

## Book Reviews

### **Health Psychology: Theory, Research and Practice**

David F. Marks, Michael Murray, Brian Evans and Carla Willig  
London: Sage, 2000. pp.422. ISBN: 0–8039–7608–9.

There are a number of general health psychology texts around. This book provides an account of the general themes with an applied focus on health promotion and disease prevention. Behavioural and cognitive psychotherapists who are interested in obtaining an overview of key health psychology topics will find this book well structured, readable and relevant. The book integrates both qualitative and quantitative approaches to highlight behavioural factors associated with health, illness and disease. It is in three parts and has 15 chapters. Each chapter begins with an outline followed by general definitions, then the main chapter content, and finishing with future research, chapter summary and key terms. The book is well referenced and has an extensive glossary.

Part 1 reviews the field of health psychology and also examines the macro-social environment and health, and finishes with a review of cross-cultural health perspectives. Part 2 focuses on health behaviours and experience, with chapters on coping, eating, drinking, and smoking. Most chapters in Part 2 include a description of the physical and psychological impact of the problems, reviews of the key theoretical perspectives and comments on empirical findings. In Part 3 the authors focus on the major processes in health promotion and disease prevention. These include cognitive and social representations of health and illness, and this section also includes themes on communication, compliance and empowerment, immunization and screening and health promotion. The book will prove useful to behavioural and cognitive psychotherapists with a general interest in the key themes, models and research in health psychology.

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### **A Clinician's Guide to Legal Issues in Psychotherapy or Proceed with Caution**

William H. Reid

Phoenix, Arizona: Zeig, Tucker & Co., 1999. pp.195. ISBN: 1–891944–08–8.

William Reid has produced a great deal of writing on the treatment of psychiatric disorders, much of it on DSM-IV diagnostic material. Reid describes himself as a straight talking Texan, and that is exactly what this book offers: a simple, no nonsense guide to a variety of legal and ethical concerns that a clinician could come across. The book is situated in an American clinical context. Many topics are, however, things every clinician should keep in mind.

Reid apparently is proficient at being an expert witness and has a good deal of involve-

ment with the court system. The book is to help you, the therapist, avoid getting sued. I don't know what those chances are currently in Britain, but I suspect people are becoming more litigious as time goes on and they have more access to legal recourse when dissatisfied with a service we offer.

The book is fairly comprehensive. Chapters cover different kinds of relationships, professional, patients and their families, and impaired colleagues. There is some information that I learned in training that still bears repeating, such as boundary issues, how best to document case notes, adherence to standards of care and informed consent.

An important issue for any clinician is the duty to warn. Reid's discussion on our duties and the idea that clinicians have "special relationships" with clients, and the duties and responsibilities incumbent on the relationship seem applicable anywhere. Other interesting chapters include ideas about consent and who can give it, what is a legal valid consent, and the difference between confidentiality and privilege. A negative undercurrent to the book was the managed care system in the US.

The chapters on forensic training and practice and being sued were the most interesting. Both gave an insight into what the clinician should know, and how one should deal with a court situation and/or being subpoenaed. I liked Reid's home truths, such as, "the law is interested not only in what you know, but what you should have known" and his advice for a troublesome case, "never worry alone". I could have used a book like this when I began to practise. Reid is a clear and reassuring writer familiar with psychotherapy ethics and the legal system, who has a simple guide as to how to keep clinicians on the straight and narrow!

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### **Anger Control Training**

Emma Williams and Rebecca Barlow

Bicester, UK: Winslow Press, 1988. pp.158. £54 (paperback). ISBN: 0-86388-184-X.

In this guide, Williams and Barlow provide a comprehensive treatment package aimed at modifying anger and aggressive behaviour. Their step-by-step approach is suitable for clinical professionals seeking guidelines for adult group-based treatment within a CBT framework. The methods described purport to help change maladaptive patterns associated with hostility and uncontrolled anger. While the guide is likely to be valuable to all CBT practitioners, the authors extensively limit its applicability. Individuals with substance abuse problems, organic illnesses, active mental illness, and learning disabilities, as well as individuals whose aggressive behaviour is aimed solely at a partner, are all recommended for exclusion from the programme. Although it is arguable that some of these conditions might make treatment more difficult, surely these are precisely the clients for whom a programme such as this would be of great benefit.

