

Book Reviews

Psychotherapy: Research and Practice

The Investigation of Psychotherapy. Commentaries and Readings. ARNOLD P. GOLDSTEIN and SANFORD J. DEAN, Eds. Wiley, New York, 1966. 443 pp., illus. \$9.95.

In the preface to this book the editors observe that research in psychotherapy has had remarkably little influence on practice. Several of the selections bear witness to this disturbing finding. Despite the many studies explicitly focused on parameters of the treatment situation, studies that frequently question or contradict the accepted beliefs in the field, what one writer in this collection has called the "functional autonomy of psychotherapy" continues to flourish. What are the reasons for this neglect? This collection both poses the question and helps to provide some of the answers.

A good example of the study that flouts a traditional stereotype is the paper by Lorr, McNair, Michaux, and Raskin. They selected frequency of treatment as their independent variable and compared the results of once-a-week, twice-weekly, and biweekly treatment over four- and eight-month periods. Patients were randomly assigned to each treatment schedule. After four months, self-ratings of the patients on six scales were not significantly changed, nor was there any difference between subgroups; that is, four months of treatment had no effect (by this criterion), regardless of the frequency of session. After eight months, there was improvement on one of the self-report scales, but again there was no relation between frequency of session and improvement. One might ask to what extent this finding has influenced practice—if at all.

Bergin's paper provides another example of unconventional findings that are rarely mentioned. He points to at least two studies in which certain groups of therapists brought about a

significant *negative* effect on their patients. In one study, they were the inexperienced therapists; in another, they were those who had a poor relation with the patients ("low empathy"). One of these studies goes back to 1960; once again, one wonders if the establishment has heard.

It is not only practitioners who file and forget research findings; the more disturbing fact is that investigators also do so. The diversity of their approaches and ways of measuring response to therapy is strikingly revealed in this book. One study used as a measure of improvement the patients' self-reports on the Taylor Anxiety Scale; a second depended on the correlation between ratings of actual self and of ideal self; a third developed its own procedure, the Extreme Mental Illness Schedule; and a fourth measured the distance within which a phobic patient would come of a nonpoisonous snake. Refreshing agreement on procedure is found in two studies of depth of interpretation which use the same 7-point scale; such agreement, unfortunately, seems to be exceptional. Considering that practically all the papers were written within a short time of each other, the lack of crosstalk between them is cause for concern. Here may lie one reason why the research is not heeded more; the lack of agreement within the field may dilute its influence on people outside.

Another reason may be the failure of researchers to ask clinically meaningful questions. Long overdue is the decisive study of the therapist's timing of interpretations, for example, or a definitive exploration of the behavioral manifestations of transference. These studies are not only out of sight; they are not even approximated. Too many studies, including some of those presented here, are so rigidly bound by a hypothesis-testing framework that they

are unable to discover anything new. A study by R. L. Cutler starts with the postulate that "a systematic relationship exists between the therapist's conflicts and his tendency to over- or under-report the occurrence of similar behavior in himself and his patients" (p. 270). The hypothesis is confirmed (to no one's surprise), but little has been learned. One would like to know more about the process of distortion: what the cues are that trigger over- or under-recall, for example, and how aware the therapist is of these cues; but this study does not provide the answers.

Worthy of note is the growing interest in uncovering experimental foundations for psychotherapy. Much of the traditional psychological literature is now being combed for its relevance to the treatment situation, and the most recent convention of the American Psychological Association devoted a symposium to the subject. One of the papers in the book, by A. P. Goldstein, brings into relation an established line of work in social psychology and the problem of the patient's and the therapist's expectations. Another paper, by Slechta, Gwynn, and Peoples, draws parallels between psychotherapy and verbal conditioning, and the papers on behavior therapy explicitly rest on more traditional underpinnings. What has been up to now a field of applied research may slowly be joining with its more academic counterpart. Its influence on therapeutic practice—so slight at the moment—may eventually be felt more strongly when it has gathered the weight of all psychology behind it.

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Social History

Medicine in America. Historical Essays. RICHARD HARRISON SHRYOCK. Johns Hopkins Press, Baltimore, 1966. 366 pp. \$7.50.

Richard Shryock's name has, to more than a generation of historians, been almost synonymous with the history of medicine in America. The present fugitive essays were published originally over a 35-year period—the earliest in 1930, the most recent written especially as an introduction to this volume—and demonstrate quite clearly the nature of Shryock's contribution to the writing of American medical history.