

We try to tease out the often confused strands of debate

Just as psychotherapy* and counselling have become more widespread and influential, they have come under growing criticism. Even therapists themselves criticise the “therapy culture” as a popularised travesty. The reasons for this hostility are varied, and illuminating.

It is partly a problem created by success: therapeutic ideas have waxed as other influences such as religion have waned, affecting most aspects of modern life, so naturally their influence comes under greater scrutiny. In addition, the current breakdown of trust in all institutions affects therapy with a vengeance, both by sending more people into its arms and by undermining confidence in the results. At the same time some spectacular cases, especially around “recovered memory”, have put therapy practice in the centre of real controversy.

This coincides with a growing demand in all areas of life to replace informal, qualitative professional rules by measurable ones which can be easily scrutinised from outside. The trend is strengthened by a desire for protection from risk and a consumerist outlook in which problems are expected to have a solution. More and more professionals are getting thrown into the assessment machine to meet public fears about their competency.

Greater inclusion of therapy in public institutions such as hospitals and universities adds to the pressure for a standardised approach and strengthens the financial bias towards short-term methods rather than the more leisurely approach of old.

It all adds up to a mountain of doubt and anger about therapy: “charlatan” is the insult of choice. But while criticism is a good thing, much of it is very confused. Even the target is not very clear. In everyday conversation and media reports, the terms psychiatrist, psychologist, analyst, therapist and counsellor are often used interchangeably: if one practitioner errs, the whole lot are condemned and the very worst motives are assumed. This book attempts to tease out, identify and understand the different strands of the argument.

Sometimes the arguments are too diffuse for that: when they appear as an inchoate anxiety which eludes policy-orientated debate, or as a general hostility to the whole idea of the “talking cure”. You do not have to be a blind defender of the therapy faith to realise that there is an emotional level to many of the attacks against it. There is unease about a service that is so subjective and hard to measure. There is an unease about feelings and about analysing them. There is unease about a process that delves into the unmentionable, an

Introduction

aspect of the role which, according to some observers, inevitably keeps the therapist at society's margins despite all efforts to reassure. And there is unease about the very concept of the unconscious, just as it has become a part of our "common sense" thinking.

The idea of the unconscious was not invented by Freud, and it has certainly continued to develop since then. In all societies there is something in our mental life which does not seem to be under our conscious control, or reduceable to a physical dimension. Humans by definition search for meanings, especially in terms of relationships. Therapy reflects the modern bias to find meanings that are "developmental", referring to personal history and experience. However, that bias may now be shifting, perhaps towards the biological or evolutionary.

Perhaps it is understandable that we question the realm of the unconscious when our ideas about identity, reality or consciousness itself are being shaken up by the virtual reality of computers, biochemistry and genetics. What is real, the clone or the original? In reaction to these bewildering changes, public tastes seem to be veering to two extremes: disdain for anything that is not "disprovable" science in the Popperian sense, on the

one hand, and a rule-less "whatever" acceptance of competing explanations, as long as they promise to deliver happiness, on the other.

In the unfashionable middle falls all those explanations of human behaviour—including psychotherapy but also other social sciences such as economics, another activity commonly accused of "charlatany"—which recognise the subjectivity of their subject while trying to understand them within structures of thought; which try to acknowledge the clash between hope and reality; which try to be rational without being literal. If this middle ground is squeezed out, the age-old debate about human behaviour may be dangerously narrowed.

The approbation heaped on psychotherapy is far from unique. Every profession feels misunderstood. In my own area of journalism, how many times have I rolled my eyes when someone used me to take pot shots at "the media", celebrity-snooping and crass headlines, while the reality of my own work figured years of painstaking editing and interesting but earnest reporting assignments? The difference is that while I think journalists should maintain the highest professional standards, and recognise that this does not always happen, I do not think the problem will be solved by passing a law which says that only people who belong to particular

Therapy reflects the modern bias toward personal meanings

* Throughout this book, the term "therapy" is used as a generic term for all types of "talking cure", including counselling and psychoanalysis.

Not many people you meet say they wish they were a therapist

Organisations can call themselves journalists. Nor do I think that media abuse would be solved by closing down journalism altogether.

Neither does journalism seem to come in for the same level of visceral anger. People may criticise the media but they also envy and admire it. However, not many people I meet seem to wish they could be a therapist. In a country where therapy is still relatively marginal, the anger it provokes seems staggering. Look at it from the therapist's point of view: hundreds of people in the UK are out there, doing something not very glamorous and usually badly paid, who think they are answering a need because people in anguish come to them for help, and at every turn they are portrayed as vultures waiting to pounce on the vulnerable, manufacturing victims and undermining society in the process. No wonder many therapists are desperate to reassure the public. They want to be loved and understood, just like us all.

That is why, as this book went to press in the summer of 1999, at least one piece of legislation laying the ground for statutory registration of psychotherapists was heading for the Houses of Parliament with the support of the relevant professional bodies. The idea had been debated many times over the years, but was given impetus after the Queen's Speech in November

1998. Prompted by scandals about incompetence in the medical profession, the government announced that its NHS Modernisation Bill included the "Henry VIII" clause, giving ministers special powers to change the rules of professional bodies without having to pass a specific bill through parliament.

