



One Nation Under Therapy: How the Helping Culture Is Eroding Self-Reliance

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Americans have traditionally placed great value on self-reliance and fortitude. In recent decades, however, we have seen the rise of a therapeutic ethic that views Americans as emotionally underdeveloped, psychically frail, and requiring the ministrations of mental health professionals. Today---with a book for every ailment, a lawsuit for every grievance and a TV show for every conceivable problem---we are at risk of degrading our native ability to cope with life's challenges.

Drawing on established science and common sense, Christina Sommers and Dr. Sally Satel reveal how "therapism" and the burgeoning trauma industry have come to pervade our lives, with a host of troubling consequences, including:

*The myth of stressed-out, homework-burdened, hyper-competitive, and depressed schoolchildren in need of therapy and medication

*The loss of moral bearings in our approach to lying, crime, and addiction

*The unasked-for "grief counselors" who descend on bereaved families, schools, and communities following a tragedy

Intelligent, provocative, and wryly amusing, *One Nation Under Therapy* demonstrates that "talking about" problems is no substitute for confronting them.

One Nation Under Therapy: How the Helping Culture Is Eroding Self-Reliance Details

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From Reader Review One Nation Under Therapy: How the Helping Culture Is Eroding Self-Reliance for online ebook

Amy says

I would recommend reading sections of this book but not the entire thing. I found it uneven, with some parts leading me to consider our culture in a new light, but others seeming obvious.

Evan Micheals says

The book arrives at the same conclusions as the philosophy underpinning the recovery movement. People are fundamentally well, and usually do not need help from Mental Health Professionals, unless they specifically ask for such help. The logic used to get there will affront Mental Health Professionals.

Whilst I have enjoyed the previous work of Hoff Sommers that I have read – I was uncomfortable with this feeling she cherry picked her examples, showing the extreme to be the norm. It is impossible to know given I have no first hand knowledge of the US school system, nor Mental Health System.

Regarding her thoughts of addiction. I agree with her with rejecting the “brain disease” model, however I also reject the personal responsibility model as the cure to addiction. The truth is in the middle. I have known to many people professionally who experienced the most unbelievable trauma that effected the choices they made. It is interesting she is prepared to forgive someone with schizophrenia, but not an addict. I believe the two are more closely related than she cares to admit. She does make some interesting and compelling points that are worthy of examination.

Her thoughts on grieving and trauma are reflective of my own, that responses to grief and trauma is complex, and that people should not be forced to talk about their feelings. The key thing to consider is if the person finds it helpful? If they do want to talk, great. If they don’t that is equally fine. I recall watching a trauma psychologist following the Beaconsfield Mine Collapse, telling the Journalist everything that she had “done” for the two survivors. I recall feeling appalled, that this woman was the stereotype of everything I knew to be wrong about a therapist. Nor do I recall the survivors having a word of thanks for the trauma councillors and the work they did for them. The praise was instead for those that dug the escape tunnel. I have no doubt that some overzealous therapists conform to the stereotype described and actually do more harm than good. This is a problem within our industry.

It reinforced my personal philosophy of minimalism in the treatment of trauma and distress. If the person appears to be coping, they probably are. There is no need for an “intervention”. Peoples styles of coping are complex and varied, and there is no “right” one style. The important thing is to be there when they need extra support, and withdraw quickly when that support is no longer required.

I admire that the book is well referenced and researched, but suspect it does not attempt to give the full debate, only the authors point of view. Christina Hoff Sommers remains an intellectual I respect, but she does have an agenda (but so do I as a Mental Health Professional – so I might be sub consciously protecting my own turf).

Michael Palkowski says

Good segments in particular on our culturally influenced understandings of trauma and post traumatic stress disorder. Another segment of the book worth analysing is the large area on humanistic or positive psychology and person centred counselling. The critiques are off base sometimes totally and it sometimes relies too heavily, as does other anti therapy texts, on character discrediting.

I agree with most of the premises of the book though, particularly the notion that the rise in counselling interventions is not linked directly to a frail psychological need but rather a misguided set of assumptions about the human condition.

Amanda says

This book was a little conservative but it brought up many great points about the helping profession. I especially liked the idea that people are far less fragile than the helping profession would like to say that they are. I found myself agreeing with the assertions in this book far more than I disagreed with them - their ideas on PTSD were a little "out there" but were generally spot on.

