

a unified psychotherapy?

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Human beings have developed an impressive capacity to discriminate: to arrange their perception of the world into precise entities to which they then give names so that they can communicate about them. In achieving this feat they have, however, become very dependent on this ability. Indeed, we may wonder whether it has become counterproductive. In contemporary society everything that is studied, and the methods by which it is studied, are divided into categories. It has now come to a point where, to be considered a person of worth, one must be a specialist.

The phenomenon of fragmentation is not of the same degree in all areas of study. Despite the fact that, since the Renaissance, art has been considered a pursuit to be distinguished from the making of beautiful things in the course of ordinary living, people can still attend the Royal College of Art to learn something called art. They do not have to commit themselves to, say, an Impressionist or Dadaist course of learning. And one can go to a university to learn something called philosophy without having first to choose between the Pragmatists and the Logical-Positivists. There are, as we know, wide variations of approach. Sometimes a new theoretical position can threaten the foundations of a discipline, as has happened in recent years in the field of literature - yet, despite the powerful efforts of the poststructuralists, we can still go to a university to learn English literature.

Psychotherapy is a different matter. There is, so far as I know, nowhere that one can go to learn psychotherapy; there are only training organisations which offer instruction in a particular kind of psychotherapy with a particular name to it. Consequently, this is what is on offer to anyone who wishes to be on the Register of the United Kingdom Council of Psychotherapy, a register which is considered by many to be a mark of professional competence and respectability. The fragmentation of the profession is one of the reasons why psychotherapeutic theory and practice is in such disarray.

This confusion of tongues is often lamented and it is widely recognised that there is much overlap between the thinking of various

schools of thought; indeed, attempts have been made to combined forces - for example, the emergence of 'cognitive-analytical' therapy, an undertaking with much to recommend it - but the result of such merges seems only to add yet another voice to the tumult. One wonders how this state of affairs has come about and whether anything can be done to alleviate it. Is it intrinsic to the nature of psychotherapy? Where is there solid ground on which we can begin to address the dilemma?

Although the practice of psychotherapy can be traced back for millennia there is no doubt that there has been a renaissance in the past century. The most obvious reason for this was the genius of Freud. In the early part of the century there were few rivals and even they found it necessary to define their beliefs in relation to Freud, continuing, for the most part, to consider their work to be analytical. What has emerged was less a regeneration of psychotherapy than the advent of a new discipline psychoanalysis. Until recent years, this was sufficiently powerful to replace whatever concept we had of the practice of trying to help emotionally disturbed people by means of talking to them. It would seem that, however much we may nowadays wince at the political rallying call of 'back to basics' we do need to attempt an endeavour of that kind in the field of psychotherapy or counselling.

The problems are many. A formulation in any area of thought is of necessity a distancing from other views and it would be difficult to suggest an approach to psychotherapy that was not seen as

merely another subdivision of the discipline. And an attempt to produce a blue-print which transcended and included all other methods may appear the height of arrogance. Moreover, a 'non-specific' psychotherapy can readily be thought woolly and vague - the product of an amateur mind. It is no wonder we sheer away from the idea.

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Any wording that might be generally acceptable as a description of psychotherapy would need to be exceptionally broad. In a recent paper Thomas Szasz refers to psychotherapy as the attempt to help another person to 'live his life better'. This is not a bad place to begin despite the fact that the statement already raises many questions, for example: Who can claim to know what a good life should be like? Does the statement eliminate the possibility of thinking of certain states of mind as illnesses requiring care?

A significant aspect of Szasz's formulation is that it enables us to explore the nature of psychotherapy from the point of view of ordinary living: we can all talk to those in distress in an effort to help them live better. This, to my mind, is a pivotal issue. Do we consider psychotherapy as an extension of our ordinary capacities, or do we think of it as a specialised method quite distinct from the conversations that therapeutically untrained people manage to have when faced with distress in their friends and relatives? Those who favour the former view will be likely to emphasise special techniques, while the latter approach will lead to a greater consideration of the quality of the personal relationship. To my mind it is the difference between these two approaches rather than the sheer number and variety of organisations that constitute the most formidable obstacle to a unified psychotherapy. How should we conceptualise this difference?

