

- Trimester Abortion. A Health Technology Assessment – Summary.* Copenhagen, Denmark: Danish Centre for Evaluation and Health Technology Assessment, 2005.
- 14 Goldman M, Occhiuto J, Peterson L, Zapka J, Palmer H. Physicians assistants as providers of surgically induced abortion services. *Am J Public Health* 2004; **94**: 1352–1357.
 - 15 Argent V, Pavay L. Can nurses legally perform surgical-induced abortion? *J Fam Plann Reprod Health Care* 2007; **33**: 79–82.
 - 16 Henshaw S. Factors hindering access to abortion services. *Fam Plann Perspect* 1995; **27**: 54–87.
 - 17 Moreau C, Bajos N, Bouyer J, Group C. Access to health care for induced abortions. *Eur J Public Health* 2004; **14**: 369–374.
 - 18 Ferris LE, McMain-Klein M, Iron K. Factors influencing the delivery of abortion services in Ontario: a descriptive study. *Fam Plann Perspect* 1998; **30**: 134.
 - 19 Slade P, Heke S, Fletcher J, Stewart P. Termination of pregnancy: patients' perceptions of care. *J Fam Plann Reprod Health Care* 2001; **27**: 72–77.
 - 20 Wong SSM, Thornton JG, Gbolade B, Bekker HL. A randomised controlled trial of a decision-aid leaflet to facilitate women's choice between pregnancy termination methods. *Br J Obstet Gynaecol* 2006; **113**: 688–694.
 - 21 Fielding SL, Lee SS, Schaff EA. Professional considerations for providing Mifepristone-induced abortions. *Nurse Pract* 2001; **26**: 44–48.
 - 22 Pavlin N, Gunn J, Parker R, Fairley C, Hocking J. Implementing chlamydia screening: what do women think? A systematic review of the literature. *BMC Public Health* 2006; **6**: 221–232.
 - 23 Department of Health. *The National Strategy for Sexual Health and HIV.* London, UK: Department of Health, 2001.
 - 24 Ho PC. Women's perceptions on medical abortion. *Contraception* 2006; **74**: 11.
 - 25 Rorbye C, Norgaard M, Nilas L. Medical versus surgical abortion: comparing satisfaction and potential confounders in a partly randomized study. *Hum Reprod* 2005; **20**: 834–838.
 - 26 Department of Health. *Conscious Sedation in Termination of Pregnancy: Report of the Department of Health Expert Group.* London, UK: Department of Health, 2002; 1–11.
 - 27 Suliman S, Ericksen T, Labuschgne P, de Wit R, Stein D, Seedat S. Comparison of pain, cortisol levels, and psychological distress in women undergoing surgical termination of pregnancy under local anaesthesia versus intravenous sedation. *BMC Psychiatry* 2007; **7**: 24.
 - 28 BBC News. Study finds home abortion 'safe'. *BBC News* report, 15 February 2006. <http://news.bbc.co.uk/1/hi/health/4717786.stm> [Accessed 14 March 2008].
 - 29 Kiran U, Amin P, Penketh R. Self-administration of vaginal misoprostol after mifepristone for termination of pregnancy: patient acceptability. *Int J Gynecol Obstet* 2006; **26**: 679–681.
 - 30 Hamoda H, Critchley H, Paterson K, Guthrie K, Roger M, Penney G. The acceptability of home medical abortion to women in the UK setting. *Br J Obstet Gynaecol* 2005; **112**: 781–785.
 - 31 Shannon C, Wiebe E, Jacot F, Guilbert E, Dunn S, Sheldon W, et al. Regimens of misoprostol with mifepristone for early medical abortion: a randomised trial. *Br J Obstet Gynaecol* 2006; **113**: 621–628.
 - 32 Schaff E. Evidence for shortening the time interval of prostaglandin after mifepristone for medical abortion. *Contraception* 2006; **74**: 42.
 - 33 Schaff E, Fielding S, Eisinger S. Low-dose mifepristone followed by vaginal misoprostol at 48 hours for abortion up to 63 days. *Contraception* 2000; **61**: 41–46.
 - 34 Fielding SL, Edmunds E, Schaff EA. Having an abortion using mifepristone and home misoprostol: a qualitative analysis of women's experiences. *Perspect Sex Reprod Health* 2002; **34**: 34.
 - 35 Guest J, Chien P, Thompson M, Kosseim M. Randomised controlled trial comparing the efficacy of same-day administration of mifepristone and misoprostol for termination of pregnancy with the standard 36 to 48 hour protocol. *Br J Obstet Gynaecol* 2007; **114**: 207–215.
 - 36 Svendsen PF, Rorbye C, Vejborg T, Nilas L. Comparison of gemeprost and vaginal misoprostol in first trimester mifepristone-induced abortion. *Contraception* 2005; **72**: 28.
 - 37 Azlin MN, Abdullah H, Rashid MZ, Jamil M. Misoprostol (alone) in second trimester terminations of pregnancy: as effective as gemeprost? *Int J Gynecol Obstet* 2006; **26**: 546–549.
 - 38 von Hertzen H, Baird D. Frequently asked questions about medical abortion. *Contraception* 2006; **74**: 3.
 - 39 Goss GL. The perception of pain and knowledge-seeking in women choosing medical abortion. *Clin Excell Nurse Pract* 2004; **8**: 172.
 - 40 Trybulski J. The long-term phenomena of women's postabortion experiences. *West J Nurs Res* 2005; **27**: 559–576.
 - 41 Fergusson D. Abortion in young women and subsequent mental health. *J Child Psychol Psychiatry* 2006; **47**: 16–24.

