

Book Reviews

KEEPING BOUNDARIES: MAINTAINING SAFETY AND INTEGRITY IN THE THERAPEUTIC PROCESS. By Richard Epstein. Washington, DC: APA Press, 1994, 280 pp. \$35.00.

Reviewed by Christiane Tellefsen, MD

In the introductory chapter of his book, *Keeping Boundaries*, Dr. Epstein points out that the recent surge in publicity and malpractice cases involving doctor-patient sexual contact presents an important opportunity for professional introspection and growth. He then capitalizes on this notion with a wonderfully thorough study of all manner of therapeutic boundaries, not just the issue of doctor-patient sex. He defines *boundary violation* as "any behavior that infringes upon the primary goal of providing care, that might harm the patient, the therapist, or the therapy itself." As this definition suggests, he does not limit himself to a study of just the therapist's behavior, but also includes behaviors of the patients and third parties in his discussion.

The book is divided into sections on theory and practice. In the first section, he gives a review of the theoretical concepts of boundaries in relation to psychoanalytic theory and medical ethics. He describes treatment as a frame with permeable boundaries that require constant "maintenance." He then gives an excellent summary of how the therapist's ego boundary development impacts on the

therapy, and the characteristics of therapists who are boundary violators. My only criticism of these early chapters is his use of diagrams—they are confusing and unnecessary.

Dr. Epstein draws on a vast number of references, quoting such diverse sources as the "Rules of Tennis" to the Torah, as well as a comprehensive review of the medical literature. The frequent use of case examples is also instructive.

In later sections, Dr. Epstein describes specific boundary issues, breaking them into chapters on selection of patients, treatment structure, patient autonomy, confidentiality, and compensation, among others. Within each chapter, he describes basic principles, indicated and contraindicated treatment, and how to deal with specific boundary violations. He has practical suggestions for many therapeutic problems, ranging from the seemingly innocuous, such as the decision to shake hands with a patient, to maintaining one's balance on the slippery slope of managed care.

He continues on to the management of erotic feelings and the treatment of patients who are intent on exploiting the therapist. He gives concrete advice on how to recognize when you are in trouble and what to do about it.

The final section of the book is a review of the literature of the psychological characteristics of therapist violators and, perhaps more importantly, training techniques that may spawn such practices. He makes a case for improving the health of our profession by examining the health of our training programs. He points out that role models with a poor sense of bound-

aries will undoubtedly pass this on to their students. He concludes this chapter with a section on recommendations for improving training programs that are reasonable and practical. He presents the caveat that some practitioners, because of their personality issues, especially those "suffering from narcissistic depletion," may have a functional learning disability when it comes to an understanding of treatment boundaries. He gives specific guidelines in this chapter for the approach to this situation.

Boundaries are an important topic for both the general and forensic psychiatrist. While Dr. Epstein's book is geared toward a study of sexual contact between doctor and patient, he covers all the other borders that clinicians approach. This book should be read by all psychiatric trainees and clinicians. It is a comprehensive and practical integration of theory and practice.

CHILDREN OF DIVORCE: A PRACTICAL GUIDE FOR PARENTS, ATTORNEYS, AND THERAPISTS. By William Bernet. New York: Vantage Press, 1995. 109 pp. \$14.95.

Reviewed by Harriet Siegel Miller, PhD

Years before divorce, broken families or blended families became common occurrences in our lives. The Russian writer Tolstoy artfully observed this in his novel, *Anna Karenina*, noting, "Happy

families are all alike. Every unhappy family is unhappy in its own way." Today, this axiom has stimulated much professional interest and concern. And in his new and compelling book, *Children of Divorce*, William Bernet, MD, takes up the theme of unhappy families struggling with divorce. His focus is on the most helpless, vulnerable member of the family—the child.

"Because each divorced family has its own particular nuances and requirements," Bernet begins, there are no "easy answers" to helping children of divorce. That view is one of the book's strongest points: from the outset, Dr. Bernet makes clear that each family is unique with its own set of issues. The author sets out to create guideposts to help clarify roles and ways to handle extremely difficult situations. Unfortunately, the need for Dr. Bernet's book is great; there were about 1,182,000 divorces in the United States in 1990. These couples among them had about 1,075,000 children.¹ Since half of all marriages end early—before the seventh year of marriage—over one million children suffer their parents' divorce, according to Bernet.

