
PROGRESS IN

Clinical Psychology

VOLUME III

Edited by

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GRUNE & STRATTON

NEW YORK

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LONDON

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1958

To
Professor Thomas N. Jenkins
Friend and Teacher

Library of Congress Catalog Card No. 52-12980
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Printed and Bound in U.S.A. (B)

Preface

VOLUME III OF *Progress in Clinical Psychology*, like its predecessors, attempts a systematic and critical look at the contemporary scene in clinical psychology, particularly during the past two years. It attempts to integrate this material in a manner of interest and, we hope, of value to all—colleagues and students alike—whose concern is with clinical psychology *as science*.

Editors have to exercise value-judgments both in the choice of topics and areas to be examined and in the consideration of those best qualified to evaluate current trends and present them. We are indebted to the many fine contributors who have accepted our invitation to present their specialities, but we must assume our own responsibility for the choice of topics and the relative emphasis to be accorded each.

It is our hope that this volume may fulfill the promise inherent in clinical psychology at its present state of development by showing not only what is going on in this active science, but what its defects are and what its promises for the future appear to be. To the extent that the present volume meets these hopes it will have justified our efforts.

D. B. AND L. E. A.

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I. INTRODUCTION

Movements of Thought in Clinical Psychology

In the following paper, Dr. Abt looks at the contemporary scene in clinical psychological theory and concludes that there is a clearly discernible movement of ideas that merit attention because they, suggest the future shape of the science as well as describing the theoretical concerns of students. Among the most important points he strives to make is that personality theory cannot risk standing alone and apart from general behavior theory and that there is a continuous cross-conceptual feedback between general psychology and clinical psychology that functions to the advantage of each. Dr. Abt's paper, although intended as a glimpse of the future to be expected in clinical psychology, represents one link in a chain of reasoning that began in his "A Theory of Projective Psychology" and has continued in earlier volumes in this series.

THOUGHTFUL AND PERCEPTIVE students can discern in every developing science certain genuine and significant movements of thought for the systematic examination and evaluation of the diverse data with which the discipline deals. Clinical psychology, in its present state of development, is no exception. It may prove heuristically valuable to inquire briefly into some of the movements of thought that I have come to consider important in a discipline moving into the recurrent crises of a prodigious adolescence.

It is essential to recall that many of the stirrings in clinical psychology reflect currents of thought in the larger body of psychological science. Their particular formulation within clinical psychology may, nevertheless, serve as source and inspiration for the formation of new and different concepts in the parent discipline itself. There is an oscillation between general and clinical psychology that results in cross-conceptual feedback and interaction that, when properly conceptualized, may be referred to as the *sociology of knowledge*. It is hoped that in a modest way the present study may be viewed as a contribution to this area.

Papers in other volumes of *Progress in Clinical Psychology*, with which the present paper is congruent, have dealt with the emergence of clinical psychology as an independent discipline¹ and with the articulation and development of a new field that has striven toward conceptual maturity.² This paper seeks to direct attention toward and to arouse interest in a study of the changing values in the science of clinical psychology that express themselves—now implicitly, now explicitly—as movements of thought or essays at conceptualization of larger and larger units of theory. There is strong ferment in the field of clinical psychology, and in a short paper we can examine only a few dominant ideas or conceptual stirrings that are increasingly shaping the future of the field.

Let us look, necessarily briefly, at the following ideas that are among many that could be usefully considered:

SOME OF THE DOMINANT IDEAS

1. *Personality is viewed not as a self-contained entity but rather as an open system.*

A system may be looked upon as an assemblage of component structures that are concerned with or related to some kind of activity that they direct. Components of a system stand in a certain relationship to each other such that the arrangement or configuration is characteristic and peculiar to a given system. All possible systems can be differentiated on the basis of their being closed or open. Closed systems, as distinct from open ones, are systems that contain energy wholly within themselves and require no outside energy for their maintenance and operation. In rather sharp contrast, open systems need to draw their energy from sources that are always external to themselves.