FICTION BOOK REVIEW

The Outcast. Sadie Jones. London, UK: Vintage Books, 2008. ISBN-13: 978-0-099-51342-1. Price: £7.99. Pages: 444 (paperback)

Don't be put off by the cover, which makes it look like a romantic novel, or by the "Richard & Judy Summer Read" recommendation. This is no superficial poolside novel, but one that explores unhappiness and suffering, as well as emotional and physical abuse.

The book opens with 19-year-old Lewis as he leaves Brixton prison, buys some new clothes with a postal order from his father and travels to meet a chilly reception at his father's house in rural Surrey. The novel then goes back to 1945, when 7-year-old Lewis and his mother, Elizabeth, greet his father, Gilbert, who has just returned from the war. Cold and remote, Gilbert stifles any display of emotion, curiosity or playfulness in his son and wife. Gilbert goes back to his job, accepting humiliation uncomplainingly from his bullying boss, Mr Carmichael. The author describes well the yearning felt by Elizabeth for emotion and gaiety, her despair blotted out by recourse to alcohol. Elizabeth concentrates her love and attention on her young son. It would, perhaps, have made the book too unwieldy to look also at the reasons for the emotional

coldness exhibited by Gilbert – perhaps damaged by his experiences in the war? The author portrays his behaviour as normal in this middle-class environment of the stiff upper lip.

Taking a swim after a riverside picnic, Elizabeth drowns, and Lewis is the sole witness. At the inquest, Lewis just stutters when asked to testify. To Gilbert, Lewis's mouth becomes "a kind of wound", and he continues the pattern of repression. Gilbert seeks solace with a new wife, a selfish young woman who cannot cope with Lewis's grief. In fact, Lewis's unbearable grief is ignored by everyone as unacceptable, and he's left utterly bereft and alone. The enormous pressure on him to conform socially is too much, and he finds solace in hidden drinking and self-harm. The author's description of Lewis's feelings of elation after cutting himself and the relief it brings show real insight into self-harming behaviour. Misunderstood by his father and goaded by his father's boss, Mr Carmichael, Lewis's behaviour becomes increasingly erratic until, in desperation, he turns to arson and is sent to prison.

When he returns, only one person seems to (almost) understand him: Kit, the younger daughter of Mr Carmichael and also an outsider. From an early age, she has idolised Lewis, so

when he begins to self-destruct she blames others instead of the victim. The bullying Mr Carmichael turns from physically abusing his wife to beating Kit and the author describes well how Kit feels trapped into accepting his beatings. Kit's manipulative attractive sister toys with Lewis for the thrill of it, while her mother maintains a frigid air of disapproval. Lewis recognises the dysfunctions in the relationships of those around him and the way in which no one speaks of them. When he speaks out, the fury of those exposed is great.

The author evokes a small world of rigid social constraints. It's a world where, on the outside, everything looks conventional and safe. Look deeper and you find alcoholism, child abuse and domestic violence that destroy people's lives. Lewis is terribly damaged, but we can understand his violence and fury. As health professionals we can recognise and learn from the descriptions of the reactions to emotional and physical abuse occurring unseen by the outside world, compounded by the tight social hierarchy and constraints of the stifling 1950s environment.

Reviewed by **Gill Wakley**, MD, FFSRH
Advisory Editor, *Journal of Family Planning and Reproductive Health Care*

We hope that journal readers enjoyed reading *The Outcast*, and also discovering whether their opinion of the book matched that of our guest reviewer. In the April 2009 issue, the fiction book under scrutiny will be *The Memory Keeper's Daughter* by Kim Edwards (416 pages, Penguin Books, 2007, ISBN-13: 978-0-14103-014-2). We want to remind journal readers that if they would like to offer to review an appropriate fiction title of their own choosing then they should contact the Journal Editorial Office by e-mail (journal@fsrh.org) in the first instance with details of their nominated title.