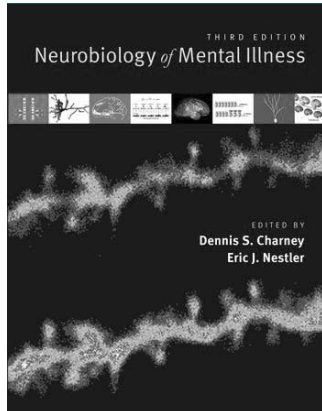


## Book reviews

Edited by Allan Beveridge, Femi Oyeboode  
and Rosalind Ramsay



### Neurobiology of Mental Illness (3rd edn)

Edited by Dennis S. Charney  
& Eric J. Nestler.  
Oxford University Press. 2011.  
£80.00 (pb). 1504 pp.  
ISBN: 9780199798261

Biology being the study of life, the neurobiology of mental illness is a broad topic of relevance to all psychiatrists. Colleagues who dismiss molecular and animal models of human ills, perhaps sniggering that we are really quite different to ‘cells’ and ‘rats’, are missing out on some inventive and often beautiful science; just as those reductionists who triumphantly state that consciousness is an illusion neglect many other productions of that organ which most interests us.

Having said that, one has to ask who reads – let alone buys – a book as intimidating as this one in scope and size? And how on earth does one review it? For this is an awesome book. Weighing in at 3.4 kg (7.5 pounds, over half a stone) even in paperback, it contains 87 (yes!) chapters written by about 200 contributors, and is more or less equally divided into sections on basic neuroscience, clinical research methods, psychosis, mood disorder, anxiety, substance misuse, dementia, child psychiatry and ‘special topic areas’. The last 65 pages or so are a rather thorough index.

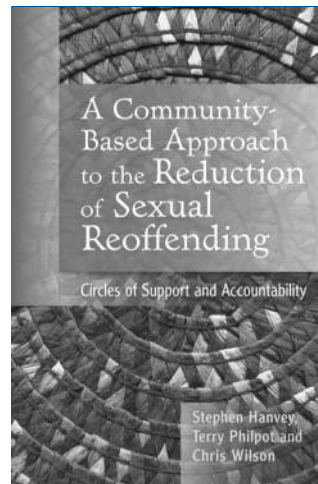
Once I felt up to my Herculean test, I wrestled with this truly magisterial tome for about 7 days using all the spare time available. Reader, you will not be surprised to learn that I did not read every one of what must be more than 100 000 words, but I swear I turned every page. I even read many chapters in full. And it was worth it! Not only do I feel virtuous, slightly ecstatic and a bit stronger, I am much better informed. Genetics, molecular biology and brain imaging get particularly thorough coverage in what are almost entirely very well-written, fairly accessible, concise summaries of hard-won neuroscientific knowledge. There are plenty of excellent clinical descriptions and therapeutics as well. Some of the chapters are wee gems – I particularly liked those on brain development, signal transduction, epigenetics, too many of the child chapters to single out, and those on the neurobiology of social attachment and resilience. I will be suggesting this book to all students and trainees up to the task of heaving it around as an unrivalled introduction to what is known about the pathophysiology of just about every type of problem we might see in psychiatric practice. It also incorporates psychosocial aspects of biology relevant to psychiatry well; certainly much better treatment than biology usually gets in psychosocial tracts.

It is therefore easy to see why this book is now in its third edition – although equally mysterious why it has taken 2 years to release the softback edition. It probably contains too much on brain scanning, particularly as we know so little about the

biology of imaging findings. I also think – a counsel of perfection this – we could do with even more synthesising and even better incorporation of the impact of the environment on neurobiology. Such changes would make the next version of what was my constant companion for a week, and should be a trusted reference resource for a while yet, if not quite a timeless friend, even better. It may even have to be a bit bigger.

