

PHILOSOPHICAL PRACTICE

Journal of the APPA

Volume 10 Number 1 March 2015

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Biographies of Contributors

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Problematic Conditions for Actions Targeting Happiness

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Abstract

The Hedonistic Paradox reveals two problems in our ideas and desires for happiness. Yet we continue to believe if I do ____, then I will be happy. By examining reasons explaining why we are not happy problems are identified in the action-targeting formula. Ideas from Ecclesiastes, Sisyphus, Aristotle, Mill and Nozick are considered. Implications are offered in regard to knowing what is effective in counseling/therapy.

Keywords: *happiness, hedonism, Aristotle, Ecclesiastes, Camus, Mill, Nozick, therapy*

At times everyone faces two troublesome puzzles about happiness. While we desire happiness we cannot formulate a clear idea of what happiness is. This point is emphasized by Immanuel Kant, in an often quoted passage. Meet my friend Philip:

He is not happy and thinks he knows why: his wife left him. He also sprinkles pepper in his Molson's ale—He believes the pepper makes the ale healthier. He desires alcohol and happiness. He knows how to easily secure one of them.

While we do have experience of happiness, it is transitory like all experiences. Both troubles are condensed in the Hedonistic Paradox: The more deliberately someone seeks happiness as the sole good, the more elusive it becomes. Happiness is elusive because the desire for it is elusive in meaning. It is also elusive when one attempts to grasp it or prolong it—happiness fades in the effort. In spite of these troublesome realizations, we continue to hold on to the simple formula: If I do ____, then I will be happy. This simple formula obscures commonly held conditions that supposedly link actions and happiness. Understanding these conditions can be instructive for personal and philosophical therapy.

Phil thinks if his wife returns he will be happy. He forgets the chronic fights they have had. He has a litany of cruel epithets for her and sometimes for all women. She castrated me!" "All women are vampires!" He declares "I have thrown love in the garbage." Yet, he also confesses he is seeking a lover—who will make him happy. He fears he is not attractive. In his miserable mood he is not attractive.

When targeting-actions fail as they have in bouts of unhappiness, the accompanying underlying beliefs or conditions for happiness are exposed. Consider Ecclesiastes, a Biblical character with a case of profound unhappiness. He diagnoses his condition as a "vexation of spirit," and bitterly complains: "all is vanity."

Phil seeks a reason why his wife left him. I ask if he knows the reasons why she fell in love and married him. He tells me my question is dumb. I do not try to explain my view. His response to me

is a case in point: The reasons why others act towards us are complex and perhaps inscrutable. He is his misery. He takes another drink.

Ecclesiastes finds reasons or evidence for his dissatisfaction in all areas of life: in his labors (no satisfaction or profit and no rest from effort), in the fact of change (nothing abides, nothing is new), in the idea of the good (there is no knowledge of what is good, no appreciation or remembrance of what was good and no justice.) Time and chance are villains. Knowledge only increases sorrow. He entertains the grim possibility of living his life as if in the house of mourning. Eventually, only belief in a mysterious God who brings all to judgment saves him from his despair. Consider the source of his despair in the linkage between his actions and their outcomes. It seems Ecclesiastes has a deep belief, challenged by chance and death, that his actions should result in profitable outcomes in terms of his version of happiness. It seems natural—and rational—to believe that one's actions should result in profitable outcomes. What might be irrational in holding such a belief?

Ecclesiastes is manifestly operating on the formula, If I do (actions), then I should expect outcomes that will produce happiness. The "should" hides a condition that would make the action-then-happiness-outcome linkage truly effectively. If the world was truly just and orderly and it recognized his self-designated specialness, then his efforts would be guaranteed happy outcomes and insured against any significant unhappiness. As Ecclesiastes unfortunately discovered, time, chance and death destroy his "guaranteed" targeted-outcomes.

For Phil, one-night stands and hangovers guarantee only guilt and the need for another drunken sex encounter. It seems as if he is proving to himself that he is unworthy of love, even as he desperately hopes for a new lover.

Challenged by setbacks leading to his unhappiness, Ecclesiastes fears that he is not special: death for him is the ultimate insult. It is the great democratic and demonic force—it touches all and levels all equally. He finds relief from his despair when he is able to rejoice in his portion as a gift from God. Belief in God, it seems, gives him a transcendent guarantee that in a divinely ordered world there will be a just reward for the actions of a special person like himself. Setting aside the questions about a transcendent guarantee by the divine, is it irrational to hold a belief that one's actions should produce outcomes that are happiness producing?

Phil acts as if he, too, is in the house of mourning. He does not have Ecclesiastes' optimistic promise of a just reward—I am not too optimistic either because his thinking resides in a terminal ward. His favorite corner in his favorite bar is drab enough to qualify as a place of mourning.

Whether our actions should link to our happiness hinges on the meaning and force of "should." If a person did not have any expectation that his actions would produce predictable, satisfying outcomes, especially happiness outcomes, we might wonder about his sense of pragmatic rationality. Why would a person act if she does not see her actions connected with happiness in some way? Even Sisyphus, in Camus' version of the myth, though condemned to futile effort, nonetheless finds his own circumstantially unique happiness. Sisyphus, unlike Ecclesiastes, finds "silent joy" in his struggles to push his rock up the hill without any satisfactory outcome because:

His fate belongs to him. His rock is a thing. Likewise, the absurd man, when he contemplates his torment, silences all the idols. In the universe suddenly restored to its silence, the myriad wondering little voices of the earth rise up. (Camus, 1955)

Supposedly, Sisyphus attains a special heroic status in overcoming his fate because he does not succumb to the will of the gods. So, Camus concludes, “one must imagine Sisyphus to be happy.” Whereas Ecclesiastes finds relief in God from his injured belief in an ordered and just world and his special status in it, Sisyphus finds satisfaction in scorn for gods: “There is no fate that cannot be surmounted by scorn.” However, it is difficult to imagine a happiness sustained by a life strategy rooted futile action redeemed by an attitude scorn.

What if Sisyphus were mistaken in his belief about the gods? What if the gods he scorns are not real? In effect, he is free to walk away from his rock and his futile efforts of pushing it upwards. Minus the gods, his continued rock-pushing action looks irrational, if not stupid. Alternatively, if the gods are real but not punishing him, all he needs to do is eliminate his “heroically” defiant belief. If offered the choice of continued punishment or giving up the cosmic meaning of his suffering, what would he do? Could he even seriously conceive of the options, given his investment in defiance?

I wonder if Phil clutches onto his rejected self as a source of life’s meaning. If he did not conceive of himself as a victim of cruel love, how would he then recognize himself? He does see himself reflected in his ale glass.

What reasonable belief-conditions can connect one’s efforts and happiness outcomes? Unreasonable beliefs disclose themselves in unhappy people. In a depressed mood a person might complain, “Life is not fair.” This translates as, “If I make certain efforts, life should be fair so I can assuredly attain my happiness outcomes.” Fairness is one should-condition linking effort and happiness. There is another should-be-happy condition linking effort-outcomes to ideas of the self. “Since I am special, I should be happy.”

Philip thought he was special, at least in terms of Aristophanes’ myth, in which Zeus split the original humans in half because they arrogantly sought a place among the gods. Fatefully, he thought, he found his other half; she would complete him. He sometimes blames himself, not another act of fate, for being unfairly surgically cut from his co-joint lover. She found her other half in someone else. His unhealed wound is hopelessness: he will never be loved again. He has a reason connecting himself to his unhappiness—though he still believes he ought to be happy.

For some people, the failure of actions targeting happiness stands as terrible evidence against the condition life should be fair and against one’s special status as deserving happiness. A version of special status appears when, in the face of life-disturbing events, a person questions plaintively, how could this happen to me? While one knows others suffer life disturbing events, it seems incomprehensible such events can happen to oneself. From a rational perspective, it is more incomprehensible that a person should continue to hold a should-be-happy condition linking action and happiness in spite of such human evidence to the contrary.

There are a variety of other troublesome should-be-happy conditions in addition to life-should-be-fair. These conditions become troublesome because to continue to act on them in the face of

disappointment only leads to more disappointment. These kinds of reason for unhappiness indicate and shape the kind of unhappiness experienced. Unhappy people in therapy/counseling offer reasons like:

- Life should go the way I want. [If I am not happy, I (who am forceful) am intensely angry or I (who am vulnerable) am utterly frightened and sad.]
- It is their fault, usually parents, spouses or lovers, and bosses. [I (who am injured and blameless) have the right to punish or I (who am powerless) have the right to be pitied and cared for.]
- Everyone should love me [since I am such a great person and I cannot stand thinking that someone might not love me.]
- This should not happen to me [Horrible things should not happen to me (who is refined and fragile).]
- I should have chosen differently. [I should have known, so I deserve a second change, or deserve my guilt and regret.]
- I should be able to prevent bad things happening [since I practice a high degree of (anxious) control over everything in my life.]

If such should-be-happy conditions are irrational, what makes them irrational? Consider fairness as a should-condition linking action and the outcome happiness. In a perfectly imagined world life would be fair, at least as fair as one demands it—which likely involves some special-pleading condition exempting one from life’s “unfairnesses,” thereby distorting the meaning of fairness. Like it or not, in this world, life is not always fair. It does not further satisfaction in one’s happiness outcomes to believe that the world should be fair. In good times belief in life-fairness might reinforce one’s sense of specialness. In terms of action effectiveness, the belief makes nothing positive happen in terms of outcomes—which makes the should-be-fair demand ineffective, except to produce unhappiness when it is violated. To hold tenaciously to the belief leads to emotions not conducive to happiness, like anger, anxiety, frustration, and depression—which are certainly contrary to one’s happiness, if they are intense and persistent. As a consequence, these emotions lead to actions that further thwart one’s happiness, like actually blaming and punishing those who are “responsible” for one’s unhappiness.

In terms of evidence, there is ample evidence in the lives of others that life is not fair. To ignore evidence opposed to one’s beliefs—a distortion in truth—risks irrationality and self-deception. To affirm that one is somehow different and should be exempt from disappointments cannot be rationally supported. In terms of one’s self-image, it is dangerous to view “life’s unfairness” as a personal insult—a distortion in one’s place and value in the world. It is dangerous to have a view of self so inflated that life should give immunity from disconnections between actions and happiness targeted outcomes. No one is so special or deserving to be exempt from action disappointments and intrusions of unhappiness. When distortions in meaning, truth, logic and value are operating intensively, singly or in combination, it is pragmatic to think of them as irrationalities. It is pragmatic because irrational should-be-conditions might be discovered, challenged and replaced by a philosophic therapy, which increases the chances of happiness.

Are there rational conditions that connect targeting actions to happiness outcomes? Aristotle seems to present a strong case. In Book 5, Chapter 1, of the *Rhetoric* (1941) he lists and elaborates

the meaning of fourteen constituent parts of happiness that “pretty well everybody agrees with:” “good birth, plenty of friends, good friends, wealth, good children, plenty of children, a happy old age, also such bodily excellences as health, beauty, strength, large stature, athletic powers, together with fame, honor, good luck and virtue.” In the *Nicomachean Ethics* Aristotle goes beyond a listing and links happiness with virtue, through the concept of excellence of soul. While some items on his Rhetoric list are elements in virtue-happiness, several are not actions within the realm of one’s power, like a good birth. Furthermore, Aristotle argues that several others, while within one’s powers, are eliminated for different reasons related to his ideal of excellence. For example, honor, in addition to being too superficial, is in the power of those who bestow it, not in the power of those who would seek it. Pleasure, not to be confused with happiness for Aristotle, is eliminated from the highest good because it is vulgar and bestial.

Methodologically, Aristotle is first establishing formal conditions for happiness as the final and highest good and then determining what good satisfies the conditions. This highest good is such that it is the most final, complete good, chosen for its own sake and not for the sake of something else. And, happiness must meet the condition of being self-sufficient, “that which when isolated makes life desirable and lacking in nothing.” He links this happiness to the person: happiness must be pursued as an end to action, be proper to man, and not easily taken away. After investigating the nature of man, his function, he goes on to add some refinements: actions must be towards outcomes that “coincide with what is best and finest.” Aristotle might be criticized for aiming at a kind of happiness possible for only the few, contemplative-philosophical persons.

Philip would be satisfied if he had what Aristotle omitted from his long list, namely romantic love. Phil knows painfully that love, like honor, depends on another person. He does not recognize how someone’s loving him depends on his loving. Once he attained romantic love, he likely would have wanted other items from Aristotle’s happiness list. Like many of us, we can always desire more of the good stuff in life.

Assume, as Aristotle does, that happiness should be an overarching good, dependent on our individual nature and attainable by our actions. Set aside the matter of the highest happiness for special types of individuals. Right happiness-targeting actions alone do not produce happiness. We need luck. Luck is not just the fortuitous conditions supporting our actions on specific occasions. Good birth and physical stature are certainly matters of luck. Beauty is a matter of luck or, in modern terms, a matter of genes, affordable surgery and the ideal of cultural beauty of the times.

Phil agrees with Aristotle: bad luck explains a great deal of his woe. If his wife had not bumped into an old friend who listened sympathetically to her marital troubles—who became her new lover—she would still be with him.

So, in effect, with the right kinds of self-knowledge, one’s efforts and good luck in birth, beauty and other fortuitous goods will lead to happiness outcomes. Is this a rational belief? Actions make a difference—and they do not because of a quirky element, luck. Luck is problematic in two domains, external and internal. Externally, the connection between action and outcome is broken when something unplanned and unforeseen in the world intervenes between action and targeted outcome. Internally, the connection can be broken when actions produce the desired happiness-outcome but one is nevertheless not happy. Perhaps the outcome is not appropriate to one’s

nature or circumstantial mood, in spite of what one might have thought. Or, perhaps it is not rational to believe that we should have sufficient knowledge of self, world and happiness such that we are able to produce reliable happiness-outcomes and then to experience happiness.

