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The pluralistic nature of the field of psychotherapy: A response to Al Mahrer

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ABSTRACT

Although examination of our personal beliefs about human nature as well as psychotherapeutic practice is important, Dr. Mahrer's argument that the field lacks foundational beliefs was based on a few erroneous assumptions about the nature of the field of psychotherapy and a misleading parallelism between natural science and therapeutic science. Complete agreement about foundational beliefs is not desirable or even necessary for the field of psychotherapy because the nature of the enterprise of psychotherapy is always pluralistic. A common mistake made in criticizing the field of psychotherapy as a flawed science comes from the presumption of positivist science as an ideal model for any scientific inquiry.

Key Words: Philosophy of science, Psychotherapeutic practice, Psychotherapy integration.

Doctor Mahrer brings to our attention an important question concerning the foundation of our field. He has added his to a growing voice expressing the view that the field is disorganized at a very fundamental level (e.g., Soldz & McCullough, 1998). This type of criticism is often made on psychotherapy as well as in other areas of psychology (e.g., Staats, 1981). He then proposes a listing of potentially agreed-upon beliefs, encouraging us to add to it by articulating our own.

Prof. Mahrer's invitation to examine our own personal beliefs about psychotherapy and human functioning was timely. This type of reflective stance is important in the era of eclectic therapy. It is reported that 72% of psychotherapists are eclectic in orientation (Jensen,

Bergin, & Greaves, 1990). The majority of therapists pragmatically select techniques taken from different therapies that they judge suitable to a particular client or for dealing with a particular problem. The mixing of therapeutic techniques may be ill advised when techniques are taken from theories which have different views about human functioning, personality development, and the process of psychotherapy when efforts to resolve discrepancies between different approaches are not made. By articulating and examining one's foundational beliefs and the components of one's eclectic, personal theory of psychotherapy, therapists can examine and review their theoretical grounds for clinical practice. Such an examination of the personal beliefs of the therapist is also advisable

for improving multicultural competency. Our personal values come into play in all counseling situations, but conspicuously so when a client is from a different culture. This reflective exercise is helpful in increasing awareness of one's own values and biases and is particularly suitable as a component of training for multicultural counseling.

I found, however, that Dr. Mahrer's argument concerning the field's lack of foundational beliefs was based on a few erroneous assumptions about the nature of the field of psychotherapy, as well as a misleading parallelism between natural science and therapeutic science. Complete agreement about foundational beliefs is not desirable or even necessary for the field. A lack of foundational beliefs is not a sign of a weakness. Furthermore, his initial list of foundational beliefs is inadequate as a starting point for an examination of, or a potential integration of, foundational beliefs. In the following, I will discuss these two points in detail.

Assumptions about the nature of therapeutic science

Dr. Mahrer points out that basic foundational truths or foundational beliefs are propositions that include "propositions that have survived sufficient logical and research scrutiny to qualify as laws such as the law of gravity or the law of effect." He illustrates this using a simple mathematical notation, " $3+2=5$." He then laments that although many practitioners presumed that these accepted foundational beliefs existed, he "could not find it." He found "pieces and bits, fragments here and there" but "the lists were almost always incomplete, unofficial, not representative of the field as a whole," and "they seemed inconsistent and contradictory with one another." He suggested his surprise soon evolved into the realization of "what seemed a rather serious problem." Dr. Mahrer, thus, considers that the field of psy-

chotherapy lacks agreed-upon foundational laws such as those found in natural sciences and that this poses a serious problem for the field of psychotherapy. However, his opinion comes from a misconception of "therapeutic science" or the nature of the field of psychotherapy.

