

Greenspan. Slive tackles the thorny issue of the relevance of feminist therapy for male clients and develops a convincing case for the application of feminist principles in therapy with at least a select group of male clients who have developed some appreciation for the restraints of their role definition. Disputing the claim

that family therapy is non-sexist, Bograd illustrates how the ostensible neutrality of family therapists in fact hides an underlying sex bias. Hayden's interesting contribution is in the tradition of feminist clinicians who toil to transform or translate selected psychoanalytic constructs into a feminist mode.

In spite of the shortcomings outlined above, *The Dynamics of Feminist Therapy* is an eminently readable volume and a quick reference source for a variety of women's issues. But it is both more and less than a book about feminist therapy.

### **WOMEN AND MENTAL HEALTH IN CANADA: STRATEGIES FOR CHANGE**

Report prepared by the Women and Mental Health Committee, Canadian Mental Health Association (National Office). Toronto, 1987.

### **WOMEN AND MENTAL HEALTH, NEW DIRECTIONS FOR CHANGE**

Edited by Carol Mowbray, Susan Lanir and Marilyn Hulce. New York: Harrington Park Press, 1985.

#### *Ella Haley*

Like their titles, both of these books follow a similar theme. The Canadian report considers key issues and concerns, regarding women and their mental health in Canada. This report by the Canadian Mental Health Association (CMHA) is unique in that women's mental health has not been a specific focus in any of its previous research. CMHA was requested by Health and Welfare Canada to conduct this research because it is a national, voluntary organization, one of whose mandates it is to advocate improvements in mental health services and in social policies. Previous to this publication, women have not been one of CMHA's specific foci.

The committee followed several basic assumptions of the Pan American Health Organization (PAHO): 1) Improvements in women's health will only come about by improving their status in education, employment and decision-making roles; 2) Women must be active participants in developing mental health programmes at all levels and stages; 3) Mental health programmes must avoid exploiting women's volunteer health care work for others.

Topics examined within the report include international perspectives on women and health, the mental health and economic status of women in Canada, barriers to improving women's mental health, and mental health services and treatment of women. The authors then

assess CMHA's research reports to date, showing the lack of focus on Canadian women's mental health needs in each report and suggesting areas for improvement. In the final chapter a lengthy list of recommendations is presented on a number of key areas. These include: data collection and research, promotion and dissemination of information, primary health care providers, acute and chronic disease control, environmental health, human resource development, support services and recommendations specific to CMHA.

In Chapter Two, the authors point out the lack of research on the mental health status of Canadian women. It is unfortunate that they do not refer to Carl D'Arcy's research in Saskatchewan. He and his colleagues specifically research gender differences in the use of the various health care providers for mental health care. Another gap in this chapter is the lack of reference to George Brown and his colleagues for their community mental health research in the Maritimes. Guttentag is referred to, but her cautions about the validity and reliability of community health surveys is not heeded. The authors of this CMHA report accept the findings of the Canadian Health Survey without questioning whether women are more expressive than men of the affects being measured.

The chapter on the current economic status of Canadian women is an important contribution to understanding the stress that many women are under. The authors provide a good overview of women's economic disadvantages and the female job ghettos that they work in. A brief mention is made of additional problems which rural, immigrant and refugee women face in entering the job field. The poverty of many single mothers and elderly women is discussed. The authors argue that maternity benefits and affordable child care are essential for mothers to manage economically. However, they offer no suggestions for the young widow, too old to try entering the job market and too young to qualify for a pension. Women's unpaid labour in the home, as homemaker and as health caregiver is examined. Yet no mention is made of the

stressors facing disabled or northern women.

Chapters Four and Five examine specific barriers to women's mental health. These include mental health professionals' failure to go beyond the medical model and examine the social stressors of women's behavior in blaming, devaluing ways, and physical and psychological violence towards women. Topics covered also include the excess administering of psychotropic drugs and/or electroconvulsive therapy (ECT) to women patients. Many mental health professionals continue to locate problems exclusively within the individual and thus regard her as responsible for her own misfortunes such as rape, incest, and wife-battering. Unfortunately mental health services other than psychiatric are not funded by provincial health care. This restricts women's choice of counselling services.

Among the recommendations are calls for research on rural women, lesbian women, women of colour, immigrant women and handicapped women. I would add that the needs of northern women and caregivers of the disabled also require examination. The CMHA authors argue that the various aspects of a woman's life are interwoven. The effects of different barriers which women face are in many cases not independent of each other. A disabled native woman frequently faces problems of lack of services in a rural area. In addition, she must cope with the lack of understanding on the part of health and mental health care workers of her mental health needs as a member of an oppressed group.

The American book on *Women and Mental Health* is written by the Women's Task Force of the Department of Michigan. Its twelve authors held public hearings on women's mental health problems and their treatment. The authors combine two mandates in their book: 1) to present research findings on women's mental health problems, causes and treatment, and 2) to recommend changes and alternatives for improving prevention and treatment of women's mental health problems.

The various sections of the book cover

topics such as sex differences in women's mental health problems and their causes, sexist treatment in the mental health system, diagnoses applied to women, women and their physicians, innovative mental health treatment alternatives for women, and prevention of mental health problems for women in the workplace.