Since all living organisms are essentially open systems, our interest here is chiefly in such systems. Open systems are those through which flows a continuous stream of energy from the system's environment. Their flow returns to the environment through the system's patterns of interaction with it. Most open systems are able to maintain a dynamic calculus with their surroundings from an energetic point of view, thereby sustaining a condition of ceaseless activity. Although there is usually constant flux within the system, dynamic processes constituting the open system seek to realize and maintain a condition of equilibrium or a state of constancy.

Personality is just such a system. It is open and is in continuous dynamic interaction with its environment, whether considered in the physical or social sense. Energy from the environment flowing through the personality is ceaseless, and the forms of energy transformation within the system are unique to a particular personality and set it apart from other personalities.

As a typical dynamic system, personality seeks to achieve and maintain the state of minimal energy transformation that we have come to call equilibrium or homeostasis. Among all theories of personality, psychoanalysis has provided the most comprehensive and systematic conceptualization of the specific modes of energy transformation and their complex manifestations.

Among the more important formulations of psychoanalysis have been those concerning the defense mechanisms. These have been conceptualized largely to indicate the means by which the ego seeks to transform the energy of threat and anxiety so that it can be mastered and contained. In its basic orientation, psychoanalysis as a therapeutic inquiry is directed, for example, at a systematic, genetic and dynamic evaluation of the major modes of energy transformation and energetic interactions of the personality that occur under pressure of various drives and dispositions. Such an inquiry is ultimately concerned with the dynamic fate of each energy transformation that is characteristic of and unique to a particular personality. This provides the basis for understanding and seeking to modify modes of energy transformation that impair the functional integrity or effectiveness in living of the individual.

Whether one wishes to conceptualize defense mechanisms as the personality's principal means of dealing with anxiety in the search for homeostasis, as psychoanalysis does, or prefers to hypothesize other modes and processes of energy transformation, the *fact* of such strivings by the personality directed toward the achievement and maintenance of equilibrium cannot readily be denied. Apart from that provided by psychoanalysis, it is my belief that the fullest contemporary statement that aims to conceptualize the modes of energy transformation in a thoroughly systematic and rigorous manner is that offered by cybernetics.

The man-made systems of the cyberneticists, with which we associate the names of Weiner,¹³ Pitts,¹¹ McCulloch,⁹ and others, at first blush appear to have little in common with the more familiar open organismic systems, but there are important areas of congruence in their forms of conceptualization in relation, among others, to the following considerations: 1. Both systems are energized by forces that represent *system inputs*, each has an intervening and functioning structure that transforms or simply works upon the inputs, and each produces *outcomes* from system operation that may be referred to as *system outputs*. 2. Both systems are capable of achieving and maintaining something akin to a steady state or constant condition through a reorganization of their dynamic properties in relation to what develop into changing goals and objects. 3. Time is an irreversible parameter in both systems.

Among the differences in the two kinds of system are the following: In the organismic, the source of direction of the system is as clearly intrinsic as it is extrinsic in the man-made systems of the cyberneticists. The modes of energy transformation of the steady states tend also to be different; nevertheless, the fact remains that, from an analogic point of view, the principal conceptualizations of the two systems are remarkably similar.

A persistent problem of the organismic system is how to account for the presence in it of purpose and the central role of purpose in living systems. Using the principles of feedback and circularity, Weiner and his colleagues have formulated a principle of purpose for the man-made systems they have constructed and whose behavior they study. Northrop,¹⁰ in a searching and important study, has provided the philosophical underpinnings affirming the validity of the contentions of these workers with respect to the notion of teleology, by indicating that the positivistic behaviorists and the purposive idealists can both pitch their tents in the same philosophical camp.

Although only the bare beginnings have been made in the cybernetic formulation, and much has to be done before they can be translated from high level theorizing into forms more familiar to the clinical psychologist, there seems little question that this point of view will prove extremely rich in the formulation and design of clinical psychological studies and in the utilization and treatment of clinical data. A large and interesting body of research within this frame of reference has already been undertaken, and the model-making associated with this conceptualization is highly regarded in general systems research in which it appears to serve as an agent of unification.

