In this column, the author reviews seven books that are relevant for mental health professionals who do forensic work: *Handbook of Correctional Mental Health*, edited by Charles L. Scott, MD; *The Psychiatrist as Expert Witness*, by Thomas G. Gutheil, MD; *Bad Men Do What Good Men Dream*, by Robert I. Simon, MD; *Textbook of Violence Assessment and Management*, edited by Robert I Simon, MD, and Kenneth Tardiff, MD, MPH; *Principles and Practice of Child and Adolescent Forensic Mental Health*, edited by Elissa Benedek, MD, Peter Ash, MD, and Charles L. Scott, MD; *Principles and Practice of Trial Consultation*, by Stanley L. Brodsky, PhD; and *Psychological Science in the Courtroom: Consensus and Controversy*, edited by Jennifer L. Skeem, PhD; Kevin S. Douglas, LLB, PhD; Scott O. Lilienfeld, PhD. (Journal of Psychiatric Practice 2010;16:54–57)

**KEY WORDS:** forensic psychiatry, book reviews

This month’s column reviews seven books, some particularly important for those who do forensic work, and lists several others that have been published during the past couple of years.


This is the go-to book for mental health assessment and treatment in jails and prisons. In the second edition, Dr. Scott and the chapter authors greatly expand the depth and breadth of the original topics, but they still keep the discussions practical and relevant to psychiatrists, psychologists, and other professionals who serve the huge population of incarcerated individuals with mental illness. There are far more severely and chronically mentally ill persons in jails and prisons than in psychiatric hospitals (although that statement is not quite as surprising as it sounds, since most inmate care is “outpatient” within the correctional environment). People in need of treatment are greatly overrepresented in correctional settings. In addition, the proportion of people (i.e., detainees and inmates) who need mental health assessment in these settings, particularly jails, far outstrips that in any “free world” community. Nevertheless, correctional psychiatry and psychology receive little attention in training programs. That’s why you need this book.

Part I (3 chapters) provides a short but fairly complete introduction to correctional settings, the criminal justice system, and the context of care. Legal issues, including patient/inmate rights, clinician duties, and differences between care in correctional settings and in non-correctional communities and facilities, are addressed here. Readers who are new to correctional settings should not skip this section.

Part II (12 chapters), the “meat” of the book, details clinical evaluation and care in a practical, relevant manner. Some of the material is specifically clinical; some is more conceptual. “Managing” disruptive mentally ill inmates is not avoided. The chapter on suicide prevention is quite good. Malingering is also well addressed. The chapter on system monitoring is welcome in a field in which many treatment sites must operate under some form of judicial oversight.

Part III (5 chapters) covers a few special populations. Unfortunately, these “special” populations are large, routine parts of the population of many facilities, and the short shrift of only one chapter apiece doesn’t do the job. I would have preferred, for example, that the chapter on juvenile offenders had simply been omitted (and the book title perhaps changed to reflect a focus on adult facilities only), rather than having the authors try to cover the entire world of juvenile detention in fewer than 30...
An edited book of this breadth is always somewhat uneven, but no one person has the knowledge and experience to write such a Handbook. Dr. Scott has made chapter organization consistent and very clear. Each chapter has a conclusion and bulleted “Summary Points” that cement the material in the reader’s mind. I am very impressed with the contributing authors’ (primarily psychiatrists and psychologists) great experience and writing skills, and with Dr. Scott’s talent at putting the project together in a second edition.


It’s overpriced, but what’s a psychiatrist to do? You’ve gotta have it. The second edition of Dr. Gutheil’s classic for nonforensic and new forensic psychiatrists is significantly revised and better than the first, but retains its conveniently small size. The book is concise, well organized, and eminently readable. The principles are clear and the advice very practical, with many case illustrations and examples of the author’s dry wit (don’t try that during testimony).

Gutheil doesn’t cover every single thing, but it’s a fine place to start. The Introduction is arguably the most important 11 pages in the book, with brief but very well considered comments about a dozen critical points at the foundation of quality, ethical forensic work.

Each of the 10 main chapters (including the Introduction) has references and selected readings, and there is a list of readings and websites after the four appendices. The glossary is necessarily short but includes both legal terms and anecdotal ones from the text (e.g., “stiffing,” “turndown rate”).

Many of the suggestions (and a few of the principles themselves) are somewhat personalized to Dr. Gutheil’s own style. Although usually helpful and always worth serious consideration, they may or may not represent the right approach for a particular professional in a particular situation. The final chapter (The Expert on the Road) is a little fluffy (e.g., some of the travel tips), but fits nicely under the heading of practicality. The “standard” fee agreement on page 125 is idiosyncratic to the author, but it and the annotations that follow on pages 127–128 contain very important practical concepts.

