

Dear S&S

REPLY TO DANNY NOBUS

In the issue Vol.28 No.3, Dany Nobus writes about some of the differences between psychoanalysis and the humanistic approaches. I would like to take issue with one or two of his points.

He says, 'Human beings are not the creators of their own condition, but they are being created and acted upon as subjects by a symbolic structure that precedes and outlives them.' This is a kind of language imperialism which is all too common these days, and needs to be exposed. As humanistic psychologists, we hold to a dialectical position which tries to do justice to both sides of this opposition, not holding to one at the expense of the other. For us, human beings are at one and the same time creators of their own condition *and* acted upon as subjects by a symbolic structure that precedes and outlives them. To let go of one side of this paradox is to let go of the essential humanistic insight that we have to think dialectically if we are to do justice to the world, and in particular to the human world. Maurice Friedman put it very neatly when he said, 'The self experiences the vertigo of being a free and directing consciousness, on the one hand, and an "eddy in the social current" – to use George Herbert Mead's phrase – on the other.' *Friedman 1964, p.169*. To take just one horn of this dilemma and elevate it to the status of the one truth is a mistake. The title of this journal is *Self & Society*, and I want to hold fast to the ampersand!

Again, he says this: , 'The more the therapist engages in self-disclosure, the more the client's fantasies about the therapist are neutralized, and the more the client loses sight of the particularity of his or her own problems.' This really seems to me quite perverse. It suggests that fantasies about the therapist are the only things that really do justice to the particularity of the client's problems. This is a truly weird thought. It seems to me that the humanistic therapist and the psychoanalyst are quite alike in having to judge self-disclosure very carefully, and to make sure that it is of a kind which is going to be therapeutic rather than non-therapeutic or anti-therapeutic. But to rule it out altogether seems to me folly. Many of us have heard the story of the woman who went to a Kleinian analyst for fourteen years. A friend asked her if there were any specially memorable moments or turning points in this period of time. She answered that it was an incident which happened one wintry day. She had come in from the street and was crossing the tiled hall with the therapist when she slipped on a piece of ice and fell down. He leaned over to her and helped her up and said , 'Oh my dear, have you hurt yourself?' And that bit of self-disclosure was the most memorable moment in the fourteen years.

The last point I would like to make is about the treatment of what the author variously calls general well-being, complete happiness, self-fulfilment, authenticity, independence, potential to grow, self-achievement, self-actualization and self-realisation. He regards these as illusions and as quite non-achievable. He gives no reasons for supposing this, and no evidence that this is the case, but just assumes it. He even throws in a little sneer about it, when he says, 'Analysts do not possess the Sovereign Good, and in acknowledging that it is but another neurotic illusion, they direct their practice towards the dismantling of these ideals rather than towards their realisation.' Hoity-toity. As a humanistic practitioner, I know that these things are achievable and quite within the realm of the possible. And people like Ken Wilber, Jenny Wade, Beck & Cowan and many others have shown that these achievements are not even particularly extreme. To achieve them is to reach Centaur consciousness (Wilber), Authentic consciousness (Wade), Second-tier consciousness (Beck & Cowan) or Existential consciousness, as I have called it myself. Then beyond that there are other, also achievable, stages of consciousness, which Wilber calls the Subtle, the Causal and the Nondual. In other words, what Dany Nobus is doing is denying the whole world of the mystical. No doubt Freud and Lacan do the same, but that does not make it right. Other analysts, such as Bion, Field and Epstein, certainly have a place for this sort of thing.

John Rowan

Dear S&S,

In her article UKCP Ethics and Complaints Procedures: A Response from the UKCP, (S&S Vol 28/3), Dr Janet Boakes cites the low number of complaints from members of the public to the UKCP. Does this figure, however, also represent the number of clients who are damaged by therapy? For such clients, their priority may be to lessen the considerable distress, which therapy can bring about, and this aim may not seem compatible with entering into a formal complaints procedure. For those clients who do want to make a complaint, there can be a number of obstacles to overcome.