2. Personality has a social matrix and cannot be understood apart from it.

Following the pioneering work of Mead and Dewey in exploring the "social self" and in formulating its derivations, American social psychology has systematically tended to espouse a social interactional point of view in which it has stressed the open interactive quality of personality. The contemporary social psychological scene is one in which two interacting but independent structures—personality and the social system—are each formulated as fundamental. Which of the two is regarded as the more important is a matter of theoretical persuasion and professional allegiance, but the current view is that one can gain genuine perspective on and understanding of another person chiefly in relation to an appreciation of that individual's social and interpersonal relationships.

The clinical psychologist, therefore, comes to view personality as socially derived as well as socially conditioned, and he sees behavior as the

interactive outcome of one's inner promptings and actional tendencies as these have become related to and functionally dependent upon both the social stimuli and social responses of other persons. From a systematic point of view, the pendulum has swung—and is presently oscillating—between an extreme trait-dominated (and therefore essentially static) conception of behavior and a radical situationism in which the primary datum for study is the social situation or field itself.

Fluctuations in social psychological theory reflect themselves in clinical psychology, particularly in the design of studies and in the treatment of clinical data. But it is clear that clinical psychology need commit itself to neither of the above radical formulations, and this is the current situation. The trait-dominated conception of behavior has resulted in the use of almost 1800 English adjectives that are regarded as descriptive of a person and of his behavior. In ascribing any one or combination of these traits to another person, one implicitly makes the assumption that, if the characterization can be appropriately validated, the individual so described has a certain amount of the substance of which the particular traits are believed to consist. Clinical psychological reports, written in terms of traits, can be only descriptive and not genetic and dynamic in the more familiar sense.

In like manner, the clinical psychological description of a person under study in terms reflective only of the social matrix or field within which the behavior occurs would fail to suggest the dynamic organization and function of that individual's personality considered as one of the sets of interacting variables. Most clinical psychological evaluations, therefore, seek a dynamic synthesis of findings which are considered as arising from personality as a structure with those representing the pattern of interpersonal and social relationships of the individual under consideration. The social psychologist F. H. Allport,³ within a somewhat different frame of reference but with largely the same conclusions, is able to speak of an "inside" and an "outside" view of structure with an insistence that the former has something quite basic about it.

Bales⁴ analysis of "interaction," Coult's⁵ "tinsit," and Sullivan's¹² "interpersonal relation" are all suggestive of the current tendency to favor an outside view of structure and to interpret it as somehow more basic or fundamental than the inside view. In spite of this prevailing tendency within American psychology, I regard it as a readily demonstrable fact that the majority of clinical psychologists in the evaluation of their projective test and therapeutic data incline toward a view that seeks to combine Allport's inner and outer structural conceptions in dynamic and interactive terms.

3. *Clinical psychology is concerned with a study of the person as its basic unit of conceptualization.*

The segmental approach to the study of personality, which has had a long and fruitful tradition in American psychology, has gradually and inevitably led in recent years to an increasingly holistic view which, in clinical psychology especially, has found its fullest expression in regarding the total person as the basic unit for investigation, study, and understanding. To appreciate the conceptual strides represented by this development, one need keep only one historical fact in mind—Dewey's memorable 1896 paper on the reflex arc, which postulated this as the basic unit for psychology. The conceptual tributaries leading to the development of the notion that the person is the unit of investigation in clinical psychology are numerous and diverse, and a consideration of them is well beyond the scope of this paper. But several which have made an impress upon contemporary thinking in the discipline are worth looking at briefly.

