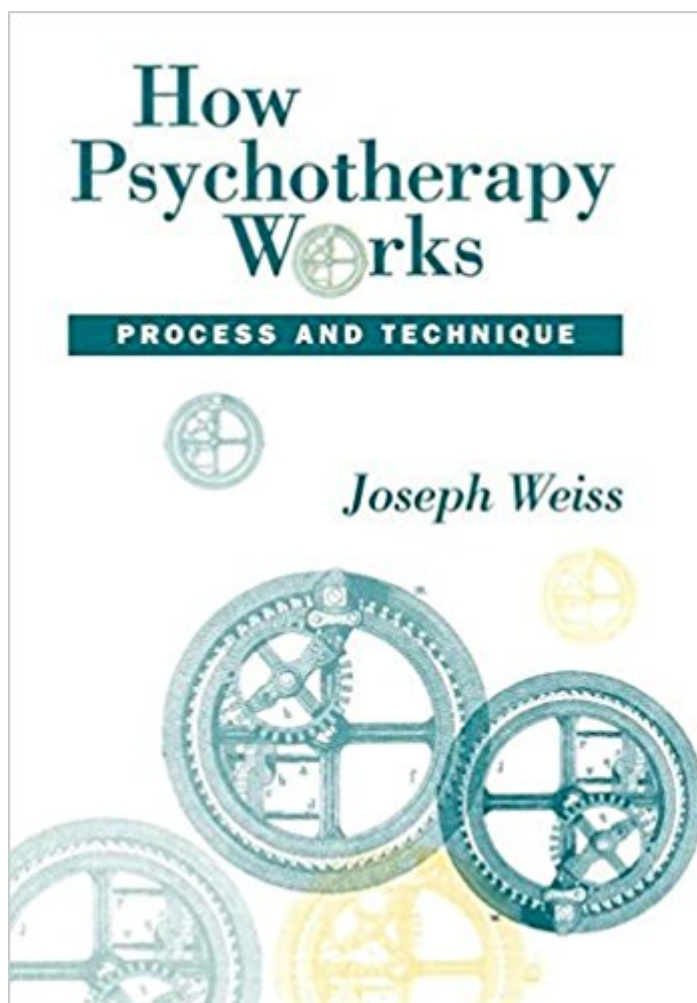


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# How Psychotherapy Works: Process And Technique



## Synopsis

In the landmark volume, *THE PSYCHOANALYTIC PROCESS*, Joseph Weiss presented a bold, original theory of the therapeutic process. Now, in *HOW PSYCHOTHERAPY WORKS*, Weiss extends his powerful theory and focuses on its clinical applications, often challenging many familiar ideas about the psychotherapeutic process. Weiss' theory, which is supported by formal, empirical research, assumes that psychopathology stems from unconscious, pathogenic beliefs that the patient acquires by inference from early traumatic experiences. He suffers unconsciously from these beliefs and the feelings of guilt, shame, and remorse that they engender, and he is powerfully motivated unconsciously to change them. According to Weiss's theory, the patient exerts considerable control over unconscious mental life, and he makes and carries out plans for working with the therapist to change his pathogenic beliefs. He works to disprove these beliefs by testing them with the therapist. The theory derives its clinical power not only from its empirical origin and closeness to observation, and also from Weiss's cogent exposition of how to infer, from the patient's history and behavior in treatment, what the patient is trying to accomplish and how the therapist may help. By focusing on fundamental processes, Weiss's observations challenge several current therapeutic dichotomies--"supportive versus uncovering," "interactive versus interpretive," and "relational versus analytic." Written in simple, direct language, Weiss demonstrates how to uncover the patient's unconscious plan and how the therapist can help the patient to carry out his plans by passing the patient's tests. He includes many examples of actual treatment sessions, which serve to make his theory clear and usable. The chapters include highly original views about the patient's motivations, the role of affect in the patient's mental life, and the therapist's basic task. The book also contains chapters on how to pass the patient's tests, and how to use interpretation with the patient. Dr. Weiss also provides a powerful theory of dreams and demonstrates how dreams can be utilized in clinical practice. This distinguished volume is a major contribution that will profoundly affect the way one conceptualizes and practices therapy. Theoreticians, investigators, and clinicians alike will find it enlightening reading.

