Book Reviews / Comptes rendus

Farber, B. A. (2006). *Self-disclosure in psychotherapy*. New York: Guilford. ISBN-13: 978-1-59385-323-5. ISBN-10: 1-59385-323-8. 243 pages.

Reviewed by: Cristelle Audet, Faculty of Education, University of Ottawa

Self-Disclosure in Psychotherapy, by Dr. Barry Farber, focuses on disclosure dynamics between client and therapist in individual therapy. Three purposes are delineated: (a) to provide historical context to the growing interest in disclosure issues in the United States; (b) to integrate empirical, clinical, and theoretical viewpoints of disclosure in psychotherapy; and (c) to practically bring together research findings from pertinent research communities. The book is intended for therapists and counsellors from all professional backgrounds as well as graduate-level students.

Dr. Farber is a professor of psychology and education, and director of the Clinical Psychology Training Program at Teachers College, Columbia University. He obtained a Ph.D. in clinical psychology from Yale University and received training in behavioural, client-centred, and psychodynamically oriented psychotherapies. Spawned in the early 1980s, Dr. Farber's special appreciation for disclosure dynamics in the therapeutic encounter resulted in his steady research on the topic. His strong presence in the psychotherapy research community, and his work alongside other researchers with a similar focus, situates him well in providing this comprehensive contemporary analysis.

The book is neatly divided into two sections. It begins with a discussion of the general nature of interpersonal disclosure, which serves as a springboard to separately address "patient" and therapist disclosure. Disclosure in supervisory relationships is also acknowledged, and clinical examples are provided throughout.

Four chapters are devoted to patient disclosure (PD), addressing clinical, research, and multicultural perspectives. In chapter 2, conceptualizations of PD according to psychodynamic, humanistic, and cognitive behavioural orientations are provided, followed by brief mention of therapies utilizing nonverbal disclosure as a means of expressing, accessing, and healing emotions. A range of empirically supported variables influential to patients' tendency to disclose, as well as positive and negative consequences of disclosing in therapy, are covered.

In chapter 3, Dr. Farber draws largely on his research to address topics that patients are least and most comfortable discussing in therapy, and he speaks to the interplay of PD and factors such as shame, therapeutic alliance, and length of therapy. He summarizes the patient view of disclosure as "I'll tell you many things, but I won't tell you everything."

The outcome controversy—whether or not disclosure unambiguously leads to therapeutic improvement—is introduced in chapter 4. To this end, Dr. Farber cites research that supports and opposes a positive connection between disclosure and outcome, while identifying methodological and conceptual issues that arguably cloud

rather than clarify the controversy.

The final chapter of this section regrettably unveils how PD remains poorly understood in the context of multiculturalism. Despite the reported dearth of studies, Dr. Farber effectively extrapolates from analogue studies, sociological observations, and clinical case reports to identify differences in disclosure expectations between Anglo-European individuals from Western societies and individuals from Asian, African-American, and Latino cultures.

The second section addresses therapist disclosure (TD), including historical, research, and clinical perspectives. Chapter 6 provides a nuanced depiction of TD in psychoanalysis, partitioned into classical, middle, and contemporary traditions. Rationales for limited use of TD beyond theoretical orthodoxy are offered, while emphasizing experimental contributions such as mutual analysis by radical thinkers during the Freudian era. The author notes the influence of object relations and psychodynamic perspectives, culminating in a reconceptualization of TD within contemporary psychoanalytic circles. We learn that therapist anonymity is further challenged by Owen Renik—that it should be contradicted rather than endorsed since it compels clients to fantasize and wonder about their therapist at the expense of focusing on themselves. Nontheoretical influences promoting the use of TD are discussed, such as a shift in gender representation (male to female) in helping professions and recent emphasis on relationally oriented therapies.

In chapter 7, Dr. Farber affirms TD's place in the psychotherapy research community as a variable linked to outcome, meriting further empirical study and serious clinical consideration. The chapter is largely informed by Hill and Knox's (2002) recent review of intentional verbal disclosure, focusing on disclosure frequency and type, reasons for and effects of TD, disclosure to child patients, and limitations of the research.

