Book reviews

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Offenders, Deviants or Patients?
(3rd edn)

Professor Prins is well known for his writing in the area of the care and management of mentally disordered people who come into contact with the criminal justice system. His work is not simply from a writing in the area of the care and management of offenders and specific types of crime to the ‘crystal ball’ of risk assessment, the book offers a great deal to a potentially very large readership. It has changed, with the field, over the years. The format of this edition is different, and the order and naming of chapters have been revised. Matters pertaining to the law reflect current developments, and new sections discuss stalking, offender profiling and dangerous and severe personality disorder. The references and suggestions for further reading have been extensively updated and reinforced. In chapter 9, which considers literature as a source of insight into human behaviour, Professor Prins even acknowledges the personal comments of Harriet Walter and Anthony Sher, who played the principal roles in Gregory Doran’s acclaimed version of *Macbeth* for the Royal Shakespeare Company’s Winter Season for the Millennium, on his observations.

Medical students or trainees in psychiatry, with an early interest in the possibility of a career in the forensic field, are likely to find this book particularly stimulating, especially when read in conjunction with the other major texts. Practitioners from other clinical and non-clinical disciplines, working with the individuals and groups described, are equally likely to find important original and source material. With no disrespect whatsoever to the author, in my judgement this book is also likely to be of interest to members of the general public, a reason in itself why its content should be familiar to professionals.

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Counselling Older People:
A Systematic Review


This report, from the British Association of Counselling and Psychotherapy, is a systematic review of the evidence base for counselling older people. ‘Counselling’ in this case has a broad definition and includes psychotherapy, cognitive–behavioural, interpersonal and validation therapy.

From a technical perspective this was a thorough project: a full range of databases were searched and the strategies used are described in detail. The checklists used for quality appraisal of studies are given and the methodology is such that this report would serve as a useful template and resource for researchers wishing to carry out similar work. Inclusion and exclusion criteria are intentionally broad but clearly defined. Other aspects of the body of research in this field, such as the paucity of qualitative work, are discussed. This is not, however, a meta-analysis and fans of forest and funnel plots will be disappointed at the absence of a ‘bottom-line’ effect size for each of the interventions. The benefit of this approach is that this review is much easier to read and digest than the traditional Cochrane format.

The final section, on conclusions and implications for research and practice, is a concise overview of the report as a whole. The usual caveat that ‘more research is needed’ is entirely appropriate: of 47 included studies, the majority were carried out in the USA and only 7 in the UK.

Although I drift towards the ‘biological’ spectrum in terms of my research and practice of old age psychiatry, Hill & Bettle were successful in convincing me of the benefits of counselling for older people. It is almost 100 years since Freud allegedly stated that, after the age of 50, psychic structures become too rigid for individuals to benefit from psychotherapy. This report demonstrates good evidence that people benefit from psychological therapy throughout the lifespan. However, we still have to advocate for older people’s access to psychological therapies. The authors outline the need for services in terms of the UK’s National Service Framework for Older People, and the review would be a useful tool of persuasion for
psychiatrists and service managers in old age psychiatry who wish to make a robust case for increasing the availability of psychological services to older people.

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Psychotherapists as Expert Witnesses: Families at Breaking Point


Child and adolescent psychiatrists – don’t be put off by the title. This is a useful book if you want to improve your skills as an expert witness in family cases, whether or not you present yourself as a psychotherapist. And these days, post-Meadow, all the support possible is necessary. It is not surprising that, on the one hand, courses are oversubscribed and that, on the other, general clinicians are reluctant to get involved in court situations. Within the legal system the stakes for the participants (especially the children and parents) are high, the system is adversarial, outcomes uncertain and feedback from ‘results’ hard to come by. In addition, disgruntled parents, often supported by organised pressure groups, may push reporting to the General Medical Council of doctors whose actions or recommendations they dislike.

The interest of the child is, of course, primary. Kennedy uses amended real-life vignettes to illustrate how he assesses this, which is helpful. He often judges parental capacity for change by willingness to admit some responsibility for what has gone before. Although we might prefer, at a time of evidence-based medicine, general results from research or even case audit, experts have to depend for the quality of their judgements quite considerably on their own service and therapeutic experiences. Here Roger Kennedy’s connection with the Cassel Hospital Family Service is clearly of great value, but is available to few professionals. Kennedy makes the point that recommendations need to be formed in the context of access to therapeutic resources and the willingness of the relevant authorities to fund them. The role as negotiator and mediator outside of the courtroom is also pivotal.

The report of the Royal College of Pathologists & Royal College of Paediatrics and Child Health (2004), although on a somewhat different topic, recommends that doctors should not confuse or combine the role of professional witness – testifying as observer of a clinical/treatment process – with that of the expert witness, who should be independent. A Psychiatrist hopes to be ‘therapeutic’ even in assessment but in court will need at the very least to clarify in which role he or she is acting.


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