

thrown into sharp relief a number of ethical, legal and social issues. This book is concerned with discrimination because of sexual orientation, the alienation of some groups in society such as drug users, theological responses to minority groups and doctors' responsibilities concerning confidentiality. Additional chapters address the distortions and simplifications which occur in the popular press about complex issues such as sexuality and HIV infection and there is a particularly clear chapter on the legal aspects of being HIV-positive in this country and the United States.

A more enlightened attitude amongst health-care workers, including doctors and policy-makers, will be encouraged if the discrimination encountered amongst AIDS patients is placed in a more general context – which this book sometimes fails to do. I feel this book needs a clear statement of the ethical principles involved and their application to the topics discussed in each chapter. The intended readership is not explicitly stated but the issues are important to a wide audience. Some of the more contentious peripheral issues discussed in the book may detract from the important message for a general readership.

This book results from a conference held in 1986 and its delay in publication gives a dated feel to some of the discussion, for example, new advances in technology have rendered the problem of false positive and negative HIV tests virtually obsolete. Many doctors would also accept that asymptomatic HIV seropositive individuals can now be given treatment which will prolong life. This is bound to influence judgements about the value of HIV testing. The bibliography is often obscure and mainly pre-1986 – few readers for instance, will have access to the abstract of the Third International Congress on AIDS held in Washington DC.

This book addresses extremely important issues which confront all of us concerned about HIV infection. It should be widely available in university and medical school libraries and it is inexpensive enough for many of us to buy and ponder over.

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Social Science Perspectives on Medical Ethics

Edited by George Weisz, 290 pages, Philadelphia, \$17.95 sc, University of Pennsylvania Press, 1990

This interesting book is based on a selection of papers originally presented at a 1988 meeting of social scientists and ethicists carrying out research on issues related to medical ethics. Most contributors draw on data related to North America but Weisz writes on the origins of medical ethics in France, Stacey on the General Medical Council in Britain and Lock on heart transplantation in Japan.

The book has two purposes. The first is to present research on how ethical issues are handled in particular institutional or cultural settings. Decision-making and issues of informed consent are examined in the areas of neonatal care, family planning and psychiatry. Here, the researchers' approach is mainly ethnographic. This allowed them to examine how ethical decisions were made in practice. Other papers look at policy-making in areas of public concern. Rothman examines the process by which the issue of experimentation involving human subjects became politicised in the United States, while Fox traces the evolution of bioethics. These chapters make fascinating case-studies available to a wider audience. They illustrate the dynamics of decision-making and the power relationships between interest groups. It comes as no surprise that medicine dominates but the nuances are important in developing a knowledge of the facets of power.

The book's second purpose is to help bridge the divide between the ethics and social science disciplines. A number of papers draw attention to the limitations of moral theory with its emphasis on individualism and abstract concepts. They point to the importance of examining how mediating structures and institutions such as class, ethnicity, family and profession may expose people to different obligations. They argue for a 'contextualised morality'. However, the problem remains that this is social science rather than ethics.

The issue clearly dogged the conference and could have been more fully addressed in the collection. In a somewhat tantalising introduction, Weisz comments on the dynamics of the conference itself, mentioning 'some'

friendly exchanges between ethnographers and ethicists and the 'surprisingly silent' anthropologists. He looks to ethnography as a possible method for developing the study of morality in practice where there could be common ground between social science and ethics, between the 'is' and the 'ought' in social life. No doubt a structural sociologist would comment that behind the academic endeavours lie concerns about 'turf' and the ownership of knowledge.

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Power to the People

Edited by Liz Winn, 91 pages, London, £7.50, King's Fund Centre, 1990

A coterie of a dozen authors, not medically qualified but working earnestly 'in and around health services', have each produced a chapter about their own sphere of activity to form an 'anthology of approaches which are trying, not just to involve users of the health and social services, but to empower them when they come into contact with these services'. Their 'initiatives are concerned with shifting the balance of power toward those using services and away from those providing them' and we learn that 'where initiatives have succeeded they seem to need at least a partial erosion of service provider monopoly on ideas, debate and decision-making in favour of users'. The booklet's title and its depiction in graffiti form, as well as these preliminaries, hint at revolution. Those who believe our services stand in need of just such a thing, as well as others who think increased funding alone to be the sovereign remedy, may all find in the text items of interest.

Topics include 'empowering older people in respect of their own health care'; tailoring services for those with learning difficulties to what they need and want; 'user group involvement' in mental health services to enable users 'to exercise a greater control over their own lives'; 'citizen advocacy' and an 'advocacy agency'; and what information is necessary to choose a GP or hospital.

The authors would have furthered their cause had their communicative skills been evident to readers. Instead,