Kristi says

I liked the overall message, but it was hard for me to get over the way it was written. It just seemed poorly organized for me. But it was well researched and well supported. The main question the book presents is if we as Americans will stick to the tradition of perseverance through trials or if the new culture of therapy will drive us into "therapeutic self-absorption and moral debility." Worth reading.

Jeremy says

I agree with the overall theses of the book:

1. Being too quick to offer therapy to everyone implies that people can't cope on their own and erodes other forms of assistance such as friendship, family, and community.
2. Forcing people into therapy or therapeutic situations violates the principle of informed consent. School children should not be forced to identify and process their feelings in the classroom. Teachers should teach, counselors should counsel, and politicians should run for office.

Throughout the book, the authors contrast two different approaches to the human condition. On one side you have "therapism" and on the other you have "moral philosophy" and "the American creed."

Below are the ways in which these views are contrasted (therapism first):

- All-is-forgiven tolerance of the intolerable vs. Repentance and responsibility are required for forgiveness (84)
- Psychological diagnoses vs. Ethical judgments (84)
- Biology is a get-out-of-jail-free card vs. People are responsible for their behavior
- Determinism vs. Free will (92)
- Non-judgmentalism and the “abuse excuse” for behavior vs. Responsibility (unless psychotic, demented, or intellectually disabled) (96)
- Primacy of feelings vs. Primacy of behavior
- All cultures are equal vs. Freedom is exceptional and a better way to live
- Causes can be identified vs. It is impossible to know for certain what caused what (98)
- Those with addiction are helpless, passive, and fragile vs. People have natural fortitude and the capacity to make behavioral choices (244) and drugs don’t neutralize free will (105)
- Addiction relapse is inevitable vs. Individual choices and behaviors mitigate risk and addiction has both a biological and ethical/moral component (which is a more hopeful view) (100)
- Failure to express distress is denial vs. Lack of outward expression can be a valuable coping skill for some people (136)
- Self-expression vs. Self-control (217)
- Salvation through psychology vs. Ethics, philosophy, and/or religion are the way to the good life (216)
- Psychic pain is pathology in need of a cure vs. Pain is a normal part of life (217)
- Self-absorption and moral debility vs. Self-reliance, stoicism, courage in adversity, valorization of excellence, problem-solving, perseverance, achievement (218)

The authors summarize Bernie Zilbergeld regarding the therapeutic sensibility, which “holds that 1) people are really sick even if they don’t appear to be, and especially if they deny it; 2) everyone can benefit from therapy; 3) normal problems are to be made into mental health issues; and 4) those problems are widespread and are unlikely to be solved without professional help” (200).

Tracing the history of therapism, the authors note that it expanded when returning Vietnam veterans were encouraged by anti-war psychiatrists to seek treatment for PTSD. The veterans soon learned that this qualified them for total and permanent disability payments for the rest of their lives. The authors argue that such an incentive for secondary gain led to over-diagnosis and treatment. Of course some patients were truly suffering and needed the treatment, but many didn’t. The authors caution, “The ease with which symptoms can be deliberately faked or unwittingly exaggerated, and the incentives for doing so, should worry PTSD researchers” (164).

Potent Quotables:

A growing body of research suggests there is, in fact, no connection between high self-esteem and achievement, kindness, or good personal relationships. On the other hand, unmerited self-esteem is known to be associated with antisocial behavior – even criminality (6).

Treating addicts as morally responsible, self-determining human beings free to change their behavior is, in the end, more effective, more respectful, and more compassionate.

Pluralism is an American tradition, but moral relativism is not.

“All theory is against the freedom of the will; all experience for it.” Samuel Johnson

[AA’s] founders were leery of the word disease because they thought it discounted the moral dimension of addiction.

[Brain imaging techniques] almost never permit scientists to predict whether a person with a desire-activated brain will act on that desire. Nor can they distinguish between an impulse that is irresistible and an impulse that is not resisted.

The “clinician’s illusion” occurs when practitioners generalize too readily from a clinical subgroup to a wider population.

Naturally, professionals should be ready and available to treat people with disabling levels of distress, but in general the people’s psychological well-being is best maintained through non-clinical means.

