

persistent human use of psychoactive substances can be made less harmful to both individuals and societies. In fact, much research still remains to be done to determine the efficacy of these approaches on a broad scale, and it is clear from this volume that experiences implementing harm reduction measures have not been uniformly successful in accomplishing their goal of reduced harm.

As with all edited works, the chapters in this volume are somewhat variable in quality. Some, particularly ones by authors whose primary language is not English, could have borne some more judicious editing. This criticism is a relatively minor one, however, and readers of this volume will come away from it stimulated and with their curiosity about harm reduction well piqued.

FREDERICK ROTGERS, PSY.D.
*Center of Alcohol Studies
 Rutgers University
 Piscataway, NJ*

Fetal Alcohol Syndrome: A Guide for Families and Communities, by Ann Streissguth. Baltimore, MD: Brookes Publishing Co., 1997, 360 + xxvii pages, \$22.95 (cloth).

Few people are so closely tied to the study of fetal alcohol syndrome (FAS) as is Ann Streissguth. As a participant in some of the very first American studies on FAS, she has been active in both research and advocacy for 25 years. She is the author of well over 100 papers and other publications. This book summarizes her work in the field while providing practical guidelines for families and communities that are addressing the problems presented by FAS and Fetal Alcohol Effects (FAE).

The book is divided into five major sections. The first two sections offer an historical perspective on the study of alcohol's effect on pregnancy outcome and a summary of scientific findings to date. These sections are informative, but also problematic. In some sections, anecdotes, opinions and science are all blended together in the same text. Not surprisingly, there is an emphasis on the work that has been conducted at the University of Washington and on other research that supports or complements findings from that institution. Studies that may have found conflicting results are featured less prominently or not at all. Some families will find the language a bit too technical to follow, particularly in the section on teratogenesis. And, although the author makes it very clear that FAS/FAE result from heavy or alcoholic drinking, she also uses terms like "moderate" and "social" to describe some patterns of drinking that she believes also carry risk. Without a more precise explanation, these terms are likely to unduly frighten some readers.

The greatest contributions are found in chapters 6 through 12, beginning with a discussion about the difference between the primary and secondary disabilities of FAS/FAE. Struc-

tural damage is described, and those techniques that may offer diagnostic promise in the future are discussed. Families who have struggled in vain to explain to educators and professionals that their child does indeed have brain damage will find this section especially useful. Families will also benefit from the description of how primary disabilities (such as memory disorders, language processing disabilities, etc.), when left untreated, can result in secondary disabilities (dropping out of school, inappropriate sexual behavior, trouble with the law). This section is a briefer version of Streissguth's recent Secondary Disabilities study; the description here, however, is more concise and easier to comprehend. From it, parents and professionals alike may be able to understand how and when interventions will be the most effective.

The author goes on to describe the day-to-day problems of living with FAS/FAE in infancy, preschool, early childhood, adolescence and adulthood. She offers suggestions on how families, schools and communities can best understand and assist individuals with FAS, drawing on her own experience and her knowledge of what others in the field have found to be helpful. Unlike many of Streissguth's earlier writings, a sense of hope and optimism is conveyed concerning the possibilities of treatment success. Anecdotes are presented to illustrate specific points, and they help to keep the writing accessible. She stresses the value of a diagnosis, the need to set reasonable expectations for people with this disability and the importance of continuing to try to prevent secondary disabilities, all points that families and clinicians will appreciate. General guidelines for intervention are suggested. Specific tips for changing behavior are not provided, but the author does suggest, and describe in detail, an advocacy model to assist individuals with FAS/FAE deal with the stresses of negotiating life.

Ambitious plans are offered for school and community involvement (e.g., a FAS team in each school). The information on preventing secondary disabilities is repeated in these chapters, perhaps because the author was concerned that educators or community leaders might skip earlier sections of the book.

The last section of the book addresses prevention. Streissguth reflects on the complexities of prevention of FAS/FAE, especially as compared with other substances known to cause birth defects. While the description of the prevention programs is again heavily weighted towards those that have been conducted in Washington State or by the University of Washington, the message in this section is clear—treatment of the alcohol-abusing woman can prevent FAS and FAE.

Streissguth has given families much in this book to help them understand FAS and FAE more completely. It will quickly find its way onto home and library bookshelves.

BARBARA A. MORSE, PH.D.
*Fetal Alcohol Education Program
 Boston University School of Medicine
 Boston, MA*