

Working with Difficult Clients: A Practical Guide to Better Therapy.

Richard G. Whiteside & Frances E. Steinberg. Auckland, New Zealand, Piha Healing Arts Centre Publications, 2000.

Soft Cover. pp. 145. ISBN: 0-473-07033-2. \$30 AUD or NZD.

The reader of this book is at risk of having their faith in eclecticism restored. Drawing from systemic, narrative and cognitive behavioural therapies (which are not necessarily as disparate as some may argue), and other theoretical models, the authors have presented their discussion and suggestions within a systemic framework that is inherently supportive of considered practice.

'Difficult Clients' mean different things to different practitioners, but cause us to reconsider our work, the clients' needs and even our choice of career. In language that is clear and absorbing, the authors have developed a thoughtful means of reviewing practice through a clarifying lens, allowing us to consider the matters that make difficult clients 'difficult'. Of course, the strength of this little gem of a book is that such a perspective is useful even when clients are *not* difficult.

The authors' focus on therapy with one 'difficult' client and his family allows the reader to experience the processes of formulation and intervention that they promote and discuss. They dissect their own thinking as they go along, and challenge the reader to adapt these processes, with brief sections labelled 'reflective practice'. While at times these distract from the flow of their exposition, at other times the exercises flow naturally from the previous discussion. Whiteside and Steinberg have chosen an adult family to illustrate their ideas. Case examples involving children and adolescents were included, but the discussion of how to involve these children and adolescents was limited.

The subtitle of this book is 'A Practical Guide to Better Therapy', and the text is all that it claims. Throughout the text are inserted boxes labelled 'Useful questions ...' or 'Useful observations ...', which are

indeed useful, and can lead to new ways of thinking about the matters at hand, and new ways to intervene. What more can a reader want?

The structure of this book is one of its strengths. The chapters move, broadly, from problem description to analysis and then interventions. Each chapter moves between theoretical understandings and practical implications and the 'reflective practice' paragraphs. Within a more formal text, these and other paragraphs would have been relegated to footnotes.

In this era of 'evidence-based' methodologies and 'core skills', the book does not favour one system above another, but applies ideas and methods that work most effectively. The argument runs smoothly between practical applications and broader theoretical issues, and between description and interpretation. The core skills are explained easily and practically.

Unfortunately, the authors have not chosen to embed their ideas within a single and established theoretical framework — perhaps reflecting the lack of such a framework in our field. However, they have expanded and combined ideas that have appeal to most people working within the broad 'family therapy' model. They emphasise the strengths of individuals and groups and focus on solutions rather than problem definition. They easily tie the descriptions of the family, their patterns and strengths, to hypotheses which provide the focus for interventions.

It would have been interesting to hear how Whiteside and Steinberg would have conceptualised problems and solutions in families other than the case they describe. It would also have been interesting to see how the authors applied their ideas, the difference between telling readers what to do and showing exactly how the authors did it. Transcripts of selected interviews might have helped elaborate the processes being discussed and promoted.

Any good book leaves the reader wanting to know how to apply ideas more broadly, especially to their own area of work, and to hear what the authors would have thought about issues with which the reader has personally struggled. I have been stimulated in such a manner.

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The Space Between: Experience, Context, and Process in the Therapeutic Relationship.

C. Flaskas, B. Mason & A. Perlesz. London, Karnac, 2005.

In their earlier edited book on the therapeutic relationship, Flaskas and Perlesz (1996) reacted to the neglect of the therapeutic relationship in the field of family therapy. The therapeutic relationship was the Cinderella of the family therapy world (Wertheim, 1996). Flaskas and Perlesz addressed this gap in the field (Campbell & Draper, 1996) and brought the therapeutic relationship into focus. Now, in 2005, Flaskas, Mason and Perlesz have edited a sequel. In the movies, most sequels are not as good as the original. *Jaws* was a great movie, but all the sequels were rubbish. In the case of this book, however, the sequel is as least as good as the original, maybe even better. The contributions are all of very good quality. The authors' explorations are adventurous and sometimes really innovative. There is a good balance between the theoretical/conceptual perspective on the one hand, and the practice-oriented perspective, on the other. Furthermore, the authors often address broader discussions that are important in our field.

In the new book more attention can be paid to specific aspects of the therapeutic relationship, as well as to detailed descriptions of therapeutic process. So a wide range of different topics are addressed, including the self of the therapist, shame, violence, risks, intercultural issues, collaboration, embodiment, transparency, therapeutic alliance.