Chief among the tributaries has been the ever-widening stream of exceptionally fruitful ideas that represent psychoanalysis. For many years, psychoanalytic thinking was dominated by an instinctivistic bias that provided little role for the external adjustive processes, like thinking, learning, and perception, which were the domain of academic and general psychology. Under the leadership of a newer generation of psychoanalysts, among whom Hartmann⁷ has been outstanding, the two streams of psychoanalysis and general and clinical psychology began to form a common watershed.

Gestalt psychology provided the factor of cognitive structure and organization, and learning theory—of whatever brand—helped to establish the influence of past experience upon the present cognitive field. Following World War II, when the study of perception became more intimately related to genetically and historically derived needs and their pressures, both academic psychology and psychoanalysis began to make common cause in their interest in regarding the whole person as the object of study. With rare exceptions, psychologists have tended to be more sophisticated methodologically than their colleagues in psychoanalysis, with the result that the former have more often assumed the heavy burden and responsibility represented by the need to confirm the major psychoanalytic hypotheses. This process has proceeded over the years—and is indeed now more vigorous and wide spread than ever—with the result that clinical psychologists, in spite of their original biases and deep reservations, have been able to embrace larger and larger segments of psychoanalytic theory and find it compatible with the mainstream of contemporary psychological theory.

This ever-widening interest in psychoanalysis has corresponded, among American psychologists at least, with an accommodation by psychoanalysis to newer developments in the behavior sciences and to sources of new data

that have served importantly to modify its older conceptions and propositions. The result of this has been an increasing interest in and concern with psychoanalysis as a *general*, as opposed to a specific, theory of behavior, which larger and larger segments of the professional community found themselves able to embrace. Among other things, this has meant for clinical psychology a deepening interest in the study of the person with respect to his origins, functions, and operations as its basic concern.

4. *Perception is the central process for the study of the person's patterns of reaction with his physical and social environments.*

Perception has come in recent years to be viewed increasingly as a tool in the service of adaptation, and thus as a process of crucial concern for all interested in an adaptational point of view of human behavior. Freud was explicit as early as 1896 in asserting the central significance of perception for the then new field of psychoanalysis, and it has recently come to light that in his "Project for Scientific Psychology," he had written, "If I could give a complete account of the psychological characteristics of perception . . . I should have enunciated a new psychology." (6, p. 175) At about the same time there were stirrings in academic psychology in the direction of a central concern for the role of perception in general behavior theory, a trend that was somewhat later to find ready expression in the founding of Gestalt psychology and in the development of a neutral theory of cognition that would emphasize the influence of drive and at the same time assert the independence of cognitive processes from their drive origins.

Particularly since the Second World War, as contemporary students of behavior theory are well aware, there have been a number of efforts to marry psychoanalytic and general psychological theory, and the common ground on which each view has sought to stand has almost invariably turned out to be perception. Indeed, studies in perception have offered the basis for our seeing clearly that theories of personality must never stand apart from, or be unrelated to, general psychological theory. Within general behavior theory there are ample indications that an individual's perceptions—his reality structurings and his assumptions—are importantly dependent upon and significantly influenced by his values, needs, drives, and interests. In an impressive research program, Witkin and his colleagues,¹⁴ for example, have indicated the manner in which a person who manifests dependency in his contacts with other persons tends to be "field dependent," in a similar way, in his perceptual performance.

At the present time research in perception and in its relationship to personality is more vigorous than ever, and those working in the field care little whether their contributions are to general psychological theory or to

personality theory, for in a fundamental sense, as we have tried to indicate, there is little or no difference. There has been a growing realization in recent years that research in perception requires an adequate theory of consciousness and awareness, and researchers like Klein⁸ are giving a large measure of their effort to the construction of such a theory. Klein's systematic concerns are with such matters as the process of registration outside of awareness, subliminal perception, perception during different levels of awareness, and the important controlling structures characterizing a person's state of consciousness at a given moment.

Research of this sort, which has served to bring psychoanalytic data out of the doctor-patient interaction situation and make them more empirical and experimental, is acting as an important leaven in the whole field of general behavior theory—and perception has served as the chief link in this movement of ideas.

