

## Bad therapy by troubled shrink is revealing TV

By Irine Schweitzer

"In Treatment," a new HBO drama series, showcases therapist Paul Weston (played by Gabriel Byrne), treating a different client every day of the week and culminating in his seeking out supervision for himself with his ex-supervisor after an eight-year hiatus.

The drama, debuting Jan. 28, is scheduled daily over nine weeks. It reveals how what unfolds for the therapist, as well as the patient, in each therapy session can cause a therapist to seek help for himself. The series, co-executive produced by Noa Tishby, who brought it to HBO, is based upon an Israeli version with a similar premise that took that country by storm last year.

As a psychotherapist, when I heard of a new TV series featuring therapy sessions, I was intrigued and hopeful. I had fantasies that finally the world would learn the truth about what therapy really is and what therapists really do.

Therapists, like Jews, are a beleaguered group. We and our profession are not well understood -- "therapy is for crazy people, and I am not crazy" is what I often hear. One client told me recently, "I know you are going to make me talk about what I do not want."

Therapists are accused of being shrinks, of always putting all the blame on the "proverbial mother" and, of course, of being "Freudian" and seeing sexual underpinnings for all psychological problems. But, most importantly, what therapists hear most is, "How can you help someone by just talking to them?"

Well at last, I thought, a series that will reveal the power of the "talking cure."

On the other hand, for therapists, news of a new TV series about therapy is akin to Jews hearing news on CNN about Israel. The first question we Jews ask ourselves is, "Is it good for the Jews?" The first question I began to wonder about as I sat down to watch some of the episodes sent to me by HBO is, "Is this series going to be good for therapists?"

In real therapy, drama comes from a slow, laborious, repetitive process of restructuring the mind. The work consists of making meaning of not-yet-understood reactions and behaviors, and of returning over and over again to feelings and thoughts that are re-experienced in a different light.

New information comes out over time, as trust grows and the patient achieves greater clarity. Resistance is subtle, usually unconscious. This kind of process should not make great television.

Well, having watched the first few weeks of this series, I would have to say "In Treatment" does make great television, and it is good for therapists, but it's not what you might think.

The series kicks off with Laura, a beautiful young doctor who has just been given an ultimatum by her live-in boyfriend: "Either marry me, or we are through."

Loathing her boyfriend and the pressure he puts on her, she comments about him to Weston, "Don't you know that men are the new women? They want marriage, kids, a house." She certainly does not sound like she wants that.

What she does want is her therapist, and she reveals to Weston that she is in love with him. He looks stricken, fumbles, acts surprised, asks her to elaborate and the drama goes from there.

As a viewer, I was captivated by the dialogue, glued to my seat with my heart racing. But, as a therapist, I realized that what we had just been served was our first taste of what makes this series

a riveting and compelling drama -- a series of therapy sessions livened up by the fireworks that come out of a whole list of ethical and professional boundary violations.

As therapists, we are bound by an ethical code that compels us to think carefully through such issues as how much dependence do we foster in our clients, when do our own personal issues interfere with what is "best for the client," how much personal information to share with a client and when do we bend rules for a client?

In every episode, Weston gets caught in his own confusion as to what is professional or ethical conduct, and he allows his patients to question his rules and to push him into making judgment calls that mess up both his personal and professional life.

In the episodes with Laura, Weston gets caught in one of the issues most tantalizing to nonprofessionals, as well as one of the most challenging and delicate issues for therapists: an erotic transference, or the client falling in love with the therapist. In the therapeutic process, transference occurs when a patient assigns to the therapist feelings and attitudes that were originally associated with important figures in the past.

Sometimes transference is positive, and the therapist feels that the patient adores him. Sometimes it is negative, and he becomes the object of scorn, loathing and blame. Sometimes it is erotic, and the patient feels that he or she has found their true love, the one who really loves them, cares for them, wants them and needs them.

The patient cannot tell the difference between erotic transference and falling in love. To the patient, the love feels just as tender, just as special, just as all-consuming. It demands gratification. But, to the therapist, the erotic transference is an indication of the patient's need to act out the past, rather than remember, examine, understand and find in it a way to find love in a healthy, fulfilling relationship outside of therapy.

