

not attempted to replicate these studies in real medical settings, that influence strategies are only one factor in human decision-making and that ethicists could raise major concerns about the potential for abuse. None of these limitations, however, justifies a lack of awareness.

The science of social influence is a new field, and our review is not the final word. Furthermore, this science emerged from the military education programs of World War II and is biased generally toward techniques that are effective on healthy people. More nuanced research about medical care may now be considered legitimate as the focus of this science shifts from military conflict to the war against disease.

A tendency exists to become overly enthusiastic about solutions to difficult problems when faced with positive results from psychology. The studies show, however, that influence strategies rarely make all the difference. Concrete barriers and supports are crucial (e.g., inconvenience, incentives and information). As Shear implies, clinicians should have no aspirations of becoming wizards who can govern a person's behaviour.

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Circumcision: Time to deinsure?

Charles Wright is certainly on firm ground when he calls for a reduction in the demand for unnecessary and unproven medical services.¹

One measure that could easily be taken is to stop providing an insurance benefit for nontherapeutic infant circumcision. The Canadian Paediatric Society has discouraged male circumcision since 1975² and now says it should

not be performed in the absence of a medical indication.³ Although there is no medical indication in the newborn period,^{2,4} the Manitoba Health Insurance Plan, alone among Canadian health insurance plans, continues to provide a benefit for this outmoded surgery.

By withdrawing funds for nontherapeutic neonatal circumcisions (effective July 1, 2002), Arizona now has joined 6 other American states in denying funding.⁵ Arizona expects to reduce demand by about 12 000 nontherapeutic operations a year. Surely, it is time for the Manitoba authorities to review their schedule of benefits and eliminate payments for such unnecessary procedures. Doctors everywhere should discourage circumcision.

George Hill
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[Editor's note:]

A spokesperson for Manitoba Health confirmed for *CMAJ* that the government pays \$19.50 per circumcision. Between Apr. 1, 2001, and Mar. 31, 2002, the cost of 2122 circumcisions was covered by Manitoba Health; 1802 of the procedures involved newborns.

Berries for brains

Severe mental illness such as schizophrenia is rare in children, but it is nonetheless real. The point of Gayle

Grass' *Catch a Falling Star* is not to send every child who has trouble concentrating at school to a psychiatric ward, but rather to help that small group of children whose symptoms do not go away but seem to get worse and whose worries grow to the point of acute distress and disorganization. In her review, Jessica Mendes says that the book takes everyday experiences such as restlessness, confusion and frustration and renders them the early signs of mental illness.¹ The fact is that they can be early signs of mental illness. That is not to say that everyone who feels frustrated, confused or worried is mentally ill, but rather when these symptoms persist, when they seem always to be present no matter how much one tries to get rid of them, then it is likely that they signal more than the common ordinary frustrations of everyday life. It is for these children that this book is intended.

Mendes argues that mental health is bred by values we instil. Instead of looking at anxiety as a symptom, we should see it as an attempt to do better. Of course anxiety can be motivating, but Mendes' argument denies the reality of mental illness in children. Nor is mental illness a question of values. To suggest this perpetuates the stigma of mental illness and blames the victim.

Mendes identifies berry-picking for special mention, missing the point that this is a way for the Fish and Iris to connect. The specific activity is not important, but to be active in this way has therapeutic value, even though it is not curative.

Children with mental illness are suffering; they are perplexed and they have no idea why they feel the way they do. Ordinary attempts to assist and console them are not sufficient. It is true that the book does not offer any prescription of how a child in this situation can be helped other than through special doctors. There is no simple prescription or self-help manual for children with mental illness of this kind or their parents; the most therapeutic message that can be conveyed is that there is help and one should not be afraid to ask