

GUEST EDITOR'S INTRODUCTION TO "PSYCHOTHERAPY IN THE AMERICAS"

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The most worthwhile honors are matched by commensurate responsibility. So it is with this kind invitation to be Guest Editor of this special issue. As I discussed this project with the regular editor, Doctor Natalicio, we came to realize that this would be, at least for now, the only recorded panoramic view of the practice of psychotherapy in all the Americas. Thus, it would bear the responsibility for helping to achieve some important social and scientific goals. One of these was to confront each country with where it stood in relation to the practice of psychotherapy by psychologists. As with confrontation in psychotherapy, this could provide an impetus for further growth, as well as providing ideas for new directions for that growth. Having information about psychotherapy in neighboring countries would make it possible for each to benefit from the experience of others, while encouraging a sense of shared problems and opportunities. For some, a comparative look at other countries would set a standard to be achieved; for others, it would be a source of gratification, and as such an encouragement to achieve more. Each country could see how its social, economic, and cultural conditions play a part in the development of psychotherapy. Finally, both the picture of one's own development and the comparison with others could be used to educate and to influence attitudes of governments, universities, and other professionals. From this may develop better legislation, financial support, and enhanced intellectual exchange among colleagues. In the light of subsequent events the reader will have to judge how successful we were in achieving these objectives. We do feel encouraged, however, partly because of the finished product which you are now holding, and partly because of the enthusiasm, cooperativeness, and dialogues promoted in the course of putting this volume together.

Our method was to solicit the help of people that we know personally, or knew of, who would be willing either to write the contribution from their countries themselves or recommend someone else for this task. We offered the following list of questions as basic, with latitude for the style in which they would be covered and for the addition of other information.

1. What is the professional standing of psychologists who practice psychotherapy?
 - a. What is their legal status? Certification? Licensing?
 - b. How do they describe themselves, e.g., counselors, guidance workers, clinical psychologists, etc.?
 - c. What is their relationship (professional and otherwise) to psychiatrists and the psychiatric community in general? Do they generally function professionally under the supervision of a psychiatrist?
 - d. Unofficially, how are they thought of by the people of the country? By other psychologists?
2. How does one get training in psychotherapy?
 - a. Is it through traditional academic training programs in a university setting? Is there a requirement of a practicum or internship experience? If so, in what setting does it take place and for what length of time?
 - b. Are there any special training centers for the preparation of psychotherapists (psychoanalytic, behavior modification, gestalt, and the like)?
 - c. What degree or degrees is a psychologist practicing psychotherapy likely to hold?
3. What are the *theoretical* and *practical* trends or directions psychotherapy is taking? Contrast present trends with the status of the field 15-20 years ago. Which "schools" are influential?
4. How does the cultural character of your country relate to your responses to the above questions? What present social or economic conditions may be relevant to your answers?
5. What directions do you think psychotherapy will take in your country in the future? Consider influences both internal (e.g., theoretical) and external (e.g., legislation, cultural change) to psychotherapy itself.
6. Any other comments which would give our readers a down-to-earth, meaningful sense of what it is like to be, or want to be, a psychotherapist in your country.

Because of the vicissitudes of mail deliveries over long distances, and an occasional difficulty in locating potential contributors, we ended by sometimes inviting more than one contributor from each country. In those instances, we have a kind of informal check on the reliability of our information. The magnitude and complexity of the field of psychotherapy in the United States is such that we thought from the beginning that inviting two contributors would be justified and potentially useful. In a project of this kind one could expect, on a statistical basis if none other, that some people would be late or finally not send us their contributions despite our efforts

to solicit them. For example, Cuba and Honduras are not represented. I am grateful to the contributors for discharging their responsibility to our task. I am sure that it is a responsibility they felt toward their profession and countries as well.

Another objective of this volume, the full importance of which began to dawn on me as I read through the manuscripts, is the opportunity that it provides not only to benefit from the ideas and experiences of others but to avoid the mistakes of others. Since psychotherapy by psychologists has differentiated and developed as practice and science further in the United States than it has in other countries of North, Central, and South America, indeed probably more than anywhere else in the world, the United States provides the most clearly marked path to follow. But among the other countries as well, in principle, each could learn from the experience of the other, rather than having to experiment blindly, especially in those instances where social and economic conditions are similar. My general impression from surveying these reports, however, is that, instead, there seems a tendency for each country to repeat rather than benefit from the mistakes of others.

