Critical Psychotherapy, Psychoanalysis and Counselling
Also by Del Loewenthal

AGAINST AND FOR CBT: Towards a Constructive Dialogue (co-author)

CASE STUDIES IN RELATIONAL RESEARCH: Qualitative Research Methods in Counselling and Psychotherapy

CHILDHOOD, WELL-BEING AND A THERAPEUTIC ETHOS (co-author)

CRITICALLY ENGAGING CBT (co-author)

PHOTOTHERAPY AND THERAPEUTIC PHOTOGRAPHY IN A DIGITAL AGE

POST-EXISTENTIALISM AND THE PSYCHOLOGICAL THERAPIES: Towards a Therapy without Foundations

POST-MODERNISM FOR PSYCHOTHERAPISTS: A Critical Reader (co-author)

RELATIONAL PSYCHOTHERAPY, PSYCHOANALYSIS AND COUNSELLING: Appraisals and Reappraisals (co-author)

WHAT IS PSYCHOTHERAPEUTIC RESEARCH? (co-author)
Critical Psychotherapy, Psychoanalysis and Counselling

Implications for Practice

Edited by

Del Loewenthal

University of Roehampton, UK
Contents

List of Tables and Figures viii

Acknowledgements ix

Authors’ Biographies, Abstracts and Self-Critiques xi

Part I Introduction

1 Talking Therapies, Culture, the State and Neoliberalism: Is There a Need for Critical Psychotherapy, Psychoanalysis and Counselling? 3
Del Loewenthal

Part II What Can We Learn from Critical Psychiatry and Critical Psychology?

2 The Medical Model: What Is It, Where Did It Come from and How Long Has It Got? 29
Hugh Middleton

3 Towards Critical Psychotherapy and Counselling: What Can We Learn from Critical Psychology (and Political Economy)? 41
Ian Parker

4 The Neurobiological Turn in Therapeutic Treatment: Salvation or Devastation? 53
Kenneth J. Gergen

Part III Users’ Perspectives

5 Personal versus Medical Meanings in Breakdown, Treatment and Recovery from ‘Schizophrenia’ 77
Tom Cotton and Del Loewenthal
Part IV Critiques Coming More from Outside

6 Critical Theory and Psychotherapy
Anastasios Gaitanidis

7 When Love Is Not All We Want: Queers, Singles and the Therapeutic Cult of Relationality
Mari Ruti and Adrian Cocking

8 Relating to People as Revolutionaries
Lois Holzman

9 Work in Contemporary Capitalism
Michael Rustin

Part V Critiques Coming More from Inside

10 Everything You Always Wanted to Know about Therapy (But Were Afraid to Ask): Fragments of a Critical Psychotherapy
Andrew Samuels

11 Critical Priorities for the Psychotherapy and Counselling Community
Colin Feltham

12 The Deleuzian Project
Chris Oakley

13 Psychoanalysis and the Event of Resistance
Steven Groarke

14 Psychology, Psychotherapy – Coming to Our Senses?
Paul Moloney

Part VI Critiques of Training and Learning

15 Contesting the Curriculum: Counsellor Education in a Postmodern and Medicalising Era
Tom Strong, Karen H. Ross, Konstantinos Chondros and Monica Sesma-Vazquez

16 Systemic Means to Subversive Ends: Maintaining the Therapeutic Space as a Unique Encounter
Jay Watts
Part VII  Is There an Unfortunate Need for Critical Psychotherapy, Psychoanalysis and Counselling?

17  Psychotherapy, Psychoanalysis and Counselling for Oppressors and Oppressed: Sex, Violence and Ideology in Practice?  285
    Del Loewenthal

Index  303
Tables and Figures

Tables

16.1 Sample deconstructionist questions 273
16.2 ‘Situating professionals’ exercise 276

Figures

15.1 Who has something at stake in counsellor education? 246
Acknowledgements

I should first like to thank my parents who, when I was young, for many years had two lodgers, one a Daily Telegraph-reading tax inspector and the other a communist shop steward. As a result, I read both the Daily Telegraph and such books as William Gallacher’s Revolt on the Clyde. These two forces of individualism versus social action have taken different guises at different points in my life, varying from facilitating management development for chief executives to helping to develop community enterprises. My own doctorate, which I started over 40 years ago, again looked at how individuals escape from self-awareness and conspire with those who wish to control how they think. Again when I was growing up, my father’s best friend, who was an arch capitalist, was particularly worried that the Italian Communist Party would lead Europe into a new renaissance. As a result, he bought Italian newspapers on an almost daily basis, saying that it was vital to understand them if we were to beat them. Unlike most of my contemporaries, therefore, I was not brought up to think that there would be dire consequences as a result of discussing and trying to understand that which one might be opposed to – in fact quite the reverse.

After many years of training counsellors and psychotherapists, in particular regarding the implications of scepticism/continental philosophy for their practices, I have in this book wondered if such approaches are permissible in late capitalism precisely because they avoid the likelihood of anything more radical. How my more recent train of thought came about I am not too sure. What I do remember is having a conversation with my colleague James Davies and writing an editorial for the European Journal of Psychotherapy & Counselling entitled ‘Is there an unfortunate need for critical psychotherapy and counselling?’ As a consequence, I was approached by Nicola Jones from Palgrave Macmillan, who persuaded me to write this book.

My subsequent thanks go to members of the Universities Psychotherapy & Counselling Association Council, who approved my running its, what turned out to be well-attended, annual conference, Critical psychotherapy and counselling – if not now, when? (the phrasing for which I have Andrew Samuels to thank). There are many more people to thank from here. First are the distinguished contributors who so ably met my changing deadlines and coped with my attempts at communication.
I also had the help of Dawn Clark in the early stages and Betty Bertrand throughout, but most importantly, my thanks to Liz Nicholl, for without her abilities and motivation it is quite likely that this book would not have appeared. Last, but not least, my thanks go to both colleagues and students at the Research Centre for Therapeutic Education for our continually evolving conversations, and my wife, Jane, who put up with me again spending at least some of our summer holiday completing yet another book on relationships, albeit a book, I hope, with a difference.
Chapter 1: Talking Therapies, Culture, the State and Neoliberalism: Is There a Need for Critical Psychotherapy, Psychoanalysis and Counselling?

Del Loewenthal is Professor of Psychotherapy and Counselling and Director of the Research Centre for Therapeutic Education at the University of Roehampton, UK, where he also convenes doctoral programmes. He is an analytic psychotherapist, chartered psychologist and photographer, and he is the founding editor of the European Journal of Psychotherapy & Counselling. He is chair of the Universities Psychotherapy & Counselling Association and former founding chair of the UK Council for Psychotherapy research committee. He also has small private practices in Wimbledon and Brighton. His most recent publications include Post-existentialism and the Psychological Therapies: Towards a Therapy without Foundations (2011), Phototherapy and Therapeutic Photography in a Digital Age (2013) and Relational Psychotherapy, Psychoanalysis and Counselling: Appraisals and Reappraisals (with Andrew Samuels, 2014).

