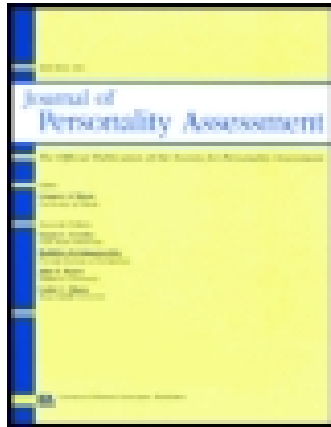


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Book Review of Obsessions and Compulsions

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Clinical Supervision: Skills for Substance Abuse Counselors. David J. Powell. Human Sciences Press, New York, 1980.

Clinical Supervision: Skills for Substance Abuse Counselors-Trainee's Workbook. David J. Powell. Human Sciences Press, New York, 1980.

Reviewed by Ralph Robinowitz

Ralph Robinowitz, PhD, has directed the Drug Dependence Treatment Program at the Veterans Administration Medical Center, Dallas, for the past eight years. His interests are in clinical research, teaching and consultation, and clinical practice.

Although psychologists have long been involved in alcohol and drug treatment as researchers and teachers, few have elected to be providers of direct patient care in these areas. The National Institute of Alcoholism and the National Institute of Drug Abuse form two of the three components of the Alcohol, Drug Abuse and Mental Health Administration (ADAMHA). Yet unlike the mental health centers, drug and alcohol programs usually do not utilize psychologists as primary treatment providers. The Society of Psychologists in Substance Abuse organized at the APA annual meeting only two years ago has but a small membership. It is uncertain as to how the concept of psychologist as consultant to alcohol and drug treatment rather than as provider evolved. Initially, there was a belief that only a recovered alcoholic could counsel someone with an alcohol problem. Later the concept of substance abuse counselor as a bridge between patients and traditional staff (nurse, social worker, psychologist and psychiatrist) arose. Today, whether the counselor is a recovered alcoholic or addict or neither, the concept of a person with no specific academic preparation as primary provider persists. Powell notes this primarily from alcohol programs; my experience with drug programs supports this observation.

The obvious question then is how to aid the untrained counselor in becoming more psychologically-minded. One means is to provide academic training, preferably both academic work and an internship. Powell describes the difficulties in providing formal schooling (cost, time, pay raises for advanced training, etc.). The Veterans Administration Medical Center, Fort Lyons, Colorado provides an eight-month program (including four months of academic training) to selected individuals wanting to be substance abuse counselors. Other agencies may provide workshops, short

courses, etc., but the difficulty is in providing the kinds of training the individual needs within cost limitations. A second approach is not to formalize training but to allow on-the-job experience and guidance from those with more training and/or experience to help the new person learn. Our setting suggests that a highly skilled person can come from this approach, but it depends on stable people and a low turn-over.

Unfortunately, the difficulty that substance abuse programs have is low finances and high turn-over rate, which almost eliminates the first two methods of staff training. This leaves a carefully prepared textbook or programed learning approach. How well does Powell accomplish this mission? He offers a quite readable book that psychologists interested in substance abuse treatment can learn from. The text and accompanying workbook are, however, intended primarily for counselors and those counselors promoted to supervise other counselors. These are "nuts and bolts" books that discuss people needs, needs assessment, what counseling can and cannot do, the laws and regulations governing substance abuse treatment, ethics, and how to obtain information, how to write position descriptions, and how to train. The books do quite well what they purport to accomplish. The issue as to why traditional mental health workers avoid direct patient care in this area is not broached. The creative work that individual psychologists have accomplished not only in alcohol and drug abuse but in the treatment of smoking, overeating, and gambling should suggest a much broader role for psychologists than limited training of other disciplines to apply psychological principles.

Obsessions and Compulsions. Stanley J. Rachman and Ray J. Hodgson. Prentiss-Hall, New Jersey. 1980. 437 pp. \$19.95. Century Psychology Series.