The manual comprises four parts in three separate volumes. Volume One (Parts 1 and 2) provides an overview of the underlying theoretical principles for understanding the aetiology of aggressive behaviours. I would have preferred much more information in this section, as the theoretical explanations of these problems are described only in scant detail. Four theor-

ies concerning development of maladaptive anger and aggressive behaviour are briefly mentioned, but I feel that in order to lead a group treatment programme I would require a much more specific account of the various perspectives. In Part 2 the authors review pre-treatment assessment strategies and recommend their various suitability criteria for consideration.

Volume Two contains the essence of the treatment and is very much the strength of the book. Detailed instructions for facilitating 12 sessions incorporate aims, objectives, and the particular focus for each session. Numerous handouts, assessment forms, questionnaires, diaries, and exercise materials accompany the guidelines for each session and a publisher's note clearly encourages photocopying of these materials. Specific step-by-step methods aimed at achieving each week's objectives are provided, along with a concise explanation about the importance and relevance of each step to the overall programme goals. Suggested time frames for components to each session also help structure the sections. Even very specific details such as the initial membership contract form have been carefully appended for use. The final volume contains a number of optional materials and ideas. These are meant to supplement the core programme and can be included as required.

I think this practical guide provides a useful and relevant CBT programme for treating anger problems. The materials are bound to be functional for all practitioners and the three volumes are handy and easy to use. While the authors definitively recommend several suitability criteria, I think this programme would be useful for a wider range of clients with unresolved anger problems. A thorough examination of the models of development is lacking, and readers may find it necessary to consult some of the references contained in the bibliography.

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### **Outcome and Innovation in Psychological Treatments of Schizophrenia**

Til Wykes, Nicholas Tarrier and Shon Lewis

Chichester: John Wiley & Sons, 1988. pp.291. £22.50 (paperback). ISBN: 0-4719-7842-6.

The book covers a wide range of topics from core issues such as CBT of schizophrenia, Integrated Psychological Therapy (IPT), family interventions, biobehavioural therapy and a chapter on the current state of their empirical evaluation. It also includes a chapter on depression in schizophrenia and the dissemination of psychological treatment. What defines and contributes to innovation in psychological treatment is determined by the individual approach of the author, and therefore innovation in psychological treatment of schizophrenia is addressed from a variety of different perspectives.

The first chapter by the editors outlines factors relevant for discussing outcome studies of innovative treatment of schizophrenia, including topics such as a recent move away from rigid psychiatric psychosis, and the sources of present theories of schizophrenia. Nuechterlein and Subotnik's chapter about the cognitive origins of schizophrenia reviews briefly and comprehensively current theoretical conceptions of the key cognitive deficits embedded in the framework of Cowan's model of information processing. Another chapter by Bentall and Kinderman is dedicated in more detail to the psychological processes supported to underlie delusional beliefs and it ends with a rather short section on treatment implications.

A good overview of more practical CBT techniques applied with acute positive symptoms is given by Kingdon and Turkington as part of their trial description. They do not, however, debate how far these are defining techniques of CBT for schizophrenia or how the techniques relate to other CBT approaches mentioned briefly in the same chapter. Spaulding, Reed, Storzbach, Sullivan, Weiler and Richardson discuss the remedial approach to cognitive therapy for schizophrenia, focusing on the mechanisms of change and the outcome of the Nebraska Integrated Psychological Therapy project. The effects of caring for someone who has psychosis from a family and staff point of view is examined in Kuiper's chapter. She includes information about family interventions and its effectiveness. A very informative chapter about the differential effects of psychological therapy and pharmacotherapy in schizophrenia is provided by Liberman, Marder, Marshall, Mintz and Kuehnel, putting into perspective the effectiveness of social skills treatment compared with the traditional drug treatment. The chapter by McPhillips and Sensky provides an excellent overview of factors influencing compliance and the practical management of non-compliance and its effectiveness. Birchwood and Iqbal discuss depression and suicidal thinking in psychosis. The origins of depression is proposed to be associated with dysfunctional beliefs about the illness and the powerfulness and intent of voices. The chapter ends with suggestions for CBT treatment supplementation regarding depression. Tarrier, Haddock and Barrowclough discuss why, despite its effectiveness, psychological treatment for schizophrenia is not well established in the health service in the UK and they debate which measures could be used to efficiently teach clinical skills to professionals.

