BOOK REVIEWS

The Reality Game: A guide to Humanistic counselling and therapy by John Rowan. Routledge & Kegan Paul 1983

John Rowan says that his book is intended for counsellors, students of counselling and trainers. It has much to inform and stimulate a person in any of these groups. For anyone unfamiliar with humanistic psychology, there is a useful, brief review of a number of therapeutic approaches and an exposition of the history of the humanistic movement. There is a more detailed discussion of the relationships and distinctions between psychotherapy, personal growth and the transpersonal or spiritual with an attempt to show some of the goals and limitations of counselling or therapy. Ken Wilber's work is used to illustrate both a theory of the nature of the person and as an indication of the boundaries between therapy and spiritual development. Wilber's 'maps' of the person and the process of change are useful, although there is a risk that a map may be taken as objective truth rather than as an imperfect illustration. Not everyone would draw the same map, or use the same projection. Human beings are untidy creatures, often progressing by fits and starts and proceeding by tortuous routes where the therapist may need to get rid of neat, linear models of development if he, or she, is to follow the client and enter fully into their world. One implication of this section of the book would seem to be a broad acceptance of the view that the limits of therapy lie with the therapist.

It is a strength of this book to give space to chapters on "The Initial Interview" and "The Opening Session". The reader is given an insight into the author's world as a practising therapist as well as brought face to face with important practical and theoretical issues. In the introduction, John Rowan says that the book is "very much on the level of skills, of what we actually do" and the opening chapters are succeeded by the longest one on "ways and means", setting out some of the approaches actually used in therapy. It begins by focusing on the body and this focus of attention is probably one that many therapists would start from who are happy to wear a humanistic label.

The book gives a welcome mention of research and the importance of it as well as a consideration of the benefits of continuing supervision and some of the skills appropriate to the supervisor's role. The two appendices give, respectively, a list of criteria for doing good therapy and one of courses and

centres incorporating humanistic approaches. The latter is likely to date quickly and there is no indication that it may be a partial list; and since it is drawn from AHP sources it might have greater value as a separate broadsheet.

The main value of this book is undoubtedly its wide coverage and emphasis on practical matters. It is, indeed, a handbook. There is no space for detailed exposition of different approaches, Gestalt, Bioenergetics and so on. For example, a person-centred therapist finds it curious to see no reference to person-centred or client-centred therapy and would not necessarily hold with what is briefly described as "Rogerian". It places a great deal of valuable material within a short space and a reasonable price and shows throughout the author's deep concern for the growth of clients and counsellors in their work together.

William Hallidie Smith

The Betrayal of Children by Alice Miller.

Four-year-old A melia watches her father reading Playboy Magazine and some pornographic material. He points out female and male genitalia and tells her that one day he will show her what men do to women with their "swollen sticks". Some time later A melia inadvertently sees daddy and mommy playing with his "stick". On another occasion, she sees daddy "beating mommy with his "stick" (i.e. having intercourse). In therapy, the anger, sadness, terror, confusion, and longing of A melia is played out with dolls, toys, and drawings.

Sexual abuse can take many forms. Alice Miller, a renowed expert in sexual abuse, points out the subtle nature of sexual abuse, and says"...the sexual abuse of the child...includes both flagrant and subtle forms of treatment". Subtle abuse includes activities like "talking dirty" to children, masturbating in front of children, or making sexual suggestions. Many experts would consider that A melia's parents were subtly abusive because direct physical contact did not occur. One of a parent's main functions is to protect children from harmful or dangerous situations. In fact, the failure to protect children from such situations is considered legally abusive in many states. In this sense, subtle abuse can stem from the failure of the parents or adults to protect children from sexual material which may be disturbing to them. Alice Miller, a renowned expert in sexual abuse, points out the subtle nature of sexual abuse, and says"... the sexual abuse of the child...includes both flagrant and subtle forms of treatment".

Miller's research is summarized in her recent book, Thou Shalt Not Be Aware: Society's Betrayal of the Child (Farrar, Straus, and Giroux). She found that psychoneuroses, sexual physical abusiveness, and sexual abusiveness are often linked to childhood sexual abuse. However, she is careful to point out that sexual abuse is a major but not the solitary cause of the above disorders. The reports of victims and mental health professionals see m to support her claims (e.g. see Florence Rush's The Best Kept Secret). Miller further elucidates the dynamics and impacts of sexual abuse, but makes little of abuse statistics (perhaps because they've been published elsewhere). Many people are unaware that approximately 1/4 girls and 1/6 boys encounter some form of sexual abuse by the age of 18, and that 80% of this molestation is done by persons known to and (originally) trusted by the A recent Newsweek article referred to sexual abuse as a major problem of epidemic proportions. The most frequent abusers are fathers, stepfathers, siblings, relatives and acquaintances. The types of reported abuses are most often direct (rather than subtle), and involve physical contacts of a sexual nature with children.

