

How to Work With Sex Offenders: A Handbook for Criminal Justice, Human Services, and Mental Health Professionals

by Rudy Flora; New York, Haworth Clinical
Practice Press, 2001, 274 pages, \$22.95 softcover

Laurie L. Guidry, Psy.D.

This book represents an effort to provide a concise and comprehensive informational resource for individuals who work with sex offenders within relevant legal and clinical contexts. The author, Rudy Flora, also seeks to explore and define the structure and function of the multiple systems through which sex offenders may move from the time of their arrest through the time they begin treatment.

Early chapters cover in very broad strokes the criminal justice, human services, and mental health systems and subsystems and their individual roles in the process of dealing with sex offenders and their victims. The author also identifies and outlines some of the techniques and standards used in each of these independent yet interrelated disciplines in their approach to investigating sexual crimes and interviewing, profiling, assessing, and treating sexual perpetrators. Later chapters are dedicated to an elementary identification of both clinical and criminal classifications of sex offenders, a brief overview of the multiple etiological theories that have been purported in the sex offender literature, and an outline and review of a variety of treatment approaches that have been established in the clinical treatment of sex offenders and of special subpopulations of sex offenders.

Criminal justice, human service, and mental health workers who are new to the task of working with sex offenders may find this text to be a useful primer to the sex offender field. In particular, the portion of the book that covers taxonomies, theories, and treatment of sex of-

fenders provides the working basis for a fairly sound introductory curriculum for clinical work with sex offenders. However, the author set himself a difficult task in trying to provide a comprehensive resource for a relatively new, highly complex, and rapidly evolving field that involves the intersection of several multilayered systems that is still in the early stages of its development. As a result, complicated yet essential topics—such as social policy issues, ethical dilemmas, and the most current research and practice data—may have received short shrift or

been unable to be included. In addition, it seems a significant and short-sighted omission that a book designed as a reference source for professionals failed to include any references to the international, national, and more local professional organizations that exist to provide information, education, conferences, support, practice standards and guidelines, forums for discussion and exchange, and access to the most-up-to-date information and research data available to individuals who work with sex offenders. However, although professionals in criminal justice, human services, and mental health who have experience working with sex offenders may find this book too elemental and thin on extant information, novices in the field can use this handbook to get their early bearings in a profession rife with challenge and complexity.

Not Fair! The Typology of Commonsense Unfairness

by Norman J. Finkel; Washington, D.C., American
Psychological Association, 2001, 335 pages, \$39.95

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During the course of a typical day, individuals working in the field of psychiatric services are likely to hear someone proclaim "That's not fair!" Examples include a consumer's perceiving the clinical treatment decisions of care providers as unfair and a violation of his or her rights and a clinician's considering a managed care utilization guideline as unfair and an encroachment on the clinician's professional autonomy. Although many psychiatric services professionals are likely to be familiar with these or similar claims of unfairness in ordinary discourse, how many have stopped to think about the nuances of the expression "That's not fair"?

Written by a psychologist with expertise in psychology and the law, the book *Not Fair! The Typology of Commonsense Unfairness* is worth exploring even if you have wondered only fleetingly about the concept of unfairness. Academics in traditional social

science disciplines such as psychology, anthropology, philosophy, theology, criminology, and political science constitute the principal audience for the book. Secondary audiences include lawyers, divorce and labor mediators, psychologists and other mental health clinicians, politicians, and public-spirited citizens.

The book is organized into five sections that flow nicely from start to finish. In the first section, Finkel establishes the context of the major theological, philosophical, and psychological underpinnings behind claims of unfairness and discusses the viewpoints of critics who consider unfairness claims to be largely petty and trivial. The first section of the book also lays out the author's preliminary

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hypotheses for the empirical work described in the subsequent sections. Sections 2 through 4 describe the methods and results of each successive phase of research aimed at understanding the multiple dimensions of unfairness, including how age, gender, and culture shape perceptions of unfairness and the consistency of unfairness claims across various groups.

One of the most striking findings from the research is that claims of unfairness increase with age and become more intense over time. In Finkel's opinion, societal blame can have hazardous consequences if, for example, individuals lack the conviction to remedy perceived injustices and become apathetic toward the political process to the point of refusing to exercise their right to vote in elections. In the concluding section, the author disentangles the differences between efforts at rectifying, nullify-

ing, and softening claims of unfairness and discusses the implications of the findings in relation to a "commonsense" notion of unfairness.

Although readers may be only peripherally concerned with the topic of unfairness, the ideas and findings in this book are certainly applicable for scholars who are interested in furthering their understanding of the psychological, philosophical, theological, and legal constructs of unfairness and may also be of help to practitioners in areas related to clinical practice, negotiation, mediation, and public policy. As the author notes, it is important to understand that a claim of unfairness can be perceived not only as "a reaction to the wrong, but also a desire for better." This is an especially significant lesson for psychiatric service professionals who oversee and provide care to vulnerable individuals, many of whom have been treated unfairly.

vestors or chief executive officers rather than being applied to the care of other patients. Next year's budget for behavioral health may be cut further if costs are contained this year. Managed care companies know that barriers to care not only reap short-term financial benefits but also drive costly patients with mental illness to competitors.

The book also makes little mention of carve-out companies and the practical questions that arise around them. For example, should clinicians seek to work for all of them? Is it ethical to belong to a network to see ongoing patients, yet refuse new patients from that organization (while accepting new patients from better payers)? Who is responsible for "phantom networks"—irresponsible psychiatrists, or managed care companies who insist on much paperwork and low clinician reimbursement? What about managed care-driven split therapy, whereby a psychiatrist works with psychotherapists selected by the managed care company—does one accept all arrangements? None of these messy issues appears in the book, although there is a good discussion about how to go about appealing managed care denials.

In short, Bennett has written a good book for medical students and beginning psychiatric residents. Clinicians, both within and outside of these organizations, must behave ethically, and the author illustrates how to do so. Yet acting ethically in a sometimes-questionable environment is addressed incompletely, and that failing leaves this little gem of a book incomplete. Maybe it is a matter of the book's title promising more than it delivers. I believe that Bennett has written "A Concise Moral Guide to Managing Behavioral Health Care Within an Idealized Managed Care Environment."

Concise Guide to Managing Behavioral Health Care Within a Managed Care Environment

by Michael Isaiah Bennett, M.D.; Washington, D.C., American Psychiatric Publishing, Inc., 2002, 104 pages, \$24.95 softcover

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Michael Isaiah Bennett has written a useful small book that can be read in less than two hours. Although brief, *Managing Behavioral Health Care Within a Managed Care Environment* is not superficial. The references are well chosen and abundant, so any major point can be followed up by an interested reader. I particularly liked the illustrations of exactly what words might be said in a given circumstance to the patient, the managed care company, or the clinician. Sometimes the author illustrates his point by providing a sentence or two demonstrating the wrong way to address the same issue. The practical approach and sound

advice would be helpful to a newcomer to the confusing world of managed care. The basic premise is that limitations on resources for psychiatric care are not necessarily bad—patients and therapists must learn to cope with limits.

Yet something is missing from this book, and it does not stem from the book's brevity. The author seems to have made a deliberate choice to focus on what is right with managed behavioral health care rather than its problems. Because Bennett has worked in both the public and the private sectors, as a clinician and as a physician advisor to a managed care organization (just as I have), he must know the other side of managed behavioral care. Sometimes, the cost savings that clinicians and administrators force on patients and their families end up as profits for in-

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