

A BRIEF NOTE ON CONTEMPORARY PSYCHOLOGY

Running Head: Contemporary Psychology.

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ABSTRACT

In this brief note, which is far from exhaustive and systematic, I examine contemporary Western psychology [and psychiatry]. Psychology grew out of the need to come to terms with the disorientation and suffering of the Modern and now Post-Modern psyches. Outside of Jung's psychology of individuation, and presently some transpersonal psychologies, the Western solution for psychological self-realization consists of a wide array of approaches that do not include spiritual realization. I differentiate Jung's, Freud's and Adler's approach to psychology. I then give a cursory examination of Arthur Janov, Rollo May, and Cognitive Behavioural psychology, as well as the psychology of couples therapy promoted by Harville Hendrix and John and Julie Gotman. I also briefly discuss the schools of antipsychiatry of R. D. Lang and the approach taken by Stanislav Grof for treating severe psychiatric disorders.

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This brief note on contemporary psychology is anything but exhaustive. For one thing there is no discussion about the different areas of practice of psychology although, for the sake of interest, I have attached a list [Appendix]. More to the point of the essay itself, in its emphasis, the reader may wish to note that it reflects my personal bias and interest in Jung and his approach to psychology. I consequently make no attempt to systematically examine the many different major schools of psychology in existence today.

Contemporary psychology grew out of the need to answer to the subjective requirement of the individually and humanly oriented Western psyche to come to terms with its disorientation and suffering in the contemporary world. Characteristic of the West, the solution for psychological self-realization, with some exception, does not include spiritual realization but rather a multiple array of psychological approaches to mend the beleaguered modern and post-modern mind. Without considering the more recent development of transpersonal approaches to psychology, the most important exception to the trends in Western psychology lies with Jung and his discovery of the individuation process and what he refers to as *yoga* for the West. Not only does his psychology include the inclination of the modern mind, both Eastern and Western, for human realization, but it recognizes that the most complete human development requires the central glue and transformational ingredient of the Self, the psychic being and the Atman.

Western psychology began with Sigmund Freud and his discoveries of the personal unconscious. Although in the beginning Freud's Psychoanalytic Theory was reductive, and motivation was considered to be either based on repressed sexual libido and the oedipal complex [consolidated at age 5] , or self-preservation as governed by the ego instincts, he later deepened his thinking to find meaning in the complex interplay of the life and death instincts. He also eventually acknowledged a primal state of well-being he referred to as oceanic feeling.

Contemporary disciples of Freud, post-Freudians, are making a significant contribution to psychopathology by working on pre-oedipal issues and the child's constructed perception of the world. Melanie Klein, for instance, emphasizes splitting, which means the separation of good [benign] and bad [destructive, frightening] impulses and images in the mind of the child, as a causal factor in disturbing the infant's sense of self, which, however, can later be reversed, first by integrating the destructive impulses and experiencing the mother as a whole albeit fallible person, and later by way of developing empathy. Heinz Kohut understands psychopathology to be a disturbance of the self, with severe disorders, in particular, due to a disturbed mother-child relationship. According to him psychopathology is the result of not being able to transcend the infant's primary narcissism. Healing comes by way of a therapist who is able to offer the suffering individual a field for both self-mirroring and idealization. The most well

known school of therapy in India is that of the post-Freudian cultural psychologist, Sudhir Kakar, who has been particularly influenced by Eric Ericson.

Along with Freud and Jung, another important early psychologist is Alfred Adler, who believes that the main motivational factor in the human psyche and the cause of human psychological suffering is not pleasure, as Freud believes, but power. Although, according to him, there is a need to fulfill the power drive, he emphasizes that a psychologically healthy life requires it to be compensated with social interest. Perversions of personality are, accordingly, the result of a poor balance between these two factors, the will to power and social interest. His approach to psychology is therefore concerned with observing and correcting immature ways of realizing the power drive and insufficient social interest.

Carl Jung's most important contribution to psychology is the discovery of the collective unconscious, which consist of all the archetypes, including the archetype of the Self. The archetypes are in themselves transcendental and represent the fundamental way of apprehending the world and the basic blueprints for action, which are lived through the instincts. Archetypes, in other words are images of the instincts, the seat of which is in the brain stem. Significantly, the archetype is the bridge between the inner world of the individual and the community and its institutions, the microcosm and the macrocosm. Conscious individuation or transformation of individuals by way of a more conscious relationship to the archetypal psyche is, consequently, directly related

to the transformation of community. The Self is the most central archetype and the centre of the psyche itself, whereas the subordinate ego is the center of consciousness. Jung's description of the individuation process and finding one's unique life and sense of self is of paramount relevance and parallels the Mother's view of individualization. Contemporary Jungians typically relate to their clients from the point of view of the individuation process, which can be initiated with successful analysis. In many cases, actual therapy stops short of full individuation as grace and individual destiny is always an important factor. Jungian Therapy often involves healing neurotic behavior including psychopathology, which involves some form of more conscious adaptation to the current culture or sub-culture and its values. Many Jungians acknowledge the contribution of post-Freudians to the understanding of pre-oedipal psychopathology. There are presently a handful of Jungian oriented psychotherapists in India.

