

lusion to drown out the voices of girls.

An equally compelling political question concerns what happens to those "at-risk" girls who refuse to be silenced. How does society contend with the poor, minority, disenfranchised woman who refuses to shut her "big mouth?"

The authors suggest that these women may experience even further marginalization in adulthood. Just how might that happen? Homeless shelters, mental hospitals, and prisons are filled with women who refused to be silent. In each of these institutions, from the most community based and lenient to the most structured and punitive, women who failed to be socialized into silence are given one more chance to

keep their mouths shut and behave like good girls. While in adolescence, these women had to choose between saying what they felt to be true and honoring their important relationships. Now they must choose between speaking out and maintaining shelter, liberty, and survival.

Perhaps the most interesting reading in the book comes from the authors' attempts to interweave their more personal work on issues of race and voice, culled from six weekend retreats over two years, with the stories of the adolescent girls. The parallel struggles of the girls and the authors highlight just how difficult it is for any of us to overcome the pressures to silence our true voices.

Meeting the Needs of Ethnic Minority Children: A Handbook for Professionals

edited by Kedar N. Dwivedi, D.P.M., F.R.C.Psych., and Ved P. Varma, Ph.D.; Bristol, Pennsylvania, Jessica Kingsley Publishers, 1996, 196 pages, \$24.95

Jeanne Spurlock, M.D.

Dwivedi and Varma have collected a series of 12 papers that address various aspects of cultural diversity that warrant understanding in the assessment and treatment of children with mental disorders. Although the setting is England and the focus is on ethnic minority children and families, the issues addressed are relevant to minority people of other countries, such as Canada and the U.S. Thus the volume should be of interest to a wide range of service providers in countries that have a sizeable immigrant or minority population or both. Of course, the matter of culture should be considered by service providers in the delivery of care for any individual.

In the introductory chapter Kedar Dwivedi addresses differences in cultural ideology and how these differences affect children and their fami-

lies as well as service providers and policy makers. Attention is also given to legislative acts that influence professional practice. Other contributors focus on single topics mentioned by Dwivedi. For example, Harish Mehra writes in chapter 6 on the impact of legislation in the United Kingdom, the Race Relations Act, on residential care for ethnic minority children.

A range of mental health services is discussed in several chapters, such as those on psychiatric needs of ethnic minority children; on children, families, and therapists; and on family therapy and ethnic minorities. The practice and value of community psychiatry are spelled out and well documented by Radha Dwivedi in a chapter on community and youth work with Asian women and girls.

Harry Zeitlin addresses a topic of particular interest and concern to professional groups in the United States, adoption of children from minority groups. Zeitlin's findings and conclusions are relevant to the work of all service providers working in the arena of foster care and adoption. Issues ad-

dressed in other chapters, such as antiracist strategies for educational performance and the health needs of children from ethnic minorities, are also relevant to a range of communities beyond the shores of England.

This volume should be a valuable addition to the libraries of mental health training programs as well as of individual service providers.

Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body, and Society

edited by Bessel A. van der Kolk, M.D., Alexander C. McFarlane, M.D., F.R.A.N.Z.C.P., and Lars Weisaeth, M.D., Ph.D.; New York City, Guilford Press, 1996, 596 pages, \$55

Daniel L. Breslin, M.D.

This book is a state-of-the-art compendium of knowledge about the psychiatric and social sequelae of traumatic experience. It includes the work of 33 contributors from the United States, Europe, Israel, and Australia and is divided into six sections: Background Issues and History; Acute Reactions; Adaptations to Trauma; Memory (mechanisms and processes); Developmental, Social, and Cultural Issues; and Treatment.

Much of the research reviewed in the book investigates the responses of individuals to natural disasters and to the large-scale disasters that are the products of human civilization, including warfare, accidents, and terrorist and other anonymous criminal assaults. There are both methodological and epidemiological reasons for this content. American psychiatry's encounter with returning Vietnam veterans was one of the direct stimuli for the creation of posttraumatic stress disorder (PTSD) as a diagnostic entity, and the military around the world continues to generate an ample

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supply of research subjects. In addition, the Third World continues to be ravaged with an inordinate share of natural disasters in the context of a social order that often borders on chaos at baseline. These kinds of trauma, unfortunately, remain highly prevalent throughout the world, as the book highlights not only through the geographical distribution of its contributors but also in its emphasis on the social context of psychological trauma.

