

ing interpersonal as well as academic competence. Several such programs are described for pre-school children, school-age children and adolescents.

The final portion of the book looks at the role of the school psychologist as a consultant to teachers. This is a more indirect role which still works toward the goal of helping students progress through the school system by offering assistance to those who provide the primary service to the students. Different applications of cognitive behavioural theory are used in developing models for effective consulting. For example, the theory of cognitive dissonance is described briefly and its applicability to the consultation process is explored. The role of the school counsellor as consultant to teachers who are implementing prevention programs such as social skills training, sex education and substance abuse programs is also addressed. A short section on helping teachers deal with stress is included here.

The articles are well-written, informative and scholarly and, in many cases, give enough detail so that the programs described could be implemented in a school. There is also a good balance of theory and practicality.

This collection of articles would make a good addition to the library of a school division as a resource for anyone seeking to enhance the cognitive portion of school-based learning. Counsellors can use this handbook to develop programs to help students improve social skills and deal with fear and depression. School psychologists can use it to consult with teachers about hyperactive and impulsive students and to develop cognitive problem-solving programs. Teachers can use it to improve their teaching in areas of arithmetic, reading, spelling, and writing.

Since the book is a series of articles by different authors there is some unevenness in the clarity and accessibility of the information. Anyone not schooled in reading and digesting research, or without a background in psychology, may find some of the articles difficult. As the subtitle indicates, it is certainly comprehensive and has the potential to be a useful book of information for the practitioner.

Brown, George, and Tirril, Harris (eds). (1989). *Life Events and Illness*. The Guildford Press: New York

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The editors of this book attempt to answer two questions: "Does the specific nature of life events and vulnerability factors differ in different disorders; and do the vulnerability factors relevant for a particular disorder have a similar specificity for those life events?" After a thought-provoking 45 page introduction, the book addresses life events and psychiatric illness, and life events and physical illness. A three-part epilogue concludes the book.

Although a flowery foreword commends the editors for their innovativeness in researching life events and illness, William James (1902) alerted the psychological community nearly 100 years ago to mind-body connections, and Eastern philosophies have, for centuries, accepted this relationship.

The disciplines of the editors are not disclosed but both are employed in the Department of Social Policy and Social Sciences at the University of London, England, and are apparently well known for a book on the social origins of depression. While the book jacket pronounces their first book a classic, I suspect this one will not.

My advice in approaching *Life Events and Illness* is to begin with the summary and conclusions. This section captures the intent, tone and scholarliness of the text, and provides a brief review of the book, allowing the reader to be selective about which additional chapters to read. The section "Life Events and Measurement" is a must since it describes the conceptual underpinnings of the research.

The entire book is predicated on the results of the Life Events and Difficulties Schedule (LEDS), yet an explicit description of the instrument or process is missing. The role of the interviewer is described as important (although tightly controlled), and guidance is provided on what constitutes a life event. More freedom is apparently allowed in actually eliciting a person's story, but the similarity to narrative inquiry is completely ignored. The interviewee completes 28 rating scales—a puzzling choice for researchers who profess to detest checklists—and no rationale for the absence of the instrument in the book is provided.

The editors are direct about their criticism of other instruments that have been stimulated by their work. Whether one agrees, disagrees or is confused by the blend of quantitative and qualitative approaches, by what is present and not present in the work of these researchers, the first chapter is a must for the researcher, novice or seasoned, interested in the relationship between life events and illness.

Depression and anxiety studies using the LEDS dominate the section on psychiatric illness. Although seemingly all of the subjects of their studies are women, the researchers seem unfamiliar or disinterested in adhering to basic guidelines for reporting nonsexist research. Work resulting in their previous "classic" has also received criticism for ignoring even token acknowledgement of the feminist perspective relative to social origins of depression (Roberts, 1981). In this work, respect for contextual issues is present, but traditional categories of pathology remain unquestioned. A very brief comment suggesting the possibility that "future research should concentrate on psychosocial factors in the recovery of individuals" (p. 88) is the most contemporary thought in the book.

The introduction to the section about physical illness describes, although briefly, the efforts of researchers that precede the editors'. Again, by all modern-day standards of nonsexist, research these editors fail. Studies are often reported without clarity as to who constituted the sample. Aside from this frustrating recurring issue, studies into the relationship between life events and appendectomy, abdominal pain, disorders of menstruation, multiple sclerosis, myocardial infarction and functional dysphonia, provide scholarly thought-provoking assistance to the would-be researcher of these conditions. Surprisingly absent from a 1990 book is any mention of conditions such as AIDS or chronic fatigue syndrome.

Who should read this book? Anyone who is seriously interested in the relationship between life events and illness would find this book useful, particularly if they are research oriented. The work done with this particular instrument reflects an effort to blend qualitative and quantitative methodology. Whether one agrees or not with their stance, it is a thoroughly pursued one, set in a particular pathology-oriented perspective. The novice reader, however, may be easily seduced into assuming that this is *the* perspective rather than one steeped in a pathology model and a quantitative methodology. It would be an inadequate test as an overview of the field, and it is insensitive to gender issues as well as contemporary health issues and perspectives. A die-hard practitioner/researcher with a sincere interest in life events and illnesses, who adheres to the DSM III, believes science is furthered by statistical rigour, and who is looking for a way of integrating at least a subliminal awareness of contextual and suffering components of illness into his or her work, might be the only person to truly enjoy this work.

References

- Roberts, H. (1981). *Doing Feminist Research*. Boston: Routledge and Kegan Paul Ltd.
James, W. (1902). *The Varieties of Religious Experience*. New York: The Modern Library.