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young people a chance to engage in arts and crafts to build both confidence and skills. A plenary panel finished off the day, allowing delegates a chance to ask the main speakers questions related to the topics of the day.

I was left at the end of the day feeling invigorated, excited and wanting more. It felt amazing to be among a group of individuals who felt the same way as I did about the mental health system in Britain, and the use of talking therapies within it. I worked within that system for a number of years, and it eventually ground me down, arguably institutionalizing me as much as many of the service users we worked with. The emergence and increased popularity of IAPT initially felt like a change was possible, that the government acknowledged that those with 'mental health problems' (whatever that means) would benefit from talking about their problems, rather than just taking pills. It quickly became clear, however, that it meant massproducing 'psychotherapists', giving all NHS staff a little bit of Cognitive Behaviour Therapy (CBT) training to provide just enough therapy: just enough to say that they are 'improving access to the psychological therapies'. Having worked in both inpatient services and in a community team, I can honestly say that I did not have the time to provide any meaningful, long-term 'interventions' (to use the CBT lingo). In the community I was lucky to get an hour with someone to use the training the NHS spent so much money in giving me.

Ultimately I became too disillusioned to continue in that system and with psychiatry in general, and I left the mental health trust in which I worked. After all, the mental health service is psychiatric in nature; CBT, IAPT and the factory-produced therapies that are being provided fit in with psychiatry's view of problem—treatment—fix and the current 'factory-produced' therapy fits 'nicely' within this system. The conference felt almost revolutionary, and I felt like I was doing something wrong sitting there, being so used to speaking with people who believe what modern psychiatry has told them about our mental health and what can help them. I felt like I was part of an underground, anti-establishment organization, which says a great deal, given that one of the themes of the day could have been 'give practitioners the time to practise meaningful, unrestricted psychotherapy' – a wholly un-revolutionary prospect.

If I had one complaint, it was that there was so little time to have open discussions about the topics each speaker raised. The day felt rushed, and there was little time to process what was being discussed. However, the fact that there was a forum for these topics to be discussed at all felt like a triumph, and I wait excitedly to attend the next conference.

# Stray dogs or belonging to the Emperor: commentary on the UPCA conference, 2014

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In *The Order of Things*, Michel Foucault quotes Borges' fictitious taxonomy of 'objects', according to this 'Celestial Emporium of Benevolent Knowledge':

animals are divided into: (a) belonging to the Emperor, (b) embalmed, (c) tame, (d) sucking pigs, (e) sirens, (f) fabulous, (g) stray dogs, (h) included in the present classification, (i) frenzied, (j) innumerable, (k) drawn with a very fine camelhair brush, (1) et cetera, (m) having just broken the water pitcher, (n) that from a long way off look like flies. (Foucault, 1994, p. xv)

That it is fictitious is unimportant, as the element of fantasy is twofold – firstly, it indicates that the taxonomy is not real in the sense that it is imaginary, and secondly, that any taxonomy is itself fictitious as such differences are not essential. This seems important when thinking about recent history in counselling and psychotherapy, and for making sense of my own response to the recent UPCA conference.

What to make of such a conference? On the one hand, there is the sense of counselling and psychotherapy in dark times where, despite the seeing off of formal state regulation, the main governing bodies are increasingly facilitating a process of 'governmentality' (Foucault, 2010) through voluntary regulation. These are evident, for instance, in the way ethical codes are being reconfigured in order to implement accountability and to manage risk, the implications of which seem to be a conflation of the two and an end to risk and creativity (Musgrave, 2014) with an appeal to employability (Bond, 2014). On the other hand, there were stories of hope, courage (Burke, 2014), resistance (Atkinson, 2014; Postle, 2014) and the creation of alternative spaces and approaches (Lees, 2014) where remarkable things may and do begin to happen (Gordon, 2014). Such concerns, as ever, raise the questions of who we are, how we fit, and how to be at home. Increasingly evident, at least with this ad hoc grouping, is that there is an increasing estrangement between therapists, mental health services and professional bodies.

