

Gender Differences at Puberty

Chris Hayward editor. New York, NY: Cambridge University Press; 2003. 337p. US \$27.00

This book is one of an important academic series managed by an international steering committee whose membership includes representatives from the World Health Organization. The series, International Studies on Child and Adolescent Health, covers a broad range of health issues that transcends traditional borders of physical vs. mental, east vs. west, and child vs. adolescent. Rather, the series is noted for its ability to integrated complex fields in order to provide cutting-edge science to researchers, clinicians, and decision makers.

This recent edition offers a detailed and evidence-based review of the literature on puberty. The biological chapters offer a clear and comprehensive review of the hormonal issues at play in puberty, and provide a detailed review of the biological issues of relevance in early or late puberty. Complimented by tables and illustrations, these offer a solid review for interested child and adolescent psychiatrists.

The biological components of this edition are complimented by large sections on the psychology of puberty, and reviews of some of the psychopathology associated with the onset of puberty. The section on "Puberty and Psychopathology" limited itself to a superficial review of depression and schizophrenia. The lack of attention paid to substance use disorders, adjustment disorders, eating, and anxiety disorders was notable. Toronto-based psychiatrist Dr. Mary Seeman's contribution to gender differences in schizophrenia was, however, of value to our discipline, and complimented her own book on this theme nicely.

The title of this book suggested that the gender differences in puberty will be reviewed in detail beyond the biological factors involved. To a degree, the editor accomplished this goal. There was a large section on the experience of girls and puberty, but the section on boys and puberty paled in comparison (49 vs. 23 pages respectively). The literature on themes such as sexual identity, orientation, and behaviour was not reviewed in any detail, nor were newer developments in social trends of masculinity and femininity reviewed. One section done particularly well was on aggression and girls. The significant shifts in epidemiology and impairment were well reviewed. However, the section on educational outcomes and boys was poorly done, and there was little mention of the challenges young men are facing in today's school systems. Finally, the health challenges of gender-disordered, or gender-questioning youth was very limited in spite of the growing literature in this area. As such, the approach to gender in this book appeared to be generally limited to girls – of value, but not the promise of the title.

Thus, this book may be of little interest to general child and adolescent psychiatrists. However, for those working primarily with girls or young women, consultation-liaison populations, or in shared care with paediatricians, this book will offer a useful review of the biology of puberty, and a detailed review of the important issues affecting our female patients. Gender differences in psychiatric medicine are of growing relevance and importance, and promise to be an important component of the DSM-V and mental health research in the next decade. This text is an important part of the development of literature in this area.

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Helping the Noncompliant Child: Family-Based Treatment For Oppositional Behaviour (Second Edition)

Robert J. McMahon and Rex L. Forehand. New York, NY: The Guilford Press; 2003. 313p. US \$38

This revised and expanded edition focuses on a highly intensive behavioural parenting program that can be used with parents of children with Disruptive Behaviour Disorders. The book begins with an excellent chapter that investigates the root causes of oppositional behaviour. In addition, this chapter also outlines compliance and non-compliance in normally developing children. The second chapter of the book describes the development of parent training programs and compares the most commonly used behavioural parenting programs. The following chapters describe McMahon and Forehand's Helping the Noncompliant Child program and adaptations of the program that can be used for specific populations, such as children with developmental disabilities. The book ends with a review of current research in the area of behavioural parenting techniques and with a number of reproducible parent handouts.

Overall, this is an excellent book for any clinician who is working in an intensive treatment setting for children with behavioural difficulties. The first chapter, which reviews the development of behavioural difficulties, is a must for anyone who is working with children who present with oppositional behaviour. I plan to make it the first item my students read when they train with me. This chapter is an easy, enjoyable read and would be helpful for both clinicians and front-line staff in many settings. The second strength of the book is the reproducible parent handouts at the back of the book. They include instructions on Active Ignoring, Giving Clear Instructions and other important parenting techniques. The book also includes many excellent diagrams that show the progression and development of behavioural difficulties, and record sheets that can be filled out by parents when they are trying to implement a new technique. I also enjoyed the chapters describing McMahon and Forehand's parenting program, specifically the techniques used to quantify the parent's use of specific parent skills (e.g., attends, rewards), to determine areas needing further work and measures of improvement.

The most important weakness of this book, in my opinion, is the title. Many clinicians may read the title and assume that this book can guide their work in an office-based environment. In fact, the book describes an extremely intensive parenting program that involves training staff to watch parents and children through a one-way mirror or in the home environment. Optimal scheduling is described as twice a week for 75-90 minutes each time (5-14 sessions total). The authors note that weekly 50-minute sessions were less successful. Although the authors describe the program as flexible, it is clear when reading the book that this book is describing treatment techniques that would be best administered in a highly intensive setting. Many clinicians are not working in a clinic that provides the time or the appropriate setting for implementing the program, and would be better served by reading Forehand's book, Parenting the Strong Willed Child and some of the other excellent parenting books that are available.

