

A 'Health Wise Paris' sub-group Simply Speaking will be hosting

A Conversation on the Statutory Regulation of Psychotherapy in France

2pm – 4.30pm Saturday May 16 2009 at the University of Chicago, Paris

Bulletin n° 3

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Reader's responses

"Psychotherapists should come from an academic field related to medicine or psychology"

- "Of course, psychotherapy belongs to the social and health care services aiming at the population's welfare. It requires clinicians who have graduated in subjects that concern people's health and that have studied how individuals adjust to their current circumstances. However, people who have graduated in other academic fields than psychology and medicine can be just as prepared for training in psychotherapy through a scientific, literary, sociological or cultural approach. This will have taught them about the logical consequences of a particular method of dealing with intellectual or practical issues and so they are prepared to question what 'speaking' means. And we could even say that there are other ways than via the university for a subject to discover the consequences of an articulation, a policy or a system, and to question the way they accept or refuse a place in it. Indeed, it seems essential that a future psychotherapist has gone through the process of psychotherapy themselves in order to emancipate themselves from childhood determinations, the obsolete personal determinations and prejudices, that risk having a detrimental effect in their work with patients had they not become aware of them."

Elisabeth Gurniki

"What reaction has there been from the French representatives of psychotherapy to the recent amendment? Are there any English speakers familiar with these associations?"

- "For information, there is an "official" reaction to this latest amendment from "AFFOP" (one of the main organisations who represent psychotherapists in France along with the "FF2P") on

their website. I have been a member of these two organisations and am actually a member of the Groupe d'Etude Carl Rogers who are federated with AFFOP.

From the psychotherapist's point of view, one of their main worries is the introduction of compulsory university training in psychopathology on top of their specific training as psychotherapists. Psychotherapists in France have long been organised in different schools and professional bodies and are worried for their students and younger members who may not be able to follow university training for various reasons. There is also the problem of doctors and psychologists becoming psychotherapists without any specific training in psychotherapy.

My personal point of view as a psychologist/psychotherapist, working in a hospital setting and in private practice, is one of concern although I rest confident in the professional bodies representing psychotherapists in France not only in their capacity to argue their point of view but also in their ability to train highly qualified psychotherapists with or without university training and to keep an eye on the profession in general with or without governmental control as is the case up to now. I am counting on their creativity to find ways of continuing their work with or without government support. It seems to me that things are changing in the world of psychotherapy. People are changing, consciousness is growing, and I feel that this movement will continue. What will result from this movement can only be imagined 'affaire à suivre'.

Cordialement. Charles Ross"

"Dear Charles Ross,

I have just read your reply, so you are indeed a member of two institutions representing psychotherapists in France and are an English speaker. With regards to the statutory regulation of psychotherapy in France, I am surprised at the response of the English speaking community here in Paris. There isn't much of a movement, for or against. I am trying to understand why there should be such (dare I say it) complacency! Is it because many people are psychologists and thus consider themselves exempt from the question? It would be good to hear their views on the matter.

Indeed, are the psychologists and psychiatrists exempt from the question? I'd say no from an ethical point of view for the simple reason that the question of what constitutes a training - which is not just learning a set of methods from the university - how to evaluate that training in a rigorous manner - that is to say not just relying on academic methods such as exams and written texts- is often ignored.

As a psychologist and psychotherapist myself, also working in private practice and a hospital, I totally agree with you that a university psychology training does not necessarily train you as a psychotherapist, nor does a medical training, even psychiatric, especially when today's doctors tend to favour medicating over listening and have mostly become mere technicians working for the pharmaceutical industry (but for a few exceptions, of course). I would say that the majority of serious psychotherapy training organisations go further in their training than the university in that, beyond teaching theory, they require their students to have personal psychotherapy and supervision. Of course, those with a purely CBT approach would probably disagree with me as, if I have understood correctly, they do not feel their personal subjectivity gets involved in their clinical decision making, considering that their methods decide for them, which is debatable...

I'd like to be as optimistic as you regarding the future, but I'm not so sure that the State is prepared to recognise the creativity of the institutions you mention. You only have to look over the channel to see how a country renowned for its tolerance is dealing with the matter. It's like something from 1984. In my opinion, this is going to go beyond a matter for individual States to become a European question. I'd prefer not to wait and see what the politicians decide for us, and rather actively seek recognition for what is being ignored in this debate, which is why we have decided to organise this "conversation".

Yours, Victoria Woollard"

The merchandising of the body... and the mind?