## Book Information

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## Customer Reviews

"Patients come to psychotherapy hoping to get better and look to therapists to help them feel safe by disconfirming conscious pathogenic beliefs. Here we have what seems like a remarkably simple idea. But what is revolutionary and most startling, Weiss's theory has been empirically tested and validated. Weiss ranges from his broad conceptualization of motivation and pathogenesis to the microanalysis of the clinical exchange. He demonstrates the impact of psychotherapy is in the effect of interventions, not on the intent or "purity" of technique. Reading HOW PSYCHOTHERAPY WORKS is a corrective educational experience." --Joseph Lichtenberg, M.D., Washington, D.C.

"This exciting and original book is a veritable treasure-house of practical understanding and clinical wisdom gained from Dr. Weiss's decades of psychoanalytic experience and amply supported by an impressive body of systematic research on the theories he has advanced. The lucidity and readability of this work is outstanding and should make this an excellent basic text for beginners in the field, as well as seasoned mental health practitioners. According to Weiss's therapy, psychopathology stems from pathogenic beliefs formed mainly in childhood from traumatic relationships. Weiss's theory of therapy and technique follows directly from his concept of psychopathology. He views psychotherapy as a process in which the patient works to disconfirm his pathogenic beliefs with the help of the therapist. Patients are powerfully motivated to disconfirm these beliefs because they are maladaptive and grim, and they produce much mental pain. Weiss conceptualizes the therapist's basic task as being one of helping patients to disprove their pathogenic beliefs, particularly their unconscious pathogenic beliefs, and to help patients pursue the goals that have been blocked by these overwhelmingly disturbing ideas." --Theo. L. Dorpat, M.D., F.A.P.A., Seattle, Washington

"In HOW PSYCHOTHERAPY WORKS, Joseph Weiss offers an experience-near, relational, and rational approach to psychoanalytic therapy that is based on empirical research into the therapeutic process. A breath of fresh air in a field dominated by unsupported doctrine, this excellent text will serve as an invaluable guide to all students of

psychotherapy." --Robert D. Stolorow, Ph.D., Training and Supervising Analyst, Institute of Contemporary Psychoanalysis"....This highly original book is recommended reading for mental health professionals at all levels of training." --Theo L. Dorpat in The Psychoanalytic Quarterly "This book is recommended for educators and practitioners wanting to understand and make use of a psychoanalytic approach with clients." --David A. Jenkins, Ph.D., The American Journal of Family Therapy "This book summarizes decades of clinical teaching, research, and study in a form that is readily accessible to the working psychoanalyst....The body of work presented is important and should be taken seriously." --Stephen F. Bauer, M.D., in Psychoanalytic Books "This original and exciting book on psychotherapy process and technique should become, in a short time, the most outstanding book in the field of psychoanalytical technique and process....The readability of this eminently practical volume makes it required reading for mental health professionals at all levels of training and experience." --Theo L. Dorpat, M.D., in The Psychoanalytic Psychotherapy Review "...original and exciting....The most outstanding book in the field of psychoanalytical technique and process....Required reading for mental health professionals at all levels of training and experience." (Psychoanalytic Psychotherapy Review 1993-08-22)"....This highly original book is recommended reading for mental health professionals at all levels of training." (The Psychoanalytic Quarterly 1993-08-22)"Attractive and logically organized. It includes a feature rarely seen in texts discussing psychotherapy technique: empirical data supportive of the author's theories and technical prescriptions....An excellent book that meets its objectives and that will be quite useful both to therapists in training and experienced clinicians." (Doody's Annual Health Sciences Book Review 1993-08-22)

Joseph Weiss is a training analyst at the San Francisco Psychoanalytic Institute, Clinical Professor of Psychiatry at the University of California Medical Center in San Francisco, and Co-director (with Harold Sampson) of the San Francisco Psychotherapy Research Group. He received his baccalaureate degree from Harvard, his medical degree from the University of Cincinnati Medical School, and was trained in psychoanalysis at the San Francisco Psychoanalytic Institute, where he became a training analyst in 1962. He is also currently in private practice in San Francisco.

