



# *The Meanings of Power*

*Gaie Houston*

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Use is good. Abuse is bad. True. It is tempting to assume there are some universal and absolute values for humans. Instead, like the coming and going of geological weather, there are moral climates within and between cultures which change truth itself.

Here is Foucault: 'We are all formed and dominated by the values underlying the structure of [our] society. Truth isn't outside power, or lacking in power . . . Truth is a thing of this world. Each society has its regime of truth, its general politics of truth: that is, the general type of discourse which it accepts and makes function as true . . . [We need also to notice] the status of those who are

charged with saying what counts as true.'

In psychotherapy this is the place of dilemma. How much is a therapist to uphold the current morality, or to question or subvert the status quo? It is a terrifying topic. To take a single example, it is arguable that the Freudian penis-centred definition of all human sexuality is a psychological legitimisation of a political reality. As Marilyn French says, 'The exculpation of the father, in a psychology that located the formation of character in childhood, led directly to the inculcation of the mother. Generations of psychologists have laid the blame for almost all our unhappiness at her tired feet.' At a

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wider level, mental health itself is as much a cultural artefact as a perceived intrapsychic absolute. Normality and deviance are largely defined by what is socially convenient. Adjustment is thus both suspect and desirable: suspect because the social values, the morality-adjusted-to, may be bizarre; desirable because social animals need to be in the same ball park as one another. Being too far out of line is distressing to the individual and hard for society to tolerate. To take a few examples: an aversion to loot and pillage presumably made for a bad Viking; incest was your sacred duty in some families in ancient Egypt; killing is the duty of soldiers in warfare. Psychotherapy cannot be totally outside the morality of the society in which it operates.

Having set the scene by reminding you of the sands on which what we call truth is founded, I would like to attempt a definition of power as I understand the word in therapy.

### *Definitions of Power*

First, I have needed to remind myself of some of the ways I see the word used by other people. It is often seen as nasty. Here is Bertrand Russell: 'Since power over human beings is shown in making them do what they would rather not do, the man who is activated by love of power is more apt to inflict pain than pleasure.' Some writers have made an apparently useful distinction between power-to and power-over. Power-to is ability, the power to make, to give, to do. Power-over is impositional, political. And, with certain exceptions, the power-over of coercion, threat, sanction has no place in

therapy. But all tools can be abused, used as weapons. The apparently benign power of empathy, the ability to guess accurately into the world of the other, can be used as power-over; or it may be seen as power-over by the person who has been accurately guessed. The correct reading of me can lead to my manipulation — the buying of a second-hand car, devotion to a guru, or accepting just one brand of psychological explanation of my character or problem.

Francis Bacon stated that knowledge itself is power. Foucault elaborates, suggesting that all compartmentalisation of knowledge is an exercise of power. The creation of a profession, or a particular therapy, is thus the establishment of a power base, which may tempt its adherents to recruit new members to its belief system, and belittle those of other persuasions. This has undoubtedly happened in the field of psychotherapy. It is an abuse of power if therapists attempt to chop the patients' psyches to the shape of one or other procrustean bed of theory. Human minds need models in order to organise data to make sense; but models are intrinsically false, and should be recognised as such. Good use of therapist power is in learning many models. Each has been invented by a theorist with a particular personality or cast of mind, in response to a population of particular cast of mind, acculturation or history. As a therapist, when people present in what I call a Freudian way, then perhaps the Oedipal dilemma springs to my mind as I listen. Others clients are noticeably 'Kleinian', to use a shorthand expression, and then — for a time at least — splitting is the easiest frame of listening when I am with

them. Knowledge of many theories can at best be power-to, transformative and creative power, leading to power-with the patient.

For me power is something like electricity, electricity that is always turned on. It is a means of illuminating, warming, shocking or even killing. It is energy, physis, life-force in interaction. In this sense, all relationships are power relationships. Therapist and client assume or assign power, in contest or collaboration. Giving a talk, I may look like the person with the power; yet I feel and am in many ways the most vulnerable. I am exposed and you are not.

So here we are with the possibility that power is always present, that it is a relational function, that both parties are constantly exerting it, that its forms will be myriad, that it can be assumed or assigned, and that it has good and bad expressions and effects. We now need to look at ethics and power.