**Stephen Lawrie** Professor of Psychiatry and Neuroimaging, Division of Psychiatry, Royal Edinburgh Hospital, Morningside, Edinburgh EH10 5HF, UK.  
Email: s.lawrie@ed.ac.uk

doi: 10.1192/bjp.bp.111.107284



### A Community-Based Approach to the Reduction of Sexual Reoffending: Circles of Support and Accountability

By Stephen Hanvey,  
Terry Philpot & Chris Wilson.  
Jessica Kingsley Publishers. 2011.  
£19.99 (pb). 192pp.  
ISBN: 9781849051989

This book is the first UK publication on circles of support and accountability (COSA) and their development in the UK over the past decade. A circle comprises a group of volunteers – trained and supervised – who provide structured support to a child sex offender in the community, and hold him to account for his behaviour. As the book states, COSA have at their heart a philosophy of restorative justice in which all people within a community are of equal importance, with an emphasis on healthy relationships and mutual responsibility.

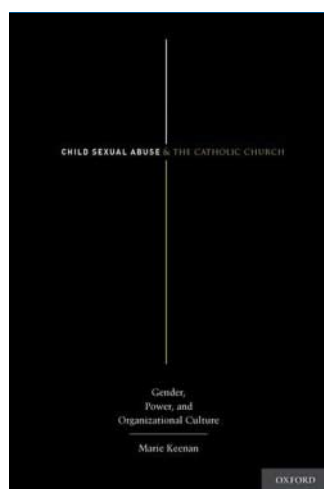
Chapter one sets out the history of COSA, from its inception in the early 1990s by the Canadian Mennonites (a faith-based community) to its support by Multi-Agency Public Protection Arrangements (MAPPA) and the Ministry of Justice in the UK in recent years. Chapter two provides some information about child sex offenders, their characteristics and motivation, as well as some detail about treatment approaches. Chapter three touches on public attitudes towards sex offenders and current community arrangements such as MAPPA. The book truly finds its feet with chapters four and five, which provide much more detail regarding the principles of COSA, the model of care and the way in which it is delivered; detailed interviews with four ‘core members’ (child sex offenders) and four volunteers are engrossing and illuminating. Chapter six devotes itself to the question of effectiveness and evaluation, for which there is some empirical evidence, albeit somewhat constrained by small sample sizes and low base rates for reoffending in sex offenders. The book concludes – arguably, in a rather random fashion – with a discussion of the role of the media in reflecting and influencing public attitudes regarding child sex offenders.

The book explicitly targets the interested lay person as its primary audience, and in doing so, achieves an easy conversational style and a refreshing absence of jargon throughout. Certainly, the

intelligent public and the non-specialist professional (perhaps police or local authority staff) will find both the COSA model and this book interesting and informative. It is less successful as a basic text for learning about child sex offenders and their wider management, but to be fair, this is not its primary purpose. My own view is that the child sex offender accounts were well judged and sensitively portrayed, and would certainly provide a non-sensationalist and balanced glimpse of the emotionally complex world of the child sex offender which would be instructive to all professionals developing their understanding in this area of work.

**Jackie Craissati** Consultant clinical and forensic psychologist, Oxleas NHS Foundation Trust, Bracton Centre, Bracton Lane, Dartford, Kent, DA2 7AF, UK. Email: jackie.craissati@oxleas.nhs.uk

doi: 10.1192/bjp.bp.111.103465



**Child Sexual Abuse and the Catholic Church: Gender, Power, and Organizational Culture**

By Marie Keenan.  
Oxford University Press USA. 2011.  
£40.00 (hb). 400pp.  
ISBN: 9780199895670

The topic of the scandal of child sexual abuse by Irish clergy may only have impinged lightly on your awareness, especially if you are neither Irish nor a child psychiatrist. However, this analysis by Marie Keenan, an academic in social work and a systemic therapist, brings unusual perspectives and a depth of experience to the issue of sexual abuse within institutions.

The central research comprised interviews with seven Roman Catholic priests and two religious brothers, of whom seven had been convicted of sexual offences they had perpetrated, whereas the victims of the remaining two had not wanted to pursue criminal charges. In this sample, all of the victims of abuse were male except for one adolescent girl, and the nature of the abuse ranged widely, often with different young people over many years. They had been approached to participate in the research as they had admitted to the abuse of minors and were attending therapy at a treatment facility in Ireland: they had all lost their clerical ministries. Interestingly, the starting point was group discussion, followed up later by individual interviews, when ideas generated could be explored in greater depth.

