

Finally, the cartoonish approach to nonpharmacological treatment of aggression, displayed on one page showing a patient on a couch and a circle of empty chairs beneath reflects a further bias in the content and ignores the growing evidence of the effectiveness of cognitive and dialectical behavior therapies, as well as other non-medication-based approaches to mitigating the risk of violence across the board.

Stahl's psychopharmacology texts are excellent guides for those of us studying for maintenance-of-certification examinations. This book gives no such help.

The discourse on violence in forensic psychiatry is informed by a range of disciplines from neuroscience to sociology and criminology. This interdisciplinary aspect is not reflected in *Violence*. The body of literature on psychopharmacology and violence is also vast, and a balanced synopsis would be very valuable, especially for residents and those beginning their careers. Unfortunately, *Violence* does not meet that need. At best, this book is less than helpful, and at worst, it could be misleading.

Angela M. Hegarty, MD
North Great River, NY

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

Forensic Evaluation and Treatment of Juveniles: Innovation and Best Practice

By Randall T. Salekin. Washington, DC: American Psychological Association, 2015. 271 pp. \$69.95.

In the United States, juvenile offenders were tried, convicted, sentenced, and incarcerated as adults until the end of the 19th century, when concerned individuals successfully petitioned for developmentally informed legal proceedings for minors. The juvenile justice system grew into a poorly funded network of courts, residences, and institutions of questionable effectiveness. Youths were often denied due process, served longer sentences than adults for similar offenses, and were not rehabilitated. In the latter part of the 20th century, juveniles were granted due process and faced greater legal accountability, including harsher sentencing and an increased likelihood of having their

cases tried in the criminal justice system. The 21st century has, thus far, witnessed a slight shift back toward the rehabilitative model. Despite these changes, the role of mental health professionals in juvenile justice proceedings has remained relatively consistent: to present developmentally informed information about a youth's history and rehabilitation needs to the court.

The extent to which trainees in child and adolescent mental health are educated about juvenile court assessment and intervention varies greatly. Thus, resources that facilitate training in juvenile justice assessment are needed. Salekin's book is primarily geared toward psychologists and trainees and is designed to help them make meaningful contributions that will be understood and used by juvenile justice professionals.

Salekin assumes that the reader has little experience with juvenile courts. He offers useful tables that summarize the various stages of juvenile court processing, including the initial precharge encounter, diversion, detention, adjudication, and disposition or sentencing. He also describes the protocols for transferring cases from juvenile court to the criminal justice system.

Forensic psychiatric assessments of alleged youthful offenders can be challenging because of the effect that a psychiatric diagnosis may have on the legal outcome. Salekin indirectly addresses concerns about the limited prosocial emotions specifier for conduct disorder and youths who strive to engage in self-preservation by donning a tough or indifferent demeanor. "Young people may learn that acting 'callous' can be adaptive in some environments" and may "adopt a callous presentation style even with the forensic evaluator" (p 45). This behavior may be self-defeating during mental health assessments and juvenile court proceedings. Salekin describes the importance of examining the authenticity of data and of looking beyond a youth's superficial demeanor when conducting an assessment. For example, extroversion can be conducive to social competence and healthy relationships, but can also have negative outcomes such as callousness and antisocial behavior. The evaluator should strive to present findings constructively, by addressing the youth's strengths, giving appropriate weight to each datum, and proffering a balanced presentation of the information. The evaluator should seek collateral information, including interviews, observations, documents, and test results and should identify patterns in data that are present across all sources. This practice increases the poten-

tial for properly diagnosing juveniles based on data that include past assessments and diagnoses.

The limited but growing body of research on veracity, developmental maturity, and risk is summarized. One concern about the text is that readers are not reminded that best practices are informed by the strength of the evidence and reproducibility of the studies. Implementation of best practices requires an appreciation of the environment in which the interventions will occur as well as the strengths and weaknesses of each youth. A discussion of these dynamics would have been welcome, especially when summarizing research about the relationship between prenatal development and conduct disorder.

Preparation for the juvenile justice mental health evaluation requires appropriate training and supervision. Salekin says that clinical child psychologists and developmental psychologists may cross-train in forensic psychology to develop necessary skills. He incorrectly states that residents in child and adolescent psychiatry must complete state-mandated training in an “American Medical Association or American Orthopsychiatry Association-approved psychiatry program” (p 92).

The author provides a succinct discussion of report content and the importance of limiting the report to forensically relevant information. He restricts the brief discussion of mental disorders to externalizing disorders and does not examine how other mental disorders, such as psychotic spectrum disorders, trauma and related stress disorders, and depression and anxiety disorders, if not properly identified and treated, may lead an evaluator to misdiagnose a youth and to make poorly informed recommendations about clinical and other interventions to the court. Also, there is no discussion of dangerousness, culpability, or suicide risk assessment. I look forward to seeing these topics addressed in a future edition of the book.

This book may meet the needs of mental health professionals seeking an introduction to juvenile court history and structure, but it is not a comprehensive resource for forensic assessment of mental disorders or for the types of assessments that tend to be performed by forensic child psychiatrists. I would not hesitate to recommend parts of the book to trainees in juvenile justice mental health.

Cheryl D. Wills, MD
Cleveland, OH

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

Serial Killers: The Psychosocial Development of Humanity's Worst Offenders

By William M. Harmening. Springfield, IL: Charles C. Thomas, Publisher, 2014. 280 pp, Paperback, \$39.95.

Theodore “Ted” Bundy has been described as intelligent, handsome, and charming. He used these traits to interact with and gain the trust of his prospective victims. He was a master manipulator and created situations within which his attacks could occur, such as feigning injury by wearing a sling or fake cast. Once in a conducive place, such as his car, he would brutally assault his victim. Ultimately, he raped and murdered numerous women, confessing to 30 murders at the time of his execution. The true number remains unconfirmed to this day.

Mr. Bundy is one of six high-profile serial killers discussed in detail in William Harmening's book, *Serial Killers: The Psychosocial Development of Humanity's Worst Offenders*. The other killers are David Berkowitz, Charles Manson, Eric Rudolph, Edmund Kemper, and the Zodiac Killer, whose identity remains a mystery. Harmening has a background in law enforcement and psychology and teaches forensic psychology and criminology at Washington University in St. Louis, Missouri. He has authored several books, including one dedicated to his theory of criminal behavior: the criminal triad.¹

In *Serial Killers*, Harmening advances his criminal-triad theory in the first several chapters. The theory focuses on key psychosocial developmental processes that occur between infancy and adolescence. The three components of the triad are attachment in early childhood, moral development as a child, and formation of identity in adolescence. The author advances that, when successful, these processes in combination create an integrated internal deterrence mechanism. When the processes are not successful, the child develops a propensity for deviant behavior.

The author selected interesting and notorious serial killers, such as Mr. Bundy, and provides summaries of their crimes and personal backgrounds. These summaries are one of the strengths of the book. For an introductory text on serial killers, it is useful to have several detailed case examples to engage the reader and highlight commonalities and differences among the cases.