

Book Reviews

ALAN R. ROSENBERG, Editor

PSYCHOPATH: THE CASE OF PATRICK MACKAY. By Tim Clark and John Penycote. Routledge & Kegan Paul. Pp. 140. 1976.

In this happily brief and unprepossessing potboiler, authors Tim Clark and John Penycote ("the original BBC Panorama Team," it says on the dust jacket) present us with an awkwardly written case report on one Patrick Mackay, capitalizing on a flurry of public interest (in Great Britain) in his series of rather grisly and apparently unmotivated murders.

The early chapters provide an account of the familiar developmental milestones in the life history of the unpredictably violent. Father appears as a cruel, socially isolated drunkard who dies when Patrick is ten. Even before this traumatic event Patrick is known to the neighbors as an unkempt child who lies, steals, does poorly in school, and bullies his peers. On weekends, the Mackay house is regularly the scene of pitched battles between the parents, often resulting in calls for the police. After Father's death, Patrick becomes quite unmanageable, developing uncontrollable rages, a pattern of cruelty to animals (*e.g.*, he grills his own pet tortoise), and a propensity for setting fires. At the tender age of eleven he is brought before the Dartford juvenile court on twenty-one separate charges.

After so inauspicious a beginning, one can rather safely predict his continuing slide during adolescence into alcohol-fueled rages, sporadic unprovoked violence, few and tenuous interpersonal relationships, poor job performance and frequent arrests. After placement at a couple of reform schools, he is sent to a psychiatric hospital, where he is cared for by the same psychiatrist who treated his father. Then, at age 15, he is diagnosed prophetically as a "cold psychopathic killer." At sixteen he is committed as a psychopath for an indefinite term to one of Great Britain's three "special" (*i.e.*, secure) hospitals for the dangerously mentally ill.

Nor is this to be the first such commitment. Mother's ambivalence toward her only son leads her to petition the Review Tribunal for his release to her custody with the same vigor with which she banishes him from her life at other times. He returns to her home after a two-year stay in the hospital only to wear out his welcome in characteristically short order. He goes off to London, where he establishes a shaky friendship with a family with sons his age. By this time his next oldest sister has become a chronically hospitalized mental patient and is eventually sent to one of the special hospitals after having committed arson.

The chronicle continues with an accounting of Patrick's brief stint as a mugger of elderly ladies and then recounts the details of the five homicides

he admitted to. The authors speculate with the police that he may justly be credited with six more. Finally he is brought to justice by alert detective work shortly after his axe murder of an elderly priest who had befriended him years ago. He is just twenty-one years of age.

In the final chapter the concept of diminished responsibility is cursorily introduced and the psychiatric evaluations of the protagonist are presented in the same fashion. The diagnosis of psychopathy is made by several eminent psychiatrists, and the obligatory dissenter is produced (a psychiatrist from Broadmoor who opines that Patrick was fully responsible and should go to jail). In the end, he cops a plea to manslaughter ("what in America is known as 'plea bargaining' ") and is sentenced to life.

By now the reader may well be asking himself why this book was written. The answer may be epitomized in the lurid headlines announcing Patrick's day in court (*e.g.*, "Blood Lust of the Beast in Black"). The case had clearly become the focus of public attention, apparently in large part because of the indignation occasioned by the dual failure of the "system" either to cure or to contain him. The authors deal uncertainly with the ambivalence such a tragic tale must necessarily evoke. They effectively excoriate neither those who failed to right Patrick's course earlier in life, nor those charged with detaining the dangerous for repeatedly returning him to society. In the last analysis they are reduced to a "Gee, ain't it awful" kind of hand-wringing as they outline the frightful non-system with which we approach social problems of such gravity.

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THE RIGHT TO TREATMENT FOR MENTAL PATIENTS. Edited by Stuart Golann & William J. Fremouw. Irvington Publishers, Inc. (Halsted Press — John Wiley & Sons, Inc.)

This book, or more accurately this compendium of essays, achieves its goal, a thorough and diversified look at the rapidly developing and changing field of "the right to treatment." It is easy to be in favor of a right to treatment, a position that can readily be espoused by people from different orientations and political persuasions. This book combines all the basic arguments and ramifications that have appeared in the literature or have been argued at professional meetings into a succinct and easy-to-digest presentation.

The historical and legal evolution of the concept, the judicial dilemma with standards and problems with enforcement are generally known and well covered. Dr. Stickney's "inside" view is informative and critical, as he considers the potential paradoxical effect of this legal development in terms of the general progress of mental health. Professor Mechanic, in the chapter that follows, develops further the potential negative consequences while also critically appraising the basic notions of "treatment," "involuntariness" and "the right to refuse treatment."