The beauty of this book is that it provides a cogent understanding of working dynamically with psychotherapy patients in a coherent, thoughtful manner, which is not dominated by psycho-babble, nor entirely determined by diagnostic labels, and that give one evidence that their sessions are "Working" or not so successful. The ideas in How Psychotherapy Works, developed by Joe Weiss

and Hal Sampson, at the San Francisco Psychotherapy Group, are empirically based and applicable to clinical work, whatever one's particular theoretical orientation. They are not technique oriented and provide for a highly individualized approach. This theory is nicely detailed and discussed in *How Psychotherapy Works*, and puts the onus for progress on the therapist, especially for patients who really want and need help. As with all therapies this empirically based model, known as Control Mastery theory is not simplistic, though it is very understandable, and sometimes maligned as being too "common sense oriented." Best to understand the usefulness of your interventions and the nature of your individual patient's problems, than to regard problems and pathology as nearly "pre-determined" and motivated simply by drive reduction. I highly recommend this book to students, beginning psychotherapists and the seasoned clinician. It will help your patients.

A very useful book for therapists. The book gives a clear description of Weiss' Control-Mastery Theory. It helps make sense of interactions in the therapy room through the concept of "testing", gives you a tool for assessing the success of your interventions (or, in the terms of CMT, whether you pass or fail the patient's tests), and perhaps most importantly presents a very positive and caring way to think about your patients, especially the "challenging" ones.

Arrived in three days in excellent condition though the description said "good condition. Very interesting reading, answered some of my questions and I am going to try to apply the techniques when dealing with my daughter.

This book is awesome! It clearly explains control mastery theory and is so super helpful when writing a case report up for school or for helping to just better understand clients. Book was shipped on time and like new

Terrific.

Good product and service

One of the points made in this book that I find interesting talks about why, to one degree or another, we blame and shame others. As I understand it, it's so that we can provoke others to teach us how to talk back to our mothers in our minds. A person who was neglected, rejected, unwanted,

gaslighted, etc as a child didn't know back then how to communicate to a mother who did those things to him. Due to attachment needs, the child internalized this 'bad object' into his psyche in a wildly desperate attempt to contain/control this rejecting/punishing voice. The person goes through life being criticized by this voice and he would like to finally talk back to it. He gets the idea that if he can identify with this mother ("passive into active") and then treat or talk to others in a manner he experienced, he can then watch how the recipients of his "verbal chords" handle it. He delights if others can pass his various tests because what he is attempting to do is to take in or adopt their responses to have as resources for himself to reply to his bad-part mother object in his mind. A few media interviewers seem to do this. A typical exchange seems to be: A: You did something bad/immoral/wrong/exploitative etc (ie: I did it, or agree with someone else having done it, but I can only acknowledge it by pointing the finger at you (Reaction Formation). Actually three fingers are pointing back at me but it's too painful to look into my shadow and projections to admit it so I will ignore them (Denial). B: [feels that something psychological is going on with the person using the current topic as a cover, calmly explains the facts of the matter] A: [continues testing his "teacher" by provoking further] B: [feels that he is being baited to re-enact a childhood scene with him, to see if he will respond to him in a manner similar to how his mother responded to him when he was a child; manages to not take the bait] A: [begins to feel worried that he hasn't taken the bait and provokes even further] This back and forth between A in the role of patient and B in the role of therapist continues until the time runs out. If B stayed calm and continued to explain things honestly in the face of A's understandable hostility to childhood past, a drop of healing may have taken place in the sense that A received an experience of interaction, or a vicarious "corrective emotional experience," where the soul prevailed. A few examples and quotes from chapter five of the book discussing this concept: "Stephen X. had experienced his parents as never satisfied with him, and he had complied with their dissatisfaction by considering himself defective. The patient worked in therapy by displaying a passive-into-active attitude in which he was dissatisfied with the therapist as his parents had been dissatisfied with him. He hoped that the therapist would not feel put down by him, so that he could use the therapist as a model in fighting his compliance with his parents' dissatisfaction. ... Stephan would remain petulant for long periods of time ... then every once in a while he would bring forth new material that illuminated his behavior. For example, he remembered instances when he had tried to please his parents and his parents had ignored or ridiculed him." pg 104 "A patient who could not learn from his parents how to deal with a particular kind of trauma may turn passive into active in order to learn from the therapist how to deal with it. Consider, for example, a patient who could not tolerate being criticized. He was so compliant to criticisms that at times he felt completely

unable to counter them. ... In his therapy he tested the therapist by criticizing him, often vehemently, hoping that he would not upset the therapist or that the therapist would fight back, so that he could learn from the therapist how to tolerate criticism and how to fight back. ... [H]e may feel no compunction about turning passive into active. Since he believes that his parents' traumatizing behavior was justified, he is likely to feel somewhat justified in repeating such behavior with the therapist." pg 107

