

Review of Bad Therapy, by Abigail Shrier, May 2024.

The therapy industry has long been ripe for an exposé. I have long credited therapists with much of the damage done a couple of decades back to my millennial children. Simply put, they never learned to accept responsibility for their own lives.

Shrier's topic this time is broader than in her debut "Irreversible Damage" about forcing sex-change surgery on children. In her author's note she says " This book is about a second, far larger cohort [than the truly damaged]: the worriers; the fearful; the lonely, lost, and sad. College coeds who can't apply for a job without three or ten calls to Mom. We tend not to call their problem 'mental illness,' but nor would we say they are thriving. They go looking for diagnoses to explain the way they feel. They think they've found 'it,' but the 'it' is always shifting."

Her locus is the Washington DC suburbs, where my millennial children grew up, and Los Angeles. There were therapists everywhere. It is a lucrative profession. My children had speech therapists, tactile defensiveness therapists, tutors, psychologists, psychiatrists, ADHD therapists, gynecologists in their early teen years, and Lord knows what other therapists the schools snuck in without our knowledge. The ones we were aware of taught sex education with condoms on bananas, the normalcy of homosexuality, the evils of date rape and so on. And, as Shrier cautions, all three children grew up dysfunctional. Only one had a real job, and none of them came close to success in marriage. Grandchildren were out of the question.

Shrier's theme is that therapists have inserted themselves between parents and children. The rationale is that parents do not have training and don't know what they're doing. They should recognize their limitations and leave raising children to trained professionals – therapists, educators, doctors and the like.

Shrier presents the other side of the argument. With obvious exceptions, cares about children as much as their parents. Nobody lives as intimately with them as their parents. A point Shrier should make is that their genetic relatedness makes it easier for parents than others to understand children. Shrier's book is rich with anecdotes about her own obviously Jewish children. It stands to reason she would resonate with them better than the average Gentile. Putting that the other way, the predominantly Jewish therapists who dealt with my Gentile did not necessarily resonate with them either.

Shrier makes a point about the nature of relationships. The therapist, billing by the hour, has a keen interest in maximizing billable hours. It is not in their interest to cure a patient. There is a comfortable living to be made by listening to a relatively normal patient's often imaginary problems hour upon hour. On the other hand, dealing with really crazy people is unpredictable and dangerous, and failure is more visible.

Human health and behavior might be described as dependent variables in a huge regression analysis. The independent variables would be genetic makeup, social environment, vaccine history, pharmaceuticals and therapy, each of which factors is a vastly complex construct of simpler variables. The outcomes are likewise multifaceted. They could be parameterized and measured as marital success, reproductive success, financial success, social success, mental and physical health, among others.

The focus of Shrier's book is a major construct representing a single independent variable – therapy. She addresses a couple of others, the social environment of schools and the societal beliefs expressed in books parents might read. She makes no mention whatsoever of other factors that probably have a significant effect at the national level such as dysgenics, vaccines, pesticides.

With regard to dysgenics, it is well established that people throughout the Anglosphere and Europe are not having children at a replacement level. It is also clear that the children that are being born are disproportionately in the lower strata of society – less education, less income, and less intelligence. Intelligence is 80% heritable, the other 20% random. Our native populations are [getting less intelligent](#). Despite its being politically incorrect to mention, the [average intelligence of world populations](#) differs widely. Average intelligence in Europe and the Anglosphere is falling because immigrants are by and large less intelligent than the natives. Our caring, humanistic- societies have been dedicated for two centuries to helping their weakest members survive. People with physical defects such as hemophilia and cerebral palsy, as well as mental conditions such as schizophrenia and autism, have been able to reproduce. To use Edward Dutton's term, the [spiteful](#) mutant load in our gene pool has expanded significantly.

Recent research reinforces the notion, around for decades, that [vaccines can damage children](#). Antibiotics may as well. Autism has topped the list of suspected conditions, though many more have been noted recently. The theory is that there is an organic cause for many of the behavioral disorders for which parents are now seeking therapy for their children.

Man-made changes to our environment are affecting us. Glyphosate, in Roundup, has been implicated as a cause of cancer and is suspected of much more damage. Male fertility – sperm counts and motility – has plunged by 50% or so. Electromagnetic radiation is correlated with a number of medical issues.

Shrier's book does a masterful job of describing how the single factor she chose to analyze, therapy, has contributed to the bad outcomes experienced by millennials and zoomers. Wrapping in the other variables would be far too much for a single book. The reader must, however, recognize that leaving variables out of a regression equation reduces its predictive power. A parent needs to factor in vaccine injury, pesticides, electronic entertainment and the rest.

These quotes from the book give the reader an idea of Shrier's view. Part One: Healers can Harm, begins with a chapter on Iatrogenesis.

