

SOME ACHILLES HEELS

Of Psychological Theories and Psychologists.

To begin on a general note. When Joe Wheelwright was being analysed by Carl Jung, after about 3 or 4 sessions, Jung suddenly asked him "Are you in the right place?" Wheelwright, nervously and humbly, apologized for his presence and said he would leave. Jung stopped him and explained. That there were in Europe, at that time, himself and Adler and Freud (and many others too, but at that time most importantly these three). All psychotherapists, with very different theories and techniques. The thing was that if any one of the three had a monopoly of truth, the other two would surely go out of business. But this didn't happen – they were all doing good business. So there must be value in all of their theories – there were Freud's people, his own people and so on- more or less. He had just wanted to know if Wheelwright thought that he was with the right therapist, with an appropriate value system, view of the psyche and so on.

To develop this theme, it is perfectly obvious that those theories of the psyche and those approaches to psychotherapy that survive for more than – let's say – a decade or so, must contain insights of value – a piece or so of the incredibly complex jigsaw that is the human psyche. Thus, for example, behaviourist theory and behaviour modification, with its view of the human as a programmable automaton, horrify many: Freud's affirmation that all mental illness is caused by unconscious sexual forces and his use of the couch horrify and/or amuse many others. But behaviourism and psychoanalysis dominated psychological theory and practice for several decades in the twentieth century and still have many adherents today. Each reveals something about human nature and each can be the therapy of choice for a certain percentage of people – maybe 15%? (just my guess, based on observation)

There are two forces at work here. The first, and most obvious, is that the human mind and human behaviour are too complex to be fitted into any simple theory. And all psychological theories, seen in this light, are pretty simple. The second is that all psychological theories (despite the denials of "purely scientific" psychologists) are projections from the mind of the theorist. As Joe Wheelwright again said: "They have to be, because we can only truly know ourselves". The theories reflect the personalities of the theorists. If you're not sure about this, read the lives of some of the important psychological theorists. Skinner's buzzer-regulated last years, for example (when asked if he was happy, he replied that naturally he engaged in those activities that were most reinforcing) and the 'baby tender' in which he brought up his children. Or Freud's sexual peccadilloes (including, almost certainly an affair with his sister-in-law) and likely Oedipus complex.

And note that, according to Freudian theory, projection is an unconscious process, at least in large part. If this is so, then even those psychological theorists who are consciously aware of a connection between their personalities

and their theories (vide Jung, as above and Alfred Adler who realised that his theories were based upon his own childhood feelings of weakness – see the file on the Post-Freudians), will still be strongly and unconsciously drawn towards their theories and defend them against all others/all rival theorists. They will 'love' only their own developing theories. There is a good description of how Jung quite ferociously defended his theories in Deirdre Bair's biography. Jung (until his old age), Adler and Freud, despite being consciously aware of the virtue of other theories, all reacted at time as if any attack on their theories was an attack on their own person.

So, the first Achilles heel, that applies really to all major psychological theorists, is a tendency to have blind faith in one's theory and to think that it can be applied to all humans and/or in all situations.

And, of course, the first Achilles heel of most schools of psychology, even when the founder had died, is to 'sanctify' the great man or woman's theories, often in a simplified or altered, and more dogmatic form (see also below).

More specifically, let's start by looking at some of the Achilles heels of Jungian Psychology today, about which I know a little. These are strongly influenced by Jung's social circumstances and position.

Jungian (Analytical) Psychology

In summary, the most obvious Achilles heels here are Elitism, control by a hidden Power Drive, neglect of Social Drives and Relatedness and an over-concentration on the importance of Religious Drives.

Elitism

Is a trap for all forms of psychology, especially where membership of an 'inner group' involves 'rites of passage' through analysis or examination. Becoming a Jungian analyst, for example, requires 2-300 such hours and all sorts of other hurdles (including a great deal of money). And the various organizations for analysts are very exclusive, even litigious as they defend what they regard as 'their' territory. For example, a few years ago, when the Department of Psychology at an Adelaide university created a graduate diploma in Analytical Psychology (which, as qualified psychologists, they had every right to do) the reaction of the Australian analysts was not to offer help or support, but to write directly (to complain) to the Vice-Chancellor of the University. They were afraid that their monopoly as Jungian therapists was under threat. Rather than offering help – which would have been much valued – they tried to block an attempt by the university to raise the local level of understanding of Jung's life and ideas.

I have often felt (especially after a meeting of a Jungian organisation) that many Jungians believe that 'Jungian Knowledge' is some sort of pillar of light, ever

ascending to a divine realm, to which only the 'favoured ones' have access. The parallels with religious behaviour are obvious.

A Hidden Power Drive (The therapists Shadow)

The elitism described above is closely connected with a drive or drives for power. The very assumption of a therapist/healer role in life – no matter how well-intentioned – inevitably leads to a power imbalance between therapist (all-knowing and balanced perhaps) and the needy client or patient.