Attorney Halpern considers the natural extensions of the concept to the

mentally retarded, and more importantly analyzes the limitations of litigation as a strategy for social change. He notes that the extent of the impact ultimately hinges upon continued public awareness and political action. He alerts us to new conflictual avenues that have been opened by the original concepts. Dr. Golann continues the theme by raising questions about current therapy models and priority issues. The concluding chapter nicely summarizes the present conflict and anticipations for the future.

In short, this collection of essays represents a comprehensive discussion of the issues and ramifications of the right to treatment, adequately for the sophisticate and neophyte alike. Many more cases will follow, although, as predicted, essential change itself will occur slowly. Accordingly the discussion will rapidly become dated, but the value of the publication as an original "chapter" will remain.

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CRUSADERS, CRIMINALS, CRAZIES – TERRORISM IN OUR TIME. By Frederick J. Hacker, M.D. New York: W. W. Norton and Co., Inc. Pp. 355. 1976. \$9.95.

To aid our understanding of a phenomenon which seems to be burgeoning in our civilization, Dr. Hacker has written a most timely and illuminating treatise on the explosion of violence in the seventies. This book is a scholarly, thoughtful, comprehensive study of "Terror and Terrorism in our Time."

The book opens with a discussion of "The Terroristic Enterprise" in which Dr. Hacker clearly delineates the difference between terror, which comes from above, and terrorism, which comes from below. In part one of the book, entitled "The Terrorists," Dr. Hacker divides terrorists into the three types mentioned in the title. He does admit some difficulty with this classification, due to the possibly pejorative nature of the term "crazies" and also the obvious overlapping of these three categories. However, for convenience this classification seems very useful. Four pages in the book are devoted to a chart in which he contrasts terror and terrorism in terms of motivation, cast, victims, objects (the audience) and the reaction of the objects. These charts and examples add a great deal to the clarification of his classifications.

Part two describes "The Victim." Dr. Hacker raises the very interesting phenomenon, apparently quite common, in which the victim identifies with the terrorist and develops "the poor devil" philosophy or becomes sympathetic with the terrorist against authority. A high point of this section is a lengthy description of the Patty Hearst case, particularly Dr. Hacker's direct involvement. He does not mince words in expressing his feelings about the way it was handled and the way he was used, or perhaps misused. This section is sympathetic and throws a good deal of light on the situation. It ends with the very legitimate question as to which is the real Patty: the college girl before the abduction, the bank robber during her identification with the SLA, or Patty now.

Part three, "The Challenge," is perhaps the most significant part of the book. It raises questions and proposes dynamic formulations and possible solutions. No magic answers are proposed and the difficulties of the solutions are easily admitted. A particularly interesting part of this section is Dr. Hacker's personal involvement in the Vienna episode of terrorism with the skyjacked plane. This he uses as an example of his recommended means of handling such a crisis when it is in progress, mainly by a task force of trained people to negotiate, with the primary purpose being the saving of lives. Another chart is included here which describes the polarity of the solutions with the authoritarian approach contrasted with the permissive approach. As Dr. Hacker points out, both of these approaches are partly erroneous but both have very ardent supporters. Dr. Hacker's main recommendations for solving the problem of terror and terrorism are more research, the founding of groups to handle the problems during the incidents, and, most importantly, plea bargaining. He feels that what he calls the "post-commission bargaining" is most important in resolving the crises and insuring the saving of the hostages. He also makes a very strong case for what he calls "precommission bargaining," feeling that it is the only way of preventing acts of terrorism.

Part four, "The Overview," is mainly a summary of the previous parts of the book. The point he makes most clearly here is that one cannot defeat terrorism by terror. Violence, he feels, is indicated only after all other alternatives are explored and honestly tried. As proof of the accuracy of Dr. Hacker's prediction that terrorism is, unfortunately, here to stay, and of the timeliness of this book, while it was in press the Entebbe incident occurred, and Dr. Hacker had the opportunity to add a discussion of it at the end of his book. He ends this discussion by saying that Entebbe will lead to more. This prediction struck home when the South Moluccan terrorists seized their hostages while the reviewer was engrossed in this book. And then he dictated this review while watching on TV the Vermont-bound Greyhound Bus racing back and forth at Kennedy Airport.

In summary, Dr. Hacker has written a most timely and thorough exposition of the phenomenon of terror and terrorism in our time. His elucidation of the terrorists, their victims and their motivations is most illuminating. His approach to the problem may seem, in some ways, conventional (research and education) or simplistic (authoritarian versus permissive). However, Dr. Hacker really points out what we do know now and the areas in which we must learn more. This book is highly recommended for the general reader and for the mental health worker, but particularly for anyone who might be called upon to intervene in the consequences of an act of terrorism.

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