perceived limits of gender or sexual orientation' and of the 'predominantly heterosexual model[s] of transference' (p. 78).

However, if Schaverien imagined that her book would be primarily useful for those working in 'palliative care' or with patients 'facing a life-threatening illness' (p. 1), she is also open to the fact that her readers will inevitably form their 'own mental pictures' as they read her book (p. 47). As a result, I feel encouraged to share with you that perhaps the most interesting insight I gleaned from The Dying Patient was some of the detail of James having been a boarding school 'survivor' in Shaverien's important phrase (p. 33). And, again as a result of having read the book, I might now be tempted to imagine or describe myself in a similar way. For example, The Dying Patient made me wonder how many other people, like James, felt in response to their experience in boarding schools, 'totally unprepared for the appalling realisation' on arrival 'of utter loneliness and abandonment' (p. 24), and that this particular 'wound' remained 'fresh' for decades (p. 24). It also made me wonder how many other boarding school survivors felt 'psychologically isolated' (p. 1) or 'suicidally depressed' for much if not all of their lives and that their lives remained unconsciously periodized into half and full terms (p. 22). It made me wonder how many of my own peers felt that their sense of house and home were peculiarly intense and that they were under-skilled in mediating their own experiences, or felt a nostalgically deep yearning and vengeful anger towards one or both parents. It also made me wonder how many other survivors experienced an inexplicable, overdetermined relationship to cold, snowy landscapes; felt ambivalent about food offered by parents and other carers; and felt either a politically useful, if not entirely conscious tendency to challenge institutions or the need to sabotage their own

projects so as not to 'collude with' a system they 'despised' (p. 37). Indeed, it made me wonder how many people in how many successive generations felt that their emotional life was 'not valued' (p. 25); had 'learned not to cry' (p. 49) and/or developed a set of part physiological/part psychosomatic symptoms, which could best be described as a related lump in the throat. Along with its many other achievements, The Dying Patient provides eloquent and poignant testimony to the fact that, in many cases, boarding schools 'don't "build character" or "make the man", they break the child, and replace it with a coat of armour filled with fear, loneliness and alienation' (p. 33). And, with James in mind, it seems I may not be the only person in the waiting room whose boarding school experience might explain why they're particularly drawn to the snowy Canadian landscape painting of the Group of Seven, to the related work of Joni Mitchell, or to the account of oppressive institutions offered by Michel Foucault.

The Dying Patient in Psychotherapy begins with Schaverien's account of how one can never predict what kinds of relationships might develop, how far one might travel, and what kind of lasting imprint might be left by the kind of touching, chance meeting that occurred between her and James. As I read the book, this particular reader shared the poignant sense of 'privilege' that accompanied Schaverien and James on their journey together (p. 83).

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CHOICES AND EXPECTATIONS

How to Choose a Psychotherapist. By Neville Symington. London: Karnac, 2003; 62pp, £9.99pb.

Therapy Beyond Modernity. By Richard House, London: Karnac, 2003; 330pp, £19.99pb.

Let me start off by declaring an interest here. I was looking for a psychotherapist several years ago. No, we hadn't got separated in a club or anything like that; I just needed someone to talk to. Lucky enough to have a friend in the biz (s-o-o well connected), I was asked a few questions to narrow down the field a bit. And they went something like this:

'Do you want a gay psychotherapist?'

Answer: 'No, their sexuality doesn't bother me (I am gay). I want an intelligent one.'

Pause to take that information on board: 'You do know that in some psychotherapeutic traditions, homosexuality is seen as an illness.'

Answer: 'Why?... Oh never mind, I'll deal with that if I have to. Just get me one who lets me talk, and doesn't keep over-interpreting my behaviour to me in an annoying, professional way.'

Two weeks later I was sitting in a muted room with a muted therapist, talking into the silence as if it was an Olympic event. Bulls-eye.

So it was with an informed and personal interest that I turned to these two books. And what a feast of contrasts they are, both published in the same year and from the same publishing house.

The one: produced by an entire family. Conception, writing, editing and cartoons; the Symingtons are surely the Waltons of psychotherapy in this their 'how to' guide, short on bibliography, and big on comments like 'Make sure that your therapist brings you hope and not despair' (p. 46).

The other: scholarly, indexed, densely argued, heavily pre-reviewed by experts in the field and with a select bibliography that runs to 18 pages, and has the subtitle 'decon-

structing and transcending professioncentred therapy'.

