BOOK REVIEWS

HOW TO SAVE THE BODY by Nicholas Albery. Revelaction Press 1983 £4.95

What a breathless book this is! Full of enthusiasm and discovery! With hot-off-the-press zing! Even the before-and-after photos had to be taken half way through the therapy instead of at the end, because there was no time to finish before the book had to come out!

The subtitle of this book is "Body-mind therapies, a personal guide, critique and directory", and the contents list supports this, as does the blurb on the back, which says - "This book deals with the theory and practice of the therapies from the critical perspective of the author's own experience of them as a client. It distinguishes between a therapy's grandiose manifesto and what is actually offered in practice. Over thirty therapies are covered ... " and then follows a list of them.

What we actually get, however, is a highly subjective and personal account of the author's travels around the therapy circuit at very high speed. The author says he is 34, so that means only one year for each therapy, even if he started at birth. In fact, he only appears to have started on this track in 1978 (though there were earlier therapylike experiences with psychedelics in the late sixties): so that means on average six therapies per year. This frantic pace hardly enables anyone to do real justice to what any therapy has to offer, it seems to me.

The suspicion arises that this is all some form of avoidance. The main reason why people leave one therapy and go on to another can either be that it is not doing enough, or that it is doing too much.

And the main form which avoidance takes is claiming the former while actually being subject to the latter. There are a number of indications which point in the same direction, due to the extreme honesty of the narrative:

I know myself how much time I have wasted in therapy, being a polite and docile client, but distrustful and derogatory underneath. (p.12)

Finally we are told to lie down and start talking to and shouting at our parents. I resisted this and sang instead. (Wencke:) "Shout at your father, Nicholas". (Nicholas:) "I don't want to. At the moment I don't feel like hating them even as a game". (p.27)

I attribute my resistance to 'primaling' to several main factors: to my past 'hippie' experiences, which led me to think that just being passively receptive was enough, that the drug would bring the experiencing without any conscious effort on my part; and which also led me to associate regression not with negative screaming and pain but with positive and spiritual experience; I also felt a severe moral block when it came to expressing negative or murderous impulses towards the parents, which some therapies encourage; I suffered too from a performance anxiety that only heightened the more I watched or assisted others having their primal experiences without having one myself, like a virgin at an orgy. (pp. 51-52)

So what comes out is that in his journeyings through the thirty-odd therapies the author has taken good care never to get into the Oedipal stuff, never to get into his Kleinian stuff, never to get into his birth stuff - never to get into any of the places where the deepest work of therapy is done. This is particularly remarkable, and ironic, because this is where the body therapies are strongest, tending very often to take people into deep regressive material rather fast.

This is, then, both a subjective and a curiously limited piece of work. But it would not be fair to suggest that there is no objectivity at all in this book. In spite of his primal block, there is a fair and positive account of primal therapy with many echoes in the psychedelic therapy section and the SD therapy section. He covers the theory of primal therapy and its practice and the experience of others, adding only sincere regrets that he hasn't primalled himself, not attributing this to any failure in the therapy. And in general there is a lot of information in this book, with more than 150 extracts from 50 other books by people working in these fields. It should be noted, however, that Focussing does not hold itself out as a therapy, but rather as a self-help method which helps therapy in important ways.

But if we ask the question - What is this book really about? - the answer seems to be a rather manic search for tenderness and contact. The one time the author gets near to opening his heart he congratulates himself and feels that this is a step forward - but even then it has to be pleasant. The idea of opening his heart to be vulnerable to someone else, even if it hurts; the idea of suffering and sadness and fear being just as important to a human being as joy and gladness; the idea that I can let someone else into my heart, that I can be together with another person heart to heart, that I may slip into someone else's heart - all these ideas still seem pretty remote.

There is, of course, something very male about all this. One can't help wondering how many other men are going round the therapy scene doing this kind of thing, and systematically avoiding the one thing they really need to do. The book is full of exciting experiences in the AA Commune, in the Rajneesh Tantric group, in the rebirthing bath, by the sea with LSD, in the nude beach on Formentera, and so on, but the real therapies sound rather boring by comparison, and they are often dismissed in a few lines.