Fortunately, this book is highly readable and should prove useful not just to parents and therapists, but also to lawyers, judges, members of the clergy, teachers, and social workers. The problem-solving orientation of the book should help both divided parents and children weather the emotional storms of divorce more easily and reduce the fighting between divorced parents "over the children, through the children and in front of the children" (p 3). However, the book

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does not have an index or a bibliography, both of which would have been helpful. Offsetting those omissions are the separate boxes embedded in each chapter. Within those boxes are recommended books that discuss the issues raised in the chapter more thoroughly. Also, the case studies at the beginning of each chapter are extremely well chosen and helpful in illuminating the issues.

In *Children of Divorce*, Dr. Bernet draws on his extensive experience as a child and forensic psychiatrist to categorize the essential stresses children encounter into two major areas: continuing conflict between the parents and instability. In addressing the areas of conflict and instability, Dr. Bernet uses the following three principles: (1) children of divorce need a good but not ideal relationship with both parents; (2) divorced parents need to minimize the disruption they introduce into the children's lives, while recognizing that disappointments are unavoidable; and (3) parents will need to compromise and move on with their own lives.

This common sense approach can help parents who can't otherwise work harmoniously to cooperate in the tasks of child-rearing. *Children of Divorce* zeroes in on safeguarding the child's psychological well-being. That goal is synonymous with those of *Beyond the Best Interests of the Child*,² a book to which Dr. Bernet refers.

Dr. Bernet covers a great deal of ground, including creative ideas for roles therapists can play and traditional as well as unusual custody arrangements—including split custody (in which siblings are separated) and visitation schedules

(which he says the custodial parent should encourage). Dr. Bernet also emphasizes the importance of maintaining traditions, even when children find themselves in blended family situations. This work sensitizes all of those involved in divorce, including attorneys, courts, and school and mental health professionals, to the complex issues affecting custody. The author explains and gives down-to-earth solutions for big and small issues that might arise, such as his discussion of types of visitation and custody based on the developmental needs of children of different ages. For example, what is the best living arrangement for very young children up to the age of two, based on the psychological task of developing a sense of trust in their primary caretakers? This issue has also been addressed by Wallerstein and Blakeslee.³

The chapter on noncustodial parents, one of the most important, presents material not found in other such books. Specifically, it delineates the relative rights of custodial and noncustodial parents. The laws are vague for noncustodial parents. For example, can a noncustodial parent take a child for medical treatment unless there is a true emergency? Dr. Bernet makes helpful recommendations for these "gray areas," including guidelines for the extended family and the areas of education, religion, recreation, psychotherapy and counseling, and psychiatric and psychological evaluation.

In addressing the role therapists play in divorce, Dr. Bernet echoes many of the recommendations found in *Family Evaluations and Custody Litigation*.⁴ Specifically, both Drs. Bernet and Gardner em-

phasize that therapists can't wear "two hats" when dealing with families. Many therapists try to advise parents and children and act as expert witnesses or as divorce mediators, but these are roles with conflicting needs.

Throughout this slim tome, Dr. Bernet promises that no single paradigm will work without a hitch. He also concludes that there is no evidence to suggest that joint custody is superior to traditional custody for the children. That stance reflects the findings of two other works: *Surviving the Breakup: How Parents and Children Cope with Divorce*,⁵ a longitudinal study begun in 1971 that examines how healthy people cope with divorce; and the ten-year follow-up, *Second Chances: Men, Women, and Children a Decade after Divorce*.³ However, Dr. Bernet suggests that joint custody may be a good way for some divorcing parents to raise their children together.

This book would be valuable to divorcing parents and professionals who work with children of divorce. It provides new insights and sage advice for minimizing conflict and providing stability.

References

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HYPNOSIS, MEMORY, AND BEHAVIOR IN CRIMINAL INVESTIGATION. Kevin M. McConkey and Peter W. Sheehan. New York: Guilford Press, 1995. 218 pp. \$35.00.

