The New Activist Therapists

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Abstract

A new politicized approach to professional therapeutic practice has rapidly become dominant in training institutions and professional bodies. Advocates of this approach believe that the client's problems are caused by an unjust society and, consequently, the most salient factor in clinical work is the client's identity. This worldview licenses therapists to impose their own political beliefs onto the client—that is, to become therapist-activists.

This paper describes the main features of this activist approach and identifies how it differs from classical or traditional therapy approaches. This difference is summed up as a radical shift in the telos of therapy from healing the individual to changing society. The paper then explains how this new therapy became established as a dominant approach in the field despite having little empirical support. It concludes by considering the implications of this shift for clients and the wider culture.

Keywords: Activism in psychotherapy, social justice, multicultural competence, critical theory, professional ethics, sociopolitical bias

During the last several years, a radical shift has been underway in the therapy field in North America and the rest of the Anglophone world: Professional therapy institutions and mental health practitioners are adopting a politicized approach to therapy.[1]

Why does this matter? Because this activist therapy does not have a traditional patient-centered ethos, which foregrounds the individual's unique experience, needs, and goals. Instead, activist therapists impose a political agenda for societal change on clients.

Despite its increasing dominance, this approach lacks empirical evidence of its effectiveness in reducing symptoms; on the contrary, there are many anecdotal reports of its detrimental impact on client welfare. This article explains what activist therapy is, how it came to prominence in the field, and the implications for mental health.

What Is Activist Therapy?

For readers who have not been following the politicized path of therapy, some examples of current activism are:

- practitioners who believe it is acceptable to attack therapists with different political views—see a recent attempt to blacklist "Zionist" therapists;[2]
- reputable academic therapy journals that publish peer-reviewed papers advocating for highly dubious racialized concepts such as "Parasitic Whiteness" (capitalization in the original paper);[3]
- trans-activists' influence on therapeutic services for vulnerable clients. For example, the recent scandal in the Scottish Rape Crisis services,[4] where traumatized women have faced charges of bigotry for wanting to know the biological sex of their counselor; and
- mental health professionals who actively encourage polarization and division. See the Yale psychiatrists who urged people to shun Trump-supporting relatives[5] and expressed fantasies of killing white people.[6]

What Are the Main Differences Between Activist Therapy and Traditional/Classical Therapy?

This article does not argue that politics has nothing to do with therapy. Traditional approaches accept that therapy has a political dimension and that all therapists will have a set of values and beliefs. However, the discipline has always insisted that these beliefs should not be taken into the clinic. For example, the American Counseling Association states this explicitly in its code of ethics: "Counselors are aware of—and avoid imposing—their own values, attitudes, beliefs, and behaviors."[7(p5)]

Despite this, new legitimizations of political activism in therapy can be seen in practice guidance issued by various professional bodies. For example, the 2017 revised guidance

on multicultural practice issued by the American Psychological Association (APA) views psychologists as agents of wider social change (termed "citizen psychologists") who " ...seek to address institutional barriers and related inequities, disproportionalities, and disparities of law enforcement, administration of criminal justice, educational, mental health, and other systems as they seek to promote justice, human rights, and access to quality and equitable mental and behavioral health services."[8(p4)] This new political position can be rationalized because therapists are encouraged to initiate conversations with their clients about identity and subsequently center conversations about inequity and justice.

If clients resist these approaches, the guidelines offer a range of strategies to bring them around to the therapist's view, "... such as clinician authenticity, tone, spontaneity, therapist self-reflection, practice, patience with stumbling, supervision, and consultation."[8(p23)] This is a key difference between therapy as generally practiced until recently and the new politicized approaches: Activist practitioners deliberately impose their own political beliefs onto their clients.

Moreover, the worldviews of traditional/classical therapy and activist therapy are radically different. Traditional/classical therapy is informed, to a greater or lesser degree, by the modern Western Enlightenment philosophical tradition. Consequently, these therapists, no matter what approach they espouse, share a commitment to the uniqueness of the individual and the healing ethos of therapy; broadly speaking, their practices are designed to increase the client's insight, agency, and grasp of reality. Furthermore, all therapy approaches need to demonstrate that they are grounded in empirical evidence for their effectiveness at reducing symptoms or achieving other therapeutic goals.

This new politicized approach to therapeutic practice is informed by Critical Social Justice (CSJ)—a term coined by Sensoy and DiAngelo[9]—which is a worldview that blends postmodern ideas with elements of Critical Theory.[10] This ideology has a political agenda and deploys an identitarian lens. It rejects empiricism and privileges discourse and narrative. The client is viewed merely as an avatar of a particular demographic group (or combination of groups), which is deemed either the oppressor or in an oppressed position within the wider societal matrix of power. Consequently, the activist therapist believes the client's difficulties are caused by the broader, unjust societal context; the only treatment offered is a form of moral reeducation that urges political action. In short, the difference can be summed up as a shift in the telos of therapy from healing the individual to changing society.

How Has Activist Therapy Captured the Professional Field?

How could a politicized approach to therapy—an approach that is being labeled by some as inherently antitherapeutic[11] and explicitly antiscientific and antimeritocratic[12]—get such a purchase on the mental health field? Broadly speaking, we can identify four groups driving this movement, along with some other influences.