The one positive result that does seem to have come out of all this search is that the author is now a father, and has resolved, with the active agreement of the mother (it seems), to apply the lessons to this child's upbringing. There is a moving account of this baby's birth in the book, and if this sort of approach continues, at least one new person may be saved from the putdowns of the past, and enabled to grow with independence, confidence and a heart. The other thing which is genuinely impressive is the honesty of the author, which shines through again and again in this narrative. I can't help liking this guy.

John Rowan

How to save the body is obtainable from Revelaction Press (add £1.25 for postage and packing), 48 Abingdon Villas, London W8.

(It should be pointed out that John Rowan is Nicholas Albery's supervisor on the three-year course in psychotherapy at the Institute of Psychotherapy and Social Studies, and this relationship may colour the review in certain ways.)

THE ASTROLOGY OF CHOICE: A Counselling Approach by Roy Alexander. Samuel Weiser Inc. pp 175

Astrological counselling has been a sorely neglected area in the past. Astrologers spend years learning their craft and polishing their techniques but all too often slip into the role of the 'Seer' when confronted by clients. Roy Alexander has attempted to change all that. In part one, which is called "Rethinking the role of astrology" he urges astrologers to incorporate counselling techniques which allow the client to experience their charts on a deeper level instead of just talking about it.

He goes on to introduce the reader to the idea of the Real Self, drawing mainly from Jung and Fritz Perls but then attacks both therapy and meditation, saying "What is generally lacking in these methods - therapy and meditation - is a consistent grasp of the truth that we create our lives, that we are each the centre of our universe, and that everything that is in our lives is there because at some level we intended it to be there".

He does favour the approaches of Transactional Analysis and Werner Erhard and gives them a chapter each. There are also chapters on structuring chart interpretation, prediction and the basic principles of counselling. However, for me, the most valuable part of this section was a chapter on client interviews containing transcripts from three sessions. These make fascinating reading and merit a careful study by anyone wishing to work in this field.

One of the most important messages of this book seems to be that you don't have to dazzle your clients with interpretive skills. I think both students and professional astrologers will find this book stirs them into reviewing the way they work with their clients.

Suzanne Michaud

THE HOLISTIC APPROACH TO CANCER by Ian C.B. Pearce, 1983, Findlay (Alexandria) £1.50 95 pp

"You have been told that you have cancer. There is a great deal you can do to help yourself. You have a good chance of reversing your cancer...you have to attack it on two levels... first know that your own attitude is crucial... if you don't expect to die, you take the first step in your return to health. You are an important person, a worthwhile person... your own relaxed and peaceful mind is the most important thing in your life ... those around you can help or hinder you ... enlist their aid ... Cancer is a dis-ease of the whole person - spirit, mind and emotions - as well as body ... probably most of us have cancer cells in our bodies from time to time ... but our bodies are able to contain and destroy these cells ... in cancer patients, the body defence system has broken down ... so here is your task: an attack on two levels ... get started on right eating ... learn about deep relaxation/meditation/visualisation ..."

Dr. Pearce is a well-qualified orthodox doctor whose daughter died of leukaemia and who has since devoted his life to understanding the development of cancer and its healing. For, as the case-histories in his booklet suggest, many cancers appear to be cured and certainly alleviated by a holistic approach which has recently become popularised at centres pioneered by the one in Bristol which was the subject of a TV documentary in 1983. Although Dr. Pearce is not against specific limited surgery when necessary, he himself specialises in personal cancer counselling and dietetics.

He helps people to uncover the emotional blocks which he believes dam up healthy psychic and physical energies in destructive ways, which then affect cell behaviour. The worst of these blocks he considers to stem from childhood. He teaches people classic relaxation and meditation, together with a visualization of the healthy cells in their bodies overcoming the malignant ones.