Hillary says

This book was terribly difficult to get through - the authors seem to refute almost every example provided about therapy. While therapy can be a hinderance in many of the occasions presented in the text, the authors didn't provide a well-balanced argument for varying opinions - it was a text filled with their own. While I do agree with some of their views, they took it to the extreme - and at times their arguments and research seemed questionable for its reliability and accuracy.

Skylar Burris says

I think the authors make a valid point about the problems with focusing excessively on our feelings in this current culture (especially encouraging children, who have not learned to manage their feelings, to do so). However, I lost interest in the book about half way through and have added it to my unfinished pile.

Sue says

Finally! Someone with the nertz to say that all feelings aren't pathological, we don't have to share everything (and no one's really interested, thank you), repression can be a good thing, therapy is intrusive and makes you dwell on your problems instead of getting over them and children don't develop healthy self esteem just because you tell them they're wonderful. I love these ladies!

Fishface says

Good, research-based expose of how ineffective, and often unnecessary, therapy is. Takes some welcome pot-shots at the way grief counselors have become the new ambulance-chasers in our society, there to suck up FEMA grants more than they are there to help anyone. The promise of the subtitle did not bear fruit: the authors present no evidence that the therapy culture is undermining American self-reliance, but it does

present considerable evidence that therapists would LIKE that to happen. Because, hey, job security is a wonderful thing. I was surprised to find that the last third of the book was citations -- this is a much shorter read than I expected.

Denis says

This author starts out strong with a good premise. Therapy is being overdone and now the therapeutic milieu permeates our schools. Fine, I but that -- somewhat. What Sommers leaves out is that the diagnoses and illnesses whose validity she questions concern students with very real problems that need to be named so they can be accommodated in the classroom. The author skips too many steps in her argument and seems to count on a complete consensus of agreement from her readers. This makes for a weak argument as the book goes on. I found myself skipping entire sections because the tone of the writing had become too strident. By the end of the book I concluded that therapy has a definite place in all of our lives and that Sommers' strongly held point of view came off as reactionary and counter-productive to the best interests of everyone. Reading the book was useful for me, though, because it served to open up my own thinking about this topic and make me interrogate my own thoughts.

Adam says

I was highly disappointed with this book. I was expecting a balanced critique of therapy and the helping professions, instead I got a biased slam of parts of culture that the authors picked out of a much bigger body of evidence. For example, they routinely criticize Goleman (Emotional Intelligence) but they only pick out the few things they can make a case against, leaving the rest untouched. I do agree that we should not coddle our kids, nor prevent them from dealing with consequences or hardships in life, but this book seems more like sensationalism with the intent to make \$ rather than do any good in society.

maven says

An interesting book at how incorrect ideas about psychology have negatively affected Americans. The book was a bit light and not well-balanced, but it was a decent read. I was especially interested in the section discussing personal responsibility vs. blaming problems on brain disorders.

Lisa says

As some reviewers have already mentioned, this book was written by people who's political slant leans to the right. However, it really does not matter.

The fundamental information is sound and built upon studies within the field and sound arguments. I particularly liked reading about how the diagnosis of PTSD has morphed into a monster that can be used when anyone undergoes the slightest of "traumas", even if it is so much as hearing about a stranger's trauma. This ultimately has consequences for us all.

If you are interested in psychology, mental health, or health policy, I think this is an important read.

Three stars given because I think the writers could have spent time discussing other well known and most likely inappropriately used diagnoses: ADHD, mood disorders, and anxiety.

Ellis Amdur says

A discussion of how therapy-gone-wrong (called “therapism” by the authors), undermines self-reliance in our culture. Particularly valuable are the discussions on the misuse of “critical incident stress debriefing,” the pathologizing of normal reactions to crises (the “epidemic” of the PTSD diagnosis), and the treatment of children as vulnerable and fragile, thereby creating kids without resilience or resources to handle life.

