Book Reviews 473

these various types of interventions with many of the disorders. Some important issues relating to prognosis and prevention and patterns of delivery of services are covered. A chapter on children and the law deals with child neglect, child abuse, juvenile delinquency, and other forensic issues as they apply to child psychiatry patients and practitioners.

This book makes a useful addition to the child psychiatry teaching literature. It is not as detailed as the multiauthored Rutter and Hersov (1985) book, and it is probably not as research-oriented as the multiauthored text edited by Shaffer, Ehrhardt, and Greenhill (1985); however, it is an effective, clinically oriented textbook.

Dennis Cantwell UCLA Neuropsychiatric Institute

REFERENCES

National Institute of Mental Health (1985). Rating scales and assessment instruments for use in pediatric psychology research (DHHS Publication No. (ADM) 86-173). Psychopharmacology Bulletin, 21(4).

Rutter, M., & Hersov, L. (Eds.). (1985). Child and adolescent psychiatry: Modern approaches (2nd ed.). London: Blackwell Scientific.

Shaffer, D., Ehrhardt, A., & Greenhill, L. (1985). Clinical guide to child psychiatry. New York:

MacMillan Free Press.

The Bone People. Keri Hulme. London, Picador/Pan Books Ltd., 1986, 450 pp., 3.95 (paper).

A reviewer from the *Financial Times* is quoted on the back cover of the Picador edition of this book as follows: "The central portrait, an autistic child who would try the patience of a saint . . .". However, anyone acquainted with autism will quickly discover on reading the book that Simon Gillayley, the child in question, is definitely *not* autistic.

He cannot speak, and he is sometimes socially withdrawn. In addition, his play is occasionally repetitive, he has a few phobias, and shows a range of conduct problems (aggression, stealing, etc.). However, to anyone who shows him love and attention, he communicates fluently and in a socially normal and even sophisticated manner, either through sign language or through writing. In this respect, he shows no communication disorder at all. By definition, therefore, he cannot be diagnosed autistic.

The causes of his mutism, phobias, withdrawal, and conduct disorder are hinted at throughout the book. His real father was a heroin addict from

474 Book Reviews

whom Simon was separated, at about the age of 4, during a shipwreck in which Simon came close to drowning. He was fostered by Joe, a man who abuses him physically. If causes are wanted, such emotional trauma are certainly sufficient explanations for his behavior.

The only time in the book when Simon resembles an autistic child is when, following a particularly savage bout of violence by Joe, he is taken into care. Despite the abuse he has received, Joe is the only person who has ever shown Simon any love. Because the Social Services never give any importance to the possibility that he may actually want to live with Joe, Simon retreats into a shell, rocking back and forth on his bed, stubbornly refusing to communicate with anyone. A pediatrician succeeds in breaking through this state by communicating to the child that he understands why Simon is shutting everyone out.

The book is a fascinating study of child physical abuse, emotional trauma, and conduct disorder. It is also a wonderful novel about life in a Maori community. Without doubt it deserved the 1985 Booker McConnell Prize it received, and I strongly recommend it. But is is patently not about autism, and it is unfortunate that comments like those on the cover (of a book which is bound to be widely read) will only perpetuate in the public's mind a misrepresentation of autism as withdrawal from emotional trauma.

Simon Baron-Cohen University College, London