If one looks at the approaches of the various schools of thought now with us it is not easy to tease out where exactly each stand in relation

to the division between the technical and personal. It may be thought that, for example, cognitive therapy is a very technical undertaking, yet when Robert Hobson presented his 'conversational' model to colleagues, whether they were cognitive therapists, Rogerians or psychoanalytic psychotherapists, they said that it was no different from the model they practised. I can readily empathise with that situation. Since my own stance emphasises the continuity between what is happening in the consulting room and conversations which occur in our everyday life I have met with similar criticism. One of the factors leading to this confusion is that those therapists who emphasise technical manoeuvres rather than personal interaction lay themselves open to being thought lacking in warmth and feeling; in short, to being somewhat inhuman. And this hurts. It would be invidious to think that those who use technical methods care less for their patients than others. On the other hand, those of the 'humanist' or 'personal' turn of mind have to face the charge of lacking rigour. This also hurts; and is equally unjustified.

Let me give an example of a theoretical difference between two schools of thought which, though significant, would seem to be of insufficient importance to merit a division between organisations or courses of training. Psychoanalysis lays great emphasis on the effect of the past on the presenting problem, whereas humanistic psychotherapy focuses on the present and the future. I imagine, however, that in practice only someone who has lost touch with reality could talk to people and completely ignore the fact that human beings live in a world that is

constituted by past, present and future. The difference, surely, is only one of emphasis. There are, however, some conceptions about experience that genuinely embrace our deepest sense of how we want to be and live with others and which we cannot

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Although, as I have suggested, these two areas are not entirely dissimilar (for example, they both, in their unique ways, are searches for truth) they require of their practitioners ways of approach, of method, of learning and of imagination that are utterly contrasting. The student who trains at The Royal College of Art will receive a very different experience from those who attend the science department of a university.

I have written at some length elsewhere on the nature of this difference, emphasising, especially, the moral dimension of the personal approach and its continuity with the experience of daily life; here I shall try to meet some of the criticisms I have received for sustaining this view. The point has been elegantly made to me by a colleague, Rosemary Randall, who is, in the main, sympathetic to the view I take of psychotherapy:

I still find the dichotomy of technique versus the extension of ordinary capacities a difficult one. I came up with an analogy - that of singing. There is no doubt that what Kathleen Ferrier does and what we do round the campfire are both singing. There is also no doubt that the difference between them could not be summed

up as technique. Technique would not describe the ineffable beauty of a voice such as Ferrier's or the inspiration of her interpretation of a piece of music. Neither would technique adequately describe the years of practice that had gone to make up that voice, that interpretation and that performance, although

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technique might be a word that is sometimes used. Our campfire jollity and Kathleen Ferrier's performance are certainly connected but are also different. You concentrate, I think quite rightly on the connections between psychotherapy and ordinary

conversation, but how are we to talk about the differences? How can we value both and not demean one or the other? The campfire would be no fun if we all tried to sing like Ferrier and I'm quite glad she never tried to record "Ging Gang Gooly". Of course, most of us psychotherapists are not up there with Ferrier but we do do a little more than sing in the bath.'

I cannot pretend that I can fully answer this criticism but I think some things can be said in answer to it, although here I can only do so briefly.

Even without training I think it likely that Kathleen Ferrier would sing in the bath better than I do, provided she had not been inhibited from singing. Natural ability, encouragement, passionate interest, ambition can take us a long way in becoming good at something. Given these qualities it is likely that the person would search out settings in which they may gain inspiration and learn much from others known as good singers. If singing is regarded as one aspect of ordinary living she would learn to do it better, to improve on her natural capacity. It may be that she would learn certain things - to do, say, with voice control and breathing - which will help her and which we may call techniques. But this would not necessarily be the main feature of her development as a singer. If she wished to specialise, to become, say, an opera or a blues singer, more precise techniques may be necessary.

