Understanding the Behavioral Healthcare Crisis: The Promise of Integrated Care and Diagnostic Reform, edited by Nicholas A. Cummings and William T. O’Donohue, is a valuable read for any practitioner interested in thinking about the future of behavioral and mental health care. The editors outline the main issues pertaining to what they perceive as a crisis in their self-authored first chapter. There they establish one of the recurring themes of the volume, which is that unless psychologists change their practices in light of changes that are likely to occur in the health care system, the future of the profession is in doubt.

The ensuing chapters review some of these proposed changes. The second chapter in particular focuses on an issue with profound implications for the future of the profession. Cummings suggests that although psychologists widely accept the importance of
demonstrating the efficacy and effectiveness of psychological interventions (e.g., Carroll & Rounsaville, 2008), psychologists also must start thinking about their efficiency; psychologists still see people who are largely self-referred for individual psychotherapy for 45 minutes a week for an indeterminate period.

Cummings makes a strong case that the current system is incapable of meeting the mental health needs of the general population and that it is time to make the changes necessary to meet those needs. Given the recent attention awarded an article by Kazdin and Blase (2011) addressing the same issue, perhaps psychologists are beginning to accept that it is time for a new paradigm. This topic is well placed in the second chapter in that the issue is not on a level with the topics covered in the subsequent chapters but instead represents a higher order concept that informs much of what follows.

Each of the subsequent chapters addresses a topic that the editors presumably consider relevant to the reformation of psychology and its role in health care. In their editing, Cummings and O’Donohue have themselves demonstrated the benefits of efficiency, providing the reader with concise, dense chapters that give a full picture of the current state of affairs in diverse areas such as the revision of the *Diagnostic and Statistical Manual of Mental Disorders*, electronic health records, prescriptive authority, military health practices, and the future of training programs.

A common theme across many of the chapters in this volume is the role that psychologists have played as contributors to the current crisis as well as the role psychologists have the opportunity to play in solving it. For example, in a chapter authored by the editors with Janet L. Cummings, psychologists’ lack of economic literacy is identified as a contributing factor to our resistance to change and our failure to move to more cost-effective models of patient care. This factor contributes to false beliefs such as that insurance parity will secure the financial future of practicing psychologists.

Cummings et al. espouse using the medical cost offset of psychosocial services as a marketing tool. This is well-established territory for these authors (Cummings, O’Donohue, & Ferguson, 2002), but not as uncontroversial as the authors would imply. Although there is good evidence for the possibility of a medical cost offset resulting from the provision of psychosocial services (Chiles, Lambert, & Hatch, 2002), there are also notable failures to demonstrate this offset (e.g., Bickman, 1996; Polen, Freeborn, Lynch, Mulloloy, & Dickinson, 2006).

In the absence of extensive information about the circumstances under which the offset is demonstrable, using this argument as the primary justification for involvement in health care has the potential to backfire. It has also been argued that excessive reliance on the medical cost offset argument can actually undermine our efforts, since medical services are generally justified not on economic grounds but on contribution to quality of life (Sturm, 2001). Though we appreciate that position, given growing concerns about the cost of health care we believe that both arguments are essential to advocating for ourselves.
We have several relatively minor quibbles with this book. For one, it ends with a chapter on biofeedback. There is nothing particularly wrong with the chapter, but it is not the final statement we would have liked. Some closing comments would have been helpful.

In particular, Cummings and O’Donohue have outlined a monumental agenda for change. Psychologists need to revamp their training systems; achieve prescriptive authority but know when medications are excessive or unnecessary; become adept at using electronic health records; develop their economic literacy; offer preventative services; and incorporate new ways of working with special populations such as the aging, children and families, ethnic minorities, and women. It would have been helpful to learn some more about how this is all to be achieved or even about what Cummings and O’Donohue perceive as the major priorities among the long list of changes their chapter authors have advocated.

Another characteristic of this book that may annoy some readers is a tendency for personal vignettes to overwhelm the argument at times. The best example appears in the chapter on efficiency. Cummings describes an intervention by Frieda Fromm-Reichmann in which she spread feces with a psychotic patient but then got the patient to stop the behavior by offering a candy bar. Cummings concludes that the treatment of psychotic patients could be made more efficient by joining with them in their delusions.

Completely ignored in the telling is the literature on token economy, which is an evidence-based treatment for schizophrenia of the sort Cummings espouses (Dickerson, Tenhula, & Green-Paden, 2005). If the anecdote had focused on that literature rather than on personal experience, the author might even have noted that the intervention probably could have been improved by using the reward to differentially reinforce other behavior incompatible with feces smearing rather than reinforcing the absence of the behavior (Poling & Ryan, 1982).

We hope such minor issues will not dissuade the reader. This book is timely, informative, and important. It is one of the first to address in detail the implications of the Patient Protection and Affordable Care Act of 2010 for the future of psychology as a health care profession. For that reason alone, Cumming and O’Donohue’s book is a valuable addition to the literature and should be required reading for anyone concerned about that future.

References