In psychotherapy, foundational beliefs are not universal, unchanging truths about human nature, but rather philosophical and personal positions and assumptions about reality, human nature, and psychological change (Messer, 1992). Different theoretical groups represent fundamentally different ways of observing, categorizing, and giving meaning to human behavior (Koch, 1981). Since they are different ways of thinking, they are mutually exclusive: as a result, they contradict and disagree with one another. This is clearly seen in Mahrer's statements about his experiential psychotherapy. For example, #25 expresses his preferred assumption of human beings, "In the experiential system, human beings are most usefully understood and described as experiencing entities." This statement does not involve "propositions that have survived sufficient logical and research scrutiny to qualify as laws such as the law of gravity or the law of effect." What is different from another one he raised as a presumably cognitive view ("human beings are essentially information processing biological organisms") is not at the *level* of "validity (which one is more true or correct?)," but the *way* of thinking (how do I conceptualize it?). It is simply an expression of his personal view, however legitimate it is in his own approach. Messer and Winokur (1980) point out that theories of psychotherapy vastly differ at the level of metatheory of belief structure because there is no set of rules based on which rational agreement can be reached. Theories of psychotherapy are more concerned with values than with truth at the level of foundational beliefs. In sum, the foundational beliefs in psychotherapy represent not truths about human beings so much as the variety of different views. Therefore,

to compare the field to the natural sciences as Dr. Mahrer does reflect a fundamental misconception about the nature and basis of therapeutic science.

It must be noted that his lament about lack of foundational beliefs ("disorganized, fragmented, incomplete, and contradictory") also calls for a unification of the field through the discovery of a set of common beliefs. Dr. Mahrer is eager to see the field as a whole as if there is a single paradigm under which the majority of, if not all, psychotherapists can be bound. His attempt to compare and contrast psychotherapy with natural science (at least through the difference in foundational beliefs) unwittingly makes misleading assumptions. First, as I described above, it presumes that the field of psychotherapy is comparable to the natural sciences. Second, by pointing out the lack of universal laws, he depicts an ideal state for the field, one which is similar to the natural sciences where principles or laws are universally applicable with one major paradigm. In reconsidering the basis of the field, Mahrer relied solely on the ideal image of positivist science, characterizing the current state of the discipline as a "serious problem" and as having a "lack of coherence." It is paradoxical that although Mahrer emphasizes the importance of studying the foundational beliefs of our discipline, he loses sight of how his own unstated assumptions have determined the overall picture of what the field should be. By superimposing this ideal picture of natural science on the field of psychotherapy, Mahrer has, perhaps unwittingly, placed himself within the logical positivist tradition. He presumes that a unified field is superior and more desirable. In turn, he gives a negative connotation to differences that exist between theoretical schools of psychotherapy. This is ironic especially because Mahrer's conception of psychotherapy does not reflect his own ideals. #1 and #2 of his own list of beliefs negates the role of empirical research by saying "research plays a minor role" in the accumulation of our

knowledge and the development of theoretical approaches. He admires or at least takes as an ideal the model of the physical sciences in which universal laws are found from which, in turn, all other principles are derived. As a consequence, the field forms a coherent whole in which all competing groups or schools of researchers are working toward a larger, shared goal in a coordinated manner. Mahrer is moving between two opposite poles in his argument due to the ideal picture of the field that he implicitly imposes: on the one hand, he admires and suggests physical science as an ideal model in which universal laws are found and unity of the field is achieved. On the other, he claims that psychotherapy is not a natural science. But why does the lack of an organization akin to those of the natural science immediately constitute a problem? Why does the co-existence of diversity of theoretical schools puzzle or dismay us?

This self-contradiction derives partially from a widely held view about the primacy of natural science over other fields of inquiry. We often assume that positivist science, in which objectivity of measurement and experimental control are possible, is the highest and most superior form of scientific inquiry. This tendency is observed in the writing of prominent philosophers of science. As a result, we call psychology and especially applied psychology such as clinical and counseling psychology a "soft-science (Meehl, 1978)" and "preparadigmatic (Kuhn, 1970)." Soft/hard implies that one is more "real" and "reliable" than the other. Preparadigmatic presumes an "antiquated" or "pre-modern" organization of the field. In other words, these descriptives regard a pluralistic or multi-cultural field as inferior to a unified field. It is unfortunate that Mahrer as well as many great thinkers attempt to force an identical framework upon the field when psychotherapy is clearly not a natural science, as these great thinkers themselves admit.

Kuhn demonstrated that even natural science does not always involve a single theory, but

rather competing ones. He also pointed out that the emergence of a scientific paradigm does not derive from the discovery of the most effective and "close-to-truth" theories and models but often for political and ideological reasons instead (1970). The ideal of logical positivism might just disclose more about our image of science than the actuality of scientific practice.

