
Aimed at social work practitioners, this book is for both the experienced and inexperienced. Its publication is timely, given that highlighted within the *Victoria Climbié Inquiry* was a catalogue of breakdowns in communication between agencies; and a further recent report in response to *Valuing People*, the First Annual Report of the Learning Disability Task Force identified that Partnership Boards were struggling to include people with learning disabilities.

The authors take a look at care delivered to a range of service user groups, against a backdrop of continually changing government policy, and argue that if care services are to be delivered successfully, then collaboration between service users, carers and professionals is critical. They identify pitfalls and offer pointers to good practice.

This book is arranged in two parts. Part I (chapters 1-4) sets the scene and offers policy, conceptual and ethical contexts for the following chapters. Part II (chapters 5-11) gives views on collaboration in practice from a range of standpoints. Each chapter concludes with a summary of key learning points or guidance for good practice.

Within Part I of the book, the significance of collaboration in the context of social policy is explored, following an examination of the meanings of collaboration. At a practice level, areas of joint working and service integration are highlighted, before offering a new model of collaboration. Whittington describes the trans-disciplinary nature of this model, putting service users and carers at the core. The participants within the process of collaboration are identified and practice issues are explored, concluding this section with an appraisal of values and ethics within professional practice.

Part II begins with the service users’ perspective, providing some thought-provoking accounts that demonstrate the negative impact of failures in partnership working and offering suggestions for good practice. This links with, and is followed by a service manager’s perspective illustrating carers’ issues, which also gives suggestions for good practice. Working with children and families follows, focussing on the prevention of family breakdown and the promotion of social inclusion for children who may be at risk, concluding that whilst effective collaboration can be costly in time and resources, it can improve children’s life chances. Moving on to mental health, the author of this chapter argues that legislation gives a prescriptive framework for partnership working, but making it succeed depends on the way professionals relate to each other and to service users and carers. To add to the diversity of examples within user groups comes learning disabilities, where it is suggested that these services have spearheaded inter-professional collaboration and working practices, but that variable and sometimes poor outcomes for service users and carers remain. It is argued in this chapter that improved team-working and more comprehensive inter-professional education and training is needed, and key learning points for practice are set out. Next, primary care is considered, in relation to service users, carers, social workers, GP’s, community nurses, and managers. Here it is suggested that whilst there is evidence of significant gains to primary care...
professionals from collaboration, the challenge is to translate them into demonstrable benefits to service users and carers. The final chapter advocates that social work should play a major role in the policy and practice of collaboration in the care of older people, but recognises that there are issues of marginalization of older people with implications for the delivery of social care to them. This chapter concludes that an active presence of social work professionals can enhance quality when implementing collaborative policies on assessment and intermediate care.

Whilst the book covers matters relating to key service user groups, the subject of adult protection could have been referred to in more detail given this issue spans all adult users. And there could have been a general conclusion or postscript, which, in my opinion, would not only have brought together the key messages of this book, but reinforced them too.

With perspectives of practitioner, academic, researcher, user, and manager, the contributors’ differing backgrounds give the book diversity. Their collection of styles and views make for an interesting read, and each self-contained chapter can be studied separately, or the whole book used to gain a wider overview.

Kath Hunter
Quality Assurance Officer
Commissioning & Customer Care
Neighbourhood Services Directorate
Milton Keynes Council
Saxon Court
502 Avebury Boulevard
Milton Keynes
MK9 3HS


The book opens with an apt contradictory metaphor drawn by Marian Pitts. Romeo and Juliet, she reiterates, is a young person’s dream and a parental nightmare. This is the right tone to embark upon in a book that could easily have become clinical or condescending. Thus, she gently places young people’s sexuality where it belongs, in the lived experience of young people and the often conflicting attempts by others to protect them from risk. This book is inevitably about lust, love, romance, conflict, and disease. Yet, the topics play lightly with the authors. It is a classically British book, understated and serious, yet inclusive of international perspectives and issues.

I would happily recommend this very readable book to students studying youth within a multidisciplinary context. The central issues covered include the role of schools and education in sexual health promotion, the role of the media, sexual health needs of young gay, lesbian and bisexual people, and supporting the sexual rights of young people with learning disabilities. The sexual health of looked-after young people and culturally sensitive relationships with different ethnic communities are other important themes covered by the book. These themes require coverage on medical, social, educational, and other curricula.