However, the book will not disappoint readers interested primarily in physical and sexual abuse as traumatic antecedents of childhood and adult psychiatric disorders. Indeed, one of the fundamentals of current research is the recognition that the diversity of traumas yields a diversity of human responses. When an individual is traumatized, PTSD is by no means the only possible psychiatric disorder that may result, and the potential for diverse outcomes is amplified when trauma interacts with the process of human development, an area explored in some depth in the book. Despite the complexity these developmental issues introduce into the epidemiology, the chapters reviewing our current knowledge of the biology of responses to traumatic stress—including the neuroendocrinology of affect dysregulation, the importance of dissociation in the development of PTSD symptomatology, and the effects of traumatic experience on memory function—together make the strongest case for the somewhat equivocal proposition that all human responses to traumatic stress have a fundamental unity.

More than one-quarter of the book is devoted to treatment issues, including disaster planning and acute treatment from a public health perspective; the primary prevention of PTSD in the military and in other contexts; the pharmacotherapy of the spectrum of possible PTSD symptoms; and both the cognitive-behavioral and the psychodynamic psychotherapy of trauma-related disorders. Novel approaches such as eye movement desensitization and reprocessing are discussed, as is the "false-memory"

controversy. However, what may in the end prove most useful from a clinical perspective is the theoretical material that addresses, in particular, such issues as how traumatic memories differ from everyday memories, how this difference manifests itself symptomatically, and thus how treatment must be staged in order to be effective.

I agree with the eminent panel of endorsers on the dust jacket that

Traumatic Stress will likely become a standard reference for clinicians and for researchers; the higher aspirations hinted at in some passages addressing social and cultural issues may perhaps be justifiable. The study of traumatic experience has always had far-reaching effects on the understanding of human nature, mirroring the way that traumatic experience has shaped, and likely always will shape, the lives of individuals and societies.

Psychological Trauma From Victims' Viewpoints

Secret Life by Michael Ryan; New York City, Pantheon, 1995, 372 pages, \$25

Come Here: A Man Overcomes the Tragic Aftermath of Childhood Sexual Abuse by Richard Berendzen and Laura Palmer; New York City, Villard Books, 1993, 305 pages, \$21

Evil Web: A True Story of Cult Abuse and Courage by Mary Rich and Carol Jose; Far Hills, New Jersey, New Horizon Press, 1996, 258 pages, \$22.95

Soldier's Heart: Survivors' Views of Combat Trauma edited by Sarah Hansel, Ph.D., Ann Steidle, R.N., Grace Zaczek, M.P.H., and Ron Zaczek; Lutherville, Maryland, Sidran Press, 1995, 254 pages, \$19.95

Farewell Darkness: A Veteran's Triumph Over Combat Trauma by Ron Zaczek; Annapolis, Maryland, Naval Institute Press, 1994, 345 pages, \$31.95

Jeffrey L. Geller, M.D., M.P.H.

Psychological trauma and its aftermath have become a major focus of psychiatric treatment over the last two decades. The origins of this trauma range from major, publicly reported events, such as wars and cult activities, to very private, individual sexual abuse within families. The five first-person accounts reviewed here cover the field. Four of the books are individuals' accounts; one is an anthology.

Michael Ryan, a 49-year-old award-winning poet, writes in *Secret Life* about his hyperactive sexual desire. In doing so, he amply illustrates what Kaplan (1) has called "a dysregulation

of sexual motivation." Ryan, who refers to himself as a "sex addict," takes the reader from his early childhood through his mid-forties, recounting in exquisite detail his transformation from sexually abused victim to sexual abuser.

The abuse that Ryan focuses on was perpetrated by a neighbor when Ryan was five years old. He was repeatedly sexually molested, an abuse that he told no one about and that no one acknowledged. Ryan also writes about his abuse by his alcoholic father, who died when Ryan was 18 years old. These two men, each of whom met his own needs and completely ignored the needs of the developing boy, contributed to Ryan's core identity in which, as an adult male, he was repulsive to himself.

Writing of his adult self, Ryan says,

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