Reviewed by H. J. Eysenck

Professor H. J. Eysenck is Head of the Psychological Department at the Institute of Psychiatry, and Psychologist at the Maudsley and Bethlem Royal Hospitals. He was among the pioneers of behavior therapy, and has been particularly interested in the application of learning theory and animal models to the treatment of human patients, trends that are strongly featured in the book under review. Eysenck was born in Berlin in 1916, studied Psychology under Sir Cyril Burt at the University of London, and has been associated with the Mauds-

ley Hospital and the Institute of Psychiatry since 1947.

Obsessive-compulsive neuroses have always been known as being not only very serious in their consequences for the patient, but also for the difficulty of treatment. As Dr. D. H. Malan, one of the leading British psychoanalysts, stated in his book, *Individual Psychotherapy and the Science of Psychodynamics*, speaking about obsessive-compulsive patients:

even though the psychopathology in such cases appears perfectly intelligible, accumulated practical experience suggests that often the symptom itself develops an autonomy, and no matter how extensively the pathology is interpreted and apparently worked through, the symptom remains untouched. It is apparently true, for instance, that there is no known authenticated case of an obsessional hand-washer being cured by psychoanalytic treatment. In my view, therefore, the treatment of choice immediately becomes *behavior therapy*.

This interesting admission agrees perfectly with my own evaluation of hundreds of case records I have consulted at the Maudsley and Bethlem Royal Hospitals, going back over many years; they show that psychoanalysis, psychotherapy, lobotomy, electroshock and drug treatment are all equally unavailing. This new book by two experienced behavior therapists raises great hopes that in future patients suffering from obsessive-compulsive disorders should have a very good chance of recovery, after relatively short periods of treatment; somewhere between 85% and 95% should recover completely, or almost so, after treatment for three months or so. This is a tremendous achievement, and Professor Rachman and Dr. Hodgson are to be congratulated on presenting the rationale, methodology, follow-up and evaluation of their work in a clear, conservative, and modest fashion.

The book reviews in a very thorough fashion the conception of the disorder, theories regarding its origin and treatment, different types of obsessional disorders, causal factors observed or implied, personal and social aspects, the relation between obsessional disorders and other psychiatric problems, as well as the evidence on the persistence of compulsive behaviors. Also included is the authors' own theoretical analysis, based on many years of intimate acquaintance with large numbers of obsessive-compulsive patients, most of whom formed the group investigated in the studies which are reported in the later sections of the book.

Essentially, the clue to the method of treat-

ment was derived from the animal studies of R. Solomon and his colleagues. In brief, these workers studied dogs in a shuttle-box, conditioned them to jump to a conditioned stimulus through administering an electric shock to the paws. The animal would soon learn to jump from compartment A to compartment B, over a hurdle, when the conditioned stimulus was applied, and it was found that the dogs continued to jump even though the electricity supply was disconnected — hundreds and even thousands of jumps were recorded in this fashion. This obsessive-compulsive habit, which presumably dissipated anxiety, was very difficult to break, just as obsessive-compulsive habits of hand-washing are difficult to break in humans; the only method that really worked was response prevention and flooding. The dogs were prevented from jumping by increasing the height of the hurdle, and when the conditioned stimulus was administered the dogs were "flooded" with emotion and fear, yelping, running round the compartment, defecating and urinating and generally showing their extreme fear. However, after a relatively short time the fear began to dissipate, and after several repetitions of this procedure the dogs were permanently cured.

A similar procedure was tried with human patients, and proved to be equally successful. Patients, after explaining to them the rationale of the procedure and obtaining their informed consent, were put in the same room with the therapist, who would dig his hands into an urn full of dirt and rubbish, and invite the patient to do the same. Once he had done so, he was asked not to go and wash his hands, but to sit quietly with his hands covered in dirt. This of course produced a similar amount of emotion and "flooding," and equally after 10 minutes or a quarter of an hour the high degree of fear began to diminish, until finally, after half an hour or an hour, the patient would sit rather miserably holding out his hands, but no longer in a strong state of fear. When this low state of anxiety was reached, the patient was allowed to wash his hands, and go home. The procedure was repeated a number of times, and, as already said, proved extremely successful.

