

Future Opportunities for Humanistic Psychology

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SYNOPSIS

People do not adapt to trauma easily. It is common for men and women to undergo potentially traumatizing events, however only some of these become traumatizing events that lead to traumatic experiences. Post-traumatic stress disorder (PTSD) results not from events but from experiences, the way someone gives meaning to an event. This attribution of meaning is a core concept of Humanistic and Existential Psychology and psychotherapy, which are undervalued resources in the treatment of PTSD. Humanistic and existential perspectives on dealing with PTSD can be practiced on their own or as a supplement to cognitive-behavior therapy, group therapy, or any of the other mainstream approaches to alleviating suffering and helping clients turn post-traumatic stress into post-traumatic strength.

The field of psychology is making an impact in contemporary society. Psychologists write blogs and books. Psychologists are interviewed in the media, and many of these interviews are transformed into YouTube videos and other fora made widely available by advances in technology. Humanistic psychologists in particular have unique insights to offer, and ought to make the most of these opportunities.

One of the areas in which humanistic psychologists can make an impact is bio-ethics, where they can provide responses to such questions as: 'What role can psychologists play in alerting people to the factors that have put the planet and its inhabitants at risk?'; 'What are the motives that compel some individuals to commit murder in school settings, and to kill civilians while serving overseas on military duty?'; and 'How can psychologists help traumatized people who are coping with the aftermath of an event that not only was life-threatening, but that radically challenged their prevailing worldview?'

In focusing on this last question, we know that there are many ways to treat post-traumatic stress disorder (PTSD). Many of these treatments interweave and overlap with one another, and many have had high success rates in reducing or extinguishing stress-related symptoms. Sometimes a combination of treatment approaches produces especially positive results. Each case of PTSD is different, and an integrated approach will often provide something of value for those people who try it.

Individually, human beings do not adapt easily to trauma. Contrary to popular stereotype, early human beings rarely engaged in warfare or other forms of assault. As a result, a number of biological defenses that could have fostered resilience and rapid recovery did not have an opportunity to develop. Early humans may have been attacked by wild animals or beset by natural disasters, but these traumas were rarely accompanied by guilt, shame, or other emotions that elicit withdrawal, suspicion and suicide among today's combat veterans and survivors of rape and bullying.

Treatment approaches for PTSD refers to systematic programs designed to eliminate or reduce those problematic symptoms and unpleasant experiences associated with a person's post-traumatic stress. Usually, a qualified person administers these programs to an individual or a group, but some programs are self-administered. They are *therapeutic* because they have been designed to promote healing. The word *therapeutic* is, in fact, derived from the Greek term for a

group of professional servants, *therapeutae*. Hence, therapists are specially trained *servants*, and therapeutic programs serve people who are in need of help. Almost all psychotherapists are psychologists, counselors, psychiatrists, or social workers who have undergone extensive training in order to serve their clients.

Most of these treatment approaches fall under the category of *psychological therapy* or *psychotherapy*. The goals of such programs include increasing self-understanding and self-acceptance, and learning how to change behaviors and beliefs that are harmful because they block the PTSD survivor's enjoyment of life.

But there are therapeutic programs that are not primarily based on psychological principles. They range from acupuncture to art, from medication to massage. The word *therapy* refers to the remediation or healing of a psychological, physical, or spiritual disorder. There are physical therapists, occupational therapists, and speech therapists. In addition, there are spiritual counselors who have been trained to treat spiritual, religious, or existential crises, including the loss of one's faith.

Some people with PTSD have a religious crisis because a trusted pastor or priest took sexual advantage of them. Some people have spiritual crises because they are plagued with guilt after a good friend is killed in a highway accident when they were driving the car. Others have existential crises because their very existence has lost meaning due to the inadvertent killing of civilians during a combat operation.

An Epidemic of Trauma

The future of Humanistic Psychology is closely linked to the epidemic of traumatic stress reactions. The US military has invested millions of dollars in suicide prevention programs only to see the rate increase year after year. US combat veterans take their own lives five times more often than their civilian peers. At least 20% of the men and women returning from duty in Iraq and Afghanistan develop PTSD; half of them never seek help, and half of those who do drop out after the first one or two sessions (Paulson & Krippner, 2010). Relatively few are directed to a humanistic psychotherapist, one who would do more than prescribe medication and focus on symptom reduction. By virtue of their training and orientation, humanistic psychologists could help veterans face their existential crises and focus on developing post-traumatic strengths.

When a tsunami hit Asia, the media interviewed local members of the Christian and Muslim clergy. When asked why God or Allah allowed such a tragedy to occur, the typical response was, 'We do not know the reason, but we must trust the Divine, who is all-powerful.' Some survivors found

consolation in this response, but others did not. Nor, on other occasions were they satisfied with similar palliatives when children were killed in the wars overwhelming Iraq, Afghanistan and Pakistan.

