

***Counselling the Communicatively  
Disordered and Their Families***

David Luterman

Little, Brown and Company, Boston/Toronto, 1984,  
193 pages.

Reviewed by: Pat Wevrick

In this short book, Dr. Luterman shares his personal evolution from being predominately an information-provider to being a "people person", who is willing to allow affect (feeling) to enter into his relationships with families. He feels that the information-providing role will then be enhanced. The initial chapter discusses the advantages and disadvantages of behaviorism and humanism in counselling. The idea of internal "locus of control" is paramount to Luterman, whose point of departure is thoroughly humanistic.

Chapter 2 is an exposition of the work of the philosopher Kierkegaard and explains his existential ideas which became the basis of one approach to psychotherapy. Problems of living are related to facts of existence: we must die; we have choices; we are alone; and life is meaningless. The possible application of communication disorders is shown. Erik Erikson's eight stage life cycle model is a framework in Chapter 3 for looking at the development of a healthy counselling relationship. These stages are: trust vs. mistrust, autonomy vs. shame and doubt, initiative vs. guilt, industry vs. inferiority, identity vs. role of confusion, intimacy vs. isolation, generativity vs. stagnation, and ego integrity vs. despair. Chapter 4 examines five schools of counselling; psychoanalytic, existentialism, rational therapy, behavioral and person-centered. The highlight of this chapter is the section on the clinical application of humanism as it relates to diagnosis.

"Groups" are discussed in Chapter 5. The curative factors in groups are thought to be: installation of hope, universality, imparting of information, altru-

ism, interpersonal learning, group cohesiveness, and catharsis. In Chapter 6, Dr. Luterman again addresses his concerns about many programs of "Parent-Professional Relationships" which he sees as built upon doctrinaire lines. Normal parental feelings of inadequacy, anger, guilt, confusion, denial, and vulnerability are empathetically discussed. Chapter 7 is called "The Family" and considers the roles of grandparents and siblings, as well as parents. Particular attention is paid to ways of facilitating the involvement of fathers in the counselling process. The brief concluding chapter on "Educating the Student Clinician" stresses that every attempt should be made to provide them with a more humanistic base so that they can become self-confident, self-reliant and assertive professionals.

*Critique* Dr. Luterman wrote this book as a text for a course on counselling the communicatively impaired. It would give students an overview of the conflicts parents have along with possible approaches to resolutions. The book has several limitations. First, Dr. Luterman's experience is in the field of deafness, and little attempt has been made to deal with any other disorders. Secondly, there is a paucity of information on counselling of adolescents or adults with communication disorders. Thirdly, its approach is strictly humanistic. Even when the five general approaches to counselling are contrasted, smoking is used as an example. It would have been helpful if an example from communication disorders had been used instead. Finally, there is an aura of self-consciousness about the style which I felt interfered with the presentation of content.