personal attention in the caustic US environment of managed care. However, the words 'prison', 'crime' or 'AIDS' do not appear in the index—far more predictable corollaries of drug use in America than any drug treatment, harm reduction or otherwise. Increasingly, however, health professionals are expected to care for drug users world-wide, even if 'care for' really means 'get them to stop using drugs'—not necessarily the drug user's agenda. This book will help many practitioners and users bridge this great divide.

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Drug Treatment: What Works?

PHILIP BEAN & TERESA NEMITZ

London: Routledge, Taylor and Francis Group, 2004, 249 pp, £23.99, ISBN 0 415 26817 6

With the first sentence in the preface, the editors challenge supporters of the view that 'treatment works' with the comment that '... there is little research evidence to confirm that assertion': a criticism they make again in chapter 1. Affectionately held beliefs should be challenged. Unfortunately, there is little in the book that enables the reader to consider the veracity of the claim. Most chapters work on the assumption, and usually provide evidential support, that treatment does indeed 'work'. In particular, Gossop (chapter 4) provides a good review of the evidence. While the editors make the less contentious observation that we are unsure how treatment works, and with whom, or which modalities are superior, these questions are largely unanswered by most contributors.

The limited evidence on the effectiveness of treatment in the criminal justice system, a focus of at least five of the

13 chapters in the book, may have influenced the editors. Of course, criminal justice responses are important, but not everyone affected by drug use passes through that system.

Despite Gossop's observation that 'poor drinking outcomes represent an area of weakness requiring urgent attention by drug use treatment services...' almost all the contributors make little or no comment about alcohol, with the notable exception of Brewer (chapter 5), who rightly criticizes excluding alcohol from any review of drug treatment.

Mott (chapter 2) provides a succinct history and outline of guidelines in the treatment of opioid dependence. Gossop's chapter, as already mentioned, is an excellent review of drug treatment evidence. Brewer calls for greater tolerance and cohesion in the range of services. This chapter would have benefited from a greater emphasis on how this might be achieved, rather than the occasional focus on the faults and weaknesses of various professions and treatment approaches.

Longshore and colleagues (chapter 6) present a good overview of the issues and research relating to people who are coerced into treatment, although the chapter would have benefited from greater exploration of strategies to enhance treatment engagement. A frustration for this reader is a common reference to coerced treatment as if there is clearly defined intervention. My understanding is that one can coerce an individual to the door of treatment, but the most important ingredient is the quality of the treatment that happens beyond that door, as it is for all clients.

Seivewright and colleagues (chapter 7) provide a good overview of the challenges in responding to comorbidities, but it is difficult to provide guidelines on good practice for physical and mental health comorbidities in just 14 pages.

The next chapter, by Carver, potentially defines the focus of the book, with 33 pages of text and notes devoted to drug testing. To put this into context, the reader should consider the length of the chapter on treating comorbidities and the mere five pages given in the final chapter to motivational enhancement therapy. Carver challenged this reader. Bold statements are made that drug testing '... cuts through the denial and dishonesty that is so much a part of addiction', despite only modest evidence to support such a claim. The reader would be helped if the role of drug testing were considered along with the nature and quality of the treatment offered, therapist qualities, the capacity to engage and retain clients and the capacity to influence the social capital of people affected by drug use. The chapter would also be enhanced by a focus on the different methods of drug testing and the advantages and disadvantages of each.

The book could have enjoyed a firmer editorial hand. It contains a mixture of reason, opinion, challenge and science, but naive readers may not know which is which. Various terms are used, apparently to describe the same thing (e.g. addict, drug user, substance abusers and substance misusers are all used on the first page). This may seem overly pedantic, but in communication language matters. There are no clear navigational tools to the book and chapters vary substantially in length, style and structure.

An uneven book that has some excellent contributions, but in the main a book that only partially answers the question set in the title.

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Helping Adolescents At Risk. Prevention of Multiple Problem Behaviors

ANTHONY BIGLAN, PATRICIA A. BRENNAN, SHARON L. FOSTER & HAROLD D. HOLDER
New York: Guilford Press, 2004, 318 pp, £30.50, ISBN 1 57230 973 3

The authors start from the idea that many of the youth problems cluster, and the same individuals engage in multiproblem behaviour. The book focuses on adolescents who display more than one of five of the most costly problems for US society: antisocial behaviour, cigarette smoking, alcohol and drug misuse and sexual behaviour that risks pregnancy and disease. First, the aetiological factors of youth problems are presented. After this, the book demonstrates action that is effective in altering the young person's destructive path. Many prevention and treatment methods in current use work on all of these problems.

The data include an extensive data search and meta-analyses and the book is thus a very useful source for all those interested in prevention. For researchers the book also offers several very insightful comments on research methodologies. The book's limitation is that it uses mainly only US studies.

In the section on effective interventions, an overview is first given of those interventions that focus on risk-groups during their preteen years. In the short term the projects have had positive outcomes, but as is pointed out by the authors, few have been studied using a longer time span. Many of the prevention efforts directed towards children in their preteen years could be—and have been, at least in Europe—applied on a universal basis, as well as only among special risk groups, but this is not discussed. An overview of studies looking at universal measures

without regard to level of risk is also presented. These universal interventions usually begin when children enter adolescence.

The usefulness of policies that affect the social, economic or geographic environment is highlighted in a convincing manner. The programmes which make a unique contribution are either those which reduce the opportunity or price of engaging in risky behaviours, or increase the certainty of consequences, because they have a longer life-span than separate prevention programmes each requiring maintenance and funding.

In the final chapter practitioners and scientists discuss developing partnerships with a shared vision to overcome youth problems. This chapter is somewhat rhetorical, as it does not take into account the political processes behind provision of social work and health care in communities. Scientific argumentation about the feasibility of prevention is powerless when social class has to be brought into the equation: we do know that risky behaviours are linked with poverty and marginalization.

The authors conclude that the next generation of community interventions will need to use comprehensive approaches to prevention of the entire range of youth problems. So far these studies are rare, although a few examples of projects using a multi-component approach are presented. It is easy to agree that the authors have a point here, and indeed there is much that connects the different behaviour problems to each other. However, one can argue that this is not likely to be the only way forward. Sometimes it is important to see youth as a part of the total population rather than as a separate group, and to develop community policies to include all age groups at the same time. Preventing young people from obtaining alcohol or cigarettes is not likely to produce results, if the parents keep on increasing their drinking and smoking. When the whole population becomes the target of prevention, as in some forms of behaviour it should be, it is necessary to have prevention practices that focus on individual problems one by one, as we cannot deal with the entire range of human behaviour problems at once. Also, many services found effective in the evaluations do not have to be organized as separate projects, but can be made part of normal, continuous provision of community health and social services, available to all. This might also be the most cost-effective way forward, as the example of universal policies in prevention of misuse of alcohol and drugs and tobacco smoking, discussed in the book, has shown.

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