John Stuart Mill, who argues eloquently for the greatest happiness principle, though one tilted toward the higher pleasures, offers a different connection between actions and happiness-outcomes. He suggests (2001) that actions alone are enough to produce happiness, with the condition that “one does not expect more from life than it is capable of bestowing.” Everyone can be happy making meaningful life actions, except under two internal happiness-restricting conditions. “Next to selfishness, the principle cause which makes life unsatisfactory is want of mental cultivation.” (2001) Instead of seeing ourselves as lacking something essential we call happiness, Mill (2001) optimistically thinks that we should see our whole lives as enviable:

In a world in which there is so much to interest, so much to enjoy, and so much also to correct and improve, everyone who has this moderate amount of moral and intellectual requisites is capable of an existence which may be called enviable....

Mill completes the sentence by stating the few external reasons why a person's life might not be enviable:

... unless such a person, through bad laws or subjection to the will of others is denied the liberty to use the sources of happiness within his reach, he will not fail to find this enviable existence.

In effect, Mill is postulating that happiness, properly understood as a life attitude, is intrinsic to life actions, not extrinsic payouts from successful action-outcomes. As long as one is engaging in actions of interest, correcting and improving them, then those activities are the source and location of happiness. The phrase “enviable existence” can be misleading because of its association with envy, which involves an unsettling comparison between another's life circumstances and one's own. In contrast with envy, what matters is that each of us sees our own life as enviable, with no comparison with others'. From the exclusive vantage point of each of our lives, our existence is enviable to ourselves because of the opportunities each of us has.

Phil has no interests. He drinks, without interest. He laments his life, without interest and intention to improve.

Robert Nozick (1989) offers a variant of Mill's enviable-life attitude, based in a happiness producing mood or disposition. He acknowledges what may be a difficult truth for anyone searching for a rational belief condition linking actions and happiness-outcomes:

A happy disposition may be a more important determinant of happy feelings than any one of the person's true beliefs and positive evaluations, however large one of these may seem to loom for the moment.

A happy disposition is “a continuing tendency to look upon positive features of situations and have attendant feelings.” (Nozick, 1989) For Nozick (1989), a happy disposition is open to our

control, not wholly a matter of temperament, dependent on the benchmarks we use to evaluate current situations: “If there is any ‘secret of happiness’ it resides in regularly choosing some baseline or benchmark or other against which features of the current situation can be evaluated as good or improving.” Likely this secret works well for people who are relatively happy. For people suffering wounds to their benchmarks his advice will seem cruel.

Phil’s baseline is below zero. He has a lot of room on the upside. However, his vision is glued to the downside.

The previous examples suggest that a variety of dominant and transcendent beliefs shape and gives meaning to the connection between action, outcome and happiness. If I engage ___ actions, my expected outcomes will produce happiness, on the condition that:

- God acts in mysterious but just ways (Ecclesiastes)
- I choose to scorn the gods (Sisyphus)
- Life should be fair (the angry, frustrated, depressed unhappy person)
- The rational-luck alignment of the nature and function of man with excellence (Aristotle)
- Envidable existence (Mill)
- A happy disposition (Nozick)

How rational is the choice of one of these over-arching, transcendent beliefs or life strategies?

Each belief-condition provides a different basis for counseling oneself or an unhappy person. My friend Philip is confused about happiness and these transcendent beliefs. He listens to his friends regarding his envidable existence. He understands at some level that he is well favored in life circumstances and abilities. But, his loss of a lover defeats his understanding and will. His past happiness benchmarks are only painful reminders of how far he has fallen into unhappiness. In desperate times, he says that he has prayed. Yet, he cannot quite believe in prayer—his action has not produced any results and since he is praying for a result he fears his praying is selfish. The idea that his love was meant-to-be nullifies any notion of rationality. Luck appears only as insurmountable bad luck. At times, while dying for love, he acts from scorn: of his ex-lover with her new lover and generalizing to all women, even scorning the idea of love. It seems that Phil, while he is ostensibly searching for happiness, is in search of an idea that makes sense of his life. He lacks a transcendent idea to connect any action with outcomes, to include happiness-outcomes, or to realize that his actions are themselves worthy of happiness. Instead, he seems to have subjugated himself, in Mill’s terms, to a bad law or a bad will of his own. I would like to believe that with self-knowledge through counseling/therapy, he can reclaim himself, rid himself of unhappiness, and even find happiness in romantic love sometime in the future. But holding this belief, how rational am I? I am postulating a condition of self-knowledge as a transcendent condition for happiness.

There is a radically different option: No happiness conditions. Camus (1955) proposes this, under the banner of absurd happiness. He draws a sharp distinction: “Belief in the meaning of life always implies a scale of values, a choice, and our preferences. Belief in the absurd, according to our definitions, teaches the contrary.” He elaborates:

Knowing whether or not one can live without appeal is all that interests me. I don't not want to get out of my depth. This aspect of life being given me, can I adapt myself to it? Now, faced with this particular concern, belief in the absurd is tantamount to substituting the quantity of experience for the quality. If I convince myself that this life has no other aspect than that of the absurd, if I feel that its whole equilibrium depends on the perpetual opposition between my conscious revolt and the darkness with which it struggles, if I admit that my freedom has no meaning except in relation to its limited fate, then I must say that what counts is not the best living but the most living. It is not up to me to wonder if this is vulgar or revolting, elegant or deplorable. Once and for all, value judgments are discarded here in favor of factual judgments. I have merely to draw the conclusions from what I see and to risk nothing that is hypothetical. Supposing that living in this way were not honorable, then true propriety would command me to be dishonorable.

Camus is aware that absurd happiness would offend most people. Mersault, the main character in Camus' novel *The Stranger*, seems to live according to a view resembling absurd happiness. Unintentionally, he commits a murder. In an epiphany, while waiting for execution, he realizes that he is privileged, as is everyone else, because he will die. That is the raw fact of privilege or enviable existence; nothing more. Except he looks forward to those present at his beheading howling obscenities at him. Philip agrees with Camus: happiness is absurd. It is absurd because he does not have it and he desperately believes he should. To counsel Phil would I be "guilty" of a form of conditional happiness for him: If I say or do the right thing, Phil will, in the course of counseling, become happy. For my solace, I do not think I will make him unhappier.

A double conundrum emerges. A client like Phil is confused and suffering in some respect and seeks help because a way out is not apparent, in effect admitting the need for help to find a way out of suffering. What action or change in outlook will relieve unhappiness and target happiness? The therapist/counselor is also confused or in the dark unless intimately knowledgeable about who the client is, what the client is suffering, and what a workable way out of it is. The counselor/therapist might believe that with the right insights, right correction of logic, right change in attitude, the suffering of individuals like Phil will find a shift from unhappiness to happiness. Like the weak targeting connection between action and outcome, the right theory and its right application might have little effect in therapy outcomes. Both the client and therapist may not know what actions generated an effective outcome, or not. Options other than therapist/counselor effective targeting-actions include:

- Placebo, endorphin-like or, e.g., being in a comfortable room, with a person who has a "fancy" degree and listens. Charging a "healthy" fee can induce urgency for change.
- Natural return to normalcy ("time heals").
- Forceful experience or event: e.g. alcohol poisoning for Phil.
- Incidental self-discover, e.g., watching a movie that "hits home."

These alternative agents of change should cast a shadow over case studies in which the author therapist/counselor describes what, based on an insightful analysis, yields a positive result. Noted psychiatrist-author Irving Yalom (1974) "confesses" his belief that his analyses were effective, while his patient reports that what was most effective in her therapy was a conversation about a movie in which she felt her ideas were being taken seriously. Yalom thought the conversation was a pleasant tangent.

If there is not a reliable way to account for effective targeting actions, how should a therapists/counselors view their efforts. Like Ecclesiastes they might simply have a faith that their methods and communications to the client are effective, but in a way that is both difficult to determine impossible to frame in causal or reason-giving language. Camus provides an apt metaphor for difficult clients who persist in pushing the same rock up the same hill with the same falling down results. The therapist/counselor may feel she is pushing a rock too, namely the client. Appealing to Mill's "enviable existence" or Nozick's "happy disposition" may only give solace to the way the therapist/counselor looks at her own life.

Back to Phil. He is living in and gives a narrative account of his current troubles, often containing explanations why he is unhappy and what he is not willing to do to improve.

Phil thinks I should think less and drink more beer. Though he admits he envies my good luck in marriage.

One theoretical way to describe Phil is that he presents himself in terms of a drama in which he is the main character, author, critic and stage-director. It seems as a character in his drama, actors in his drama seem ghost-like or opaque to him. (It should be apparent that I have embedded Phil in a certain kind of narrative as an action targeting an argumentative outcome.) A counselor/therapist is in the position of deciphering an incomplete text and helping the client compose a more flourishing life. Yet what constitutes a flourishing life for an individual is often enigmatic to the both the person and counselor/therapist. A flourishing life is enigmatic for Phil. And the way there lacks a map. Even to trace a happy-outcome backwards from a successful ending of therapy/counseling to what were the conditions and specific actions and understandings that lead to it is difficult.

To acknowledge this disconnection between action-targeting and its outcome would lead to a radical shift in the counseling/therapy "work." Often, there is indeed improvement over a course of counseling/therapy. But it might be, at best, a guess of what actions in the engagement lead to the outcome. While a counselor/therapist cannot abandon all theory and practices, she should be careful not to assume too significant a role in any successful client outcomes. For the counselor/therapist action-targeting formula, "If I do ___ (in terms of theory ___ and application ___, then the client will have a successful outcome," is vulnerable to irrationality or an admission of a faith like that of Ecclesiastes'. Difficult clients and a full review of the counseling/therapy sessions will undermine confidence in an easy relation between action-targeting and outcomes in such a complex, two-person situation.

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Reality Therapy's Concept of Basic Needs A Psycho-Philosophical Critique

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Abstract

This paper provides a critique of William Glasser's reality therapy. As someone with an interest in the emergence of philosophical counseling as a new branch of applied philosophy, I re-examine reality therapy, based on my prior work with it, to see if it could serve as a methodology for philosophical counselors. Through this examination, practicing philosophical counselors will be afforded the opportunity here to reconsider their own assumptions regarding the roles that self-knowledge and psychological self-insight play in helping others to live the good life, or flourish as human beings.

Keywords: *reality therapy, Glasser, flourishing, methodology, therapy*

The purpose of this paper is to provide a critique of William Glasser's reality therapy from the vantage point of its internal coherence and existential psychodynamics. As someone with an interest in the emergence of philosophical counseling as a new branch of applied philosophy, I thought I would re-visit reality therapy to see whether anything of this technique could be used by philosophical practitioners eager to define their field and to establish an appropriate methodology. In using the term "re-visit" perhaps I should add that I became a certified reality therapist myself in 1990, but stopped practicing shortly thereafter.

At first glance, anyone acquainted with reality therapy might think that it has something quite significant to offer the philosophical counselor. This therapeutic technique focuses on intentional behavior and motivational matters such as freedom and power. Helping clients to take personal responsibility and develop self-control are reality therapy goals that would probably make Sartre and Nietzsche proud—or any existential analyst for that matter. Given these goals, reality therapy should seemingly be able to reduce such things as bad-faith excuse making and mindless conformity, especially when used as a rationalization or psychological defense against anxiety—the sort that comes from a recognition of one's personal moral failings, for example.

In what follows, and by means of a critical evaluation of reality therapy, practicing philosophical counselors will be afforded the opportunity here to reconsider their own assumptions regarding the roles that self-knowledge and psychological self-insight play in helping others to live the good life, or flourish as human beings. While some philosophical practitioners may see their task as helping the client develop self-understanding, others may have the related aim to help clients develop insight into their underlying values and worldview assumptions. In either case, William Glasser's behavioral focus appears to challenge such efforts, to a very large extent. Though "thinking" is certainly recognized as one form of anyone's "total behavior," as he calls it, the Oracle's dictum to *know thyself* appears to be essentially lost on him. Any self-reflection encouraged on the part of the client is not of the deep psychological insight variety, but more of the superficial evaluative type,

requiring clients simply to appraise whether or not their current behavior is getting them what they want out of life. A personal examination of one's unconscious psychodynamics is not on Glasser's menu; nor are many of those higher-order reflections so prized by philosophical types.

Could it be that Glasser is on the right track? Maybe deep self-reflection is an impediment? Heresy to even hint at such a possibility, I know! But, as a counterpoint to Socrates' claim that "The unexamined life is not worth living," perhaps it's just as true or more true to say, The over-examined life is not living at all. Maybe it's best just to ask: What do you want? What are you doing? Is what you're doing helping you to get what you want? If not, then what do you need to do next? These are practical questions Glasser would prefer to pose in the context of his therapeutic approach. Such questions steer attention away from what he might see as unproductive "navel gazing" or the "silly" self-analysis associated with many insight therapies and spiritual systems of thought.

Since reality therapy is likely to be an unknown commodity for most philosophical practitioners, a bit of background is in order before my detailed critique begins.

Dr. William Glasser created reality therapy in 1965 out of his experience working with clients. A psychiatrist trained in classical psychoanalysis, he ultimately rejected most of his formal training. Instead of focusing on repressed memories and unconscious psychodynamic forces, for example, he emphasized personal responsibility for action instead. Unlike psychoanalysis, which is a depth or insight psychology, Glasser's approach is more accurately described as a form of behavioral therapy.

Today, reality therapy is recognized a legitimate therapeutic modality which, according to documents of the U.S. Department of Defense, is now used in 90% of the more than 200 armed forces clinics treating drug and alcohol abuse. (Wubbolding, 2000) According to one report, individual alcohol and drug abuse counselors have ranked only the traditional 12-step model more effective than reality therapy. (Wubbolding, 2000) Since its inception as a formalized technique, more than 75,000 people worldwide have received training in reality therapy. Current certification programs are offered through the William Glasser Institute in Chatsworth, California. Noteworthy is the fact that applications of reality therapy principles extend beyond the therapeutic setting to include education and business as well.