Having read the whole book now, I am struck by the observation that what we therapists aim for is collaboration with our clients. While we used to be focused on revealing hidden patterns and family issues, now we want to work together with our clients in a respectful partnership. We want to collaborate and, maybe even more importantly, we want to avoid at any cost abusing our power, or pathologising or marginalising our

clients. This is what Byng-Hall in his foreword calls our 'preoccupation with the dangers of expertise'. Byng-Hall warns that this preoccupation risks obscuring the importance of adequate expertise as an efficient answer to the clients' suffering. And indeed, more and more therapists seem to become aware of this danger. It seems that our field is moving gradually beyond the era of the not-knowing therapist. In the most fundamentalist version of the not-knowing therapist, the therapist tried to be as absent as possible in the conversation, in an attempt to give as much room as possible to the client. Mason (chapter 11) calls this *self-marginalisation* and, as he points out, this is often doing a disservice to our clients.

Several authors in this book struggle with this and associated issues. However, rather than retreating to the falsely 'innocent' position of a radical not-knowing, most authors point to an important limitation of the concept of not-knowing — privileging the client's expertise at the expense of the person of the therapist. These authors are searching for extensions, additions or alternatives to the not-knowing concept, trying to find a place for the therapist in the process of therapy. John Burnham (chapter 1), for instance, develops the idea of *relational reflexivity* as a practical concept in coordinating the resources of both therapist and clients in shaping the therapeutic relationship. Flaskas (chapter 8) examines the therapist's position during impasse. Pocock (chapter 9) explores the self-in-representation of all participants in the conversation (including the therapist). In their contributions about shame and the therapeutic relationship, Kavner & McNab (chapter 10) propose that therapists would also access their own inner dialogues and consider how these may be put in to good use in the therapy. And so on.

The contribution of Schlicht & Kraemer (chapter 2) deserves special attention. While most authors in the book celebrate the collaboration between client and therapist, and the importance of respect for our clients, Schlicht and Kraemer talk about informed spontaneity and about the importance of respect for their own experience as therapist. They discuss some of their own clinical cases, and in each of these cases the collaboration with the client is not obvious, nor evident. That is interesting. Their cases are very moving in themselves, and the authors are also

refreshingly frank in their stream-of-consciousness dialogue on the search for therapeutic intimacy, and on their (often unintended) discovery of it. Clearly, they do not want to show off how ethically sensitive and respectful they are. This makes their dialogue sometimes brilliantly politically incorrect and challenging. Being Whitaker aficionados, Schlicht and Kraemer seem to enjoy this. So did I.

Judging from this book, the field of family therapy is entering a new era in which the therapist is present again in the descriptions of the therapeutic process. Although he/she is still humble about his/her knowledge, the therapist is again allowed to play a part in the therapeutic process as an experiencing, responsible human being. Authors again take the risk of speaking about the complexity of being a therapist. They dare to bear witness to the difficulty of surviving in the trenches of mental health care. Instead of offering idealised prescriptions of what a therapist should or shouldn't know, therapists start to talk about their actual experiences and the dilemmas they are confronted with in their daily practices.

Another interesting observation: research is present in this book. This mirrors a positive development in which the gap between researchers and practitioners seems to narrow gradually. In part, this is probably the result of the evidence-based *zeitgeist*, but it might also spring from the fact that qualitative research is gaining recognition as a valuable approach to explore questions pertinent to practising family therapists. This catches the attention of more and more therapists and they become curious about research, and what it might have to offer them. In this book, Perlesz & Brown (chapter 12) revisit the collaborative ideal and conclude that a participatory, cooperative inquiry paradigm is a useful lens for family therapists to adopt in their clinical work and research. Carr (chapter 13) reviews the empirical research literature on therapeutic alliance in family therapy. Besides offering some clear guidelines to practising therapists, he concludes that a strong therapeutic alliance is important for achieving good therapy outcome. In this way, he offers an empirical foundation for our ethical privileging of a collaborative relationship with our clients.

I have really enjoyed reading this book. It represents an important contribution to the family therapy literature, and a more than useful reference for anyone interested in the therapeutic relationship.

