

CHANGING THE CONTEXT OF CHANGE

by

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This paper aims to explore the common ground between Psycho-synthesis and other therapies in developing a new psychology and a new look at what we mean by change. If the reader will start by considering two questions, the following discussion will be related to your experience. Firstly, "Have you ever changed?", and secondly, "Have you ever stopped changing?" You may also want to be aware of your reactions as you consider these two questions. In doing so you may experience some dissonance between the questions, which will resolve when you realise that your answers are not contradictory but rather point to different levels of change. In any organization - chemical, biological, psychological - some levels may be changing while others remain stable. Similarly it is possible for you, the reader, to have been involved in many changes and yet meet an old friend who says "You haven't changed at all!"

So in exploring the nature of change we should bear two ideas in mind. Firstly, that we cannot easily describe change without specifying at what level the change is occurring. Secondly, that change is not something contradictory to stability. Change and stability

always exist together as complementary polarities. This theme I will develop later, but first I want to expand on the idea of levels.

Gregory Bateson gave a lot of attention to this idea and in particular suggested that there were different logical levels of learning, each involving a different sort of change. (1) The basis for this theory was Russell's theory of logical types, which pointed to the logical distinction between the member of a class and the class itself.

Thus in any hierarchy of order we must be careful not to confuse levels within the hierarchy. For instance, to talk about a changing family and change in one of its members is to talk about different sorts of change. I have tried below to set out a simple hierarchy of therapeutic change in much the same way as Bateson did for education.

Level I is the change in a specific behaviour, such as practised in behaviour modification techniques. But as Bateson points out in relation to the Pavlovian type of experience, there is always a context for this simple type of change which makes it meaningful. In therapy this context is the "why" of "why

change". At Level I this context will be a belief or a construct of how life would be better with this change.

Level II is a change in a set of behaviours, which are controlled by a belief or a construct about how to operate in the world. An example of such a set might be "good manners". But once again there will be a context for this belief and when this context is no longer adaptive a person may need therapeutic help in understanding what has happened. Insight or cognitive therapy is effective at this level, not just because it helps the person make their beliefs more adaptive to their environment, but because they create a bigger context within which the person can see their behaviour as mal-adaptive.

Level III is a change in a set of beliefs, which are held within a world view or paradigm. An example of such a change is the crisis that meets a devoted mother when her children have left home and developed their own lives. Her sense of meaning in life and identity, which may have been largely taken from mothering, are lost. Most depth therapies operate in this area and, although using different methods, follow the principle described in Psychosynthesis as "Disidentification" - that is, the stepping back from a limiting identification (being a mother in this case) to a more inclusive sense of self that allows for new meanings to emerge.

2 What many therapies miss however is access to the next level of context. (Level IV) which would

provide some guidance as to what method would be suitable for this unique individual. By only operating a Level III they would be forced to classify the person's symptoms according to a Level III category and treat them accordingly. Yet this is to commit an error of logical type, for any level cannot be understood from within its own boundaries. The only way to undertake or reflect on Level III is from a meta-level, i.e. Level IV. For instance, the experience for mothers of letting go of their children will be different and cannot be predicted from the situation. The meaning of the experience will be in relation to that mother's unique context, which can only be understood at the meta level.

Level IV is a change in a set of paradigms or world views. Some have called this a meta-paradigm, but I believe this is a mistake because it still implies some identification - however inclusive. Level IV is about not being identified in any world-view but rather trying being one's Self. Work at this level does not strictly involve "therapy" any more but rather a spiritual discipline, such as meditation. This is because the work no longer focuses on trying to change the personality, but rather for the client to gain a transpersonal context to their life. It is the shift from personal change to the development of a spiritual path. But where Level IV is vital for therapies that wish to facilitate deep changes within a person, is in giving a context for changes in Level III.

Of course there is no logical reason to stop at Level IV. It is firstly a problem of communicating in ordinary language what might lie beyond this, and secondly it lies outside the scope of this paper. I would like to give as an example of a Level IV change the story told by Arthur Deikman, of the man who knocks on God's door seeking admission. (2)

"Who is there?" God asks.

"It is I".

"Go away." God replies.

Sometime later the person returns and knocks again.

"Who is there?" God asks.

"It is thou"

"Enter." God replies.

Looking back over this scheme of four levels of therapeutic change we can see that not only is each higher level the context for the level below, but that a change at a lower level need not affect this context. Thus a person can wish to change a particular belief that is causing a problem, without wishing to change their whole world view. Appreciating the different levels in change can help us as therapists both to see at what level a client wants to change and at what level they want to remain the same. It may also help clarify that for our clients, because when caught in a problem they cannot easily move to the meta-level (the disidentified experience) from which they can "see" the problem. In fact I would suggest that this limited perspective is what makes this issue "a problem" and often moving levels to the larger context is enough for the issue to no longer be "a problem" even if something still has to be done about it.

