Book Reviews

BEYOND ILLNESS: DISCOVERING THE EXPERIENCE OF HEALTH. By Larry Dossey. Boston. Shambhala, 1984. \$9.95.

Beyond Illness is the second book in which Dr. Larry Dossey addresses medicine's illusory distinctions between mind, matter, and spirit. Like its predecessor, Space, Time and Medicine, the central thesis is that prompt resolution of the Cartesian dualism implicit in "allopathy" (modern scientific biomedicine) is our only hope of becoming truly responsive to an integrated view of human life, wholeness, and healing. Central to this charge is Dossey's assertion that separation in space and time (or, rather, the false perception of that separation) is the cause of much misery and so-called illness. This illusion of separateness occurs at many levels, all of which bear upon "health": separation between mind, matter, and spirit; the distance between sickness and health; and the radical distinction between scientific medicine and spirituality.

This last-named false separation is most ironic in light of allopathy's "physics envy." Dossey describes this as a reliance upon a reductionistic, materialistic approach apparently founded on hard science, on the atomistic truths of physics. The irony is that allopathic medicine is not even being true to its own envy; the physics to which it clings has been outdated for most of the twentieth century. The "new physics," described for laymen in such books as Fritjof Capra's *The Tao of Physics* and Gary Zukav's *The Dancing Wu-Li Masters*, pictures reality as a fundamental unity. Drawing upon these discoveries, Dossey asserts that there should not be any real tension between the scientific and the metaphysical or spiritual views of the universe. In other words, medicine could easily acknowledge and incorporate spirituality, holism, and the healthful inclination of *homo religiosus* without rendering itself prescientific.

In developing this somewhat esoteric thesis, Dossey shows great fluency with the ideas of remarkably divergent thinkers: Bertrand Russell, Alan Watts, Lao Tzu, Kenneth Pelletier, Ludwig von Bertalanffy, the biblical Jonah, and many others. In addition, Dossey traverses a broad spectrum of subjects with equal ease: the discourse on spacetime and higher dimensions, Zen Buddhism and other Eastern religious faiths, philosophy, physics, the Judeo-Christian scriptures, and, most notably, clinical medicine. Indeed, it is through his continual exemplification that Dossey succeeds in making widely divergent source materials readily accessible to physicians and biomedical scholars. Of special note are two particularly thought-provoking chapters. The first, Chapter IV, "Of Time, Evil, and Health," posits the notion that suffering is a consequence of mankind's reliance upon two "grotesque qualities" which "lie at the source of untold human misery—misery that for the most part is self-inflicted because it is caused by wrong thinking." These mistaken ideas are that "we live in a world of separate objects" which exist "in a linear time that flows inexorably from past to present to future." Dossey states we suffer only because we separate ourselves from our pain and experience our pain in a temporal setting in anticipation of some future experience of "health."

Chapter XI, "Holistic Health: A Critique," exposes holistic health as being built upon ground just as shaky as its alleged adversary, scientific medicine. Where allopathy is accused by holists of being linear, left-brain-oriented, reductionistic, and materialistic, Dossey feels that holistic health's rightbrain, idealistic perspective is nonetheless equally misguided and conducive to dualistic thinking. In other words, the illusions of allopaths and holists complement each other. If, as Dossey explains, the universe is a single unified whole, then the claim of holists to be more concerned with things that operate on a spiritual "level," as opposed to a physical or mental "level," reveals a no less illusory, dualistic view of reality than that of traditional doctors and scientists. While traditional biomedicine typically forces the hierarchy of levels "downward" toward the material, the holists force it "upward" toward "some sort of therapeutic pan-psychism." Each mistake labors under *maya* (illusion), "and each is as naive as the other."

Dr. Dossey is able to be critical of allopathic medicine while drawing upon metaphysics, religion, philosophy, and physics, while simultaneously distancing himself from much of the uncritical, unscholarly rhetoric of the advocates of holistic health care. If for nothing else, this span of disciplines is reason enough to read the book. Of the work in its genre, *Beyond Illness* is clearly superior. It is lacking in the repetitive, materialistic clichés of many of the often pseudo-Marxian proponents of holistic health—writers equally critical of allopathy and of the spiritual values most people hold dear. In contrast, Dossey successfully achieves a general synthesis of science and the spirit—of physics and arcane wisdom—for the larger and noble purpose of evangelizing a new-old vision of healing and wholeness.

