

## Book Review

**Arlene Vetere and Jim Sheehan** (eds.), *Long Term Systemic Therapy: Individuals, Couples and Families*. Switzerland: Springer, 2020, 209 pp., ISBN 978-3-030-44510-2. Soft cover: £29.99

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I had the privilege to attend Barbara Dale's retirement event at the Tavistock Clinic several years ago. At one point in her speech she looked rather quizzically down at the ground and said, 'Of course, we were dealing with a lot of very serious issues a lot of the time'. At the time the UK's statutory mental health services were going through a national shift towards brief work and even briefer work. The drivers for this were many – funding contractions, waiting list management pressures, a focus on goals and outcomes from the outset – but Barbara Dale's words struck a chord. Although the iThrive model (Wolpert *et al.*, 2015) has redressed the balance somewhat by suggesting a service framework for UK Child and Adolescent Mental Health Services that include very short, brief, medium *and* long-term therapeutic interventions, there has been a startling lack of focus in the therapeutic literature on long-term work, in recent years.

The book is divided into four sections: long-term work with couples and families; work with individuals; work with practitioner groups, and long-term work with family businesses. Arlene Vetere reminds us in the first paper that the theoretical basis for family therapy emerged out of clinicians working with presentations which called for complex and long-term interventions at many levels – behavioural, cognitive, emotional and contextual. The core of her argument, and it is a central theme of the book, is that intergenerational contextual pressures on families and individuals – for example, abuse, transition and the effects of social upheaval – create adaptive-protective habits in individuals and families which become maladaptive as time goes on, as families create new generations and experience new contexts. These pressures may create hidden shame in individuals, causing problems with trust and autonomy. The proposition is that many of the more persistent and often returning clients of mental health services and independent therapists experience these entrenched dilemmas and

paradoxes, and that these take time to work with and resolve. This certainly strikes a chord with me; for eighteen years I worked in a London teaching hospital's Department of Psychological Medicine, where my caseload quickly became a cohort of clients, many of whom had attracted the diagnosis of personality disorder or psychosomatic disorder; most, if not all, had experienced persistent sexual, physical abuse and abandonment in childhood. I quickly discovered that long-term, persistent, and consistent practice produced good outcomes. These clients had no reason to trust, had experienced broken relationships and absorbed a huge amount of their local professional network time and expense; therapy in many cases took three to eight years, sometimes in fits and starts (what might be termed 'long-brief' therapy).

Jim Sheehan writes eloquently and passionately about developing long-term therapeutic relationships where couples are experiencing chronic illness. He points out that the role of the therapist is often to hold on to hope and provide a stable sounding-board, and that the role of the supervisor is often to remind the therapist that the work is having therapeutic effect even though couple conflict remains high. Chronic illness is uniquely stressful for relationships.

In the section on working with individuals, Chip Chimera and Ros Draper develop the theme that abused children develop into adults who have developed long-term strategies of denigrating the self and idealising others, whilst in many cases sacrificing their own needs for the sake of covertly looking after others. Chip Chimera writes beautifully about a long-term piece of work with a much abused woman and how the therapist used different modalities to ameliorate shame and to challenge the internal self-denigrating stories her client had internalised from her father. I was particularly impressed with the nuanced attention paid to client feedback. Ros Draper continues this theme but reiterates the importance of giving the power to clients to know when the therapy is ending. As with previous chapters, she highlights the core dominance of the client's ambivalence – that the very things that the client has developed to protect and survive may get in the way of psychological progress, and that the uncovering of ambivalence creates dilemmas around change; this process needs gentle and nuanced exploration. Positive connotation and reframing are the royal roads to this core ambivalence around the change dilemma, because the client's self-protective strategies are respected whilst clarifying future possibilities. The revisiting of past hurts and abuse from a position of safety and respect for the client's resilience creates agency and hope. I was particularly moved by the extensive use of client self-reports and evaluation of their

own progress in therapy: 'When I accept myself just as I am then I can begin to change'.


Sarah Houston then looks at systemic work with young people. Although she focuses on her ideas and practices around engagement rather than long-term work, I think she is positing that any work with young people must be grounded in good initial engagement. I liked what she says about use of self-disclosure and the central importance of developing trust and credibility – all of which takes time.

Moving to the papers on work with professional practitioner groups, Helga Hanks makes the case for individual and group support in the workplace by describing her considerable experience and knowledge in this area, including a literature review. She makes the point that mindfulness practices alone – often the favourite offer of service managers to staff – are not enough, and that dialogic and relational support is also necessary. I would have liked more about the social, cultural, power and status differences that affect burn-out. Organisations and teams are often stratified for race, culture and gender, and these covert and overt processes and their moment-to-moment effects on staff need naming (Opara *et al.*, 2020). The editors in their afterword to the papers draw attention to the need to look at equalities, difference and context in relation to long-term work.

T. K. Lang from Oslo draws our attention to the importance of tracking micro-interactions in context in staff support groups, drawing on dialogic theory. Long-term group support works by paying close attention to context: 'Who are you? Who am I? What are we doing together? Why are we doing this?' The main technique for developing new ideas and narratives is achieved by the story-teller listening to the group's reflections whilst not responding; group convenors endeavour to create contexts of appreciative, deep listening. I liked the detailed description of first and subsequent meetings, but some reference to evaluation and a literature review of similar consultative models in the literature would have been helpful. In the same vein, Paddy Sweeney and Martin Daley describe their long-term supportive work with groups of clergy in Ireland. They make the point that systemic staff support, rooted in Appreciative Inquiry practice, turns on the use of *questions* as a primary modality to build themes, obtain feedback and to pose new questions. This stands in contrast to group dynamic consultative models.

Finally, Ana Aguirregabiria writes about her interesting long-term work with families in business. I was left wanting more on this and perhaps this field requires a separate set of papers. The dilemmas faced by family businesses often propel individuals into the therapy rooms of independent systemic practitioners, and these dilemmas, as Aguirregabiria points out,

often turn on issues around belonging and independence, leadership struggles, financial challenges and sibling rivalry. I suspect that systemic organisational support and family business consultative work require a substantive meta-theoretical base, one that addresses the moment-by-moment effects of intersecting and multi-level contexts on organisations, teams and individuals, and this would have enhanced the latter chapters in the book. Perhaps a reference to Coordinated Management of Meaning (Pearce, 2007) or Christine Oliver's work (2005) in this area might have added specificity and explanatory value, and might open up this field to evaluation, as well as linking to the systemic organisational literature.

This is an enjoyable, highly relevant and timely addition to the literature, and addresses an important and much neglected aspect of systemic practice and consultation. **Percy Aggett**  (East London NHS Foundation Trust and Tavistock Clinic, London, UK)

## References

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