- 1 If the underlying thrust of the therapeutic approach is always to put the ball back into the client's court, such a stance may imply that, if things go wrong, it is likely to be the client's responsibility and not that of the therapist.
- 2 Clients, generally speaking, are not well versed in the principles of sound therapeutic practice. When therapy is harmful, they are not necessarily able to recognise and delineate incompetent or unprofessional behaviour.
- 3 In my case, I had no idea what professional organisation my analyst belonged to. Clients are unlikely to feel able to ask their former

- practitioner for this information if they need it in order to complain about them. I came across this information quite by chance.
- 4 A distressed client may not feel sufficiently confident to telephone the relevant organisation for information or write an appropriate letter, particularly if that organisation is for therapists rather than for clients. As Dr Boakes concedes, some practitioners may not be above acting to protect their colleagues rather than in the best interests of clients.
 - 5 'Complaining' does not provide a way out of the pain and the emotional impasse which bad therapy can produce, and the client perhaps will sense this. Such a course of action can make things worse rather than better, since the client may be inappropriately pathologised, and the desire for understanding and for some sense of *finished business* exacerbated rather than addressed.

To say, 'the figures suggest that on the whole people are satisfied with the treatment that they receive...' is surely a questionable conclusion to draw.

Anna Sands

Dear S&S

Re: Letter from Anna Sands

I entirely agree with your correspondent that some therapy is harmful, even very harmful, and that not everyone feels up to pursuing a formal complaint. I hope that she would concede that much therapy appears to be helpful, if not very helpful, and, some at least, does no harm.

I also agree that in some cases the way that a complaint is managed leaves much to be desired. To 'pathologise' a complainant is quite unacceptable and can only be deplored. Nevertheless, the figures available to us suggest that such cases are in the minority. Annual complaints census record figures of between 1.1% in 1995 and 0.24% in 1999. Even allowing for probable under reporting, these figures are very low and it does not seem unreasonable to conclude that most people seem to be satisfied.

Perhaps the most important point to stress is that UKCP, in common with many professional bodies, is reviewing its complaints procedures in line with the Human Rights Act to make them easier to access, impartial and independent, and with, for the first time, significant lay input. We are very serious about our wish to protect members of the public, while being scrupulously fair to our practitioners.

Yours sincerely

Dr. Janet Boakes

Chair of Professional Conduct Committee. UKCP

Dear S&S

I am writing in response to the superb article by Anna Sands in the August-September issue of *Self & Society*.

I understand you are not publishing any personal stories re ethics and complaints as a response. For me, the human and the personal in 'humanistic' are the aim, source and stimulus of our understanding and practice. So my writing has its roots in my personal experience.

Over three years ago, after two years of very good therapy, my therapist changed quite suddenly and became unempathic, unsafe, non accepting and, at times, destructive. Because the first two years with her had been good, and for many valid reasons I won't go into here, I could not attempt therapy with another therapist. So, rather than leave and remain permanently damaged, I tried, from the powerless and vulnerable position of being the client, to do, say, write, quote, everything and anything I could to get her to understand what she was doing to me. It was an awful situation, and my attempts to be understood often caused more strong reactions and damaging responses.

Recently, my therapist changed and has now become more open minded, empathic, supportive and understanding, and she is attempting to help me deal with some, at least, of what happened.

I did get wise and understanding support during that time from outside, in particular from someone who has spent many years working in the abuse in therapy field. But, in the therapeutic situation itself, I was on my own. As my therapist does not belong to any organisation, there was no therapeutic body I could approach with the idea of mediative support in an attempt to help turn this destructive situation around. In one attempt to create change, I asked if we could record sessions so that we could both look at what was going on, but my therapist refused.

I knew and had met her supervisor. I had a copy of a book she had written about working with clients who have been abused, which made me respect her ideas and working methods, and she had copies of my work. Also she had, at one time, offered to supervise me until I pointed out that, as she was already supervising my therapist, that would not be ethical. That connection with her seemed to me to provide a possible opening.

During the first year of this destructive time, my therapist had once suggested asking this supervisor to sit in and see if she could understand what was happening. Then she changed her mind. After about a year, as there was no other body I could turn to, I wrote to her supervisor, trying to give a picture of what was happening and sending, with my letter, copies of articles and selected quotes from books to support what I was writing. I thought she might at least listen to what the articles and quotes had to say. She sent them back to me by return of post.

With the returned articles, was a short letter telling me I had 'broken the boundaries of my therapy' and that she was going to inform my therapist. I felt upset by this. I had wanted the respect of being listened to.

I was so aware of how my therapist was misinterpreting and misunderstanding me and not accepting and often denying the truth of my experience, even when it happened in the therapeutic session itself. Some of my thinking has been that, if a therapist talks to her supervisor about the situation as she/he sees it, if, of course, the supervisor is told anything, then the supervisor may not have a correct and balanced picture of what is happening. And I am so aware that the client never knows what is said and has no way of protecting themselves with input from their own understanding of the situation.

