

sumptions about authority, and differing decision styles) that may foreshadow the deterioration of the therapeutic relationship.

Most of the authors of the various chapters in *Psychiatric Ethics* are psychiatrists with university clinical appointments. In addition there is a strong international, intercultural flavor to the writing that is of advantage in any work on ethics in challenging the prevailing stereotypes of the dominant social group.

Psychiatric Ethics presents itself as an adventure and a scholarly achievement, appropriate reading for any mental health profession who isn't yet ready to settle back into the fluff and fatuity of the *status quo*. □

THE TREATMENT OF ANTISOCIAL SYNDROMES, Edited by William H. Reid. New York: Van Nostrand Reinhold, 1981. 269 pp.

Reviewed by James E. Olsson, PhD

Reading and reviewing this edited volume is closely akin to visiting Baltimore's Lexington Market for the first time and trying to gorge on all its fruit stands, candy shops, bakeries, and seafood counters at once. One is initially overwhelmed by the variety and richness of offerings, but then feels somewhat let down that some of the fare wasn't up to expectation. This reviewer always has had a problem with edited books in any case, and, I suppose, one should expect some chapters of lesser quality. The editor himself cautions in the introduction that the text is not complete and refers the reader "to more closely examine the literature with regard to the pharmacologic treatment of several classes of antisocial persons." This reviewer would agree the two chapters concerning drug treatment included in the text were too brief.

For the most part, the contributions were comprehensive and informative. The chapter on the asocial child by Helen Morrison was broad-ranging and also weighty with references (271 in all!). Morrison also points up one of the most bedeviling problems in regard to antisocial individuals; that is, the lack of precise definitions in diagnosis which results in an inability to compare treatment programs. Morrison states, "until the problem is defined, the attempts to state who shall treat and how treatment shall be done remain nebulous." Regardless of this problem, she goes on to describe many of the most relevant research studies of asocial children with clarity and conciseness.

More than half the book is devoted to chapters dealing with specific patient groups. The chapter on sex offenders by David Kentsmith briefly but adequately covers the history, classification, etiology, and treatment considerations related to these offenders. Richard Rada's chapter on sociopathy and alcoholism points up the frustrations and problems inherent in dealing with sociopathic and/or alcoholic clients. Heeding his advice regarding careful differential diagnosis of alcoholism vs. sociopathy could

BOOK REVIEWS

be quite valuable to most clinicians. Striders and Menolascino's chapter reminds us that fully 10 percent of prisoners in the United States are retarded, in most instances forgotten, and do not obtain sufficiently structured programs for their needs. The female offender situation is well described by Benedek and indicates that while prisons usually provide more personal comforts for women, they deprive them of meaningful vocational and rehabilitative options. Marohn presents a systematic treatment approach for the hospitalized, behaviorally disordered adolescent.

Three chapters are devoted to the residential treatment of offenders. Stürup and Reid present the viewpoint developed at Herstedvester that has been the basis of much therapeutic work with offenders. That is, individuals who have committed serious antisocial acts can be reached psychologically by a flexible and sensitive therapeutic approach even within a prisonlike setting. Carney reviews and compares Broadmoor Hospital in England to the Treatment Center at Bridgewater, Massachusetts, in their approaches to dangerous offenders. He then discusses Patuxent Institution in Maryland and compares the older program (which was mandatory and involved an indeterminate sentence) to the more recent program (which is voluntary and does not involve an indeterminate sentence). One of the most heartening chapters in the book covers several community based programs that have had substantial success. In this chapter, Reid and George Solomon describe the P.O.R.T. programs originated in Minnesota, which use an intensive, community based approach to effect a transition of offenders into responsible, productive members of society. These latter programs sound almost too good to be true, but the recidivism figures for those who complete the program are exceedingly low. For example, 90 percent have had no further felony arrests in the Portland House Program.

Another successful type of program, the Wilderness Experience, is described in the book's final chapter. While fifty "wilderness" programs exist in the United States to serve adults and juveniles, Matthews and Reid used New Mexico's program as an example. In this model, offenders volunteer to enter into a progressively more challenging experience in which nature is the teacher. "Socially impotent" antisocial individuals then develop a sense of mastery over themselves and trust in others during this semistructured "Deliverance" experience. Measured personality change has been considerable after such experiences and recidivism figures are also impressive.

In summing up this book, it must be said that the editor has accomplished his goal of providing not a totally comprehensive text, but a creditable volume that dispels the cynical view that antisocial personalities are untreatable. It has confirmed this reviewer's belief that programs that are serious efforts rather than token attempts can produce significant results with offender populations. I would heartily recommend this book as a companion volume to William Reid's other recent work, *The Psychopath*. □