This idea that it is the context - or lack of it - that creates the problem is an important idea in the new psychology of change. What Watzlawick shows is that a problem cannot be isolated, because it is part of an interconnected pattern which is maintaining itself. Problems become 'problems' either because they have been developed to some advantage or because previous attempts to solve them have actually exacerbated the issue into a 'problem'. Thus straightforward attempts to help by the therapist are usually met by so-called 'resistance' For instance, any attempt to help a depressed client see the positive side of life is liable to increase the client's depression (4). This is true even when the client seems to want to co-operate with the therapist's help. The so called 'resistance' to therapeutic change so often happens when the therapist has accepted the problem as defined by the client rather than understanding the wider system to which the 'problem' belongs.

In order to change the working of such a system the underlying assumptions of the system need to be gently shifted. Although Watzlawick does consider the therapist's attitude and assumptions to be part of the system, he does not take this far enough. I would suggest that there is an underlying assumption about the nature of change which maintains a collusive system in many therapeutic relationships. Most simply put, this assumption is that the therapist is an agent of change who can somehow work on the patient to produce the desired effect. This Newtonian notion of

change is deeply rooted in our western consciousness and through the rise of technology has achieved remarkable success. Yet (in the practice of therapy) it contains three fallacious conceptions which underly the old psychology of change.

i) that entities can be separately isolated

ii) that there is always a linear sequence of cause and effect

iii) that the Self is an object

Restated within the new psychology of change these conceptions can be powerful guidelines to therapeutic practice:

i) that the therapist is always part of the system he/she is attempting to change. This means that the therapist needs to be willing to evolve with the system and to be aware of the strange position he/she holds - both being within the system and being outside it. As Bateson says, "the evolution of the horse from Eohippus was not a one-sided adjustment to life on the grassy plains . . . Turf was the evolving of the horse. It is the context which evolves." So it should be in the therapeutic relationship - that the context evolves through reciprocal interaction between therapist and client.

ii) that the client's problem is not caused by some past event, but rather is being maintained in the present. Thus no one is to blame for the problem and norms of pathology are not helpful in understanding the client's need for the problem. More important still, therapy is not a game that the therapist can win in defeating the 'resistance' of the client. At least, this means that the therapist needs to get out of the way of the evolving process and at

best, that he/she can co-operate with it in what Peggy Penn has called co-evolution (5)

iii) that the Self is not an object whose behaviour can be predicted by Newtonian laws. As Bateson has pointed out, what is being transferred between human beings is not energy but information and the way this information is received is unpredictable. Thus as therapists we need to be aware of our tendency to impose our solutions, our expectations as to where our clients should be going. Whereas therapists can often get away with their 'helpful' solutions when operating on Levels I and II (previously mentioned), they become merely obstacles in Levels III and IV.

Diekman has suggested an interesting polarity between the 'object mode' and the 'receptive mode' of awareness. (7) The receptive mode deals with the process, non-realisation, simultaneity and paralogic, and this seems more in keeping with the new psychology of change. It means the therapist being more receptive to the emerging or evolving context and using his/her presence as the major tool for transformation.

Useful as receptivity is in practice, it does not take us to the central issue. We know that the Self is a subject and yet how can we express the causality of this subject (free will) without falling back into old epistemological errors? By only dealing with the Self as an "Observing Self" Diekman limits the characteristics of the Self to

awareness. The Eastern mystical traditions on which he draws have always placed accent on the introspective character of the Self. He is right to draw attention to this, for we in the West have focused too exclusively on the dynamic character of the Self. Within the old paradigm this has given us the notion of our isolated wills in competition with others for the "survival of the fittest". But to move into the paradigm does not mean we have to give up any conception of our own causality. It rather means we have to see it within a new context.

Assagioli, in his book on the Act of Will, is careful to point out the value of our individual unique expression as a participation on a universal state of Being. He quotes Radhakrishnan as saying "*The peculiar privilege of the human self is that he can consciously join and work for the whole and embody in his own life the purpose of the whole*"(7) This embodying of the whole within a part is a well known phenomenon in groups and has recently been given a lot of attention in the use of the "Holographic" metaphor by Bohm and yet within systemic therapy there is still a tendency to exclude the Self as if it were to fall back to the old paradigm. It is as if the minds of some systemic thinkers have seized on their "system" as an exclusive truth rather than a wider more inclusive context in which to perceive. Some of this is evident in the way the Milan Model can be rigidified around the concepts of "Circularity" and "Neutrality". (8)

While the Milan Group's concept of neutrality fits well with my third

guideline of not imposing any expectation and not trying to make anyone change, it can become a defensive stance which actually prevents the therapist making significant contact. It is as if in their efforts to avoid linear thinking and the enmeshment of the therapist, they have actually become controlled by that which they wish to avoid.

