The Mental Health Professional and the New Technologies: A Handbook for Practice Today

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Book reviews

Don’t be put off by this tome’s title and length. The authors’ refreshingly lucid writing is a good guide to ways in which computers and other ‘psychotechnologies’ are starting to influence the mental health field. Most readers will look just at sections relating to them. The authors first clarify terms such as e-health, telepsychiatry, telehealth, online clinical practice, cyber-counselling, virtual, avatar, chat rooms, whiteboards, bits, bytes, transmission channels v. devices, internet v. worldwide web, modem and a host of further concepts. Acronyms are sensibly spelt out when first used.

The book discusses barriers to using psychotechnologies, how that use is affecting clinical practice, the growth of coaching to help users and relevant new professions, economic issues, the fluidity of boundaries across mental health services, and the flux of e-counselling companies. Numerous case and other vignettes illuminate the pros and cons of various technologies. Unexpected mishaps occur – articles appear online that are attributed to professionals who never saw them and whose reputations can be damaged by them, yet they are hard to remove from a site. Bullying by SMSs (short message services) has been reported. ‘Flaming’ e-mails highlight the pitfalls of unleashing angry messages into cyberspace and the need for ‘netiquette’. The prospect arises of ‘cyber-dildonics … devices that a physically remote partner can operate over a communication network to directly simulate a sexual episode’, but, the authors dryly continue, ‘safe, affordable, appealing, and FDA-approved equipment has yet to be marketed (p. 384)’. Remote sex therapy and experience will stretch the minds and tax the moral sensitivities of many sections of society. Cyberdildonic theatres loom, with mass participation. Watch this space. On cooler issues, the book has a chapter for professional website authors, discusses trade-offs of telephone, videophone and videoconferencing and how to run these, deals with electronic practice management and electronic record-keeping, and speculates about future challenges from psychotechnologies.

All five authors have worked in the USA with experience in, among other specialities, psychology, psychiatry, nursing, international law, and research management. Discussions on legal, regulatory and reimbursement issues focus on US work, limiting their value for readers in the rest of the world. Another limitation is that although the book appeared in 2005, it has little coverage of the burgeoning worldwide work since 1998 on computer-aided assessment and self-help psychotherapy. The relevant work by the National Institute for Clinical Excellence is not noted. The lacunae highlight the explosive speed with which the field is expanding and how hard it is to keep abreast of developments. Computer-aided vicarious exposure is mistakenly grouped with immersive virtual reality.

Such problems notwithstanding, the book is a fine introduction to many psychotechnologies of growing importance. It deserves space in the reference section of every library used by mental health professionals.

Isaac Marks  43 Dulwich Common, London SE21 7EL, UK. E-mail: i.marks@op.kcl.ac.uk

Autism: Mind and Brain

Given the plethora of publications on autism, any addition needs to state a very specific intent. This book looks at recent research linking behaviours (mind) in autism to brain abnormalities. Several key themes are examined through cutting-edge research from three continents. Their seemingly logical progression probably owes as much to editorial art as to nature.

One of the themes explored is the drawback of characterising autism in behavioural terms, starting with the intriguing possibility that the disorder bearing Hans Asperger’s name might not be the one he described. Tager-Flusberg and Joseph echo the importance of characterising the ‘endophenotype’ of autism in terms of neuro-cognitive deficits linked to neuropathology. Another study of congenitally blind children elegantly cleaves the social effects of visual impairment from the deficits in reciprocal engagement that characterise both visually normal and impaired people with autism.

This decanting of ‘core deficits’ from the various trajectories that may lead to autism remains the Holy Grail of autism research, which will enable a more informed study of the aetiology, natural history and treatments for autism.

The neurophysiological basis of one of these core deficits, ‘shared communicative reference’, is explored in the articles on joint attention, reflexive visual orienting and eye tracking. The idea that brain development itself may be influenced by aberrant brain process deriving from a primary deficit is a fascinating perspective.