Abstract

The case is presented that the main reason we have critical psychiatry and psychology is that psychiatry and psychology are primarily agents of the state and that this is becoming increasingly true for psychotherapy, psychoanalysis and counselling. An overview is provided of notions of ‘critical’; psychotherapy, psychoanalysis and counselling are revisited as cultural practices in the light of both critical psychiatry and psychology; and the apparent paradox of increasing state intervention in a neoliberal world is explored. Questions are raised such as: Is it time for psychotherapists, psychoanalysts and counsellors to start thinking more critically about how much we’re caught up with individualism, pseudoscience and the language of medicine and clinical psychology, all of which can be seen as instruments of the status quo?

Preliminary considerations are given as to whether the development of the sceptical tradition, while useful, is also a way through which psychotherapy loses its potential political radicalism through being termed ‘critical’. A brief history of the notion of ‘critical’ is provided with reference to critical theory, psychiatry, psychology, psychotherapy,
psychoanalysis and counselling, together with other developments, including the literature on politics and the talking therapies.

The issue is raised: if the state is now controlling the talking therapies, as it cannot risk with the growth of therapeutic provision so many people coming to their senses, then will psychotherapists, psychoanalysts and counsellors need to take a more critical stance if they are to regain their professional independence and intrinsic motivation? This may require them to consider and interpret how individual wretchedness is also caused by external social and economic factors.

The subsequent chapters, providing a range of narratives on critical approaches to questions raised here, are introduced.

Critique
A main criticism of this chapter, and perhaps of the book, is that it starts by raising specific questions as to whether there is a need for ‘critical’ psychotherapy, psychoanalysis and counselling, with particular reference to increasing state intervention. However, they are not addressed individually. Instead, the editor and contributors take them as a broad indication of the kinds of question that the notion ‘critical’ might address and then respond according to their interests. However, not directly addressing each question can lead to these questions not being individually explored as much as they might. Also provided is a range of different ways in which the term ‘critical’ is used in the talking therapies, which is hopefully a strength, but it can also take away from more in-depth exploration of the initial questions. Further criticisms might be around the literature on psychotherapy, counselling and politics, which could have been delved into further as there would appear to be much overlapping interest in the notion of ‘critical’. Yet, in defence, the book’s focus is on ‘critical’ talking therapies and not primarily on politics and the talking therapies. Finally, in terms of the structure of the book, the creation of the distinction regarding those contributors who ‘come mainly from the inside’ or ‘mainly from the outside’ was perhaps too arbitrary and not helpful because all contributors are practitioners and most refer to varying extents to literature inside and outside psychotherapy, psychoanalysis and counselling.

Chapter 2: The Medical Model: What Is It, Where Did It Come from and How Long Has It Got?
Hugh Middleton is Associate Professor at the School of Sociology and Social Policy at the University of Nottingham, UK, and a National
Health Service (NHS) consultant psychiatrist. Some 20 years’ experience of contributing to NHS mental health services has fuelled criticism of their orthodoxies, and between 2000 and 2006 he made specific contributions to mental health policy development and implementation through the work of the National Institute for Mental Health in England/Care Services Improvement Partnership. In more recent years, he has been privileged to supervise several sociology PhDs considering ‘mental health’ from social sciences and constructivist perspectives. He is co-chair of the UK Critical Psychiatry Network.

Abstract

This chapter is prompted by a recent high-profile publication by the Critical Psychiatry Network. It reviews some of the conclusions and implications of that paper, ‘Beyond the current paradigm’ (Bracken et al. 2012), as a critique of institutionalised mental healthcare. The paper explicitly challenges the validity of a ‘medical’ approach to psychological and/or emotional difficulties and it has received little adverse comment from the main readership, fellows and members of the Royal College of Psychiatrists. The background to the development of medicalised approaches to mental health difficulties is considered and set in a Foucauldian perspective of evolving discourse in relation to the ‘mad’. Although unsatisfactory and constraining, current provision has to be deemed to be an improvement on the past, but, more significantly, there are signs that a further shift, towards more patient-centred approaches to provision, is under way, and these might be worth following. The chapter also describes the Critical Psychiatry Network, a loose association of some 200 psychiatrists who have developed and promulgate critical appraisal of mental health services and practices, from which such publications come. Consideration is also given to what experiences from the Critical Psychiatry Network might be helpful for critical psychotherapy, psychoanalysis and counselling.

Critique

This chapter is essentially a reflexive comment upon ways in which formal provision for those suffering emotional distress and those concerned by them is organised. Expressions of dissatisfaction with organised mental health services commonly focus upon the shortcomings of co-locating them with other aspects of the medical enterprise, and this commentary is intended as a contribution to that debate. It identifies the wider medical enterprise with an approach to those human difficulties that can be productively conceptualised from a particular
ontological position, and it concludes that mental health problems are not sufficiently described in that way. In turn, this identifies formally organised provision for them as insufficient. This is not a novel criticism and neither is its continuing relevance surprising. The need for appropriately sanctioned and supported provision for instances of otherwise uncontrollable emotional distress and instances of concern for public or personal safety can be considered a social universal. Reflexive commentary upon prevailing social arrangements is one way of questioning not the need for them but the form that they take in a particular context. Social sciences’ focus upon the forms and activities of social organisation authorises them to define and comment upon interactions between functional social necessities and their contextually defined expressions. Doing so, particularly in the field of mental health difficulties, can make a contribution towards otherwise philanthropically driven change by drawing attention to distinctions between the need for ‘something’ and the contextual determinants of ‘what’.

Chapter 3: Towards Critical Psychotherapy and Counselling: What Can We Learn from Critical Psychology (and Political Economy)?

Ian Parker is Professor of Management in the School of Management at the University of Leicester, Visiting Professor of Psychology at the University of Roehampton, Co-Director of the Discourse Unit and a practising psychoanalyst in Manchester, UK. He is still a Marxist. He is a member of the collective that produces Asylum: Magazine for Democratic Psychiatry. His books include Lacanian Psychoanalysis: Revolutions in Subjectivity (2011) and six titles in the series ‘Psychology after Critique’ (2015).

Abstract

This chapter outlines some aspects of contemporary ‘critical psychology’ which attempt to locate the discipline of psychology in the ‘psy complex’ and in the context of present-day capitalism and the state. Conceptual resources that critical psychologists draw upon – most notably Marxism and feminism – alert us to the way in which the threat of state regulation of psychotherapy and counselling is complemented by the fantasy that if we were free of the state then we would be free. The chapter uses aspects of critical psychology to develop an account of the political economy of psychotherapy, with a focus on the role of the state. Following an outline of aspects of critical psychology that
are relevant to psychotherapy and counselling, it provides a description of the rationale for opting for political economy, which was originally premised on the ideological division between the state and civil society.

Critique

This chapter seems unsure as to whether the political-theoretical framework should be drawn from Foucault or from Marx, and in both cases it is unclear how feminism, and what form of feminism, could be integrated into the analysis. Foucault does seem useful to grapple with ‘psychology’, ‘psychiatry’ and ‘psychotherapy’ because he locates those practices in the psy complex, but this entails an account of power, and a corresponding critique of the notion of ‘ideology’, which sits uneasily with a Marxist account. Surely, if Foucault were taken seriously, then the conscious collective self-activity of the working class as a privileged agent in the historical process of liberation (from psychotherapy as well here presumably) would be quite impossible. And Foucault’s own comments on sexuality and violence (particularly to decouple the two in relation to rape) seem antithetical to feminism, in particular to the kind of socialist feminism that is appealed to here. And if a Marxist account were taken seriously, then surely there would need to be also built into the narrative some redemptive humanist (here, of course, socialist humanist) vision of the creative emancipatory capacities of the human being, which is something that radical psychotherapists have tried to engage with and accentuate. That could then, if the traditional Marxist privileging of the working class as an agent of change (and the fetishisation of the capitalist state as the enemy) were to be questioned, open the way for an alliance with feminism, but this would surely still be an uneasy alliance.

