

心理療法のモデルについて

On the Schemata of Psychotherapy

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ABSTRACT

この小論文においては、「心理療法とは何か?」、「心理療法家の役割とは何か?」、「心理学者の抱く危険のある病的思考」がC.G. ユングの考えを参照しつつ議論される。また、そうする中で「心理療法がなぜ複数の学派をもつのか?」や心理療法のモデルといったよく知られた主題についての考察へと進む。この論文の要点は、心理療法が技術ではなく心理学者の人生に基づく意見であるということである。心理療法家の心理学が来談者の心理学を妨害することはあってはならない。とはいえ、このことは心理療法家の中立性を要請するものでもない。心理療法家が気づいていなければならないのは、心理療法家の側の批判的な自己認識の過程が心理療法の過程そのものであるということである。

In this study, fundamental questions are discussed with reference to the ideas of C. G. Jung, such as: What is psychotherapy? What is the role of the psychotherapist? What kind of pathological thoughts might psychologists have? It will lead to a reflection on the common topic of why psychotherapy involves various schools, and of the schemata of therapy. The point advanced in this study is that psychotherapy not a technique but an opinion which is based on the life of the psychologist. It is important not to disturb the psychology of the client with the therapist's psychology. However, this does not mean that the therapist should be neutral. Therapists should be aware that the process of critical self-realization on the therapist's side is the process of therapy.

1. What is psychotherapy?

Many psychotherapists have the experience of being asked by their friends or family what a psychotherapist does in the psychotherapy, what the process of the psychotherapy is like, etc. And many of them might find those questions unexpectedly hard to answer properly in a short sentence. At the reception desk of the counseling service, for example, such simple information as the time taken for one session, the amount of fee and duration, etc., would be told upon the first call from a new client, which does not tell what psychotherapy means at all. Some psychologists might try to talk about what kind of clients visit their therapy rooms, which would suffice to give a comprehensive image of the social need of psychotherapy. It seems to be a fairly nice answer, because the questions above are not put by researchers or by scholars and no professional answers would be expected there. But it is still evident that the matter questioned has not been answered fully yet, and there remain great issues left behind. The difficulty of answering them seems to point to some so-to-speak mysterious part of psychotherapy, which might stimulate certain people with some good reason in various ways, involving more or less emotional reactions.

It is not only lay people that might raise the question of what psychotherapy is. The beginner of psychotherapy, or those currently in their training would also face this question radically. They might confess, "I cannot possibly imagine myself curing a person!," "I have no confidence at all!," etc.

The word "therapy" is different from "treatment." What is the difference between them, then? How does it relate to our role as a therapist, and not as a treatment giver? A similar question could be raised between "counseling" and "psychotherapy." How can we tell the role of a psychotherapist from that of a counselor? What kind of person is the psychotherapist? What is his role? How should the

therapist appear in front of the patient, or the client?

2. Narcissism in the therapist

It is not rare for the client to complain that he is not getting better after certain sessions with the therapist. The complaint could be "Nothing seems to have changed," or "I can't get the impression that the analysis has gone well." And many therapists might become possessed by a feeling of guilt. They might try to find a wrong attitude that they have toward their clients, and unfortunately will often succeed in reaching some evidence which appears to be true, without noticing that it is a trap that strengthens the neurotic pattern of the clients' lives. Actually it is very hard to discern the trap, so not only beginners but also veteran psychotherapists will believe that they had been wrong and take the accusation of the clients only literally. The consequence is that the therapist loses a chance to receive some message from the client which is hidden behind his complaint.

If the therapist has been injured by the complaint, then that suggests a question of his narcissism and, at the same time, of his arrogance. If he thinks that it was his fault, then he would be admitting to such a fantasy that he could have controlled the process of therapy better and that he could have cured the client. Is that really possible? Could we think simply that the therapist had the power to cure the client? Do we really know well what the process of psychological cure or healing should be like? There emerges a doubt that the fantasy of the therapist noted above suggests an omnipotent tendency in the therapist. It is not easy to deny the fact that people in the helping profession tend to be arrogant. I would suggest another example of omnipotence. For the psychotherapist, psychological interpretation of the material given in the session is supposed to be of utmost importance in the therapeutic process. Here we could raise a question of whether the interpretation given by the therapist could be "right"

in such a sense that it should grasp the absolute truth of the client. Actually many psychologists assume that that is the case, without noticing the serious pathology of omnipotence. In many cases, it is not so difficult to find in the therapist some anxiety behind the idea of absolute truth. Sometimes it might appear as a need of power where it seems as if the therapist is sticking to the story that he knows always better than the client. The therapist tries to involve the client in his neurotic power game, often without being aware of it. One could rightly say that it is even an ethical problem, though this kind of phenomenon is too subtle for the public people to realize, so it could be actually hard to detect.

At any rate, how can we answer the complaint of the client above?

