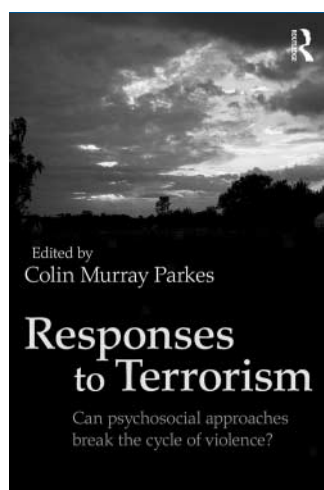


ultimate language origin directs us to the more evidently comparable terms. That, together with the GRID being a fairly lengthy and sophisticated procedure, would appear to limit its practical use. Nevertheless, its initial conclusions promise fascinating data for the future. What, I wonder, of societies where moral imperatives take the place of an affective psychology, such as the Chewong who famously have a lexicon of only seven 'emotions'? How concise, how anchored, are these seven? We now have a tool for looking at these questions from a more systematised point of view.

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**Responses to Terrorism:
Can Psychosocial
Approaches Break
the Cycle of Violence?**

Edited by Colin Murray Parkes.
Routledge. 2014.
£29.99 (pb). 280 pp.
ISBN: 9780415706247

Terrorism remains a scourge that haunts us all, all the more so in modern, otherwise less violent times with the advent of easy travel and globalisation – a spectre that can reach across the globe and indiscriminately strike from any quarter at any time. Understanding the mind and motivation of the terrorist is particularly prescient, especially if this can enable policy and strategies to forestall the descent into violence or shape interventions that help rehabilitate the offender. This book, using Bowlby's attachment theory as its framework, highlights the commonalities between individual attachment behaviour within families and those of the terrorist towards an ideology (often religious) and a terrorist organisation. In three sections, the book describes a psychology of terrorism and group identity, how responses to terror can feed a cycle of violence, and finally, how the principles of therapy employing attachment theory as its paradigm can be used to break the cycle of violence in schools, universities and in the media. Using the Troubles in Northern Ireland and the Rwandan genocide as exemplars, the book covers a broad canvas embracing history, psychology and sociology to support its analysis. Its validity is enhanced enormously by the contribution of politician and psychotherapist Lord John Alderdice, whose intimate involvement in the Northern Ireland peace process gave him a grandstand view of the dynamics at work, both in perpetuating the Troubles and those that ultimately led to a peaceful resolution.

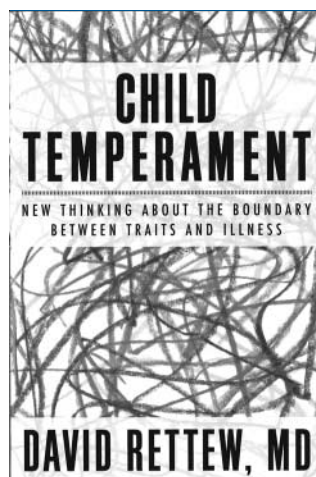
Any explanatory paradigm is useful in making sense of disparate variables. Unfortunately, this is a field rich in opinion but low in empirical science. Moreover, a 'one size fits all' explanation would be naive given a subject matter and individuals of such diversity. Few terrorists volunteer themselves as experimental subjects and second-guessing their motives is likely

to mislead. Definitions too can be problematic: one man's terrorist is another's freedom fighter; witness the millions of people who support suicide bombers. What little we know suggests that terrorism is best viewed in terms of political and group dynamics and processes rather than individual ones, and that fundamental psychological principles – such as our subconscious fear of death and our desire for meaning and personal significance – are important.

Terrorism is not going to go away, indeed with increasing economic instability and inequality across the world and a rapidly growing and more mobile world population it will probably get worse. Understanding the levers that turn ideas into lethal action has never been more important, and if this book triggers more empirical research and helps to integrate thinking across disciplines, it will have made a significant contribution.

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**Child Temperament:
New Thinking About
the Boundary between
Traits and Illness**

By David Rettew.
WW Norton. 2013.
£25.00 (hb). 288 pp.
ISBN: 9780393707304

A book on child temperament is appealing to me as a child psychiatrist, as I often have to consider whether children referred to me are displaying behaviours that are to do with their temperament (personality in older youth and young adults) or whether their constellation of behaviours reaches a threshold for a psychiatric illness/disorder. Frequently, clinicians may feel more confident in treating those that cross this oft-arbitrary division of temperament to psychiatric diagnosis as we then can apply the evidence-based treatment so beloved in our current empiricist, yet increasingly resource-constrained health service. In reading this book I have become more convinced that an approach of dichotomised temperament and psychiatric illness is overly simplistic. Considering child behaviours in a more holistic dimension including their temperament offers an opportunity for understanding the child better and affords the advantage of more individualised treatment approaches that take account of their temperament types.

Written by a child psychiatrist and associate professor of paediatrics and psychiatry, this book carefully considers the often neglected arena of child temperament and its relations to child psychopathology. It is clear and readable, with a good balance of scientific research, clinical case examples, anecdotes and practical applications. It is composed of two parts.

Part I discusses temperament and what is known about its links with psychiatric illness. First, there is a whistle-stop tour