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THE IMPOSTER PHENOMENON. By Pauline Rose Clance. Atlanta, Peachtree Publishers, 1985. \$14.95.

While it is uncharacteristic for the *Journal* to review "popular" or somewhat facile publications, this critique is an exception—primarily because of the

depth of meaning in Dr. Clance's sensitive and lucid style. Clance, a professor of psychology at Georgia State University, is also a practicing psychotherapist. As such, it is appropriate to introduce her text with a clinical vignette, a literary technique used by many clinicians to illustrate their points of focus.

Jennifer is the only black nurse in a managerial position at a large federal agency. She has mixed emotions about her success. On the one hand, she feels very pleased about her position, but at the same time she continues to be amazed that she's doing so well. She is very much liked and respected by her colleagues, she has received excellent evaluations and she continues to receive honors and special recognitions and awards. But one evening she confides to a close friend that she obtained her present position because the agency needed to employ women and minorities to meet federal hiring requirements. "And I was a black woman," she explains to her friend. "That's the reason I am where I am."

A question seems apt: Is this woman fishing for compliments or feigning false modesty? She is not! "Jennifer" truly does not believe she received the position because of her abilities. She constantly ignores her credentials and plays up her few weaknesses. Jennifer is suffering from a problem that many individuals experience. It is called the Imposter Phenomenon.

The layout of this book is done extremely well, and each issue of the above case is clarified. The text consists of three sections. The first is entitled "Putting on the Mask." This section describes what it feels like and means to suffer from impostor feelings. It also includes an impostor test. Using Clance's test, readers can determine the degree to which imposter feelings affect their lives. This section also puts forth an overview of what Clance calls the "imposter profile." She explains that not everyone with I.P. (imposter phenomenon) feelings will have all the characteristics set out in the profile. However, most I.P. victims will have two or three.

The impostor profile is characterized by the "impostor cycle"—I.P. victims become trapped in a cycle. As an illustration, they become anxious about some impending project, stay up all night working on it, lose their appetites, and worry that when it is done they will be failures. In the end they are successful, but believe that they cannot be effective without going through the same cycle. The other characteristics in the profile are a bit more explanatory: the need to be special or the very best; the fear of failure; denial of competence and the discount of praise; as well as guilt about success.

The first section of the book also sheds some light on where these masks come from. As usual, most of the blame is placed on the family. It seems that when we are young, our parents, siblings, and peers give us messages about ourselves. These messages can be very powerful and usually stay with us all our lives. The imposter feelings come about when our "old family messages" do not correspond with messages about ourselves that we get from outsiders, such as teachers or superiors on the job. In the second section, "The Personality Behind the Mask," Clance elaborates on each of the impostor characteristics. She gives more detail and once again makes fine use of clinical vignettes to drive her points home. She also does a nice job of pointing out the difficulties of "first generation professionals," and why many of these individuals have mild if not acute I.P. feelings, as well as the strain impostor feelings place on relationships.

The third section, "Taking Off the Mask," attempts to help us do just that. Clance gives us some helpful facts and exercises to help dispel the myths surrounding success, as well as change or dispel our old family messages from the past. This last section also offers some helpful do's and dont's for helping other I.P. victims. Clance adds some suggestions to help us raise "impostor free" children.

The Impostor Phenomenon has something for nearly everyone. A quotation from the book's jacket reads:

The Impostor Phenomenon is not just another pop-psychology book posing as fact—it's the real thing. A self-help book that will enable millions to begin enjoying their success.

Before reading this book, we marveled at the boldness of that statement and set out to disprove its claim. However, after independently reviewing it, we must admit that the book is far from facile. As with most self-help books, simply reading this book will not change your life. Yet if you actually put the principles into action, you will see results. This text and future research in the area do have the potential to improve the lives of many. For two years we have used it as an exercise resource, and the results have been positive particularly with older patients. We therefore recommend it from clinical experience and not just academic scrutiny.

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