5. Clinical psychology deals with the whole realm of values and must be prepared to understand and incorporate them into its discipline.

Until recently there has been no general theory of value and little appreciation of its central importance in behavior theory and in clinical psychology in particular. The fundamental issue in a general theory of value is the problem of the nature of all determinations of value. Values, in the broadly psychological sense, turn out to be types of appreciation or interest; and values really become feelings. In the widest sense, psychological theories of value, of which there are many, have proven to be biological theories in the sense that value is defined in terms of survival and enhancement of life. Because value theory is today largely philosophical rather than psychological, relatively little attention has been given by psychologists to what goes on in consciousness when a person values something.

Whatever differences of opinion exist among students of values with respect to various theories of value, there is considerable agreement that values are not really subjective in the sense that they are merely matters of opinion or preference and that they exist only for individuals who appreciate or experience them. For this reason, among others, they should prove of special interest to psychologists who deal with them daily, not only in their own lives but also in their work as clinicians.

There appear to be two important psychological conceptions of value. The first type applies to an object and refers to the fact that that object completely satisfies a particular human need. The second conception of value concerns the extent to which a value satisfies a constant need which is some kind of standard need. Values and their importance in clinical psychology enter in relation not only to goals and their realization, which is the realm of motivation, but also in the sense that values are directive in a person's choice of alternative solutions to problems or choice situations.

In its concern for the total person, clinical psychology is recognizing that it cannot afford to overlook the whole realm of values.

The values that a person holds have been shown experimentally to be related not only to that person's need state but also to the fact that they serve to structure the cognitive field and to fashion the individual's responses to it. Clinical psychology has come to appreciate their importance in perception, and there are indications that much of the future research effort in the field is likely to be directed toward a study of values and their role in all the processes that clinical psychology seeks to understand.

CONCLUSION

This paper attempts to make explicit some of the dominant ideas in clinical psychology that are both conceptually and methodologically important. A programmatic point of view that seeks to suggest not only what is, but what the prospects for a scientific clinical psychology appear to be, has been developed. There are other significant movements of thought that can be isolated and considered in relation to their origins and their present status in clinical psychological theory, and perhaps others interested in furthering our knowledge and understanding in this area will turn their attention to them.

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The Development of Clinical Psychology as an Independent Profession

In "The Development of Clinical Psychology as an Independent Profession," Dr. E. K. Schwartz has met head on the important and vexing professional issues and problems that daily confront clinical psychologists, particularly in their relationships with other disciplines and practices. Dr. Schwartz is especially qualified to raise his voice in this area, since for a generation he has been in the vanguard of those who have assumed responsibility for maturing our science and practice into an adult, independent and increasingly interdependent professional endeavor. One comes away from a thoughtful reading of his point of view with the sober conviction that much peril lies ahead on the road to further professionalization, that rough terrain confronts those who want to push ever forward toward greater service to the public in their roles as clinical psychologists.

THERE IS NO NEED to review the history of psychology in general or of clinical psychology in particular. The impressive growth of the science of psychology in its theoretical and applied aspects, especially in this country during the past few decades, has been described elsewhere.^{1, 2, 15, 17, 19, 21, 23, 29} To be sure, there exist a body of knowledge and a set of practices, some general agreement on training and ethical standards, as well as an awareness of the necessity to evaluate the outcomes of the application of clinical psychology. In this context, clinical psychology, as an independent discipline, is viewed as synonymous with its applied practice in contributing directly to the welfare of human beings. Included are remedial as well as preventive activities, based upon sound evaluative procedures, performed in a variety of settings.

The theoretical and applied aspects of any scientific practice are inter-related. The clinical psychologist is viewed as a professional person with scientific training who brings the best available knowledge and the most skillful technique to bear in an attempt to understand and to help individuals and groups of individuals in the conduct of their personal and interpersonal transactions. The consequences of a growing profession spread in many directions. The purpose here is to raise questions about the field, answers to which must be found because they are central to the course of