Considering the 'individual as the unit of analysis', the literature on sexual offending in general is reviewed as well as the more limited amount on the clerical offender. Single-factor theories include: the roles of attachment, intimacy and loneliness; deviant sexual preferences; emotional regulation; cognitive distortions; and empathy deficits. Multifactorial theories, such as Finkelhor's 'precondition model', also emphasise differences of motivation and the external circumstances that may either impede or promote sexually abusive behaviour. Psychiatric literature is noted to concentrate mainly on the classification of the offender

according to DSM-IV; the importance of this seems to relate considerably to whether insurance will reimburse treatment costs or not in the USA. However, other ways of looking at the problem, even linguistically, such as the shifting connotations of 'childhood' and 'sexual offence' demonstrate that meaning and values change over time and across cultures.

Keenan has clearly studied in detail the course of the clerical abuse scandal – the way awareness developed in Ireland and elsewhere; the way individual clerics were treated (often simply by repeatedly moving them); the role of the bishops; and the role of the Vatican in Rome. She attempts compassion for the lower-order people, and speculates about the way the ideology of the Roman Catholic Church has shaped and maintained abusive behaviour. The would-be cleric must first attend a seminary, where he learns that sexual behaviour or even desire outside of marriage is a mortal sin, yet a priest must not marry. 'Particular friendships' are also discouraged, and the difficulties of achieving these standards are not discussed, though sins must be confessed. In fact, in one research study quoted by Keenan only 50% of Catholic clergy were practising celibacy. For a young man, who may already be vulnerable, sometimes because of his own experience of sexual abuse, or his awareness of his sexual preferences, this is very difficult, and the quotations from the research participants are illuminating. The themes of early loneliness and lack of intimacy or relevant guidance are strong.

The book's subtitle, 'Gender, Power, and Organizational Culture' provides insight into how one particular powerful centralised culture has managed 'scandals' – in the first place by emphasising secrecy. This starts with victims who may have complained or whose parents did so: they tended to be met with denial, or adjured to silence, and exhorted to forgive, rather than helped to complain to civil authorities. Secrecy is of course linked to the procedure of 'confession' but it was applied much more widely, and was exacerbated by the earlier weakness of Irish civil law and the Vatican's concept of its own precedence with Canon law, which is concerned with transgressions and not with victims. Power is centralised in the person of the Pope and those surrounding him, which includes control over life circumstances, and the duty of 'obedience' is strongly emphasised along with 'infallibility' – thus making challenge extremely difficult. As with other large systems faced with accusations, blame is attached as low down the hierarchy as possible: in this sort of case, often first to the victim, then to the individual perpetrator (a 'rotten apple' priest), then to the person in authority who failed to deal with the issue adequately (the bishop), and then to a localised culture (here, Ireland as a whole). Keenan confronts all this in great detail, not omitting a feminist commentary on how the supposed great evil of sex with a mature woman might somehow make sexual activity with children less of a sin.

However, there are lessons here for organisations beyond churches, especially where there are codes of confidentiality and loyalty, powerful hierarchies, and isolated institutions dealing with vulnerable people. Over recent decades, our own General Medical Council, although still concentrating mainly on individuals rather than systems, has become much more aware both of boundary breaking and of the obstacles to whistle-blowing on this and other issues. The new threat to patient protection from a variety of abuse is perhaps less the defensive misuse of 'medical' but of 'commercial' confidentiality.

**Fiona Subotsky** Emeritus Child and Adolescent Psychiatrist, South London and Maudsley NHS Trust, Honorary Archivist, Royal College of Psychiatrists, 17 Belgrave Square, SW1X 8PG, UK. Email: fsubotsky@doctors.org.uk

doi: 10.1192/bjp.bp.111.107227