The book will of course be invaluable to behavior therapists — or indeed any therapist — wishing to treat disorders of this kind. It should also be read and consulted, however, by anyone interested in the theoretical basis of behavior therapy, and of neurotic disorders generally. The authors very carefully monitored the psychophysiological, behavioral and introspective events occur-

ring during the treatment period, and link their observation with their theoretical conceptions. The work demonstrates how very possible it is to derive methods of treatment for human beings from theories and facts based on animal research in the laboratory; this point has always been strongly denied by psychoanalysts and "cognitive" psychologists. In view of the popularity of cognitive psychotherapy at the moment, it may be opportune to ask those who hold such views to account for the success of the treatment, and to demonstrate the importance of cognitive factors, to the recognition of which they are committed, by improving the success rate through the introduction of a cognitive addition to the methodology. The book is thus bound to create a considerable degree of theoretical discussion, as well as pioneering new ways of treatment. The treatment throughout is rigorous, academic in the best sense, and very convincing, at least to one reader; others no doubt will form their own impression, but they will not be able to deny the success of the method, and the close relation between methodology and theory. This is a rare thing to find in abnormal psychology, and the book marks a real step forward in our understanding of neurotic disorders and our ability to treat them.

Mental Health Programs in the 1970s

Program Evaluation in the Health Fields. Vol. 2. H. C. Schulberg and F. Baker, Eds. Human Sciences Press, New York, 1979. xvi, 467 pp. \$29.95.

Reviewed by J. M. Innes

J. M. Innes, PhD, is Senior Lecturer in Social Psychology, University of Adelaide. He has researched personality correlates of coronary heart disease proneness and susceptibility to social stressors. Additionally, he has evaluated community programs concerned with the modification of health risk factors, and with the provision of care for delinquents outside institutions.

Two fields which presently attract attention and funds for applied psychologists are program evaluation and intervention in health care. A volume at the intersection of such active research fronts would seem likely to generate interest for many practitioners. A perusal of this volume, however, shows that those who are concerned with current issues in the fields are likely to be disappointed.

The book contains twenty-seven chapters,

nineteen previously published and the remainder apparently written for the volume. Those previously in print appeared between the years 1971 and 1975, with the modal year of 1972. There is a dated quality about the contributions. Even those written for the book have that same air about them; the references all appear to cease about 1975-76. The volume therefore gives a picture of the state of the field up to the mid 1970s and is unable to give researchers or practitioners much of an idea of how things are now developing.

There is a still further limitation to the audience for this book. While intervention in health care and in communities has been proceeding into the treatment of physical as well as the more traditional mental health areas (cf. the development of the *Journal of Behavioral Medicine* and issues in 1979 of *Professional Psychology* and the *Journal of Social Issues*) this volume is restricted almost entirely to the evaluation of mental health treatment programs. While reflecting the mid 1970s, the book does not inform those concerned with the developing issues.

While there are quite severe limitations to the use of this volume there are parts of interest. The articles come from a wide variety of sources, and psychologists who restrict themselves to APA journals may find their views widened somewhat. The spate of evaluation and social policy journals, however, do not find room here. Chapters by Levine and Rosenberg on the use of the judicial adversary model in program evaluation and by Guttentag on a decision theoretic approach are useful. Those who are looking for new examples of how problems of program evaluation may be circumvented will be disappointed.

It does seem to this reviewer that much more could have been done at the present time. A statement in one of the final articles reprinted in the book that "most social and behavioral scientists are often not concerned with or aware of the day-to-day problems in community health and do not plan or carry out research that would be helpful to those responsible for planning and delivering health services" (p. 435) may have been partially true when it was written in 1971. It certainly cannot be an accurate reflection of the state of the field nearly a decade later. Practitioners will obtain a poor impression of program evaluation of health care if they take this book as their current model. More people are doing things which may be offered to the practitioner.