Since its inception, reality therapy has undergone an evolution of sorts. Glasser continues to stress responsibility, but he does so now using a kind of feedback-loop model of motivation. In its present form, reality therapy is a method of counseling and psychotherapy based on a notion of brain functioning understood as a control system. The idea is that the human brain works like the regulator found in a thermostat. To anthropomorphize this little device for a moment, let's say that a thermostat "seeks" to regulate its own behavior by getting what it "wants" as a result of changing and controlling the world around it. If the thermostat is set at 72 degrees Fahrenheit and the temperature dips below that, then the thermostat signals the furnace to start working, or "behaving," as it were. Once the "desired" temperature is reached, that is, once the thermostat gets what it "wants," it shuts off and stops "behaving." In the event that one has central air conditioning and the temperature rises significantly above 72, then different "behaviors" are called for – the air conditioning unit turns on instead and similarly turns off again as soon as it "gets what it wants." In effect, the thermostat "acts upon," "effects change," and hence "controls" the external environment

in a want-satisfying fashion. It “chooses” to “behave” in alternative ways to get warmer or cooler, depending on what it “desires” at any given time.

For Glasser, human behavior functions much like the thermostat. When we perceive a discrepancy between what we want and what we currently have or are getting, then we're motivated to behave in some fashion. Like the thermostat, we engage in regulatory control of our environments. According to Glasser (1998), anyone's particular wants—which are virtually infinite in possibility—are ultimately based on five basic needs, which he regards as genetically encoded in our DNA. Wants, then, serve an instrumental purpose and are designed to satisfy one or more of these needs, which include:

1. the need to survive and reproduce
2. the need to belong
3. the need for power
4. the need for freedom and finally,
5. the need for fun.

Regarding the first need, Glasser (1985) says, “What the genes do is best understood if we think of them as providing us with a series of biologic instructions that we must carry out if we are to exist survive and prosper.” With respect to the other needs, he writes (1985): “We are at our core biologic beings; that we satisfy some of our genetic instructions psychologically rather than physically makes neither the instructions less urgent nor the source less biologic.” In other words, these “basic psychological needs” are biologically and genetically programmed into us as well.

According to Glasser, when a child is born, the child has no idea of what satisfies its basic needs. In time, however, it begins to develop mental “pictures” of need-satisfying persons and objects in the environment. These pictures are then placed in what he calls a “mental picture album,” speaking metaphorically of course. For instance, a hungry child might be fed a chocolate chip cookie by grandma, the babysitter. After eating the cookie, the hunger pang ends. Subsequently, the image of a chocolate chip cookie may be filed away in the child's mind and called up the next time a bout of hunger arises. The hungry child “needs” to satisfy its hunger and has a picture in its mind as to how this can be accomplished. The child now “wants” a chocolate chip cookie to satisfy the basic need of survival, insofar as it involves hunger and food in this instance.

The cookie example is a good illustration of what Glasser claims we all do over an entire lifetime, namely, store pictures of need-satisfying things, people, events, situations, and experiences in our “picture albums” or what is called our “Quality World”—an internal place in our mind which contains all the need-satisfying pictures of things we want. (Wubbolding, 2000) When we feel a basic need, we go to that world of stored pictures and choose what will be most-need satisfying in that moment. If we experience a felt need to belong, for example, we might picture a friend or some sort of group with which we associate. We might telephone that friend or get the group together. Behaving in this way gets us what we want and thereby satisfies a basic need, which motivates us all. Since we all have different friends and belong to different groups, however, collections of pictures in the quality world will necessarily differ from individual to individual. We all have different ideas or pictured ideals of what is satisfying to us. Though what we want may differ from one individual to another, it still remains that what we all have the same five basic needs.

The internal quality world of mental pictures is important with respect to our perceptions and reactions to the external world. For example, if a father has a picture of the kind of person he would like his son to be—say mature and responsible—and the parent sees the son misbehaving and acting in an immature fashion, then there arises a discrepancy between what's wanted and what one is getting. Just as the thermostat turns on the furnace or the air conditioner when there is a discrepancy, any discrepancy between the parent's perception of reality and the picture of what they want in their ideal Quality World will start the "behavioral system" into action. The greater the discrepancy between the perception and the want or need-satisfying picture, the greater the urgency to act—the more motivated one becomes. In this case, the motivation may translate into giving a stern lecture, administering some sort of punishment, making a polite request, or launching a threat perhaps. It is hoped that one, any, or all such behaviors would have a positive impact on the conduct of the son. If the son changes his behavior and acts more maturely and responsibly, then the parent gets what he wants. Experience teaches us, unfortunately, that the behaviors chosen to "control reality" may not necessarily be successful. The son may buckle down and straighten up, but maybe not. The alternatives presented to the son may not be need-satisfying for him and consequently, he may choose to ignore all of the behavioral strategies used to try to change what he's doing. In this case, in order to get what the father wants, he will have to come up with a behavioral strategy that is more satisfying to the son and allows both of them to get more of what they desire.

Now, insofar as people's chosen behaviors successfully get them what they want, they are in more effective control of their lives. To the extent that their chosen behaviors do not get people what they want or need, they are in less effective control of their lives. Either way, people are always "controlling"—that is to say, acting upon, arranging, organizing, and trying to effect change in their environments in order to satisfy their basic needs. In therapeutic situations, individuals often seek help because they are largely unable to satisfy their desires. As my earlier example suggested, parents can often lament the behavior of their children.

When our existing behavioral repertoire comes up empty in terms of getting us what we want, then new behaviors must be organized. With respect to our immature and irresponsible son, if threats and punishment don't work in "controlling" him, then other behavioral alternatives like "honest talk" or "sharing of feelings" might have to be considered and discussed with a counselor. What is ultimately done to satisfy one's wants is ultimately the individual's choice. Of course, continuing to choose what does not work is counter-productive to living a need-satisfying life.

On this note, it is worth pointing out that Glasser changed the name of his theoretical paradigm, which serves as the foundation for reality therapy, from "control theory" to "choice theory" in 1996 to reflect its clinical and educational use. Glasser wanted to emphasize the idea that human behavior is a choice. (Wubbolding, 2000) Clearly, there are also some unfortunate negative connotations associated with the notion of 'control.' But remember, by control, Glasser certainly does not mean coercing others to do as one wishes—though it is possible that some people may try doing this in efforts to get what they want. What Glasser generally means is that people try to regulate their behavior in need-satisfying ways and do the best they can to get what they want, however productive or unproductive, crazy or useless, that behavior may seem to others at any given time. As psycho-biological organisms, we are always genetically instructed to satisfy our basic needs. We must behave or act upon the world to accomplish this task. It is in this respect that we are either in less or more effective control. For Glasser, we are constantly trying control reality to get what we want.

While there's much more to "control theory" or "choice theory" than I've discussed here, enough has been covered to explain some of its practical therapeutic applications. Robert Wubbolding, an associate and long time colleague of Glasser, gives a particularly clear account of the reality therapy counseling technique captured in the acronym: WDEP. In actual practice, the process would not be as regimented and clearly sequential as presented here for explanatory purposes. Understanding that, let's see what the process comprises. The elements are as follows: First, the "W" stands for "want or wants." In counseling, the client often presents problems and complaints about others in their life. Often much blame is cast and many dissatisfactions are raised. Appreciating that blaming, criticizing, and complaining do not usually lead to need-satisfaction, the reality therapist eventually asks the client or patient in response: What do you want? This can come as quite a shock to someone who thinks that others are the source of their problem and that changes in them will solve it. Understanding the fact that one person cannot "control" the life of another, the reality therapist likes to bring things back to the client. Of course the therapist helps the client to articulate particular wants so that they have a clearer "picture" of what they're looking for.

Once wants are established, the client is asked to identify what it is that they're actually doing to get what they want. Plainly, the "D" stands for "doing." Now, after the client or patient becomes self-aware in terms of their chosen behaviors, the therapist asks: Is what you're currently doing helping you or hindering you from getting what you want? This is the evaluation component captured by the "E." Finally, if it's the case that current behaviors are not working, then the client is encouraged to plan new behaviors for successful achievement of stated wants—"P." If it's the case that getting what one wants is impossible (e.g., finding love and belonging with deceased family members), then new possibilities for love and belonging must be explored. New "pictures" of what would satisfy that basic need have to be developed. In short, the client needs a new plan of action. The basic need itself doesn't disappear. The problem is that some people get stuck in their lives because they keep trying to go back to old ways of satisfying their basic needs. When this is impossible, like in the example just given, severe depression and hopelessness can result because no alternatives seem to be available to get one's basic needs met. This fact brings to mind a couple of other important elements of choice theory and its applications to reality therapy.

First, reality therapy focuses on the present and to a lesser extent, the future. People either are, or are not, getting their basic needs met now. If they are, no problem; then they are in greater or more effective control of their lives. If they are not, however, they must examine what they're presently doing and figure out why what they're doing isn't working. Perhaps it will be necessary to do the same things a little bit differently in the future; or, it may be necessary to find better and completely different alternative behaviors to take more effective control. Whatever the case, this is all a matter of personal choice. Whether their behavioral strategies are effective or not, people are always "controlling" the present reality they create.

Still another important component of choice-theory/control theory involves its rejection of stimulus-response behavioral psychology. Glasser does not accept the notion that stimulus events necessarily determine behavior in any cause-and-effect fashion. He believes that we all have free choice about how to act or respond in any given situation. He very much advocates personal responsibility and refuses to let people dwell in the past or use the past as a defensive rationalization for what they're doing right now in their lives. What has happened is over. The past cannot be changed. So, Glasser advocates that we move forward focusing on the present, something over

which we do have greater control. Even if one was mistreated and didn't get what one wanted or needed in the past, one still has the free "choice" to live a need-satisfying life now. Appropriate action can be taken. Planning new actions, engaging in them, and evaluating their outcomes in terms of personal wants is what conventional reality therapy is all about. Putting people in effective control of their lives is the ultimate end.

Criticisms of Conventional Reality Therapy

The most serious problem with William Glasser's choice theory deals with its central notion of 'basic needs.' The criticism I wish to make is that his list is arbitrary, incomplete, and reductionist. On top of this, Glasser is inconsistent with respect to how he conceptualizes basic needs in the first place. In what follows, we'll first examine the arbitrary nature of Glasser's list. We'll also expose his inconsistencies and tendency to be reductionist. We'll also see how by failing to deal with wants and needs in the context of any individual's internal existential psychodynamics, therapists using Glasser's approach are liable to send their clients down self-defeating paths of behavioral change. Oftentimes, all that is really accomplished by helping people get their 'basic needs' met is a perpetuation of their own insecurities. As we'll see, a program like Glasser's, which ignores higher order values and spiritual concerns, is seriously flawed. Not all behavior is motivated by the need to rectify deficiencies.

To begin, anyone interested in matters of psychology and human motivation might be intrigued by the list of basic needs produced by Glasser, but still be curious as to exactly how he arrived at it. The needs, as listed, present a certain face validity, but one would nonetheless expect some sort of empirical support or rational justification for them—that is, if one were going to build, like Glasser, an entire system of counseling and psychotherapy using them as a theoretical foundation. Shockingly, a careful reading of Glasser's works, including his seminal book entitled, *Control Theory: A New Explanation of How We Control Our Lives* (1985), reveals that no adequate scientific or rational support is provided. In one place, he writes:

Through a careful examination of my life, I have come to believe that I am driven by five needs that together make up the forces that drive me. While lecturing, I have discussed these with thousands of people, and almost all agree that they are driven by the same needs. As I describe them, examine your own life and see if you are driven by these needs. I believe you will find that you are, because it is likely that all creatures of the same species are driven by similar forces.

From the quotation above, we see that Glasser is certainly guilty of fallacious reasoning. He uses his own personal experience of what "motivates him" or "drives him" as evidence that others are likewise motivated. A sample of one does not permit empirical generalization. Admittedly, this hasty conclusion does not go entirely unsupported. Personal anecdotal evidence, stemming from conversations with members of his own lecture audiences, is also used to support his position. However, such evidence is clearly unacceptable again. It's quite possible that those attending Glasser's lectures—often paying customers—were drawn to him for whatever personal or professional reasons and were thus more inclined to agree with Glasser at the outset. In this case, Glasser's informal survey would suffer from a biased or skewed sample. Perhaps it was their like-mindedness that drew audience members to his lectures in the first place and gave rise to their agreement about

basic needs. The point is that Glasser's beliefs and his personal anecdotal evidence are neither rationally justifiable, nor scientifically, empirically, or statistically acceptable to prove his case. His list of so-called basic needs constitutes little more than a personal, arbitrary selection.

In claiming that Glasser's basic needs' list is arbitrary, I don't wish to suggest that humans are not ever driven or motivated by the things he says. Common experience informs us that normally functioning individuals need care, love, and a sense of belonging in their lives. We all seek our own survival and like to enjoy freedom and fun. Some of us might even be inclined to accept such things as central, or at least highly important, to our lives. As for power, while not everyone wants to be the boss, exert control over others, or take charge, it probably goes without saying that personal empowerment is a good thing. Virtually everyone likes to feel in charge of their own lives and not submit to the will of others who would have their way with us. So, my second criticism is not that Glasser is entirely wrong about what motivates people; the problem is that his list is incomplete. What's meant by 'basic' is also a little troubling, as we soon shall see.

The incomplete nature of Glasser's list can be illustrated if we take a look at what some other historically well-known and respected motivational theorists have had to say on the subject of human behavior. For instance, the limitations and inadequacies of control theory or choice theory psychology can be revealed by looking at the work of Abraham Maslow. In his now classic book entitled, *The Farther Reaches of Human Nature* (1976), Maslow distinguishes between what he calls deficiency-motivation ("D-motivation") and being-motivation ("B-motivation"). The former works like Glasser's thermostat. When the individual detects a "deficiency" of some sort (e.g., dehydration), he or she is "motivated" to act in order to rectify the situation (e.g., by drinking liquids). Something is wrong, as it were, and needs to be fixed. In response to biological and psychological deficiencies, hungry people are motivated to eat and insecure people are motivated to achieve, please, or impress. Generally speaking, people with average to below average mental health are motivated by D-motives. Their behavior aims primarily to gratify lower level requirements.

By comparison, healthier and higher functioning individuals—so called self-actualizing individuals—have their basic requirements of life met and suffer from fewer lower-level deficiencies. As a consequence, they are moved by "meta-needs" or higher-order needs, ones different than those listed by Glasser. It might be more accurate to say that meta-motivations are not based on any conception of needs at all, but on "values". For Maslow, highly functioning people don't live their lives preoccupied with efforts to reduce tensions or rectify deficits—as is the case for Glasser. They are not "controlling" the environment around them to satisfy basic needs which at any moment could go unfulfilled. Rather, they aim to enrich and enlarge their experience of life.