Recently two issues have become the focus of heated discussion in the French press, highlighting to what extent the drive to transform the different elements of our lives into merchandise has no limits, not even ethical. Both concern the human body.

Firstly, there has been a stir around French philosopher Sylviane Agacinski's recently published book "Corps en miettes" in which she criticises the potential legalisation of the use of surrogate mothers in France. <http://www.lesquotidiennes.com/société/selon-sylviane-agacinski-la-grossesse-pour-autrui-est-un-nouvel-esclavage.html> <<http://www.lesquotidiennes.com/soci%C3%A9t%C3%A9/selon-sylviane-agacinski-la-grossesse-pour-autrui-est-un-nouvel-esclavage.html>> Agacinski highlights the dangerous consequences of using a woman's body as a factory to produce a baby and of transforming the human body into a commodity. She warns that legalising such a practice opens the door to abuse. In a world of increasing poverty, what is to stop the desperately poor using their body to produce a commodity that they can sell to the rich. She also points out that we cannot ignore the psychological consequences of such a system for the biological mother and nor for the child who starts life as a commodity. Indeed, the marketing of body organs, thriving in certain countries, and especially impoverished countries, is nothing new and a means to survive for some.

The second issue, concerns the Parisian exhibition "Our body" which after having toured the world has been ordered to close by a French judge. See articles: http://www.lemonde.fr/culture/article/2009/04/21/la-justice-interdit-l-exposition-our-body_1183328_3246.html <http://www.lemonde.fr/culture/article/2009/04/21/la-justice-interdit-l-exposition-our-body_1183328_3246.html> and <http://www.liberation.fr/culture/0101563200-exposition-our-body-plus-que-24-heures-a-vivre> <<http://www.liberation.fr/culture/0101563200-exposition-our-body-plus-que-24-heures-a-vivre>> The judge recognised complaints that the exhibits were the plastified cadavers of executed Chinese prisoners and to use them for an exhibition violated Human Rights and the respect of the dead. The organisers, who charge 15.50 euros for each entry, argue that the exhibition is pedagogical and teaches science to the masses. However, those demanding its closure repudiate this claim saying that it is no more than the merchandising of the human body (Radio France Inter).

Beyond the body, can we merchandise the mind? 'User', 'client' or 'patient'? Contract? What can be deduced from the change in the terms used in the world of therapy?

In the following article from the Guardian newspaper, Darian Leader claims that the human capacity to enter into a relationship is being transformed into merchandise. He claims that the therapeutic relationship has become a transaction, and human attributes have become commodities. This can be read as a warning that, without an ethical approach to psychotherapy and its regulation, we risk being led into making a grave mistake for humanity.

guardian.co.uk home <<http://www.guardian.co.uk/>>

Talking therapy

It's a mistake to try to make counselling fit the marketplace of goods and services under the Health Professions Council

<http://www.guardian.co.uk/commentisfree/2009/apr/08/health-society-politics>
<<http://www.guardian.co.uk/commentisfree/2009/apr/08/health-society-politics>>

Darian Leader <<http://www.guardian.co.uk/profile/darian-leader>>

guardian.co.uk <<http://www.guardian.co.uk/>> , Thursday 9 April 2009 00.00 BST

Today sees the launch of a petition against government plans to bring all psychotherapy and counselling under the Health Professions Council

<http://en.wikipedia.org/wiki/Health_Professions_Council> . Therapists, writers and artists have joined the protest, frustrated at the misinformation that has plagued the debate around regulation. For them, most forms of talking therapy cannot be classified as health professions, and the market-led vision of therapy the HPC presupposes is antithetical to the values and ethics of psychotherapy and the basic principles of freedom of thought and belief.

Psychotherapy and counselling stir up thoughts and emotions that we may be unaware of consciously. In most talking therapies

<<http://www.guardian.co.uk/society/2006/mar/01/mentalhealth.socialcare1>> , the therapist accepts to occupy the place of the target of the strongest and most powerful of these currents: they are loved and hated.

Working through this difficult, contradictory domain is a painful and uncertain task. No outcomes can be predicted or promised, and the process carries risks. We might realise what we took for granted in our lives is unstable and precarious, or question our feelings towards those closest to us, or find we can no longer do a job everyone expected us to.

However, most forms of therapy do offer access to authenticity that may be lacking in the rest of our life. And this can have significant effects, from a renewed creativity to a change of direction in work or love, a tempering of misery, or an awareness of what one's true choices may be. That is what makes the talking therapies unique.

