

an environment supportive of the protection, cultivation, and recovery of a sense of will on the part of the person with schizophrenia."

Thus the disability benefits writers embody the premises of the ADA; the ADA writers reflect the premises underlying disability benefits; and the book itself reflects the urgent need for an integrated approach.

The editors recognize this need and do an excellent job of framing the tasks ahead. For instance, they write that "ideas about facilitating labor force participation by people with mental disabilities have not yet been integrated with the body of disability benefit laws." They also skillfully pose questions that need to be answered: "Does *disability* refer to an objectively defined category of major impairments in functioning, perhaps rooted in biological factors over which the individual has no control? Alternatively, is disability best understood as a politically constructed category of individual characteristics that employers should not be permitted to take into account?"

This book is informative and accurate and can be understood and appreciated by readers across a wide range of expertise and experience. Overall, its most important contributions are threefold. First, it under-

scores how badly people with mental disabilities want to and need to work, and how crucial it is for them to work, helping to shatter myths of malingering and manipulation. Second, it does an outstanding job of reflecting the complexity of people's lives, and the many different forces and pressures that underlie whether an individual applies for disability benefits, continues employment, or receives neither wages nor disability benefits. And third, it vividly captures the enormous problems with the present system of disability benefits and discrimination law and lays the foundation for an integrated solution.

The book could also have included the perspective of employment discrimination law: why can employers maintain highly stressful and even abusive work environments that effectively discriminate against people with psychiatric disabilities, although the same employers are prohibited from acting in ways that have disparate impact on minority and female employees? But this suggestion simply supports the book's thesis that we still have a long way to go in understanding and responding to the employment needs and constraints experienced by people diagnosed with mental disabilities. This book is a very good start in the right direction.

appendix just for you. The considerable problems of methodology in any kind of outcome research are made clear in the introductory chapter and illustrated in the presentation of each study, review, or meta-analysis. While the book is not easy reading, it tells the story well. At the end of each section is a bulleted summary of salient conclusions from the research, followed by the authors' view of their implications. The authors are mindful of the gulf between research conditions and the real world: "The challenge is to achieve practice that is rooted in empirical findings but not circumscribed by them."

Many chapters focus on specific *DSM-IV* diagnostic categories, with particularly rich reviews of psychotherapy of depression and anxiety disorders. Chapters set the stage with summaries of literature on definitions, prevalence, and natural history of the disorder, providing benchmarks against which to measure outcomes and the significance of various treatments.

Because cognitive, behavioral, and interpersonal modalities have been far more systematically standardized and studied in research settings for symptom-based diagnoses, the most definitive evidence for efficacy comes from these approaches. Psychoanalytic psychotherapy shows more strongly in the chapters on personality disorders, where more global functioning is involved, and on children and adolescents, where dimensions of development and functioning are especially relevant. Particularly in regard to children, the authors stress the need for a multiplicity of treatment modalities to be available because of the wide range of individual, family, social, and developmental variables that influence selection of treatment. It is clear that psychotherapy works, but it is rarely unequivocal that one modality is always superior to another.

Studies making comparisons with pharmacotherapy or addressing combined modalities demonstrate that psychotherapy is often equally or more effective or that it augments

What Works for Whom? A Critical Review of Psychotherapy Research

by Anthony Roth, Ph.D., and Peter Fonagy, Ph.D.; New York City, Guilford Press, 1996, 484 pages, \$48.95

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In the new world of accountability and managed care, the shibboleth of "evidence-based practice" affects the average clinician like the sound of nails on a blackboard. Help is at hand. This volume brings the research basis of psychotherapy into

focus for clinicians. Relatively compact considering the exhaustive bibliography it covers, it is up to date, wise, thoughtful, and readable. The range of studies from English-language literature includes substantial contributions of psychology and other disciplines not easily accessible to psychiatrists. The book will serve well as a text and a resource for practice guidelines.