References

- Campbell, D. & Draper, R., 1996. Editor's foreword. In C. Flaskas & A. Perlesz, *The Therapeutic Relationship in Systemic Therapy*, London, Karnac.
- Flaskas, C. & Perlesz, A., 1996. *The Therapeutic Relationship in Systemic Therapy*, London, Karnac.
- Wertheim, E. S., 1996. Foreword. In C. Flaskas & A. Perlesz, *The Therapeutic Relationship in Systemic Therapy*, London, Karnac.

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Sex, Sexuality and the Autism Spectrum.

Wendy Lawson. London, Jessica Kingsley, 2005.

Pp. 175. Soft. ISBN 1-84310-284-6. £13.95,

Wendy Lawson, Australian psychologist, mother of four, and person with autism spectrum disorder, is the author of three previous books, most notably *Life Behind Glass: A Personal Account of Autism Spectrum Disorder*. In each of these books, her clear aim has been to help bridge the gap between our 'neurotypical' understanding of the person with autism, and that person's understanding of the sometimes challenging world of the neurotypical (that's us!). In this book Wendy takes on the issues of sex and sexuality from the unique perspective of someone with autism and also someone currently living in a lesbian relationship.

This book is divided into nine chapters. In the first, Wendy offers a unique insider's view of the ways in which people with autism spectrum disorder see the world, particularly in the distinction she makes between a polytropic learning style focusing on non-literality, generalised learning and multi-tasking, and the more monotropic style of people with autism, characterised by literality, understanding governed by non-social priorities, and difficulties understanding the concept of the 'other'. She also emphasises that these are *differences*, not disabilities, and do not preclude people with autism from experiencing sexual arousal and love.

In the next three chapters, Wendy discusses sex and relationships education, with an emphasis on explaining in detail to

readers with autism factors that we take for granted. She answers questions such as 'What are relationships for?', 'Do I have to have a boyfriend or girlfriend to be normal?', 'Can I accept myself if I have unusual turn-ons?', 'What should I do if I have a legacy of sexual abuse as a child?'. While the focus is on helping people with autism negotiate these issues (in ways that we take for granted), Wendy also discusses concerns specific to people with autism, such as over-attachment, having real expectations, and dealing with intimate sensual sensitivity. A further two chapters explore interpersonal relations in greater depth under the headings of building and maintaining a safe place in relationships.

In the fifth and ninth chapters, Wendy discusses the discovery of bisexuality, homosexuality or transgender dispositions, and of coming out and relating to family and friends. Here the emphasis is on advocating for the legitimacy of these needs and identities and on describing her own very difficult journey of self-acceptance. While this story aims to be liberating for people with autism, it is also particularly pertinent, given the fact that there is some evidence for an increased incidence of alternative sexual preferences among this population.

In many ways this book is quite remarkable both for the professional reader and for the person with autism. In the first case it serves an antidote to the sterile professional literature on diagnosis, management of anxiety symptoms, social stories, and so on, and has much in common with Claire Sainsbury's (2000) book, *Martians in the Playground: Understanding the Schoolchild with Asperger's Syndrome*, written for teachers. In the second case, I imagine this book could be like the switching on of a brilliant light to a person with autism, allowing them access to a world that might be incomprehensible, in a way that they can grasp and mull over and apply. In true autistic style, Wendy also includes an appendix of crosswords and structured work sheets that couples can play with to explore their relationship. The liberating potential of this book is obviously even more the case if this person is struggling with their sexual identity.

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Anger Management: The Complete Treatment Guidebook for Practitioners.

Howard Kassinova & Raymond C. Tafrate. Atascadero, CA, Impact, 2002. Soft cover.

Pp. 304. US\$27.95 ISBN: 2002073678. US\$27.95.

'Anger management' has become something of a boutique industry in recent years. It has also attracted to itself a whiff of political suspicion, particularly from those who are working with men's anti-violence programs. There is a concern that simply focusing on the management of a feeling state risks missing the point, which is that violence is an *act* not a *feeling*. The parallel concern is that by limiting the discussion to anger and its expression, we may lose sight of the fact that some violence is not, in fact, accompanied by anger. Certainly, some acts of violence, abuse and aggression are committed in cold calculation, but my own clinical experience in working with men who are violent suggests that this is not common. Nor does such a phenomenon detract from the value of working with anger as *itself*, a feeling that many people have difficulty both acknowledging and owning and then acting upon in ways that are not harmful to themselves or others.

