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## Psychotherapy at the Crossroads

I'm struggling daily with my patients' addiction to living by their feelings, rather than by the reality principle. It is so much more natural, and seems so much easier, to yield to inner urges (even if they appear as thinking), though it invariably leads to disaster, later if not sooner. My close daily association with good colleagues who also live consciously and thoughtfully helps maintain my balance in this battlefield. But even so, I'm always in search for brothers in spirit, people not afraid to speak their mind in seeking the truth, even when some feathers must get ruffled in the process.

But man must light for man
The fire no other can,
And find in his own eye
Where the strange crossroads lie.
David McCord
Commissioner

Strange indeed are the crossroads that my eye beholds. At a time when psychoanalysis and psychotherapy are seen as being in a sharp decline, I see a new kind of psychotherapy emerging and ready to take off, effecting actual cures of lifelong depression. "Where are the patients?" asks a four-page article in an issue of *Newsweek* (June 27, 1988) which states that

Few doctors are able to maintain strictly analytic practices anymore. To stay in business, most of them are giving over part of their practices to psychotherapy . . . in which . . . the focus is often on the "here and now," rather than the past.

Psychoanalysis is indeed in disarray, analysts discouraged and dispirited. As a result, analysis is surrendering some of its much criticized aloofness, and psychoanalytic societies have even stooped to such public-relations practices as organizing societies of "friends" that raise money to promote the "cause." All that public education has but one purpose, that of finding patients and drumming up business. The haughtiness and arrogance of yesteryear are not altogether gone, but they look even more pathetic now.

Psychotherapy in general largely follows Freud's basic principles even when it does not proclaim itself as "dynamic" or "psychoanalytic." The concept of the psyche is so closely associated with an inner, unconscious life that in the public eye even non-Freudians are often associated with psychoanalysis. The majority of therapists regard themselves, and

have been regarded by others, as second-class analysts. They basked in the glory of analysis in its heyday, benefited from its hold on the marketplace, and they have now come on harder times also, just like the analysts.

But emotional illness has not suddenly disappeared and the symptoms of chronic depression are to be found everywhere. They wreak havoc in our families and in our communities in the form of drugs and alcoholism, low productivity and industrial strife, "accidents," suicides, psychosomatic illnesses, crime in the streets, and lawlessness in general. They all chip away at the good life that is potentially ours in these days of affluence and relative security. Even the number of therapists is increasing steadily, and they all find people to treat.

The reaction against the sterility and "head-trips" of psychoanalysis started long ago. The many direct body approaches, gestalt and Transactional Analysis, the encounter movement, family and short-term therapy, and many other approaches and offshoots all tried to make psychotherapy more relevant and more useful. It was obvious that something was basically wrong with Freud's formulations but it was less clear what it was. Some claimed that the detachment and the relative noninvolvement of analysts with their patients were responsible for the poor results' others claimed that it lasted too long, that the cost was too high, the out-come uncertain and not easily measurable, the range of analyzable patients too narrow.

Freud himself soon came under fire. His self-analysis did not free him of his neurosis: He remained conflicted in his relationship to women and to his Jewish roots; he was autocratic and authoritarian with his peers and disciples; and one critic even accused him lately of being intellectually dishonest. Yet all these criticisms are really irrelevant to the issue. Theoretically at least, a body of knowledge can be valid even when its originator has personal shortcomings. Not many dared to say flatly that Freud was basically wrong, even though he made a monumental contribution to our knowledge by elaborating the existence of the unconscious. And those who did dare to say that he was wrong, such as Thomas Szasz and Jeffrey Masson, have brought so much venom and personal invective into their discussions that serious people had to discount much of what they had to say. Besides, it is much easier to reject Freud's basic assumptions than to come up with an altogether different explanation that is right.

In the absence of another theory of human motivation and behavior, psychotherapists had no choice but to fall back upon Freud's theories. Since these did not fit the reality of human suffering, patients were generally left feeling a little better, but unhealed. Their depression continued to plague them and they often complained that much hope and a great deal of their resources were invested in a futile attempt to find a cure. Millions of disappointed ex-patients have eventually spread the word that psychoanalysis and psychotherapy do not have the promised answers, and the number of those seeking more than short-term relief has finally declined.

The biologic approaches to the treatment of emotional disorders have also proven themselves disappointing. For a couple of decades they were touted as the answer, but no one, ever, was healed this way. The symptoms were brought under control but the pernicious and malignant illness continued to fester underneath, as always. In spite of many claims, neither twin studies nor blood analysis has discovered the hidden biologic error that supposedly was to explain schizophrenia, and nothing new explains the neuroses. So, fads

sprouted up from time to time. Billions of dollars and much good will and talent were spent on the Community Mental Health movement, cynically heaping pain and suffering upon hundred of thousands now wandering homelessly on our streets. In our scientific meetings we learnedly rehash old material, earnestly discuss the rights of patients, decide by majority vote that homosexuality is no longer an illness, refine our understanding of borderline personality organization and other diagnostic classifications, and split hairs on some obscure point in Kohut's theories. There really hasn't been very much new in our field for years, although many honest, hard-working, and conscientious practioners did their best to find better solutions to these vexing problems of mental illness.

Much of the "treatment" available these days is nothing but first-aid, valuable in saving lives but not in fixing them. Therapists counsel, empathize, manage crises and stress, give advice, open snarled communications, support, administer medications, and hospitalize-but in general they overlook the psyche, the inner life of the patient. The hidden panic and the enormous pools of hurt and rage that hold so many people prisoner for life are generally neither seen nor treated. Very little real psychotherapy is being practiced, although millions of patients are being seen by approximately 140,000 "therapists" in the United States alone in any one year. This, more or less, is the situation today. This is how we are entering the crossroads from the past.