If you have struggled with the concept of "effect size," there is a lucid

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medication treatment by improving compliance and long-term outcome. The range of utility of psychotherapy is evident in chapters on schizophrenia, bipolar disorder, addictive disorders, eating disorders, and psychotherapy with older people. Studies on the effect of the therapist's training, experience, technique, and management of the therapeutic alliance add another dimension.

The authors highlight the need for more research in many areas, especially for widely practiced modalities such as psychodynamic psychotherapy that have a broad experience base but a paucity of studies that meet research criteria. The unique needs of children and adolescents and the fact that childhood disorders tend to per-

sist and inhibit development into healthy, productive adulthood also invite a high priority for research attention.

Throughout the book, the authors are mindful of economic considerations and the current evolution to organized systems in both the U.S. and their native United Kingdom. It may seem fanciful in today's profit-driven, competitive environment, but one may wish for the fulfillment of their final idealistic hope that continuously refined, evidence-based practice would be "predicated on researchers, clinicians, service managers, professional bodies, funders, and users of services working together for the ultimate benefit of the mental well-being of society."

Adolescent Suicide

by the Committee on Adolescence of the Group for the Advancement of Psychiatry; Washington, D.C., American Psychiatric Press, 1996, 196 pages, \$28

The Suicidal Adolescent

edited by Moses Laufer, Ph.D.; Madison, Connecticut, International Universities Press, 1995, 154 pages, \$28.50

Peter Metz, M.D.

Adolescent Suicide underscores the central fact that suicidal adolescents can no longer bear their pain, that their isolation from others is complete, and that they lose hope and abandon the future. This book, the 140th publication of the Group for the Advancement of Psychiatry (GAP), provides a comprehensive overview of adolescent suicide.

The book covers historical, cross-cultural and sociological perspectives; the relevance of normal adolescent development and developmental deviations to suicide and suicidal behavior; current research into suicidality; and psychodynamics and psychopathology associated

with suicide. Also included are chapters on prevention, early intervention and ongoing treatment of suicidal adolescents; training issues; and medicolegal and public-policy aspects of treatment. The volume is well referenced, with more than 250 citations.

Adolescent Suicide also reviews the difficulty of predicting the completion of suicide by any particular individual, given the relative rarity of suicide and despite a great deal of knowledge about risk factors. Data emphasizing the importance of concurrent substance abuse and access to lethal means, especially firearms, are well presented.

The book does not discuss the concern that homosexuality in adolescence increases the risk of suicide. It also does not discuss the impact of managed care on reviewing treatment issues and medicolegal considerations. Relatively little case

material is presented to illustrate clinical points.

Nevertheless, *Adolescent Suicide* is a well-written and comprehensive but succinct text that provides as good an overview as exists in print. It is highly recommended, and it should be read by all mental health professionals who work with adolescents.

The Suicidal Adolescent, edited by Moses Laufer, is also a monograph written by a group: staff members of the Brent Adolescent Centre and Centre for Research Into Adolescent Breakdown, located in London. The first part is a collection of essays on adolescent suicide, and the second part presents the proceedings of a conference held at the Brent Adolescent Centre in 1993.

The chapters range from the danger signs for suicidality in the psychological development of adolescents to a general practitioner's experiences with suicidal adolescents and to a study of attempted suicide in adolescence that was carried out at the Brent Centre. Although the essays are far ranging and rich in clinical material, the parts are not organized into a cohesive whole, and the discussion is heavily biased toward a psychoanalytic perspective. Overall, the essays provide some practical insights into dealing with suicidal adolescents, with an emphasis on prevention of the problem as early as possible, and from the context of an outpatient treatment setting.

These two books complement each other well: the volume from GAP is comprehensive but relatively limited in case material, while the monograph from the Brent Centre is rich in case descriptions but eclectic and somewhat limited in the scope of its review. Anyone interested in an overview of adolescent suicide will benefit from the GAP monograph. Mental health professionals interested in a more psychoanalytic and clinically impressionistic view of suicide will find the Laufer text to be worthwhile reading.

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