"Lisa O. suffered from two powerful pathogenic beliefs. First, she believed herself omnipotently responsible for others and compelled to comply with them lest she hurt them. Second, she believed that she did not deserve help and so could get no one to satisfy her wishes. In therapy, the patient used the same behavior to test both beliefs in the hope of disproving them: She urgently requested the therapist to offer her extra hours. At first she made her requests in a very disagreeable way, and the therapist inferred from this that Lisa was testing him by turning passive into active. Lisa unconsciously wanted the therapist to refuse her so that she could learn from him how to say 'no.' ... [in passing the test regarding her second belief, Lisa] was able to remember an occasion when she had called and her mother did not come." pg 106

"The patient who disturbs the therapist is almost always turning passive into active; that is, he is testing the therapist by behaving as a parent or older sibling behaved toward him. He hopes that the therapist will not be crushed by his behavior as he was crushed by a parent's or sibling's behavior. ... The therapist who realizes that the patient who disturbs him is working by testing him may be in a better position to help the patient than is the therapist who assumes that the patient is being obnoxious, vile, or destructive simply to gratify himself. ... The therapist also relies heavily on his effective responses to the patient. Often he may infer from the way he feels when he is with the patient how the patient felt when he was with his parents. The therapist may tentatively assume that if he feels helpless, defeated, extremely anxious, overly responsible, or intensely guilty, the patient felt that way toward a parent." pg 113

"In general, the therapist should not interpret the patient's disturbing behavior as soon as he displays it. Before he interprets it, he should attempt to demonstrate that he is able to deal effectively with it. Suppose that a patient identified in childhood with an unhappy, blaming mother, and complains in therapy about how depressed he feels and how little the therapy is helping him. In general, the therapist should not attempt to explain the patient's blaming him by pointing to his identification with his blaming mother until he has demonstrated that he can tolerate the patient's misery and blame. If the therapist interprets this identification before demonstrating that he can tolerate the blame, the patient may assume that the therapist is blaming him in order to protect himself. The therapist may appear defensive to the patient, and thus may fail to provide the patient with a good model of how to deal with his mother's disturbing behavior." pg 115

Two examples of

interpretations: "I think maybe you're trying to show me how you felt with your family when you were growing up. Maybe your father was critical and put you down over and over again." pg 116 "Perhaps you're behaving toward me as your mother behaved toward you, and you're afraid I'll be upset by you as you were by your mother." pg 117 Chapter six is devoted to interpretations and there are 43 case examples throughout the book illuminating not only the above but other components of the author's approach to therapy. Awareness of "passive into active" testing and the positive intention behind it may offer assistance in "Liberating the Adult Within." A very clearly written book with minimal jargon. In terms of searching for Adult options, Louis Cozolino, author of several therapy books, tells the following joke: The difference between a rat and a man is that the rat will search for his cheese when it is moved while the man will keep returning to the place where he first found it and create stories and myths to explain that the cheese is still there. This reminds me of some info about pigeons. If you feed a pigeon on a regular basis and then suddenly stop the feeding, the pigeon at first will still expect the food but will then search elsewhere. If you feed a pigeon irregularly, at different and unpredictable times, and then stop the feeding, the pigeon will keep on expecting the food until fainting from exhaustion. "I said to my soul, be still, and wait without hope for hope would be hope for the wrong thing; wait without love for love would be love for the wrong thing; there is yet faith but faith and love and hope are all in the waiting. Wait without thought, for you are not ready for thought: so darkness shall be the light and the stillness the dancing." T.S. Eliot Marshall Rosenberg on one of his CDs teaches an exercise where you identify the feelings and needs (positive intentions) behind "the chooser" (the part of you that decided to say or do something) and those of "the educator" (inner critical voice or internalized part-mother object) and just acknowledge the needs between the sides of you. Common needs include safety, connection, being heard, learning, understanding, honesty, mourning and a felt sense of self. I think How Psychotherapy Works by Joseph Weiss offers solid support into the golden feather self initiation process of maturing out of, or the "sacrificing" of, infantile issues (pathogenic beliefs, pathogenic loyalties, etc) and moving into generative masculinity, as noted by the mythopoetic men's movement (Joseph Campbell, Robert Bly, etc).

Truly a master work by Weiss. This book is a must-read for any practicing clinician or student of psychotherapy. It adds an entire dimension to the psychotherapeutic process, one in which the therapist plays a significant role in changing the patient's beliefs through his or her interaction with the patient. The perplexities of therapy become understandable with the help of this essential text.

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