Chapter 4: The Neurobiological Turn in Therapeutic Treatment: Salvation or Devastation?

Kenneth J. Gergen is Senior Research Professor in the Department of Psychology at Swarthmore College, Pennsylvania, USA. He has been awarded honorary doctorates by the University of Athens, Greece; Tilburg University, the Netherlands; and the Saybrook Institute, California, USA. He is a fellow of the Japan Society for the Promotion of Science, the World Academy of Art and Science and the Society of Experimental Social Psychology. He has been the recipient of many awards, the most recent being the Rollo May Award in 2013. His publications
include *Social Construction in Context* (2001), *Therapeutic Realities* (2006) and *Horizons in Buddhist Psychology* (2006). His most recent, *Relational Being: Beyond Self and Community* (2009), won both the PROSE Award and the Erving Goffman Award, and it has been translated into Danish, Chinese, Spanish and French.

**Abstract**

The mental health professions are turning increasingly to a neurobiological conception of human behaviour, and to pharmacological answers to complex problems of living. The movement is largely premised on the assumption that drugs are efficient and effective ‘cures’ for mental disturbance. This offering, however, touches first on some of the devastating results of this movement. These include not only a meteoric rise in unwarranted drug dependency but also a myopia with regard to the cultural context of ‘mental illness’, the increase in mechanical care routines, and the erosion of the kind of multi-party dialogue that is essential to the complex challenges that we confront. The chapter goes on to show how brain-based explanations of human behaviour are highly limited. Not only do neuroplasticity studies invite cultural as opposed to drug-based interventions, but the very reading of brain activity is essentially a recapitulation of cultural assumptions. Also, little of the activity that we diagnose as ‘mental disturbance’ can effectively be reduced to brain states. With these critiques in hand, the chapter briefly considers several proposals of more promising potential.

**Critique**

There are shortcomings in the present account and they do deserve attention in the following discussion. The first is the one-sided account of the pharmaceutical explosion in mental health. Clearly, for many people such drugs have been very helpful, even if alternatives to drugs have not been explored. When, where and in what ways pharmaceutical applications are useful, and to whom and for how long, are issues worthy of intense exploration. This same broadside critique of neuro-based explanations is also subject to challenge. The relationship between biochemical and cultural factors in determining what we call ‘mental disturbance’, and in determining the outcomes of both drug and ‘talking cures’, is enormously complex. The weight we give to these factors and their forms of relationship are also subject to change across history and culture. While I think that in the present context
strong critique is needed, the long-term hope is for mutually explorative dialogue.

Chapter 5: Personal versus Medical Meanings in Breakdown, Treatment and Recovery from ‘Schizophrenia’

Tom Cotton is a psychotherapist and filmmaker with a special interest in phenomenology and the construction of narrative. Between 2010 and 2012, he managed a residential therapeutic community for clients with a ‘schizophrenia’ diagnosis. His doctoral research, carried out at the Research Centre for Therapeutic Education at Roehampton University, UK, explores the psychotherapeutic experiences of people who have received a ‘schizophrenia’ diagnosis. He recently directed a half-hour documentary, *There Is a Fault in Reality* (2010), which explores three people’s experiences of ‘schizophrenia’.

Del Loewenthal See biographical notes for Chapter 1.

Abstract

This chapter explores some implications of psychotherapy, psychoanalysis and counselling for the treatment of ‘schizophrenia’. It is argued that its mainstream treatment is dominated by a medical model, modernist discourse, in which psychiatric and psychological aims have become merged in a psychotherapeutic treatment that is focused on symptom management. These aims have been endorsed by the National Institute for Health and Care Excellence’s (NICE) (2014) guidelines for the treatment of ‘schizophrenia’, despite, by their own measures, yielding a low rate of success.

In his heuristic (Moustakas 1990) doctoral research which explored first-hand experiences of ‘schizophrenia’ and psychotherapy, Cotton (2014) found that personal meaning – both the loss of and the restoration of – was central to the participants’ understanding of their ‘schizophrenic’ breakdown and subsequent recovery. In speaking about what was both helpful and unhelpful about their experiences of treatment, all participants found that psychotherapy that focused on symptom management was an obstacle to restoring personal meaning, and therefore, unwittingly, an obstacle to recovery. The types of psychotherapy that were most likely to adopt this therapy-as-symptom-management approach tended to be non-critical and non-reflective, and they emphasised technique and theory over relationship and critical thinking. It is argued that a psychotherapy that can maintain critical qualities may be one way of addressing this gap,
and facilitating a way of working more closely with the needs of those with the diagnosis, rather than the needs of those giving the diagnosis.

Critique
We explored the significance of personal meaning in the recovery from ‘schizophrenia’ and were critical of medical meaning and intervening care that seeks to dominate and control. We acknowledge that meaning can, of course, mean many things, and we have chosen to situate our definition of it in one discourse (Heidegger 2008). This reveals something of the wider postmodern and phenomenological psychotherapeutic discourses that we are ‘embedded’ in (Parker et al. 1995: 4) ourselves. While these discourses offer a way of both critiquing structures of modernist objective knowledge and understanding another’s meaning, we should not forget that they carry their own epistemological a priori assumptions that offer ample opportunity to get ‘caught up’. Similarly, in using the participants’ experiences as ‘evidence’, we acknowledge that we may be imposing our own assumptions of health. In combining these assumptions in the same ‘knowledge game’ that we are trying to deconstruct, we acknowledge that our critical approach may be no less an ‘uncaring violation’. We also acknowledge that the ‘conceptual flaccidity and generously inconclusive nature’ (Smail 2005: 12) of postmodern thought might appear to offer little comfort to those who are caught up in the anxiety of trying to deliver a mental health service for individuals who may be overwhelmingly distressed and distressing. However, by placing these concerns at the heart of our argument, rather than viewing them as inconvenient obstacles that require circumnavigation, it is hoped that what we are caught up in is more transparent and so can be used as a way of keeping thinking open (about both our anxiety and the anxiety of those whom we attempt to treat), rather than closing it down with totalising arguments. Such thinking seems to be a vitally important way of placing the needs of patients before the needs of the mental health system.

Chapter 6: Critical Theory and Psychotherapy

Anastasios Gaitanidis is Senior Lecturer in Counselling Psychology, Counselling and Psychotherapy and a member of the Research Centre for Therapeutic Education at the University of Roehampton, UK. He is also a psychodynamic psychotherapist in private practice. He is a member of the council of the Site for Contemporary Psychoanalysis and he sits on the editorial board of Sitegeist: A Journal of Psychoanalysis and
Philosophy. He has been a regular manuscript reviewer for several journals, including the European Journal of Psychotherapy & Counselling. He has published several articles on psychoanalysis and psychotherapy in peer-reviewed journals and he is the editor of two books: Narcissism – A Critical Reader (2007) and The Male in Analysis: Psychoanalytic and Cultural Perspectives (2011).