They don't fit the modern marketplace of goods and services. We are paying for something without knowing what it is. What drives and sustains the therapy is the relationship between the two parties, and not the application of any sort of therapeutic instrument.

This is where the problems really start. In a culture driven by the market, what shelf should the talking therapies go on? Surely, they must be made to conform to the familiar frameworks of business and sales. And if everything is so uncertain and unknown, what would stop the unscrupulous therapist from exploiting their patients – sexually, financially and morally?

Rather than working with a person holistically, some therapies have bought into an atomisation of individual symptoms that they claim to treat. Therapy becomes reduced to a series of localised interventions, targeting specific cognitive "errors". The therapeutic relationship becomes a transaction, and human attributes become commodities. Not surprisingly, this is the kind of therapy the government understands and NHS managers smile on.

Thatcherism famously began the project of dismantling the "professions" and removing all barriers to the free market. If basic human trust in professionals could be eroded, the logic of the market would decide who prospered and who didn't. Yet, in a free market where economic competition reigns, everyone becomes a dangerous abusive predator. Most professionals were forced to become competitive agents in a marketplace, while at the same time being tarred with the brush of exploitation and privilege.

Sensational cases did little to help them. The media made much of abusive teachers, doctors and nurses. The devastating effects of micro-management, form-filling, and health and safety were felt by everyone. As the psychotherapist Brian Thorne pointed out, one had only to observe the number of teachers and social workers forced to retire for medical reasons or plain despair to gauge the impact of the stress caused by over-regulation.

It was only a matter of time before the talking therapies came under the government spotlight, and public protection was heralded as the central issue. Although all therapy organisations had stringent codes of ethics and complaints procedures, these were deemed not objective enough, and, in 2007, the government decided to overrule several years of consultation in designating the HPC as the therapy regulator.

Nearly every stakeholder objected, saying the choice of the HPC was a mistake. Most of the other professions had set aims and outcomes, and involved the application of procedures, but the talking therapies did not. And, in the talking therapies, the therapist sets themselves up as the target of the patient's projections, thus complicating the question of complaints. The HPC claimed that only the regulation of therapy organisations would genuinely protect the public.

The fact that all HPC prosecutions are of practitioners who are already registered by the HPC means that being registered is no guarantee of safety. The next argument is that HPC regulation would make it an offence to put up a brass plaque claiming to be a therapist or counsellor. Yet aside from the fact that there aren't many people who have done this – apart from the comedian Bernard Manning – HPC prosecutions have targeted HPC registrants, not members of the public claiming to be, say, a radiologist or a physiotherapist.

HPC hearings are also highly adversarial. If you are accused of misconduct, you are named and shamed on its website before your hearing, which may take place several months later. If you are found to be innocent, your reputation and livelihood may already be gravely damaged. Allegations, interestingly, hardly ever come from patients but mostly from NHS employers or colleagues. The HPC has set itself up as a super-moral agency, suspending or

striking off practitioners for failures of "personal conduct" that a normal court of law would not necessarily judge in the same way.

The final feather in the HPC's cap is its ability to strike you off its register. Yet anyone struck off can simply set up a new practice with a different title. If you are struck off as an arts therapist, there is nothing to stop you setting up as a life coach. Studies show that the most dangerous individuals are precisely those most adept at jumping through bureaucratic hoops.

The most robust model of regulation would limit government intervention to the requirement that all therapists join a national register, to be administered by a body made up of therapists and lay people who know what therapy is about. This would give full details of each therapist's training and orientation, as well as details of complaints procedures. The public could then check up on the person they were considering and make their own choice, rather than have an unsuited government agency limit their decisions for them.

Rumour has it that the HPC is fed up with the psychotherapists and wishes the government would decide against their inclusion in the council. The 2007 white paper, after all, had asked whether the therapies could be accommodated by the HPC. Its remit is to only regulate those professions that show a real "homogeneity". This is hardly the case for the therapies: some aim to get rid of symptoms, some don't; some aim at well being, some reject that concept; some aim to remove anxiety, some make you confront it. But most therapies make no concrete offer apart from that of a confidential space in which something may – or may not – happen.

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The Conversation 16 May, Paris: how to register

Please send an email to simplyspeaking.hwp@gmail.com notifying us of your wish to attend and then send cheque of 10 euros per person (7 euros students and unemployed) to the following address:

V. Woollard

CAP Consultations
3 rue Paul Escudier 75009 Paris

We will then send you an email of confirmation and details of how to get to the venue.