In contemporary society, trauma is everywhere. Civilian deaths in recent wars have outnumbered those of combatants. Girls and women are mutilated or killed for alleged religious transgressions. Ethnic and tribal rivalries trigger random murders, and innocent people are caught in the cross-fire of interminable drug wars. It is naïve to think that an infusion of Humanistic Psychology could stop the escalation of trauma, but at least this goal could be put on the agenda of humanistic psychologists and the groups with which they have influence.

Psychotherapy has addressed the sequelae of trauma since its beginning. For decades, research studies have failed to demonstrate its effectiveness appropriately. However, more recent data not only supports the proposal that psychotherapy works, but indicates that each of the major schools of psychotherapy work equally well. A recent comparison of half a dozen interventions for US combat veterans with PTSD found that each alleviated suffering, and in comparable proportion. Furthermore, medication without therapy was less effective than therapy without medication. When an anti-depressant was used without therapy, its effect upon patients varied little from that upon those given only a placebo (Benish, Imel & Wampold, 2008).

Historically, humanistic psychotherapy was not evaluated for a very simple reason: not enough data was available for comparisons to be made. As a result, humanistic psychotherapy is out of the loop when funding is available to study treatments for PTSD. Sadly, humanistic psychotherapy is not the only intervention that has failed to receive attention from funding agencies; so too has rational emotive behavior therapy, expressive arts therapy, and hypnotically-facilitated psychotherapy, not to mention such self-regulation regimens as biofeedback, neurofeedback and Yoga.

When one looks carefully at the nature of PTSD, it is apparent that humanistic psychotherapy is an overlooked asset in restoration and healing. Potentially traumatizing events occur all the time. For some people, genetics and early life experiences make these events actually become traumatic. The traumatic experience does not always lead to PTSD, but when it does, those persons' worldviews and sense of self are assaulted. Their personal myths about and relationship to existence are shattered. Recurring nightmares and flashbacks attempt to replay the traumatic experience (or experiences) until it makes sense. Hyper-arousal tries to protect PTSD survivors against further assault, and emotional numbing buffers the feelings of guilt, shame, fear, depression

and anxiety. Social activities are avoided, work opportunities are ignored, and poor concentration prevents mindful, joyous living.

From the point of view of humanistic psychologists, the *disorder* in PTSD rests not only in the survivor but in the society—a social order that sends its youth into unnecessary combat, does not protect ethnic or sexual minorities against discrimination and ridicule, and fails to provide a safety net when people are struck by natural or human disasters. Neither conventional religion nor conventional psychotherapy dares listen to the trauma survivors who question the notion of a compassionate God, a benevolent government, or a benign universe. Yet these are exactly the questions that humanistic, existential, and transpersonal psychotherapists are uniquely equipped to confront.

Sarah's Story

Sarah came from a small American town, one in which good deeds and honest relationships were not only valued but very real. Filled with excitement and anticipation, she entered a university in a neighboring state. She was eager to learn and spent long hours in the library. One night walking home, she was intercepted by a bulky figure that put a knife to her throat and warned her not to struggle. When the rape ended and the figure disappeared, Sarah was left helpless in a timeless space of pain, revulsion, and fear. She felt that the wound had penetrated the depths of her soul, for she could not cry, nor summon up a voice appropriate enough to tell others of the horror.

Sarah's grades plummeted, she lost interest in her friends, and she cancelled a trip back home. She would not venture outside at night and when she was able to sleep, the husky figure assaulted her over and over again in her dreams. Sarah's inherent mythology was that the world was a safe place, that the university was a protective abode, and that people were basically good at heart. These myths had been blown apart and there was nothing to take their place. Eventually, she summoned the courage to talk to a university chaplain and a physician. Both listened sympathetically. The chaplain told her to pray, and the doctor put her on medication.

Both of these measures gave palliative relief but did not strike at the core of Sarah's existential and spiritual struggles. Fortunately, the university had a long-standing women's support group and Sarah became a regular member. It was in this group that she felt listened to, respected, understood and supported. Other women shared similar stories, and Sarah slowly began to put her life back together. When she shared her new personal mythology with her family, they found it somewhat cynical. But Sarah had substituted realism for naiveté, spirituality for religion, and practical action for repetitive rumination. She had several counseling sessions

with a social worker who was an advisor to the women's group, and found ways to reduce her nightmares through keeping a journal and illustrating it with images of the traumatic experience. She had found post-traumatic strengths that produced positive meaning from the trauma, imbuing her with empathy and courage that she never realized she possessed.

In today's tattered world, there are many Sarahs. Humanistic Psychology offers countless methods of support, including establishing support groups, model communities, and psychotherapeutic services that will help those who are alienated, marginalized, and disempowered by trauma to explore within their self, as well as search beyond. This union of the personal and the transpersonal, the introspective and the communal, the acknowledgment of chaos accompanied by the determination to create meaning, have the potential to actualize the vision that Humanistic Psychology can share with Earth and its inhabitants. ☺



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