The trouble with therapy: Sociology and psychotherapy

Peter Morrall

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It is hard to assess the legitimacy of Peter Morrall's dour view of therapy in this new book. He is tapping into the rich vein opened up by Frank Furedi in 'Therapy Culture'—that a society saturated by therapy means that individuals lose their capacity to deal with problems of living—but there is too much drift, digression, and hyperbole. This is not helped by Morrall's use of an irritating device, interspersing the book with a quasi-fictional muse called 'Heather' who, it seems, finally leads the author to some very critical views on the prospects of therapy. Much of this discussion of Heather—"strikingly attractive, statuesque, green-eyed, greying-blonde, and with a body shape to suit her middle years"—and her tortured relationship with 'barefoot therapist' 'Len', who she eventually dumps via a text message, seemed like a personal indulgence.

Morrall, a sociologist who also worked briefly as a therapist and summer school therapy trainer, has written books on sociology and aware of the impact of globalisation on human suffering and distress. Perhaps that is why he devotes his first chapter ('Enlightenment') to the theories of structuralism, constructionism, symbolic interactionism, realism and postmodernism and the sociology of grand theorists such as Karl Marx, Emile Durkheim, and Max Weber. Therapists, he argues, should refocus their attention away from trying to fix up individual suffering, and instead focus on fixing up global social structures. How can therapists be so centered on individuals when we live in a deadly world, increasingly global, and filled with poverty and other human-created disasters, Morrall asks? Suffering might seem individual and personal, but it is really socially caused — yes, but how can therapists not also focus on the particular individual experiences of this, even if they are aware of social causes? Morrall sees something 'abusive' in the therapeutic focus on the individual, in that therapists are in the business of giving individuals the illusion that it is in their power to take control of their own lives. They are blamed for promoting 'happiness' as a personal objective. He is angry that therapists and most sociologists and other academics are, in his opinion, not as angry about the state of the world as he is. On the other hand, he does have a point in arguing that therapy professions, along with other helping professions, should play a more significant role in promoting better policies and better societies.

If the agitator in him still sees a place for therapy, the cynic in him lashes out that therapy is 'dysfunctional,' 'arrogant,' 'selfish,' 'abusive,' 'infectious,' 'insane,' and 'deceitful.' Those are the titles of chapters 2 to 8, and three of these chapters begin 'Therapy is exceedingly selfish', 'Therapy is abusive' and 'Therapy is infectious'—eyes-catching, but rarely substantiated in what follows. The chapter titled 'Insane' claims that therapy fails because it doesn't understand or study madness, and also that therapy as institution and practice is an insane organisation. The former is 'substantiated' by the claim that only psychiatry truly defines and appreciates the significance of madness, and the latter through guilt by association. Morrall cites another writer's claim that global corporations are clinically insane, and as therapy is corporate-like, and organised within countries and across the world, it too is insane. Therapy is 'dysfunctional' because of rivalry and doctrinal disputes, the distinction between counselling and therapy is too vague, there are so many different and conflicting therapies to choose from, and because of the explosion of umbrella and professional groups representing the enterprise, organised nationally and globally (he provides long lists, in dot points, spanning pages). Most of the evidence presented here is gleaned from websites. While he might have a legitimate argument about problems of regulation and how consumers or clients might make choices between therapies, it is not clear that this supports his claim of dysfunction. Therapy is 'arrogant' because of its insecurity about its efficacy and status, not because of its belief in its foundation in science (the source of medicine's arrogance). But nowhere in this chapter does Morrall produce evidence that arrogance 'permeates virtually every nook and cranny of the therapy process,' including 'inherent disdain for the client's disempowered state' (p. 78). Instead, most of the discussion is devoted to questioning the epistemological status of science.

Morrall concludes with a page of recommendations for how therapy could positively respond to his accusations—including compulsory training in medical and sociological knowledge about madness and psychological distress, more coherent global and national bodies organising therapy, less focus on the self and happiness, and more focus on social problems, more awareness of the fallibility of science, and of the supposed scientific basis of therapies. But unfortunately he has not done enough to convince that his diagnosis is correct.

Review by Jonathan Norton, Manager, Counselling Service, University of Melbourne

Footy Passions helps explain why.

Review by Anthony Moran, lecturer in Social Sciences at La Trobe University Australia. Author of 'Australia: Nation, Belonging and Globalization' (2005), co-author (with Judith Brett) of 'Ordinary People's Politics' (2006), and co-editor (with Sean Watson) of 'Trust, Risk and Uncertainty' (2005).