

out in an industry who has no resources be able to pay off others to protect her early sexual history and her history of pregnancy?

Of particular interest to readers of this journal will be Parker's handling of a mixed group of individuals he uniformly refers to as "shrinks." *Melancholy Baby* includes two "shrinks" who are carryovers from other Parker novels. The first of these—Dr. Copeland—was a central character in another Sunny Randall novel, *Shrink Rap*, but is a very peripheral character in *Melancholy Baby*; the second is Susan Silverman, Spenser's main crush and a frequent character in the Spenser series. Copeland is a psychiatrist, Silverman a psychologist. To Parker they're all just "shrinks." In fact, Parker has Silverman herself referred to as a shrink: Randall says, "I'm sorry. . . . I mean, I know that it's about me, not about you. You're just so goddamned shrinky." Silverman replies, "I am, after all, a shrink."

Parker also has the unfortunate tendency to carry over his characters' glib banter—a trademark of

his—throughout his portrayal of psychotherapy. It would be far better if Parker did not play psychotherapy as if it were an indulgent repertoire between two bright characters.

That Parker is contributing to the confusion between psychiatrists and psychologists is no better demonstrated than in a review of *Melancholy Baby* written for the Associated Press by Bruce DeSilva (1). DeSilva writes, "Meanwhile, Sunny has troubles of her own . . . . To understand herself better, she turns to psychiatrist Susan Silverman, the love interest in two dozen Spenser books."

Parker apparently has a particular interest these days in children finding their "real"—that is, biological—parents. If this theme is of interest to you, you'd be better off skipping *Melancholy Baby* and instead reading one of the Spenser mysteries, *Back Story*.

### Reference

1. DeSilva B: Mr Parker Lays an Egg. Sunday Telegram, Aug 15, 2004, p C5

## Therapy

by Jonathan Kellerman; New York, Ballantine Publications, 2004, 400 pages, \$26.95

## Body Double

by Tess Gerritsen; New York, Ballantine Publications, 2004, 352 pages, \$24.95 softcover

Merle Brandzel, M.S.W.

**T**herapy and *Body Double* offer contrasting approaches to the mystery novel. In *Therapy*, the hero is a psychological consultant to the Los Angeles Police Department and consequently is somewhat removed from the action. The plot is an intellectual and psychological puzzle to be sorted out over dinner—although, to be fair, the hero does participate in interviews of assorted sus-

pects, bringing his clinical expertise to the endeavor.

In *Body Double*, the heroine, a medical examiner, is quickly involved as a suspect-victim. Her past, her future, and ultimately her life are bound to the solution of the danger that surrounds her. This twist brings intensity to the action that is not found in *Therapy*. By itself, this contrast does not make one novel better than the other. However, I believe it puts the onus on a mystery that is primarily a puzzle to be clever and intellectually charged.

In *Therapy*, Kellerman's Alex Delaware is a psychological consultant to agencies, courts, and the police. His friend, Milos Sturgis, a homicide detective, calls him in when a young couple is found murdered in a lovers' lane. Each has been shot in the head. The girl has a metal spike plunged through her chest. The fury of the vicious act suggests that the police are heading into Delaware territory.

The dead young man is Gavin Quick, a 20-year-old college dropout who has had personality and mental acuity changes since a car accident and subsequent brain injury a year earlier. The attractive, if slightly "trashy," young woman remains unidentified for a good part of the book.

Gavin's family does not know the girl, which suggests to Delaware that perhaps she wasn't the kind of girl you would bring home to meet mother. And this could mean she was the primary target. Delaware makes this and similar interpretations throughout the book. Although most of the interpretations turn out to be helpful in solving the case, I found them to be overreaching—other equally valid explanations are not explored.

Gavin was in therapy with a celebrity psychologist, someone who is featured frequently on radio and television talk shows. The therapy was presumably focused on Gavin's adjustment to his changed mental status, but the therapist reveals nothing. Secrets abound. The number of characters involved expands quickly: Gavin's family and the psychologist's associates as well as their spouses, ex-husbands, cleaning people, old girlfriends, and old boyfriends. None of these individuals are engaging or make us want to know more about them or even care what happens to them.

The plot, too, fails to engage us. By the end of the novel Kellerman has covered stalking, insurance fraud, prison reform, halfway houses, human rights, and African "misery pimps." It is a smorgasbord of issues that would fail to please anyone's palate.