### *Ethics and Power*

A code of ethics is an abstraction into generality of what was once personal and passionate. At best, ethical codes are a useful shortcut to save us emoting and thinking the same questions over and over. At worst they become a smug justification of alienated behaviour. In a passage I find chilling, Foucault arrives at the term 'disciplinary power', the power of a discipline such as psychotherapy or any other. He states that 'this is the ordinary form of power by which we can expect to be invaded [in modern times]. If the discipline involved finds us a threat to its considered formulae [its belief system and ethics], we will be attacked or

dismissed. If we augment their story, we will be applauded and asked to join. If we do neither, we will be ignored altogether. In this way, the individual will become progressively more insignificant.'

So psychotherapeutic institutions can be abusive of power by the very fact of their existence. Like family rules, their codes of ethics need to be openly re-justified or replaced in a continuous, 'Maoist' revolution. Keeping out of this dialogue is an abusive use of power by therapists towards each other.

As far as I can see, intentional power has two broad underlying structures. Either it is mediated by fear, or by love. Some Freudian psychologists see hate as an underlying structure. To me, fear comes before hate; cruelty, spite and vengeance are developments from underlying fear. In my view, it then follows that it is ethical for the therapist to put up whatever boundaries and defences will help her to work without or with reduced fear, and with proper respect and generosity, or other form of love which is appropriate. Insofar as I am frightened of the patient, I am likely to abuse my power towards her.

Most of the time, apparently mundane practicalities are enough to prevent or reduce fear. Having other people in the building when new clients or unstable people are there; asking people who manage money badly to pay in advance; keeping time boundaries; these are ethical enablers of a possibly therapeutic encounter. Insofar as therapy is a power system, it needs checks and balances built into it — as do all power systems. Regulatory bodies, accreditation, supervision, continuing study, integrity of life in the

therapist, are some of the ethical means of making such checks and balances. Only an informed and compassionate professional body can protect the therapist from a patient whose destructive attacks are a response to history rather than the present. This is no less and no more important than having clear protective procedures for the patient who has been abused by a therapist.

Knowing the limits of the relationship with the patient, and having a clear personal model of the nature of the task of therapy, are two important ethical requirements which are also an aid to completing the energy circuit with the patient in an empowering rather than a power-contest mode.

### *Power and Roles in Therapy*

Here are three quotations which I find wonderful comments in themselves, and which are also contradictory in a way I find salutary:

*Macbeth*: Canst thou not minister to a mind diseased,/Pluck from the memory a rooted sorrow/Raze out the written troubles of the brain/And with some sweet oblivious antidote/Cleanse the stuffed bosom of that perilous stuff/Which weighs upon the heart? *Doctor*: Therein the patient must minister to himself.

Then Hippocrates, nearly two and a half thousand years ago: 'Some patients, though conscious that their condition is perilous, recover their health simply through their contentment with the goodness of the physician.'

And finally Beaumont in *The Maid's Tragedy*: 'They have most power to hurt us that we love.'

These statements are a forceful expres-

sion of the extraordinary delicacy and power of the therapist's role. The more I think about what we do, the more impossible our profession seems. Our job is to empower, to enable — that's well and fine if the patient wants to be empowered and enabled, but if they don't? Sometimes we need to unhitch a parental ambitiousness for our patient from our idea of what is possible, and that is when having power over oneself as a therapist is more important than having power over the other person. Otherwise we are using competitive power, the will to conquer.

Fritz Perls made a fine description of all this as petty victory, the underlying reality of which is self-defeat. He was not making a moralistic point, simply describing a mechanism. Whose good is properly being served? This is the question which needs to be asked, and often.

