to evaluation shows how quantitative evaluation addresses whether there is a relationship with outcomes, whereas qualitative evaluation addresses why there is a relationship. Thus both approaches are needed. A social ecological approach not only combines the approaches, but it also takes into account the socio-cultural processes and context of health outcomes. Another chapter opening new doors is that of process evaluation during project implementation. The author, William Stewart, describes the relevance of flexibility, negotiations between different actors, shifting objectives, and the importance of reporting back in his example of a community HIV/AIDS prevention strategy project.

A pedagogically appropriate approach of questioning and showing different meanings of routinely used concepts, such a community (chapter by Rachel Jewkes), is used to good effect. The last chapter, written by Gillian Lewando-Hundt and Salah Al-Zarooni, handles the evaluation of the dissemination of health promotion research. The chapter points out an important problem of competing goals of academic research (publishing) and applied work (practical work) in the area of health promotion. Recent developments of including evaluation of dissemination already in the funding criteria are an encouraging start.

Themes like multidisciplinary evaluation and differentiating between process and outcome evaluation appear throughout the book, but this is not really repetition, but instead, a good way to emphasize the importance of these issues from different perspectives. The text of the book avoids difficult jargon. This makes the text easily accessible for both students and practitioners, but also for non-native English speakers. Use of boxes depicting key points of chapters is a good way of summarizing the content.

This little book can be warmly recommended for all public health and health promotion students and specialists. It is easy to read, but it provides a lot to think about as well as useful hints for research and practical health promotion.

ARJA R ARO


Based on the sobering fact that motherhood is just as unsafe for women living in the poor world as it was 13 years ago when the Safe Motherhood Initiative was launched, this clear and authoritative book pulls no punches.

After more than a decade of getting it wrong in a myriad of ways we can now be a lot clearer about what does not work when it comes to preventing maternal death, as our understanding both of the problem and of effective solutions has matured greatly in that time. Among the interventions highlighted as largely ineffective are such central tenets as the provision of antenatal care, the training of traditional birth attendants, and the use of ‘risk’ screening to predict which women will develop complications. Conversely, success in reducing maternal mortality and morbidity has followed from the strengthening of primary care (including contraception services), provision of safe, legal abortion and the upgrading of emergency obstetric services.

The contribution that epidemiology plays in tackling safe motherhood needs, according to several of the chapter authors, to be completely rethought. Asserting that ‘the values and limitations of different forms of measurement of levels and trends in maternal mortality have only recently become clear’ they argue that ‘the time has come to shift the focus from measurement to analysis, from trying to understand the size of the problem to seeking to understand its underlying causes and determinants’. For those who like their epidemiology action-orientated, the first few chapters will make rewarding reading. The focus ranges from asking what it is we need to know when measuring maternal mortality, through advocating the use of process indicators and on to the limitations of health outcome indicators.

The chapter authors are from a wide range of disciplines and an impressive array of countries. What they have in common is a very readable style and a strong belief, based on their own experience, that it is time to throw out the rule book, stop repeating the mistakes which we have all been making since 1987 and develop a fresh approach. Of what this new approach might consist is mapped out in some detail, making this book one of the most valuable contributions yet made to the Safe Motherhood literature.

JILLY ROSSER

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The book can be ordered from:
Vivienne Harvey, Blackwell Science Ltd, Osney Mead, Oxford OX2 0EL, UK
Tel: +44 1865 206206 Fax: +44 1865 721205
E-Mail: jnl.orders@blacksci.co.uk
Web: http://www.blackwell-science.com/rhm


Drugs: Dilemmas and Choices is a book originating in a Working Party of the UK Royal Colleges of Psychiatrists and Physicians. Funded by the Joseph Rowntree Foundation this group, which contains some of the most prominent academics in the addiction fields, met on 13 occasions over 2 years and heard testimony from a broad range of experts representing most of the constituencies of the ‘drug debate’. The stated aim of the book is to inform and stimulate public discussion. In this spirit, the British Medical Journal ran an enthusiastic editorial to coincide with publication. It suggested that ‘On the assumption that knowledge about a problem is desirable, education authorities should flood secondary schools with this book’. Unfortunately, experience in the field of education and behaviour change suggests that flooding people with written information is rarely an effective strategy. There are other reasons why this well-written, and well-intentioned book may not have its hoped for impact.

First the assumption is that the current policy position on illegal drugs could be significantly determined by existing objective scientific evidence, if only more people of policy influence knew what that evidence was. This is questionable—the book’s comprehensive chapters on the history of the relationship