Another weakness of the book is that on several occasions the authors discuss the use of spanking without discussing the multitude of research describing the negative effects of its use. On one occasion the authors note that they no longer recommend spanking but appear to gloss over their reasons for this change (noting that it has become "increasingly less acceptable"). On another occasion (p. 88) the authors note that they use "punishment of one sort or another (e.g., spanking, loss of privileges)". I believe that the authors had a real duty to fully outline the research on spanking, as this is an important subject that I discuss with all parents in my work.

Overall, I concluded that the parenting techniques provided in the book were excellent. However, I had some differences with the authors. On one occasion, they noted that they tell parents that active ignoring is "much easier to use than punishment". In my work, I have found that many parents of children with behaviour problems have anger management problems of their own. Therefore, parents often find active

ignoring to be an extremely difficult technique to learn and, in my opinion, benefit from a great deal of support about how tough it will be to implement.

Overall, this is an excellent book for any clinician who is able to implement an intensive, structured parent skills training program. However, for clinicians who work in public health clinics which do not allow for long sessions of observation and frequent appointments, they would be better off reading several of the other books aimed at clinicians. For my purposes, as a psychologist working in a Day Treatment setting, the book is a welcome addition to my bookcase and will be used often.

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Self-Regulation in Early Childhood: Nature and Nurture

Martha B. Bronson. New York, NY: The Guilford Press; 2000. 296p. US \$24.00 paperback.

This is a rather complex book about an equally complex but essential ingredient for our holistic understanding of child development.

The author, Martha Bronson EdD, is an Associate Professor of Developmental and Educational Psychology at Boston College, where she directs the early childhood program. Her academic background is primarily in Massachusetts, USA, as she received her bachelor's degree in psychology from Boston College and her master's and doctoral degrees from Harvard University.

The book is divided into two main parts and offers a broad canvas of academic theories and clinical examples, summarized in very detailed tables.

Part I, 'Theoretical and Research: Perspectives on Self-Regulation, reviewed many psychological theories relating to early infant development and inherent infant self-regulation. The most interesting of the 6 chapters for the practicing or academic child/ infant psychiatrist would be: Interrelation of motivation and self-regulation, Controlling emotion and behavior, Controlling cognitive processing and Self-regulation and control systems in the brain.

Bronson relied heavily on Social Learning Theorists such as Albert Bandura and Social Cognitive Theorists such as Lee Vygotsky and was rather cursory in her consideration of Piagetian, Ericksonian or psychoanalytic theories of development and their possible relationship to self-regulation. Motivation for self-regulation is particularly vulnerable to environmental influences. As Bronson pointed out "infants need experiences that support their interest in exploration and experimentation" and "toddlers need support for their burgeoning interest in independence and self-direction which allows them some degree of success in their efforts." As examples, she quoted Bandura's four cognitive processes in cognitive problem solving situations:

- 1 They have to learn to PAY ATTENTION to relevant environmental information and to their own cognitive processes.
2. They have to learn to represent and REMEMBER relevant information from the environment and from their own memory store.
3. Children must also acquire the ability to CARRY OUT specific cognitive learning and problem solving activities in particular cognitive tasks.
4. Children must be MOTIVATED to carry out the cognitive activity, believing that they can be successful in doing so.

Anyone who has treated children with severe ADHD or developmentally delayed children from abusive homes will see the challenges in Bandura's thesis.

Part II 'Research to Practice: Supporting Self-Regulation in Early Childhood' began with a beautifully articulated construct which captured the nature component of self-regulation. "The human brain is genetically designed to search for, discover, and impose order and meaning on experience. It spontaneously organizes itself in interaction with the environment and is innately rewarded by finding patterns, categories and predictable cause-effect sequences." Unfortunately, the review of the neurological and neuropsychiatric underpinnings of this statement was a bit one dimensional, only pursuing the role of the frontal lobes in self-regulation. However, Part II had some practical tables that gave specific suggestions for play therapy, language therapy and dyadic parent/child therapy, all of which have therapeutic significance for the management of self-regulation. The author included strategies that increase self-regulation in problem solving and learning 'self -instruction strategies,' by behavioral psychologists such as Meichenbaum.

Overall this is a valuable resource book for child/ infant psychiatrists involved with pre-school early intervention programs and early childhood programs. It is fashioned for a non-medical audience but has a wealth of information essential for clinical understanding and remediation of an increasingly recognized psychiatric population.

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