He also has deep knowledge of the chemical composition of foods, which, it should be emphasized, matches equivalent professional command of the chemistry of cancer itself, and the drugs often used to treat it. Whereas his view of these points to the well-established fact that cytotoxic drugs kill both the healthy as well as the malignant cells, the detailed information he gives about the health-promoting constituents of fresh foods, mineral salts and vitamin supplements will surprise no vegetarians. He believes that cancer "is not a disease in its own right, but an indicator of underlying biological inadequacies" which can be prevented by literally living a good life - forgiving others and oneself, being moderate in all things and enjoying a natural diet.

He appreciates that the genetic constitution of some people, or the fact that childhood trauma, early smoking, bereavement, and many other shocks of experience may make the task of fighting cancer hard and sometimes impossible. However he is certain that relaxation, meditation and visualisation, plus specially planned diets, can promote the maximum sense of well-being in the circumstances. Over one-third of the book is filled with interesting technical descriptions of the chemistry of cancer cells, curative foods and vitamins, including recipes. These are entirely based on his general thesis that treatment must seek to stimulate and nurture the body's own immune system, and not harm it. Many patients who still wish to have their cancer treated by surgery, radiotherapy or chemotherapy, may also be glad to improve their general health in the way that Dr. Pearce recommends.

As he admits, we know very little about the exact ways in which the disease takes over the body, and there are very many research workers with the same integrity as Dr. Pearce but with different viewpoints, who are striving to uncover further facts about this. The tragedy is that efforts become polarised with professional quarrelling, instead of themselves being brought together in a holistic way. Readers interested in learning further details of Dr. Pearce's work can order the book and other literature from the Association for New Approaches to Cancer (ANAC) 28 Blythe Road, London SW14 OPE (01-603 7751)

Yvonne Craig

FACES IN THE WATER by Janet Frame. The Women's Press, 1980

A novel about one woman's experience as a mental patient in New Zealand, the book traces a period of her life spent in two institutions, with little contact with the outside world. Even her mother -

like the rest of the family she had been shocked and frightened that one of her daughters had "landed up" in Cliffhaven.

The book describes in highly imaginative, dreamlike, poetic detail her impressions of life in the hospital, the author using skilful literary means as if in love with words. In some ways, this seemed to me a disadvantage, because it made it difficult to sense what her true feelings were - the words seemed to cloud over her spontaneous feelings with too much literary control, giving an impression of longwindedness. It is hard to be clear about this, because the unreal, almost dreamlike sensation given by this method does convey the confusion between fantasy and reality, but ultimately I felt I had been given little to get my teeth into.

I did like the contrasts made between the rich and exotic, perhaps even idealised, descriptions of the garden and the surroundings with the barren and regimented life within the hospital. For example, take -

The quick spring brought swelling tides of softness and warmth in the dry, cold air and the smell of blossoms, the heavy honeysmell of the bush flowers, the fiery blossoms of the rata tree and the fuchsia with its purple flowers like intimate folds of bruised flesh.

which strongly contrasts with -

through Ward One with its smell of wet cots and scabbed skin and the personal smell, the passport or free sample that death provides for old women, along the visitors' corridor with its prison atmosphere, barred fire, brown polished linoleum and long leather seats with upright backs, through to the unfamiliar part of the hospital, to the dreariness and barrenness that are peculiar to the men's wards.

You can feel her helplessness, almost giving up on life, yet holding on to a thin thread of a dream, that maybe she would resume a life outside the hospital. You can feel her panic at the approach of the electric shocks.

This is a very imaginative and sensitively written book, but it leaves me in the end with the feeling of having experienced a strongly imaged dream; the images soon fade away.