Values and positive ideals can and often do provide the impetus for action. The motivating force could even be spiritual in nature, emanating from one's inner guidance, something like Socrates' Daemon, or the Voice of the Holy Spirit calling out to us. Priests and nuns with religious "vocations" understand this concept very well. To have a religious vocation is to be called into service by some higher power for some higher purpose. Whether religious or not in any particular instance, Being-motivation often contains an element of self-transcendence—going beyond oneself and one's psychological ego.

A quick look at Maslow's list of meta-motivations reveals that the first three are Truth, Goodness, and Beauty. We can imagine scientists, philosophers, moralists, and artists, for instance, moti-

vated by such things. He also includes in his own list of B-Values the meta-need of Unity or Wholeness—little doubt a motivating factor for the mystic. We also find Justice, quite likely a motivational factor for many social activists. For Maslow, actions that are motivated by such values reflect the psychology of self-actualizing individuals. They are higher-order in nature or, as Maslow suggests by the title of one of his books, they reflect *The Farther Reaches of Human Nature*—not what's primitive, instinctual and basic.

Another thinker whose research points to higher-level motivations is Viktor Frankl. An existential psychiatrist, he argues that the 'will-to-meaning' is the basic motivational force in life. For proof, he points out that people who have lost all meaning in their lives are often prepared to commit suicide. A life without meaning is not a life worth living for some individuals. Thus, Glasser's 'survival' takes a back seat to meaning-fulfillment. The will-to-meaning can be more "basic" than the desire to live. What good is fun, freedom or power, or even life itself, if they all mean nothing in the mind of the person who has all such basic needs met? Take many Hollywood celebrities for instance; money and fame can buy them a lot of power (influence), fun (parties), freedom (travel) and friends (belonging), yet it is precisely these self-indulgent super-stars, who are getting their 'basic needs' met, that are ending up in addiction rehabilitation centers. Getting what they want or believe they need does not put them in effective control of their lives; quite the opposite. The fact that their wants are being satisfied is precisely the problem. The lesson is that sometimes getting what you want is the worst thing that can happen.

Unfortunately, reality therapy offers no general normative guidelines for when, if ever, it's good to deny oneself want or need satisfaction. Implicitly, the normative position seems to be that anything that satisfies basic needs and helps one to feel in effective control is good. When others' rights and needs are respected, it's only for purposes of reaching compromise so that everyone in this case gets as much of what they want. Moral sacrifice, altruism, and self-denial don't appear to be part of Glasser's program, unless of course such things are empowering, fun, freedom-enhancing, survival-ensuring, or a way to promote a sense of belonging.

Not only is it serious that Glasser leaves out matters of meaning with respect to human motivation, but it's curious that happiness doesn't show up either. While philosophers such as Aristotle, Jeremy Bentham, and John Stuart Mill would each have their own understanding and definition of the term itself, all would agree that some form of happiness is of paramount importance to life. People are motivated to be happy and to do those things that will make themselves happy and promote happiness in others. What good is all the power and freedom in the world if one is still left unhappy? It's possible to have all of Glasser's basic needs met, yet still be miserable and dissatisfied. In this case, the "lack" is not strictly biological, physical or genetically based, but arguably spiritual in nature. Viktor Frankl (1986) actually has a term for this generalized dissatisfaction or spiritual emptiness, as it were; he calls it an existential vacuum.

For Frankl, it is through a process of self-transcendence that one ultimately finds meaning in life. Living strictly to satisfy one's own needs is a morally and psychologically bankrupt proposition for him. It is when individuals move beyond themselves or when they invest themselves in others or in a cause greater than themselves that they find happiness, meaning, and peace of mind. A life solely devoted to getting everything one wants is, for Frankl, a life destined for depression and existential despair. The fact that reality therapy does not incorporate happiness into its scheme or the

kinds of spiritual, existential, and self-transcendent concerns raised by logotherapy serves again to underscore its rather limited and incomplete picture of human motivation. (Where are Mill's 'higher pleasures'? Where are Aristotle's 'moderation' and 'virtue'—without such things, the good life is arguably difficult to achieve.)

The works of Frankl and Maslow certainly deserve much greater discussion and critical analysis in the context of reality therapy than I have provided. For my purposes here, suffice it to say that meta-motivations dealing with B-values like Truth, Beauty, Goodness, Happiness, Meaning, Justice, and Unity or Wholeness point to motivating values and existential concerns falling well outside what conventional reality therapy is properly equipped to deal with. Without an inclusion of these value-based being motivations, Glasser's list of basic needs is sorely inadequate to capture the full spectrum of what makes humans behave the way they do. Of particular concern here is the fact that the B-values missing in Glasser's scheme are likely what most interests philosophical counselors.

It is important to get past lower-level needs and wants, for to cater to them would be to prolong one's metaphysical malaise. Let's suppose, for example, that you're someone who wants more notice from your fellow workers. You may need their attention to feel good about yourself. When you earn their notice you feel important. Now, let's suppose you strategized with your therapist as to how you might increase this attention and let's also assume you planned and successfully achieved your goal in this instance. You and your reality therapist might regard the situation as one in which you gained more effective control of your life by fulfilling to a much greater extent your basic need for power. Yet, in this case, you might end up doing yourself more harm than good. The reason is that your want may be based on deep-rooted insecurity, which causes you to crave the approval of others. If you don't come to terms with the deeper existential issues surrounding your own sense of self-worth, getting what you want isn't helpful and certainly doesn't place you in more effective control of your life. Your happiness "depends" on the notice and opinions of others—opinions over which you have no control. If your life is all about performance, production, and image, then you will always be scrambling to prove to the world that you are important by virtue of your successes. The greater the need to provide this proof to the world, the more unhappy you are. For one's own sense of well-being, we all need to acknowledge and live by the higher value of unconditional self-worth. Others don't need to notice us to establish our existential value.

Thus, encouraging individuals to produce behavioral plans which feed their own sense of insecurity or deficiency is self-defeating in the end—certainly unhelpful, and more than likely detrimental to any client's psychological hygiene. Without an acknowledgment of higher B-motivations, those beyond the concerns of the insecure ego-personality, conventional reality therapy risks perpetuating the very distress and dissatisfaction it seeks to alleviate. However much someone gets what he or she wants (e.g., praise, promotions, and pre-eminence), peace of mind will still elude the successful, highly recognized, but insecure individual.

Surprisingly, Glasser's writings suggest that he might be prepared to allow for an expanded understanding of motivation or what might be called motivational diversity and not require that we all view everyone's behavior in terms of his arbitrary and limited list of basic needs. In *Control Theory* (1985), he writes:

It is not important to the thesis of this book that I establish with any certainty what the basic needs are that drive us. To gain effective control of our lives, we have to satisfy what we believe is basic to us and learn to respect and not frustrate others in fulfilling what is basic to them. All you will ever know is what drives you, just as I will know only what drives me. We cannot look into other people's heads and see what drives them. We can listen to what they tell us and look at what they do, but we should not make the mistake of assuming that we know what drives them.

The problem with Glasser's statement above acknowledging "motivational diversity"—something which comes later in *Control Theory*—is that it contradicts what he says earlier in the same book. On the one hand, Glasser quite clearly and explicitly makes the claim that basic needs are all biological and genetically programmed, including psychological needs, (as discussed already), while on the other hand, he waffles on the certainty of what the basic needs are that drive us. As he suggests above, you and I could have different drives. If the need for fun is "genetically programmed," however, it is not optional or a matter of personal choice. We don't need to look into people's heads. If it is "biologic," as he claims, and part of human nature, then it must drive all of us, not just some of us.

Another problem with Glasser's recognition of "motivational diversity" stems from the fact that it makes him guilty of a second inconsistency. On the one hand, his inability to establish "certainty" vis-à-vis his list of basic needs leads him to say that we cannot know for sure what drives others; we can only know what drives us. However, notwithstanding his admitted lack of certainty, and his admission that we can't read other people's minds about what motivates them, Glasser (1985) writes:

I hear frequently from people who claim that there is just one universal need: the need to know. They claim that this single need underlies everything: All of our behavior is initiated by this need to find out more and more about the world around us. I don't deny that knowing about the world, and ourselves as part of it, is important, but I don't believe this is a basic need and that we try to know just for the sake of knowing any more than I believe that people climb mountains just because they are there ... Ask your neighbor if he would like to join you in learning to read Chinese, and if he can't wait to start, I will believe the need to know.

On the subject of religion, Glasser (1985) continues:

Others argue that religion, or the holy spirit inside us all, is the single need from which all others are derived. This may be, but there is no hard evidence that this is the case for many people ... The bulk of the evidence is that for many, religion may be a basic need, but it is unlikely that it is any more the basic need than the need to survive.

In fairness to Glasser, he's objecting in these passages to the notion that there's only one universal need from which all others are derived. He doesn't believe 'truth' or 'religion' are primary, and in the case of the latter, any more basic than survival. Fair enough. But on the topic of the need to know, Glasser (1985) draws an analogy with mountain climbers suggesting the real reason they climb is for power, fun, freedom or companionship, not to find out what's on top. The corollary is that people don't really pursue knowledge for its own sake, but that there's some further end at stake as with the mountain climber.

Now, the problem for Glasser is that he's reading the minds of people whose minds cannot be read, if we take him at his word, at least. Remember what he said, All you will ever know is what drives you, just as I will know only what drives me. So, on the one hand, Glasser is doing what by his own admission is impossible. Second, he's discounting the need to know and trying to reduce it to his original list of basic needs—the needs for which he has no solid justification or proof. These are the ones that must simply be a reflection of “what drives me,” as he puts it. On top of all of this, he admits that what's ‘basic’ to one person may not be ‘basic’ to another person. In other words, his list of basic needs may be basic to him, but not to others. If one accepts this premise, then the need to know may indeed be basic and intrinsically valuable for some people and not reducible to any of Glasser's five basic drives. The fact that your neighbor doesn't wish to learn Chinese with you doesn't mean he or she isn't interested in learning about philosophy or insects, or how engines work. As for religion, some people choose to value faith above life, suffering torture or even death at the hands of their persecutors. Survival is not the overriding motivating consideration in the martyr's choice. It is secondary to belief.

The point just made calls into question again the “basic” nature of Glasser's ‘basic needs.’ What some might consider the most basic need, survival—that without which fun and freedom are impossible—does not always take priority with respect to some people's motivations. It can have a “secondary” importance. So, Glasser's basic needs cannot be properly regarded as basic in terms of their significance.

Moreover, there's the problem of “means versus ends.” One could ask whether basic needs are intrinsically valuable, self-sufficient, and collectively ultimate or not. Presumably, ‘wants’ serve as a means to achieve those ultimate ends. Wants are infinitely variable, while basic needs remain the same for all of us—that is, when Glasser's not contradicting himself. For Glasser, when someone wants more money, say, the real reason is that they want the freedom, power, fun, or the sense of belonging that money can buy. Money is a means to an end and not an end in itself. Fun or power, in this case, is intrinsically valuable, while money is instrumentally valuable.

The problem, however, is that Glasser's basic needs could easily be acted upon for instrumental purposes as well. An individual might believe, for example, that living a lifestyle of fun and freedom, will make them happy. It's fun to live a life of consumerism and self-indulgence. Some might believe that getting everything they want and doing whatever they desire whenever they so choose will produce happiness. In this case, which is not so unimaginable, the person seeks fun and freedom for the sake of happiness, not the other way around. Happiness takes on intrinsic value, while fun and freedom become the instrumental means. One could also imagine somebody seeking power and authority at work, not because power is need-satisfying in itself, but because the power of authority contributes to ‘peace of mind’ with respect to job security. In this case, power is sought as a means to achieve peace of mind. Peace of mind is not sought for the sake of achieving power. Thus, Glasser's basic needs could turn out to be instrumental in nature for people in a variety of different situations.

We see, then, that Glasser's so-called basic needs can sometimes serve as nothing more than a means to an end and that these ‘basic’ needs can be considered of lesser or secondary importance to people other than Glasser. And also, in view of the fact that, self-admittedly, what drives him may be different from what drives you or me, all of this makes Glasser not only guilty of inconsistency,

as demonstrated earlier, but renders his entire notion of basic needs utterly illogical and confused. His arbitrary list of basic motivational drives is little more than a statement of personal preferences. There is no clear and consistent sense in which 'basic needs' are in fact basic. Hence, one can conclude that reality therapy rests on a faulty theoretical foundation that is incoherent. Its fundamental claims and conclusions regarding basic needs are arbitrary, not to mention empirically unverified, rationally unjustified, logically inconsistent, and internally self-contradictory. Whatever successes reality therapy has achieved have not come by virtue of its sound theoretical basis, but in spite of its desperately weak and confused conceptual framework.

So to conclude, a closer inspection of reality therapy's underlying theory has revealed a number of serious conceptual, logical, moral, and psychological problems—ones that make the approach clearly unacceptable for philosophical practice. Indeed the problems are so great that its value to the broader psychotherapeutic community should be called into question as well. For philosophical practitioners, a program that is not only internally inconsistent to the point of incoherence, but limited by its inability to deal with existential, metaphysical, normative, and spiritual concerns—those that include higher-order values and motivations—is certainly not one worthy of adoption and use. Dealing with such things is arguably what philosophical counseling is all about. Care of the soul, worldview interpretation, existential analysis, Socratic dialogue, and spiritual work—these are all things of central concern to philosophical practitioners. They all entail philosophical self-reflection on matters falling largely outside the realm of motivational drives stemming from genetically programmed basic biological needs and instincts for survival. While Glasser's emphasis on personal responsibility and self-control sounded promising for philosophical practitioners at the beginning of this discussion, his theoretical account turns out to be unacceptable in the end.

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Shakespeare on Grief
Reading *Richard II* from the Perspective of a Philosophical Counselor¹

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Abstract

Grief is one of life's most intense emotions, and can be a reason an individual would seek philosophical counseling. In this article, I show how literature can be an effective means of helping a client gain a deeper understanding of the source of grief. This article focuses on a passage from Shakespeare's *Richard II*, showing how one of the principal characters, Bushy, serves as sort of philosophical counselor for Queen Isabel.