I will state at the outset my major concern with this book, and many others in its genre. It does, as I will elaborate below, very elegantly and thoroughly explore the feeling of anger, its potential triggers, and techniques and strategies to direct it in ways that are socially acceptable. What it fails to do, in any extensive way, is to locate anger in a social context. It certainly discusses the ways that anger can be problematic in interpersonal relationships, but it does not discuss the different ways that anger asserts itself in men and women cross-culturally, and it certainly does not discuss the idea of violence as a social construct. This book's other failing is that it tends to blur the distinction between anger as a feeling state and the many ways of enacting this feeling state.

My other criticism is that it *only* deals with anger, as if this feeling somehow operates solo. My own clinical experience indicates that anger very rarely acts alone. It is often accompanied, most frequently

outside awareness, by other feeling states such as hurt, pain, jealousy and sadness. Anger can be simultaneously both itself, and an indicator of many other things. This book attributes negativity to anger, although the authors prevaricate a little here. They define anger as, 'a felt emotional state ... associated with cognitive distortions, verbal and motor behaviors, and patterns of physical arousal' (12). The authors do, fortunately, make a distinction between anger and aggression: 'Anger is not a form of aggression, and most often does not lead to aggression! ... Although anger is common, and sometimes useful, it can become an independent problem with many negative consequences, requiring treatment' (12). The clear suggestion is that anger is pathological. This does not take into account the possibility of anger as a transformative fuel; for example, its role as a motivator in social change. As a therapist friend of mine once reminded me, if enough people hadn't got angry enough, then we would still have slavery.

Having stated my reservations and thereby offering my own ideological bias, I need to say that there are many things that genuinely impressed me in this book, despite my Australian distaste for the American habit of cramming half the alphabet behind the authors' names, and the grandiose subtitle of the book as 'The Complete Treatment Guide for Practitioners' (my italics). The authors operate from a cognitive behaviour therapy framework, and although CBT sometimes gets bad press, my guess is that this is only justified when it is presented as an inalienable and sole truth. Kassinova & Tafrate do not do this, although they are clearly comfortable with CBT as a clinical framework. They do spell out their treatment ideas coherently through chapters that progress from an explication of 'The Anger Episode Model' (Section 1), 'Preparing for Change' (Section 2), 'Changing' (Section 3), 'Accepting, Adapting and Adjusting' (Section 4), and 'Maintaining Change' (Section 5). Ideas and techniques in these chapters are readily adaptable.

I found Section 6, 'Anger Reduction for Practitioners', most interesting. This chapter discusses the idea of therapists becoming angry with clients. What struck me is that it listed a number of triggers for therapist anger — client lack of motivation, ambivalence, resistance, hostility, impulsivity, destructive behaviours, needy, clingy, and dependent behaviours, manipulation and lying. *These are all defined as triggers*

originating in the client. I would dearly have liked to have seen some recognition of the possibility of these and many other elements in *therapists'* lives. I would also have liked some analysis of anger and therapeutic transference and countertransference. What happens when we feel angry with a client who reminds us of the partner we are fighting with? What happens when we are having a stressful day and a client's preoccupation with his problems strikes us as self-indulgent? What happens when a client's values and beliefs really annoy us? And what happens when a client finds the therapist really annoying and wants to express that frustration? The authors state that 'Practitioner anger is not functional' (259) — a very broad statement that denies the possibility of the therapeutic use of the transaction between client and therapist, which may utilise feelings that are normally difficult to experience and acknowledge.

Although I have raised some of my own reservations about this book, it has a number of positive elements. It does provide a useful model to deal with anger that acts itself out aggressively, a model which could lead to some short-term behavioural changes. This is not an outcome to be scoffed at — my guess is that the techniques and model of behaviour change that the authors have developed — and they clearly have a wealth of clinical experience — could be very useful in prison or correctional settings or other areas where violent and aggressive offending behaviour needs to be addressed. This is in no way damning this Guidebook with faint praise — numerous statutory bodies that are mandated to work with anger treatment programs could (and indeed often do) do far worse than use the ideas in Kassinova and Tafrate's Treatment Guide. Although this guidebook does not, as I stated earlier, thoroughly locate its treatment modality within a broader social context, practitioners can do this with the tools that the guidebook offers. *Anger Management* has an analytical rigour that I appreciate, unlike much of the literature on anger management that simply rehashes some techniques of working with distorted cognitions, and relaxation exercises for the autonomic nervous system.