Many react to the multiple, pluralistic nature of the field and label it as a "problem." The profusion of theoretical schools is considered a "threat" to the field rather than a possible key to its progress or development. However, does pluralistic society itself create a problem? Is multiculturalism itself a problem?

Koch (1981) asserted that psychology is not a unified field. It never was and to become so may not even be desirable. Royce (1980) similarly argues that psychology is multimethodological, multiparadigmatic, multisystemic, and multidisciplinary, having a multiple worldview. Psychology is conceptually pluralistic and, therefore, a philosophy of psychology cannot be integrated into a larger whole. What concerns Koch is not the pluralistic nature of psychological studies but the emergence of any single paradigm that preempts alternative conceptualization of human beings and reality, because determining precisely our "ultimate worth, potential meaning, our essence" is not a goal of psychological science. What if we had a single paradigm? Would that truly be preferable?

Earlier in this century, psychoanalysis dominated the field of psychotherapy. There were no humanistic or cognitive therapies. There were not as many alternatives to psychoanalysis as there are now. Even within psychoanalysis, there was less variation. However, having one dominant foundational belief does not necessarily produce a healthy or even desirable state of the field. It only means that there is a dominant paradigm that inhibits dissent and change.

What if there was only one avenue for change? What if there was only one system of philosophical thought with which psychotherapy

had to comply? Such a condition is certainly not desirable. We know that no two persons follow the same path of change. The personality traits of both therapists and clients influence the process of psychotherapy. Religious and cultural values are diverse and these values also need to be accommodated. Finally, psychotherapy is also used for personal growth, which takes various forms. Safran and Messer (1997) assert that multiple, contradictory theories and beliefs are necessary to capture different aspects of the underlying psychological phenomena. They do not necessarily pose a problem, but may provide us with an opportunity for open dialogue. An open discussion of differences and similarities of views leads to a broadening and elaborating of two or more perspectives in comparison. Such a critical analysis of difference and similarity is one of the effective methods of making use of the diversity of theoretical views. In sum, disagreement at the level of foundational beliefs does not necessarily constitute a problem. Rather, it can enhance the understanding of psychological phenomena. For example, a cognitive view on depression illuminates negative thinking and beliefs as well as behavioral patterns associated with depressive symptoms. Deepening our understanding of the process of human change is more important than simply defending our existing worldviews.

The initial list of foundational beliefs

Another problem with Dr. Mahrer's attempt to find the common foundational beliefs of the field of psychotherapy is the initial list of foundational beliefs from which we are to examine our personal beliefs. The list includes what his research group perceives to be "basic propositions, fundamental starting points, the cornerstones on which the field rests, the ideas that are generally taken for granted as fundamental givens or truths." What I see is grossly simplistic positions that are chosen to

emphasize the difference between theoretical groups and to affirm the beliefs of his experiential therapy.

Given that the purpose of his provisional list is not to provide a comprehensive list, it is understandable that his attempt is partial. However, it is misleading to present only the beliefs of outdated systems of psychotherapy such as the classic behavior therapy of orthodox psychoanalysis, while ignoring the recent developments in the field. It only communicates the impression that therapy schools are all at war with each other. More recent developments include the integration of different theories, such as psychoanalysis and behavioral therapy (Wachtel, 1977), gestalt therapy and cognitive information processing (Greenberg, Rice, & Elliott, 1993), cognitive therapy, experiential therapy, and interpersonal psychodynamic therapies (Safran & Segal, 1990), to mention but a few. These theorists made creative attempts to connect theories of different philosophical orientations, while maintaining the internal coherence of their own systems. These attempts indicate that theories are not always contradictory; indeed, they can converge depending on the perspective taken. Mahrer's list, on the other hand, emphasizes differences without any attempt to find similarities between schools. The choice is made to select the most "orthodox view."

In sum, his list does not serve the more productive purpose of examining our often-implicit beliefs and searching for similarities and overlaps. It takes us away from potential overlaps and commonalities found in new developments in the field. If another tradition is presented this way, it will not stimulate new or critical thinking; instead, it simply serves as a rhetorical device for him to present his own experiential approach. Dr. Mahrer's list, although he laments the disparity of the field, sets a course for us to find yet more disagreement and discrepancies.