The urge, and ability, to help someone in distress is at least as much a part of everyday life as singing. And, as in singing, it would seem important, for anyone who

wishes to improve their ability, to cultivate those characteristics that are widely recognised as helpful, for example, to be able to listen. Also, as in singing, it would make sense to be amongst people who value, enjoy, are experienced in this field and would be likely to give encouragement, criticism and act as possible models. If they have learned special techniques they would no doubt introduce them to those wishing to learn, judging when and whether certain techniques may be useful to a particular individual. What I am describing here is, I believe, fundamentally different from a project which is based on the idea that a special technique is the main means by which someone becomes accomplished and that this technique should take the priority over the natural way a particular person functions in relation to others.

As Randall points out in the quotation I give, technique cannot account for the 'ineffable beauty' and 'inspiration' of the interpretations of Ferrier's singing. How we can teach this, in singing or psychotherapy, is a major challenge which is not easy to get a purchase on. Knowing little about singing, but something about therapy, I feel safer in pursuing consideration of the latter. I will take the capacity to listen as an example. To listen attentively is, I think, the *sine qua non* of any attempt to understand another. We have all had years of practice at it and are no doubt good and bad in various ways and various situations. Elements of a scientific method or an artistic method are likely, willy-nilly, to enter into our ability without our being aware of this. What we do is not a science nor an art; it cannot be

classified in that way. In this sense it is ordinary, unspecialised. At its very best it may approach inspiration or even have a quality that is akin to beauty. To try to turn it into an art or a science would be to distort it,

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although we may learn things from art or science which stimulate us to listen better. In short we should surely be careful not to impose a programme of teaching which may take away our natural gift unless we are convinced

that we have a technique which is so good that it eliminates the need to listen in an ordinary way. And I do not believe we have such a technique.

I have, I think, made it clear where my own prejudice lies. I believe that a unified theory of psychotherapy would need to start from, and be an elaboration of, the ordinary capacity to help people. Special methods or techniques would be likely to play a part in, but not replace this way of conceiving the work. Whether my view is reasonable or not, it is clear that this is not how psychotherapy is at present conceived. The technical and non-technical approaches vie for attention, are emphasised in a different degree, and often confusingly presented in the various schools of psychotherapy.

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Although, as I have suggested, these two areas are not entirely dissimilar they require of their practitioners ways of approach, of method, of learning and of imagination that are utterly contrasting. The contrast that is most relevant to this discussion of ways of relieving mental distress is that between organic psychiatry and psychotherapy. Any division within psychotherapy itself is likely to be less striking. Nevertheless, the difference between humanistic and technological understanding is not a minor matter: the priority of quantitative measurement of

experience is an anathema to many of those who work in a personal way and recognise that the problems they face are essential moral ones.

In considering the difficulties standing in the way of unifying psychotherapy, we have to take note of the contemporary intellectual climate of opinion in society. There is little doubt that the star in the ascendant is science - in particular, a form of science characterised by bureaucracy and technology. Quantification increasingly appears in most areas of human endeavour, and not least in psychotherapy, which tends to be derided if it cannot be measured. Training organisations found acceptable for national registration are increasingly required to teach their students to learn, as in science, a body of knowledge, rather than to help them cultivate their own innate capacity to do the work.

To protest that science is not necessarily the royal road to becoming a good psychotherapist is,

in the present climate of opinion, to swim against the tide. But, if we are to foster a psychotherapy worthy of its subject, the personal, human, artistic, intuitive, moral approach must not be neglected or relegated to a subdivision of an undertaking that is primarily considered to be technical.

Further Reading

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Lomas, P. *Doing Good: Psychotherapy out of Its Depth* Oxford University Press, (1999)

Randall, R. Personal Communication.

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