

## Denial and the De-Souling of Psychotherapy: A Reply to "Is Psychotherapy Dying?"

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The following reply to [Dr. Ryan Howes' recent posting](#) is based on my forthcoming book [Psychotherapy for the Soul: Thirty-Three Essential Secrets for Emotional and \*Spiritual\* Self-Healing](#).

Yes, Dr. Howes. Psychotherapy is dying. Denial, as psychotherapists know, can be a maladaptive and dangerous defense mechanism. Psychotherapy today is on its death bed, beset by hostility from all sides: a victim of [aging](#), managed care, "New Age" spirituality, life-coaching, psychics, exorcists, economics, poor public relations, internecine sniping, and especially, the ascent of neurobiological [psychiatry](#) and [psychopharmacology](#). We are at a precarious crossroads in the history of psychotherapy, a quite literal battle for the hearts, minds and souls of the public--both the "consumers" of mental health services and its practitioners. If this pitched public battle is lost, the psychotherapy depicted here will likely go the way of the dodo. Psychotherapy's slow, insidious descent toward extinction is well under way.

The public is disenchanted with psychotherapy. This negative attitude has been exacerbated by the predominance of [Cognitive Behavioral Therapy](#) (CBT), which is spuriously touted by its frequently fiscally motivated supporters as superior to other kinds of psychotherapy in both efficacy and brevity. Psychotherapists in training--psychiatric residents, clinical psychology, counseling and social work interns too are taught the same misleading party line. The sad result has been a gradual mechanization, dehumanization and reductionistic de-souling of psychotherapy.

An estimated ninety percent of psychiatrists no longer practice psychotherapy much at all, relying heavily instead on pharmacotherapy. According to a recent [Los Angeles Times article](#) (August 5, 2008) about psychiatry, "Wider use of antidepressants and other prescription medications has reduced the role of psychotherapy, once the defining characteristic of psychiatric care. . . .The percentage of patients who received

psychotherapy fell to 28.9% in 2004-05 from 44.4% in 1996-97." The vast majority of psychiatrists today receive only minimal training in providing psychotherapy.

Ironically, the aforementioned mounting crisis within the psychotherapy world parallels a growing crisis in public mental health. The public's need for psychotherapy is clearly greater than ever. Serious mental disorders are epidemic. More than one in four American adults (almost 60 million) has received mental health treatment in the past two years, according to Therapy in America 2004, a new Harris Interactive poll. In a recent [American Psychological Association](#) survey (2004), fifty-four percent of Americans are seriously concerned about the level of [stress](#) in their daily lives. And according to the National Institutes of Mental Health, more than 44 million Americans suffer from some mental disorder. 61 percent of men and 51 percent of women have experienced psychological [traumas](#) related to [post-traumatic stress disorder](#) (National Comorbidity Survey). Approximately 18.8 million adults suffer from clinical [depression](#), and [bipolar disorder](#) affects about 2.3 million annually (National Institutes of Mental Health). Almost 20 million American adults suffer from some diagnosable anxiety disorder : more than 3 million meet diagnostic criteria for [obsessive-compulsive disorder](#); 3.2 million experience [panic](#) attacks and [agoraphobia](#); and 5.3 million American adults ages 18 to 54 suffer from [social phobia](#) (National Institutes of Mental Health). 2.2 million Americans are incapacitated by [schizophrenia](#) (National Institutes of Mental Health).

Real psychotherapy is becoming more and more difficult to find. But this is precisely what is needed. Most people suffering from emotional disturbance who have at least several sessions of psychotherapy are far better off than untreated individuals. And 50 percent of patients noticeably improved after eight therapy sessions, while 75 percent of individuals in psychotherapy progressed by the end of six months (APA, How to Find Help Through Psychotherapy, 1998). Research suggests that psychotherapy is frequently at least as effective as medication, and that the benefits are more enduring. Other studies support a combination of both psychotherapy and psychopharmacology as the most efficacious treatment of serious depression and other debilitating mental disorders.

Here in America, and around the world, we desperately need more—not less—psychotherapy to address this raging mental health epidemic. According to the Surgeon General's Report on Mental Health (1999), untreated mental health disorders cost American businesses seventy-nine billion dollars in lost [productivity](#) each year.

But meanwhile, the soul of psychotherapy is being sold. Even the American Psychological Association does little to combat this unfortunate trend. Indeed, in America, there is a growing movement, already established in some states, to grant psychologists the right to prescribe psychiatric medications. This is, in my view, yet another nail in psychotherapy's coffin. It would be far more convenient and financially rewarding for psychologists to forego providing psychotherapy altogether, relying instead, like most psychiatrists today, on prescribing drugs. Patients have already come to depend heavily on pharmaceutical support, concurrent to but often in lieu of psychotherapy.

In its heyday, during the mid-to-latter twentieth-century, psychotherapy was touted by some as "[religion](#) for the previously irreligious." What happened? Psychotherapy slowly had much of its spiritual heritage and soul sucked right out of it. Ironically, the field of psychotherapy faces this life-threatening [identity](#) crisis at the precise moment that consumers of mental health services—the general public—most need what a secular spiritual psychotherapy can provide: some way of redeeming our metaphorical demons,

discerning and fulfilling our destinies, nurturing our souls.

The truth is, most psychotherapy patients need far more than what pharmaceutical intervention and/or [cognitive](#) restructuring--the two most popular "evidence-based" modalities today--can provide. As does every person seeking meaning and peace of mind. They need and deserve support and accompaniment through their painful, frightening, perilous spiritual or existential crises, their "dark night of the soul." They need a psychologically meaningful method to confront their metaphorical devils and demons, their repressed [anger](#) or rage, and the existential reality of [evil](#). They need access to a secular psychotherapy willing to ask the right questions, and not afraid to embrace spirituality. They need a psychotherapy that restores their soul.

For more than a century now, the Greek word psyche has been misinterpreted by psychiatry and psychology to merely mean "mind." Consequently, psychiatry, psychology and psychotherapy--the study and healing of psyche--have become almost exclusively concerned with the mind (including cognitions or thoughts, perception, [memory](#), imagination, will and emotions) and human behavior. But the classical term psyche, archetypally symbolized by the ethereal butterfly, literally means life, spirit, self or soul. What mental health consumers need now is a secular spiritual psychotherapy.

The fundamental task of a secular spiritual psychotherapy is to redeem (rather than cast out or exorcise) our emotional devils. It is inevitably both a psychological and spiritual venture. Bravely voicing our inner "demons" --symbolizing those [unconscious](#) tendencies we most [fear](#), flee from, and hence, are obsessed or haunted by--transmutes them into helpful spiritual allies. During this alchemical process, the esoteric secret that many artists and spiritual savants share is revealed: That same demon so righteously run from and rejected paradoxically becomes the redemptive source of vitality, [creativity](#), and authentic spirituality.

Psychotherapy is dying. Psychotherapy's very survival is critically threatened. That is not the question. The only real questions are these: What are we going to do? Can psychotherapy be saved? If its demise is inevitable, can psychotherapy be resurrected? Must psychotherapy in its current incarnation die and be reborn in some renewed, more vital form? How can we restore psychotherapy's soul?

Part of this posting is excerpted from Dr. Diamond's forthcoming book *Psychotherapy for the Soul: Thirty-Three Essential Secrets for Emotional and Spiritual Self-Healing*