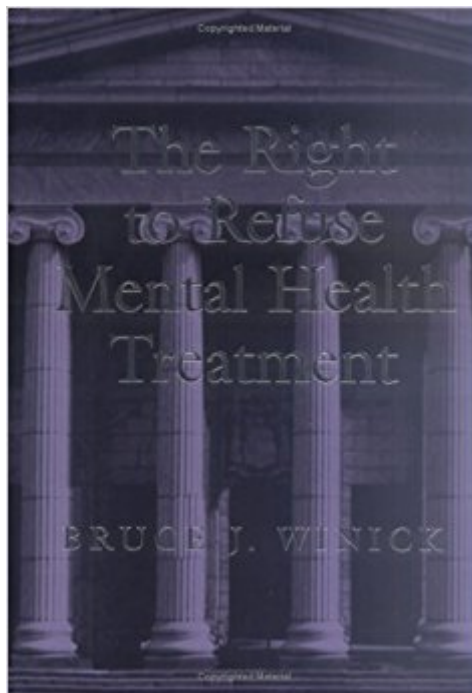


The book was found

The Right To Refuse Mental Health Treatment (Law And Public Policy: Psychology And The Social Sciences)



Synopsis

This text provides a comprehensive treatment of the legal issues surrounding the right to refuse mental health treatment. Professor Winick lays the groundwork by examining six different mental health treatment techniques. Presented according to the concept of "intrusiveness", from least intrusive to most intrusive, Winick describes the following interventions: psychotherapy; behaviour therapy; psychotropic medication; electroconvulsive therapy; electronic stimulation of the brain; and psychosurgery. To this intervention spectrum, Winick then offers a legal analysis of the issues surrounding the right to refuse mental health treatment. Drawing from various sources of law - and primarily from constitutional law - he explores his topic from an exacting and multifaceted legal perspective.

Book Information

Series: Law and Public Policy: Psychology and the Social Sciences

Hardcover: 427 pages

Publisher: American Psychological Association (APA); 1 edition (January 1997)

Language: English

ISBN-10: 1557983690

ISBN-13: 978-1557983695

Product Dimensions: 10.3 x 7.2 x 1.5 inches

Shipping Weight: 2.6 pounds

Average Customer Review: 5.0 out of 5 stars 2 customer reviews

Best Sellers Rank: #877,975 in Books (See Top 100 in Books) #61 in [Books > Law > Health & Medical Law > Mental Health](#) #212 in [Books > Law > Health & Medical Law > Medical Law & Legislation](#) #404 in [Books > Medical Books > Medicine > Internal Medicine > Pathology > Forensic Medicine](#)

Customer Reviews

The Yin Yang theory of the universe is derived from brains stoned on drugs, probably opium. western civilization preferred alcohol until recently. alcohol depletes the body of magnesium which is needed for proper immune function.

Although Bruce J. Winick does not include a preface in THE RIGHT TO REFUSE MENTAL HEALTH TREATMENT, it is obvious that the appropriate audience for this book includes judges, lawyers (both defense and plaintiff), psychiatrists, psychologists, clinical social workers, and

counselors. THE RIGHT TO REFUSE MENTAL HEALTH TREATMENT can be best described as a comprehensive assessment of the decision making process regarding involuntary clients, patients and, of course, prisoners. With 20 chapters divided into three sections, it offers a significant contribution both to law and to clinical mental health intervention. The sections include: * Mental Health Treatment Techniques (seven chapters) * Constitutional Limitations on Involuntary Mental Health and Correctional Treatment (eight chapters) * Evaluating and Implementing the Right to Refuse Treatment (four chapters) Winick is an excellent writer! Regardless of one's discipline (law or mental health), one will find this book a worthwhile asset in one's library. When Winick initially introduces a complex legal concept in one chapter and the same concept must be introduced later, he employs one of two effective strategies. He either writes a summary of his earlier work or he cites where the reader can find more details of the legal concept. This strategy is critically important and useful for this type of book. For example, many people will not read this monograph from cover to cover, but rather read sections that are needed to achieve a necessary goal for a client. Winick's artful style is particularly beneficial for this type of reader. In addition, the index is excellent! It includes both a "table of authority" (cases) and a subject index. These indexes will be extremely useful for readers seeking to resolve a problem related to involuntary treatment. Mental health practitioners will be most impressed with the four chapters in Part III. Here Winick systematically evaluates the right to refuse treatment, and he does an exceptional job of synthesizing the ramification of court ordered or coerced intervention. Simply stated, involuntary treatment does not work well. Winick's lack of using mental health jargon is refreshing and most importantly provides a rare insight. This was my favorite section of the book. It is directly applicable to the daily work of the clinician. In the end, the reader realizes that mental health research does not process a prototype of a successfully treated involuntary client. Based on Winick's review and synthesis of literature, such a prototype may not be possible and mental health may need to refocus the direction of involuntary treatment research. A sound conclusion from Winick's book is that we must begin to study the process by which a client/patient moves from being involuntary to voluntary. In other words, what can a mental health professional do to instill a desire to successfully complete treatment among court ordered clients? This question sounds reminiscent of Yochelson and Samenow's classic work on the criminal personality. Perhaps we need to revisit and extend Yochelson and Samenow's research.

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