

# New Woman

**Your Place  
or Mine?  
Think Twice  
before Moving  
In Together**

**The (Darker)  
Secrets Men  
Keep about  
SEX**

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**NEW WAR  
ON WRINKLES**

**10 Ways  
to Buy  
Your First  
Home when  
You Think  
You Can't  
Afford It**

**53 BEST  
COMPANIES  
FOR WOMEN**

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Women" Contest**

**Top 10  
Diet Centers  
in the U.S.**

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**Those  
Sizzling  
Superstar  
Sisters:  
JOAN & JACKIE  
COLLINS**

**How a Baby  
Will Affect  
Your Marriage**

**When You  
Have to  
Leave the Man  
You Love  
(for Your  
Own Good)**



# choosing the right therapist

There's more to therapy than spilling your guts on a weekly basis. You need to choose the right kind of counseling; then you need to help your therapist help you.

BY CAROLYN BUSHONG

**KATHY WAS FRUSTRATED. SHE'D** been in therapy for four years and couldn't understand why she wasn't getting any better. In fact, at times she was sure her problem—her relationships with men—was getting worse.

She'd been through two marriages and a string of dead-end affairs with men who refused to make a commitment to her.

"I can't get my therapist to listen to me," she said to her women's group, which she joined to supplement her therapy. "He says I'm too demanding. Maybe he's right. There must be something wrong with me. The harder I try, the worse my situation seems to get."

The group pointed out to her that her problems with her therapist were the same problems she cited repeatedly in describing her relationships with other men in her life. For the first time, Kathy questioned whether she had been getting good therapy.

A 1984 federal study shows that one out of five Americans is currently in therapy or has sought therapy in the past. And according to *Science* magazine, almost 30 percent of the U.S. population will seek psychological counseling sometime during their lives.

Of the estimated five million people who will consult a therapist this year, most will show some improvement. But many others, like Kathy, will find themselves increasingly unhappy and dissatisfied. It's hard to know what's wrong if you're not getting good therapy. And with more than 160,000 professional therapists in the United States to choose from, it's hard to know how to select a good therapist.

People go into therapy for different reasons. Often a life crisis, such as divorce or loss of a job, triggers the decision. Sometimes they want to overcome anxiety or depression. People also reach out for help with addictions to alcohol and drugs as well as with eating disorders. Some people want help dealing with normal living problems, such as sexual incompatibilities or confusion about men's and women's roles, or they may just want help with their personal growth and happiness.

Therapy doesn't carry the stigma it used to. But too often we've accepted therapy in itself as good, no matter what type it is or who the therapist is. Therapy is often seen as the answer to a problem rather than as a means of solving it. Ex-

pectations of therapy are often unrealistic.

There are some things, however, you can expect from therapy. It should allow you to:

- reveal your true self without fear of being criticized.
- learn to communicate your full range of emotions.
- feel safe sharing your innermost fears and concerns.
- get support.
- learn how to exert greater control over your life.

As a client or patient (*patient* is the term most often used by therapists with a medical orientation; *client* is used by therapists with a humanistic orientation), you, too, have certain responsibilities. ▷



Where it all started—on Freud's couch in Vienna. This is a replica of his room; it's in the Freud Museum in London.

You should:

- choose someone you like, admire, and feel comfortable with.
- get enough information from your therapist to satisfy yourself that he or she is qualified to counsel you.
- let your therapist know when you're not getting what you want.
- monitor your progress.
- make sure you don't become dependent on your therapist.
- trust your gut feelings more than your therapist's authority.
- terminate therapy when you feel you're ready.
- be open to change. Realize that growth means change in both behavior and beliefs. Don't be afraid to let go of old habits that aren't working for you, and find new ways of relating to others and living your life.
- set goals with your therapist.
- get a second opinion if and when you feel uncomfortable with your therapist.
- realize that when therapy doesn't work, it's often because therapist and client are mismatched.
- report any therapist who abuses you sexually or otherwise. Unethical behavior should be reported to the local government agency in your state that regulates the profession, such as your state board of the American Psychological Association.

Give your relationship with your therapist a little time to develop and grow. (But don't stay with someone with whom you feel uncomfortable on the first visit.) If you stop going to therapy without confronting the problems you're having, you may jeopardize your progress. If after a few months, however, you feel you are not making progress, candidly state your complaints to your therapist. Explain that you are feeling frustrated and want to see progress soon or you will switch therapists. Give him or her an opportunity to discuss the problems with you. Your therapist might have misinterpreted your needs and may be able to make adjustments in his or her work with you that will yield greater progress. Or he or she might have valid counter-complaints. For example, I recently told a client she was tying my hands by canceling regular appointments and only keeping them when she was in crisis.