3. Therapeutic factor

We are facing a big question of why the phenomena of cure occur. One might ask what caused the cure, and what was good for the client. But here we could raise a question of whether that kind of question is appropriate in terms of psychological reality. One could simply reverse the question above and ask what were the wrong factors in a certain case and what was problematic. Are those questions suitable for the psychology of a certain case? There seems to be such a presupposed idea behind those questions that a therapeutic process should follow some mechanical path of cause and effect.

Another important question in therapy is, What is the definition of cure or healing? What is the goal of therapy? In the case of a physical problem, the symptom is visible. And when the symptom disappears in the process, then people readily recognize a complete cure without any difficulty. Therefore, mechanical understanding of cause and effect is, in a way, well fitting for the realm of physical treatment. If there are no physical symptoms, then one would not consult the doctor.

The role of the medical doctor is relatively clearly described as treating the physical part of the patient. The object that is targeted, or the bad part, should be made clear. Thus we presume that the idea of cure and sickness is a pair where each could not be possible without the other. Actually many naïve psychologists try to carry the same concept over to psychotherapy, though no one finds any possible ground for it. Their attitude is similar to that of the medical doctor when facing their clients. First of all, the definition of sickness is not simple in psychology. In terms of psychology, too much of a healthy condition is harmful. Psychological maturation needs a period of sickness, after all. Sickness is inevitable for psychological life. If so, what do psychologists want to do for the clients? Clients visit psychologists with their own complaints. How can the psychologist deal with them? We should tell what is needed for psychological life and what could be some wrong attitudes in the clients. Obviously this activity is different from that of making a diagnosis in a case. Accordingly, the wish of the client for the cause of his complaint to be cleared away might be different from the wish of the therapist, who would be most happy with the psychological maturation of the client. Actually many clients decide to come regularly, even though the therapist does not try simply to give any answers to their clients' complaints, maybe because they know well that their complaint is related to a moment in their own psychological development at a certain level, different from their consciousness, often still continuing to make the complaint about the same affairs for a while.

4. Modern view on psychotherapy

Naïve psychology would simply try to have only a technological view on the psyche and it would assume that the therapist should be a person who knows better about some absolutely true mechanism

of the psyche and even teaches something to the client. Actually we can find this sort of psychology everywhere today without difficulty. It is important to save psychology from various kinds of fallacy in our modern period. While technological development has been prominent for the past two millennia the psychological condition and environment do not seem to have changed much. It would not be hard to find contemporary, small persecution of Jesus or of Nicolaus Copernicus which would be recognized just much later to have been wrong. The logic of the majority is still supposed to be of supreme importance even in so-called sophisticated societies. We are still very much friends of jealousy and malice, like the people two millennia ago.

The extreme dissociation of those two different realms above tells us much, though it is hard for modern people to be aware of it. They tend to presuppose that the former principle is superior and create certain mythology of our psyche on the basis of it. We now know well that cardiac neurosis is a neurosis and not a disease of the heart and that it is a psychological problem rather than a physical one. Once upon a time, people believed that it was caused literally by some problem of their hearts. They were creating a cardiac myth then. Nowadays, we are creating a brain myth, which is being supported even by people who do not know well about the structure of the brain. Every psychological phenomenon is explained in terms of the brain without any adequate reflection. It could be called a social phenomenon. The myth based on technological thoughts is so strong, that many therapists believe that psychotherapy is a system of techniques and that the process of therapy should follow some given procedure. They are thinking that they have acquired an ability to use some technique and are allowed to apply it to their clients. In the therapy room, they are the dominant ones and their clients are followers. They are ruled by scientific myth, so they do not hesitate to declare that psychotherapy is

a scientific approach without being able to discuss what science essentially is. They are inclined to use the word “scientific” repetitively as a final word and their expressions often assume an atmosphere of grandiosity. And modern people are attracted by these therapists’ words because they share the same myth. They do not have the slightest idea of suspecting the pathological side of evidence-based psychology in the realm of psychotherapy. But the stronger the scientific myth around psychotherapy becomes today, the more important the authentic role of psychotherapy becomes for us. Saving psychotherapy from the scientific myth seems important not only for psychologists but also for any person in our age.

5. Therapist behind technique

C. G. Jung, a Swiss psychologist and psychiatrist, suggested the importance of the person behind the technique as a therapeutic factor. He described it as having far more decisive a role in the therapeutic process than the technique. Maybe comparing those two might be nonsense. If the therapist is not important, then the therapeutic process would go just independent of the kind of person the therapist is. Actually, it is often said that even the picture of a tree drawn in the Baum Test would be different if the tester in front of the client were a different person. The picture drawn appears to be the client’s personal belongings but in fact is a product of both the tester and the client to his colleagues. When a therapist shows a picture of his client to his colleagues, he is mostly unaware that he is presenting himself along with his client. Precisely speaking, the picture reflects the relationship between the therapist and the client.

