

BOOK REVIEWS

Assessment of Childhood Disorders, Fourth Edition

Eric J. Mash, Russell Barkley Editors. The Guilford Press: New York, NY, 2007. 866 pp, US \$85.00.

In this edition, 33 North American authors in 17 chapters aimed to give a best practice approach to the evaluation of childhood disorders using the best and most cost effective measures. There are seven sections: the first being on assessment of child and family disturbance and described as a state of the art conceptual framework, emphasizing strengths as well as deficits. Other sections are on behavioural disorders including substance use and abuse, mood disorders and suicide risk, anxiety disorders, developmental disorders including early onset schizophrenia, children at risk, and lastly problems of adolescence. There are 6 entirely new chapters from the previous edition including those on post traumatic stress disorder, bipolar disorder, suicidal and self harming behaviour, early onset schizophrenia and personality disorders. This book is marketed as an invaluable reference for any mental health clinician or researcher who works with children, adolescents and families.

My aim in reviewing this book, as a psychiatrist in a community clinic, was to update my knowledge, in order to have a more informed discussion with my psychology colleagues and to select better assessment instruments given the budgetary limitations and paper overload from which we and our patients suffer. Would it also allow me to better solve the diagnostic dilemmas I so often face around complex cases and comorbidity challenges? Was it practical? Did the authors validate the methods, measures and questionnaires that I had found useful during the course of my career?

Most chapters followed the same format with an overview of recent research on the disorder, DSM IV diagnostic criteria, discussion of aetiology and developmental features. The author then discussed assessment considerations including identification of the purpose of the assessment, whether for research, clinical setting or screening, diagnosis and case formulation, treatment design and planning, and treatment monitoring and treatment evaluation (Mash and Hunsley, 2005). Assessment methods including diagnostic interviews (unstructured, semi-structured and structured), self-report and clinician rating scales, parent and teacher and sometimes peer ratings were discussed with a description of strengths and difficulties of each measure. Observational measures were described where appropriate. Chapters were extensively referenced and two chapters had appendices which I associated with added value. One chapter had sample clinic forms and one had a more detailed description of measures including from where they could be obtained. In each chapter there was something to add to

one's assessment repertoire providing one was able to access it. I found the inclusion of a chapter on personality disorder refreshing. Shiner, who wrote on assessing personality disorder, started by making a case for assessment of personality disorder in adolescents, arguing that there were potentially large costs involved in misdiagnosing adolescents with other disorders leading to improper prescription of medication and absence of treatment to target key symptoms. She also mentioned that the criteria involved in the evaluation of personality attributes deviated from what would typically be expected in a cultural context as well as being inflexible and enduring. She made a case for a dimensional model of personality pathology such as that for the Big Five personality traits (Costa and Widiger, 2002) of neuroticism, extraversion, and openness to experience, agreeableness and conscientiousness. She also mentioned the possibility of personality dimensions underlying both Axis I and Axis II disorders. There was no mention of the work of Jeffrey Young on early maladaptive schemas, a concept I have found useful and tangible. She included a useful table of measures for assessing personality traits in adolescents and from where they could be obtained.

This is not a book I would buy for a personal or clinical library, but would be useful as a departmental reference, especially if setting up a sub-specialty clinic. It was well written, but because the material to be covered relied heavily on references which could not immediately be accessed, I sometimes found it frustrating. I thought there was variability in chapter quality. It did leave me better informed in discussions with my psychology colleagues for whom I felt it was primarily written. In Australia there seems to be a profound sensitivity about who can actually administer and score various instruments and the training required to do this. Therefore, this might be worth more mention in future editions. I could find no mention of the Strengths and Difficulties Questionnaire by R. Goodman which we are forced to administer every three months nationwide in Australia to youths and parents as an outcome measurement in the CAMHS (Child and Adolescent Mental Health Service) system. I did not feel I got much help around the diagnostic complexities of ADHD whilst the chapter was really helpful around client engagement. It intrigued me that there was so little discussion around attachment and its assessment throughout the book. I was delighted when one author mentioned chart review in the context of the assessment of child sexual abuse and the need for a multi-gated, multi-informant, multi-variate and multi-method assessment, which really summed up the main theme of the book.

Regarding price in these times its value for money may depend on the exchange rate at time of purchase but it may be a bargain in Canada!

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Pediatric Neuropsychological Intervention

Scott J. Hunter and Jacobus Donders, Eds. Cambridge University Press: Cambridge, United Kingdom, 2007. 493 pp. US \$115.00.

This edited book will be of interest to child psychiatrists. The title was somewhat misleading because the interventions reviewed were much broader than neuropsychological interventions. For example, Thomas Owley reviewed the use of pharmacological interventions for autism spectrum disorders in order to demonstrate concepts relevant to the pharmacological treatment of neurodevelopmental disorders. In fact, the book mainly reviewed a variety of intervention strategies, including behavioural and pharmacological treatments, for children and adolescents with disorders such as traumatic brain injury, seizures, cancer, motor control and movement disorders, autism spectrum disorders, learning disabilities, genetic syndromes, right hemispheric disorders, dysexecutive disorders, and attentional disorders typically seen by pediatric neuropsychologists and child psychiatrists. It was a scholarly work, and not a description of manualized interventions.

