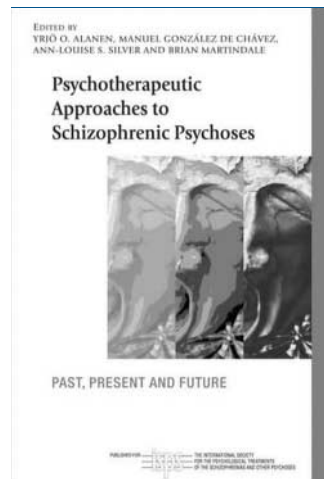


neuropsychological processes and their associated weaknesses, with exceptional sections on how neuropsychological approaches integrate with other fields such as genetics, neuroimaging, emotion and diagnostic approaches. Perhaps most surprisingly, the book closes with a section dedicated to a 'triologue' between neuroscientists, philosophers and psychiatrists starting from the premise, outlined by Stephens and Graham, that mental illnesses are fundamentally disorders of consciousness. Jaak Panksepp is perhaps the most provocative, arguing for an evolutionary account of emotional neurocircuitry and hence a common substrate for conscious affective experience and pathology across species, whereas Vogely and Newen go for a more contemporary approach that examines self–other distinctions in light of recent research on the 'default network'. Even if talk of consciousness leaves you cold, or indeed, frustrated, these chapters serve to elaborate numerous examples of how neurocognitive theories cannot be value-neutral with regard to what is considered a normal or abnormal human process.

Despite its intentionally wide scope, this book is not the best place to look for a complete review of the neurocognitive evidence for each psychiatric disorder, but as a practical resource for how to use and make sense of neuropsychology in psychiatry, it is indispensable.

Vaughan Bell Departamento de Psiquiatría, Bloque 4, Hospital San Vicente de Paúl, Medellín, Colombia. Email: vaughan.bell@kcl.ac.uk

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Psychotherapeutic Approaches to Schizophrenic Psychoses

Edited by Y. O. Alanen, M. G. de Chávez, A. L. S. Silver & B. Martindale. Routledge. 2009. £24.99 (pb). 420pp. ISBN: 9780415440134

Without schizophrenia there would be no psychiatry. Yet – whether because of underfunding, lack of a coherent treatment philosophy, post-modern instrumentalism, the malign influence of Big Pharma, the intractable nature of the condition, or scientific ignorance – it is hard to deny that things are far from even good-enough in services for people diagnosed with schizophrenia and their families. Most psychiatrists will have had calls for help from distressed relatives or friends about a loved one behaving oddly or clearly mentally unwell, for whom no satisfactory treatment seems forthcoming: no psychiatric beds, professionals who do not answer the telephone, a psychiatrist unconcerned or on leave, ineffective medication producing bad side-effects. At times it is hard not to feel angry, ashamed and impotent about the failings of one's profession.

The International Society for the Psychological Treatments of the Schizophrenias and Other Psychoses, whose summation and manifesto this book is, takes as its starting point the limitations of a narrowly biomedical approach. In place of – or, from your reviewer's position, ideally alongside – antipsychotics, genetics and brain science, there is a need for a humane, person-centred, relational, family-oriented approach, offering de-stigmatisation, continuity, optimism and understanding. The roots of this come from two main sources, both of which are traced in the historical section of this compelling compendium. First is the psycho-analytic perspective, however questionable in its details, brilliantly expounded here from a Kleinian position by Murray Jackson and ethnographically by Lyn Chua. The second is the 'needs adapted' approach to mental illness, described by some of its leading practitioners – Alanen, Rosenbaum, Cullberg – a manifestation of Scandinavian social democracy miraculously managing to finesse the oxymoron of institutional yet personalised care.

Inevitably there are some reservations about this book. It suffers from the unevenness of tone and quality endemic in multi-author tomes. Conspicuously absent are psychosocial psychiatry's big beasts – Leff, McGorry and Burns come to mind – who might have lent academic gravitas. Although its critique of conventional services is stringent, the alternatives offered are in the main merely vaguely humanistic. Little attempt is made to delve into the complex relationship between genes and the environment, the exact role of trauma in psychosis, or ways of devising services that meet both psychodynamic and scientific and economic criteria. Silver and her colleagues argue that the tide is turning and that the psychotherapeutic relationship is once more moving to the mainstream of mental health services. Let us hope that she is right, and that this book will play a full part in that shift, not drowning but waving.

