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## Book Reviews / Comptes rendus

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Bloom, Bernard. (1992). *Planned Short-Term Psychotherapy*. Boston: Allyn and Bacon. 357 pp., US (soft cover).

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In this age of "do more with less," Bloom's clinical handbook offers counselors/therapists, and students-in-training a timely opportunity to review many of the models of short-term, or brief, therapy which have emerged in the last 30-odd years. In my own case, reviewing Bloom's work introduced me to several theories that were not included in traditional counselling psychology texts published during that period. So, if you are looking for a comprehensive update on short-term therapies for your own professional development, or you are a counsellor/therapist educator in need of a graduate-level text, look no further.

Bloom seems particularly well-qualified to have undertaken this extensive analysis, having previously published his own short-term approach in 1981 (*Focussed Single-Session Therapy*) based on his experience in a community mental health centre. While Bloom's "single session" approach can last up to two hours, he can legitimately lay claim to the briefer end of the short-term spectrum. As he notes, the upper limit of brief therapy is approximately 20 sessions, with six sessions being about average. Besides the obvious time limitations, other distinguishing features of short-term therapy include: more limited goals; the selection of a focal issue; and more directive and flexible interventions by the therapist.

The book itself is organized into five sections. Section One includes a concise overview of the development and history of brief therapies, and a review of outcome studies which, not surprisingly, supports the author's main thesis that short-term is at least as good as long-term therapy. Sections Two and Three cover psychodynamic and cognitive-behavioural therapies, respectively, with a two-to-one emphasis on the former. Section Four deals with more recent theoretical contributions from clinicians involved with short-term group and family psychotherapy; inpatient therapy (both mentally and medically ill patients); and brief (half hour or less) contact therapy, conducted by primary care physicians, among others. Finally, Section Five explores issues related to patient criteria for short-term therapy, and concludes with Bloom's assessment of the status and future of psychotherapy (more about that later).

Bloom's review of the 19 models that he has included in Sections Two through Four covers each theory's main concepts, the therapeutic goals of the approach, the principal therapeutic techniques utilized, and the results of any outcome studies conducted by the theorists and their colleagues. Each chapter ends with a pertinent summary. This format seemed to make this text potentially useful in graduate training, offering as it does a systematic way for students, who are usually initially overwhelmed by the variety and scope of competing theories, to make useful comparisons between different

ways of helping. Bloom has also included several transcripts of sessions, which nicely illustrate the therapist's application of his/her theory, and which offer both neophyte and veteran therapists alike more ways of effectively communicating with clients.

In trying to evaluate the contribution that this work makes to the counseling profession, two things stood out for me. On a scholarly level, one cannot help but be impressed with the breadth and depth of Bloom's analyses. This is a very intelligent, well-organized and readable text which, as previously mentioned, appears to be quite appropriate for graduate education purposes in several disciplines. However, I suspect that Bloom's meta-message about the future of psychotherapy, and the role of short-term approaches in that endeavour, may be an even more important motivation for writing this book. In his estimation, with the accumulated research evidence apparently demonstrating that both outpatient and inpatient brief therapies are equally as effective as long-term treatments, and given the more recent private and public economic pressures for cost-effective treatments, the viability of the profession itself may depend on an increased emphasis on short-term treatment approaches. If he is right, there are obvious implications for those responsible for the education and training of counsellor/therapists.

While I suspect that many would agree that the law of parsimony ought to apply in therapy, in these paradoxical days of increasing demand and shrinking budgets, the burning question still seems to be: how little is enough? Bloom tries, somewhat perfunctorily I think, to deal with this important issue. Surprisingly, he is adamant that agencies should not set arbitrary upper time limits on the sessions available to clients. Rather, he proposes that therapists adequately trained and experienced in short-term therapies will inevitably be more efficient and effective, making limit-setting unnecessary and, furthermore, termination will be a non-issue if therapists generally adopt a planned retirement approach to their work with clients from the outset.

Perhaps reflecting the market-driven forces at play in his own country (and we are never far behind, *eh?*), Bloom foresees a time, in the not-too-distant future, when mental health professionals may find that their salaries and annual increments will be tied to greater productivity as short-term practitioners. Clearly, Bloom's prophecy will hold much appeal for budget-conscious administrators, but it may also send shivers down the spines of process-oriented practitioners.

But if the writing on the wall does belong to Bloom, it behooves us, professionals and students alike, to take a closer look at the information and message contained in this book.