

ROs are available in a few states now: California, Indiana, and Connecticut. They differ in several respects, but are a creative, promising, and innovative policy for decreasing access to firearms to individuals who are at increased risk of harming themselves or others.

In Chapter 13, “Relief from Disabilities, Firearm Rights Restoration for Persons Under Mental Health Prohibitions,” authored by Dr. Gold and Attorney Vanderpool, the authors first discuss three common misperceptions. They then comment on evidence-based facts. I was surprised to learn that individuals prohibited from owning firearms on the basis of mental health criteria may be able to have their gun rights restored. The federal government and most states have Relief From Disabilities (RFD) statutes that provide a legal process through which individuals under mental health firearm prohibitions can petition to regain their gun rights. The evidence-based literature in this area is sparse, but the authors do review it. The chapter then provides a model for mental health RSD evaluation. The authors suggest a series of interventions:

State statutes should require independent psychiatric or psychological evaluations of RFD petitioners, similar to those of Oregon, and should specify that these evaluations include violence and suicide risk assessment. Absent such statutes, courts and administrative agencies that hear RFD petitions should consider adopting policies requiring mental health risk assessments as part of the evidence to be considered in RFD hearing.

This book is a major achievement edited by two leading and well respected forensic psychiatrists. It was copyrighted in 2016 and is an excellent compendium of the current state of our knowledge in the area of the relationship of gun violence and mental illness. The playing field is ever changing. I hope that new editions will be issued with regularity. The questions it addresses are complex, difficult, and emotionally charged, but critical. This book is also an invaluable resource for all mental health professionals, general physicians, public health officials, politicians, reporters, and others, in understanding the complex connection of mental illness and gun violence. It is a very timely analysis of these subjects. It also advances vexing new questions that merit additional evidence-based research and commentary. Most important, the authors propose innovative and creative public policy solutions to emotionally

charged problems. I congratulate Professors Gold and Simon for this book on a subject about which as a professional, a clinician, and a citizen, I am deeply concerned. Their book is a major achievement!

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

Counseling Cops: What Clinicians Need to Know

Ellen Kirschman, Mark Kamena, and Joel Fay. New York, NY: Guilford Press, 2015. 288 pp. \$25.00 (paperback edition).

Law enforcement officers have complex roles and unique responsibilities. This line of work demands of officers that they maintain specialized knowledge, technical skills (including use of weapons), and people skills. Although positions in law enforcement vary, many officers are exposed to several stressors, including long or variable work hours, demands away from family, work-related injury, public opinion about their profession, and exposure to traumatic or violent incidents, among others. Drawing from their extensive experience as police psychologists, Ellen Kirschman, Mark Kamena, and Joel Fay, wrote *Counseling Cops: What Clinicians Need to Know* to give clinical mental health professionals a better understanding of the roles and stressors faced by law enforcement personnel.

Initially published in 2014, the 2015 paperback and electronic editions add a new preface to the text. This preface highlights some of the recent police encounters that have focused public attention on law enforcement policies and practices and adds current relevance to the complex nature of policing. While advocating for compassion and empathy toward police officers, the preface makes clear how difficult it can be for some officers to seek mental health care, perhaps with more barriers now than ever before.

This book is organized into six parts: “The Basics of Cultural Competency,” “Line of Duty Issues,” “Treatment Tactics,” “Common Presenting Problems,” “Working with Police Families,” and “Getting Started.” Each section includes several independent chapters related to the broad topic. For example, the first part on cultural competency includes chapters on

the general law enforcement culture for the currently working officer; managing the therapeutic alliance with concerns unique to this population, such as officers' desire to carry their police-issued weapon during clinical appointments; precipitants and characteristics of work-related exhaustion; and the evolution of an officer's career in law enforcement toward retirement. The part on "Common Presenting Problems" includes mental health concerns that commonly arise in clinical practice, such as substance use, depression and suicide, and anxiety and stress management. The chapters need not be read in order; each chapter provides sufficient information and background to stand alone.

The strength of this book is its use of descriptive vignettes and concrete treatment strategies. Many chapters have clinical examples that illustrate difficulties or questions that police officers have presented in clinical encounters. The vignettes allow the reader to understand how certain problems would present in clinical practice and, in some case, how certain stressors relate to others. In several examples, the authors provide a case-formulation type of assessment with the vignette, which may be helpful to therapists working with this patient population. The formulations are likely to be particularly helpful to new clinicians looking for guidance in conceptualizing patients through their many experiences. Throughout the book, there are several instances where the authors follow up with concrete steps for the clinician, such as lines of questioning, use of specific screening tools, or specific modes of therapy aimed at targeting the problems presented in the vignettes.

Readers of this book should understand its limitations. Geared toward clinical practice, it does not discuss procedural and legal aspects of police officers who become involved with mental health care, except in passing. For example, no guidance is offered as to how to conduct a fitness-for-duty evaluation, risks of serving in a dual role should a treating provider be in the position of offering an opinion about return to work or fitness for duty or how to assist patients in undergoing independent fitness-for-duty assessments. Similarly, the authors discuss officers' stress after critical incidents, but do not comment on the administrative or legal procedures that an officer may face after an incident, such as an officer-involved shooting.

Given the unique role that police officers have in carrying firearms and current public attention on officer-involved shootings, the book devotes surpris-

ingly little discussion to firearm safety. The section devoted to guns and psychiatric hospitalization is approximately one page in length. It is important to recognize that there may be a need for emergent removal of a firearm, such as when an officer is acutely suicidal. There may be other instances in which assessment of an officer's ability to safely maintain a firearm is needed, such as when an officer is prescribed certain medications that affect motor skills, reaction times, or cognition.

It would be a helpful addition for this section to be expanded to include more guidance for clinicians regarding their role in removing access to weapons, how it would be likely to require the officer to take leave from work, any distinctions in limiting access to work-issued weapons versus privately owned weapons, and the employment implications of such actions.

This book meets its goal of educating general mental health clinicians about key responsibilities and stressors that affect law enforcement officers and also about some of the cultural aspects of the profession. Psychiatrists doing clinical work with this population, particularly those new to practice, will find this book useful in thinking through the problems common to law enforcement personnel. Psychiatrists working in the forensic role will find the contents less helpful, although they may find the information about police culture and resources informative.

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

Traumatic Brain Injury: Methods for Clinical and Forensic Neuropsychiatric Assessment, 3rd Edition

By Robert P. Granacher, Jr. Boca Raton, FL, CRC Press, 2015. 565 pp. \$169.95.

In this third edition of his essential reference volume, Dr. Granacher provides a comprehensive survey of the current state of neuropsychiatric knowledge and practice in the rapidly growing field of traumatic brain injury (TBI) assessment and treatment. Addressing myriad neuropsychiatric, neuropsychological, and forensic aspects of TBI in both children and