Jimmy says

I am reviewing this book from a Christian worldview. Although the book is not religious, it is nevertheless an important work that affirms some of the observations Nouthetic counselors have made about pop psychology. The book argues against much of pop-psychology’s assessment and various pseudo-scientific psychotherapy that is rampant in today’s society. Time and time again the author demonstrates that many popular works advancing ideas that Americans as a nation have serious psychological problems lack actual scholarship, either by falling short of rigorous empirical verification or being blatantly unscientific. I recommend this book. Below are some of my notes from my reading:

- Many secularized doom and gloom prophets have come and gone, defending their latest theories by anecdotes rather than proper social scientific methodologies. For example, the book documents recent advocates who say males today have psychological problems because of our society’s high standard of responsibility imposed upon them that’s unrealistic; then there’s the anti-homework crowd who say school work are psychologically damaging upon minors; and the anti-tag and anti-dodge ball experts who don’t want kids to be “it” or “out” lest these kids feel excluded and get messed up for life.
- The book has a sobering analysis of “unmerited self-confidence” promoted among leading experts of children education with the unintended consequences of producing a generation of narcissists. Self-confidence apart from merit is not a good thing.
- Studies have shown that there’s no correlation between self-confidence and success. The book also brings attention to the self-confidence of some psycho-pathologists, criminals, etc.
- The book has a serious indictment against some group therapeutic method and its practitioners unwillingness to call something that’s evil for what it is since it attempts to foster an atmosphere of extreme tolerance and understanding. The book records a morally disturbing dialogue during a group therapy session in which a man confesses that he has a problem of raping his sister in which the facilitator went after participants who were repulsed rather than the rapist himself.
- Chapter 3 dealt with the enslaving concept of addiction as a medical disease, which makes victims out of addicts and often diminishes the need for responsibility in the eye of addicts.
- The book counters the argument made by advocates who have charts of brain activities showing drug addiction as a rewarding experience by noting the fact that those resisting addiction also show brain activity of being more intensely rewarded and gratified.
- All this “getting connected and talk about one’s feelings” promote self-absorption.

- In a 1973 article titled "Case for bottling up rage" in *Psychology Today* it criticizes venting therapy: other studies agree and confirm talking about trauma per se has little effect despite what most people think. For instance, Yale studies on Gulf War vets show no differences among those talking about it and those that didn't.
- Talking about problems also does not significantly help with the lifespan of cancer patients despite what advocates say. The largest study on group therapy for longevity of cancer patients proved that those who talk about their problems only survive 9 more days on average rather than the previous claim of a two year difference
- Perils of overthinking not accounted for in the grief industry which fail to take into account people grieve in different ways and there's nothing wrong with not "talking about it"
- Grief industry had two presuppositions that need to be reconsidered: strangers are assumed to be always welcomed during grief and grief needs specialized assistance
- The phenomenon known as delayed grief (technically, not the same as repressed grief) in which not grieving now can come back to haunt you later on with the feeling of grief has not been proven empirically.
- PTSD is different than the experience of being traumatized in of itself. Thus PTSD is different from the experience described as "shell-shock," "combat fatigue," etc.
- Chapter 5 talk about the origin of PTSD was during the Vietnam War era by anti-war psychologists who originally advanced it as Post-Vietnam Syndrome. They proposed that it was a unique experience to Vietnam veterans suffering from self-punishment for being duped by society in an unjust war with the lack of a proper home-coming which result in the symptom of a delayed traumatic response.
- Contrary to what most people think about Vietnam veterans, studies have indicated that by the 1990s Vietnam Veterans were roughly the same statistically when compared to those of their generation who did not serve or were military veterans who did not serve in Vietnam. These reflect the same statistics as their counterparts in the area of suicide, homelessness, income, divorce rate, employment and level of education.
- Studies on delayed PTSD (defined as past 6 months) indicate that it is very rare.
- Group therapy for PTSD that focuses on re-living Vietnam intensify PTSD and ends up producing more problem instead.
- Crisis counselors and mental health workers for genocides and wars in Bosnia, South East Asia, Kosovo and Rwanda are often unwelcome by those whom they are trying to help since these victims don't see their problems as a pathological issue. These mental health workers often fail to address the problems the refugees themselves have identified which are more practical in nature such as health, sanitization, employment and financial needs, etc.
- Psychotherapy by means of briefing might end up hurting more than help trauma victims since it can prime them to see themselves and their experiences as pathological issues rather than normal grieving.
- There is the reality that our psychobabble culture might be "overhelping" which itself can produce problems.
- Good quote: "If one's worldview accommodates the likelihood of horror, one is prepared for it and better able to cope when tragedy does at last strike." (Page 211)
- Good quote: "Numerous studies have shown that ideological commitment to a cause plays a protective role." (Page 211)
- A sense of commitment to a cause checks the likelihood of PTSD.
- As a tangent afterthought, this work made me realize that to interpret those who do immorality in unbiblical and non-moral categories is spiritually and socially dangerous; for instance those who understand criminals as psychological victims approach solutions that fail to account for the responsibilities of criminals: most disturbing is the lady quoted who did not see Jefferey Dohmer was evil among Wolfe's subjects.