Jeremy Holmes Visiting Professor, School of Psychology, University of Exeter, UK. Email: j.a.holmes@btinternet.com

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Working with Violence: A Contemporary Psychoanalytic Approach

By Jessica Yakeley. Palgrave Macmillan. 2009. £21.99 (pb). 224pp. ISBN: 9780230203631

The subspecialty of forensic psychotherapy is a relatively young one. However, the tradition of psychotherapeutic approaches to understanding violence and aggression, which underpin much of the theory and practice in this field, has a much longer history.

Working with Violence is a recent addition to the 'Basic Texts in Counselling and Psychotherapy' series, aimed at an 'introductory

level' for students and practitioners across a range of disciplines. The opening chapters – covering basic psychodynamic and analytical ideas and introducing relevant clinical concepts, such as psychosis and personality disorder – achieve this in a concise and readable manner. Yakeley introduces the concept of violence as a form of communication (conscious or unconscious) and the central idea that within every violent individual resides both a perpetrator and a victim. One of the book's greatest strengths is that it sets out to complement, rather than replace or refute, alternative theories of violence. Psychological theories – such as attachment and internalisation of transactional patterns – are integrated with findings from other disciplines, including epidemiology, criminology and forensic psychiatry. In approaching this task the book is well structured, each chapter opening with an up-to-date commentary on the topic in question and using clinical vignettes to good effect in bringing these concepts to life.

One chapter which departs from this format – and offers relatively little from other disciplines to place the material in context – is that which covers the links between violence, sexuality and perversion. This chapter begins with the bold assertion that, 'Aggression plays an integral part in all sexual activity', and goes on to explore this assertion in wholly psychoanalytic terms. It was in relation to this chapter that our opinions diverged. We felt it likely that some readers will find the discussion of these powerful, complex (and not uncontroversial) ideas too esoteric, whereas others will find it is in understanding this mode of violence that psychoanalytic ideas are of greatest use.

Irrespective of this caveat, there is much to be learned from this book. The chapter covering 'violence and society, race and culture' is particularly good. Here Yakeley provides an excellent account of the multifactorial nature of societal violence, including

systemic ideas of the different levels (or layers) of influence over an individual or group in the 'real world', along with a discussion of how such influences can be internalised and erupt in extremes of violence. It would have been interesting, perhaps, to see this comprehensive approach further explored in other sections of the book, dealing with the causes of individual, interpersonal violence (in which such 'external' factors are also likely to play a significant role).

The later chapters, covering practical issues of managing and working with violent individuals, are similarly pragmatic in tone. The chapter on working in secure forensic settings gives a helpful insight into issues of 'containment' and treating the 'institutional sickness' of such places (perhaps the real work of the forensic psychotherapist). Likewise, the chapters dedicated to individual and group psychotherapy for violence are pleasingly focused on the practical elements of such work, including an emphasis on awareness of risk and safety.

We would recommend this book as a useful aid for practitioners working in the field of forensic mental health, as well as for psychiatric trainees with an interest in forensic psychiatry or psychotherapy. The concise text and generally practical focus, which places psychoanalytic concepts alongside more mainstream approaches, will help to make sense of the actions of the violent 'offender-patient' and assist with the challenge of engaging such individuals in a safe, bounded and empathic manner.

Jake Harvey Specialty Registrar (ST6) in Forensic Psychiatry, South West London and St George's Mental Health NHS Trust, Hume Office Suite, Springfield University Hospital, 61 Glenburnie Road, Tooting, London SW17 7DJ, UK. Email: jake.harvey@swlstg-tr.nhs, **Andrew Hadler** ST5 Forensic Psychiatry, HM Young Offender Institution Feltham, UK.

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