

Book Review

The Client-Centred Therapist in Psychiatric Contexts

Lisbeth Sommerbeck

Ross-on-Wye, Herefordshire, UK: PCCS Books (2003).

16 British Pounds Sterling

150 pages

In my experience supervising graduate students in internships, I have observed that students who are humanistically-oriented, particularly those who are Person-Centered, struggle to integrate their theoretical approach into their internship work. They struggle with the predominance of the medical model in the field, the prevalence of cognitive-behavioral approaches in the research literature, and the dominance of the *Diagnostic and Statistical Manual of Mental Disorder-IV Text Revision*. They struggle with the idea that for each disorder there is a prescribed approach that is most effective. They struggle with how to interface with professionals with other orientations and within a system that seems biased away from their approach. They struggle with being taken seriously. And as the students struggle, so do professors, supervisors, fellow interns, staff, and other mental health colleagues.

Lisbeth Sommerbeck's book, *The Client-Centred Therapist in Psychiatric Contexts*, addresses these issues and more. It is a wonderful resource for anyone interested in, or struggling with, the integration of the person-centered approach in a setting dominated by the medical model.

In her introduction, Sommerbeck discusses the "psychiatric landscape and its inhabitants" and the intent of her book. Here she looks at the differences between understanding (a tenet of the person-centered approach) and explaining (a tendency of psychiatry) and the complementarity of both. She states that with mutual respect among the different professions and/or orientations "the client-centered therapist will find that he has much to offer in this setting and that his work is exciting and stimulating" (p. 5). She further adds that with such co-operation the chance of burnout may be decreased and the optimal benefits to the client may be increased.

In Part One, Sommerbeck offers her conceptualization of client-centered theory. She discusses the basic person-centered concepts, the universality of person-centered therapy, the importance of the three core conditions, and the role of developmental theories. Among her supportive references are classic writings by Bozarth (1998), Brodley (1998, 1996), Rogers (1962, published in Kirschenbaum and Henderson, 1989), and Rogers (1986, 1959, 1951). Sommerbeck's presentation is clear and concise and may very well stand on its own as a sound and useful basic presentation of person-centered theory. She ends Part One with a "Final Note" about ideals versus reality with respect to practicing Person-Centered therapy.

In Part Two, Sommerbeck addresses relating to the professionals of psychiatry. She discusses in detail the complementarity of Client-Centered therapy and the medical model. In doing so, Sommerbeck delves into a delightful comparative discussion of complementarity in particle physics. She discusses the question of diagnosis and client-centered theory, patients from a psychiatric viewpoint, the duality of the client-centered

therapist in the medical model setting, and the client-centered therapists' role in staff meetings. She finishes Part Two with discussions on helping the helpers and caretakers, the limits of the setting as the therapists' limits, and the advantages of working in medical model settings.

Part Three is an overall look at relating to the patients of psychiatry. Sommerbeck discusses clients diagnosed with psychotic depression and other psychoses, characteristics of therapy processes with psychotic clients, and clients diagnosed with near psychotic conditions. Along with each of these discussions, Sommerbeck includes detailed examples of work with clients fitting these categories. Her examples of helpful and not-so-helpful therapist responses are followed with comments on the therapeutic process/relationship, therapist behaviors, options to the therapists' behavior, future sessions with the client, and client perceptions of the therapeutic process/relationship. I found both her examples and her comments to be inspiring and enlightening disclosures of client-therapist relationships.

Part Four ends the book with a provocative four-page discussion of "Cultural differences, the critique of psychiatry, and another perspective." Sommerbeck addresses cultural differences and suggests that her perspective may not be representative of the difficulties or intolerance Person-Centered therapists may experience in other areas of the world. She suggests that in some psychiatric institutions it may be more difficult and in others perhaps impossible to be person-centered. To support this claim, Sommerbeck offers research that suggests disparities in psychiatric treatment as a result of social, health care, and cultural factors. Further, she discusses possible differences among mental health professionals as a result of training program biases in theoretical orientation and professional role definition.

In her critique of psychiatry, Sommerbeck delves into the legal, political, and power issues associated with psychiatry. She discusses the use of force in psychiatry, legislative surrender to psychiatric expertise, and the sentencing of people for their own benefit. She suggests that such legislation will "mark the limits of tolerance of the country in question" (p.141).

In the last pages of her book, Sommerbeck offers "another perspective." She suggests that person-centered therapists work toward their own undoing by taking an unproductive "anti-psychiatric stance." Acknowledging and concurring with "the general person-centered critique of psychiatry" (p. 141), Sommerbeck adds that therapists who place themselves as experts, experts who know better than psychiatry what is best for their clients, compromise the person-centered being of themselves as therapists, as well as their relationship with their clients.

I found Lisbeth Sommerbeck's book a cogent exposition of the merits and the how-to's of cooperative co-existence and collaboration between the person-centered and psychiatric perspectives. Sommerbeck offers a person-centered bridge over a manufactured chasm. I see this book as valuable to humanistic and Person-Centered students, professors, supervisees, and interns, whether counselors, nurses, physicians, psychologists, or social workers. It can help us all diplomatically navigate the undulating seas of the mental health profession, and remind us of what it means to be person-centered.

References

- Bozarth, J. (1998). *Person-Centered Therapy: A revolutionary paradigm*. Ross-on-Wye, UK: PCCS Books.
- Brodley, B. (1996). Empathic understanding and feelings in client-centered therapy. *The Person-Centered Journal*, 3 (1).
- Brodley, B. (1998). Criteria for making empathic responses in client-centered therapy. *The Person-Centered Journal*, 5 (1).
- Kirschenbaum, H., & Henderson, V. (1989). *Carl Rogers: Dialogues*. Boston: Houghton.
- Rogers, C. R. (1951). *Client-Centered therapy*. Boston: Houghton-Mifflin.
- Rogers, C. R. (1959). A theory of therapy, personality, and interpersonal relationships as developed in the client-centered framework. In E. Koch (Ed.), *Psychology: A study of science, Vol. III. Formulations of the person and the social context* (pp. 184 -256). New York: McGraw-Hill.
- Rogers, C. R. (1986). Reflection of feelings. *Person-Centered Review*, 1 (4).

Reviewed by:

Leslie A. McCulloch

State University of New York College at Brockport