I would (politely) disagree with only a couple of Dr. Gutheil’s points. First, he appears generally to recommend against audio or video recordings of interviews and examinations. Many forensic professionals believe that recording has (or is about to) become the standard for many kinds of forensic examinations. In spite of the often-cited but rebuttable belief that recording is intrusive or changes examination behavior, the presence of an accurate record makes it far easier to develop and support accurate opinions, obviates arguments that the expert missed something or misrepresented the interview, and limits fudging and misrepresentation by mediocre or venal (Dr. Gutheil’s word; I like it) experts.

That brings me to a last criticism. The concept of “hired gun” is anathema to forensic psychiatry and psychology. We rail against it, but it is important to define our terms. After several examples in a “Spotting the...hired gun” section which don’t always seem to fit (pp. 52–55), Dr. Gutheil points out that there is a difference between intentional bias and simple incompetence. I would suggest a sort of spectrum here, with the “tell-me-what-you-want-me-to-say” hired gun on the bottom, resting somewhat below the still inappropriate (and often unethical or even perjurious) territory occupied by those who recognize but ignore their biases, fail to recognize bias when they should, become involved in cases outside their expertise, and the like. No-fault mistakes can be made by good professionals, often inexperienced but sometimes not, who are given incomplete information, tricked by retaining attorneys, confused by complex legal circumstances, or flustered by effective cross-examination.

If one is going to rely on a quick read to serve as a forensic expert, this is it.

I am conflicted about this book. On the one hand, it is a fascinating discussion of several varieties of abnormal, antisocial, often heinously violent human behavior from a psychiatric point of view (although not all the behaviors should be considered examples of mental illness). It offers insights into the so-called “dark side” of the human element by a very experienced, and very human, clinical professor and forensic psychiatrist. It is full of good information about topics that engender mystery and misunderstanding among both lay and professional readers. It is offered by a reputable publisher of clinical and academic books.

On the other hand, while not tantamount to Krafft-Ebing’s Psychopathia Sexualis (an old classic which can probably still get Boston readers arrested), the book is unnecessarily titillating, even lurid at times. The case examples that open each chapter—on psychopathy, rape, stalking, multiple personality, exploitative psychiatrists, violent cults, and so on—are more graphic (and often sexual) than the topics require. There is unmistakable value in not sweeping educational details under a rug of censorship, but some of the content tends to separate this book from the truly scholarly.

That approach also enhances book sales. The market for “trade” books (those slightly oversized, educational paperbacks that one finds in the psychology section of Barnes & Noble) is far larger and more lucrative than the clinical/reference market. It is generally good to bring psychological and behavioral information to nonprofessionals who want to understand violent or evil behavior, and those people are more likely to read a trade book than a dry reference tome; nevertheless, I am concerned that both the author and the publisher in this case have moved too far from their professional roots.


This is a truly comprehensive work, beautifully organized and well referenced, that really does cover the “principles and practice” of its topic. It is larger than the number of pages implies; the 8-1/2 x 11-inch format roughly doubles the content per page and enhances continuity for the reader. The editors are well-known in the field; the chapter authors come from a variety of mental health (and sometimes legal) backgrounds. Each section has a specific editor to ensure coherence.

Dr. Benedek edited Part I (forensic involvements, ethics, testifying, telepsychiatry, cultural competence) and Part III (child custody, foster care, adoption, gay and lesbian parenting). Dr. Ash oversaw Part II (legal issues in treatment of minors, intellectual disability), Part V (description, neurobiology, prevention and treatment of youth violence, including stalking), and Part VII (civil litigation and psychic trauma, malpractice, psychological autopsy, special education evaluations, sexual harassment). Dr. Scott edited Part IV (child abuse and related interviews, assessments, factitious [Munchausen’s] disorder by proxy, forensic aspects of the Internet) and Part VI (juvenile offenders, including juvenile law, waiver and state-of-mind assessments, offender treatment, and sexual aggression).
Principles and Practice of Trial Consultation.

This is not a book about ordinary forensic psychiatry or psychology, in which an objective expert tries to clarify facts and search for truth rather than “siding” with a litigant. Rather, this book is about helping lawyers win their cases, with the consultant becoming an advocate for the lawyer’s client. This is a separate endeavor, uncommon in psychology practice and even rarer in psychiatry. It must not be confused with offering psychiatric opinions or other testimony (even “fact” testimony), in which objectivity is expected and ethically demanded, and in which advocacy is left to the attorneys.


This is a compilation rather than a book focused on a particular clinical or forensic topic. Nevertheless, it is a fascinating compilation, with 17 chapters that give brief, apparently objective (well referenced, at least) overviews of such diverse topics as so-called “repressed memory,” forensic hypnosis, eyewitness reliability, interrogation, projective testing, malingering and deception, criminal profiling, psychological pseudoscience, child custody evaluations, trial competence, violence risk, and offender rehabilitation. Much of the point, in the words of Professor John Petrila, is to find “common ground between scientific psychology and the law.”

Books Received but Not Reviewed