Abstract

This chapter critically examines the claim of the Frankfurt School that, in an alienated society, psychotherapy is destined to fail. According to these ‘critical theorists’, therapeutic ‘success’ amounts to the ‘normalisation’ of the patient, their adaptation to the ‘normal’ functioning of society, whereas the crucial achievement of critical theory is precisely its explanation of how mental distress results from the very structure of the existing social order. Therapy can only succeed in a society that has no need of it – that is, one that does not produce ‘mental alienation’. Here we have a special kind of ‘failed encounter’: psychotherapy is necessary where it is not possible and is only possible where it is no longer necessary. Psychotherapy needs to be neither accepted at face value nor ignored. Instead it should be employed in such a way as to both criticise existing forms of conformist psychotherapeutic practices and promote a form of radical psychotherapy which can provide the means by which patients can retrieve some of their ability to realise the extent of their alienation and fragmentation, recognise a small part of themselves in the fractured social mirror and try to find a way to build on it. It can never aspire to repair the damage done by a society that has seriously undermined the psychological wellbeing of its members.

Critique

In this chapter, I employ Walter Benjamin’s and Theodor Adorno’s critical analyses of the catastrophic nature of history, the importance of remembrance and redemption, and the destructive character of our post-Holocaust social reality so as to develop certain ideas which could enhance the radical social function of psychotherapeutic practices. However, what is problematic with this kind of cultural and social criticism is that it has become part of the official academic discourse, which is explicit in its very language, in the very gesture of knowledge and understanding of its analytical power of detachment. By attempting to situate itself outside the current social system and its uniformity, this kind of critical discourse participates in the very structures that it claims to attack by its very language patterns and analytical invulnerability.
How can critical theory avoid becoming part of the structures that it criticises? I believe that it should be critical not only of the previous and current philosophical and social systems but also of itself and its logic, of the tendency of any theoretical language to dominate its experiential content. Critical theory should not assume an intellectually superior and invulnerable position, but it should fully embrace its vulnerability when it speaks of the wounds that current society inflicts upon its subjects, the wounds that exploitative systems inflict upon nature, the wounds that we inflict upon each other and the wounds that we inflict on our bodies and minds in the process of civilisation. Critical theory must not only abstractly conceptualise the individual and collective suffering that is generated by our contemporary social system but also test its theories against the individual pain, tears and anger that psychotherapists daily face in their practices.

**Chapter 7: When Love Is Not All We Want: Queers, Singles and the Therapeutic Cult of Relationality**


_Adrian Cocking_ is a psychotherapist who is currently practising in Toronto, Canada. He holds an MEd in counselling psychology from the Ontario Institute for Studies in Education at the University of Toronto and a BA from the University of Victoria, Canada. He was the recipient of the 2013 Hallam Award of Excellence for his graduate work at the Mark S. Bonham Centre for Sexual Diversity Studies. His interests lie in working with marginalised populations, including the Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) and native communities.

**Abstract**

This chapter mobilises recent work in queer theory to question our society’s habitual valorisation of enduring intimate relationships –
particularly marriage – as the pinnacle of human life. Drawing on Sara Ahmed’s critique of socially dominant ‘happiness scripts’, Lauren Berlant’s critique of ‘cruel optimism’ and Michael Cobb’s critique of the (heteronormative) culture of coupledom, we ask analysts and therapists to consider the possibility that some patients might prefer alternative relational configurations. For instance, some might deem the enlivening ardency of short-term affairs to be more meaningful than relationship longevity and intersubjective security. Yet others might opt out of relationships altogether in an effort to find non-relational sources of fulfilment. Although our aim is not to denigrate relationality in any global sense, we wish to alert analysts and therapists to the possibility that their propensity to assume that close relational bonds are essential to ‘the good life’ may feel alienating to some patients. We argue that this attitude may cause some queers and many singles (whether queer or straight) to feel subtly judged for their failure to adhere to the relational norms of our society.

Critique
This chapter relies on recent queer theoretical critiques of social normativisation. As rich as these critiques are, they make it difficult to honour the healing ideals of the analytic and therapeutic process. At the core of this process resides the notion that damaging relational patterns from the past can be broken with the aid of supportive, mutually caring relationships in the present. From this perspective, intimate relationships facilitate intra- and interpsychic growth. One might consequently ask whether such growth becomes stunted in the absence of close relational bonds. Moreover, the so-called ‘antisocial thesis’ of queer theory – famously articulated by Lee Edelman in *No Future: Queer Theory and the Death Drive* (2004) – sets up a rigid binary between (bad) relationality and (good) anti-relationality, aligning queers with anti-relationality to such an extent that queers who value relationality become ostracised for their failure to be ‘properly queer’. Along related lines, the antisocial rejection of relationality can be traced back to a gay male subculture that valorises promiscuous sex at the expense of other relational possibilities, and that often, explicitly or implicitly, flees from ‘all things feminine’. Although we are here referring to how femininity has traditionally been constructed in our society rather than to any essential gendered predilection, it might still be possible to argue that in shunning the rewards of emotional intimacy, antisocial queer theory is on some level rejecting the contaminating ‘stain’ of femininity. Even though this chapter does not endorse the antisocial thesis specifically, the influence of this thesis on the rest of queer theory, and therefore
on our analysis, is undeniable. As a result, if we were to develop the arguments that we have advanced, we would need to confront the possibility that misogyny might quietly – but insidiously – nibble at the edges of our analysis.

Chapter 8: Relating to People as Revolutionaries

Lois Holzman is a passionate advocate for conceptual tools and community practices that empower people to transform the alienation and passivity of our culture. As a developmental psychologist and activist scholar, she promotes social therapeutics and other postmodern, culture-change approaches to human development and learning – crossing (and trying to dissolve) the borders that separate clinical, community and educational psychology, and between postmodern, critical and sociocultural theory and practice. She is Director of the East Side Institute, New York, USA, which she founded with the late Fred Newman, and chair of the biennial Performing the World conferences. Her dozen books range from the radically methodological *Unscientific Psychology: A Cultural-Performatory Approach to Understanding Human Life* (with Newman, 2006) to *Vygotsky at Work and Play* (2008), an intellectual-personal history of social therapeutics and its community of human development projects. She is a regular commentator on the website *Psychology Today* (‘A Conceptual Revolution’) and the blog Psychology of Becoming.

Abstract

This chapter is an invitation to go beyond the critical and to create practical-critical psychotherapy and counselling approaches. The 40-year practice of social therapy serves to illustrate practical-critical psychotherapy. It is a group approach that engages the alienation and authoritarian commodification of contemporary life by relating to people as revolutionaries – that is, as social beings who are engaged in the process of always becoming, as capable of going beyond their societal identities and performing as world-historic in everyday matters. The contributions of Marx and Vygotsky to social therapy as an ontological, and not merely an epistemological, critique of the psychological and psychotherapeutic mainstream are discussed.

Critique

Social therapy has been controversial since its earliest days. It has been attacked from the political and psychological right for mixing politics
and therapy and for violating therapeutic boundaries. We have used these attacks as opportunities to raise the assumptions that underlie them, such as that a person automatically becomes vulnerable once they seek therapy. More to the point here, however, is what has caused concern and generated lively dialogue among those with a critical perspective. I will comment on one of these concerns that gets to the heart of our methodology and our politics (and may well have come up for readers of this volume).