Society has betrayed children, says Miller, by treating sexual abuse as a forbidden and taboo subject. This results in parents (and others) either denying or refusing to believe the sexual reports of children. For example, one mother reacted with abhorrence at her child's tearful story, and sent her daughter off to live with relatives (with an admonition to remain silent) rather than confront the possibility of sexual abuse. However, there is an increasing openness to discussing and investigation sexual abuse. As Miller says, "This is a new situation, unprecedented in history, not because the sexual abuse of children is new, but because it is new for the phenomena to be discussed ... " More alarming yet is her observation that sexual abuse is a verboten subject in psychoanalysis as well. Thou Shalt Not Be A ware has, according to Miller, become a major commandment of the psychoanalytic profession. Rather than being aware of sexual molestation as a valid and traumatic problem, psychoanalytic theory treats molestation reports as fantasized expressions of neurotic conflicts. She cites the case of an analyst who would not allow his patient to talk about her rape, nor to experience the traumatic feelings about it. Rather, the analyst interpreted the rape as "an expression of her guilt feelings at the fulfilment of her libidinous desires . . . " The implications are that she had enjoyed a sexual encounter which she felt guilty about, and labeled it as rape to protect herself from guilt. Thus the rape became an imagined and defensive expression of guilt, rather than a factual and repressed event requiring therapeutic treatment. By interpreting seduction within the context of Freudian theory, and by relegating seduction reports to the level of imagination or fantasy, psychoanalytic theory "...diverts an analyst's attention from the patient's trauma and makes it difficult for the analyst to accompany his patient on the very painful but necessary path (of treatment) . . . " According to Miller, healing can only begin when the repressed reactions to trauma (such as anger, pain, grief, guilt, rage, etc.) can be articulated in therapy. Instead, the traumatization is often discounted or denied by therapists.

Miller attributes this analytic faux pas to Freud himself. Freud noted a high incidence of sexual abuse among his early patients. He believed the accounts of abuse to be valid, but later changed his view, contending that patients were only fantasizing these experiences. He saw the fantasizing as an expression of infantile sexuality (a sexual desire for the opposite-sexed parent, with subsequent repression of the unacceptable desires and projection of these onto the opposite-sexed parent). In this theory, a child could be sexually abused, and it would be seen as a fantasized expression of the child's sexual desire. Thus, any sexual encounter could be seen as delusional rather than valid, and as an expression of the repressed and denied sexual desires of the child or infant. Freud's reasons for changing his viewpoint were multiple, but may have stemmed from the lack of acceptance his findings elicited among his colleagues, the lack of public acceptance, and his own reluctance to believe that fathers could abuse their children (there may have been denied abuse in Freud's own natural family).

If we assume that sexual abuse (rather than infantile sexuality) occurs frequently, Miller contends that we can more easily see some of the potential harms of Freud's incorrect and altered view. Interpreting abuse as infantile sexuality reinforces the repressive efforts of the psyche (thereby fostering neuroses and psychoses), and undermines the confidence of the patient in his own self-experiences. In addition, it obscures the real etiology of abuse-related psychopathology, and confuses the issue as to who is the patient and who is the victim. The real victim (the abused child) is seen as the patient who has repressed sexual desires for the parent (or abuser). The abuser (who needs treat ment and is the real patient) is treated as the victim of the abused child's projected desires. A recent case (reported to this reviewer) involved a daughter who was telling strange stories, all with a sexual theme. One common story was that, "...daddy danced with me, then he scared me by making faces and breathing funny... then he grabbed me and then made me all wet with his hose". The mother took her daughter to a psychiatrist, and reported the stories. The analyst advised the mother that children often have sexual fantasies, and that they are normal expressions of infant or child sexuality. He assured her that she could trust her husband, and that no such incidents were likely to have occurred. In this situation, the child became the patient and "needed assistance with unbalanced libidinal forces". The person who needed help (the father) did not receive it. The analyst, in seeing the material as imagined rather than factual, colludes in the repressive effort of the child's psyche, and inadvertently supports the psychopathological patterns of the abuser (who receives neither treatment nor confrontation).

In her many years of conducting psychoanalysis, Miller was able to identify a common dynamic which underlies sexual abuse. She found that narcissism (meeting one's own needs at the expense of children) was a characteristic of most abusers. As Miller says, "One of the laws governing a child's existence is determined by what parents need from their child, and sexuality is no exception here". In addition, she found that "... the child will make every attempt to satisfy the adult's desires or at least not to frustrate them to any great extent, even producing pseudosexual feelings, because he needs tenderness at any cost and cannot run the risk of rejection". She contends that it is quite normal for sexual desire to be aroused in adults by children, because children tend to be cuddly, beautiful, affectionate, and because they admire the adult so much. However, normal adults who have satisfying sexual relationships with peers or spouses will "... have no need ... to act upon the desires aroused by the child or will strive to ward them off".

