

Review: Dr Terence W. Campbell, *Beware the Talking Cure: Psychotherapy May Be Hazardous to Your Mental Health*, Upton Books, Boca Raton, FL, 1994

Pages: 265

More Dangerous Than Cocaine

Ubiquitous in the ‘enlightened’ West, psychotherapy is one of the greatest pseudoscientific religious forces there is. The various schools (analytical, client-centred, and behavioural) all have their ideas, but the only common factor is the therapist-client relationship. The ‘therapy’ quickly becomes one of a power struggle in which the client must submit to the godlike therapist.

Such a system can only make psychological distress worse. What is even more evil is the damage done to family and spousal relationships from “parentectomies” and character assassinations carried out from the consulting office.

This is a must read for anyone involved in the psychotherapy industry, or considering ‘treatment’. It is also a marvel that Pastors refer Christians to see therapists.

Preface (pp. i-iv)

Different people prefer different therapists, which indicates the discipline is subjective.

I) A Psychotherapy Tragedy (pp. 1-6)

Repetitious reminders of anger do not resolve it.

Children of divorce are motivated to keep their families intact.

II) Is Psychotherapy Effective? (pp. 7-14)

In 1987, 15M people in the US made 120M psychotherapy visits.

A “working alliance” is when the patient is properly indoctrinated with his role in the therapy.

With a few exceptions, there is no evidence of any psychotherapy (PT) technique effectiveness.

Since the only factor in common across patients is the patient-therapist relation, researchers conclude this is the critical outcomes factor.

III) Training in Psychotherapy (pp. 15-19)

Therapists train alone in rooms with patients; there is no supervision.

UCLA advanced graduates are no more competent than novices.

Traditional PT is merely purchase of companionship, “rent-a-friend”.

IV) Relationships: For better... (pp. 20-25)

PT enjoys an appearance of success due to the placebo effect.

Therapist worship and addiction are sadly too common, and may even deserve classification like a controlled substance.

Long-term PT is in reality a compensatory relationship for the patient.

V) Relationships ... for Worse (pp. 26-32)

Clients who focus on their strengths resolve issues faster.

VI) Beyond the Talking Cure (pp. 33-39)

Analytic therapists get clients to speak of their dreams and fantasies; humanistics ask about feelings and emotions; and behaviouralists specific actions. Such approaches merely help fill in a fifty-minute session.

The threat of a PT paradigm shift instills fear of professional obsolescence in psychotherapists.

Sessions may simply wander aimlessly.

VII) Who Practises Psychotherapy? (pp. 40-50)

“A psychiatrist is one trained in medicine who doesn’t practise, while practising psychology in which he is not trained”. [p44]

False negatives occur when therapists discount physical problems and disease as root causes.

“Reactance” is the readiness of client to submit to therapist.

VIII) Psychoanalytic Psychotherapy and Insight (pp. 51-60)

Analytic Theory (AT) holds distress the result of unresolved childhood conflicts. Clients then act out because of their “id”.

The superego is the results of the child’s formative relationship with his parents.

Reason and logic only operate within the ego.

Freudian theory holds sexual repression jeopardises the ego’s welfare; anxiety corresponds to conflict intensity which can become a disorder. Insight only arises once the conflict is understood in depth.

“Free association” requires clients to disclose all thoughts and feelings to their therapists.

43% of clinical psychologists are said to be Freudian.

“Transference relationship” is when clients demand the therapist to abandon his distant role.

IX) Analytical Therapy: The Failures of Insight (pp. 61-70)

The average client has 280 sessions!

People tend to distort their interpretation of past events.

“Science” and “psychoanalysis” are mutually exclusive terms.

X) Client Centered Humanistic Psychotherapy: Therapy as Art (pp. 71-78)

Carl Rogers created ‘Rogerian theory of humanistic theory (HT) ’ in *Client-Centred Therapy* (1951). He rejected AT and held the core of man’s nature was good and rational.

HT emphasises: “We are ... largely disassociated from our bodies and terrified of feeling or movement that occurs in our bodies.”

HT believes it wise, “to lose your mind and come to your senses”.

Effective HT relies on who the client is, not what they do.

XI) Client-Centred Humanistic Therapy: The Failures of Inspiration (pp. 79-86)

Optimistic feelings rapidly wane when big problems arise.

XII) Behaviour Therapy: Science and Psychotherapy (pp. 80-93)

BT therapists aim to modify stimulus control patterns.

Joseph Wolpe developed desensitisation, and B.F. Skinner reinforcement.

Wolpe’s procedures are called “counterconditioning”.

XIII) Behaviour Therapy: the Failures of Tunnel Vision (pp. 94-102)

The majority of agoraphobics are married females.

XIV) Therapist as Friend and Foe (pp. 103-114)

The aloof therapist will have little placebo effectiveness.

AT therapists continuously dwell on client defensiveness, which they themselves create!

Mere talking does nothing to resolve problems, as evidenced by business committees which never produce tangible outcomes.

XV) Therapist as God (pp. 115-126)

Therapy can become self-perpetuating.

“Passion restrained is often passion intensified”.

Therapists can use diagnostic labels as weapons for frustrating clients.

XVI) Therapist as Interloper (pp. 127-137)

PT encourages “parent bashing” and character assassination of other individuals.

“Blame-and-change” blames the parent to change the client!

Some therapists advocate “parentectomies”.

XVII) Therapist as Substitute Parent (pp. 138-150)

XVIII) Therapist as Substitute Spouse (pp. 151-162)

HT will often conclude a client has simply “outgrown” his marriage and must get a divorce.

XIX) Therapist as Saviour (pp. 163-169)

A virtuous victim holds greater appeal to a client than an incompetent failure.

XX) Therapist as Prosecutor (pp. 170-182)

14% of those in an auto accident could not recall it a year later (n=500).
After age 10, people rarely remember events before 3 or 4.

Memory verification relies more on imagination than reality.

XXI) Analytic Goals: Bait-and-Switch in Practice (pp. 183-194)

Confused clients makes the therapist's job easier.

XXII) Client-Centered Humanistic Goals: Enshrining the Placebo (pp. 195-204)

XXIII) Behaviour Goals: Negative Outcomes and Fortuitous Results (pp. 205-211)

XXIV) Traditional Psychotherapy and Effective Alternatives (pp. 212-223)

Sans major life changes, no therapist is able to alleviate psychological distress.

XXV) A Role for the Family (pp. 224-234)

XXVI) Effective Psychotherapy (pp. 235-242)

XXVII) Truth and Consequences (pp. 243-246)

Afterword: Hiring and Firing a Therapist (pp. 247-251)