Historically, neuropsychology has focussed on assessment issues in order to elucidate brain-behaviour relationships. This emphasis was still apparent in this book, despite the stated focus on intervention, which was a reflection of the current state of affairs. For example, diagnostic and assessment issues as well as descriptions of neuropsychological sequelae were included in the chapters on the various disorders.

The first section of the book reviewed fundamental issues related to clinical practice including the importance of using a developmental approach, the role of neuropsychological assessment in diagnosis and treatment planning, and multicultural issues relevant to intervention and rehabilitation. The chapter on relationship of neuropsychological practice with educational interventions will be of less interest to Canadian clinicians because it was focussed on American legislation affecting provision of special education services.

The second section of the book described specific neurodevelopmental disorders including their clinical manifestations, neuropsychological findings, and results of intervention studies. With respect to intervention studies, most work has been on the treatment of children with learning disabilities and attentional disorders. This was reflected in the comprehensiveness of these chapters. The short section on psychosocial interventions for cancer patients and their families was especially interesting.

The third section of the book was an assortment of chapters on rehabilitative interventions, quantitative electroencephalography and neurofeedback, which could be considered as an acquired taste, pharmacological interventions for autism, and neuroimaging. Erin Bigler pre-

sented several interesting cases in which results of several types of neuroimaging techniques were related to history and neuropsychological assessment findings. The colour images were useful, but unfortunately the images were rather small, with the figure legends sometimes taking up more space than the images.

This timely review of intervention efforts should be mandatory reading for paediatric neuropsychologists. Since there is considerable overlap in the types of patients seen by child psychiatrists and paediatric neuropsychologists, the information will be of interest to child psychiatrists who are looking for up-to-date information on specific neurodevelopmental disorders. I look forward to future editions that hopefully will contain considerably more information on intervention strategies than is currently available.

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The Millon Inventories Second Edition: A Practitioner's Guide to Personalized Clinical Assessment

Millon, T. and Bloom, C. (Editors). The Guilford Press: New York, NY, 2008. 732 pp. US \$85.00.

The contributors to this multi authored book were primarily psychologists who are experts in research, psychopathology and personality assessment. A comprehensive review of the personality theory behind the Millon Inventories and their specific clinical application is extensive and detailed, inclusive of use within the practices of assessment and psychotherapy. Specifically, a review of historical tradition and definition as it pertains to personality successfully linked salient components of each to one another. The introduction ensured that the reader is fully versed in the working definition of personality, and the rationale for assuming this to be the foundation behind this measure. Additionally, history of the development of the Millon Inventories over time is provided, reassuring the reader that revisions have been made to keep pace with contemporary expectations and standards of assessment.

A most noteworthy contribution of this edition seemed to be the reoccurring emphasis on the ability for the assessment information to seamlessly transfer and be of benefit to applied therapy. Thus, one end goal of priority is specific to the formulation of a personalized therapeutic approach, from the accomplished skill of creating a meaningful ("personalized") assessment. An in depth discussion of all variables to consider when attempting to link personality assessment and therapy is included, whereby issues surrounding diagnosis and the ongoing debate of the usefulness of the DSM system, in addition to the wide range of psychotherapy theories.

This edition was particularly useful in providing extensive reviews of each aspect of the Millon Inventory, within

one condensed source. Thorough case studies were inserted to demonstrate the application of the different variation of the measure. The reader is further enlightened by the utility of the Inventories across age groups and populations, and the expansion of this measure since its year of origin (1969). The reviewer was impressed by the number of different populations this measure has been normed and suited for. Thus, the forensic, neuropsychological, substance abusing, elderly, couples, pre-adolescent, adolescent and college populations were included, to name but a few. Additionally, an introductory review of the Millon Index of Personality Styles Revised (MIPS) is included, which is a scale devised for use with normally functioning adults, including "motivating, thinking and behaving" scales. This scale is described as being particularly useful in organizational settings, for employee screenings.

As the reviewer is a psychologist within a children's hospital setting, the Millon Adolescent Clinical Inventory (MACI) and the Millon Pre-Adolescent Clinical Inventory (M-PACI) chapters were especially informative and worthy of notation. The presentation of these particular measures was convincing, with ample elaboration and definition. The reviewer appreciated the discussion of the evolution of personality in pre-adolescent children, recognizing the limitations of this concept, and yet providing an empirically robust measure that seemed to significantly enhance the psychosocial/emotional assessment of children within this age group. Similarly, the importance in addressing that these measures are best suited for youth presenting in mental health settings (versus schools, for example) seemed to be a critical and necessary distinction.

Throughout this edition, the reviewer fully appreciated the depth included in each chapter with regard to the evolution and development of this extensive group of measures. Cautionary statements specific to the use of computer generated reports were reassuring. A general review was also included, emphasizing test security, and regulated professional qualifications required for test administration. Overall, this edition seems to serve a purpose of providing the practitioner/scientist with a condensed version of many assessment manuals.