Errors in medical treatment, such as overprescribing drugs, are the third leading cause of death. Shrier contends that therapy for diagnosed mental and behavioral issues is subject to the same kinds of errors. The diagnoses are far more subjective, and the practitioners' expertise and authority harder to question. Many times, the therapists enter the scene unbidden and even unrecognized. Shrier's opening anecdote is about taking her son to the pediatrician about a stomachache, only to have the doctor attempt to shoo her out of the room so he could privately ask the boy these (leading) questions:

1. In the past few weeks, have you wished you were dead?
2. In the past few weeks, have you felt that you or your family would be better off if you were dead?
3. In the past week, have you been having thoughts about killing yourself?
4. Have you ever tried to kill yourself? If yes, how? When?
5. Are you having thoughts of killing yourself right now? If yes, please describe.

The questions were composed by the NIH. Shrier asks what would happen if the child attempted to please the doctor by giving affirmative answers? Where would the answers go? How would they be used? Does asking such questions raise the question in a child's mind that something might be wrong with him when nothing is?

From the chapter A Crisis in The Era of Therapy

"Dissociative identity disorder, gender dysphoria, autism spectrum disorder, and Tourette's belong on her list of once - rare disorders that are, among this rising generation, suddenly not so rare at all."

"Yes, the coincidence of these two trends — deteriorating mental health in an era of vastly expanded awareness, detection, diagnosis, and treatment of psychological disorders — may be just that : coincidence. It does not unveil a causal arrow. But it is peculiar. At the very least, it may provide a clue that many of the treatments and many of the helpers aren't actually helping."

Shrier reports that "therapists typically point to three contributors to anxiety: smartphones, COVID-19 lockdowns, and climate change." The first two are real, the third, Shrier believes, is mostly in the

minds of the typically liberal therapists. "So many progressive parents seem to believe their job is to scare the ever - living crap out of kids when it comes to climate change. Use the phrase "human extinction" at bedtime. As many bedtimes as you can." As for kids themselves, Shrier writes "none gave climate change as a reason for their or their friends' emotional struggles."

Shrier writes "[Therapists have] been preoccupied with their own style and method of intervention. Because any parent can take away a phone, but only a psychologist can diagnose a child or refer for medication. The most important thing [the parents] could have done to help improve kids' mental health was something that didn't require their expertise. Shrier [and this reviewer!] are down on smartphones. She writes "Youth mental health has been in decline, after all, for the last five or six decades. And then there's parents' powerful reluctance to take away our kids' smartphones. What accounts for this fecklessness, in the face of the obvious threat they pose? The very fact that we've been so long aware of their dangers and done absolutely nothing to curtail their ubiquity in adolescent hands requires its own explanation. That we persist in handing these devices to young teens and tweens is itself a symptom of a larger problem."

Throughout the book Shrier assails parents' fecklessness, the excuses they make for not taking away smartphones and other electronic distractions. [Larry Rosen](#) wrote a book on the subject. It is part of a deeper problem that Shrier decries throughout. Parents are unwilling to assert parental authority. To make decisions and make children abide by them.

Shrier writes: "Actually, what seems to motivate a large portion of Gen Z, born between 1995 and 2012, is not hope or optimism or belief in themselves — it's fear. They are arguably the most fearful generation on record." "They also engage in the least amount of sex (while arguably having it most available) and report having the fewest romantic relationships or romantic encounters." Her contention is that they do not have the freedom to be individuals. They are always under the supervision of some adult. Their lives are on the Internet, and the Internet never forgets. Supposed friends save screenshots. Their mistakes and indiscretions can come back to haunt them years later. They hear a drumbeat of fear of failing to get into college, climate change, fear of offending some protected minority. NB: Per Wikipedia Gen Z is 1997-2012, 4th Turning 1997-2011.

"'Locus of control' is the term psychologists use to refer to a person's sense of agency. If you have an internal locus of control, you believe you have ability to improve your circumstances. If you have an external locus of control, you do not. Instead, you tend to attribute events to things outside of your control, like other people or bum luck. " "The social critic Christopher Lasch once observed that therapy 'simultaneously pronounces the patient unfit to manage his own life and delivers him into the hands of a specialist.'" Shrier's observation – children are less and less in control of their own lives. They therefore have a hard time developing into adults.

Things are done to them. Shrier writes about infants' reactions to terrifying situations such as vaccinations or circumcision. They can neither fight nor flee. They scream uncontrollably and sometimes (boys more than girls) "play dead," like an opossum. This does not result in "repressed memories," Shrier reports, simply a strong aversion when the situation is repeated. Their whole lives omnipresent therapists, educators and others are doing things to them. They are objects, not subjects. "As therapeutic points of view and practice gain general acceptance, more and more people find themselves disqualified, in effect, from the performance of adult responsibilities and become dependent on some form of medical authority."

As a result, one interviewee said of premed students "Though they have the foundational scientific knowledge to succeed in medicine, she says, they lack all traces of gumption. Compared with the young people she hired a decade ago, 'they have no agency,' she says."

It does not end with "helicopter moms." Shrier reports that parents now hire what they call shadows, adults to chaperone children throughout the school day to help them over the rough spots.

