

or threatening. The authors have views on where interviewer and interviewee should sit (equal distance from a door to which both have unobstructed access), their angle in relation to each other (10 and 2 o'clock), their choice of clothing (the interviewee should not be made to feel outclassed), and their general demeanor (no sunglasses during the interview). The authors state that employers may have a post-*Tarasoff* "duty to warn under civil law precedents" (p 318). This postulation intrigued me, not least because the equivalent post-*Tarasoff* duty on health professionals varies from one state to another and remains to some extent unclear. I would have welcomed a discussion: presumably, the employers with a duty would sometimes be hospitals.

Raymond Flannery, an associate clinical professor in the Department of Psychiatry at Harvard, has chosen a title that may have been designed to provoke people like me, who write that dangerousness in mental health settings is more usefully treated as a quality of situations than of people. In fact, most of *The Violent Person: Professional Risk Management Strategies for Safety and Care* deals with situations including domestic violence, psychiatric emergencies, and youth violence and those that generate psychological trauma. The author is an advocate of training, specifically, "enhanced behavioral emergency safety training" (p 12), as a means of reducing mental health workplace violence and its consequences.

Flannery takes a very broad approach, noting that refraining from acting violently, like intervening to mitigate the consequences of violence, requires attention to three domains of good health: attachments, mastery, and meaningful purpose. He includes instructions for relaxation exercises, noting, "If a true emergency arose, your mind and body would immediately rise from the relaxation state, and you would be capable of solving the problem" (p 187). He also provides advice on how to dress to minimize violence risk (neat, professional attire, in contrast to Ca-wood's injunction that the interviewee not feel outclassed) and an account of biological changes induced in the brain by PTSD.

Of the books under review, Herschel Prins has written the one that deals least directly with risk assessment but that is, by some distance, the most charming. *Offenders, Deviants or Patients?* contains chapter titles from Shakespeare, an autobiographical introduction, and a rather unnecessary apology con-

cerning the limits of the author's knowledge of the law. It ends with what he calls an *envoi*, a term that I had to look up: it comes from the old French and refers to an author's concluding words. The book is now in its fourth edition and is a readable and very personal account of Prins' experience of the U.K.'s systems of care for mentally disordered offenders. Most of us would be content simply to get to the fourth edition, but the author has done so with insight and a personal style that derives in part from his work as a probation officer and seems to embody the U.K. Probation Service's erstwhile mission to, "advise, assist and befriend."<sup>1</sup> Would that it were other than erstwhile.

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Disclosures of financial or other potential conflicts of interest: None.

## The Psychology of Female Violence: Crimes Against the Body

By Anna Motz. Colchester, UK: Taylor & Francis, 2008, reprinted 2010. 388 pp. \$37.99.

This excellent book draws our attention to the problem of women who engage in serious violence. Despite advances in gender equality, contemporary society still evidences denial of female violence. For example, in infanticide cases, society often wants to believe that mothers who kill are mad (insane), while their counterpart fathers are bad. Harming one's children goes against traditional notions of femininity, and men are more harshly punished for the act. Yet, dating back to mythology, Medea killed her children for reasons unrelated to mental illness.

Anna Motz is a forensic and clinical psychologist in the United Kingdom who has served as president of the International Association for Forensic Psychotherapy. She focuses on explicating the inner world of female offenders, something forensic readers may not be used to. Challenging the denial of female violence is her primary goal. This is critical in objective

forensic evaluations. Psychiatrists should strive not to be fettered by unconscious expectations of the mother role.

The book is divided into four sections: Violence Against Children, Violence Against the Self, Violence Against Others, and Clinical Applications. Motz discusses taboo topics, including physical and sexual abuse by mothers, mothers who fabricate a child's illness, and infanticide. Violence against self, explains Motz, includes deliberate, self-injurious behavior and anorexia nervosa. She also examines the controversial topic of battered women who kill. She uses detailed case examples; several, disturbingly though brilliantly, help the reader appreciate the complex dynamics associated with these women and their offenses.

Women's violence occurs mostly at home, in private, compared to men's more public violence. Motz asserts that society's tendency to deny the existence of female violence and to idealize motherhood can present difficulties in violence prevention and prosecution. She uses a psychodynamic context to examine underlying functions of the violence and discusses implications for treatment of various types of violent behavior. For example, in an infanticide case study, she explains the mother's motivations for the offense, which include annihilation of hated parts of herself, revenge, symbolic ownership of the infant, and a mechanism to draw attention to her despair.

Recent media frenzy has occurred around abuse of children by breastfeeding them through latency age. Motz says that "there can be a powerful narcissistic element to breastfeeding, which may become an intoxicating experience for a mother to the extent that she continues to suckle her child for her own gratification" (p 38). She provides a thoughtful psychodynamic model for understanding child physical and sexual abuse by a mother, who, due to perceived rejection, uses the child as a "receptacle for her own unacceptable feelings of hopelessness and deprivation" (p 55). She cautions readers about Munchausen's syndrome by proxy, which is often overlooked because of professional and societal blind spots, resulting in denial of the danger a mother may present to her child, even when there is clear evidence to the contrary. Treatment and dispositional decisions should be based on understanding the nature of women's violence, as the author offers, not preconceptions.