Arthur Janov is also making an important contribution to the healing of early trauma, whether it be during pre-birth, birth or immediate post-birth and early life with his Primal Therapy and research on its effect on the developmentally more primal brain, the limbic system and sympathetic nervous system. The goal of this therapy is to connect the working memory of the frontal cortex to the unconscious pain and suffering imprinted in the limbic-brain stem to gain conscious feeling awareness. Cognitive Behavioral Psychology is contributing the scientific observation of psychopathology in various aspects of everyday life and is playing

an important role in ordering it systematically. There are several other schools of psychology, the existential psychology of Rollo May being noteworthy, each of which is making a significant contribution to culture and psychology. In addition, there are several schools specializing in Family Therapy and some in couples relationship therapy as well, perhaps the most interesting being the *imago* therapy of Harville Hendricks. His experience has led him to postulate that we are wounded in early relationships with our parents and that, after the initial romantic period, we continue to live the same wound in our adult marriages and partnerships. We are, however, he believes, potentially healed through relationships and relationships can be the garden to tend for the evolution of our personal consciousness. The work of John and Julie Gotman on couples therapy is also relevant. It is particularly noteworthy that they base their approach on a 25 year study of successful [and unsuccessful] relationships.

Jung also made an important contribution to understanding and healing mild forms of schizophrenia, a task taken up in the United States especially by John Perry. Some post-Jungians now refer to this form of disorientation as *spiritual emergence*, which involves a sudden inrush of archetypal energy with which the individual is overwhelmed, resulting in psychological inflation and psychotic or psychotic-like experiences. Perry was the first to document these inner symbolic states, which include the typical shamanic or hero's [mystic's] inner journey, initially involving dismemberment, chaos and confusion, being lost in the labyrinth and the dark night of the soul, as well as distant travels, ultimately culminating in

being re-constituted with a new center either of iron or a precious stone and, finally, renewal of the King, which refers to renewed consciousness. Therapy involves providing a comfortable space and sympathetic understanding that allows individuals to understand the nature of the archetypal energy that has overwhelmed them and to assimilate it in their lives.

Others influenced by Jung have made considerable contribution to understanding schizophrenia, including Stanislav Grof and R D Laing and his school of antipsychiatry. Laing emphasizes the repressive nature of what he refers to as the *schizoprogenic* or pathologically dysfunctional family which subjects its children to confusing double bind situations, where they can never make a right decision, having the effect of fragmenting their sense of self and personal identity. Grof's research includes intrauterine and early life, where healing comes from experiencing what he refers to as *holotropic* states, attained through his meditative system of *holotropic* breathing or otherwise, along with, like with Perry, understanding the nature of one's archetypal experiences.

For more serious psychosis, whether it be schizophrenia or extreme bipolar disorder, both of which involve considerable chemical imbalance, none of the above therapies are effective and the well-considered administration of psychosomatic drugs is generally required. Sometimes the drug, with its more or less severe side-effects, along with some therapy, allows patients to live a relatively normal life, whereas, if the drug is withdrawn, they revert to their

psychotic condition. At other times, with more serious cases, the individuals' lives are somewhat improved even if not to the point of being what one would consider to be normal. A psychiatrist is required for adequate treatment of these suffering individuals.

Psychiatry and Psychology: Differences and Requirements

In North America, a licensed psychiatrist is someone who has studied medicine for six years and psychiatry for another three years and passed medical board written and oral exams. The study of psychiatry combines about 1-1/2 years of general education in psychology with the scientific study of psychoactive [psychiatric] drugs and their use, as well as an apprenticeship in a mental hospital. Psychiatrists are well trained to carefully monitor the patient's condition as frequently as they deem it to be necessary, including careful observation of any potential side-effects as a result of the use of the psychosomatic drug in question. Education to become a psychiatrist typically does not require any personal therapy.

By way of comparison, education to become a Jungian analytical psychologist requires 3 years of training analysis [personal therapy] and at least 3-5 years post-Masters Degree level education in Jungian psychology, while successfully passing a final written and oral examination. There is likely a similar requirement to become a Freudian psychoanalyst. For other types of therapy, roughly 8 years of psychological education is required to attain a Doctorate in Psychology

and about 5 years to attain a Master's degree. Requirements for personal analysis vary depending on the educational institution; in some cases, there are no requirements at all while, in other cases, there are. To become a registered psychologist, in addition to attaining a PhD in psychology, one must also pass state or provincial Board of Psychology examination at an acceptable level as well as an oral examination. One can become a registered clinical counselor with a Master's Degree in psychology and an acceptable level of attainment in a state or provincial Board of Clinical Counselor written and oral examination.

Common sense dictates that psychological and psychiatric healing professionals co-operate to the extent that clients/patients are able to take optimal advantage of each professional's expertise according to need. In practice this might not be so easily realized as contrasting methods of psychological and psychiatric healing are based on very different assumptions about the nature of the human psyche. It also needs to be taken into consideration that, in some cases, personal culture and self-education have modified individual therapists' approach beyond the assumptions underlying their original professional education and training. Reconciling particular healing methods and theoretical assumptions with the teachings of Sri Aurobindo and the Mother will help meet the challenge of accommodating divergent therapeutic models, as well as being an ideal requirement for practicing as a therapist in the Auroville community. In the final analysis, it is up to clients/patients to choose [a] therapist[s] whom they believe can best fulfill their psychological needs at any given time. An important ethical

standard for therapists is, consequently, to represent themselves honestly and accurately in order to help both community regulation and potential patients/clients to make properly informed choices.

APPENDIX

Contemporary Designations for the Practice of Psychology.

1. Clinical psychology
 - Focus on the individual therapy
 - Focus on couples therapy
 - Focus on family therapy
2. Clinical neuropsychology
3. Counseling psychology
 - Focus on the individual therapy
 - Focus on couples therapy
 - Focus on family therapy
4. Forensic/corrections psychology
5. Health psychology
6. Industrial/organizational psychology
7. Rehabilitation psychology
8. Research/ academic psychology
9. School psychology