A major such instance is the tendency toward a fervent professionalization of psychotherapy in which attempts to restrict who can practice what absorbs energies which would more helpfully be spent on the substantive development of knowledge. In all human enterprises there seems a general tendency to become unduly concerned with the boundaries between one's self and others, status and role, the division between "we" and "them." Medical practice in many countries sets an unfortunate standard and model in this respect. "Privileges" to put patients in particular hospitals, political units designed to influence legislation and attitudes, social clubs and separate dining room, are all illustrative of such separatist, elitist tendencies. These self-conscious discriminations tend to lead to one's status and economic interests taking precedence over the needs of patients and the demands of science and education. The degree of uncertainty about one's effectiveness as a practitioner and scientist may be proportional to one's needs for such external and tangible proofs of legitimacy and membership. Organizing to protect the public and to obtain ready access to the ideas and stimulation of other members of one's profession is distinguished by a fine but important line from organizing primarily to propagate political and solely self-serving needs. Ironically, while emerging professions in many countries are trying to claim the traditional prerogatives of medicine, in other countries psychotherapy as a medical specialty is being superseded. Humanism, behaviorism, and existentialism are all powerfully demonstrating the paradoxes, ironies, absurdities, and

essential unworkability of conceptualizing and dealing with difficulties in living solely in terms of illness and treatment.

The scientific analogue, or outgrowth, of parochial professional thinking can be seen in the tendency for "schools" of psychotherapy to be propagated in what is essentially a power struggle with other schools. When this occurs, scientific arguments are used more as rationalizations than as sincere attempts to account for the facts about how people change in psychotherapy, and how one can help in bringing about such changes. Again, we should consider the extent to which the stridency of claims of success stem from the underlying fear and insecurity about the veracity of such claims.

Another tendency which tends to divert attention from the empirical facts of the real life of psychotherapy is an undue worship of the experimental method. This, too, often derives from the need to gain self-respect and acceptance through copying others who seem to be already accepted. Thus, a whole generation of psychologists has struggled to become acceptable in the eyes of science as epitomized by the methods of physical science. Problems in psychology have been shoehorned into experimental designs which conform to criteria used in physical science, but which often fail to meet the overall criterion that one's method must flow from, and be suitable to, the issue being investigated. Hypothesis should determine method; what one wants to know should be decisive in deciding how to go about trying to find out about it. Validating the success of psychotherapy in traditional scientific terms is as difficult as validating the success of various methods of education or child-rearing in that way. (For a fuller discussion of this issue see "Questioning the Question: The Effectiveness of Psychotherapy" in this same issue of the journal.)

I am hardly questioning the need for organizations, political influence, assertion of the differences and values of one or another way of working psychotherapeutically, or the need for scientific investigation. What I am questioning, and what I hope the psychologists in each country will question along with me, is the extent to which the impetus for these is in the service of, irrelevant to, or inimical to more substantive issues: What really are the factors in one or another psychotherapeutic activity which bring about change, how can these elements be maximized for the greatest number and variety of people at the least expense of time and money, what kind of people can best be selected and trained for this kind of work, and how is such training best accomplished? The answer to these questions will make the difference in whether the practice of psychotherapy becomes merely an aberration in the long history of ideas and ameliorative attempts, or becomes an efficient way of helping people and a basis for expanded thought about the way lives are best lived.

Strange to say, the very popularity of the enterprise may prove its undoing. In the United States, in particular, the culture has found ways to open to public scrutiny, legitimization, and consequent action the existential issues which have been the lot of man through the centuries. How to live is becoming as popular a question as how to make money. Whether or not one wants to call this question or its elaborations a psychiatric, psychological, or philosophical one is a matter of convention and definition. But the felt need for help is ubiquitous and intense. As affluence increases in any country, expectations similarly increase. People no longer are resigned to one or another form of misery. They enter the marketplace of hope and aspiration, there to find psychotherapists. In the absence of clear scientific evidence and hallowed tradition based upon experience, and with little in the way of guidelines to help with selection, people may uncritically accept whatever is offered. This may seduce psychotherapists to believe uncritically that financial, social, and interpersonal acceptance are evidence that what they are doing is the best that can be done.

