

Book Reviews

COERCION AND AGGRESSIVE COMMUNITY TREATMENT. By Deborah L. Dennis and John Monahan. New York: Plenum Press, 1996. 212 pages plus Index. \$39.50.

Reviewed by Jonas R. Rapoport, MD

Once again, we have an important book from the John D. and Catherine T. MacArthur Foundation's Research Network on Mental Health and the Law. The goal of the network is to build the empirical foundation for the next generation of mental health laws. It is important that this empirical foundation have clinical input and not be solely law driven, to have laws that are in the best interests of our patients. We have only to read Appelbaum's 1996 APA/AAPL Guttmacher award-winning book, *Almost A Revolution: Mental Health Law and the Limits of Change*, to see how the mental health laws that he discusses, while producing some help for our patients, has also led to nonproductive hardships for patients and practitioners. We must continue to search for a balance that the law may not be able to furnish any more easily than we can.

Coercive and aggressive treatment of the mentally ill has always been a conundrum. Examples include the earliest immersion treatments and trephining of the skull to let out the demons, to John Rosen's aggressive physical treatment of schizophrenics in the fifties, to more recent megadoses of medication. Some of

us may be willing to try any means to help our patients. With deinstitutionalization came another need for extraordinary efforts to "cure" our patients who some say don't want to be cured (and some of them don't) but who others say are unable to make an informed decision because of their psychosis. It may be that the problem lies therein. Those who don't understand what psychosis does to mentation are unable to appreciate what it does to thinking and reasoning (this includes most lawyers, judges, legislators, families, and even some mental health professionals). While it is imperative that we give as much autonomy as possible to our patients and protect individual freedoms, we also have a duty to protect and help those who cannot care for themselves. In these days of preoccupation with the economics of the delivery of health care, we must continue to try to reduce chronicity and exacerbations of illness.

Deborah Dennis and John Monahan have selected material for this book in a fashion that maintains the high standard we have come to expect from Monahan (winner of the 1996 APA Isaac Ray Award). In the preface we read: "Now, the legally and ethically perplexing questions are most likely to concern whether a person with a mental disorder but without a home in the community can be made dependent on an outreach worker's food and friendship as a method of inducing compliance with outpatient treatment" (p viii). This statement lays out the area of concern discussed in this multiauthor book. Many of the possible coercive/aggressive efforts presented here are at the cutting edge of our armamentarium to

help those patients who resist our attempts to help them. Some of these efforts might be considered ingenious, although coercive, and they do not all produce useful/helpful results. There are probably many useful interventions that some believe are coercive that we don't know about (and may not want to know about). Many that are known are reviewed and discussed here with a view to their ethical and legal foundations. We certainly need to be mindful of the possible excesses in our effort to treat, yet where should we draw the line?

This book is divided into three parts—part one, Coercion: From the Hospital to the Community; part two, Coercion and Treatment: The Community Provider's Perspective; and part three, The Social Context of Aggressive Community Treatment. This is the first book that I know of that deals with these issues in this depth and detail. One of the ideas discussed refers to housing made contingent on, for example, taking medication or attending counseling or day programs. Lawyers Korman, Engster, and Milstein in the conclusion to their chapter, "Housing As A Tool of Coercion," say: "It conditions the occupant's rights to live without interference—on the obligations of any tenant: rent payment, non-destructive behavior, behavior that does not harm or disturb others. . . . If an individual rejects treatment, as is her right, she must find her own way toward lease compliance or face loss of housing. At that place, a tenant

with a disability chooses responsibility for her own behavior" (p 111) *but is she really able to make this choice?* However, epidemiologists Susser and Roche say: "Outreach clinicians should not be encouraged to use coercion indiscriminately. There is a need, however, to recognize unspoken use of coercion in clinical outreach and to examine whether at times it can be a useful approach in treatment. In this context, coercion does not always translate into loss of patient autonomy. Rather, it may enable the clinician to use persuasive and assertive interventions in situations in which other approaches are not productive. The results of these interventions may, in fact, enhance patient autonomy" (p 82).

Unfortunately, the final conclusion seems to be Diamond's contention that "coercion is often used when other resources are unavailable, and could be avoided if other resources were available" (p 63). The problem with that solution is that there will never be enough resources, no matter how many laws are passed and how much money is spent. Just as unfortunate is the necessary converse, that we must keep shouting for more in order to maintain what we have and possibly gain a little.

I recommend this book for all who are concerned about the outpatient treatment of the mentally ill, either as providers, the legal profession, or family and friends. To be aware is to have knowledge that helps develop solutions.

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LAW, MENTAL HEALTH, AND MENTAL DISORDER. Edited by Bruce D. Sales and Daniel W. Shuman. New York: Brooks/Cole Publishing Company, 1996. 560 pp. \$60.50.