A therapist as a person is engaged in various activities such as reflection, decision, consideration of their own physical sensations, etc., apart from applying any technique whatsoever. These are more

important than the technique itself. And even the way he applies a technique reflects his personality, and it is different from the technique itself. The discussion here is different from the question of the need of technique. The research on the heart or brain should not be denied by the reflection on psychotherapy I have suggested above. The question is about modern myths on psychotherapy in terms of technique, heart, brain, etc. The dignity of science should not be contaminated by the myths on psychotherapy discussed above.

6. Technique or opinion?

If we admit that psychology for psychotherapy cannot be defined as any technique, then what is the therapist doing in the course of therapy? Jung suggested that any psychology in psychotherapy is an opinion. People today will be surprised to hear that. We will feel uneasy about it. We might prefer science to an opinion, or even cling to science, because it would help us avoid the anxiety we will have with psychology as an opinion. An opinion implies that it is not an absolute truth, while "science" or technique is assumed to have an absolute truth. What does this anxiety mean? The fact that people today cling to science myth suggests paradoxically the nature of psychotherapy. Clinging is a brother to anxiety. We need science myth to cover up something essential in psychotherapy, something totally different from it. People who insist that psychotherapy is a science in a loud voice would fall into dogmatism, which would ironically show that their ideas are not scientific, because science is opposite to dogmatism.

Why are there so many schools in psychotherapy? A variety of schools tells that each school is not absolutely right. Beginners in the training process of psychotherapy would wonder which they should believe in. A Freudian, Jungian, Adlerian, etc. might have different ideas from others. Each psychology

is an opinion and is deeply related to the life of the founder. Freudian psychology and Freud's life is inseparable. Jungian psychology is, so to speak, Jung's life itself. We know the fact that some cases are well understood by Freudian psychology while some others by Adlerian. What does this mean?

When we become free from absoluteness of the science myth today, then what should we believe in practice? As we have seen, each psychology shows the life that each founder lived and is not a scientific description but a symbolic description. Therefore we could say that it is a myth. When a psychotherapist gets to have his own psychology, it is a confession of a mythology of himself. In a sense it is absolute for him, though absoluteness here is different from that of science myth.

7. Self analysis

An opinion is essentially a personal thing. Each opinion comes from an individual. Therefore if we accept that a theory of psychotherapy is an opinion, then the number of theories is as many as that of individuals. The therapist has his own psychology and the client also his own. If one of them were superior to the other, then we risk letting dogmatism grow. Freudian psychology is absolute for Freud, while Adlerian psychology is at the same time absolute for Adler, however paradoxical it may sound. When a therapist encounters a client, then he starts to try to know the psychology of his client. This work needs inevitably freedom or liberation from his own psychology which is different from that of his client. But the event of the Copernican Revolution tells us that it is not an easy process. At that time almost all the people except Copernicus were not free from the conventional image that the earth is the center of the universe. They were imprisoned in a common myth at that time. The initiation to become a psychotherapist should be like the Copernican Revolution. At first

the therapist should know his own psychology, free from the common myth of the age in which he lives; otherwise he would risk obtruding a given psychology to the client, a psychology which comes from outside of the client. Then psychotherapy would just aim at making the client adapt himself to the common myth of the age. If the therapist cannot liberate himself from the common myth of our age and if he cannot have any idea of finding his own psychology, then he cannot help his client find his own psychology. The person who has had no doubt about his identity cannot help the other person try to know who he is.

The first step of knowing himself is experiencing a dissociation with the given psychology, or maladaptation. Self knowledge lies in a experience of maladjustment. A person who has experienced no crisis in his life might be only a representative of a shared myth and be far from acquiring self-knowledge, which should be specific to him. He might be unaware of being identified with something outside himself like people who have no doubt about Ptolemaic theory, or about the idea of the sun going around the earth. Precisely speaking, what he identifies himself with includes various aspects, from a myth of culture to a family myth, for example. Jung was opposed to making the Jung institute at first. The institute might inhibit self-analysis. In any event, it cannot be exaggerated how difficult it is to realize the significance of individuality, though it often becomes a slogan in primary education, so it is well known, at least literally.

There will be no need to explain that the aim of self analysis of the therapist is not for his becoming "neutral." Of course it is important not to disturb the psychology of his client with his psychology, but it does not mean that the therapist should become neutral. He should approach his psychology and he should stand in front of the client as a person who has seen through the psychology of the common myth and liberated himself from it. Neutral means

that the therapist is behind something given from the outside, instead of standing directly in front of the client. Neutral means that he stays in the shadow without showing any expression. As I mentioned before, it is often the case that the therapist remains behind some technique, without noticing that. Therapists should instead be aware that the process of critical self-realization on the therapist's side is the process of the therapy. It is the only way to approach the psychology of the client and work for it, or the only way to respect it. A therapist is sitting in front of the client as a living person, not as a technique.

Reference

- Jung, C. G. (1934). The State of Psychotherapy Today. In *The Collected Works of C. G. Jung Vol. 10*, Princeton, NJ: Princeton University Press.