## GRACE **NOTES VI**

DR SALMA SIDDIQUE considers therapy, love and politics, in the time of recession

■ OVERNMENT POLICIES ARE creating an everwidening gap between the haves and 'will never  $\blacksquare$  gets' because of the intent to reduce the number of people on benefits. During the centenary of George Orwell, it is timely to review how poverty affects us all. This connects, for me, with some challenging questions about what the work of our profession actually is. Is it one of health and wellbeing, human performance/potential, or symptom relief? Yes, we have the three Ps (Crossman, 1969) of potency, power and protection but what does it mean in reality? Is it not time for us to reassess our positions as agents for change? In short, how can TA help to question and challenge the inequalities which are increasingly coming into the therapy room?

In recent months *Therapy Today* (BACP Journal) has authored a number of articles on how counselling fits with the recession. It seems to me that the recession is both present outside the therapy room in the form of poverty and an increase of chronic ill health and also within the therapy room with the poverty of aspiration. I think we need to name the very social processes of inequality, disadvantage and oppression which are embodied in our clients' stories of powerlessness and disadvantage. We need to recognise that clients' stories and language are being influenced by the world in which we currently live. Proctor (2002) examines closely the issue of power and politics in therapy. Perhaps Proctor's work should be essential reading for all psychotherapy courses? Surely our work is a political act that offers insight into human interactions by the way (internalised) models (ego states) and maps of self and other illuminate interpersonal issues in society.

As therapists we can refer to Berne's (1964) game theory shown in our social and political institutions: If It Weren't For You; Why does this Always Happen to Me?; See What You Made Me Do; You Got Me Into This; I'm Only Trying to Help You; Now I've Got You, You Son Of a Bitch; Why Don't You, Yes But.

Name the game and then what?

At times of stress it is easier to move to a position of shame, blame, scapegoat or bystander within our working organisations, public services like hospitals and in society generally; and harder to hold on to OKness. How do we

work realistically with the OK concepts within our work? It feels as if creativity is being stifled in the workplace. Difference is being scapegoated and there is more evidence of workers being bullied if they whistleblow (BBC News, 2013) despite legislation to support it. In fact it feels as if we are moving to indifference. There are shades of Orwell's (1949) dystopian novel Nineteen Eightyfour. Rizq (2013) laments the language used in healthcare and suggests parallels to Orwell's 'Newspeak'. She points out that the language presently in therapeutic use reduces the range of consciousness and feelings and encourages outcome-driven products and evidence-based

It is time to question and challenge the limitations being imposed on our clients' narratives and our own freedom to be ourselves. Do we really agree that freedom is too difficult? Ulanov (2001) argues 'all of us depend on someone to mediate the world to us. And, then we each need to be witnessed to feel real... People do not want freedom and truth, which only causes deprivation and suffering; they want miracles, mystery and authority. The pain that accompanies compliance is preferable to the pain that attends freedom' (p153). In a time of recession our clients have a greater need for stimulus, sensation, recognition of basic hungers and we need to hold the meta-perspective of why love matters.

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