Statutory registration remains highly controversial within the profession, however. Not because ranks of therapists want to be free to prey on an innocent public, but because many of them are convinced that registration, at least as currently proposed, will fail either to lessen abuse or quiet public fears, and could even make things worse. They make a distinction between regulation and accountability, and call instead for ways to help the public judge and understand what to expect from the process.

Since there is such a widespread assumption that state regulation of psychotherapists is a "good thing", in order to ensure a high level of debate this book has had to make sure the assumption does not go unchallenged.

The psychotherapy regulation argument reflects a much broader modern debate. It was the US, a country founded by lawyers who believed in the perfectability of man, where the idea grew that a law could right just about every wrong. But while legal activism is better than passive acceptance, it has also become clear

Introduction

that you cannot legislate to prevent all human wickedness and error.

The debate has come to a head over our assessment of risk, as the consumer paradigm takes growing precedence. The pattern of debate is always the same: we want rules, checks and assessment to reassure us, but these rules create bureaucracies which strangle creativity. We want others to be checked and marked, but don't like it when it happens to ourselves. We don't want to eat meat that will give us Mad Cow's disease, but we don't like being told that ribs or unpasteurised cheese are forbidden.

A recognition of the need to find a balance is reflected in the cabinet office's "Better regulation taskforce", set up in 1998. Under its guidelines, government departments have been told to make no regulatory proposal without an assessment of risks and benefits and without explaining why non-regulatory action would not be enough. Lord Haskins, chairman of the taskforce, wrote that citizens must take some responsibility for managing risks affecting them. Public Health Minister Tessa Jowell later elaborated: "People want more information, not more interference. They want to be treated as grown-ups."

Such thinking probably lay behind the government refusal to date to introduce a national register of individual nannies, despite a series

of high-profile scandals in which children were harmed or killed. In one case safeguards existed but the woman had bypassed them by lying. In a letter to *The Guardian* early in 1999, parliamentary under-secretary Margaret Hodge said a register of individual nannies would be unworkable and would not prove more effective. For a start, who would judge if a nanny was unsuitable? "A register could quickly go out of date and parents could be lulled into a false sense of security," she wrote.

Similar problems affect psychotherapy, where unlike medicine it is hard to measure effectiveness or rule what is a "right" result. More than perhaps any other professional service, success comes from a good "match" between client and therapist. A client can feel disappointed without this meaning that the therapist is unscrupulous or unqualified.

Even in more testable professions such as teaching and nursing, complaints grow that regulation has deformed a vocation into a bureaucracy. Writing in *The Observer* about the explosion in civil service audits in October 1997, Simon Caulkin noted: "Regulation doesn't solve the problem of trust (or lack of it) so much as displace it... It's not obvious why the watchdogs are any more trustworthy. The regulatory audit becomes a ritual that is more about process than

We don't want Mad Cow disease but we do want to eat spare ribs

Introduction

substance and may do more to promote obscurity than transparency.” He concludes with a quote from Michael Power of the LSE: “The lesson of regulatory history is that in the end all experiments in control fail and lead to further reforms.”

Even those in favour of statutory regulation sometimes admit that from a purely logical point of view, the argument is not watertight. For the most part they are responding to the public call for reassurance on the outside and, internally, an urge to show good faith. To some extent the regulatory process is also inevitably a turf war, a scramble for professional power. And there is a surprising level of professional fear and loathing among psychotherapists about what they might get up to. It is hard to meet one without hearing a tale of some colleague exhibiting bad habits: perhaps not actually transgressing a rule, but venturing into grey areas.

On all sides of the debate, everyone agrees that more needs to be known about the nature and extent of professional harm or abuse. Generally cited figures show that across the board, 10 per cent of all types of professionals are involved in serious abuse. However, this figure includes professions where there is already heavy statutory regulation, and there is no clear correlation between the extent of harm and the extent of statutory control.

Abuse may be greater at the more respectable end of the spectrum

Nevertheless an assumption persists that the more credentials you have, the less frequently abuse will be found. In one newspaper article during 1999, media psychiatrist Raj Persaud reviewed a survey which found that even among members of the “prestigious” British Psychological Society, people were admitting to having had sex with a client. “One shudders to think what must be happening in the unregulated world of private counselling,” he adds. The answer may be: pretty much the same as in the regulated world of public counselling. Some people even argue that abuse is more likely at the most “respectable” end of the spectrum, where people can hide their acts under the cloak of untouchable respectability.

This book is not arguing for one policy or another. But it does attempt to make sure that all the arguments are presented, and all the questions asked, so that whatever is decided, it is done with eyes wide open. It also aims to offer practical information about psychotherapy and counselling to the interested individual and draw a map of the main policy arguments.

A public debate should explore and question our expectations: about risk, about happiness, about giving and receiving help. Whatever happens with the law, the process of public education needs to gather pace. ■

Susan Greenberg