Peri Rowan

METHODS IN SOCIAL AND EDUCATIONAL CARING, SKILLS IN SOCIAL AND EDUCATIONAL CARING, edited by John McGregor McMaster, Gower, 1982. Each book: £5.95 Paperback - £12.50 Hardback

As a (mature) student social worker with a special interest in education, I was attracted to this pair of books and read them whilst on a recent residential placement in an institution for children being received into care where education was part of the agenda. The books are a collection of contributions from various professionals edited by John McMaster, a lecturer in Behavioural Science at the University of Newcastle-upon-Tyne and I have to admit, as a believer in humanistic psychology, to a certain amount of initial resistance to the ideas presented because of my bias against behaviourism.

However, McMaster quickly attempts to dispel such readers' doubts (Methods in Social and Educational Caring pp.3/4) and I went on to find a lot of the information contained between the covers of these

two volumes to be very valuable. In the book concerned with Methods - these are first introduced in a chapter which is an overview of the book. The following chapters relate to assessment in concept and practice; behaviour modification including examples in action; intermediate treatment; therapeutic communities and groupwork. The book on skills begins with an introduction/overview and is mainly concerned with enumerating the skills and qualities considered to be desirable in those involved in the caring professions and appropriate training and supervision techniques – much of these based on work McMaster has been involved in at the University of Newcastle.

The methods book I found useful as a review of the various forms of therapy which were included although it is highly selective and not an exhaustive study of all available methods of social and educational caring.

The book on skills left me with more mixed feelings - envy and anger that my training (to date) has not included such exciting-sounding concepts as, for example, micro-teaching - worry that if it did, would I have the time as a single-parent living away from my training establishment, to complete it. That seems to me to be one of the main criticisms of its Behaviourists' approach - that to home in on "undesirable" behaviour then work out ways of substituting more "desirable" behaviour takes time, expertise and co-operation from all parties involved. The expertise is presumably to be gained from the skills' training but considerations of time and co-operation are less easily dealt with I suspect though McMaster offers us examples of behaviour modification in action which can be "achieved quickly and effectively within a very short time span" (Methods in Educational and Social Caring p.4). But he admits that these are "deliberately simple" examples which, I feel, may or may not translate into reallife situations. Other criticism in this area, particularly from a humanistic perspective, may well hinge upon who is defining desirable/undesirable behaviour but for those whose careers are spent working within the State system particularly, such debate may perhaps be academic.

In reading these books I think it is necessary to be aware of the gap which inevitably exists between theory and practice but which, paradoxically, these books may help to bridge - especially if they serve to enhance the training of those involved in social and educational caring. I feel that it does none of us any harm to examine what skills and qualities we bring to caring and these books help us to question and analyze those which many of us use intuitively.

Jill Robinson

EXPERIENTIAL PSYCHOTHERAPY: Basic practices by Alvin R. Mahrer. Brunner/Mazel 1983 US dollars 27.50

This is a practical book for the psychotherapist on how to do a particular kind of therapy. This therapy is described accurately and precisely, with full details of everything from the initial contact to the final breakthrough. It might be possible for the experienced therapist or counsellor to pick up the method from the book alone. The author is a psychotherapist and trainer of long experience, and many case histories and excerpts from therapy sessions are given to make the whole thing very concrete.

There is an admirably clear statement of the aims of this form of therapy, what the author calls the in-therapy outcomes. There are four of them:

- 1. There is an increase in the depth and breadth of what this person has available to experience ...
- 2. There is an increase in the experiencing of "integrative" relationships between and among this person's potentials . . .
- 3. There is a qualitative disengagement from the ... personhood in which the patient had existed. Instead, the nuclear personality ... is the good form of the ... deeper potential. This is a substantive, nuclear personality change.
- 4. There is a consideration of actual changes in the extra-therapeutic person living and being in the extra-therapeutic world. (35-39)

These are all things which can actually be observed in the therapy session, and many examples are given.