### Which Therapy Should I Choose?

According to *Science* magazine's June 1986 report, there are more than 250 brands of therapy on the market, including offshoots of traditional individual therapy, group and family therapies, and short-term therapies. But there is also a multitude of other nontraditional methods, such as past-life therapy and neuro-linguistic programming.

The most traditional therapy is psy-

chodynamic, where unconscious conflicts are explored as they relate to current emotional problems. *Behavioral and cognitive* therapies try to change present behavior patterns and ways of thinking that may be causing emotional problems. In changing those behaviors and thoughts, *experiential* therapy is often used, in which the client acts out roles or expresses emotions in order to bring about a catharsis.

Each type of therapy has its own set of advantages and disadvantages. Psychodynamic therapy, for example, has been known to take years and be quite costly, but it is the most in-depth, thorough, and well-respected form of therapy. Behavioral therapists have been accused of causing clients to substitute one bad behavior for another because the reason for the problem was never uncovered. On the other hand, you get fast results. Experiential therapy is accused of being so "touchy-feely" and vague that the basic psychological problems are never dealt with, but it is a good exercise for the release of emotions, and it prevents the intellectualization of the problem by the client.

Today, most therapists use an eclectic approach, whereby they choose the type of therapy, or a combination of several types, depending on the client and the problem at hand. Unless you're attracted to a certain kind of therapy, choose a therapist who understands and practices a variety of therapeutic techniques.

### Psychiatrist, Psychologist, or Counselor?

There are many types of mental-health professionals who operate under the umbrella term *psychotherapist*, which includes psychiatrists, psychologists, counselors, social workers, ministers, and the like.

*Psychiatrists* are medical doctors who specialize in the treatment of psychological problems. They are licensed physicians and therefore may use prescription drugs in combination with counseling. Unless you suspect that you are suffering from a biological imbalance or severe psychiatric disorder, consulting a psychiatrist might be unnecessary and costly.

A *psychologist* has passed a state licensing exam and usually has a Ph.D. and extensive training in abnormal psychology, research, and diagnostics. These academic requirements enable a psychologist to perform large-scale studies and research projects, often in an academic or institutional setting. For example, psychologists have been instrumental in developing and administering educational and psychological tests. As with psychiatrists, the additional academic and licensing requirements imposed on psychologists, though advantageous, do not necessarily make them better at providing good individual or group therapy

than other trained professionals who lack advanced degrees.

The average person can get high-quality, affordable therapy for the full range of common problems from *counselors* and *social workers*, who usually have masters degrees in either social work, psychology, educational counseling, or some other related field. Often, their training focuses on people-oriented skills rather than on academic study. A practicing counselor or social worker is usually required by law to be supervised by a psychiatrist or psychologist.

### How Do You Choose a Therapist?

Once you've made the decision about what type of therapist or therapy you want, the next step is finding the right person. Studies have shown that having a therapist you *like* is the most important factor in insuring the success of your therapy. If you're on a tight budget, call a mental-health clinic in your area, as they usually operate on a sliding scale. If you can afford the \$50 to \$85 that a session usually costs (probably more for a psychiatrist), call your local professional association for social workers, marriage and family counselors, psychiatrists, and psychologists. Some cities may also have a **PSYCHOTHERAPY REFERRAL SERVICE** listed in the yellow pages. But the best way to find a good therapist is by personal referral. Ask for recommendations from friends who have similar values and goals. Get as much information about the therapist as you can from them.

Then call several recommended therapists to inquire about their theoretical orientation, policies for scheduling and payment, length of time the therapy will take, and other questions that are important to you. Set up a face-to-face interview with one or more of them. Use your intuition when you evaluate the therapists, as well as the factual information they give you. Did you feel the therapist understood you? Was he or she clear about policies? Was the therapist someone you could admire and respect? Did he or she seem sincere? Did the two of you click? Research shows that this "click" is essential for getting good therapy.

### Should You Choose a Male or a Female Therapist?

There are good therapists of both sexes, but there are times when the gender can be important. Although you need to follow your instincts in choosing a therapist, you should not choose someone who will treat you as your parents did. Women used to seeking advice from men often feel they can only respect a man in the therapist role, but, as a rule of thumb, if you have had a lot of conflict with men, it's probably best to see a woman. Some-

times, though, having a male therapist helps you to see men in a new light. In either case, if the relationship begins to feel too familiar, you may need to switch to a therapist of the other gender.