Referring to clinical cases, chapter 8 provides thought-provoking discussion about TD in practice. Given the inevitability of TD, Dr. Farber invites the reader to consider dilemmas underpinning decisions to disclose and the consequences of nondisclosure. He offers a cogent representation of factors that influence disclosure, such as theoretical orientation, therapist experience, and clinical setting. Knox and Hill's (2003) 10 recommendations for using disclosure with clients are reiterated, followed by a discussion of the changing nature of TD in the context of therapist pregnancy, sexual orientation, and illness.

Prior to the author's concluding remarks, there is a chapter regarding the less well understood context of disclosure in supervision. The research highlights some of the similarities and important differences in relation to how disclosure is currently understood in psychotherapy. Two anecdotal examples are provided: (a) a supervisee's experience of disclosure in terms of trust, here-and-now dynamics, and the supervisory process; and (b) a supervisor's experience of how his lack of disclosure with his supervisee about their ethnic differences hindered the therapeutic alliance.

This book is an overdue systematic consideration of disclosure dynamics in the defined relationships of psychotherapy and supervision. Dr. Farber fulfills his goal of bringing it all under one roof, effectively integrating research, theory, and practice.

The book is clear, easy to follow, and devoid of jargon. However, the emphasis on psychoanalysis appears to be at the expense of other orientations that offer additional perspectives of TD. References from songs and novels are provided throughout, which some readers may find distracting as they add only minimally to the topic at hand. For example, Dr. Farber refers to the Eagles' "Hotel California" lyrics—some of us dance to remember and some to forget—as a "perspicacious observation" demonstrating that the value of disclosure hinges on each individual's threshold for distress.

One may wonder whether the almost singular focus on psychoanalysis (and the use of the term "patient" throughout) suits the broad audience for which Dr. Farber claims the book is intended. Although the theoretical applicability to counsellors may be questionable, there is good dialogue exposing stimulating views on neutrality versus transparency in the therapeutic encounter that counselling practitioners and educators can appreciate. The book is particularly valuable for practitioners wanting to better understand disclosure processes from the client perspective and to learn more about considerations when self-disclosing to clients. It is also a good departure point for those in a supervisory role. The book's strength resides in its ability to assist therapists who wish to mindfully position themselves with respect to disclosure in different contexts. Ultimately, it gives counsellors grist for the disclosure mill as the author leaves us with the question: "What types of therapist interventions yield what kinds of short- and long-term positive and negative consequences in response to what types of disclosures and nondisclosures made by which clients with what therapeutic goals and levels of distress?"

References

Hill, C. E., & Knox, S. (2002). Self-disclosure. In J. C. Norcross (Ed.), *Psychotherapy relationships that work: Therapist contributions and responsiveness to patients* (pp. 255–265). New York: Oxford University Press.

Knox, S., & Hill, C. E. (2003). Therapist self-disclosure: Research-based suggestions for practitioners. *Journal of Clinical Psychology/In Session*, 59, 529–540.

Golden-Biddle, K., & Locke, K. (2007). *Composing qualitative research* (2nd ed.). Thousand Oaks, CA: Sage. ISBN: 1-4129-0561-3. 136 pages.

Reviewed by: Ann Laverty, Counselling Centre, University of Calgary

Composing Qualitative Research is a new Canadian text developed to support qualitative researchers, with an emphasis on synthesizing research outcomes to a suitable length for journal submission. The primary purposes of the book include (a) consolidating and refining the process of writing qualitative research articles; (b) providing an update on the state of qualitative writing, including examples of qualitative work found in journals; and (c) incorporating a variety of disciplines in expanding understanding of this topic.

While a cookie-cutter approach to writing up qualitative research is not possible, Dr. Karen Golden-Biddle and Dr. Karen Locke outline how to reflectively think about this process regardless of the methodology utilized. Dr. Golden-Biddle is a