Weston is not able help Laura uncover what lies behind her need to fall in love with him, because he has some ambivalent feelings toward her. Unable to face and own up to his real feelings, he unconsciously crosses the boundaries of ethical standards and professional conduct. We see it as he looks tenderly at Laura, as he lovingly drapes a shawl over her shoulders, as he holds her hand, as he steadies her when she gets up and appears to be wobbly.

Based on his behavior and reaction to her professed love, it is hard to believe that he was truly surprised to know that she has been in love with him for so long. It is much more likely that he has been picking up nonverbal messages from her for months in their weekly sessions but has not been willing to admit that he was falling in love with her as well.

Weston has been avoiding seeking consultation to help him deal with his feelings for Laura, his troubled marriage, his alienation from his children and especially his burnout at work. He still believes that he does not need help and moves on to his Tuesday client, Alex.

Alex is a Navy pilot who recently returned from a mission in which he bombed a target that turned out to be a school. He comes to see Weston because he needs to know whether he should be going back to Iraq to witness firsthand what happened to the children.

He mentions in passing that his picture is plastered all over terrorist Web sites. He is cocky, self-confident and needs immediate answers.

Weston agrees to give Alex advice, a major faux pas for a seasoned therapist. In this case, the danger of Weston giving Alex advice was not in conveying a presumption that he knows what is best, because by the end of the session, he realizes that Alex has already made up his mind.

The danger Weston walked into was in giving Alex the message that decisions in therapy can be made without thinking about both sides of the conflict, understanding the meaning and the

feelings associated with each position and helping the client clarify what they really want.

We are not surprised then that when Weston realizes what Alex has decided to do and tries to engage Alex in thoughtful dialogue around his decision, Alex shrugs him off. After the session, Weston feels victimized, discarded and used.

The Wednesday client, Sophie, is a 16-year-old girl. Sophie comes in for an evaluation mandated by a car insurance company, suspicious about her role in an accident. Her bike suspiciously collided with a car, leaving her with two broken arms. She has already refused to speak to a social worker and is distrustful, rageful, lonely and needy.

Weston finds out that she knows his daughter but lets it slide when Sophie reassures him that they are not in the same class, although she does drop some gossipy piece of information about her, "since he would want to know."

He promises to write her an evaluation, although he tells her at their next session that it is not ready yet because he needs more time to get to know her. She becomes enraged at him and tries to leave in the middle of the session.

How can Sophie trust this therapist who breaks promises, lets her bully him, does not show respect for her and his daughter's need for confidentiality and goes along with her wish to keep her mother out of her therapy and basically out of her life?

Jake and Amy are Weston's Thursday patients. A married couple, they are seeking marital counseling, as well as advice on what to do with Amy's pregnancy. After five years of infertility treatments, Amy is finally pregnant but is no longer sure she can love another child, in addition to their toddler son.

Jake wants the baby and accuses Amy of wanting to murder their child by considering abortion. Amy is not the only one Jake accuses of murder. When Jake pushes Weston into giving them an answer and not waste their time and money, Weston succumbs and then realizes immediately his mistake. The result makes Weston feel that he has just about had enough, and he puts in a call to his ex-supervisor to schedule an appointment with her the next day.

It is the appointment with his supervisor, Gina, that saves the series. She is an older, experienced therapist, and she tells Weston exactly what he needs to hear: That his work is "impulsive, unorganized and problematic." Weston defends himself, but she does not buy any of it.

At last, a therapist that therapists can be proud of.

The real value of this series to therapists, however, comes from the show's metamessage, best summed up by one of the earliest psychologists, William Shakespeare: "This above all: To thine own self be true, and it must follow, as the night the day, thou canst not then be false to any man."

Translated into modern lingo, Shakespeare is reminding all of us, but especially therapists, that our most important tool in being able to help others is knowing the contours and the depth of our own mind. As a well-tuned instrument, we can then resonate to our clients' needs, wishes, desires, fantasies and demands in the way that helps them know themselves in the deepest sense.

As a therapist, I have often encountered raised eyebrows from friends, relatives and even colleagues when I mention that I am in analysis and am getting additional supervision for my work, not because I am required for licensure, but because I feel I need it to grow as a professional.

There is an unspoken sense that "you are OK, you are a good enough professional, you have invested enough of your time and money on your profession, enjoy the fruits of your labor for a change."

Now, with the airing of "In Treatment," I, along with many others like me, can point to the man who is going to become the iconic image of a "therapist" and say to the rest of the world, "I would not want to become like Paul Weston, puh, puh."

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