I don't know if I would use this book in my own work with men who are angry, aggressive and violent. However, I welcome its intellectual rigour and solid practice base and would welcome a

broader debate around the burgeoning anger management industry.

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Systeme

Subtitled 'an interdisciplinary journal of systemic theory, research and practice within the social sciences', is jointly edited by an Austrian (OAS) and a German (SG) Society for systemic therapy. The journal publishes original articles, book reviews and a calendar with upcoming events.

Two issues p.a. 24 Euros p.a. ISSN 1022-9820. For further information, <http://www.o eas.at>

We review two issues, give a summary of each paper of the 1/03 edition, followed by a more detailed account of three contributions to the 2/03 edition.

The first paper in 1/03 by Manteufel 'Chromosomen Non est Omen' discusses the relationship between neurobiology and psychotherapy, and the similarity between the models becomes evident if a synergetic model of self-organisation is considered. The author concludes that psychotherapy can no longer ignore the recent developments in the neurosciences. The second article, by Keller, 'Biological and Cultural Determinants in Parenting Behaviour', contrasts parenting styles of collective cultures with those of Western societies. Different relationship values (interdependence vs independence) are expressed in specific, culturally consistent parenting behaviour. Keller encourages us to look through cultural lenses when we assess parent–infant dyads. Schweitzer and Gruenwald ('System Therapeutic Methods in Acute Psychiatric Services — A Multi-centre Empirical Research Trial') describe a refreshing initiative, the introduction of systemic thinking, therapy and research into the acute psychiatric hospital context, targeting nursing care and therapeutic intervention. Geyerhofen and Unterholzen in 'My Symptoms Expressed by Others' introduce the possibility of utilising the expertise of ex-clients in current therapy. The paper reflects postmodern thinking and describes ways of implementing such an approach; for example, via reflective

team, life interview, and so on. They discuss the risks and benefits, both for client and ex-client.

Von Wogau's contribution, 'Looking through a Cultural Lens', deals with cultural competency. The author offers a rich choice of techniques when working in the transcultural context with immigrants, considering the different phases and stages of therapy. Finally, Wedekind, Blum-Maurice and Schaefer's 'Psychotherapy for the Poor' focuses on home-based family therapy for those families with children that cannot be reached by traditional centre-based services, and gives a glimpse of some of the politics of health-care funding in the two European countries.

In *Systeme* 2/03, Levold views the systemic movement as a continually learning system, which evolved outside of established learning institutions such as universities. The systemic movement, he states, developed inside a network of evolving knowledge, which eventually usurped these institutions and has now become mainstream. As an established system, it is subject to the usual normative forces destructive to the continual evolution of learning. He suggests that the systemic movement needs to build on an historical and externalising perspective to support the deconstruction of the old, established and given. He encourages us to search for the blind spots in our knowledge, to understand our own systemic taboos, and to question what seems to us to be obvious and unquestionable. He states that, as with all establishments, those which conform least and are of most interest are often the least published, but in the end the most influential. He suggests that if we do not search these out, we are in danger of creating our own knowledge-restricting power.

Koenigswieser in her article 'How do Organisations Learn' tells us why a theoretical concept of learning organisations is needed, and also proposes a model of systemic consulting. She concludes that human affection and value are the basis of human learning and development, whereas devaluation and negative emotion produce negative learning states. To Koenigswieser, it follows that as people make up organisations, and affection and human value are so important to people, they are also the inevitable long-term basis of a company's success. Her plea for organisations is to develop vision, strategy, structure, culture, process knowledge, and integrate the 'soft' and 'hard' approach. In her consultancy

model, leverage for change is initiated by coaching leaders and establishing internal groups from which a new organisational culture can develop. Such a learning culture, she believes, would encourage feedback and communication, which makes an organisation intelligent. To Koenigsweiser it is the music of change and not the tune that matters; change must be energising and enjoyable.