Keywords: *grief, counseling, Shakespeare, literature*

Grief as a Cardinal Issue of Philosophical Counseling

Grief is one of life's most intense emotions. It is something we all experience sooner or later, especially when we lose a person who is very close to us, a close relative, an intimate friend, a lover. In grief, our inner world is turned upside down; we lose our sense of orientation and, in the worst case, our will for life. Therefore, the ability to overcome grief proves to be a significant competency for a successful conduct of life.² Has not happiness for this reason been defined by Epicure (*Letter to Menoecus*) as absence of grief and pain? The Epicurean and Stoic virtues of 'aponia' [absence of pain] and 'ataraxia' [absence of turbulence], may well sound somehow untimely or even distant for modern individuals, but are nowadays not less important than in their origins because—by making virtues out of the exclusion of pain and grief—they show in an implicit but not less clear manner how important for life confronting grief is.

No wonder, then, that grief has always been an important issue in counseling and therapy. Grief is also one reason why people seek the advice of a philosophical counselor. Philosophical counseling can function complementary to psychotherapy in order to enhance the therapeutic effect, but not necessarily. We can also think of someone who does not experience grief as an acute problem needing a treatment, but nevertheless would like to examine it from a philosophical perspective. In this case, his motivation would rather have to do with gaining insight or a better self-understanding. That is the primary concern of philosophical counseling that differentiates it from other counseling and therapeutic paradigms.

One way to confront grief is to sing it out, to write it down, and to make it art; grief has been a constant topic of literature. Among others, we can recall Sophocles' *Electra*, Rilke's *Requiem for a Friend*, Emily Dickinson's poem "I Measure Every Grief I Meet," C.S. Lewis' *A Grief Observer*, and Julian Barnes' *Levels of Life*. This article shall consider just one of the many examples of how grief may be expressed in literature in order to examine its methodological relevance for the work of a philosophical counselor. For this reason, I attempt a close reading of a passage from Shakespeare's *Richard II*.

The dialogue excerpt we are going to discuss addresses grief in a manner that qualifies itself as a literary text that may be useful for philosophical counseling. Philosophical counseling is based to a certain extent upon the wonder of language and, therefore, it cannot or should not ignore literature as school of language. Literature is the art par excellence that broadens our linguistic horizons. In this respect, literature is important for the self-education of philosophical counselors, helping them to refine the language of their practice and sharpen their judgment.

Some Remarks on Literature and Philosophical Counseling

How can a work of literature be of use for a philosophical counselor? This question presupposes an intimate relationship between literature and philosophy. As art condenses experience, literature offers us an ideal opportunity to reflect on emotions and learn how to deal with them. In our encounter with literature, we constantly experience emotions. Literature is a discourse that 'lives' from emotions—and especially very intense ones—from its beginnings. We just need to remember Homer's epics. Both have a very intense emotion as their starting point in medias res, as if this emotion were the coordinator of the plot: Achille's fury in *Iliad* and Ulysses's longing in *Odyssey*.

However, how do we experience emotions in literature? Mostly, in a double way. On the one hand, we experience our own emotions towards the literary text. On the other hand, we anticipate the emotions of the fictional characters as they unfold, e.g., inside the plot of a novel. We experience emotions as feelings. So, we feel how a lyrical 'I' in poetry or novel or drama characters feel.³ However fictitious literary emotions may be, they are not less true than emotions in real life. Of course, they are not emotions of people in flesh and blood, like you and me. Nevertheless, in our culture, we are raised learning to ascribe the status of persons to literary characters.⁴ We feel as if we had interactions with people in flesh and blood, and this hypothetical structure of the classic transcendental philosophy makes a great difference.⁵ Moreover, if literary emotions were not somehow real, we would not have been able to be so intensely touched by them. In sum: literary, abstract, or fictional emotions transcend their fictional status. They function as a mirror of our Self. They sharpen our self-awareness and our awareness of others, and they enhance our ability to empathize.

As a place where emotions are manifested, literature is of the utmost importance for philosophical perspectives on emotions. According to Elridge (2009), "Philosophy and literature as forms of attention are [...] modes of seeking orientation and clarification of commitment and emotion and both begin within a specific, situated point of view". This remark applies largely to the philosophical counseling process, where empathy and the inquiry into emotions play a key role.

Below, I shall read the second scene of the second act of Shakespeare's History *Richard II* as an example of philosophical counseling. My claim is that we encounter there all the basic components of a dialogue of philosophical counseling. I start with a few notes on the play and quote then the dialogue in full.⁶

About the Play

Richard II belongs to those Shakespeare's historical plays known as Histories, whose subject comes from Early British history. The play is about the last years of King Richard II (1367-1400), who ruled Britain from 1377 until 1399. For its lyrical qualities, *Richard II* is considered by many critics the most moving of Shakespeare's Histories.

Putting Grief into Words

Our scene is located in the second act. At the beginning of the second scene, Queen Isabel mourns Richard's absence on the Irish expedition. Richard has left England at a time in which his reign is unstable. The Queen feels that something terrible is going to happen to her King, that there is a tragic destiny lurking. Bushy, one of Richard's most devoted followers, seeks to console the Queen.⁷ His words sound like those of a philosophical practitioner discussing the feeling of grief with a client.

SCENE II. The palace.

Enter QUEEN, BUSHY, and BAGOT

BUSHY

Madam, your majesty is too much sad:
You promised, when you parted with the king,
To lay aside life-harming heaviness
And entertain a cheerful disposition.

QUEEN

To please the king I did; to please myself
I cannot do it; yet I know no cause
Why I should welcome such a guest as grief,
Save bidding farewell to so sweet a guest
As my sweet Richard: yet again, methinks,
Some unborn sorrow, ripe in fortune's womb,
Is coming towards me, and my inward soul
With nothing trembles: at something it grieves,
More than with parting from my lord the king.

BUSHY

Each substance of a grief hath twenty shadows,
Which shows like grief itself, but is not so;
For sorrow's eye, glazed with blinding tears,
Divides one thing entire to many objects;
Like perspectives, which rightly gazed upon
Show nothing but confusion, eyed awry
Distinguish form: so your sweet majesty,
Looking awry upon your lord's departure,
Find shapes of grief, more than himself, to wail;
Which, look'd on as it is, is nought but shadows
Of what it is not. Then, thrice-gracious queen,
More than your lord's departure weep not: more's not seen;
Or if it be, 'tis with false sorrow's eye,
Which for things true weeps things imaginary.

QUEEN

It may be so; but yet my inward soul
Persuades me it is otherwise: howe'er it be,
I cannot but be sad; so heavy sad
As, though on thinking on no thought I think,
Makes me with heavy nothing faint and shrink.

BUSHY

'Tis nothing but conceit, my gracious lady.

QUEEN

'Tis nothing less: conceit is still derived
From some forefather grief; mine is not so,
For nothing had begot my something grief;
Or something hath the nothing that I grieve:
'Tis in reversion that I do possess;
But what it is, that is not yet known; what
I cannot name; 'tis nameless woe, I wot.⁸

In this scene, which is, due to its lyrical intensity, one of the most famous of *Richard II*, the Queen puts into words her grief.⁹ At the beginning, it seems that the reason for her grief is the departure of a beloved husband. Were it so, we could easily identify the intentional object of grief, the absence of a beloved person, if we consider that Richard departs in order to join a war, a reason that would be sufficient to cause grief to a young queen in love. That is, however, not the case. The grief of Queen Isabel goes beyond the grieving for Richard's parting or even for his parting for a war, or fear for his life. The Queen has a presentiment of it, since she asks herself whether the departure is the reason or something more, concluding that the second option is true.

However, this feeling is not clear. It is a grief not really born; it is the fear of an "unborn sorrow, ripe in fortune's womb". It cannot really be named, "tis nameless" woe. The grief of the Queen confronts us with a major issue concerning the nature of emotions: intentionality. The issue of intentionality has initiated an intense discussion among scholars studying the field of emotions. Emotions are intentional in the sense that we are sad because of something but at the same time not merely because of that 'something', since far more than that is involved. The inability to articulate emotions adequately has to do with their complex nature and the cognitive elements at work being mixed together with their ineffable character.¹⁰ As Nietzsche (1999) wrote:

In what way does feeling convey itself? In part, but only in small part, it can be transposed into thoughts, which is to say, into conscious representation; this of course only applies to the part made up of the accompanying representations. But in this area of feeling there always remains an indissoluble residue. It is only the dissoluble part that language, which is to say, concepts, has anything to do with [...]¹¹

Namelessness is a concurring feature with intentionality, since emotions belong to the inner core of the self.

The Portrait of a Royal Follower as a Philosophical Counselor

Bushy's words remind us of the work of a philosophical counselor, in a very Early era of European culture in which a King's counselor had to unite many roles in one person, e.g., secretary, diplomat, spymaster general, personal coach or spin doctor (just to mention the most important ones). Bushy's words not only prove his eloquence, but they also seem well thought out from a modern counselor's methodological point of view. In a historical context, it is also important to mention that Shakespeare wrote his plays in the 16th century, an era of humanism, in which Stoic and Epicurean philosophy enjoyed immense popularity among the educated classes—we need only to remember Montaigne.¹²

The first steps of Bushy's approach seem to have a phenomenological character; he is trying to encounter the Queen's grief as it appears to her, as she perceives it in her consciousness, as a phenomenon. For this reason, he engages one of the most important methodological tools of philosophical counseling: epoché (suspension of judgment).¹³ In order to observe the movement of the grief and ask about its intentionality, he has to put shortly in brackets all background information.¹⁴ Then, he examines how the mechanisms of grief are at work, how grief takes hold of us. In addition, he asks what grief is, and this is the main issue of a philosophical dialogue, to contemplate on the nature of things or, to use an expression of Ran Lahav (1996) concerning the methodology of philosophical counseling, he raises the philosophical issue. His words are articulated in dense verse with striking clarity:

Each substance of a grief hath twenty shadows,
Which shows like grief itself, but is not so;
For sorrow's eye, glazed with blinding tears,
Divides one thing entire to many objects;
Like perspectives, which rightly gazed upon
Show nothing but confusion, eyed awry
Distinguish form.¹⁵

Bushy neither wants to give a lecture, nor to offer a philosophical decryption of grief. His primary concern is to console the Queen. As a man of scholarship and experience he succeeds in saying, to remember Schopenhauer, uncommon things with common words. What strikes us here are the metaphors Bushy engages. At least since Hans Blumenberg's *Paradigms for a Metaphorology* (1960) and his theory of absolute metaphor, we cannot ignore that metaphors are almost as important as terms, sometimes even more so. Metaphors are most significant in philosophical counseling, because they articulate complex states of mind where terms often fail and through familiar analogies from everyday life, they make concrete what may seem abstract in theory.¹⁶

The metaphors Bushy employs are both strong and familiar. They have a strong effect because they are taken from everyday life, like the eye as a popular metaphor for the soul. Grief is described by the image of tears disturbing the clear view of the eye. Through grief, the eye sees everything deformed. Grief divides things into diffuse perspectives.¹⁷ Our judgment gets distorted. Instead of substance, we encounter shadows, whereas the contrast between substance and shadows does not only serve rhetorical purposes, but should be thought, as it is often suggested, analogically to the Platonic ideas and illusions.¹⁸ When we are sad, everything seems sad, even the most beautiful

things, or especially these because they remind us of happiness and harmony far removed from our current state. Therefore, it is crucial to accept that the temporary deformation of our view a natural effect of grief.

Understanding how a mental condition works may be a first significant step to overcoming grief. The consciousness of the grief mechanism is, first, relieving in itself and, second, it prepares the ground for a certain distance. It assures that we have some control, however out of control we may feel. The awareness of this feeling equals perhaps a minimum of control, but an essential one because it prepares the ground for a first step towards the overcoming of this situation, or at least, at a balanced state of mind that Marinoff (1999) calls 'equilibrium' or a state that Nietzsche (2002) would probably have perceived as 'pathos of distance', meaning "new expansions of distance within the soul itself, the development of states that are increasingly high, rare, distant, tautly down and comprehensive."

Nevertheless, what is the reason for the Queen's grief? If we consider what has already happened in the play (the exile of Bolingbroke, the unjust seizing of his father's lands, King Richard's departure at a difficult time) and what is yet to come (Richard's return, his imprisonment and tragic end), this specific incident of Richard's departure is certainly not the sole reason for the Queen's grief.¹⁹

The reason for the Queen's grief is what seems to be an irrefutable presentiment, the anticipation of the political and personal tragedy that is going to follow. Both Bushy and the Queen know that, being closer to the King than anybody else is. This evidence allows us to state that the Queen's grief has strong cognitive components, since emotions are within a wide consensus-considered complex and multidimensional states of mind. She is a witness to the unstable character of Richard's reign and the threatening potential of Bolingbroke's banishment.

Nevertheless, at the moment our scene takes place, we do not know how the play will end despite the clues.²⁰ However unmistakable intuition may seem to be, originating as it does in the inner soul, what truly matters is to regulate the emotion of grief, which is both a symptom and a sign of this deeper knowledge. What Bushy wants to say to the Queen could be summarized as, "Mourn the absence of your king, for the time being, and nothing more; for you do not know what is to come. You cannot predict the destiny." The destiny of Richard's reign at that stage of the play's unfolding is not yet decided.²¹

Now, let us see how a philosophical counselor could engage with our passage in a philosophical counseling session about grief. We could sketch some possibilities: (a) The counselor could use some of the metaphors from Shakespeare's passage for the sake of clarity, and see whether the counselee is responsive to them. (b) The counselor could eventually read the passage with the counselee in a quasi-bibliotherapeutic manner (that would be a nice possibility if the counselor knows from the preliminary talk that the counselee loves literature). (c) The counselor could address some more systematic aspects found in the passage, the phenomenological unfolding of grief or the distortive perspectivism grief creates, and discuss philosophical theories about grief. In sum, the counselor could integrate aspects of the passage in a broader philosophical context using a theory or a philosopher as point of reference. (d) The counselor could discuss about different types or even typologies of grief asking for example: Is grief always negative, isn't there a good or positive grief as well?