Reviewed by Paul Darlington, MD, FRCP

The editors indicate the book was intended for both legal and mental health audiences and the book delivers as promised. Part I is given to general concepts; Parts II and III discuss, in depth, a number of forensic issues relating to mental health professionals and the law; Part IV deals predominantly with forensic mental health as it relates to criminal issues; and Part V deals with mental health as it applies to children and families. Overall the book gives numerous references to U.S. case law, which is of considerable assistance to American readers. A number of examples are given both from the perspective of a mental health worker and the perspective of legal workers, allowing the reader to gain an understanding of both sides of the training of these professionals.

The book successfully links the general and relatively elementary perspectives of mental health and the law with the more complex and intricate aspects often found in difficult cases. A good description of the legal system's ambiguity, in addition to its dichotomy, is given with examples. Historical perspectives leading up to current case law are described in detail. All chapters are well referenced to books or articles in journals for the reader who wishes to pursue further knowledge. In

general, all areas seem to be covered with thoroughness.

The authors discuss in detail such ethical/legal issues as child abuse reporting, with an explanation of the rationale and the pros and cons of such legislated concerns. The authors address a number of areas that the average textbook does not, such as antitrust laws, marketplace competition regulation, and professional society membership, giving significant case law and history. Organization of mental health care including private health insurance, managed mental health, and similar aspects is explained. Civil litigation in suits against states, in addition to other parties, is discussed. A helpful description of guardianship factors is outlined. A chapter is dedicated to women and ethnic minorities, topics not often touched upon by forensic mental health texts. Additionally, the more commonly discussed areas are also discussed in a logical and concise fashion with numerous references, history, and case law references. A healthy discussion is held regarding possible civil commitment of violent sex offenders, again with the author's typical thoroughness, describing history and case law. A chapter is dedicated to crime victims' rights and another to hospitalization of minors.

Overall, the textbook touches on a broad range of topics that would be helpful to both the mental health professional and legal professionals. *Law, Mental Health, and Mental Disorder* covers a significant number of both basic and more sophisticated topics in a manner that exhibits thoroughness and a good knowledge base by the authors of each chapter.

Each chapter has a significant quantity of history to allow the reader to put things in perspective, lengthy discussion, and more than enough references to keep anyone who wishes further information on any particular matter satisfied.

In general, this book is to be recommended for those searching for a comprehensive, detailed text. The price of the text is, in this reviewer's opinion, an excellent value given the quantity and quality of information contained therein. The editors do a good job in fulfilling their goals of providing a highly readable text for use by both legal and mental health professionals, moving from simpler, historical concepts and progressing to more sophisticated issues. Overall this text offers a good source of reference for both the recent entrant to the field and the experienced specialist.

BEYOND BURNOUT: HELPING TEACHERS, NURSES, THERAPISTS, AND LAWYERS RECOVER FROM STRESS AND DISILLUSIONMENT.
By Cary Cherniss. New York: Routledge, 1995. 234 pp. \$17.95 (paperback).

Reviewed by Violet A. Henighan, DO

This book is about burnout and recovery in a group of people who become human service professionals in the fields of high school teaching, mental health, public health nursing, and poverty law. The author interviewed 26 professionals at the

beginning of their professional year and again a decade later; the author uses excerpts from actual interviews with the professionals complete with their own words to describe their feelings and experiences. The description of the author's research methods in the appendix is quite detailed and informative. The author also discusses his footnotes chapter by chapter, citing current periodicals, as well as discussing his research in three distinct sections in the book.

The first section discusses why the author became interested in the plight of human service professionals, summarizes what the author learned in the initial study and indicates what the professionals were like when the author left them at the end of their first year of practice.

The second section describes how the professionals changed during the next decade. Chapters 4 through 8 examine how these professionals' careers evolved and the different career paths taken; focus on their attitudes toward their clients; deal with flexibility and openness to change; examine how the professional's attitudes toward work and career changed over time (how their values and priorities shifted in response to their experiences at work, their family lives, and the changes that were occurring in the larger society), and look at how the professionals felt about their lives as they moved into the second decade of their careers.

The third section of the book focuses on the question of why some of the professionals were able to overcome or avoid early career burnout. Chapter 9 describes five professionals who initially were among the most stressed and burned out,

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but who managed to recover. Chapters 10 through 12 focus on antidotes to burnout: the nature of the work itself; the work setting and what the individual brings to the work. Chapter 13 identifies seven implications for public policy and practice that follow from the preceding chapters. Suggestions are made as to how professional caring and commitment can be enhanced through changes in selection and training of professionals and management of human service programs.

Chapter 14 explores what it is about modern life and professional helping that makes it so difficult for professionals even to strive for more meaningful work.

Beyond Burnout presents an in-depth sampling of 25 professionals who have survived stress in their public service fields. The sample size was admittedly small; however, the reports of the unstructured interviews were informative. The definitions of burnout and bureaucracy were especially insightful. The author met the objective of offering help to professionals in the public sector who are beginning their careers.

Persons considering a career in the helping professions will find this a thought-provoking book and a resource manual for solutions to the problem of burnout.