Carolyn Harris says

This book makes some good points, but I disagree with so much of it. It reads like this:

Authors: Most people can grieve on their own and don't need help.

Me: Agreed.

Authors: Talking with a grief counselor doesn't work for everyone and may be harmful for some.

Me: Still with you.

Authors: Therefore, all grief counselors are worthless and harmful and need to get a life. Anyone struggling with grief or trauma (statistics show there aren't that many of you) just needs to suck it up and get over it.

Me: What???

That's probably not at all what they were going for, but that's how it sounded because they hardly mentioned anything positive about therapy. This book picks the worst examples of how psychology has failed and then applies it generally to the whole field. They take things out of context or twist them then whine that psychology is evil and destroying America. I kept shouting, "You're drawing the wrong conclusions from that! You're not getting it!" I feel like it was written just to attack Daniel Goleman and grief and trauma counselors everywhere. Definitely not an objective take on the pros and cons of therapy.

gina says

An overview of a compilation of studies and quotes from famous people (dead and alive) to support the authors claim that we are "overtherapizing" and focusing far too much attention on our emotions. While there was a great deal of evidence to support their claim, they've got a long way to go to change the trend of "getting in touch with your feelings" and talking something to death that pervades in psychological/psychiatric treatments.

The PSTD section was particularly interesting. I thought a lot during this book and I can't even begin to come close to covering all my various threads of thought in this review. I would have needed a pad and pencil with me the entire time and that's tedious. I'd suggest people reading the book to come to their own conclusion. There were definitely some amazing aha moments where I felt like a veil had been lifted.

However, there were also some moments where I felt like they overlooked research. For instance in Origins: How the 9 Months Before Birth Shape the Rest of Our Lives, there was some starting research done on women (all ages) who survived a major crisis and grew up to have children. The crisis could be period of starvation and stress during WWII, surviving terrorist attacks, or even something like a major earthquake or disaster- so long as it was a pretty big event. These females grew up to have children that had some serious problems that the research attributes to the female's having lived through the event. Even if she dealt with the stress well there were unforeseen Long Term effects on her eggs/fetuses. Problems like abnormally high rates long term health problems or schizophrenia in her unborn/not yet conceived children. Why this book didn't mention it I don't know. But their la-te-da "just get over it" "get busy and deal" attitude towards people who had lived through an event is dismissive of potential effects that go far beyond the emotional. Maybe they are right and we don't need therapy, we just need to forget about bad stuff and move on. But regardless, there is evidence that a connection is made between the body and stress that we are still figuring out. Perhaps they just didn't want to open that can of worms of physical reactions to major stressors that are beyond our control, because I mean really, a bad event happens, your future children might be on the road for serious problems and there's nothing you can do about it because the event was unavoidable. Perhaps they just

wanted to stick to emotional/therapeutic topics.

But I give the above as an example that you too might find something that you wish was better about the book, or more tightly written, or contradicts with what you've read elsewhere. But that's the point of these kind of books isn't it?

My major advice is DO NOT get the audiobook. The reader sounds great at first, but then you realize she has NO differentiating voice when transferring between reading a quote and when the authors pick back up with their own words. Really? It makes it IMPOSSIBLE to know when a quote is over, which is very important. Really pissed me off. Come on old lady, get your shit together and read properly or please authors/publishers, find someone who knows how to change their voice between these types of things. Bleh.

Zachary Henez says

Well researched and supported and an important read in this age of self help books.

RandomScholar says

This book explains why I see so many of my college classes being taught in a therapy style setting where almost all of our writing assignments require us to discuss our "feelings" instead of focusing on learning new information. This book also explains how therapism is affecting today's schools, especially at the elementary level. I would strongly encourage any educator to read this book.