Wedekind & Georgi's contribution, 'Team Development in Social Institutions', discusses team development in social organisations, and patterns of systemic orientation between the self of workers and the system of the team. The authors state that *psychological* systems exist through the construction of imagination and meaning, whereas *social* systems exist through communication. The authors believe that workers and the social organisations in which they work themselves face a dilemma between economic survival and being social. The worker has personal and professional orientations to the workplace but at the same time must remain 'saleable' as a professional. The social organisation has a parallel contradictory dilemma, between its social function and the external realities of the economic environment. Economic decisions and structures are sometimes difficult to establish within social institutions. Further, without economic security and respect, the necessary creativity of the team cannot develop. Wedekind & Georgi suggest the partnership model as a solution. In the authors' concluding paragraphs, the word 'respect' rates a special emphasis. The three levels of respect according to the authors from the lowest to highest are: (1) The personal greeting (e.g. 'Hello') and a lack of verbal injury (2) Professional respect for those of differing professions, abilities, perspectives and priorities and (3) The professional respect attached to the individual person.

Other engaging articles in this issue include Schmidt's practical 'Clinic as a Learning Institution'; Lang's 'Reflection in the Mirror', Brandl-Nebbehay's 'Listening Connects — The Therapeutic Relationship in the Mirror of Solution Orientated and Narrative Approaches'; as well as Vratislav Strnad's 'Therapeutic Authorship — Is there Such a Thing?'

The subtitle 'interdisciplinary' describes this journal well. Articles cover a broad spectrum of theoretical and practical perspectives that are of potential relevance to the family therapist practi-

tioner. We found the articles interesting and refreshing to read and some of the contributions encouraged us to think about the topic in a more abstract, reflective way.

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Rescripting Family Experiences: The Therapeutic Influence of John Byng-Hall.

Edited by John Hills. London, Whurr, 2002. Paperback.

Pp. 181. ISBN 1 86156 263 2. £22.50.

I was lucky enough to be at the British National Association of Family Therapy conference in Nottingham in 2003, and to have the privilege of meeting there some old and new friends and colleagues. It was a stimulating conference, but one of the most enduring memories for me will be the sight of John Byng-Hall 'waltzing' in his wheelchair after dinner. This image will remain a symbol for me of the way in which this modest and gentle man has met the challenge of his own crippling illness, and taken up the task of rewriting his own family script.

In 1997, John Byng-Hall retired from the Tavistock Clinic where, 23 years earlier, he and Rosemary Whiffen had co-chaired the first family systemic training course in Britain. This book is part tribute to John Byng-Hall, in the form of a number of chapters by students and colleagues outlining his influence on their work, and part John Byng-Hall's own account of his family context, and his decision to take up medicine, then psychiatry, then family therapy. I love Donald Bloch's Foreword, in which he places Byng-Hall's work on family scripts firmly in centre stage:

Biographers tell us about the life and work from the outside in; autobiography comes at it the other way, from within outward. In family therapy the holographic projections meet at the family

script — as they do, in the best of theatre. And, in the best of therapy (vii).

John Byng-Hall's autobiography highlights the tensions and connections across his early years in Kenya (both beautiful and terrifying), the onset of polio and his hospitalisation and subsequent isolation in Italy, the move to England, and his professional journey. A journey which, as he puts it, covers a number of transitions:

the transition between active health and disablement; childhood and manhood; Kenya and England; country and city; farmer and family therapist (56).

It is a moving story, and all the more so because of the author's capacity to be at once narrator, witness, and commentator. He does this both in relation to the content (drawing connections between his life experience and his attraction to family therapy and attachment theory) and the process of the writing itself. I found this latter reflection to be rich and touchingly candid. It is a reminder of Mary Main's research finding that early attachment experiences are mediated by the capacity to create a coherent narrative; a finding highlighted in Glenn Larner's delightful interview of John Byng-Hall (Larner, 1999). In his story about his story, John Byng-Hall tells of 'stalling' with the pain of some memories; a 'harbinger of incoherence'. All of these were to do with separations. No wonder, he reflects, he became so interested in attachment theory! I should say though that while there is no shirking from the pain, the questioning and the loss, reflected in his writing is a gentle, poignant and inspirational appreciation of life. Tribute to the person is the fact that, many years ago he gave himself a rule that he would not propose any theories about people without purposefully exploring them in relation to himself. This life review represents the author's attempt to make sense of his own disjunctive life experience. He explains the process thus:

The aim is to write a story to myself, while recognising that a story's power comes from sharing something with someone else, in this case with my inner confidante who can also tell it back to me in written form after the telling (xviii).

He writes that it was only after finding the whole process powerful and very fruitful that he decided to share his experience with other family therapists in case it

might be useful. Bringing the story into another realm are his drawings, which also span his life. What a wonderful example this would be, I think, for those students who are working on their own families of origin in family therapy training courses!

