
This handbook sets out to provide a comprehensive account of current knowledge on empirically grounded time-limited approaches to psychotherapy. The book contains 25 chapters divided into five sections. The first includes a series of essays on key topics such as theoretical integration, recent innovative approaches to process research, and the implications of mental health policy for brief therapy. The second section covers a number of technical issues such as managing engagement problems, using time limited contracts to promote change, setting tasks and single session therapy. The third, fourth and fifth sections contain review chapters on individual, family and group approaches to brief therapy. Within these chapters, psychodynamic, systems and cognitive-behavioural perspectives are well represented along with a number on interesting integrative approaches.

Stephen Soldz from Harvard has an interesting essay on research in the first section in which he elaborates on recent approaches and findings that have impressed him. In it, he mentions the key finding of Weiss' group at mount Zion Hospital in San Francisco. Weiss' theory is that neurotic patients unconsciously use therapy as an opportunity to have their unconscious pathogenic beliefs about relationships disconfirmed by the therapist. Once the therapist consistently disconfirms these beliefs, the patient's functioning improves. The theory entails the view that neurotic behaviour is fuelled by unconscious pathogenic beliefs about relationships. A series of studies based on detailed analyses of a small number of cases have supported this hypothesis. In these studies, therapist activities that disconfirmed patients plans to test beliefs accounted for greater positive therapeutic change than transference interpretations.

Reid's chapter on an a task-centred integrative psychotherapy which incorporates aspects of psychodynamic, behavioural, cognitive and systemic practice summarises both the therapeutic method and the results of an extensive research programme on therapeutic process. Reid's team at
Albany, New York have found that certain aspects of the therapeutic process lead to a positive outcome. These include the extent to which therapists focus on target problems, the degree to which clients make progress with tasks given by therapists and the directiveness of the therapist.

An interesting clinical paper on how to approach single-session therapy and a summary of the research on the effectiveness of single contacts is presented by, Rosenbaum, Hoyt and Talmon, a Californian group of psychodynamic clinical researchers. Conspicuous by its absence, both within this chapter and in the volume as a whole, are Barkham's work in England on the two-plus-one framework for individual consultation and Eddy Street's two-plus-one approach to family therapy in Wales. This is part of a wider problem with the handbook which ignores important European work and is exclusively written by North American authors.

The chapters on brief approaches to individual therapy are useful summaries for graduates requiring an orientation to psychodynamic, cognitive, behavioural or interpersonal approaches to therapy. They provide good bibliographies for clinicians who wish to explore particular therapy models in more depth.

Of the chapters on brief approaches to family therapy, Jose Szapocznik's are the most important. These two chapters offer clinical guidelines for engaging resistant families in therapy and conducting therapy from a systems perspective while only holding therapy sessions with a single family member. Szapocznick and his team have taken Minuchin's structural family therapy and developed it as a modality for working with Spanish delinquents and drug abusers in Miami. The team's extensive research provides strong support for the effectiveness of this approach to working with difficult families and is an exemplary model for other clinical research programmes (Szapocznik et al, 1991)

The other chapters on family therapy are well written but sketchy and only a limited number of approaches are described. These include the behavioural and strategic schools along with the Mc Master model. The Milan Systemic model, probably one of the most influential in Ireland (and the rest of Europe), does not get a mention, despite the recent review of empirical studies which support its effectiveness in certain contexts (Carr, 1991).
The use of a group therapy format for social skills training, crisis intervention for achieving limited therapeutic goals are described in the final section of this volume along with accounts of psychodrama groups and the use of short-term group therapy with schizophrenics. The chapters are interesting but selective rather than representative of diverse ways in which the brief group therapy format is currently being used.

I was disappointed that this handbook did not include a section on approaches to brief therapy that fall within the emerging post-modern psychotherapy tradition (Gilligan & Price, 1993). This is currently a particularly influential international force at the cutting edge of the brief therapy movement.

The Handbook contains independently written commissioned chapters in traditional academic style with no cross reference between chapters or sections. The editors would have done well to follow the practice of Alan Gurman & David Kniskern who wove the independent contributions to their Handbooks' of Family Therapy into a coherent tapestry with the liberal use of footnotes for editorial comment (Gurman & Kniskern, 1981,1991).

Despite its shortcomings, Wells & Giannetti’s Handbook is a valuable reference work. It should find a home in all libraries used by clinical psychologists and others working in the psychotherapy field.

References


Brief Therapy


Alan Carr, University College Dublin.