After three years, my therapist changed, over a short period, and my therapy began to become safe again. After a while, I wrote again to her supervisor, explaining that things were now going right and putting forward some of my thoughts about the whole situation. One thought I expressed was that, were I being abused by a priest and contacted his Bishop in an attempt to get something done about the situation and the Bishop refused to hear my complaint, told me I had broken a rule and that he was informing the priest of what I'd done, his response would be considered abusive in itself. I cannot understand why a similar situation in the context of therapy can be right. I did not get even an acknowledgement. Two months later I wrote, basically asking for an acknowledgement of the receipt of that letter. Nothing.

Recently, I was talking about that in a therapy session, because I had realised the supervisor's attitude had had very powerful resonances with an early trauma in my life and I was working through that. My therapist then said to me, "I don't know why you thought she would answer you when she had told you not to write. Her contract is with me. It has nothing to do with you."

In trying to be heard about an abusive situation by the only person who, as far as I could see, had any power, remit or ability to listen creatively and maybe offer some input that could begin to turn things round, I found I was treated like an abused child who is left to face his/her situation without help. In other words, 'Don't bother me. It's not my job to listen to you'. This by someone who herself works in the field of treating clients who have been abused and yet, because of what seems to me to be a quite rigid ethical requirement or belief, ends up turning away from someone being abused, 'passes by on the other side', and allows that situation to continue unchecked.

Can that be right for supervisor, therapist or client? As Anna Sands writes, 'Doesn't therapy itself have to change?'

Is it acceptable that supervisors have responsibility only to the therapist and none at all towards the client through the therapist, particularly in situations when there is no other body to whom a client can appeal in times of difficulty? Should Codes of Ethics not include something to cover such situations: maybe the appointment of an independent therapist/mediator – a 'supervisor' who is there on the client's behalf – someone the client could turn to when worried

about or disturbed by their treatment, someone who has access to both therapist and supervisor. This would seem to me to be more creative for all concerned rather than that the situation become irretrievably destructive. It also seems to me to be an essential. The one to one therapeutic relationship holds such potential for growth and healing. But, because it happens in isolation and without any witness, it also allows for deliberate or unrecognised abuse to happen unchecked and provides no protection for clients who are being damaged or abused, in whatever way. Unlike the therapist who has external support, there is nowhere a client can go for help.

By the time some form of official complaint or mediation process has been instigated, it is too late and the damage, often irreparable, has been done. My experience in the Abuse in Therapy field has shown me how long term and extensive the effects of such experiences can be.

As a society, we are moving towards a greater recognition of abuse and a different way of responding to and treating victims. It seems to me that therapy 'society' should be moving in a similar direction. One move could be to require the addition of an agreed external and independent mediator who can be approached by the client when in difficulty with a therapist before a situation has become irretrievable. I can think of no other way to redress this imbalance inherent in the therapeutic dyad.

The bad experiences I have had in therapy have left me feeling ashamed and afraid of revealing my name, so I am writing under a pseudonym.

Carrie Norman

To Noni Kers, c/o S&S Editor

29 August 2000

Dear Noni,

Thank you for your letter, which I'll take to be our first session, in August's S&S, in response to my advert in the June issue.

Despite having a partner, surprisingly, who is 'a fabulous listener', I imagine they don't have a choice, you immediately confessed to me ('flight into therapy?') many pathetic anxieties. Accordingly, please send me your cheque for 40 Guineas. In fact, since you apparently wish our sessions to be in the public domain, ie published in Share & Shame, and I charge extra for boundary breaking, make that 45 Guineas. Despite the statement in my advert, I have decided my fees are not negotiable; this will give you something, among other things, to bite and chew on.

As I am the Professional Client here and you the Confessional Therapist, I wish to raise (amongst other things) the identity crisis that has already emerged between us. Who is this *Earwig* you are confusing me with? Is it something that secretes itself in the nooks and crannies of the sub-conscious and elsewhere,

and is this your counter-transference, something of me that you want/need to take in? Is this why you demand a birthday-attire photo of me, in that your 'rampant imagination' cannot form an image of me as client? If so, despite, or because of, your rejection of supervision, can I recommend my colleague, Conrad Festwomey, Professional Feedback Supervisor, who will help relieve you of more gelt.

My role as your client is, of course, that's why you're paying me, to fully expose the projections you're creating on me, but, not 'and', not to come up to your expectations and demands without further stimulus. Accordingly I look forward to our next session.

I see that you have allowed me to overrun my time, so please send a cheque for 50 Guineas.

Yours, while you keep paying

Don Thelpme

Professional Client

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