The remainder of the book is a mix of theory, reflection and family therapy practice examples from various clinicians, paying tribute to the influence of Byng-Hall's work on family scripts and legends in a kaleidoscope of ways. The account of the origins of the first British family therapy course, written as a conversation between Byng-Hall and Rosemary Whiffen, is a significant piece of family therapy history, poignant and precious now in light of Rosemary Whiffen's death in 2003.

Each chapter in this book might well deserve a review in itself. Each integrates theory and clinical practice examples, and, while all authors centre their discussion around a particular influence of Byng-Hall's theory and/or teaching on their work, each also offers a unique contribution. For example, they cover such topics as the connection between script in theatre and within family work (Kate Daniels), and the integration of individual child psychotherapy with family therapy (Jeanne Magagna) and working systemically within a general medical practice (Sara Barratt). David Campbell gives a beautifully integrated account of his own professional journey, and the editor John Hills finishes with a rich, philosophical exploration of death, family scripts and systemic existentialism. It occurs to me that the depth and breadth of these contributions in itself says something very clearly about the extent of Byng-Hall's influence in the development of family therapy. John Hills points out that John Byng-Hall likes the metaphor of the bridge, and this book highlights for me that, quite apart from the particular theoretical contribution he made to our field, he has been such a significant inspiration to so many practitioners as an integrationist, himself a bridge.

I am not sure how much I can assume from my own learning in family therapy in Australia, but reading this book reminds me of how little I knew of the British contribution to family therapy history in comparison with the American and Italian influences. For those who share this family therapy 'script', this little book provides a great 'corrective script'. It is not a text book, nor is it simply a tribute: it

stands with a separate identity in bridging the intensely personal and the professional, history and current applications, theory and practice. A terrific read!

Reference

Larner, G., 1999. The 'Unfashionable' John Byng-Hall: Narrative, Myths and Attachment, *ANZJFT*, 20, 1: 34–39.

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Creativity in Psychotherapy: Reaching New Heights with Individuals, Couples and Families.

David K. Carson & Kent W. Becker, NY, Haworth, 2003. The Haworth Clinical Practice Press.

Soft Cover, 237pp. ISBN:0-7890-1579-X.
US\$34.95 plus 20% outside
US/Canada/Mexico.

This book promises much. Its three sections contain a total of 10 chapters, which are evidently designed to take the reader through, first of all, the importance of creativity in therapy with reference to health, dysfunction and resiliency, then its role in mental health, followed by an exploration of therapists' perceptions of creativity; next come examples of creativity at work in therapy within a whole range of schools, followed by a concluding section on the place of creativity in supervision. Each chapter opens with a set of creative tasks, designed to help would-be creative readers get in touch with their individual creative essence as well as to identify and become free of any barriers to creativity. Further exercises designed to help one 'break out of the box' are included at the end of each chapter.

Both authors are well-qualified, evidently experienced teachers and clinicians in the relevant areas. It is their expressed hope that this book will be used at numerous levels of teaching (including advanced) in the human services professions. They see creativity as 'a hot topic these days' (xv) and accordingly present their offering confidently, contending that it 'will be intellectually stimulating and personally

enlightening to academicians, practitioners and therapists-in-training' (xiv), going on to remark, 'There are not many books like this one' (xv).

Creativity in Psychotherapy opens with a folksy, intimate tone:

Accept that you are a creative individual. If you have ever been told otherwise, make a conscious decision to say, 'I am creative. Watch out world!' Life and society can dump a lot of barriers in our path. It is time to start your backhoe and push that debris aside. You are in the driver's seat and you make the rules (9).

They are going to support us in this endeavour, we can trust them to guide us through what they have warned may be strange territory to some of us. This popular tone recurs at intervals but is strangely at odds with the intermittently formal, academic tone of correct but dense and clumsy sentence constructions such as:

Daily hassles and major life stressors have been linked to problems in children's academic and cognitive development (e.g., difficulties with concentration or memory, learning disabilities), socio-emotional development (e.g., lower social competence, emotional disturbances, mood swings, immaturity), and a variety of behavior problems and manifestations of psychopathology (e.g., conduct disorders, anxiety disorders, childhood depression, psychosomatic symptoms) (Anthony, 1987; Carson et al., 1992; Dickey and Henderson, 1989; Rutter, 1983, 1987; Sears and Milburn, 1990) (43).