Conclusion

The field of psychotherapy is pluralistic in nature. A lack of a single grand paradigm does not mean that the field of psychotherapy is chaotic and dysfunctioning. Psychotherapists need to wholeheartedly accept the multi-faceted nature of psychotherapy and build the field accordingly, rather than imposing the ideal of a singular grand paradigm of positivist science. This may be a more difficult task than raising an ideal of positivist science, which we are more accustomed to. Discrepancies and disparity at the level of foundational beliefs does not discredit our enterprise. It is important that psychotherapists start to envision the ideal state of pluralism rather than criticizing the field for its deviation from positivist norms.

Disparity and discrepancy are emphasized more strongly when difference is examined at the level of philosophical foundations. However, at the level of change process, various modes of psychotherapy might just reveal far more commonalities. Researchers have found that different therapies may be quite similar at the level of therapeutic strategy or of certain therapeutic tasks (Goldfried, 1980). This type of change process research has uncovered common effective therapeutic process across different orientations (e.g., Safran & Muran, 1994). Psychotherapy, though it involves theories with different and contradictory beliefs, may employ similar patterns of change process.

Dr. Mahrer's paper encouraged me to reconsider the basis of our practice. His effort to review his own personal beliefs is certainly admirable, especially because he is a highly accomplished psychologist. I regard this self-reflective stance as extremely important in a field where a variety of conflicting groups co-exist. I would like to thank Prof. Mahrer for bringing this fundamental issue to our attention.

References

- Goldfried, M. R. (1980). Toward delineation of therapeutic change principles. *American Psychologist*, *35*, 991-999.
- Greenberg, L. S., Rice, L. N., & Elliott, R. (1993). *Facilitating emotional change: The moment-by-moment process*. New York: Guilford.
- Jensen, J. P., Bergin, A. E., & Greaves, D. W. (1990). The meaning of eclecticism: New survey and analysis of components. *Professional Psychology*, *21*, 124-130.
- Koch, S. (1981). The nature and limits of psychological knowledge: Lessons of a century qua "science." *American Psychologist*, *36*, 257-269.
- Kuhn, T. S. (1970). *The structure of scientific revolutions*. Chicago: University of Chicago Press.
- Meehl, P. L. (1978). Theoretical risks and tabular asterisks: Sir Karl, Sir Ronald, and the slow progress of soft psychology. *Journal of Consulting and Clinical Psychology*, *46*, 806-834.
- Messer, S. B. (1992). A critical examination of belief structures in integrative and eclectic psychotherapy. In J. C. Norcross & M. R. Goldfried (Eds.), *Handbook of psychotherapy integration* (pp. 130-165). New York: Basic Books.
- Messer, S. B., & Winokur, M. (1980). Some limits to the integration of psychoanalytic therapy and behavior therapy. *American Psychologist*, *35*, 818-827.
- Royce, J. R. (1980). Philosophical issues, Division 24, and the future. *American Psychologist*, *37*, 258-266.
- Safran, J. D., & Messer, S. B. (1997). Psychotherapy integration: A postmodern critique. *Clinical Psychology: Science and Practice*, *4*, 140-152.
- Safran, J. D., & Muran, J. C. (1994). Toward a working alliance between research and practice. In P. F. Talley, H. H. Strupp, & J. F. Butler (Eds.), *Psychotherapy research and practice* (pp. 206-226). New York: Basic Books.
- Safran, J. D., & Segal, Z. V. (1990). *Interpersonal process in cognitive therapy*. New York: Basic Books.
- Soldz, S., & McCullough, L. (1998). *Reconciling empirical knowledge and clinical experience: The art and science of psychotherapy*. Washington, DC: American Psychological Association.
- Staats, A. W. (1981). Paradigmatic behaviorism, unified theory, unified theory construction methods, and the Zeitgeist of separation. *American Psychologist*, *36*, 239-256.
- Wachtel, P. (1977). *Psychoanalysis and behavior therapy*. New York: Basic Books.