In addition to rich clinical material, Miller uses literature, fairy tales, myths, and dreams to substantiate the repressive efforts of society and psychoanalysis with regards to sexual abuse. Overall, her book seems to be an indictment mainly of classical psychoanalysis, or any therapeutic approach that incorporates interpretations or attitudes which dehumanize or negate patient reports of sexual molestation. The hope seems to be that, by avoiding such pedagogy, therapists can avoid interpretations, learn from their patients, and thereby clarify the serious impacts that childhood trauma, and sexual abuse in particular, have on adult psychopathology. This approach, according to Miller, will allow the abuser to get treatment rather than protection, and the abused child to be liberated from the bondage of repressed and traumatic feelings.

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FREUD: The assault on truth by J.M. Masson. Faber & Faber 1984. pp.308 £9.95 hb.

This enthralling book is like a detective story, with its accumulation of clues and its surprising denouement. It is all about Freud's suppression of the seduction theory.

The seduction theory says that neurosis is caused by early traumas, which lead to repression and the other mechanisms of defence. Of all the traumas which are likely to lead to neurosis, sexual ones are the worst, because they carry with them shame and guilt which are reinforced from cultural sources all through life. And of all the sexual traumas, those which have to do with actual physical assaults (usually by the father on the daughter) are the very hardest to deal with and the most likely to lead to neurosis in later life. They are not only forbidden, they are illegal, and if discovered would break up the family, in all sober likelihood.

Freud in 1896 wrote a paper saying all this, but the reactions from his colleagues frightened him so much that he withdrew on the matter and kept quiet about it for a while. He could not abandon it, but he could not push it either - an awkward situation. How to get out of it?

The answer came in an extraordinary way, which does not redound to Freud's credit. A patient of his, Emma Eckstein, had some sexual problems, and Freud asked his best friend Fliess to operate on her nose. Fliess has a theory that the nose and the genitals were closely connected, and that operations on the nose could cure genital problems. Fliess duly operated, and carelessly left half a metre of surgical dressing in the nose after the operation. This led to swelling and haemorrhage, which became repeated and endangered Emma's life. But instead of putting the blame where it belonged, with Fliess, Freud began to convince himself more and more that Emma's haemorrhages were psychosomatic, and were caused by longing for him. Freud had every motivation to spare Fliess' feelings and to exonerate him from blame, because Freud was in love with Fliess at the time.

Now if Emma's physical reaction was psychologically caused, and the actual assault could be explained away, the analogy to the rape of little girls by their fathers could be carried through very neatly. Whatever the father did or did not do, we could restrict our interest to the daughter, and what she made of it. This gets Freud off the awkward hook of appearing to blame the father, and it is of course this feature which upset his colleagues so much.

So by 1905 Freud was able to formally retract his seduction theory, and put forward instead the Oedipus Complex as the answer to everything. It is now

the child's fantasies that become the centre of attention, and the actual behaviour of the father becomes of little account.

Unfortunately, the theory would not die so easily. In 1932 Sandor Ferenczi wrote a paper - the last one he ever published - which again draws attention to the importance of early sexual trauma, particularly in relation to the transference. The analyst makes the patient confused in just the same way that the father made the child confused. The patient attributes goodness and rightness to the analyst just as the child attributed these things to the father, and identifies with the aggressor. So unless the analyst points all this out, and makes the patient aware of it, the issue will never emerge.

This is all exciting stuff, and I found the book quite compulsive reading. There is much more in it than I have mentioned, of course. It is perhaps particularly timely at the moment, when there is such a public interest in sexual assaults on children, and it is coming to light that such assaults are extremely common.

Brian Rainbow

HOW TO FEEL REBORN? by Nicholas Albery. Regeneration Press, 32 Addison Avenue, London W11. pp.252 £6.95 (p+p £1.63 extra).

Unlike the author's previous book, this one is a serious and academically respectable examination of just one form of personal development work - Leonard Orr's Rebirthing. It is very hard to find objective and patient analyses of any form of personal growth work, and to find this sober account of one of the wilder forms of work is a gift indeed.

Parts of this book have already appeared in the form of articles in **Self and Society**, including one of the most solid chapters, on the whole history of primal theories and techniques. This makes it clear that Rebirthing has little or no connection with other therapies which might seem superficially similar. It is much more of an attempt at a spiritual discipline based on breathing and affirmations. Whether it is a therapy at all is a matter of some dispute.

One of the most interesting features of this book is that after each chapter, the author prints extracts from letters written by the authors referred to in the chapter itself. And so we have letters from Janov, Orr, Eve Jones, Grof, Paul Foster, Boadella, Dr. John Wilkinson, Phil Laut and so on. There are also reported interviews or dialogues with R.D. Laing, Arthur Janov and others. The interview with Janov is particularly long and full, and contains much fascinating information about Janov's current ideas and practices.