Thus they lay claim to their theoretical and research credentials. At the opening of chapter 9, they are again clearly teachers:

As you read the stories of other therapists throughout this chapter, reflect upon which elements their interventions address. We will revisit the five elements at the end of the chapter (164).

As far as practical therapeutic application goes, exercises in creativity, which may be offered to individuals, couples and families, are incorporated in the body of the text. Appropriately, these are, on the whole, not offered as recipes (though there are some lists) and the premise stated early in the book and attended to regularly throughout is that you need to pay attention to freeing and cultivating your own potential for creativity before you can help others release it in themselves.

In Section II we are faced with endless lists, no doubt faithful to the findings of the empirical study they are reporting, but what therapist wants to read such lists, especially in a book purporting to arouse creative responses in the reader? Such lists were counterproductive as far as any quest for creativity on the part of this reader was concerned. I found, too, at times, that the book patiently set out the most fundamental pieces of information or knowledge, and the thought arose, 'If we don't know these things already, what sorts of therapists are we?' Then elsewhere, the reader is called upon to come up with a range of sophisticated approaches to a particular scenario, including some that are 'your own unique ideas' (101) — a challenge that seems to rely on the reader being an experienced clinician.

Section III, with its earnest descriptions of 10 contemporary schools of thought as a prelude to offering creative interventions within each approach (135–189) convinced me that this book tries to be too many things to too many people. While the 10 approaches are described accurately enough, if the approach described was one with which the reader was deeply familiar, then the description inevitably came across as either superfluous or superficial; if, on the other hand, one was less familiar or not familiar at all with a particular approach, then this would hardly be an adequate primer to set the novice therapist on the path of working in this modality. So, just whom are the authors trying to reach? Take, for example, the statement, 'The purpose of interpretation is to make the unconscious conscious, which is called insight' (139). Perfectly accurate, but which type of reader is it aimed at? Or take, for example, the following mouthful concerning the 'distinctive' areas of strategic therapy:

These include specifying explicit and concrete goals for therapy with clients, an emphasis on second-order change, the use of straightforward directives in accomplishing goals, attention to various types of communication in couple and family relationships (e.g., double bind, vague, metaphorical and symbolic), reframing (relabeling) of relationship difficulties and options, and the employment of paradoxical strategies intended to decrease resistance and bring about change (e.g., symptom prescription, restraining change) (169).

If you know it, you do, if you don't, what help can this possibly be?

In other places this text on creativity encourages the reader to remember the importance of playfulness. Playful tasks are set for the would-be creative therapist. Too often in this context, they read to me like paradoxical injunctions.

Helen Pavlin
Darwin

Treating Marital Stress: Support Based Approaches.

Robert P. Rugel, NY, Haworth, 2003.

Soft cover. 165 pp. ISBN 0-7890-1632-X. US\$24.95.

When asked to review this book I was somewhat determined not to find this book helpful. Fortunately, the opposite has occurred and as a family/couple therapist I judge it to be extremely relevant and clever. Relevant and helpful in its simple and thorough attention to process and detail, clever in the way the author presents complex themes and content in a

manner that is very readable, uncluttered and clear. A quick scan of the contents pages gives the reader a precise overview of the material covered.

The writer briefly explores the notion of support in relation to contemporary marriage and relationships and sets the context for the following chapters. He describes particular relationship issues and leads the reader to consider a range of therapeutic and supportive interventions along the way.

The author shows the parallel between support and marital satisfaction. The therapist who assists couples to develop and increase spousal support helps increase the quality of the relationship. Indeed the strategy to develop and enhance support in the couple system may also deal with, for example, lack of meaningful communication and unrealistic expectations. This, the author points out, often works the other way around; therapies often focus directly on specific areas of marital distress such as communication, unclear or undefined expectations. If specific interventions are successful, quite often the level of support in the couple system also rises!

Robert Rugel explores and develops a case history spanning 18 sessions which focus on familiar couple agendas and his support-based interventions. Two outcome studies assessing effectiveness of the model 'Support-Focused Marital Therapy' at the end of this book add credibility to the model.

Treating Marital Stress, I believe, is very useful for new and developing couple therapists and provides a good reminder and checklist for the experienced practitioner who may have overlooked the importance of support development as a relevant and respectful strategy for some couples. A very solid, sound and well-written book!

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