Activist Scholars:

Hostile to Western European thought, which is deemed to be an expression of white supremacy, these scholars seek to dismantle and disrupt traditional schools of thought. They operate as gatekeepers in academic psychology, shutting down critical debate and accusing critics of being reactionary, which has contributed to widespread self-censorship among academics.[13] Academics who attempt to publish dissenting views risk reputational damage and even job loss (see the dismissal of Klaus Fiedler[14] from his post as editor of the prestigious Association for Psychological Science.)

Activist Clinicians:

Influential clinician–theorists such as Derald Wing Sue[15] (an early promoter of the contested notion of microaggressions)[16] developed the theory and skills of multicultural competence. Their work established the ground for centering identity issues in clinical practice. Other theorists have built on this work, insisting on the salience of race in all clinical encounters[17], even if both practitioner and client are white.[18]

Activist Bureaucrats:

Many professional organizations are increasingly governed by activists deploying bureaucratic means such as: committing organizations to dismantling "systemic racism,"[19] embedding Diversity, Equity, and Inclusion (DEI) policies at every level,[20] and reengineering professional practitioner criteria along CSJ lines.[21]

Activist Educators:

Most therapists are trained within higher education institutions, which are monitored by DEI committees—though some institutional restructuring has occurred in the past year. Many psychology faculties have committed themselves to agendas such as "decolonization of the curricula."[22,23] This DEI[24] bureaucracy, combined with an influx of educators wedded to a politicized education approach known as Critical Pedagogy,[25] is instilling these practices in the next generation of practitioners.[26]

Other Influences:

All of the groups identified here operate within a changing cultural context. Therapists are affected by subtle, wider developments in society, such as decreased religiosity and increased moral relativism, an increasing emphasis on race and other demographic categories, an increasing emphasis on subjectivity at the expense of objectivity, and the postmodern emphasis on the power of words and narrative. One example of the latter is the changing definition of the term "trauma," which now can refer to any kind of perceived harm. Given these contextual shifts, it is unsurprising that many therapists think centering identity in therapy is morally commendable.

What Do We Know About the Effectiveness of Activist Therapy?

Since Eysenck challenged the claims of psychoanalysis, researchers have endeavored to develop a robust evidence base for talking therapies.[27] Yet, politicized approaches to practice have been endorsed across the majority of therapy institutions without proof of improved outcomes. There has been little rigorous outcome research investigating whether these approaches improve client mental health. A review of social justice counseling outcome studies found only 35 empirical studies across 11 years of publication, concluding that more rigorous research is needed.[28] Where evidence is cited, studies typically examine the effects of training therapists in multicultural competence rather than measuring client outcomes of activist interventions themselves.[29]

This lack of evidence can be explained by two factors. First, there is no general agreement on what constitutes the principles and methods of activist practice. If something is not operationalized, then it is very difficult to investigate. And second, activist scholars are informed by postmodernism, which is averse to empiricism; their interest is in changing cultural narratives.[30] Instead of empirical evidence, claims for this new kind of therapy practice rest on ideas of its presumed moral superiority. A good example can be seen in the introduction to a special issue of the APA's house journal, American Psychologist, on decolonial psychology (a term for activist approaches), which presents this practice as an unequivocal moral good compared with classical "white supremacist" Western psychology.[31]

In contrast to activist claims, there are plenty of anecdotal reports published on Substack,[32] on social media, and in blogs about the harms of these approaches—see, for example, Critical Therapy Antidote's collection of insider accounts of damaging therapy experiences.[33] These writings, combined with podcast interviews[34] of disillusioned therapy trainees and the increasing volume of requests for "non-woke therapists" received at organizations such as the Open Therapy Institute, point to significant disquiet.

Implications of Activist Therapy Practice for Culture and Mental Health Treatment

Potential negative impacts on the client[35] include:

- weakening self-efficacy and agency. Activist therapy can foster victimhood and a sense of powerlessness. Experiencing oneself as unable to make positive changes is likely to lead to demoralization. "Hopelessness, the hallmark of demoralization, is associated with poor outcomes in physical and psychiatric illness, and importantly, with suicidal ideation and the wish to die"[36(p733)];
- worsening interpersonal relationships. Activist therapy promotes polarization,[37] fosters family divisions, and guides people to view all relationships through the lens of power;
- promoting simplistic reductive thinking such as either/or thinking (e.g., good/bad, right/wrong, and victim/oppressor). Either/or thinking is viewed in the cognitive behavioral therapy school as one of the main categories of cognitive distortions,[38] and exerts a pervasive negative influence on emotional regulation, cognitive flexibility, and interpersonal functioning. Of particular concern is how this type of distorted cognition impedes the psychotherapy process.[39]

Conclusion

Activist therapists have spread throughout mental health treatment services, research, education, and professional bodies, and the problem persists, **[**creating a cult, in essence, trying to attach itself to an organized practice. This is a significant diversion from effective classical therapy.**]**[1] In response, substantive research programs are needed to understand the impact of this new type of therapy. Strategies are also needed to help mitigate the potential harmful effects of these practices on individual clients and the wider culture.

[1] Bracketed Comment added by Senior Chaplain Merle Meyers.