A chapter entitled *Hunting Fishing Mining - Mental Health Survey Mischief* describes how the therapy industry, from the NIH and NIMH on down, prospect for clients. On just about any pretext, they will administer mental health surveys to kids that (1) raise in the kids' minds questions about suicide, sexual orientation and other issues that they might never have considered, and (2) give the therapists grounds to conclude that the kids need therapy. Everybody benefits – except the kids.

Moving towards a conclusion, Shrier cites psychologist Diana Baumrind, who discerned three general approaches: permissive, authoritative, and authoritarian.

1. The “permissive parent” assiduously avoids punishment. She affirms the child’s impulses, desires, and actions, and consults the child about family decisions. She makes few demands on the child with regard to responsibilities and orderly behavior. “She presents herself to the child as a resource for him to use as he wishes, not as an ideal for him to emulate, nor as an active agent responsible for shaping or altering his future behavior,”
2. The “authoritarian parent” values a child’s obedience as a virtue, holds a child’s behavior to an absolute standard, works to keep the child in his place, restricts his autonomy, and does not ever encourage a give-and-take discussion about her rules.
3. The “authoritative parent” is loving and rule based. She attempts to direct the child’s activities in a rational manner, encourages a give-and-take with her child, but “exerts firm control at points of parent-child divergence.” Where her point of view on a household rule ultimately conflicts with that of her child, she wins. She maintains high standards for her child’s behavior “and does not base her decisions on group consensus or the individual child’s desires.”

In studies that still manage to chagrin therapists, Baumrind found that authoritative parenting styles produced the most successful, independent, self-reliant, and best emotionally regulated kids; it also produced the happiest kids—those less likely to report suffering from anxiety and depression.

Obviously, Shrier's *bête noir* is the permissive parent. She writes "Not only do we rarely motivate our kids to better behavior, many of our children don't like us very much. There is more parental estrangement today than in generations past. And the young adults who are cutting off their parents in record numbers are often those raised by the most indulgent and devoted parents." I had thought that I had first encountered the acronym AWFL – Affluent White Female Liberal – in this book. No, it does not appear. But it well might have.

Shrier concedes that there is a place for medications such as Ritalin, Prozac and antipsychotics, but only after all else has failed. Nobody should plan to spend a lifetime taking drugs. They should therefore do everything in their power to avoid becoming dependent. Shrier does not go as far as others. The experience of the grown children of my first family leads me to strongly

agree with Alex Berenson in "Tell Your Children" about marijuana and with Peter and Ginger Breggin in "Talking Back to Prozac."

Shrier's conclusion might well be "Knock it off. Shake it off." Here are her words:

"Knock It Off, Shake It Off" America once had a more masculine style of parenting. It's a style traditionally occupied by Dad (though, really, I've seen women employ it to great effect). This is the style I've called "knock it off, shake it off" parenting. The sort that met kids' interpersonal conflict with "Work it out yourselves," and greeted kids' mishaps with

- "You'll live.
- " A loving but stolid insistence that young children get back on the horse and carry on.

"Knock it off" didn't suffice in the face of all misbehavior. But in the main, it put the onus on kids to figure out what was wrong with their conduct and desist. "Knock it off" didn't overexplain: It credited kids with common sense or nudged them to develop it. Rules had exceptions and workarounds, but "knock it off" signaled a parent's disinclination to become entangled in them. Every kid who hopes to hold down a job without making himself a terrible (and disposable) burden to an employer needed to master this art of following simple instruction—without seven hundred time-consuming follow-up questions. "Knock it off" meant: You're a smart kid, figure it out. But also: You can.

"Shake it off" didn't solve the worst injuries, of course, but that was never its purpose. (No one except a sadist ever thought a child could run on a broken leg.) And it rarely operated alone: the other parent, the gentler one, often cushioned its impact. But "shake it off" did a helluva job playing triage nurse to kids' minor heartaches and injuries, proving to kids that the hurt or fear or possibility of failure need not overwhelm them. "Shake it off" provided its own kind of tough love and emotional nourishment. It taught kids to soldier into a world with the hopeful disregard of danger that a cynic might term naivete. Others call it courage.

In the last generation, all traces of tough love and rule-bound parenting have been supplanted by a more empathetic style, the one once associated with moms. Most dads have been told explicitly—or made to feel—that the approach their own fathers took was wrong and their native instincts no guide.

But even Mom isn't in charge today—not really. The proof is how many books she must read to establish her competence as a mother. She may not trust her husband's instincts with the kids, but she regards her own as only marginally better. And her parents' methods? Obsolete as the Yellow Pages. Unlike most of the experts, her parents raised a few kids who managed to become self-supporting, capable, and dependable citizens. But her parents corrected and punished their way through childrearing, so Mom discards most of their example off the bat. In its place,

she deploys phrases borrowed from her shrink. (“Why don’t we try taking a few breaths together now, Harper?”)

I write this review from Ukraine, where I am raising a second family pretty much following Shrier's common-sense advice. My first family, raised in the ways that Shrier decries, have not talked to me for years and are uniformly unsuccessful. I'll conclude by endorsing just about everything Shrier says, but adding the caveat that a parent needs to be leery of vaccines, drugs, pollutants and EMF.