This was an important book to write and a worthwhile book to read. The title is self-explanatory and the topic is easily justified. Sexual health has become an important issue once again. The research clearly shows that the incidence of sexually transmitted infections (STIs) is rising rapidly in the general population, and fastest among teenagers (Nwokolo et al., 2002). The numbers of new diagnoses of sexually acquired HIV infections increased by 20 per cent in western Europe between 1995 and 2000 (Nicoll & Hamers, 2002). The Health Protection Agency has asserted that HIV and STI’s are ‘the greatest infectious disease threats facing the UK today’ (Spring 2005).

Clearly, this is a timely book. Surveillance of sexually transmitted diseases has been a
longstanding tradition in British Public Health. However, the topic of young people’s sexual and reproductive health has been centrally placed in public policy during the last five years. In June 1999, the Social Exclusion Unit produced a report on teenage pregnancy. The Teenage Pregnancy Unit in the Department of Health produced Guidance in 2004 for professionals assisting young people under 16 on contraception, sexual and reproductive health. Despite this policy concern, at the end of 2004, the Health Protection Agency reported that, ‘The continued rises in diagnoses of HIV, the major acute STIs, attendance to sexual health services and sexual risk behaviours highlighted in this report suggest that a scaling up of our prevention responses to a level that will have an impact on the current trends is urgently needed.’

In 1995 Oakley and colleagues’ methodological review of sexual health interventions with young people found a paucity of good, methodologically sound evidence on the outcomes resulting from different approaches to health promotion. This is a difficulty with the health promotion field in general and sexual health in particular. The application of evidence, needed to effectively intervene in the debates, is in short supply. More recently, the Health Development Agency has rightly focused on compiling relevant evidence upon which policy and practice decisions can be based (Swann et al., 2003; Ellis and Grey, 2004)

Amongst the many strengths of Burtney and Duffy’s book are the commitments to evidence based policy and consultation which respect the importance of developing policies and programmes around the needs and views of young people. There is a clear awareness of diversity among young people that explodes stereotypical categories and emphasises the importance of understanding the detail of young people’s perspectives.

The international perspective is also a positive aspect of the book. Ethnocentricism is still too common in textbooks so a text that attempts to have relevance across the globe deserves some praise for effort. The risk of such a venture is always going to be that national differences are not adequately explored and the authors recognise that risk.

I should have liked to have seen more exploration of the different national specifics. What the book does provide tempts the palate. Ingham and Partridge’s comparison of sexual health policies and trends in the US, Australia and New Zealand opens very interesting lines of inquiry. Their conclusion that a more liberal climate towards sexuality among young people appears to be protective asks to be textured by a comparative analysis of the impact of punitive practice on sexual health.

The book rightly emphasises the importance that young people place on confidentiality and cautions that fear of breaches of confidentiality can prevent some young people from accessing much needed services. Yet, there is scant recognition of the conflicts between policies promoting confidentiality and those promoting information sharing, which strain and potentially harm relationships. The embodiment of conflicting models in existing policies needs to be explored in detail. Leaving it up to individual practitioners to handle the contradictions leaves young service users and service providers vulnerable to harm. Munday and colleagues (2002) have described the difficulty they experienced with what has become an everyday problem.

This book doesn’t grasp all the nettles, but it is a courageous book. Nowhere is this more in evidence than in Corlyon’s analysis of the recognition that teenage pregnancies are more common among looked after young people. Corlyon doesn’t flinch from revealing that care settings seem to place extra pressure on young people to embark upon sexual relationships at a relatively young age and provide them with the opportunities for doing so. This 80,000
strong group of young people (p.99) are badly let down by the system. Many looked after young people appear to lack examples of positive relationships and opportunities to learn about trust and respect and, feeling unloved and uncared for are particularly vulnerable to contingent decision-making within a context of spiralling disadvantage (p111).

Many young people who have been denied the benefits of economic independence, education and social status, couldn’t be closer to Romeo and Juliet in their life-threatening experience of what it is to be treated without empathy. Romeo and Juliet, it is worth recalling, were tragically harmed by those who claimed to want the best for them.

Books need to have something to say. The strongest statement I take from this book is the annunciation from Romeo and Juliet, applied in the contemporary context. Young love is to be treasured. Young people need to be heard and if we don’t listen to what they need to say, we risk destroying what ought to considered most precious to us, our human heritage, those who are our future. This message applies as much to policy making as to parenting.

References

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Dr Lynne Wrennall
Public Health Research Group
Liverpool John Moores University
Clarence Street
Liverpool L3 5UG