

The therapy trap



Part 1 of a series of extracts from an outspoken account of voluntary sector drugs work in Manchester

“ THROUGHOUT THE '70s we were held spellbound by our own belief in therapy. It was the answer. And we had it. Now I find most therapy to be much akin to nuclear power stations. We all know that they have a limited power to achieve their objectives. Many of us suspect the cost is disproportionate to the outcome. A few of us would like to close them down. But what would happen to all those unemployed therapists? And what chance for the supply industries which have sprung up around them? Who in their right mind would listen to those turgid, pretentious relaxation tapes?

Clearly, therapy should be kept on a leash and securely muzzled when let loose in public: especially around the young and impressionable. Many have benefited enormously, but too often 'therapy' – in all its manifestations – has been used to inflict further humiliations on those already socially dislocated.

At least in the early years, therapeutic interventions were limited and therefore innocuous. Sadly, embarrassingly, the real 'breakthrough' came from the voluntary sector. In the USA, Chuck Dederich invented the Synanon Game. This led to the formation of the Synanon Community for drug users and spawned a proliferation of similar communities across the world. At one stage, Dederich ordered all the residents to divorce and remarry other residents of his choice. Once he ordered a rattlesnake to be left in the letterbox of a prosecuting attorney.

These were the historical roots of the therapeutic communities which sprang up around the south of England during the early 1970s. There weren't many. Mostly they mellowed fairly quickly. The mystery is how such a small number of establishments were able to influence, so dramatically, developments in the rest of the drug treatment network.

For us, I think, it was the opportunity to share some of the rewards. Some of the power. Picture this. We would work with a drug user for years. We would disarm him when he got violent. We would clean up after he had pissed in our broom cupboard. Occasionally, we would be around to administer the airway when he overdosed. And then one day he would get arrested for burglary or something similar. We would plead for him in court. Refer him to a therapeutic community. And if it worked? Then he would send *them* a card every Christmas.

(Not us.) He would credit *them* with the success of his treatment in any interview with the media. (Not us.) How do you think we felt? We wanted some of that power. We wanted some of that kudos. And the key was therapy.

Therapy would deliver us a limited amount of power over our customers. Therapy would enhance our profes-

sional standing among NHS colleagues. Therapy would provide the reward of seeing some customers 'grow', and justify excluding those who refused to 'grow'. Above all, therapy was magic. It marked us out from the others.

We had to find something. We had renounced the power of the clinics and their over-medicalising psychiatrists. But faced with substantial numbers of drug users who refused to accept responsibility for their actions; refused to allow themselves to 'grow'; refused to work on their low 'self-image'; who revelled in their drugtaking, their shoplifting and deception, their 'victim role' – we felt we had to *do* something.

Somewhere in the early '70s, we lurched into the therapy trap.

In 1972 we decided to provide a two-tier centre. We needed to sort the sheep from the goats; the intoxicated from the drug

free; the unmotivated from the motivated. Only those motivated to change could really benefit from our therapeutic tools. And we built up our stock of therapeutic tools as assiduously as the Water Rat piled up those heaps of small arms and cudgels for Toad and Badger and Mole. (Here's a gestalt for the Mole. Here's a psychodrama for the Badger ...) We undertook courses in gestalt (yes!),

and dramatherapy, and transactional analysis, and counselling (the poor man's therapy), and a hundred more.

Half the time, what we did was not therapy at all; half the time it was simply about the management of resources. About creating order out of chaos. But rules were for 'straights'. We had no desire to be seen as day-centre policemen. So we applied to our rules a veneer of therapy, camouflaged them with the notion of personal growth.

And all the time those who weren't 'motivated' found better places to go. Until we became something we had never intended to be. An agency almost exclusively for those committed to change with little to offer those who were using drugs and could see no reason to change, or at least no possibility of attaining the standards we had set for them.

Somewhere in there, I expelled a young woman for refusing to talk to an empty chair. Somewhere in there, a drug user chose prison rather than a referral to Lifeline, because "they do your head in; make you talk to chairs and things". Just think of

that. Somewhere in there, we had decided that forming meaningful relationships with furniture was more important than preventing drug users going to prison. And the process continued relentlessly. We established written contracts. Work penalties. We encouraged customers to confront themselves. To talk to chairs

Therapy has been used to cause further humiliation to those already socially dislocated

by

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Next issue – escape from the Therapy Trap