

Book Reviews/Comptes rendus

Benoliel, J. Q. (Ed.). *Death education for the health professional*. New York: Hemisphere Publishing Corporation, 1982.

Reviewed by: Ronna Jevne, Cross Cancer Institute, Edmonton.

This book consists of six articles describing various attempts to provide death education to professionals. A two-page foreword gives an elaborate professional history of the editor and a one-page foreword attempts to underline the complexity of issues related to adequately preparing professionals to work with the dying. The professionals referred to in the context of this book are primarily nurses and physicians.

Two articles describe courses offered for nurses in university training programs, two at undergraduate level, two at the graduate level. One article describes

cribes a seminar on terminal illness delivered to medical students and the remaining article describes a course offered to a group of interdisciplinary health care professionals.

No common format is followed for describing the different programs. Each in his or her own manner touches on course development, course objectives, content, instructional methodology, teaching strategies, use of resources, and evaluation process. In some instances very creative, personal, and meaningful approaches are woven into experiences. Use of live patients, critical incidents, clinical logs, and role plays were commonly incorporated. Unfortunately, although the reader is exposed to a wellspring of ideas and materials, in most cases the programs could not be reproduced given the information shared in the article.

The articles appeared to deal neither specifically with the issues of the death and dying nor with the methodology for training professionals. The reader is exposed to the breadth of topics covered including self awareness, communication, medical/legal matters, family concerns, and so forth, but there is little discussion of the importance of including the selected areas of focus.

The editor appears to assume that the reader would already be convinced of the need for such training, would be adequately versed in the issues, and would want to read general descriptions of programs which have been offered in the last decade.

The actual programs described are to be commended for their intent, instruction, and evaluations. There is a clear indication that in these programs serious efforts are being made to educate professionals to deal more effectively with dying patients. It is encouraging to read about the approaches that transcend the lecture and that focus on the very basics, such as dealing with your own feelings and relating to the patient and family. Several programs provide excellent resource lists in terms of films, readings, and case studies. Unfortunately, one must extract them from each article.

No discussion of the general "state of the art" is included. The reader has little sense of whether these programs are commonplace or isolated pioneering efforts.

Death Education for the Health Professional would be most helpful as an overview of possibilities to the nurse educator or member of an interdisciplinary hospital team whose task it is to develop a learning experience on the topic of "death and dying" for other health professionals. It would have virtually no value to the counsellor seeking insight and assistance in working with the terminal patient.

Craig, K. D., & McMahon, R. J. (Eds.). *Advances in clinical behavior therapy*. New York: Brunner/Mazel Inc., 1983.

Reviewed by: Eugene Fox and Ceinwen Cumming, University of Alberta.

This book represents a truly fortuitous marriage of editorial talent, research effort, and publisher expertise. Craig and McMahon have chosen "well-considered accounts of new developments" which have dynamic "real-life relevance." Moreover, as they set out to do, they have avoided a dry, technical retrospective. This book is readable. It is for the counsellor and it is for the clinician.

Modern behaviour therapy is presented by several contributing authors in a unified manner around topical and recurring themes. A very central theme is that behaviour therapists do not focus solely on technique, but do focus on such factors as the subjective experience of the client, therapist characteristics, interpersonal relationship, and the socio-cultural context. According to the editors, the behavioural clinician is now able to accommodate these new elements. Additionally, concepts advanced by general system theorists have gained currency with behaviour therapists. For example, this book exemplifies the tendency to examine the system rather than the single case. The effect of influences from the social network of the client on behaviour is acknowledged. This theme is evident in the family therapy of Alexander, Barton, Waldron, and Mas and in the marital therapy of Jacobson. The importance of a systems approach is reflected in the couples treatment of agoraphobia described by Barlow, O'Brien, Lant, and Holden. The Rosenthals also broaden their focus beyond the individual to include the socio-cultural context in their stress management program.

Another recurring theme in this book reflects the increasing trend amongst behaviour therapists to acknowledge the role of cognition and of affect in therapeutic change. Cognitive interventions based on concepts from social learning theory, while not new, have gained considerable respect and are described by several contributors to the book. Indeed, the book begins and ends with descriptions of programs strongly influenced by social learning concepts. The Rosenthals use them extensively as do Foy, Wallace, and Liberman in their program for intervention with chronic mental patients. The influence of other cognitive theories is also present in the book. Murphy, in a chapter which constitutes one highlight of the book, discusses the new motor theories of cognition in his conceptualization of behaviour therapy. If the individual is actively involved in creating reality, then the subjective experience of client and