Adolf Guggenbuhl-Craig has considered this problem in some detail in his marvelous book *Power in the Helping Professions*. I recommend this book to anyone who is interested.

He gives his opinion on the hidden (shadow) drives of social workers, psychologists, psychiatrists and others. All those 'helpers' who on the surface want only to help. But who somehow work their way to become powerful figures, superior in some way or other to their 'patients'.

Among others, two hidden, powerful figures may in the background/shadow of (maybe especially Jungian) therapists. The charlatan and the false prophet. The charlatan, consciously or unconsciously, takes advantage of gullible clients and makes money claiming knowledge or ability that they don't have, or has only at a surface level: confidence trickster might be a better name. The false prophet may be a therapist who 'preaches' a doctrine that they don't really believe in, or perhaps have never really understood. It's difficult to believe that there is a long-time therapist who hasn't fallen into these traps at times. Not to mention politicians! This is discussed further under Religious Drives.

Neglect of Social Drives

Jung was very much a promoter of the idea that most or all important changes in our culture are, in the first instance, due to the activity of individuals. Marie-Louise von Franz, perhaps Jung's closest assistant in his later years has written very strongly to this effect in a number of books. Nothing, it seems, can come from the collective: all new advances come from the individual psyche.

Inevitably, the result is a striking absence of group work and discussion of social interrelatedness in Jungian circles. Perhaps the most striking example of this was when Adolph Guggenbuhl-Craig introduced courses about group work into the Zurich C.G. Jung Institut. Von Franz withdrew from the institute! Setting up her own 'purer' training faculty. A compromise of sorts was reached. Group psychology courses remained: but only theoretical ones – there were no practical classes. And von Franz never returned.

To say the least, the lack of group work must be an enormous hindrance to the popularization of Jung's ideas. Of which, an example might be the statement by an Adelaide analyst that "any group that has more than ten members has failed".

Over-concentration on the importance of Religious Drives.

Jung himself was brought up in an era when a belief in what he was later to call “the Christian myth” was an important part of the life of society. He wrote extensively about the decline of this “myth” and how it could be given new life. And he recognized a spiritual emptiness in many of his clients and their need for a religious approach to life or, at least, a sense of meaning and purpose. As a result Jung, and many Jungians (but with many exceptions, including many of the London branch of Analytic Psychology) especially encourage spiritual growth and the search for meaning in their clients. This gives Jungian analysis a special place in psychotherapy.

As a result, though, there is a tendency among some Jungians to think that Jung’s only important contribution to psychology was his emphasis on the importance of a ‘religious’ attitude to life. And Jung was much more than that (see the other files on this website). Jung himself was not a Christian in the conventional sense. He was not a church goer, for example and did not encourage his family to go to church or Sunday School, and so on. His attitude, for me, is summed up in a letter to his friend Father Victor White. Note that Jung was now in his sixties.

Carl Jung to Victor White. 21.5.1948

Your paper has made me think: *Have I faith or a faith or not?* I have always been unable to produce faith and I have tried so hard, that I finally did not know any more, what faith is or means. I owe it to your paper that I have now apparently an answer: faith or the equivalent of faith with me is what I would call Respect. I have respect of the Christian Truth.....This is the nearest I can get to what appears to me as “faith”. There is however nothing specific in it, since I feel the same kind of respect for the basic teachings of Buddhism and the fundamental taoistic ideas.

Other Approaches to Psychology (in very brief)

The Biomedical Perspective

Over-reliance on physical treatments (e.g. ECT, major tranquillizers). Unbalanced therapist-patient relationships. Mistaking the relief of symptoms for a ‘cure’.

Biological/Physiological Psychology

A lack of a specific philosophy beyond empiricism, reductionism and the worship of ‘objectivity’.

Traditional Psychoanalysis

The need to relate everything to sex and perhaps aggression. The inability to challenge the master's original ideas. Lack of a strong theory of mental health.

Post-Freudian Psychoanalysis

The never-ending attempt to relate so many interesting findings to Freud's original ideas may continue. More gloomy views of childhood (sometimes to the point of absurdity).

Individual (Adlerian) Psychology

Real "narcissistic" needs can be ignored. Neglect of unusual and individualistic orientations.

Behaviourism

The inability to explain (or even consider) most important attributes of the human mind: consciousness, love, free will and a host of others. Arguably, contempt for our species: certainly disparagement.

Cognitivism

Over-reliance on concepts originally derived from behaviourism. Ignoring all but thoughts as human mental processes.

Gestalt Psychology

The danger of de-compensation for some clients.

Humanism

A tendency to ignore the reality of human evil. Love is all we need to the nth degree.

Existentialism

Too confrontative for many clients – especially the unstable. The determination to tell clients that they are all alone and that their lives are meaningless.

Academic Psychology

Over reliance on the American behavioural tradition. A tendency to teach outdated, sometimes silly, bits of research. A lack of real academic vigour. A lack of clinical training.