## Problems to Watch for in Therapy

**Awkwardness.** If you feel awkward during your first session, and your therapist doesn't ask how you feel about being there, volunteer the information. Tell him or her that you're nervous and want to know what is supposed to happen. Ask any other questions or make comments that will put you at ease. Then, as soon as you're comfortable, open up and try to explain your situation with as much emotional detail as you can. This should get the process off the ground.

**Transference.** Transference is the process whereby a client transfers her feelings or needs concerning a significant person in her life onto the therapist. For instance, a male client of mine who came for help in his relationships with women told me he had never met a woman who understood him as well as I did, and because of that he was falling in love with me. I explained the feeling was natural but that I was being paid to understand him. I said my goal was for him to get other women to understand him as well. He had transferred his need to be understood and cared for by a woman onto me.

**Countertransference.** This happens when a therapist transfers his or her feelings or needs onto the client. Below, you'll see various ways that transference and countertransference can cause serious problems in relationships between therapists and clients—particularly when the therapist isn't handling the situation to protect the client.

**Authority issues.** It is a well-documented fact that women tend to seek therapy more readily than men. One theory about this suggests women's traditionally subordinate role in society creates feelings of inadequacy or a sense that they are to blame for their unhappiness. Because of this, women are more open to seeking and accepting help from experts—and more likely to let their therapist play too strong a role. This is unfortunate, because a critical issue for many women in therapy is their need for autonomy and self-confidence. Women often trust too much and give too much power to their therapist, particularly if he's male. They often transfer their need for an authority figure from father and husband to the therapist.

**Dependency issues.** Joanne was overweight. She sought counseling because she was caught in a vicious cycle—eating to overcome her depression at her inability to lose weight. Week after week, she

would tell her therapist how angry she was with herself for failing to stick with her diet-and-exercise program. Week after week, Joanne's therapist would listen and reassure her client instead of trying to get to the root of the problem. Between sessions, Joanne was encouraged to call her therapist anytime she felt bad—an option Joanne exercised frequently. Joanne's therapist never confronted her with the fact that she'd been whining about the same issues without attempting to make any changes. Joanne felt better after her sessions because of the attention and empathy lavished on her by her therapist. That Joanne's therapist was enabling her to stay locked in a mentally and physically destructive situation never crossed Joanne's mind; nor did it occur to Joanne that her therapist might have countertransferred her own need to be needed: she probably enjoyed her client's dependence, not to mention the income!

Don't assume your therapist's motives are always altruistic. He or she may have conscious and unconscious ulterior motives. Money motivates some. But many people in the helping professions seek emotional gratification by assuming responsibility for others.

**Sexual abuse.** The power innate in being someone's therapist can be dangerously intoxicating. Therapists are more likely to transfer their sexual needs to the client if their own sex lives are less than adequate. I remember having sexual fantasies about a male client when I moved to a new city and had no social life. I consulted with another therapist and realized there were voids in my own life I needed to attend to. Fantasies are not unusual; a February 1986 issue of *American Psychologist* reports that 87 percent of psychotherapists admit having been sexually attracted to their clients. It's what one does with the fantasies sexually that

counts. If my fantasies had continued, I would have felt obliged to refer the client elsewhere. A therapist's sense of ethics should keep him or her from acting on the original impulse.

Although *American Psychologist* reports that 9.4 percent of male therapists and 2.5 percent of female therapists have acted upon their urges and have become sexually involved with their clients, a 1977 study by S. Butler, Ph.D., and S. L. Zelen, Ph.D., estimates that about 20 percent actually do have sexual relations with their patients. Because it is so clearly a breach of ethics and a misuse of power, it's often difficult to obtain accurate statistics.

## Success Rate

Despite all the problems that can arise in a therapeutic relationship, Morris B. Parloff, Ph.D., a professor of psychology at American University in Washington, D.C., has shown that most types of therapy do work. Another study, by Northwestern University psychologist Kenneth I. Howard, Ph.D., showed that simply making an appointment helped 10 to 18 percent of therapy seekers before they even had the first session.

The closest thing to scientific proof of the efficacy of therapy is a May 1986 study by the National Institute of Mental Health, which proved that psychotherapy works as well as drugs in lifting depression. A University of Colorado research team has reported that psychotherapy is effective for eight out of ten patients.

Getting good therapy probably isn't any easier than getting good medical treatment. But by choosing a therapist carefully, asking the right questions, and following your innermost feelings, you can make progress in your personal growth. □

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"Now then, would anyone in the group care to comment on the feelings that Irene has just shared with us?"