(e) The counselor could ask if there is something behind the grief. To give an example: Don't we find behind the Queen's grief care as 'basic disposition', 'grounding' or 'fundamental attunement' [Heidegger's Grundstimmung] concerning our relations with other people? As we see, there are a lot of possibilities to discuss, depending always on the individual character of each case.

Epilogue

The short analysis of the grief passage of Shakespeare's *Richard II.* provides an example that literature can be, to use the words of von Morstein (2011), a teacher for philosophical practice [Lehrmeisterin der philosophischen Praxis].²² As every good teacher does, literature opens a large space for possibilities. The corpus of literature is an infinite resource for the philosophical practitioner because of enormous variety concerning human issues. Philosophical practitioners not only receive various impulses for their work, but also gain important methodological insights. In this respect, literature can be used as a reference point for methodological approaches since literary intuitions are often very dense forms of philosophical or even scientific insights. As we have seen, the dialogue of Bushy and the Queen confirms a phenomenological approach of dialogue in the framework of philosophical counseling. The importance of literature for philosophical practice lies in both the self-education of philosophical counselor and its methodologically supportive value. Since, as Szafraniec (2007) remarks, "literature does not exorcise the universal for itself but negotiates an intersection of the singular and universal within itself as a singular work."

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Notes

1. The author would like to thank the anonymous reviewers for their helpful comments.
2. See Seel, M. (1994) Glück. In Hastedt, H., & Martens E. (Eds.), *Ethik. Ein Grundkurs*, Reinbek: Rowohlt, 145-163.
3. The importance of literature for the philosophy is not only underlined by the aesthetics field usually termed philosophy and literature, but mainly by the hotly discussed topic if literature is a better philosophy. There are many arguments for and against. The main argument for literature lies in the life-like paradigmatic role of literary narration opposed to the abstract discourse of philosophical theories. This discussion is fruitful because this antagonism just shows that literature and philosophy are complementary practices and forms of attention. For this discussion see the standard reference work of Elridge, R. (Ed.) (2009). *The Oxford Handbook of Philosophy and Literature*. Oxford: Oxford University Press.
4. One needs only to remember the reactions of the London readers of the *Strand Magazine*, when in 1894 Sir Arthur Conan Doyle published the *Final Problem*, the story in which Sherlock Holmes dies in the *Falls of Reichenbach*. The public went berserk because the writer 'killed' their beloved hero, and it was the public pressure that led Conan Doyle to 'resurrect' him, despite the fact that authorial preoccupation with the Sherlock Holmes stories hindered the rest of his literary production. Or, to take an earlier but no less popular example, that of the *Three Musketeers*: we are reminded of Alexandre Dumas père who felt as if he had lost a good friend, when Porthos, the musketeer, with whom he could most readily identify himself, dies in the last pages of the *Vicomte of Bragelonne*.
5. 'As if' is a transcendental structure of the subject, which is very important for the construction of the world-view. This Kantian category was made popular by the German Neokantian philosopher Hans Vaihinger and his work *Philosophie des Alb-ob*. See Vaihinger, H. (1924). *The Philosophy of 'as If'*, trans. C.K. Ogden. Routledge: London.
6. I use the following edition: Wells, S. (2011). *The Oxford Shakespeare. Richard II*. Oxford University Press: Oxford.
7. The historical person, Sir John Bushy was a member of the Regency Council overseeing England during Richard's absence in Ireland. Cf. Wells, S. (ed.) (2011). *Richard II. The Oxford Shakespeare*. Oxford University Press: Oxford. 132 f.
8. Wells, S. (2011). *The Oxford Shakespeare. Richard II*. Oxford University Press: Oxford, 183 ff.
9. Grief is one of the main motifs of *Richard II*, as scholars have often pointed. See e.g. McMillin, S. (1984). Shakespeare's Richard II. Eyes of Sorrow, Eyes of Desire. *Shakespeare Quarterly*, 25 (1), 40-52; Daniel, D. (2013). *The Melancholy Assemblage. Affect and Epistemology in the English Renaissance*. New York: Fordham University Press, 233-234.
10. This has also to do with the time, in which emotions take place, emotions appear very quickly. When we perceive them as feelings, we perceive only a part. The German word for feeling 'Gefühl' emphasizes that, in terms of temporal sequence, when we register something as an emotion it has already been felt.

11. Note that Nietzsche uses feeling and emotion interchangeably. The word in the original text is ‘Gefühl’, used in German for both feelings and emotions. The word ‘Emotion’ in German comes much later in a rather metatheoretical discourse.
12. See Lopéz-Peláez Casellas, J. (2004). The Neo-Stoic Revival in English Literature of the Sixteenth and Seventeenth Centuries: An approach. *Sederi* 14, 93-115.
13. The concept of epoché developed by the ancient Sceptics means the suspension of judgment, the avoidance of saying ‘it is’ in favor of ‘it appears as’ It was later adapted by Husserl and the phenomenology. Epoché is considered a methodologically very important stage of the philosophical dialogue in the framework of philosophical counseling.
14. Intentionality is a main concept of phenomenology. It means that something is directed to something else in the framework of consciousness. It is also a key issue in the study of emotions. See e.g. Goldie, P. (2002). Emotions, feelings and intentionality. *Phaenomenology and the Cognitive Sciences* 1(3), 235-254.
15. Wells, S. (2011). The Oxford Shakespeare. *Richard II*. Oxford University Press: Oxford, 184.
16. For a detail account of the concept of absolute metaphors, see Blumenberg, H. (2010). *Paradigms for a Metaphorology*, trans. Robert Savage, Ithaca, NY: Cornell University Press.
17. This passage is read from the perspective of the 16th century optic science, and it is associated with the anamorphic perspective, which was a popular optic novelty. See Shickman, A. (1978). The “Perspective Glass” in Shakespeare’s *Richard II*. *Studies in English Literature 1500-1900*, 18 (2), 217-228. For a Lacanian reading of this passage see Žižek, S. (1989). Looking awry, October, 50 (1), 30-55. I am grateful to Jasmin Mersmann from Humboldt University, Berlin, for informing me about Žižek’s article. Žižek associates the grief not with the person of the Queen but with the King and, hence, supports the notion of Isabel as the “mystical warrant for Richard’s legitimacy”, as Howard and Rackin (1997) state.
18. Cf. Shakespeare, W. (1980) *King Richard II. König Richard II. Englisch-deutsche Studienausgabe. Deutsche Prosafassung, Anmerkungen, Einleitung und Kommentar von Wilfrid Braun* (Francke: München), 116.
19. This scene is not the only one with the prophetic knowledge of Richard’s fall. In the previous scene, John of Gaunt articulates a national prophecy. Cf. Wells (2011), 183.
20. On the other hand, the play is in a formal sense defined by Richard’s postponed return to England. Had he only returned a day earlier from Ireland, he would have found the Welsh army, and then things might have taken a different course in his favor.
21. Indeed, at that point of the plot nothing has been yet decided. It is not yet known that Bolingbroke has returned and assembled an army.
22. von Morstein, P. (2011). Literarische Kunst: Lehrmeisterin der Philosophischen Praxis. *Jahrbuch der IGPP* 4, 33-42.

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**The Distance between Spending and Spent
On Manic Consuming, Hoarding, Expending, and Other Visions of Excess**

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The Copernican revolution which Freud thought he was inaugurating, by showing that the human ego is not even master in its own house, is not complete until the human ego is forced to admit another master, the Dionysian principle of excess. –Norman O. Brown 1990

Abstract

The purpose of this article is to discuss a methodological approach of including a patient's normative historical context as part of the customary background information, and to consider the productive value of locating our clinical work within the less obvious, perhaps counter-intuitive world of a general economy. To that end, I depict a patient's life history, the treatment relationship, and the ceremonial life of pre-capitalist societies as all isomorphic with one another. I seek to determine if this is a stage upon which we as practitioners can locate ourselves and each other amidst the inevitability of our excesses in order to critically expend our customary practice of consolidating our patients and ourselves.

Keywords: *Bataille, capitalism, hoarding, bi-polar disorder, Freud*

“I never want to see you again...I despise you. Not just unprofessional, you're evil. First you seduced me and then wouldn't sleep with me. What possessed me to want to sleep with you, you cad? I've had many therapists but you have proven to be the worst...I should report you for the loser you are. Find another profession you son of a bitch!”

With these words Judy terminated our treatment relationship that consisted of multiple 45-minute sessions each week continuously for twelve years. Of course this was not our first falling out but over time her explosions grew more intense, more adamant, and more overtly threatening with an expressed intent to destroy.

My efforts to personally withstand these tirades led me to conceptualize them as evidence of manic depression, more conventionally referred to today as bi-polar disorder. Indeed this diagnosis had followed Judy since her teen years. For her entire adult life she experienced this label as deeply offensive, inaccurate and stigmatizing—especially when she was 'high'; conversely, she experienced the same classification as tragically accurate and hopeless when coming down off a high. So there existed a striking relationship between her frequent manic states and her rejection of the psychiatric nosology that classified this euphoria as pathological and dangerous. By the time Judy and I met she had engaged and rejected the professional services of several mental health clinicians and had also tried and rejected several psychiatric mood stabilizing medications such as Lithium, Depakote, and Lamictal, to name but a few. At the outset of our work together she adamantly declared that she would no longer utilize mood stabilizing medication as part of her treatment. In fact, a condition upon commencing our work was that I would conduct the psychotherapy along classical

psychoanalytic lines, perhaps a wish based on her idealized late father's career as a psychoanalyst. In other words, she insisted upon a 'talking' procedure.

Judy's initial adamant disavowal of any psychiatric attribution and accompanying medication (conventionally prescribed for mania) was continuously reiterated despite or because of the apparently strong correlation between her behavior and the defining criteria of bi-polar disorder according to the description in the *Diagnostic and Statistical Manual of Mental Disorders*, Fifth Edition of the American Psychiatric Association (DSM5) (2013: 123-9):

The essential feature of a manic episode is a distinct period during which there is an abnormally, persistently elevated, expansive, or irritable mood and persistently increased activity or energy that is present for most of the day, nearly every day, for a period of at least 1 week (or any duration if hospitalization is necessary), accompanied by at least three additional symptoms from Criterion B.

The aforementioned Criterion B of either the Manic or Hypomanic Episode varieties of bi-polar disorder consists of the following:

1. Inflated self-esteem or grandiosity.
2. Decreased need for sleep (e.g. feels rested after only three hours of sleep).
3. More talkative than usual or pressure to keep talking.
4. Flight of ideas or subjective experience that thoughts are racing.
5. Distractibility (i.e. attention too easily drawn to unimportant or irrelevant external stimuli), as reported or observed.
6. Increase in goal-directed activity (either socially, at work or school, or sexually) or psychomotor agitation (i.e. purposeless non-goal-directed activity).
7. Excessive involvement in activities that have a high potential for painful consequences (e.g., engaging in unrestrained buying sprees, sexual indiscretions, or foolish business investments). (DSM5, 2013, p. 124)

While all of these criteria were predictably, persistently, and cyclically in evidence with Judy, I will focus on only the last point, that is, the excessive involvement in activities such as "unrestrained buying sprees"; this being especially pertinent to the development of the treatment as I understood it. During the history of our work together, her excessive buying included the impulsive purchase of a guitar and guitar lessons, a bicycle (rarely if ever used), dog-walking services, a professional office space (despite not having an active professional vocation), clothing, cosmetics, airline tickets, driving courses (though she had no car and never drove otherwise), extensive apartment renovations and furniture, gourmet take-out dinners, jewelry, season subscription tickets to a variety of performances, multiple additional psychotherapists and a psychiatrist—all of whom she routinely visited concurrent with our treatment relationship, etc. (It is important to note that Judy spent prodigiously despite holding only part-time employment for nominal wages at best during most of our time working together.)

However, the greatest part of these shopping sprees was reserved for the purchase of gifts, which were given continuously and seemingly indiscriminately to anyone in her social realm (including her dog). I was given all manner of items. As per our agreement, in typical psychoanalytic fashion

I initially attempted to work with the spending and gifting flings through the developmental experience of Judy's body. Freud (1908), Abraham (1921), and Ferenczi (1914) all suggested a derivative relationship between gifts and feces and described the anal character along with the fate of toilet training in general as fundamental to the attitude and behavior associated with presenting and receiving gifts. In this vein I assessed her need for my approval and blessing of her generosity as a veiled wish for praise over a good elimination. Yet regardless of how I framed my concern for her spending, I appeared to Judy and myself as withholding, overly parsimonious and even envious of her carefree spending sprees. This perception of me as a killjoy would eventually and perhaps necessarily flourish into a major aspect of our relationship.

Buying and gifting material objects represented only one aspect of how Judy spent copiously without discrimination. After some time in treatment she discovered through a third party that I was divorced. This prompted a profuse and intense onslaught of appeals for a romantic liaison with me through poems, recorded music, prepared food items, and other gifts. Her openly stated intention, indeed her newly established purpose for being in treatment was to seduce me. While it is practically expected that a patient develops loving feelings toward his/her analyst (see Freud 1915 on erotic transference) and even encouraged and employed in the service of the treatment, any hint of colluding or acting on these feelings by the analyst is potentially traumatic. My failure to comply with Judy's wish to commence a romantic relationship had the surprising effect of invoking the memory of her father's abrupt death—a pivotal event as an early teen that shortly preceded the onset of her manic cycles. To the extent that my refusal to have sex with her foreclosed on a fantasy, it was reminiscent of the earlier loss and in turn triggered a compensatory manic high transcending the pain of that loss (see Freud 1917 on mania related to mourning and loss). Again, asserting my professional, ethical boundaries based on the Hippocratic Oath to 'do no harm' simply felt to her like a cold-hearted rejection from a prudish stick-in-the-mud.

In deference to Judy's adamant demand that I not reduce her euphoric experience to another uncontrollable manic episode, I sought to focus on her dismay at having to give up such exalted and exuberant feelings; I empathized with the pain she endured in losing a loving relationship with her father, in losing her youth, in coming down from her highs, in leaving Paradise so to speak; but all to no avail. She tolerated my dynamic interpretations, or perhaps more accurately, my failure to sanction her highs as legitimate experiences unto themselves, as well as she could yet she did not relent. Rather, the intensity and frequency of the gifts, poems, and songs (sometimes sung) increased.