As a methodology, social therapy is open-ended, non-objectivist and non-interpretive. If we relate to people as revolutionaries, as always becoming, if our focus is on people developing, and for us development is qualitative transformation of what there is into something new, the question is: Becoming what and developing how? The concern is that ‘Development can then go “in the wrong direction” – people could transform into gang members or into right wingers.’ Indeed, they might. While that hasn’t been our experience, I think what makes critical psychologists and psychotherapists uncomfortable is that our approach is non-ideological. We neither adjust people to the world as ‘it is’ or is officially described, nor offer an alternative description or interpretation or story. The point, as Marx pointed out, is not to interpret the world but to change it, which is why we relate to all people as revolutionaries – that is, as changemakers.

Chapter 9: Work in Contemporary Capitalism

Michael Rustin is Professor of Sociology at the University of East London, UK, where he was formerly Head of Department of Sociology and Dean of the Social Sciences Faculty. He is Visiting Professor at the Tavistock Clinic, where he has contributed to the development of many university-accredited programmes in the field of psychotherapy and community mental health. He has written about the relations between psychoanalysis and various aspects of society, politics and culture, and about other sociological and political topics. He is the author of For a Pluralist Socialism (1985), The Good Society and the Inner World (1991) and Reason and Unreason: Psychoanalysis, Science and Politics (2002), as well as Narratives of Love and Loss, Mirror to Nature (with Margaret Rustin, 2001), The Inner World of Doctor Who (with Iain MacRury, 2013) and Social Defences against Anxiety: Explorations in a Paradigm (co-edited with David Armstrong, 2014). He is an associate of the British Psychoanalytical Society. He is a founding editor of Soundings and an author/editor of the journal The Kilburn Manifesto.
Abstract
The argument of this chapter is that work acquired its centrality as a source of value, creativity and entitlement under capitalism. In ancient world and feudal societies, most labour was undertaken by slaves or serfs (or similarly disregarded women) and was assigned little positive significance. Work within capitalism has been defined in two contrasting ways. Within classical economics, it was regarded instrumentally, as a mere ‘factor of production’. The ‘free’ labour contract was deemed to consist of a sacrifice of freedom and happiness in return for a material reward. The pains of work were supposed to be compensated for by the satisfactions of consumption, which became increasingly salient with enhanced prosperity. But in an opposing romantic or expressive tradition, work was regarded as of intrinsic value, as a form of self-expression and self-realisation. Advocates of this conception, such as Marx, Ruskin and Morris, drew on conceptions of medieval craftsmanship in their critiques of degraded forms of industrial labour. During the 1960s and 1970s, vigorous debates took place about the nature and quality of work, within contributions from many sources, from the early Marx to the Tavistock Institute of Human Relations. But instrumental conceptions of labour have been reasserted during the ascendancy of neoliberalism since the 1980s, now with especial force given the prevailing anxieties about the competitive viability of economies. At a time when it would be highly desirable to reorient debate towards more qualitative and expressive conceptions of work and wellbeing, dominant economic concerns are of a different kind. The chapter concludes by asking what space can be found in contemporary society for a renewal of interest in the quality of working lives.

Critique
This chapter is mainly concerned with the ideas and values which frame our understanding of work, and how these have developed historically. It has much less to say about the empirical realities of contemporary labour markets and how they are changing shape. In fact, in recent decades there has been a diminution of the middle levels of the labour force in terms of degrees of skill and remuneration, and in both manual and non-manual forms of employment. Just as machines have reduced the demand for skilled manual workers, so computers have displaced skilled workers in the white collar (and increasingly the professional) sector. Most new employment which becomes available is thus
of a minimum wage, low-skill kind (for example in fast food, shelf-stacking or hotel cleaning), while there remains an echelon of highly paid and skilled employment at the top of the labour market. This leads to increasing inequalities and threats to social solidarity, and also to a ‘demand deficit’ in the economy such as contributed to the 2007–2008 financial crash (through the subprime mortgage crisis) and to the sluggishness of the economic recovery. Rather, as Marx foretold, this tendency embodies an innate contradiction – changes in the system of production – greater capital intensivity and the displacement of labour, which are meant to enhance economic wellbeing, in fact lessen it and engender conflict. These developments also have implications for generational inequity (high levels of youth unemployment, especially in southern Europe), and for regional inequality too. Finally, the prospect held out in the chapter, for work in postindustrial societies to acquire greater expressive meaning, is severely undermined when the skilled forms of work, where intrinsic meaning is most often found, are squeezed out in a sometimes desperate quest to maintain competitive advantage.

Chapter 10: Everything You Always Wanted to Know about Therapy (But Were Afraid to Ask): Fragments of a Critical Psychotherapy

Andrew Samuels is Professor of Analytical Psychology at the University of Essex, UK, and he holds visiting chairs at New York, Goldsmiths, Roehampton and Macau. He works internationally as a political consultant. He is a training analyst of the Society of Analytical Psychology and in private practice in London. He was chair of the United Kingdom Council for Psychotherapy (2009–2012), a founder board member of the International Association for Relational Psychoanalysis and Psychotherapy and co-founder of Psychotherapists and Counsellors for Social Responsibility. His books have been translated into 19 languages, including, most recently, *Relational Psychotherapy, Psychoanalysis and Counselling* (co-edited with Del Loewenthal, 2014) and *Persons, Passions, Psychotherapy, Politics* (2014).

Abstract

Three seemingly consensual propositions concerning psychotherapy and counselling are examined critically. All turn out to be unreliable, tendentious and even damaging. First, psychotherapy and counselling can be free and independent professions provided that therapists, acting together, fight for them to be that way. Second, psychotherapy and counselling are private and personal activities, operating in the realms
of feelings and emotions – the psyche, the unconscious, affects rooted in the body. Above all other factors, the single most important thing is the therapy relationship between two people. Third, psychotherapy and counselling are vocations, not jobs. Therapists are not simply motivated by money. In developing critiques of these propositions, the chapter utilises social, political and economic perspectives. It reviews new clinical thinking on the active role of the client in therapeutic process and suggests that a turn to the legendary figure of the trickster might be of benefit to the field. The chapter locates its arguments in the author’s experience of the politics and practices of psychotherapy and counselling, and engages in self-criticism.

Critique

How ‘critical’ can an insider be? Can one ever critique the bubble when one is inside it? This is a point that I raised in my chapter. The therapy system has been good to me on the whole. Even the various campaigns that I have led, such as the one to end the discrimination against members of gender and sexual minorities in terms of psychoanalytic training, have, in the end, added a shadowy degree of lustre to my name. So, being self-critical, it is easy for me to kibitz, even to grandstand. Another piece of self-reflection would be that, in what I have written, I am merely pissing in the wind. Numerous developments of a political, economic and regulatory nature mean that psychotherapy and counselling as we know them these days, never mind these critical versions, are completely doomed. It is time to hang up one’s interpretations. Then my critics could question my right to be critical. Although I do work in a university for some of my time and also do consultancy work, I am primarily a Jungian analyst in well-paid private practice. A few low-cost clients don’t alter this one bit. And I am a white, middle-class, middle-aged heterosexual man (being Jewish is scarcely a disadvantage in this field). What can I possibly know from the inside about other kinds of therapy in quite different situations? Only such a patriarch would propose a ‘Hermetic spontaneity’ as any kind of solution to the manifold ills from which contemporary counselling and psychotherapy suffer.