The point I am making is that the new psychology of change can not be 'achieved' through exclusion or attempting to build methodologies which technically simulate how therapists 'ought' to be. No therapist can truly remain at a meta-level to that of the client's, as the Milan Group would like. Nor should we be attempting the exclusion of the Self of the therapist, for that is the most valuable tool at his/her disposal. What we need to be understanding is the nature of the involvement of the therapist within the new paradigm.

I think Psychosynthesis has a lot to offer this new way of thinking about the therapeutic relationship through its understanding of the Will. Assagioli has written of the relationship (or guide) * as the external unifying centre for the client. The question is - centre of what? In Levels I and II and to some extent III, this may be taken to mean the centre of the personality. paradigm this meant a more positive approach to the phenomenon of transference - the therapist acting as an ideal model (ego ideal) for the client. But when we come to the transition between Levels III and IV this no longer makes sense. We can not understand that this is a centre

* Guide is perhaps a more appropriate concept for the worker in the new paradigm, as the original meaning of "therapeia" as service has become degenerate in modern usage.

for within the old paradigm because we need to go beyond the notion of two separate persons affecting each other.

When this transition from Level III and Level IV happens in a therapeutic session it has not been caused by either therapist or client. It is rather that a new context emerges through their relationship. It does not happen to them either. The guide will be aware of this new context while it remains hidden to the client. To use David Bohm's concept, the context is enfolded in the implicate order and so slowly reveals itself. The guide becomes, as it were, the channel for this new context to become explicit and thus for a new way to seeing and acting to become available to the client.

The skill in the art of evoking the emergent property (the nova) of any system, is not something that can be made technical. It comes through the individual therapist's own sensitivity to the developing context of the therapeutic relationship. It comes also with the shift in the therapist's experience of will away from that of being a separate causative agent towards that of the impulse of wholeness. Thus the effectiveness of this new position for the therapist does not rely on his/her individual power but on co-operating synergetically with the direction of change.

It is strange that it has taken a physicist, Ilya Prigogine, working with unstable chemical systems to remind us that living systems evolve towards less probable states. As Paul Dell has pointed out (9), living systems are not controlled by the

cybernetic notice of homeostasis. They do have an ordering principle but it is not a cybernetic one because it evolves to higher states of order through *non-equilibrium*. The ordering principle is the Will.

Assagioli notes that the integrative and organising capacity of the Will is its most important function. He gives the example of the body as a system and asks, "What is the unifying principle that makes this possible? Its real nature escapes us: we can only call it *Life*; but something can be said of its qualities and ways of operating. These have been variously called co-ordination, interaction, or organic synthesis."

Assagioli goes on to talk about syntropy or negentropy being the mathematical descriptions of this principle and how these are also the specific characteristics of the Will. He writes "*We need not discuss how the unifying synergetic force operates at biological levels. What matters is to realize that we can be aware of its higher manifestations in the conscious human being, and also at transpersonal levels*". (10)

This area is obviously a fruitful one for further thinking and research by both those involved in systemic therapy and psychosynthesis. What I hope to show in this short article is that the evolution of living systems cannot be considered a random process any more that they can be considered to be linearly programmed. Yet some systemic therapists seem so frightened of the old Teleology that they fail to see the purposeful direction of unfoldment that characterises human beings.

Like many attempts to break away from old paradigms the circular epistemology espoused by so many systemic therapists is in polarity with old forms of therapy. Whereas before therapy may have been "goal directed" and the therapist an agent of change, now therapy is only a means of collecting information and the therapist a neutral enquirer. Strategically a circular approach to change may well unblock "resistances" (so called) developed by clients due to previous attempts to produce change in them, but this is a narrow base on which to build a new epistemology. By removing teleology these theorists are in danger of a new reductionism as demonstrated in the inappropriate use of the notion of "Homeostasis".

The new paradigm can not be a reaction to the old one, it has to be big enough to include it. Thus, what we need to work towards is not so much a circular epistemology but what Marco De Vries has called a spiral epistemology. (11) What I have been attempting to argue here is that this means understanding the nature of the Will in a new way - not the old notion of isolated causes but rather as an ordering principle of growth, or the evolutionary direction of unfoldment.

To really change the context of change we need not only to break out of the old paradigm, we need to be born into the new one.

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