Motz considers various functions that self-harm may have, from feeling real, to distraction, to communicative function, to displacement of anger, to assertion of control. She posits that women who engage in self-injurious behavior may be symbolically attacking their own mothers. The author asserts that the woman's body is "her most powerful means of communication and her greatest weapon" (p 1).

In her discussion of battered women who kill, Motz reviews learned helplessness and describes a model of violent relationships. She covers difficulties in leaving relationships, psychological effects of victimization, and victim blaming. However, there is danger in conceptualizing all domestic violence relationships in this way because intimate partner violence can be bidirectional. Battered women who kill may do so rationally, and the author makes an intriguing comparison to society's perception of cuckolded husbands who kill. She aptly discusses and critiques the legal points that arise in the battered-woman defense in the courtroom.

Managing transference, countertransference, boundaries, and splitting when working with violent women is not often addressed in the forensic literature. Motz's discussion of stressors encountered by professionals who work in an inpatient unit for women with severe personality disorders is useful for clinicians and for the hospital administrator who may be reconsidering the unit's design. There is also thoughtful discussion of the concerns of expert witnesses, including those faced by Sir Roy Meadow in the United Kingdom, and an in-depth discussion of the Victoria Climbié inquiry report, a highly publicized case of an eight-year-old girl who was systematically tortured and killed by her aunt and her aunt's boyfriend.

Motz emphasizes that a woman's status as both victim and perpetrator must be contemplated when assessing risk. Professionals involved in treatment, evaluation, and decision-making related to violent women must come to terms with women as offenders; otherwise, children will be put at further risk. Those of us who work in this area can find it difficult to persuade others of the possible depravity of women, especially when child abuse or Munchausen's syndrome by proxy is involved. It would be far better to feel disturbed when reading this book than to be shocked when evaluating a defendant.

This sophisticated book is recommended to forensic psychiatrists, psychologists, and nurses working

with women who have offended. Readers in the United States will find Motz's style a substantial departure from that of other books on the topic because of the psychodynamic bent, which is not often found in the American courtroom. However, it may help U.S. clinicians to obtain a fuller understanding of violent female offenders, their situations, and motives.

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Disclosures of financial or other potential conflicts of interest: None.

## Contemporary Issues in Family Law and Mental Health

By Michael G. Brock and Samuel Saks. Springfield, IL: Charles C Thomas, 2008. 158 pp. \$32.95.

Michael G. Brock and Samuel Saks say that, in *Contemporary Issues in Family Law and Mental Health*, they examine the use of mental health evidence in family law disputes. The chapters in their book, which have been adapted from a series of articles on family relations and the law, relate well to one another in content and readability. The authors do an excellent job of discussing challenges encountered by mental health professionals who are expected to meet the diverse and complex needs of the court system, particularly in family law.

The book's 20 chapters, which cover a wide range of topics in family law, should be useful to any forensic mental health professional who works in this area. The authors discuss the role of the forensic mental health professional in family court, the rules of evidence and mental health testimony, the process and pitfalls of conducting forensic evaluations, the techniques of evaluation and syndromes that are of particular relevance to mental health consultation in family law, and the treatment of children through the court system. In several chapters, they review how goals and expectations in court differ from those in clinical or therapeutic settings. They describe the danger that arises when treating clinicians enter the judicial realm without a clear understanding of their role. This fundamental concept is repeated throughout the text, to convey its importance in forensic work. The text has extensive end notes with citations

including legal cases, references from the psychological and medical literature, and online resources. Also, the authors frequently make additional comments following the references at the end of each chapter.

One of the best features of this work is that the material is applicable to any mental health professional who is involved in litigation. I have used sections of this book to illustrate to psychiatry residents and forensic psychiatry fellows the difference between the roles played by treating clinicians and forensic consultants in court. The case examples were equally useful when advising colleagues who had been asked to testify by a patient's attorney. Chapter 3, entitled "Case Preparation Versus Expert Witnesses," provides a succinct review of case law, including landmark cases that control the admissibility of evidence in court hearings and how they affect the mental health expert witness.

Michael G. Brock works in Michigan as a clinical social worker, and Samuel Saks completed law school in Michigan. They devote a chapter to discussing the specifics of the 2003 amendment to the Michigan Rule of Evidence 703, which is intended to reduce or eliminate the use of hired-gun experts in child custody hearings. Although this chapter will be most relevant to professionals who testify in Michigan or in states with similar statutory limitations of evidence in family court, it is an interesting study of the challenges encountered when experts are used by both sides to argue a custody dispute.

*Contemporary Issues in Family Law and Mental Health* is a welcome addition to the forensic mental health literature. It is valuable to forensic mental health professionals, especially those who work with children and adolescents. It also may serve as a useful reference for non-forensically trained clinicians who work with pediatric patients and who may occasionally find themselves in court as fact witnesses. The experiences of my colleagues and me, who practice together in a large pediatric and family psychiatric private clinic, echo the message of Brock and Saks: when legal matters arise in caring for our patients, "Treatment professionals beware" (pp 43–50).

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Disclosures of financial or other potential conflicts of interest: None.