This form of therapy proceeds in a very particular way. Both therapist and patient (Mahrer uses this word throughout, but obviously regards the person as an agent rather than a patient, so we have to allow him that) recline with eyes closed most of the time, and the patient is asked to focus on some object of interest or concern (such as a person, event, situation or whatever) which the therapist can also focus on. The whole therapy proceeds in this way, such that there is a common object shared between therapist and patient. By doing this, Mahrer says, the therapist is able to enter completely into the phenomenal world of the patient, with no remainder. Much of the book is devoted to a polemic in which all other forms of therapy are dismissed as inferior. They all fail, so Mahrer argues, to get inside the world of the patient, because they all place some emphasis on the role relationship between therapist and patient, seeing the one as separate from, and external to, the other. There are three role relationships which he mentions specifically: one is the therapist as parent and the patient as child (much of psychoanalysis); a second is the therapist as saint and the patient as supplicant (much of the Rogerian approach); and the third involves the therapist as scientistgod and the patient as the one who seeks transformation (much of behaviour therapy, communication therapy and NLP). He is quite brutal in his condemnation of these and other patterns of external role relationships in the therapy situation. My own view would be that much of what he says comes under the heading of countertransference, and is well known and watched out for by good therapists of all persuasions. But Mahrer has no discussion of counter-transference. He simply says that as long as the therapist and thepatient are spending time relating to each other, they are not relating to the objects in the patient's phenomenal world, and so no change is likely to take place in these objects; yet that is the whole point of the therapy. So Mahrer argues, at great length and enormously repetitively (particularly in Chapter 8) that in his form of therapy there is no relationship between therapist and patient.

Experiential therapy rests on the assumption that altered states are available wherein the therapist and patient can integrate with one another. The personhood and identity of one can assimilate or fuse with that of the other. The therapist can become a part of the personality of the patient. (138) When the therapist shares the patient's phenomenal world, the therapist will have experiencings which are also occurring in the patient. The therapist who does not share the patient's phenomenal world will not have these experiencings. (277)

This sort of thing is said fourteen or fifteen times, and numerous examples are given of how it actually works out in the therapy session.

I found this a very clear book but a very narrow one. It is a purist book, from a therapist's therapist. Anyone who really went along with it wholeheartedly would be unable to use any other technique. I have tried out the method, and it works very well. But I am not persuaded that this is the only way for me to work. Mahrer says himself that something like half of the patients who come to him cannot use this method - it does not suit everyone. So he just turns away any clients who cannot close their eyes and focus in just the way he recommends. To me this is reminiscent of the worst aspects of psychoanalysis, and the whole long discussion on who is analyzable.

Nor is the polemic very convincing to me. Far from it being the case that all other therapies take up an external frame of reference, I think it would be far more true to say that **most** analytic or humanistic therapists try to take up the client's internal frame of reference, in one way or another. For example, Brammer & Shostrom, in their basic text on humanistic counselling and therapy, say this:

When counsellors assume the internal frame of reference, however, they try to make their perceptual framework match that of the client, as in stage (2) of Figure 12. Stage (4) illustrates what happens when counsellors try to get into the client's lane. At least temporarily they attempt to think and feel the way the client does... This attempt at understanding the client by means of assuming the internal frame of reference pays heavy dividends in a better relationship and more appropriate counsellor responses to the client's thinking and feeling. (pp.161-162)

What I think is true, however, is that the Mahrer method gets much deeper inside the client's phenomenal world than do most other approaches. This is for two reasons: firstly, Mahrer goes for a complete and total sharing of the client's world, such that the client takes over the therapist's mind completely (this is quite close to John Watkins' concept of resonance); and secondly because he offers a very useful map of the inner world, as those will know who have come across his book **Experiencing.** (See S&S Vol IX No.1) This map is very useful in sensitizing therapists to what may be coming up, and allowing them to be ready for a number of alternative options.

For anyone prepared to think deeply about what they are doing as therapists, this is an excellent book - deep and stimulating. If at times it is a little shrill, this is excusable in a pioneer. All innovators tend to be one-sided, and although Mahrer is squarely within the humanistic camp and makes due reference to people like Havens and Gendlin, I think he definitely is an innovator. I shall use this book a lot.

John Rowan