



Book reviews

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Psychic Assaults and Frightened Clinicians: Countertransference in Forensic Settings

John Gordon and Gabriel Kirtchuk

Karnac Books, London

2008, 152 pages, £19

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I am a fan of using psychodynamic concepts to better understand individual and group behaviour. Most of my students at least receive a copy of Tom Main's, 'The Ailment', a lecture on transference and hopefully some practical appreciation of how we affect and are affected by the people we work with. As a convert, with a little background training and reading I looked forward to opening this enticingly titled book. I did enjoy it (or parts of it) but remain somewhat ambivalent about whom I would recommend it to.

It is a fairly small book divided into six essay-like chapters (about 100 pages) but with acknowledgements, a forward, introduction, conclusion, 'afterword' and reference section (making the volume up to over 160 pages). This seemed like a lot of packaging. Nevertheless, there is not a lot of space given over to explaining the context (most chapters deal with forensic inpatient units in the UK). Nor is there much space given to explaining the central concepts or tools such as transference, projective identification or more generally object relations theory that have been ported from therapy and applied to explain offending behaviour or to analyse staff dynamics. All chapters use case studies to illustrate concepts or points, and in psychoanalytical style analysis is confidently proffered. Without a little more background, the reader may wonder how it is that the authors can assert with such apparent certainty that this or that unconscious process is at play or that some re-enactment of a past relationship is occurring.

The first chapter posits that a history of trauma is a common thread in understanding many forensic patients, and in various ways nurses and other frontline staff bear the brunt of powerful transference reactions. This is developed further in chapter two in which it is asserted that patients are '... traumatised firstly by their appalling background histories, secondly by the offences they committed, and thirdly by their gradual discovery during treatment of having a mental disorder' (p.31). A detailed case study relating to a 28-year-old woman who had killed her baby and latter attacked a nurse is presented. She had been on the receiving end of 5 years of therapy, and the authors state that she will probably require permanent institutional care. The third chapter traces the development of a therapeutic group and describes a group analysis session in a forensic unit with commentary from a co-therapist and supervisor. The concept of counter-transference is elaborated in more detail in this chapter and the next, which focuses on how counter-transference might help managers to think more deeply about their roles.

Chapter five argues for the need for psychotherapy in forensic institutions or more particularly a cadre of psychodynamically informed consultants to help staff make sense of their own responses and their patient's behaviour. Chapter six describes how an 'interpersonal dynamics meeting' was set up in a forensic service in order to encourage the thoughtful consideration of patient dynamics and improve the formulation of problems. Finally, by way of conclusion the role of a psychotherapy department in a forensic service is discussed.

The text does not paint a particularly optimistic picture of psychodynamic psychotherapy and might well fail to warm people to this approach. There appears to be an acceptance that treatment can take years (if not decades) with little if any tangible gain, and this would be at odds with the ethos of many contemporary mental health services. The language and style of the text in which even the commonplace

is imbued with symbolism (e.g. ‘... the group ended after a symbolic nine months’; p. 53) will be an education for some readers used to more sterile clinical writing. The case studies are interesting but the prose is not of the same class, and the arguments not as well made as those of the leaders of the different schools of psychotherapy who are liberally and reverentially cited throughout. However, the text does make a strong and consistent case for considering counter-transference in the everyday work of nurses who work with forensic patients. It provides a glimpse of how this has been undertaken relatively recently with apparent benefits (at least to the well-being of staff) in some secure settings. The text is part of a forensic psychotherapy monograph series and perhaps should be considered along with others in the series. It will undoubtedly be of interest to psychotherapy trainees and to those who work in forensic settings wishing to develop skills to reflect on their practice. Other nurses may find it of passing interest particularly those with some prior study of psychodynamic concepts.

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Personality Disorder: The Definitive Reader

*Gwen Adshead & Caroline Jacobs
Jessica Kingsley Publishers, London and Philadelphia
2009, 278 pages, £22.99
ISBN: 9781843106401*

Adshead and Jacobs' volume of papers focusing on personality disorder would be a valuable addition to any Multi Disciplinary Team office, not least because every clinician at some point has or will encounter individuals with personality difficulties, often in the context of co-morbid conditions and at times as distressing and problematic conditions in themselves. The book is divided into three parts – Theory: Aetiology and Psychopathology; Clinical Implications; Treatment and Management. Each

paper has an introduction by the editors and each section has bullet points for reflective practice. It contains many classic papers on personality disorders – e.g. D. W. Winnicott's paper 'Hate in the Countertransference' – as well as three papers by Kingsley Norton, an expert in personality disorders who was medical direction of the specialist unit The Henderson Hospital for some 17 years – 'In The Prison of Severe Personality Disorder', 'Management of Difficult Personality Disorder Patients' and, with R. D. Hinshelwood, 'Severe Personality Disorder Patients: Treatment Issues and Selection for In-patient Psychotherapy'. Combined with forensic experts such as Adshead herself and Mary Whittle, the book combines psychotherapeutic, forensic and medically based papers in a phenomenal collection.

What struck me upon reading through these papers, which I devoured over the course of a few hours, was the sheer humanity of them. Having worked clinically on both an adolescent unit and in a Home Treatment Team, I have engaged clinically with many individuals who struggle greatly with life. And while I may, as I suspect all clinicians have at some point, have despaired of being able to work therapeutically, felt that therapeutic nihilism and even anger that all my hard work was apparently rejected, and sighed in frustration at re-referrals, this book was a stark reminder for me of the suffering that lies behind such behaviour and responses. No, not the behaviour and responses of the sufferer themselves, but my own: one of the main focuses of these papers is the struggle clinicians may have with issues of countertransference, splitting behaviour and self-harm, for example. And primarily, the papers urge clinical and critical reflection on staff's own reactions and responses as both therapeutic in itself and essential to treating and caring for individuals with personality disorders or difficulties. Furthermore, the papers in their entirety serve as a reminder that personality disorders are deeply rooted conditions with a phenomenal amount of trauma, damage and distress behind its outward manifestations. The phrase 'malignant alienation' was not one I had heard before, but the two papers that focus on the effects of it on patients make very clear its implications – the rejection or alienation of patients is malignant because it can cause death, through suicide or parasuicidal accidents.

My one small criticism is that I would have liked to have seen a more recent paper regarding the recent changes to the Mental Health Act and the categorisation and diagnostics of Dangerous and Severe