Chapter 11: Critical Priorities for the Psychotherapy and Counselling Community

Colin Feltham is Emeritus Professor of Critical Counselling Studies, Sheffield Hallam University, UK, and External Associate Professor of Humanistic Psychology, University of Southern Denmark. He currently teaches, writes, examines and consults in the UK, Ireland and Denmark.

**Abstract**

This chapter examines what critical thinking is for the field of psychotherapy and counselling by taking a particular, subject-specific position regarding ‘thinking and theorising’. It then poses certain questions about the general neglect of critical thinking and possible reasons for this. Subsequently, suggestions are made for what we might consider some critical priorities for the field – aetiology of distress, competing models, the outcome question, professional issues, training and employment, disciplinary stances and the scope and limits of the field. The author positions himself as a depressive realist with severe reservations about the claims of psychotherapy and counselling, and he attempts to distinguish between accusations of cynicism against his arguments, and fair critique. Problems of class and politics relevant to therapy are surfaced, and the romantic optimism of the field is critiqued. Doubts about the profession’s desire and ability make any radical changes are raised. The problematic influences of academia are also focused upon. The critique here extends to those who are perceived as offering somewhat impotent critical analyses of the field from various ‘phenomenological silos’ and ‘critical coteries’.

**Critique**

Arguments that can be made against my own are these. I am projecting my own unresolved depressive problems in the form of idealisation and disappointment: the profession should be a certain way, just as my mother should have been all that she was not. I fail to appreciate actual gains in the profession due to my all-or-nothing style of thinking. I secretly harbour the belief that if only my opponents would listen to me, and see how perceptive I am, I would be the hero of the piece and rightfully sit alongside Freud or Rogers. I am consumed with envy and cannot feel gratitude. I denigrate the aims and achievements of other reformers because I am unable to be a hopeful team player. I may read extensively and produce some undisciplined intellectual objections
but these are all defences against some disowned, devastating feeling locked away inside myself. I fail to understand the realities of gradual professional progress and necessity – how long change takes, what negotiations have to take place – because I am naïve and impatient, incapable of delayed gratification. I do not appreciate what the Enlightenment has done for us, nor what capitalism and anti-capitalism do for us, because nothing can ever compensate for my unloved inner child. I am a cryptomisanthropist, a schizoid outsider. I do not put forward any workable alternatives (although the term ‘criticocreative thinking’ suggests that critical thinking implicitly prompts new practices). But some will generously concede a few of my arguments and oppose others, in the spirit of leisurely collegial debate. We all see ourselves as reasonable but I suspect that entrenched subjectivities and tribal loyalties inevitably have the last word. When I am being authentic, I have to say that even after this reflection I think I am right.

Chapter 12: The Deleuzian Project

Chris Oakley is a psychoanalyst working in private practice in London. For many years, he was a member of the Philadelphia Association before leaving to join the Site for Contemporary Psychoanalysis. He has contributed to various books and journals, his latest being to *R.D. Laing: 50 Years since The Divided Self* (2012), while his book *Football Delirium* (2007) came third in the 2008 Football Book of the Year.

Abstract

This chapter is an attempt to draw together disparate strands of the Deleuzian project (not to forget Guattari) with particular emphasis on the questions that are raised for psychoanalysis. In so many ways, Deleuze and Guattari propose a fundamental rupture of the transcendental tendencies of Lacan exemplified by his wretched insistence on lack and his fiction of the pure signifier. Deleuze repeatedly upheld the unconscious to be primarily entangled in the production of flows – desire always already being seen as a productive force, while simultaneously being potentially ensnared by the anaesthetising insistencies of our capitalist world. Glimpsed through the prism of our sexual desire, we may explore his unrelenting concern with our predilection for ‘deplorable’ capture, our subjugation of the multiple possibilities of our being, ultimately ‘territorialised’ into manageable doses of pleasure. Aided and abetted by psychoanalysis’s Oedipal recoding, we submit as the docile body. This is particularly portrayed as the commodification
of our desire by pornography, all converging on the valorisation of the ‘money shot’. For Deleuze and Guattari, this is a hyperinsistence of our machinic enslavement, underpinned by the demands of representation, whether this is with regard to our pathetic concern with identity or with the form that enjoyment takes. Schizoanalysis becomes emblematic of a countervalence, an attempt to move beyond the stifling production of slavish reproduction, a breaking free from the Oedipal handcuffing of psychoanalysis to facilitate the random, the surprise, the unspeakable. This is the Deleuzian rallying call.

Critique

Any essay that contains within it the suggestion that it might be possible to engage in the emancipation from the very pleasures that enslave runs a veritable risk of being accused of being both an instance of paranoid knowledge and informed by a will to ignorance regarding what psychoanalysis brings to the table: Paranoid knowledge not merely as exemplifying the delights of conspiracy theorists but rather a willingness ‘to install oneself at the limit, at a particular horizon, in the desert, the subject of a deterritorialized knowledge that links him (or her) directly to God…(making) it possible to judge life and survey the earth from above’. And who suggests that this is one of the first principles of paranoid knowledge? None other than Deleuze and Guattari. But back to what psychoanalysis brings to the table: Can we really be that surprised that they too have an insistent blind spot with regard to what they just go on enjoying too much? Just like the rest of us really.

Chapter 13: Psychoanalysis and the Event of Resistance

Steven Groarke is Professor of Social Thought at Roehampton University, UK, and a member of the British Psycho-Analytical Society and the International Psychoanalytical Association. He has held honorary appointments with Central and North West London Mental Health NHS Trust at Parkside Clinic and St. Charles Hospital, and he currently works in private practice in London. He is the author of Managed Lives: Psychoanalysis, Inner Security and the Social Order (2013) and has recently contributed to a definitive scholarly edition of the Collected Writings of D.W. Winnicott (2015).

Abstract

What does psychoanalysis contribute to our understanding of resistance? How far does this provide the possibility of rethinking the politics
of psychoanalysis? This chapter argues that the concept of resistance (Widerstand) has a wider critical range when it is worked through, rather than pitted against, Freud and psychoanalysis. It presents this argument in the form of a commentary on the three lectures, from the early 1990s, collected in Derrida’s Résistances de la psychanalyse (1996). Taken together, Derrida’s lectures on Freud, Lacan and Foucault highlight various ways in which psychoanalysis may be seen as a resistance to itself, and the chapter links this idea to a series of controversial discussions in the Freudian interpretation. The author’s discussion of these controversies focuses in turn on the hermeneutics of reason; being-towards-death (Sein zum Tode) and the repetition compulsion; and the ambivalence of unreason. The main argument here is that psychoanalysis’s resistance to itself constitutes the conditions of possibility for a critical psychoanalysis.