So the first is a book for the likes of me. A lay person looking for a therapist. And House's book presumably for the likes of those who have a professional interest in the subject. Unexpectedly, this is not what I discover on reading them.

Let's start with Symington clan. The only thing missing from this book is a paw-print from the family cat, perhaps out at the time the final proofs were checked.

And a rhetorical question, just to get it off my chest really. Does anyone else see the essential oddness of this Symington display of familial unity and devotion? Or am I just a curmudgeonly old isolate with a personality disorder? This is also rhetorical.

The language and ideas in this book (written I am sure with the best of intentions), as Symington says 'This little book is written for patients. It is a challenge to action' (p. 2), I find to be slack, inexact and irritating.

Capable of sentences like 'The natural agencies for alleviating human distress, like the churches and the numerous charities which they spawned are no longer part of the social structure for the majority' (p. 2), when surely he means the 'traditional' agencies. Or arguing that 'The clinician heals through talking to the patient. This is called psychotherapy' (p. 13). Now, my first response to this statement is that the client does the talking, and the therapist does the reflecting back, challenging, or whatever else needs to be done, to enable the client to be more aware of the issues. I check this personal view in my handy Dictionary of Psychoanalysis (Charles Rycroft, London, Penguin, 1972), on my bookshelves between Feng Shui for Cats and Crystal Healing.

Rycroft's definition is suitably pithy; psychotherapy is 'Any form of "talking cure" (in all forms of psychotherapy one or other party talks and in most forms both)' (p. 134). Later, in the second half of the same paragraph, Symington writes: 'Therapy of this sort holds up a mirror to the soul of the patient. The patient changes as soon as he understands himself. The therapist's job is to give birth to understanding.' (p. 13).

A mirror to the soul cannot be held up if the patient isn¹t allowed the space to explore their own experience. Perhaps he just means 'talking with'. Simple innit?

I confess to a personal prejudice here. I have an aversion to any book on therapy where I am referred to as a patient. It seems to reflect some biomedical and hierarchical model where the relationship is between healer (superior and all-knowing) and sick person (the opposite).

House's take on the whole process is very different from la famille Symington, where the problem of choosing a good therapist is recognized, but the tradition and practice of psychotherapy is not questioned. House has written a critical analysis of therapy as an ideology, 'which inevitably takes on a self-serving nature, being surreptitiously more concerned with preserving its own hegemony than with an honest authenticity of procedure' (p. 2).

What I like about House's book is that he tells you what he is going to do – i.e. argue one way or the other – and then he does it clearly and well. He is also prepared to take on some of the sacred cows of therapy, amongst them boundaries and confidentiality, to demonstrate the hegemony's instinct for self-preservation. In the conclusion to Chapter 4, he talks about the therapist's apparent professional expertise, where he says 'It might be also be that it serves to defend therapists from the uncomfortable reality that they do not know what they are doing' (p. 91).

This is fighting talk, and House's trenchancy is present throughout the book. He is concerned to confront rarely addressed issues, amongst them the adequacy of the therapist and how the profession protects itself from challenge. Clients are often not in the best position to issue such challenges, perhaps from the vulnerability of the 'patient' role, or because of the very issues they bring with them.

It is left to House to do this, and how refreshing it to see such arguments coming from within the psychotherapy's own ranks, in what turns out to be a surprisingly readable book. On finishing it I turn, as I often do, to that most human of perspectives, Carl Jung. Tentative, modest and poetic, a collection of his writings sits on my bedside table between Nancy Mitford's *The Pursuit of Love* and *Big Boys in Leather*.

'Wholeness is in fact a charisma which one can manufacture neither by art nor by cunning; one can only grow into it and endure whatever its advent may bring' (Jung, 1986, 279–80).

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Jung CG. Psychology and Alchemy. In Storr A (ed.) Jung: Selected Writings. London: Fontana, 1986.

JUNG, GENDER AND SUBJECTIVITY

Subject to Change: Jung, Gender and Subjectivity in Psychoanalysis. By Polly Young-Eisendrath. Hove and New York: Brunner Routledge, 2004; 248pp. £25.00hb.

Subject to Change, as the subtitle indicates, is a collection of essays on 'Jung, gender and subjectivity'. The author, Polly Young-Eisendrath, is a Jungian psychoanalyst who