These chapters covering the description of innovative therapy and related issues are supplemented by some more methodological chapters, with topics ranging from the appropriate outcome measure to the cost-effectiveness studies of innovative therapy. Drake, Haddock, Hopkins and Lewis give a comprehensive overview of the measurement instruments used in outcome evaluation and their psychometric characteristics. Garety, Dunn, Fowler and Kuipers review the methodological issues of outcome evaluation, including a neatly structured comparison of traditional and revised conceptualizations of delusions and hallucinations and their relevance for outcome measures in evaluation studies. An excellent overview over the data available on the cost-effectiveness of four forms of innovative psychological treatment (family interventions, social skills training, cognitive remediation and CBT for persistent positive symptoms) is presented in the chapter by Brenner and Pfanmatter. The book concludes with a chapter by Knapp and Healy on the need for economic evaluation of psychological treatment in order to inform health service provision.

The fact that the book is a collection of independent chapters written by authorities in their field is a great asset. Each author's contribution illuminates the issue from an interesting angle and in a unique way. However, one of the book's drawbacks is that the variety of topics and authors inevitably involves a lack of coherence between chapters and the over representation of some subjects (e.g. the effectiveness of family therapy is discussed in three chapters). I was also surprised that A. Morrison's most recent conceptualization of auditory hallucinations is not mentioned, which has direct treatment implications for hallucinations in schizophrenia.

The cover states that the book would be suitable for clinical psychologists, psychiatrists, and nurses, and these professionals will indeed find valuable facts about the effectiveness of different psychological therapy, factors influencing medication compliance and the impact of caring for a person with schizophrenia. It would also be interesting for the academic

reader, who requires updating on one or more of the specific issues addressed in the chapters and who wishes to learn about ongoing research studies and where future research should proceed.

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**Cognitive Therapy for Bipolar Disorder: A Therapist's Guide to Concepts, Method and Practice**

Dominic H. Lam, Steven H. Jones, Peter Hayward and Jennifer A. Bright  
Chichester: Wiley Press, 1999. pp.320. £39.95 (hardback). ISBN: 0-4719-7939-2.

This book provides a clear and coherent guide to the practice of cognitive therapy with bipolar patients. It describes a treatment approach for manic depressive patients developed as part of a clinical trial to examine the prophylactic effects of cognitive therapy in conjunction with medication. The essence of the approach is to promote stability and prevent recurrence of both manic and depressed episodes.

The first part of the book reviews the literature relevant to manic depression, including diagnosis, current treatments, psycho-social aspects of the illness and a model for intervention. An important section deals with prodromes, the early warning signs of a manic or depressed episode. Evidence is reviewed indicating that patients can detect prodromal signs and that different coping behaviours can be adopted when prodromes are detected. Another useful section reviews the medications used to manage bipolar illness, their effectiveness and their side-effects. The review of psychosocial models in bipolar disorder is important in identifying those factors that may be important in promoting manic or depressed episodes. In particular, disruptive life events and disturbance to circadian rhythms are identified as important. The authors then present a diathesis-stress model of bipolar illness, linking biological vulnerability, stressors and poor coping strategies in the initiation of a depressed or manic episode. This model then leads to a cognitive-behavioural approach that stresses psycho-education, the use of cognitive-behavioural skills to cope with prodromes, and the importance of sleep and routine.

The second part of the book methodically works through a structured programme for treatment, dealing in turn with assessment, explaining the treatment rationale, goal setting, the use of cognitive and behavioural techniques and teaching self-management and coping with prodromes. Each chapter clearly explains the range of strategies available and how they fit into the overall conceptualization of the individual's difficulties, illustrating each approach with a case example and detailed transcripts of therapist-patient interactions. This multi-layered approach makes the ideas and techniques very accessible and understandable. The chapters on explaining the model, goal setting and cognitive-behavioural techniques contain much that is familiar to those versed in standard cognitive therapy for depression. Less familiar ideas appear in the chapter on prodromes, where the use of Socratic questioning to elicit the early, middle and late stages of a manic or depressed episode is described. These signs are then used to draw up coping plans to minimize the further exacerbation of an episode. For example, an early sign of mania may be overactivity and over-

stimulation; the related coping plan may be to retire to the bedroom for several hours to calm down. The manual also stresses the importance of the social context and interpersonal situation, looking at how other people can be involved in a beneficial way with the patient. The final chapters deal with interpersonal and emotional issues such as shame, stigma, loss and anger, flagging up the importance of these more chronic difficulties and suggesting useful ways to explore them.

In summary, this is a clear and readable book, which I would recommend to anyone working with patients with bipolar disorder. The philosophy behind the book provides insight into a distressing and complex disorder, whilst the structure and detail provide a workable and practical approach to implementing treatment.

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