Jean Baker Miller's article sums up the philosophy of the authors of this book. She points out that the mental health professional must reevaluate and undo what he or she formerly accepted as "knowledge." He or she must be open to the new findings about the mental health of women which are emerging. Like the

authors of the CMHA report, Miller comments on the changing structure of the family, and the "feminization of poverty." Placed in a situation with limited choices, many women develop feelings of helplessness. This can have a detrimental effect on both their physical and mental health. It limits their ability to build upon or recognize their own resources. Miller argues that rather than blaming the victim, we must examine societal forces affecting women's mental health. Prevention thus becomes the focus.

Women over the last ten to fifteen years have critiqued the health and mental health fields and created alternatives such

as rape crisis centers, shelters for battered women, post-partum help and childbirth programmes. Miller recommends the continued development of an alliance of women consumers and women mental health workers in providing a force to change the mental health system. I would add that it is not only women who are victimized by the mental health system. If dissatisfied consumers and mental health care workers, regardless of sex, worked together to change some of the problems of the mental health care system, they would have even stronger forces than women alone.

## FEMINIST PERSPECTIVES ON SOCIAL WORK AND HUMAN SEXUALITY

Edited by Mary Valentich and James Gripton. *Journal of Social Work and Human Sexuality* (Vol. 3, Numbers 2/3). New York: The Haworth Press, 1985.

### Elsbeth Heyworth

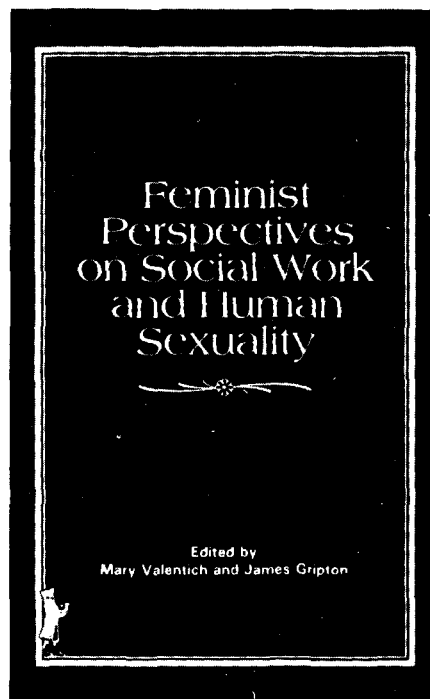
Since the major focus of the women's movement is on the oppression of women, with its principal goal being that of equality; and since social work — itself a predominantly female profession — works primarily with women disadvantaged both by gender and socio-economic status, it is surprising that there has been no clear alliance between the two groups.

Valentich and Gripton's collection of articles is an extremely tentative move towards a shared philosophy. It emphasizes the range of perspectives within feminism and selects the safe option of a "liberal feminist" position — perhaps not surprisingly since it claims that the social work profession generally operates within the existing social and political order. It does allow that this emphasis "does not preclude social action to achieve equality of women and men." But this very lack of affirmation confirms the predominating theme that social workers (frequently equated with therapists in this text) should remain neutral. And neutrality assumes that you don't take a position on potentially divisive issues. For those of us who believe that professionalism has never meant not taking a stand, this book is frequently disappointing.

Certainly there are useful articles, particularly those which emphasize the need to accept a diversity of views on what constitutes a family, or on matters of sexual preference. There are also attempts

to differentiate between traditional concepts (e.g. a psychodynamic or even an integrational approach) and an approach which also relates difficulties in human sexuality to gender. The article on family therapy confronts the neutral stance of systems theory which can permit sexist values to go unchallenged: MacKinnon and Miller use an example of inadequate sexual relationships being explained away by a wife's unresolved loyalty to her family of origins and therefore her inability to fully commit herself to her husband. Another pinpoints the frequent failure of therapists to see distancing itself as a primary issue between a couple, rather than the nature of the sexual relationship. Despite data showing that women seek more emotional involvement than men the problem is frequently viewed as incompatibility rather than as a gender issue.

With some exceptions, such as the



examples quoted above, which make the dilemmas real and bring them to life, this text is mechanical and academic and thus loses the opportunity to search for principles or philosophies or to explore new concepts. In its anxiety to be academic and carefully footnoted it becomes more of a literature review than a penetrating discussion of difficult and complex issues. It only infrequently ventures beyond the clinical treatment area of social work (indeed the "treatment" label is not examined for the assumption that the term implies — that all those who seek help from social workers or therapists are "sick") into other arenas of support groups, self-help, prevention, community. And its statistical and sampling base is sometimes shaky. When conclusions on what constitutes passion are based solely on an academic audience for a database, or when "a range" of psychological problems most likely to require therapeutic attentions for women who were sexually abused in childhood was based on a sample of 22, it is hard to imagine why formal research methods were not jettisoned in favour of a messier but more challenging groping towards new truths.

The major difficulty with this uneven text is its lack of clarity about its base. Diversity, variation, a recognition of freedom of choice is fine, despite frustratingly brief and specific articles. But what is missing is a stronger introduction or conclusion which pulls together issues, which recognizes alternative concepts, values and methods. If feminism is to be linked to social work the very least that might be expected by an eager reader is a consistent awareness of both social context and gender. At best, those of us in practice look for research which will substantiate an enlarged understanding, a clearer vision, a connectedness of thought.