Months and months of dozens and dozens of frustrating sessions left me questioning my need for Judy to change and behave differently, particularly as she insisted she was not endangering herself in any way and that the problem I wanted to 'help' her with was my own. Was she correct, was my diagnosis driven by latent moral judgment? If so, it behooved me to identify and address the basis of my own moral values. Capitalist society, my society, spawns, inculcates, and demands its own moral code—one which equates conserving with cleanliness, asceticism, and a virtuous life; certainly a Puritanical code with regard to spending versus conserving. Moreover, it is a code in which the accumulation of capital is fundamentally equated with the accumulation of grace (Weber, 1948; Tawney, 1962). My endopsychic focus based on the psychiatric medical model of the DSM V had a moral tone to it; one that obfuscated the role of the socio-economic and socio-cultural contexts that are increasingly thought to play a crucial role in the etiology of manic-depression (see Martin, 2007 and Jamison, 1993).

Suppose I were to expand the customary analytic inquiry into the patient's developmental history to include the normative historical context for ecstatic spending? In what world did Judy's behavior make sense? In order to understand the exceptional position of ecstatic spending in a larger social context I turned to the work of social philosopher Georges Bataille. Referencing pre-capitalist societies Bataille (1933) introduced his 'notion of expenditure'. As Stoekl (2007) summarizes, "The theory itself is quite straightforward: living organisms always, eventually, produce more than they need for simple survival and reproduction. Up to a certain point, their excess energy is channeled into expansion...but inevitably the expansion of a species comes against limits: pressure will be exerted against insurmountable barriers." Regarding these limits, Bataille (1988) states "life suffocates within limits that are too close; it aspires in manifold ways to an impossible growth; it releases a steady flow of excess resources, possibly involving large squanderings of energy. The limits of growth being reached, life, without being in a closed container, at least enters into ebullition. Without exploding, its extreme exuberance pours out in a movement always bordering on an explosion." According to Bataille's own peculiar anthropological vision, these 'limits of growth' are manifest both in the taboo systems general to our society as well as in my particular profession and this inevitable 'pouring out' takes on the form of the taboo's transgression: "There exists no prohibition that cannot be transgressed. Often the transgression is permitted, often it is even prescribed." (Bataille, 1986: 63).

Regarding the importance of this transgression, Bataille cites the historic example of the spectacular potlatch ceremony of the Northwest American Coast Kwakiutl community. This now-outlawed relic of pre-capitalist economic life occurred around changes in social status (e.g., weddings) and other events affecting two or more families—in short, around social growth. The potlatch centrally featured a ceremonial establishment of rank and respect based on an exchange of goods, each one greater than the other, each 'generous' gesture intended to defy the ability of the other to reciprocate. In other words, a warring with gifts. "The behavior which was required of the chief was arrogant and tyrannical to a degree...The great social check that acted to keep his activity within limits they phrased as a moral tabu: the tabu on overdoing...Society set limits, though the limits seem to us fantastic." (Benedict, 1959: 195) Indeed, Benedict characterizes the Kwakiutl as Dionysian as she describes the unmoved indifference of a chief setting his own home on fire in an extreme gesture of loss beyond reciprocation, thereby shaming his guests while retaining or acquiring the highest respect and social status. (Ibid: 193)

With this pre-capitalist, pre-modern portrait of economic life, Bataille moves us beyond an individualistic, ethnocentric focus to a consideration of a universal process informing widely divergent behaviors across several cultures of our species, affecting even the ways in which we theorize ourselves. The Bataillean theoretical 'explosion' inverted the capitalist emphasis on utilitarianism, functionality, and conservation for preservation and survival with a perspective that privileges non-utilitarian production of excess in order to spend. Thus, his theorizing subsumes and elucidates other cognate theoretical notions. Specifically, Bataille's 'ebullition' is derivative of the notion of 'collective effervescence', a term coined by Emile Durkheim to describe a universal social pattern (in *The Elementary Forms of Religious Life*, 1995, a text highly influential for Bataille, see Richman, 2002). For Durkheim, collective effervescence was one aspect of a bi-polar social pattern that, like the potlatch, characterized the ceremonies of pre-modern aboriginal life.

Working off the ethnographies of early missionaries, he references, among others, the corroboree, an aboriginal nocturnal dance festival of the Warramunga tribe of Central Australia in which women are exchanged (Spencer and Gillen, 1899: 96-7); and the Jeraeil, an aboriginal nocturnal dance festival of the Kurnai tribe of Southeast Australia, in which boys are separated from their female relatives and initiated into manhood. (Howitt, 1904: 617) The first phase of these ceremonies given over to profane production and economic activity “is generally of rather low intensity” (Durkheim, 1995: 217); the other phase concerns the social gatherings for sacred ceremonial or religious purposes that are non-productive or non-economic and would by contrast be considered as occurring at high intensity: “The effervescence often becomes so intense that it leads to outlandish behavior; the passions unleashed are so torrential that nothing can hold them. People are so far outside the ordinary conditions of life, and so conscious of the fact, that they feel a certain need to set themselves above and beyond ordinary morality.” (Ibid: 218) In the case of the corroboree this entailed what we would conventionally describe as excessive, licensed promiscuity accompanying the exchange of women.

Moreover, the potential ‘explosion’ Bataille suggests may also be seen as synonymous with the ‘discharge’ associated with crowds. Canetti (1993) states,

The most important occurrence within the crowd is the *discharge*. Before this the crowd does not actually exist; it is the discharge which creates it. This is the moment when all who belong to the crowd get rid of their differences and feel equal...In that density, where there is scarcely any space between, and body presses against body, each man is as near the other as he is to himself; and an immense feeling of relief ensues. It is for the sake of this blessed moment, when no-one is greater or better than another, that people become a crowd. (pp. 17-8, author’s emphasis)

Bataille’s (1933) own examples of non-productive expenditure help to further elucidate the privileging of excess through the principle of loss. In addition to the aforementioned potlatch ceremony, he cites: “luxury, mourning, war, cults, the construction of sumptuary monuments, games, spectacles, arts, perverse sexual activity (i.e. deflected from genital finality)—all these represent activities which, at least in primitive circumstances, have no end beyond themselves.” (p. 118) However, the preeminent form of loss or discharge that a crowd can express is the act of sacrifice. Sacrifice is the penultimate form of gifting; it is a solution to the excessive surplus that has reached a limit to growth; it is the explosion. It is gifting propelled by “a certain power which forces them to circulate, to be given away” (Mauss 1967:41); it is that particular type of discharge that serves equally as a “release.” (Hubert and Mauss, 1964:32-3)

Bataille elaborates:

The problem posed is that of the expenditure of the surplus. We need to give away, lose, or destroy. But the gift would be senseless (and so we would never decide to give) if it did not take on the meaning of an acquisition. Hence *giving* must become *acquiring a power*. Gift-giving has the virtue of a surpassing of the subject who gives, but in exchange for the object given, the subject appropriates the surpassing: He regards his virtue, that which he had the capacity for, as an asset, as a *power* that he now possesses. He enriches himself with a contempt for riches, and what he proves to be miserly of is in fact his generosity. (1988: 69, author’s emphases)

The loss implied in giving becomes an acquisition of power, a power to surpass the subject, a power that is proportionate to the *non-productive* value of the gift given; an irredeemable loss.

From this vantage point Judy may now be reconsidered—no longer as merely difficult and self-destructive, but perhaps as determined to *transgress* the taboo structure that manifested as this therapist's therapeutic "frame" (see Langs, 1990); an effort to divest, spend, or lose herself, thereby acquiring a peculiar type of power (over the reductionist and pejorative appellation of psychiatric patient). Similar arguments could be made for the purging of bulimics, the hair-pulling of trichotillomania, cutting or self-mutilation, and even overt suicidal behavior. What we have labelled masochism, generally speaking, reads differently within the general economy of Bataille versus what Holt (1989) describes as the closed and resolved hydraulic system of Freud. The general economy suggests a different system with a different dynamic—collect to spend; a different type of collecting but especially those varieties of collecting only weakly rationalized as utilitarian when actually, ultimately, the collecting is *in order* to spend.

Again, the case of the aforementioned potlatch ceremony is an instructive comparative precursor to modern expressions of non-productive expenditure:

The accumulation of everything needed for the ceremony could take from one to four years. (Kan, 1989: 43)

Many of these were material things, named house-posts and spoons and heraldic crests, but the greater number were immaterial possessions, names, myths, songs, and privileges which were the great boast of a man of wealth. All these prerogatives...were owned for the time by an individual who singly and exclusively exercised the rights which they conveyed. The greatest of these prerogatives, and the basis of all others, were the nobility titles. (Benedict: 1959: 183)

Every Kwakiutl individual entered this economic system from the moment they were given a name as a baby. Throughout life and through several potlatch ceremonies marking individual and social growth through all of life's transitions, "A person of any importance changed names as snakes changed their skins." (Ibid: 185) Although characterized by a different pre-capitalist notion of property and wealth, the potlatch successfully functioned as "a validator of status [and] a distribution of property." (Suttles, 1991: 105) Above all, it was *circulatory*. Through it, religious and economic life are integrated. And within this circulatory potlatch ceremonial system the driving force of sacred expenditure was contingent on a Kwakiutl version of hoarding, or what Durkheim referred to as the profane life of production.

The fifth edition of the DSM issued in 2013 establishes hoarding as a formal psychiatric diagnosis for the first time. It reads:

The essential feature of hoarding disorder is persistent difficulties discarding or parting with possessions, *regardless of their actual value*...The main reasons given for these difficulties are the *perceived utility* or aesthetic value of the items or strong sentimental attachment to the possessions...Some individuals feel responsible for the fate of their possessions and often go to great lengths to avoid being wasteful...virtually any item can be saved. The na-

ture of items is not limited to possessions that most other people would define as useless or of limited value...*Approximately 80-90% of individuals with hoarding disorder display excessive acquisition.* The most frequent form of excessive acquisition is *buying*...Individuals with hoarding disorder typically experience distress if they are unable to or are prevented from acquiring items.” (p. 248, emphasis added)

Hoarding is one side of the bi-polar quality of a general economy affecting all organic life. Considered alone, it is the result of a singular focus on productivity despite Bataille’s claim that “[h]uman activity is not entirely reducible to processes of production and conservation, and consumption must be divided into two parts...the minimum necessary for the conservation of life and the continuation of the individual’s productive activity in a given society [and] so-called unproductive expenditure.” (1985: 118) Without its complementary expenditure, hoarding, the *sine qua non* action of capitalism, ironically assumes a character now thought to be pathological. However, more than a sickness of collecting, the hoarder suffers from an obsession with utility that doubles as a nearly phobic regard for expenditure.

This material utility is limited to acquisition (in practice, to production) and to the conservation of goods ...But even when he does not spare himself and destroys himself while making allowances for nothing, the most lucid man will understand nothing, or imagine himself sick; he is incapable of a *utilitarian* justification for his actions, and it does not occur to him that a human society can have, just as he does, an *interest* in considerable losses, in catastrophes that, *while conforming to well-defined needs*, provoke tumultuous depressions, crises of dread, and, in the final analysis, a certain orgiastic state. (Ibid: 116-7, author’s emphases)

Hence, effective clinical treatment involves the resolution of this constipation by the purgative cure of non-productive or *useless* spending (see the last five minutes of every episode of the reality show “Hoarding: Buried Alive”). With a change in accent, this portends a newly imagined potential for capitalistic investment and divestment; for acquiring *and* charitable giving or tithing—for giving as a ‘therapeutic’ sacrifice, as with the ‘turning it over to a higher power’ that purportedly liberates the addict from the buying and consuming of substances, and for psychoanalysis. Although this author limited himself to the suggested contrast between a treatment conducted along classically Freudian analytic lines (as per the patient’s request) and a Bataillean perspective privileging notions of excess, psychoanalysis in any of its early or late permutations does not, by definition, escape the vagaries of a closed economy. Its hope for the future lies in its transgressive potential, once so important in its early establishment though now reduced, at best, to serving productive ends as a minor player in a growing mental health training industry (for a treatment of transgression as a foundational aspect of resentment in psychoanalysis see Buse, 2006).

Judy’s excessive buying and gifting, drinking binges, and explosive expressions of rage and love are unmitigated expressions of this bi-polar quality of existence; a survival of a long forgotten life cycle that, activated by trauma and early loss, reemerged undomesticated and unfit for a society that shamefully forbids and hides waste. In our closed economic and moral system that emphasizes redemption through productive usefulness, “the necessity of throwing oneself *out of oneself* remains the psychological or physiological mechanism that in certain cases can have no other end than death.” (Bataille, 1930: 67) Ultimately, the most extreme act of love, beyond sexual union,

was for Judy to annihilate me, to sacrifice our relationship and decimate us, our relationship, her view of treatment, her learned conventional notions of health and mental health, as well as her own previous positive regard for me (whether this be referred to as attachment, erotic transference, or love) all in one fell swoop.

In conclusion, I am left alone, cut off from any hope of reciprocity, trying to get 'closure' through a rational explanation that would redeem the months and years of passion and rancor that characterized our relationship—an exercise that will prove futile until I too can 'surpass the subject'.

With this essay, through a critical re-examination of clinical data in the light of Bataille's notion of expenditure, I am suggesting a productive value to locating our clinical work within the less obvious, perhaps counter-intuitive world of a general economy. To that end, I have tried to depict Judy's life history, our treatment relationship, and the ceremonial life of pre-capitalist societies as all isomorphic with one another in that particular bi-polar quality that characterizes an economy that privileges expenditure over production. If this narrative of misunderstanding/re-understanding Judy has any productive value within such a general economy, if it is to be more than another gratuitous effort at having the last word, then it is only as a preface, an opportunity, a stage upon which we can locate ourselves and each other amidst the inevitability of our excesses in order to critically expend our customary practice of consolidating our patients and ourselves.