Jonathan Kellerman's popular mys-

Ms. Brandzel is children's service coordinator with the Massachusetts Department of Mental Retardation in Worcester.

tery series has generally been well regarded, but I have found the last several to be very disappointing. To become familiar with a true genius of puzzle mysteries, readers are urged to try any of Rex Stout's only slightly dated mysteries with the orchid-growing Nero Wolfe as detective.

*Body Double* is a foray into a recently popular plot twist involving the appearance of the heroine's previously unknown identical twin—sometimes dead and sometimes alive. Lisa Scottoline's *Mistaken Identity* and Judy Mercer's *Fast Forward* are two recent examples. In Gerritsen's story, medical examiner Maura Isles returns from a conference in Paris stunned at the gathering of police officials and neighbors in front of her home. As Detective Jane Rizzoli steps aside to let her see the body, Isles realizes why everyone has been gaping at her. The corpse is her double.

The body is that of Anna Jessup, and it is soon established that the two are twins, each adopted by a different family at birth. The question is who, exactly, is Jessup, and which of them was the intended victim? A detective, Rick Ballard, comes forward convinced that Jessup was killed by her lover, a pharmaceutical baron, who abused her and jealously stalked her after she left him. Ballard had assisted Jessup with her "disappearance" into a town in Maine after anonymous threats suggested there might be a deadly ending. Ballard's intense involvement makes Isles wary, but at the same time she senses a personal chemistry.

Sprinkled among the chapters on Isles and her sister's murder is a parallel subplot, seemingly unrelated, of a young pregnant woman who has been kidnapped and kept entombed alive in a coffin-like box.

Unconvinced by Ballard's theory, Isles travels to Maine to retrace her sister's recent past. While she is ensconced in the cottage that Jessup had rented, human bones are found buried nearby in the woods. Ultimately these bones lead to the discovery of a series of bizarre disappearances across the country. The

disappearances guide Isles to her birth mother, and the two plots start to converge. There is a nice interplay of approaches as Isles searches for her own identity and Detective Rizzoli follows police procedure.

The characters are engaging and vulnerable, although Isle's stiffness and isolation seem exaggerated. The

plot is both hellish and creepy. The many strands come together and despite the complexity form a cohesive story. And just when everything appears to be tied together in a neat package, Gerritsen gives you the final shocker, and you wonder whether you should have seen it coming.

### **Random Family: Love, Drugs, Trouble, and Coming of Age in the Bronx**

by Adrian Nicole LeBlanc; New York, Scribner Publishing, 2003, 304 pages, \$17.50

Nancy Glimm, C.S.W.-R.

*Random Family: Love, Drugs, Trouble, and Coming of Age in the Bronx*, is a remarkable book. Its author, Adrian Nicole LeBlanc, makes frequent contributions to magazines and newspapers. She has several master's degrees, has been a visiting scholar in journalism, and has received numerous awards for her writing. This is her first novel.

The story is set in the Bronx at the end of a fierce decade—the 1980s—when drug gangs ravaged neighborhoods, buildings, and families. LeBlanc, on the basis of ten years of observation and reporting, has captured this moment with fairness and a narrative that brings the reader right onto the street. She also gives health care providers a tremendous insight into the intricacies of the culture of poverty in urban America today. Beyond the drug wars, which appear to have been quelled, the book offers the clinician a direct view into the lives of individuals and families who are alive and well in 2004.

The novel is based on the lives of several families as they cope and make life choices. Multigenerational patterns of behavior are described; it is possible to track the lives and observe these patterns as they play out, from mother to child to grandchild. Patterns of repeating compul-

sively destructive behaviors are described with lucidity and compassion. The culture of poverty and deprivation translate directly into the quality of the relationships. Individuals feel excluded from the material culture, and disenfranchised. The power of the subgroup becomes almost irresistible under this pressure. The disintegration of family structure creates its own new forms of relationships. This transformation is described as characters strive and are crushed by the forces they encounter or recreate. It is possible to understand how the characters see no way out, and how the structure of services available to individuals who are embedded in such chaos renders these individuals untouched by the offerings of health care providers.

The children in these families are subject to maternal deprivation and severe disruptions in their attachments. They have difficulties of separation and in overall functioning. These problems are evident and again play out in a lack of ability to function in school and a lack of interest in learning, starting at a young age. These early traumas lead to despair and rage. Boredom and the inability to connect with any positive identification lead to risk taking, drug use, alcohol consumption, and extreme sexual promiscuity. Many of the characters in *Random Family* are desperate for a positive connection with any person, activity, or sub-

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*Dr. Glimm is a member of the child and family team at the Bronx HIP Mental Health Center in New York.*