information but fails to integrate them into an organised perspective. For example, it may be that if the reader knows very little about recent scientific advances they might learn something from it. But if they then wish to use this to engage with the contemporary existential issues and take these forward into an analysis of life's basic questions and answers, they would be sorely disappointed.

Despite the carefully non-judgemental stance, this is an intensely personal book. It strives to present an unbiased argument for justifying a diversity of beliefs, but this project is compromised by the lack of transparency in selecting the arguments and, specifically, the unwillingness to own up to the standpoints that have guided the very selective and idiosyncratic shaping of the book. Not at all for readers with an established background in philosophy and, sadly, unlikely to be of any direct use to our clients. Rather, I might suggest, the aim is to educate and inspire undergraduate readers who have managed to avoid intellectual engagement with much of philosophy, history or science.

Dr. Matt Woolgar

Seeking Safety

A Treatment Manual for PTSD and Substance Abuse

Lisa M. Najavits. (2001). New York: Guilford Publications

The future depends on what we do in the present.

(Gandhi)

This book is a treatment manual for therapists working with clients who suffer from both post traumatic stress disorder (PTSD) and substance abuse. It begins with an overview of the literature on this subject, discussing the prevalence of the disorder, what the treatment outcomes are and argues for an integrated therapy that treats PTSD and substance abuse conjointly.

Chapter one explores the philosophy behind the treatment of PTSD and substance abuse and highlights cognitive behavioural therapy as the basis of effective treatment. In examining the self-destructive behaviours and risks associated with the two disorders, Najavits argues that problem orientation and the reduction of current symptoms meets the need of the first stage of this treatment; seeking safety. Interpersonal and case management domains are also added to treatment in order to help patients explore relationship dynamics that re-evoke trauma and substance abuse and to aid patients in accessing services in order to receive the support that they need. Material is related to patients' lives, along with an emphasis on practical solutions, such as safe coping strategies. The treatment also

prioritises the role of substances, exploring how substances only ´´solve`` PTSD problems in the short-term. The treatment does not explore past trauma, the hypothesis being that certain memories may overwhelm and thereby worsen substance abuse.

Chapter Two provides a step-by-step guide as to how this form of dual treatment is conducted. The manual consists of twenty five topics which are each independent. Because of this, the topics can be covered in any order and can be selected by patients so that they feel in control of their treatment. The treatment can be longer or shorter than 25 sessions and is designed to be integrated with other treatments. It can be conducted in a variety of formats, such as groups, and is applicable to a wide range of patients, even those who do not meet full formal criteria for current PTSD and substance abuse. As it is highly structured, it helps patients to know what to expect and emphasises careful planning, organisation and focus, which are needed for recovery from these two disorders.

Although each treatment topic can be discussed in one or more sessions, depending on the length of treatment, each session follows a sequence of four steps:

Check-In: this occurs in the first five minutes of each session, and allows the patients to inform the therapist of their progress, identifying issues that can be discussed in the session. Any unsafe incident since the last session must be prioritised in the current session. During check-in patients are also asked to identify a good coping strategy that they have used since the last session, as it encourages them to respect their strength and reinforces positive behaviour.

The Quotation: each treatment topic provides a quotation that can be used after check-in to emotionally engage and inspire patients. They are asked to read it aloud and then to identify its main points. Patients can also bring in their own quotations.

Relate the Topic to Patient’s Lives: patients are asked to look through the handouts provided and to select the ones they wish to cover. Patients are also provided with handouts which can be read before sessions. During the session, the topic should be related to current and specific problems in the patient’s lives, as the focus is to help patients achieve safety in the present. This can be done by discussing what patients find relevant in each topic and identifying problems to work on. PTSD and substance abuse should be mentioned in every session.

The Safe Coping Sheet: this is used to help patients process events that went wrong in their week, as well as conveying that while everyone has difficulties, personal coping strategies are what is important, and that safe coping leads to positive consequences.

Check-Out: this is the final part of the session, therefore no new issues are introduced at this point. Patients are asked to identify one thing they got from the session, and to name a new commitment (homework). They are also asked about which community resource they will call upon to help with their recovery. They are also given a questionnaire to complete so that they can convey positive and negative reactions to the session.

The remaining twenty five chapters each discuss a treatment topic, providing a quotation, any issues that may arise from the topic, and handouts for each topic. They also provide examples of how to relate the material to patient's lives.

The book is a very comprehensive treatment manual, providing a step-by-step guide to conducting the treatment. The layout of the chapters makes it easy to find certain reference points, and all the materials required to conduct the treatment are available in the various chapters. The additional examples of how to make topics more individual are particularly helpful, especially for those practitioners who are not specialised in the fields of substance abuse or PTSD. The language used in the book is simple and therefore easy to understand, and all specific terminology is thoroughly explained.

As this specific treatment can be integrated with other treatments, the book is useful to any practitioner working with individuals who suffer the dual disorder of PTSD and substance abuse. This may include individuals working within the substance misuse field, or generally within the community, as well as psychologists who treat a variety of patients. Due to the treatment's focus on the present, however, it is not recommended for therapists who explore past trauma, as this is not indicated in *Seeking Safety*.

In terms of its use to the existential practitioner, PTSD may be seen as an existential issue, as trauma can precipitate loss of trust and meaning, with patients often failing to identify any reason for being alive (Frankl, 2004). Substance abuse also creates existential ramifications, through a loss of ideals, an inability to cope with life, and sometimes a loss of the sense of self, thereby pushing away reality. Both PTSD and substance abuse, especially where they occur in combination may destroy the "ideal world" we create to give us a sense of meaning (van Deurzen-Smith, 1984).

Najavits is clear that this treatment aims to relieve symptoms of both PTSD and substance use, so as to keep the patient safe. Although existential therapy does not focus on the illness-health dimension to such an extent (van Deurzen, 2002), integrating this treatment into an existential framework has the potential to enhance the patient`s progress through treatment.

References

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Catherine Atnas

Asian Perspectives in Counselling and Psychotherapy

Pittu Laungani. (2004). London: Brunner-Routledge

This is an exciting read. The author starts off by asking the question do we need another book on counselling and psychotherapy? In the ever-expanding library of counselling and psychotherapy books (the need for the existence of some are indeed questionable) every now and then a significant contribution to the field appears. In my opinion Pittu Languani's book is such a contribution. Although it is targeted to fill a particular gap and primarily deals with issues relating to India, I feel that this is a book that should be read by every one engaged in psychological and therapeutic work.

I say this for a number of reasons: The issue of culture is not some thing that any one working in this area can ignore. Whilst there are numerous books and courses that deals with culture and diversity, these are not always accessible to every one working in the field. In this book the author manages to crystallise key issues on the subject in a few pages in a way that is very accessible to the reader. This I feel is a remarkable feat. The relevance of this book goes beyond working with Asians as a particular ethnic group. I feel that the book is relevant to working with many different ethnic groups with the issues being illustrated using Asians as an example. Whilst the book aims to address issues relating to individuals classified as Asians in Britain, the author is at his best when he is describing Indian culture from a Hindu perspective whilst the excursions into Muslim and Buddhist worlds are rather weak. On the other hand the Indian Hindu examples amply illustrates the issues, the complexities and dilemmas in working with diversity. The case examples cover a wide range of situations that therapist would identify with and would find helpful in every day practice.

The book is clearly aimed at practitioners who are likely to work with individuals who would classed as South Asians in Britain i.e. individuals who originate from India, Pakistan, Bangladesh and Sri Lanka regardless whether they are new immigrants, first second or third generation. It does