Reviewed by Bruce L. Danto, MD

Although this book is written in an academic style, it is not a "ho hum" book. It is filled with important current research on memory as well as the use of hypnosis for memory enhancement. It provides guidelines for not only the technical employment of hypnosis but also the prehypnotic interview factors that should be considered in contemplating the suitability of a subject for hypnosis.

The authors feel that suspects or defendants are not appropriate for hypnotic interviews. They limit their choice of the more appropriate subjects as being those who are either victims or witnesses.

This book provides a very rich discussion of the ethics of hypnosis and advocates the use of a hypnosis coordinator to ensure that the hypnotist himself or herself is operating within a standardized approach to hypnosis. Posthypnotic evaluation is encouraged, and particular attention is paid by the authors to the importance of not leading the hypnotic subject. Numerous examples are offered so that the reader may get a clear picture of what

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should be avoided in terms of conscious or unconscious steps that could lead the witness, thereby suggesting the answer that the inexperienced hypnotist may be seeking.

I strongly endorse their advice to exclude hypnotic investigations by police personnel and to make sure that people who might suggest answers to the hypnotic subject be absent during this procedure. There are some exceptions; one of them from my own practice involves a man who was accused of molesting his niece. His wife wanted to be present; we allowed this, and he confessed to molesting the niece in front of his wife. Her presence did not detract from the suspect's revelations following hypnotic induction, but it did create problems for the wife, who felt very defeated when she heard her husband's confession.

In another example from my own practice, I recall a case where a witness had been interviewed by a member of the Michigan State Police, whose assignment was to conduct an investigation as a police hypnotist. It was apparent, when reviewing the audiotape, that as the police officer was interrogating the witness under hypnosis, whispered responses could be detected on the part of investigating officers, who were leading the witness. When I rehypnotized the witness, such information was not present. Furthermore, in checking out the location of her home, from which she said she had seen the suspect set fire to her in-law's home, it was evident that it would have been impossible for her to do so, because her field of vision would have been obscured by other houses in between; and the vic-

tim's house, which had been ignited, was around the corner and away from view as well.

I feel that any person interested in hypnosis would appreciate chapter 3 of this book, which offers guidelines for practice. These guidelines neatly discuss general issues and the role of the hypnosis coordinator. The authors also propose a separate set of guidelines for the hypnotist and delineate the kinds of crimes in which hypnosis should be considered as an investigative tool. They establish 16 steps for conducting the hypnotic interview itself and also gives guidelines for technical issues.

I was particularly pleased with the chapter dealing with stress and "faking" in hypnosis. I recall from my own experience a 12-year-old girl and her brother who accused a farmer of performing oral sex on the girl and rectal masturbation on her 9-year-old brother. The case had been brought by a dentist who practiced hypnosis in his office in a small town. My investigation using hypnosis exposed his errors. When I rehypnotized the children, it was very apparent that the sister was totally faking the depth of hypnosis and faking her arm levitation, as her arm kept drifting. After the hypnotic session, when I got everyone together, including the prosecutor, the investigating police officer, and the parents, the girl confessed that she had lied. The farmer was from a very religious community, and the public refused to believe that he was innocent. He was forced to move and lost his farm and everything else.

Interesting laboratory data were presented by these authors as well as a good

discussion of pseudomemory versus true memory. I liked their discussion of recovered memory. Practicing in Southern California, where many cases have involved recovered memories that turned out to be untrue, I can appreciate their efforts in trying to bring some sense to the whole issue.

The authors do fail to point out that reports can also be verified by contacting relatives who may have witnessed the event in fact, and not in belief only, or out of anger toward the accused. I try to do that in my own practice and had a case where this was crucial—the patient had described an episode of molestation but

was unable to recover the details. After talking with her sister, who had witnessed the molestation by watching the events through the window of a garage, I was able to use this information in therapy to help the patient, who could not recover the specific details of the event.

This book should occupy treasured space on any forensic psychiatrist's shelf, particularly those who do hypnosis. As the authors are psychologists, it is perhaps understandable that they did not include a section on chemical hypnotic interviews. A definitive text has yet to be written about this approach to the recovery of memory and memory enhancement.