One example of a changing trend in psychotherapy which seems largely based on political and pragmatic considerations rather than empirical or experimental experience is the shift, noted in several of the countries reported upon here, from a psychoanalytic to a behavior modification point of view. Although I am by training and inclination a psychoanalyst, I hope my remarks will not be read, in this instance, as taking a position for or against this trend. Rather, I think we should all try to recognize the reasons for it, which may or may not be relevant to the question of the effectiveness of one or another method. For one thing, psychoanalytic thinking, in some countries now judged as having failed, has like as not been inadequately applied and tested because of inadequate training of practitioners. With rare exceptions the official Institutes of the International Psychoanalytic Association have refused to train other than medical people, thus narrowing the range of personality types and skills from which to draw psychotherapists. Medical students become imbued with a medical point of view, which is not in all respects identical with a psychotherapeutic one, while ordinarily losing the opportunity to gain psychological, social, and philosophical training and points of view. As a rule, these are not adequately included in medical studies. This problem is exaggerated in those many Latin American countries which do not require a four-year academic degree previous to medical training. Because of these discriminating practices, psychoanalysis has also lost the opportunity to train a wide variety of other scholars, all in the absence of any evidence that people who go to medical school are likely to become better psychoanalysts than those who go to graduate schools, or indeed no school at all. Psychol-

ogists have had to find ways of educating themselves in psychoanalytic or dynamic thinking. What has passed for an application of psychoanalytic principles has been the result of a pastiche of *ad hoc* solutions to this selection and educational problem, highly variable in quantity and quality of training, self-teaching, and the happenstance of gaining adequate supervision. The consequent spotty implementation of the psychoanalytic point of view has made it scientifically impossible for this point of view adequately to be accepted or rejected.

Behavior modification benefits from the exclusion of psychologists from psychoanalysis in that it is derived from principles of psychology and is in the tradition of "tough minded" experimentation. Psychologists can experience it as something of their own, and themselves as central rather than peripheral or paramedical. Such considerations result in professional and emotional needs to espouse behavior modification as more desirable than psychoanalysis. The promise which behavioral methods extend, and which they often fulfill, of specific problems being solved in specific ways in a brief amount of time have great appeal. In such circumstances it is easy to overlook those difficulties in living which are not amenable to behavior modification techniques and to embrace the implicit philosophy of life of behaviorism which is, to caricature it somewhat, that there need not be a philosophy of life. There is in this socio-psychological situation a mixture of fact and fiction, wishful thinking and expediency, narrow interest and broad appreciation of the human condition. Such a context is hardly the one for wholesale shifts in orientation and practice. In the absence of adequate evidence of continued sharp conceptual thinking, such shifts may lead to exaggerated hopes and consequently exaggerated disappointments, preparing the ground for further developments which may be no more usefully or rationally settled upon.

Another casualty of the headlong rush to get a feeling of orthodoxy is the overlooking of information, such as is provided by the human potential movement and other new therapeutic modalities (gestalt therapy, bioenergetics, transcendental meditation, primal therapy, and more). Whatever the ultimate fate of the philosophies and procedures in these modalities, they are a rich source of observations and hypotheses. The issues which their adherents sharply raise with psychoanalysis and behavior modification may result in the demonstration of the correctness of some of the new approaches and techniques in and of themselves, or in the improvement of psychoanalysis and behaviorism. Any body of knowledge is likely to benefit from being forced to account for new observations and having to work through new points of view. The more established knowledge is the more it may require re-thinking, re-stimulation, re-educ-

cation even if no substantive changes are made. But such creative ferment can be exploited only if we can be open to such possibilities, spreading the intellectual net wide enough to allow for the easy crossing of boundaries. I hope that the psychological communities just now emerging in many countries will avoid opposing one point of view with another, such as psychoanalysis versus behaviorism, becoming so absorbed in this struggle that they ignore what in the United States is a third major force. These new trends in bringing about change could in principle be available to other countries now, converging with the intellectual and professional development of psychotherapy, rather than being dealt with later from an adversary position.

Brave and far-sighted psychologists in each country will recognize that the psychotherapeutic emperor wears no clothes, that the scientific-artistic enterprise of psychotherapy is at the beginning in the history of ideas rather than being a finished product. It is likely that the careers of such people will be spent in ambiguity, experimentation, and doubt, leavened only by the moments of encouragement when change and knowledge of how change comes about seems to be at hand, and by the expectation that sooner or later hard-won knowledge will be made available to patients and practitioners. Such psychologists may not be thought of as leaders at the moment, or perhaps ever. They can be sure only of the nature of the task that history and events have set before them. In the final summation the selection, training, and professional identification of the psychotherapist, what and how he practices, what he values and believes in, may be much different from what is said in today's books and on today's diplomas. Our task as developers of psychotherapy is to hew to the line between gaining knowledge from others and slavishly following others, between benefiting from the experience of others and allowing it to substitute for thought, between copying and creating.