Chapters specific to how to incorporate the data gleaned from the Millon Clinical Multiaxial Inventory (MCMI) into treatment planning were also of benefit. Additionally, the text reviewed how the MCMI is being used in different cultures, with respective languages. It seems that this step, in particular, is of necessity, if an end goal is to provide a measure that can extend beyond the North American borders. This type of goal is synchronous with contemporary globalization.

It is the reviewer's hope that the future of the Millon Inventories could continue with this momentum. Specifically, when working within a culturally diverse world, where differences in language and specific cultural

nuances must be considered, the challenge for true globalization of a personality measure may be the next step for the Millon Inventories. This would seem to support the common thought throughout the text, whereby the reader is reminded of the limitations of a DSM diagnosis, in isolation, and more specifically, the dangers of depending on this diagnosis for treatment planning. Specifically, the authors speak to the need to understand personality theory and assessment within a much larger framework, where the focus was on individuality and the complexity of personality within human nature. This text seems an invaluable resource for psychologists and/or other assessment specialists working within a variety of mental health settings.

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The Neurobehavioral and Social-Emotional Development of Infants and Children

Ed Tronick, W. W. Norton & Company: New York, NY, 2007. 571 pp, CA \$68.00.

Ed Tronick achieved an impossible mission by integrating theoretical abstract notions and empirical data in a manner that resulted in the emergence of a new language of understanding infants. Tronick's central goal was to present his Mutual Regulation Model (MRM) of infant-adult interaction. Whilst MRM did not overshadow all that was presented in this scholarly book, it provided a solid footing to appreciate complex and abstract concepts such as dyadic states of consciousness. The author never omitted an opportunity to translate the empirical/ theoretical aspects into clinical utilisable concepts. That to me was the epitome of this scholarly writing.

How did Tronick achieve this? He gave a lot of credit to his collaborators, and colleagues. This 5 part volume resonated his deep commitment to understanding infant's inner world.

Part 1, "Neurobehavior", described some well-known and some entirely new concepts. The author stated that he was trying to "broaden the definition of what is considered a teratogenic effect" (Page 21). He then outlined the newborn behavioral capacities, and the use of the Neonatal Behavioural Assessment Scale. The description of the NNNS (NICU Network Neurobehavioral Scale) that was specifically developed to assess neurological and behavioral capacities of at risk infant, such as substance exposed, was detailed. These chapters were supported by a DVD that provided visual understanding of infant states, and actual execution of some of the tests.

Part 2 described the role of culture in child development, brain organization and parenting. True to the theme of this book, this discussion was supported by empirical

observations. The caregiver-child strategy model is explained emphasizing the impact of parenting practices embedded in the sociocultural and ecological environment of the infant. Tronick's work with the Efe exemplified this strategy model. For example, availability of multiple nurses to the newborn was seen as a culturally adaptive procedure that safeguarded against threats of dehydration and introduced the infant to a gregarious way of living. This part also included discussion about the continuous care and contact required by human infants and the benefits from such a dynamic system seen from a cultural and evolutionary viewpoint. By using early mother infant interactions in the Efe and the Guissi dyads, one theme was clearly stated, that infants learn about their culture from very early stages; "It is our feeling that the interaction does not simply reflect the developmental process but rather forms the basis of that process" (Page 152).

Somehow the next two parts regarding the "Infant social-emotional interaction" and "Perturbations: Natural and Experimental" did not capture the almost poetic flow of the first two chapters. These two parts compiled seminal research on the infants' social emotional interactions. Seven chapters in Part III and ten chapters in Part IV is basically a compilation of published papers and book chapters by Tronick and other well known researchers. This is truly a primer for anyone who wanted to learn the basics of infant's social emotional development and the caregivers' role in this process. The MRM and normal stress manipulations by infants will no doubt appeal to most early childhood clinicians. The discussion emphasized reparatory processes that infants employed in coping with daily routine stressful messiness of life, and mini coping episodes that contributed towards infant's resilience.

Tronic asked and answered an important question, "Why do humans so strongly seek states of emotional connectedness and intersubjectivity and why the failure to achieve connectedness does have such a damaging effect on the mental health of the infant?" (Page 402). He answered this question by outlining a hypothesis of the dyadic expansion. This hypothesis rested more on the process of interaction rather than the structure of the nodal event. It was suggested that the dyadic expansion model provided scaffolding required in the therapeutic process. I liked the suggestion that scaffolding has two

sides, the one that allowed patients to move toward more complexity and deeper meaning making, and the second side of the scaffolding process that led to the co-creation of a dyadic state of consciousness. Although this concept can be applied to any therapeutic situation, the mother-infant dyad's co creation of dyadic states of consciousness seemed particularly appealing.

This book will easily find a comfortable place on the shelves of psychotherapists, psychiatrists, psychologists, infant researchers and ethnographers. It is definitely a must for subspecialty trainees in Infant Mental Health.

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