Critique
I am probably not best placed to comment on my blind spots so will rely on others as always to point these out to me. However, my main argument that Freudian psychoanalysis provides an invaluable critical and political resource is open to criticism on several counts. First, I don’t provide a comprehensive overview of critical perspectives, which could leave my account looking very one-sided. Second, I don’t mention even the most prominent contributions to Freudian politics, particularly that of the Frankfurt School. Third, while I refer in brief to institutional politics, I don’t provide detailed or in-depth examples. Fourth, although I acknowledge the extent to which psychoanalysis has been co-opted onto the side of social administration in the final part of the chapter, once again I don’t follow up in any detail on the critique of Freud and psychoanalysis by the likes of Donzelot and others. Finally, I limit my account of Freud’s radicalism to the implications of his own thought, whereas a further argument could be made for the relationship between psychoanalysis and other traditions of radical thought.

Chapter 14: Psychology, Psychotherapy – Coming to Our Senses?
Paul Moloney is a counselling psychologist. He has worked for 15 years in the NHS. A former social worker and associate lecturer with the Open University, he is a founder member of the Midlands Psychology Group, a close-knit collection of academic and therapeutic psychologists who are dedicated to questioning the assumptions of mainstream therapeutic psychology. He is the author of The Therapy Industry (2013), a critical
examination of the science, practice and politics of talking therapy in the UK and the USA.

Abstract

Critical scrutiny of the evidence base in support of the practice and theory of the talking therapies shows that it suffers from serious and systematic methodological flaws, to the extent that it is rational to conclude that the vast majority of psychological treatments, including the most popular brands, are indistinguishable from well-designed placebos. Researchers and theorists have ignored this issue because it is professionally inconvenient and because it challenges the neoliberal orthodoxy of our time, which says that if we are miserable or confused then it is we alone rather than our socially noxious surroundings that are to blame. With a little help from an expert, we supposedly have the mental powers to extricate ourselves. This fashionable belief, which the late David Smail called ‘magical voluntarism’ (Smail 2005), benefits those who gain most from an exploitative social system. However, the talking treatments reflect more than shape the power structures of our world. Neither a more honest recognition of their limitations nor the creation of more thoughtful and rigorous approaches to researching them are likely to flourish until those power structures themselves begin to change.

Critique

Perhaps the most obvious critique would be to cite the reams of research which claim to show that talking therapy is effective, a reliable technology of personal change. This is a familiar rhetorical manoeuvre: the heaping-up of marginal, contradictory and questionable findings to create a mountain of conviction that – upon closer scrutiny – becomes a pile of bric-a-brac. A more interesting criticism might be to focus upon the drawbacks of the randomised control trial (RCT) approach. The interactions between clients, therapists, techniques and treatment settings are perhaps dynamic, subtle and complex enough to elude the coarse net of the standardised medical research trial – a method suited to the evaluation of inert and easily administered physical treatments, such as pills. On this view, I have been attacking a straw man. However, within Western culture (and increasingly many others), this man wields far too much power and authority. He is worth demolishing. Moreover, the key conclusions – that talking therapy cannot free people from the burden of their own biography, nor from the grip of a noxious environment – remain, supported by a large epidemiological literature on the causes of distress, and by the accounts of those therapists and clients
who have courageously confronted the limitations of the therapy trade. As far as the academic world is concerned, critical voices are few, and unwelcome. Epstein's work, for example, has been largely ignored for the last 25 years, and few have followed in his footsteps. Much of the university sector has become a commercial industry, increasingly closed to anyone who questions the business values that dominate it. To the extent that talking therapy is itself a business and shares the values (or illusions) of consumer capitalism, the signs are not encouraging.

Chapter 15: Contesting the Curriculum: Counsellor Education in a Postmodern and Medicalising Era?

Tom Strong is Professor and Counsellor-educator at the University of Calgary, Canada, who researches and writes about the collaborative, critically informed and practical potentials of discursive approaches to psychotherapy. He is the author or co-author of over 100 articles and chapters, he is the co-author of Discursive Perspectives on Therapeutic Practice (with Andy Lock, 2012) and of Social Constructionism: Sources and Stirrings in Theory and Practice (with David Paré, 2010) and Furthering Talk: Advances in the Discursive Therapies (2012). His most recent co-edited book is Patterns in Interpersonal Interactions: Inviting Relational Understandings for Therapeutic Change (with Karl Tomm, Sally St. George and Dan Wulff, 2014). His current research focuses on medicalising tensions in counsellor education.

Karen H. Ross is a doctoral student in counselling psychology at the University of Calgary, Canada. Her research explores how different discourses of 'mental health', such as those found in public health campaigns, institutional policies and popular culture, shape options for problem-solving and identity construction, particularly among young people. She is also interested in the intersection of self-help, governmentality and technology in modern neoliberal societies. She completed her master's degree at the University of Toronto, with a thesis focusing on the experience of losing faith in fundamentalist Christianity. She volunteers with community-building initiatives and cultural arts programmes in Calgary, and she is a strong believer in making academic scholarship accessible and relevant to the general public. She was recently awarded a Scholarship for Creative Marketing and Communications and she received funding for her doctoral research from the Social Sciences and Humanities Research Council of Canada.

Konstantinos Chondros is a native of Greece and has lived in Calgary, Canada, since 2011. After completing his Bachelor of Arts Honours in
psychology at the University of Crete, Greece, he went on to receive his Master of Science in counselling psychology from the University of Calgary. During his undergraduate and graduate studies, he received numerous scholarships and awards for his strong academic performance, including the State Scholarships Foundation award for graduating at the top of his undergraduate class and the Lilian Voudouri Foundation scholarship for pursuing a graduate degree abroad. His academic interests revolve around the areas of community psychology, multiculturalism and social justice, human sexuality, feminist-informed research and qualitative inquiry. In terms of his professional interests, he identifies as a pluralistic counsellor who is highly influenced by postmodern ideas. He began his doctorate in counselling psychology at the University of Calgary in September 2014.

Monica Sesma-Vazquez is a social constructionist psychotherapist and supervisor. She was born in Mexico City where she pursued studies (bachelor’s, master’s and PhD) in psychology and several specialisations as an individual, couple and systemic family therapist. She was a professor in three universities in Mexico City (Universidad de Londres, Universidad de las Americas and Alliant International University) where she supervised and taught postmodern therapies in graduate programmes. Currently, she is a postdoctoral fellow at Werklund School of Education, University of Calgary, Canada. Her research projects focus on examining discourses around psychiatric diagnosis and medicalisation as these occur between individuals/families and professionals within the therapeutic space. Her research interests include how families and their children perform ‘psychiatric’ meanings and understandings in social interactions, and how these performances shape their relationships and experiences. She is a Taos Institute associate and a Houston Galveston Institute faculty member.

Abstract

The psychiatric classification system of DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, version 5) has become a default commercial and scientific language for helping professionals, especially when it is coupled with evidence-based interventions for addressing human concerns that are understood as diagnosed disorders. Counselors, however, have traditionally responded – conversationally – to their clients’ concerns by drawing from diverse discourses of practice. This is even more the case now that the field of counselling offers popular new postmodern approaches. Tensions between these medicalising
developments, pluralistic traditions and postmodern sensitivities in counselling make counsellor education an interesting context of study. From critical document and website reviews, the authors use situational analysis to map medicalising tensions to shape contemporary counsellor education. Their aim is to draw attention to how curricular tensions associated with DSM-5 use may challenge the pluralism that has long been associated with counselling and counsellor education.

