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the experience of parenting and being parented; containing adolescents in organisations; the role of anti-social behaviour and difficulties in achieving separateness; psychotic and suicidal states. These are imaginative headings that try to reflect the non-linear development that Briggs proposes is the experience of adolescence today. However, they do accrue some odd contents; for example while admirably distinguishing gender identity from sexual identity, discussion of the former is placed within a chapter on achieving separateness, which is surely only one possible interpretation. Sexuality is given surprisingly little space and is mostly within the chapter on becoming a subject which, while having a paragraph on ‘emergent masculinity’, has no corresponding section on emergent femininity. There is, however, a chapter on ethnicity and identity that happily moves into a more complex view of ethnicity as multi-layered and also contextual, something often missed in previous modernist approaches.

A great strength of the book is the case studies that attest to Briggs’s skill as a clinician as well as an academic. They bring to life all the theory of the book, and are set in varied situations with relevance to the range of professionals at whom the book is directed. They are easy to relate to and contain characters and situations that we would all recognise, and Briggs translates with admirable clarity the underlying adolescent process so that one has a sense of ‘Ah, that’s what’s happening’, and thus a fresh perspective on how to respond opens up.

Unfortunately, and for me this is the main drawback of the book, much of the writing is over-dense and assumes familiarity with more analytic concepts than it easily explains, and is therefore less suitable for the introductory intentions of the series. The first two chapters in particular, which are home to important core concepts, can be hard to follow, and I did wonder whether the same things could not be said more simply and comprehensively to encourage and draw in the intended audience. Briggs’s thinking is sharp and incisive but seems at times hidden rather than made clear by the writing. Closer editing may well have helped the work become more transparent. At times I felt quite frustrated with an opacity that occluded meaning unnecessarily. This plus the intense focus on the inner world made me want to come up for a breather at times and reground myself in the physical world – make a cup of tea, have a stretch – which indicates a good workout, even if it need not have been quite such a difficult one.

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Reviewed by Rick Fothergill, Principal Lecturer in Psychological Interventions & CBT, University of Cumbria

This book adds to the series of ‘Counselling Primers’ already published by PCCS Books and builds on the success of the ‘Steps in Counselling’ editions (Sanders, 2002; Sanders, Frankland, & Wilkins, 2009). Looking back, a smile comes to my face as I recall, as a student on a person-centred counselling diploma course during the 1990s,
eagerly thumbing through earlier editions of these books and finding them invaluable as learning resources. Later as a counselling tutor, I continued to enthusiastically recommend those same books for counselling trainees. However, time has moved on, as indeed have I, latterly changing therapeutic direction and qualifying as a Cognitive Behaviour Therapist and tutor. So it is with great interest I review one of the later editions to this impressive collection of books.

The *Cognitive Behaviour Counselling Primer* is a compact introduction to cognitive behaviour therapy (CBT), at just over 100 pages in length. This means it is digestible enough to consume in one sitting if required. The book clearly identifies its audience as those with no previous experience of counselling or psychology, but interested in learning about CBT. The book is written by the very accomplished Windy Dryden, along with Rhena Branch, an accredited CBT therapist, trainer and supervisor.

Twelve chapters are listed in the contents, which include theoretical underpinnings, therapeutic alliance, change techniques, applications and research. Such a menu is impressive, yet does not leave much room for expansion of the ideas conveyed. Chapters 1 and 2, dealing with origins and theoretical assumptions of CBT, are the real highlights of the book. Often, when describing behavioural learning theories, authors can struggle to articulate complex ideas clearly. Not so the case here, as Branch and Dryden provide a simple yet effective overview. The chief characteristics of CBT are clearly, yet briefly articulated. I did wonder if a useful addition may have been a reference to Judith Beck’s (1995) *Cognitive therapy: Basics and beyond*, thereby providing a useful pointer for readers wanting to expand their knowledge further.

The middle chapters of *The Cognitive Behaviour Primer* focus on a rich variety of cognitive and behavioural change techniques, and provide a basic overview of the nuts and bolts of what a client and therapist might actually do together in therapy. Useful case illustrations and a transcript of a mock session really help illuminate the CBT interaction and bring theoretical ideas to life.

However, clearly encapsulating the content of CBT so briefly is a difficult task. Readers need to be aware that although interventions are many, these should not be randomly applied, but result from a clearly articulated, idiosyncratic, collaboratively agreed treatment plan. Indeed the useful chapter on case conceptualisation helps illustrate how treatment plans are individually arrived at and constructed alongside clients.

The treatment interventions discussed in this book tend to focus mostly on cognitive techniques, yet I was disappointed not to see more on Socratic dialogue. As a CBT trainer I have found that clearly articulating this concept assists students in fully understanding the concept of guided discovery, rather than viewing CBT as expert led and overly directive. Furthermore, CBT should also be viewed as an active therapy. The role of homework is discussed, but more focus on the use of behavioural experiments, with specific examples, could have been included to convey the collaborative empiricism of CBT.

The final chapter on research is remarkably brief. Its placement at the back of the book is somewhat strange given the need for contemporary services providing psychological interventions to focus on evidence bases and NICE guidelines. However, the authors do accept that there is so much CBT research that it is difficult to decide what to include, and they correctly conclude that the incorporation of research results into existing CBT theory and practice is exactly what keeps CBT
vibrant and contemporary. The book finishes with a useful appendix and glossary that lists important organisations, further reading and internet sites.

Introducing and conveying the concept of CBT in 100 pages was always going to be a significant challenge. The topics included are appropriate and expressed in an interesting manner that avoids becoming over technical or jargonistic. Overall, despite one or two omissions, I think the book does create a very good, basic synopsis of use during undergraduates’ first heady steps into CBT. It is written in a way that facilitates multi-disciplinary appeal across all involved in helping or psychological interventions. More specifically, I would certainly recommend this book for inclusion on reading lists for certificate or diploma level counselling courses.

References

Talking with bereaved people: an approach for structured and sensitive communication,

Reviewed by Julia Tugendhat, psychotherapist and writer, London

Dodie Graves is well qualified to write about bereavement. She is an experienced counsellor who co-ordinates a bereavement service in a hospice. This book was written to meet the needs of the volunteer support workers she has been training over the years. Her bottom line for trainees is, ‘What do I talk about with someone who’s been bereaved without doing any harm?’ She eschews the notion that bereavement workers are experts with the right answers. She believes that the client can be best served through a stance of empathic exploration and active listening, the components of which she goes on to elaborate.

Graves provides a framework based on the six elements she considers significant during the ‘journey of grief’. Each element has its own chapter (summarised at the end) which contains examples of open-ended questions, techniques, creative activities and theoretical concepts. She highlights the pitfalls workers are likely to encounter and suggests appropriate responses and reflective exercises. She takes it for granted that they have adequate supervision.

The first element entitled, ‘There is a story’ is the most vital because it is here that a relationship of trust between worker and the bereaved person gets established. The client needs to be able to tell the story of the death of the loved one, sometimes over and over again. This story often involves graphic details of trauma, pain, suffering, and indignity. It might also involve medical or bureaucratic mistakes. The bereaved person is likely to be in a state of intense emotional, psychological and physical...