As the conference call indicated, a dominant issue is the place of therapists in relation to our socio-economic context. To what extent are we to be part of a dominant mode of production and relating to the state structure? The answer, reflected back, as I heard it, is that we should somehow stand apart, because if we do not, we may get caught in a discourse that pathologizes mental ill-health and socio-economic inequalities, and reifies them into the body of the individual (see Ferguson, 1997). How else to read '... treatments that enable people to challenge their negative thinking and build on the positive side of their personalities and situations' (Layard et al., 2006, p. 1)? From my own experience of working with unemployed people in one of the poorest boroughs of London, it is clear that one's sense of opportunity, self-esteem and potentiality cannot be supported by psychologizing structural poverty, which can manifest itself in a choice between food and rent.

So what might it mean to stand apart? One image that I was left with from the conference was of stateless therapists, those who find themselves external to the dominant approaches espoused by policy (i.e. NICE and the IAPT programme) and increasingly external to professional bodies. Such an exteriority is not so much a choice as one imposed as a result of another theme of the conference, of not being listened to (Musgrave, 2014; Musgrave & van Ooijen, 2014), that structures do not take into account a range of views and, rather, reduce things to a positivist scientific and medical model that fits neatly into our neoliberal world (see Guy, Thomas, Stephenson, & Loewenthal, 2011).

The idea of stateless therapists provokes, for me, the distinction between *nomos* and *logos* (see Deleuze, 1994). For Deleuze, groups have two tendencies; the first,

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logos, is organization according to an external principle based in, say, law, logic and/ or voice. We can see this by the increasing segmentation of 'mental health' or, as Postle (2014) terms it, the enclosure of the psycommons, through the increasing regulation and credentialization of people and therapies by external principles characterized by neoliberal ideology and medicalization (Lees, 2014; Musgrave, 2014). The second tendency, nomos, describes relations which, while still becoming hierarchical, emerge from a plane – here, there is no external principle of difference that orders the field, but rather it emerges through an immanent principle or organization of a 'smooth space'. Postle's notion of the 'psycommons' illustrates the distinction between the two: dominant discourses break up the world, stultify, reify and commodify it, hence the focus on people's negative thinking on the economy. Postle notices that the resources to be healthy have often been held in common; as he comments, 75% of the population have 'no need of "mental health" services' (Postle, 2013), or at least not yet. The notion of the psycommons offers a critique of the current order of things which encloses and segments space and relations, packaging up that which was once held in common, only to be sold back in a skewed form. This points to a parallel process between therapist and client, and therapist and training and/or professional body, as clients and therapists are interpellated into the kinds of subject the state desires.

The tendencies drawn out are at play for all groups, but what the practice and theory point to, in a number of ways, is that what might be considered radical about speakers' research, reflections and practice at the UPCA conference is that they provide a challenge, to me at least, to think of a 'smooth space in which encounters outside of the ordered conception of existence can become possible' (Roffe, 2005, p. 186). That is to question the order of things, and what it might mean for practice.

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## **Conference Reports**

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### Introduction

This article is an outline of my thoughts and impressions following my recent attendance at the UPCA conference held in December 2014 at the University of Roehampton. As a therapist who is currently in training, the conference represented an opportunity for me to participate in the discussion of how psychotherapy is changing in the current political climate. A leading question of the conference was: 'Has something gone seriously wrong with the psychological therapies?' Such a question is prompted by the emergence of initiatives such as Improving Access to the Psychological Therapies (IAPT), which has achieved making therapy more accessible to the masses, but at what cost? What is being taken away from psychotherapy and counselling in the process of perceived progress?

### **Impression**

The conference felt expansive in scope, making me think far beyond the counselling room, and to really appreciate the political forces and movements that can essentially threaten and control how I am to be with my clients. On a personal level, I must admit that up until this conference I have not spent too much time