So why the optimism about the future? Because an altogether new psychotherapy is beginning to emerge. The basic assumptions about human nature are altogether different here from those we hold in the past: We are not rational but irrational beings, capable of rationality. In general, we follow our hearts, not our brains; we remain in the grip of feelings for most of our lives, unless freed from this tyranny by good psychotherapy. A vague but powerful sense of impending doom in the fact of the unknown is everyone's first experience after birth, always completely out of consciousness. This irrational fear must be eliminated, or at least markedly reduced, to cure depression. Our thinking is grossly skewed and distorted by our fears, and much of what we say are no more than rationalizations so we can continue to appear as thoughtful; we try to save face. We "choose" careers and mates, friends and philosophies, lifestyles and values essentially to minimize our irrational fear. Whatever we "choose" we hold on to with great tenacity and we fight change with much ferocity, not out of conviction but because we are afraid to let go of that which helped us survive. "The push away from fear or dread supersedes everything." (Bar-Levay, 1988, p.324)

The preceding quotation comes from my recently published book, *Thinking in the Shadow of Feelings: A New Understanding of the Hidden Forces that Shape Individuals and Societies.* Chapter 8 of this book is a unified theory of general human motivation and behavior, and it consists of 99 points. The following three paragraphs come from the introduction to the theory:

According to Einstein's general theory of relativity, space is not three-dimensional and time is not a separate entity; both form a four-dimensional "space-time." Mass is nothing but a form of energy stored in the resting object. Gravity curves both time and space. Such difficult concepts stretch our imagination. Ordinary language and knowledge derived from direct personal experiences had to be transcended.

This caused an unsettling revolution in our understanding not only of the universe but of ourselves. We had to give up Euclidean geometry and mechanistic Newtonian physics, and with them some of our smugness that we had a "solid" understanding of everything. The same is even more true as we consider a new theory of human motivation and functioning.

Is it not likely that in the psychological realm, as in the physical one, a single key exists that can unlock the mysteries of all the strange and divergent behavioral phenomena of our species? It is, in fact, much easier to imagine one basic motive uniting the seemingly unrelated and complex behaviors of Man than it was to conceptualize the unity envisioned by Einstein.

This chapter in an attempt to elucidate such a theory. In its light, every human act should make sense. It will have to be modified, or its claim to be a general theory will have to be dropped, until it is capable of explaining all aspects of Man's behavior. The fact that full verification may not be immediately possible does not invalidate it, however. Acceptable proof must be marshaled, but this may require some time if the instruments needed for validation do not yet exist. Careful scrutiny by many independent and objective observers will determine the eventual worth of this effort. (p. 322)

It follows from this new theory that the task of psychotherapists is also quite different from that in the past. Listening, understanding, and being empathetic are all very important; but interpretations, reconstructions, and insight do not have the power to reverse the physiologic processes of the body. Yet the illness resides in these, not in the cortex. Psychotherapy must be conducted in a setting in which patients experience themselves subjectively as safe enough, and within a framework that in reality is safe enough to experience and to express any wishes, yearnings, and emotions with the greatest intensity Here powerful storms of preverbal hunger and rage will repeatedly buffet themselves against a firm and unyielding framework of reality. This eventually causes the physiologic reactions to perceived fear, hurt, and anger to basically change, which is how depression is lifted.

Irrational fear, the most powerful of all feelings, tenses our body as it distorts our thinking. It causes people to cower in the absence of actual danger, to perpetually please and appearse or to be rebellious without cause in the present. As grownups we have the power of understanding and of observing such reactions within ourselves, and the close juxtaposition of experience with its meaning and roots is the essence of the therapeutic process.

Gaining insight without powerful physical experiences that involve the body's physiology is merely an intellectually interesting exercise. Direct work with the body without a continuing, very close relationship with a therapist merely provides an opportunity for catharsis. The two have to go hand-in-hand. The "pull of regression" and the "push against progressing" can both be overcome then, and emotional maturation can occur. The effort to individuate requires much work over time, but when successful it changes one's

self-image in basic ways, and so do the relationships to oneself and to others. Competence and true freedom to choose are gained in the process, as irrational fear eventually relinquishes its hold on the person.

I write all this with very mixed emotions. To strike out such a huge claim is not only immodest but outright brash, and it may well appear to many as plan chutzpa. Both sadness and fear are richly mingled therefore with my sense of joy at having written and published my book, and at seeing what I see. I know that I have set myself up not only for praise but also for attack, justified or not. So I hasten to add that I have not discovered the whole truth, and that many modifications and changes in the theory will surely be needed as our understanding increases with time. But this is a new beginning. "Man must (indeed) light for man the fires no other can." I am helped in doing so by the realization that it is not for self-promotion that I advance these new ideas. Not a week passes by without someone in despair seeking my help. Man of these troubled people have been in therapy of some sort for years, finding a little solace perhaps, but no cure.

The suffering of millions everywhere is so great that I really have no choice but to advance ideas that I believe can help. And the fact that I have always had a long waiting list of patients eager to be seen confirms my belief in this new instrument; it is well calibrated and therefore helpful to others. I do not ask the question, "Where are the patients?" and have not asked it ever since the first few months of my practice. The future of psychotherapy looks hopeful to me.

We may finally be able to do successfully what we have failed to do in the past: to actually reverse the malignant process of depression. For those lingering in endless pain, this may well be long-awaited good tidings. And it also holds a promise for us therapist; that our conscientious hard work will finally be rewarded in proportion to our efforts.

## REFERENCE

Bar-Levav, R. (1988). Thinking in the shadow of feelings: A new understanding of the hidden forces that shape individuals and societies. New York: Simon and Schuster.