The therapist's powers are often best used in recognising and understanding the world of the patient, and making sense of how that world is or is not being re-created in the present. Only then can self-acceptance and change take place. This holds good most of the time, but not when dealing with some people, especially when they are in extreme agitation. I have sometimes found that the only useful, calming interventions to someone in a manic state have been prescriptive and proscriptive: 'No, Mary, I don't want you to drive to Edinburgh tonight and fetch your children out of school. I want you well enough to be peacefully at home when their holiday comes.' When I have said such things, I have done so with the clear sense that my wanting does not constitute a command. The words are arguably a monstrous imposition, taking

away from the patient all her responsibility for herself, but I have seen the power-exchange differently. Telling me about a series of potentially catastrophic actions she was about to take was, I think, the last squeak for help that Mary could muster. It would to my mind have been as callous to remind her at such a point that she was captain of her soul and mistress of her fate, as to tell someone who has been knocked down by a car that they have chosen their actions, so the consequences of those actions must be their choice too. Whether or not this philosophising has any truth in it, the survival chances of either of these people is poor without very active intervention by others. This is one of the possible advantages of belonging as we do to a social species. We help each other. As therapists we have constantly to refine our judgement about the point at which help itself becomes crippling, and turns to dysfunctional power over the patient. Both partners are active in this dialogue. However impaired her judgement in this area, the patient is probably searching for, and certainly deserves, a trustworthy therapist.

So the therapist is to be trustworthy — which is quite different from infallible. We need a kind of dogged honesty and simplicity, and the humility to see denigration or idealisation of us by the patient in a far wider context than just statements about ourselves. In systems language, we need often to shift the focus of contest or struggle from ourselves, to what Macbeth called the disease. That is the enemy for patient and therapist to unite in overcoming. To my mind, love is involved in this, and a progressive casting out of fear. A vast proportion of the errors

therapists tell me they have committed can be traced back to fear. Fear of the assault of the patient; fear of not knowing; fear of losing face; fear of losing control; fear of the material the patient presents.

The task of the patient is massively different. She has no duty of truthfulness and honesty as we have. Some of the time she will be doing a good job in giving a florid display of her dysfunctional behaviours to, or more likely at, the therapist. Provocatively, I could say that her work is at times to do her utmost to abuse power, her own and the therapist's. The therapist's task is to do her utmost to prevent that abuse, and to work towards power-with.

As a supervisor I am often faced with a therapist who is aggrieved because the patient is not playing the therapy game according to her or his expectations. The walk-out, the insult, the morose silence, the apparent amnesia about last week's careful work, can be hard to understand or respond to in a way that will be useful to both parties. Good use of power is to work towards a functional response, and to acknowledge the reactive anger, vengeance or despair that surface in the therapist's mind as comments on the reactions that patient probably elicits in many other scenes besides the present.

Sinking into hurt before a patient who is wanting to hurt, or in many other ways becoming part of what is essentially one of the dysfunctional intrapsychic dialogues of the patient, is an abuse of power by the therapist. Supervision is often the necessary enlightener to keep this from happening to any grave degree. The therapist's major task, often, is to config-

ure a wider scene, a larger gestalt, than the patient does. I sometimes describe this as having third eye rapport.

*Tout comprendre, c'est tout pardonner.* It is not given to any of us to understand everything. But we can at least be in what Buber calls the one-sided dialogic stance, which I take to mean having goodwill — towards understanding, and towards the other person — along with an open acceptance and easiness about the phenomena of your own responses. That to me is the proper use of power by the therapist. Like actors we are the instruments we work with. Actors are to give a representation of truth. Therapists are to be truthful. Contextual awareness is the major part of that truthfulness. The patient is likely to spend an exceedingly small proportion of her time with us, however significant that time becomes. Responding to her needs for convalescence, perhaps, or active investigation of her own mysteries, or creating a kind of gymnasium of the psyche in relation to us, is good use of power. Setting up an idealised pairing or group, an illusory cocoon of goodness in a bad world, is likely to be abusive of her in the long term — just as much as if I let myself into the

sniping, or despairing creation of reality, that she might beaver away to make me join in.

One last point about the larger context. Psychotherapy is, as I said, a response to our society. I saw a piece in the paper lately claiming that it did no more good than a chat with a friend, and I thought sadly that maybe we are only here because there have been widespread failures of friendship. We have not been taught the art of it. I wish that children in school were regularly allowed tuition and practice in human relationship. They respond amazingly to such learning where I have seen it happening.

To my mind, one of the best uses of the very beautiful and remarkable insight and power that I see my supervisees and other therapists cultivating, is in the prophylactic work of education. There is a risk that our profession might otherwise in the long term be abusive of our society. If we corner love and understanding, we may keep ourselves in work, but at the same time deprive what Ivan Illich calls the laity. That is a provocative point which can open up a creative unease for all of us.

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