**Critique**

**Negatives**

- We have been selective in researching our archival documents, focusing on medicalising while not contrasting it with the broader literature. While we have aimed to capture a growing (medicalising, or diagnose and treat) phenomenon in the publicly documented literature and media associated with counsellor education, the general counselling literature has also been growing.
- We have questioned the scientific basis for counselling and counsellor education, because that basis has largely been undertaken in medical ways, but we have offered no alternative way of assuring public/student confidence in what constitutes good or effective counselling.
- We approach systematising counselling into manuals based on pre-defined client concerns/pre-specified interventions as reducing or obscuring the complexity and generative possibilities of counselling when many regard this as essential for good practice and teaching good practice.

**Positives**

- We raise awareness of how counsellors and counsellor educators face a narrowing of ways in which they can be helpful while possibly being complicit in an expanding medicalisation of counselling and counsellor education. This medicalising direction plays into pharmaceutical concerns that date back to Aldous Huxley and carry forward to Robert Whitaker's *Anatomy of an Epidemic*.
- We contest a medical focus on vulnerabilities and symptoms as a good thing. In counselling and counsellor education, this can lead to failing to attend to clients’ preferences and resourcefulness. There is a related iatrogenic effect that all of this has in furthering what Furedi has called a therapy culture.
• We accept a medicalising discourse as one discourse of practice, being concerned that it could dominate counsellor practice and education, and compromise the pluralistic traditions and creative growth of new approaches in counselling. Counsellors and counsellor trainees are further off, in our view, when they can draw on multiple theoretical approaches.

Chapter 16: Systemic Means to Subversive Ends: Maintaining the Therapeutic Space as a Unique Encounter

Jay Watts is a clinical psychologist and psychotherapist working from systemic and Lacanian orientations. She is an honorary senior research fellow at Queen Mary University of London, UK, as well as being in full-time private practice. She has held a number of senior academic and NHS posts, including leading early intervention in psychosis and integrative psychotherapy teams, heading research for an NHS Trust and developing teaching modules as Senior Lecturer in Counselling Psychology at City University. She continues to teach on a number of clinical and counselling psychology courses and has published widely. She is the Practice Editor for the European Journal for Counselling & Psychotherapy and is foreign correspondent for the website Mad in America.

Abstract

Psychotherapy has become a marketplace for an increasing number of approaches, many with wildly different perspectives on what it means to suffer, or even whether an approach focused on cure is possible. This chapter argues that within this marketplace the growth of an ideology that privileges notions of ‘illness’, ‘cure’ and ‘evidence-based treatment’ can be problematic for the critical practitioner who wishes to maintain space for more subversive approaches. There is also concern that academic training programmes being increasingly subject to external pressure, there is a move to the mainstream and away from critical thinking. The author describes how she incorporated systemic techniques and ideas into a doctoral training programme in order to help to maintain a space for practice-driven psychotherapy to flourish. These include facilitating a tolerance of uncertainty, of challenging trainees’ mindsets and of connecting with the psychiatric survivor movement. The author suggests that we either see ourselves as trapped and excluded by the dominant culture, or we recognise the extraordinary work that is going on in the survivor movement and in cyberspace and draw these into our everyday psy interactions. If we choose the latter, we
can produce spaces that may incorporate multiple stories on ‘evidence’, ‘illness’ and the other signifiers that otherwise threaten to colonise us.

**Critique**

This chapter reflects a belief that critical practitioners must retain a thinking, questioning presence in training and state-influenced institutions such as academia and the NHS to reach the most disenfranchised in society whose suffering appears in police cells, acute psychiatric wards and GPs’ surgeries. My aim here is to encourage trainees to use their considerable social power to connect such patients to emancipatory movements such as the Hearing Voices Network, which, situated outside the state and regulatory movements, can act from a more radical perspective. Yet I also wonder if we should ‘give up the ghost’ of what is possible in professions that are either regulated by the New Public Management agenda or willing to become complicit with it and the power/money/status that it brings. I have a deep suspicion of the hyper-theoretical nature of critical thinking in the UK, worried that we can fall into just writing papers to one another, but I wonder if the position that I take in my chapter and work is too much of a compromise.

Is the attack on thinking space within academia a good opportunity, actually, to kick ourselves out of that safety and radicalise again? I wonder if we shouldn’t renew interest in community therapy movements and their links to community-based social movements. Is it not the legacies of Freire, Martín-Baró and others from the South American liberation psychology movements that are the most alive examples of living critical practice? Do we not hear the whispers of possibility here in recent movements such as OCCUPY? Given that we know that formal training can hinder as well as help the formation of critical practitioners, is the future not rather in considering formations in talking sites away from the mainstream that connect the individual and social? And will social media allow us to connect the most disenfranchised to our new locations, side-stepping involvement in the mainstream entirely? These questions I debate with myself most weeks.

**Chapter 17: Psychotherapy, Psychoanalysis and Counselling for Oppressors and Oppressed: Sex, Violence and Ideology in Practice?**

**Del Loewenthal** Please see biographical notes for Chapter 1.

**Abstract**

It is concluded that threats to our providing a therapeutic confidential space must be resisted; the training of talking therapists should
include sociology, anthropology and political economy; we should not be seduced by either a medical model or neurobiology; RCTs are an absurdity; state intervention and DSM-5 threaten the pluralism of our approaches; we need multiple stories of signifiers that otherwise threaten to colonise us; clients need the option to explore personal meaning; talking therapists need to recognise their and others’ sexuality and violence, and question values, such as the need for close relational bonds; our approaches need to affect our and others’ being and the quality of our working lives; we need to disobey normal rules and conventional behaviour and not merely talk in rarified jargon; psychotherapy and our sexual desire are interwoven with capitalism; state regulation may give new capacities for resistance; talking therapists can be more the problem than the solution; to be critical we need theories outside the talking therapies, yet to give primacy to our work as cultural practices; and in using ‘critical’ rather than ‘radical’, politics can get replaced by scepticism, and capitalism by modernity.

Overall, there are two key forces for psychotherapists to interpret in order to help to release clients from their bonds. The first involves the individual’s denial of uncomfortable thoughts, fantasies and dreams. The second concerns the ideologies of those who do not want the managed to understand how this is done. These forces are explored in terms of individual responsibility versus social and economic contexts with regard to sex, violence and ideology through case study vignettes. There is an unfortunate need for critical psychotherapy, psychoanalysis and counselling as this is probably the best that can be permitted in neoliberal capitalism on the understanding that it allows some possibilities so long as it doesn’t change the world.

Critique

With regard to the final chapter, perhaps a main criticism here is that a conclusion is reached which could possibly have been stated in Chapter 1 and then developed from there. Also, implications for practice lack much in the way of substantial case studies, although this might be the basis of a subsequent book. Perhaps a more fundamental criticism is that this volume doesn’t really go into depth regarding Marxist and related philosophical texts, yet it is hoped that my more introductory approach to such areas will help interested practitioners and students to gain some insight into areas such as capital governance, power and social inequalities that weren’t, and aren’t, being covered in most trainings. A further criticism is that the book focuses on very traditional Western approaches to the talking therapies and does not
cover approaches from other cultures including the effects of race and religion.

References


