

No, They Don't!

Juliana Brown and Richard Mowbray

How many therapists does it take to change a light bulb? One, but the light bulb has really got to want to change!

John wants to know if everyone agrees with his 'ABC's. 'Do therapists ever cure clients?' — No.

'A psychotherapist who takes on the job of curing the client . . . is deeply into countertransference . . .' — Agreed.

'The responsibility for getting better — whatever that may mean in an individual instance — is clearly with the client. It is something the client does and not something the therapist can do.' — Agreed.

And yet it is also true that: '. . . the improvement of the client is a joint or mutual happening, not just the work of the client.' The two propositions are not mutually exclusive. As with the proverbial horse-to-water (or light bulb), the presence of the practitioner may be a necessary condition for growth and change but does not make it happen.

But what does it actually mean for the client to have the 'responsibility for getting better'? If the client has responsibility for getting better, do they also clearly have responsibility for getting worse? Are practitioners not even jointly 'responsible' for the client's progress?

John indicates that it is the question of

these 'ABC's' in relation to the NVQs for counselling and psychotherapy that may be the nub of the matter since some of the NVQ criteria: '. . . seem to assume that the therapist can indeed do some of these things'. In this context words like 'responsibility' are liable to take on an official meaning. If the client fails to be 'cured' will the practitioner be held 'accountable'? If the client is regarded as being responsible for doing the work — for producing the outcome, perhaps the NVQ criteria should be based on measuring client competence rather than practitioner competence as currently envisaged!

John is a keen supporter of UKCP and his misgivings about the NVQ scheme need to be set in the context of a reluctant UKCP joining in the process of producing the criteria, not out of support for the system, but for fear of being left out in the cold (see Richard Mowbray, 1994 — details below).

It would also appear, however, that the 'ABC' of a self-responsible client challenges the basis of UKCP. You can't be held responsible for something you don't have the power to deliver. If the practitioner is not regarded as the active agent of change and if the practitioner doesn't actually do anything that he can claim as being responsible for producing a result,

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how can this activity claim to be a profession as conventionally understood? UKCP — the UK Council for Placebos?

John has promoted humanistic involvement in UKCP and has worked assiduously to bring humanistic practitioners under the 'psychotherapy' umbrella. In a previous issue of *Self & Society* (May 1991) John enthused about how the holding together of UKCP has been possible because: '... it is not agreement on theory which is being attempted ...'. Given that sort of beginning it comes as no surprise to us that the eager members of this budding new 'profession' may have overlooked the fact that they were not united in their objectives and values — and 'ABCs'. John has assumed that his particular definition of 'psychotherapy', and a set of 'ABC's' appropriate to humanistic practice was the generally prevailing one. However perhaps this is not the case and, more particularly, perhaps this is not a set of 'ABCs' that is readily assimilable by an officialdom which has an ingrained assumption of a medical model for psychotherapy and which has difficulty distinguishing the label 'psychotherapy' from 'psychiatry' or even 'physiotherapy'! (See also the article on the registration of

psychotherapists by David Jones in *Self & Society*, January 1991, as well as *The Values of Psychotherapy* by Jeremy Holmes and Richard Lindley, OUP 1989). If one insists on referring to humanistic practice by medical model terminology, such as the term 'psychotherapy' undoubtedly is, what else can one expect but confusion in the circumstances?

A final thought about 'ABCs'. Both the National Council for Vocational Qualifications and the UKCP are attempting, from different standpoints, to assure a certain standard of practice in an area of work concerned with human relationships. Instead of real 'standards', what we are liable to end up with from either system are bureaucratic standards — whether it be practitioners brandishing their NVQ 'empathy scores' or their UKCP approved postgraduate, professional status and impressive letters after their names (not ABCs though). Like a version of Peter Cook's 'European Standard Joke' (EC Directive !*?!*) the farcical prospect of a European Standard Psychotherapist awaits us. If only everyone would agree the standards, then the guesswork could be taken out of it all. But not everyone does agree, so vive la difference.