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Book Review

Jules Evans, *Philosophy for Life and Other Dangerous Situations. Ancient Philosophy for Modern Problems*, New World Library (Kindle Edition). 2013. ISBN: 9781608682294. 304 pages.

REVIEWED BY NANCY J. MATCHETT
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When Jules Evans graduated from university he was an emotional wreck. Despite a good job and an Oxford degree, he was suffering from panic attacks “and didn’t feel [he] could talk about what was going on inside [him]” (2). Five years later he was diagnosed as suffering from social anxiety, depression and PTSD, but aside from giving new names to his problems, psychotherapy wasn’t providing much help. While researching on his own, he discovered that Cognitive Behavioral Therapy (CBT) could perhaps treat his problems. So he joined a local CBT group and they worked through a pirated workbook together (there was no therapist present). Those weekly meetings began to help; Evans “stopped having panic attacks ... and started to get more confident in [his] ability to reason with [his] violent emotions” (3). He also noticed that many of CBT’s ideas and techniques reminded him of things he had learned about ancient philosophy back in school.

In *Philosophy for Life and Other Dangerous Situations*, Evans explores the philosophical roots of CBT in particular, and psychotherapy in general. A recurrent theme is how Evans himself benefitted not just by following the behavioral techniques of cognitive therapies, but by studying the underlying philosophical ideas—one might even say truths—that help explain why those therapies work. Subtitled *Ancient Philosophy for Modern Problems*, the book also documents ways in which other individuals and small communities are “rediscovering” and being helped by philosophies first articulated by Greeks and Romans centuries ago. Along the way, Positive Psychology and other scientific approaches to well-being are aptly criticized for constructing methodological edifices atop many of those same ideas, yet ignoring the process of philosophical inquiry that is part and parcel of their practical value. The result is both an exercise in—and extended defense of—what Evans unabashedly calls “philosophical self-help.”

The book is organized as a single day at Evans’s “dream school“ (Preface). For me, this didn’t quite work. Though my Kindle says it took just over 6 hours to read, Evans himself is keen to emphasize that the kind of learning he is after often requires repeated practice in order to transform the patterns of reasoning into habits. Moreover, the voice is clearly Evans’s own throughout, and he tends to gloss over significant philosophical disputes that would surely arise in the break-room if not also the lecture hall. For someone interested in those debates, Anna’s *Morality of Happiness* (1995) or Nussbaum’s *Therapy of Desire* (1996) would be a better read. Still, Evans does not pretend his philosopher-mentors agree about everything (what they share is “an optimism in human rationality, and in the ability of philosophy to improve our lives” (Preface), and he does provide enough detail to help readers identify the concepts and patterns of reasoning most likely to be of help in their own case. In this respect, the tone of the book is quite similar to Botton’s *Consolations of Philosophy* (2000) or Marinoff’s *Plato Not Prozac* (2009) and *Therapy for the Sane* (2004), and it is no surprise to learn that Evans collaborates with Botton at the London-based School of Life (www.thechooloflife.com).

The dream school approach does provide a sensible organizational scheme. After a “Morning Roll Call” where readers are introduced to Socratic teachings about the importance of dialog and the value of an examined life, there are three main parts. The “Morning Session” focuses on Stoic techniques for helping individuals take charge of their emotions. In the “Early Afternoon,” Mystics and Skeptics show how personal philosophies are informed by wider ideas about the cosmos. And the “Late Afternoon” discussions are centered on the complex interplay between individual and societal values and beliefs. Evans can’t pass up the chance to talk about “Savoring the Moment” with Epicurus over lunch (this is a signal that he does not find the philosophy of rational hedonism to be as compelling or plausible as the rest). And he concludes with a Graduation ceremony, again led by Socrates, which takes seriously the idea that philosophy is training for death (here Evans is much more sympathetic).

In each of the twelve chapters Evans pairs a contemporary figure with a Greek or Roman philosopher in order to showcase a specific philosophical “art.” Several of the contemporaries are fairly well known, but some are not. And while some came to live by a specific philosophy only after reading a classic text, others have adopted philosophies quite similar to one of the ancients, yet appear to have developed those worldviews, or at least stumbled upon their central ideas, more or less on their own. In Chapter 6, for example, we meet Apollo 14 astronaut Edgar Mitchell, and the philosopher Heraclitus, while being introduced to the “Art of Cosmic Contemplation.” Mitchell was overcome by a “deep ecstatic experience” as he travelled back to earth from the moon, and his desire to make sense of that experience led him to found the Institute of Noetic Sciences dedicated to “exploring and promoting the expansion of human consciousness” (100). It’s never quite clear whether Mitchell has read Heraclitus, but his life does seem animated by the thought that some kind of Logos governs and links human beings and the whole of nature. In Chapter 12, by contrast, we are introduced to a thirty-four-year old from Dallas, TX named Alexander, who is paired with Plato and a lesson on the “Art of Justice.” As a young man Alexander apparently “searched far and wide to try to find something more to believe in than capitalism” (169); he eventually came to read Plato, whose ideas he found “far superior” to anything else. Alexander is not exactly an elitist (though he does say, “Most people are not intellectually and emotionally available to put all their thoughts on the table” (171), and is definitely not angling to become a philosopher king (he works as an operating room nurse). But he does get together regularly with “The Platonists of North Texas,” a small meet-up group he founded in an effort to “try to comprehend the Whole” (171).

Academically minded philosophers may find the book to lack rigor in argument and explanation. Yet to criticize the book for this reason seems a little unfair, since Evans “doesn’t consider [him]self a philosopher, but rather a journalist who is curious about how people apply these ancient ideas in modern life” (22). The writing is lovely throughout, and Evans is at his absolute best when describing the personal histories of both contemporary individuals and ancient philosophers. That Rhonda Cornum’s psyche survived the experience of being sexually assaulted by an enemy soldier, in the back of the moving pickup truck transporting her to a hostile military camp, when she was suffering from a bullet in her shoulder, two broken arms and a torn ligament in her knee (the result of her plane being shot down), while her fellow soldier (also injured) could do nothing but watch, might well seem implausible to many, yet Evans renders her character both believable and, while remarkably Stoic, not at all cold (pp. 24-7). His summary of the slave-life of Epictetus (the corresponding philosophical figure in Chapter 2) is equally riveting and sympathetic, and these stories are interwoven with numerous other examples of how the “Art of Maintaining Control” can help

any of us “steer our way through the worst situations” (27). Though I found the formulaic chapter structure a bit tedious toward the end, it is skillfully deployed. Evans quite effectively shows, rather than tells, what it is like to live a life animated by each of the philosophical arts he takes up. With the possible exception of Pythagoras’s “Art of Memorization and Incantation” (Chapter 7), he also shows how each art depends on a particular way of conceptualizing human nature or the relationship between self and world.

Evans is also quite good at linking ancient philosophy with contemporary psychology, and it is when he uses what psychologists call “evidence-based” practice that his own arguments are most convincing. A primary example occurs in Chapter 1 (Socrates and the Art of Street Philosophy). Evans knows that many people are dubious about the ability of philosophy to bring about meaningful, practical change in people’s lives. But in response to psychologists inclined to suggest that too much of human decision-making is unconscious and automatic for us to ever “know ourselves,” he cites the voluminous evidence that cognitive therapies really do help people both to identify the “toxic” beliefs that drive problematic behavior, and to replace those beliefs with different and more positive ones. And to those scientifically minded critics who doubt that individuals can change their own habits (on the grounds that we are the products of social conditioning, brain chemistry or genetics), he cites the growing evidence from neuroscience that when we use reason to change our beliefs, this rewires and hence changes our felt emotional responses too. But empirical evidence does not always provide the crucial premise: he also criticizes cognitive therapies for being content to teach new “thinking skills” without taking the distinctively philosophical step of reflecting on what counts as a “flourishing” life. Evans never quite explains how he distinguishes a philosophical argument from a scientific one (presumably he has the intuition that both empirical evidence and what he calls “thinking skills” are distinct from something like deeper conceptual truths). But he has little patience for Martin Seligman’s (2004, 2006) claim that “Positive Psychologists, armed with their clipboards and questionnaires, could finally tell us what really makes us happier, stronger, and more resilient” (211), and he is wary of governments that increasingly use Seligman’s research to “roll out a specific vision of the good life to their citizens, while also claiming they are not being morally paternalist” (212).

As a corrective to this trend, Evans hopes to inspire more “street philosophy,” which he defines as “forums where strangers meet up to discuss various philosophies without having to commit to any one” (12). This is another way in which the philosophical content of the book is somewhat thin. Evans is good about presenting the standard arguments for and against each philosophical viewpoint, and is clearly enamored with all twelve of his philosophical arts. When it comes to choosing among them, however, Evans is content only to show “that Greek philosophy offers us not one model of the good life, but several” (215). It is no easy trick to bring philosophy to a lay-audience without coming off as objectionably “opinionated” or all knowing. But I think books like Hadot’s *Philosophy as a Way of Life* (1995), Howard’s *Philosophy for Counseling and Psychotherapy* (2005), or Raabe’s *Issues in Philosophical Counseling* (2002) manage to do a somewhat more rigorous job.

Philosophical practitioners are unlikely to find any new insights about human flourishing here, yet there are at least three ways they might make use of the book: First and foremost, it can be read as a set of case studies (the book is peppered with real-world examples in addition to those presented at the start of each chapter), and mined for stories and patterns of reasoning that might help clients facing similar problems. Second, it could serve as an entry point for a course of bibliother-

apy, providing an accessible overview before diving into more primary texts. And third, one could simply hand the book to a stranger or friend, which would constitute a sort of indirect advocacy for philosophical practice. It is a compelling yet easy read. And despite some philosophical hand waving, Evans is convincing when he says, “We need to empower people to consider multiple approaches to the good life, and then to experiment, innovate, and decide for themselves” (216).

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Book Review

Victoria Sweet, *God's Hotel: A Doctor, A Hospital, And A Pilgrimage To The Heart Of Medicine*, Riverhead Books, New York, 2012. ISBN 978-1-59448-843-6. 416 pp.

REVIEWED BY SVETLANA CORREA
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San Francisco's Laguna Honda Hospital, probably the only remaining almshouse in the States, is the setting of this most beautiful and sorely needed book. The stories of its doctors, nurses, and patients are—as in any book truly worth reading—a mixture of the new, the already known, and the forgotten. By sharing her professional and life experience, the author has certainly enriched our lives. Through us, these experiences may also deepen and ennoble our practice.

Until only some forty years ago, there were many God's Hotels in this country. The name comes from the French word *Hotel-Dieu*, and in the Middle Ages, when it originated, it meant something like a hospital for the otherwise uncared for; mostly those too poor, or just with no one to take care of them. And that was the case even in the US until the middle of the last century. Chronically disabled men and women with no means would be cared for, sometimes spending several decades in these institutions. The ideal, born in the seventh century France, and still surviving at least there, has been that a society should take care of its sick poor.

In this book, Dr. Victoria Sweet tells a beautiful story of her own professional growth, as well as a more general and almost completely neglected story of the history of Western medicine. These two stories are—wonderfully—largely told through the stories of numerous patients and colleagues the author met. After becoming a doctor, Sweet looked for a position that would leave her some independence—both time and spirit wise. And that is how she stumbled upon this “gift” of a place. During the twenty years since she started, the author has also studied history and social medicine (spending time in Switzerland, studying Hildegard, among others). She has also witnessed the evolution of care at Laguna Honda: from the slow medicine institution (relatively low-tech and humanely paced) to what we encounter everywhere today, a health care facility seemingly more interested in everything except the care itself.

Let us hope that a book like this is going to be only the harbinger of numerous other ones like it. The author blends—but truly blends!—her knowledge with her experience, science with spirituality, the present state with the wealth of the past. Her argument for the urgent necessity of reversing the trend that has our medicine hijacked by the economic mismanagement, political messiness, and reductionism of medical science, is flawless. But her book is much more than that: she is a doctor and a human being passionate about restoring our humanity. Never sentimental, Dr. Sweet is most profoundly inspiring and moving. Her book offers a true hope by reminding us that medicine has always been, and should continue to be such in our erratic times, a sacred profession, done out of love and genuine care for the sick.

“Before I came to Laguna Hotel, I'd been convinced of the importance of scientific medicine; Miss Tod (a patient) convinced me of the importance of the little things.” No, the author never

questions the need for the contemporary medicine! She has, however, devoted both her life and work to reminding us that by itself, medicine as practiced today (at least in the West) is as arrogant as it is pathetically inadequate. Surgery and chemo do not cover all medical needs of a cancer patient. Miss Tod thrived when her doctor asked her, “Is there anything I can do for you?” The doctor herself also thrived after helping her patient receive the wished for tastier food and a new pair of glasses. And that is what care is: fulfilling those kinds of needs too. The same holds for philosophical practice: what clients value is not only the “successful” counseling, but also the whole “package”: that we as practitioners put our knowledge, our heart and our will to help into one single whole when we work with them. Without the latter two, our counseling is at best short lived, and at worst damaging.

Another aspect that philosophical practice has in common with the practice of slow medicine at Laguna Honda (at the beginning of Dr. Sweet’s career) is its luxury of independence. Unlike mainstream psychotherapy and medicine, which are so tightly regulated and directed by the Big Pharma, insurance, and legislation, Dr. Sweet’s institutional environment, at least during the first years of her work at the almshouse, was really good. She had it the way we (still?) have it as philosophical practitioners. The author could sit by the bedside of a patient, in healing silence, without being forced into the superficiality of the fast “care” imposed on the mainstream doctors today. We, the practitioners, can also choose among the seemingly infinite number of ideas in helping our individual clients with a seemingly equally infinite number of issues. Being young, at least in a certain way, philosophical practice is not forced to follow any manuals. Each client’s divorce dilemma is unique, and we can tend it in a unique way.

Dr. Sweet’s great teacher and inspiration has been Hildegard von Bingen, the twelfth century German nun and medical writer, among many other things. What pulled the author so strongly towards Hildegard was the latter’s gardener’s approach to the body—not mechanic’s or computer programmer’s. “With that numberless measure, (Hildegard) manipulated and rebalanced the environment inside of and outside her patient. She did so slowly, like a gardener, by fussing and fiddling, doing a little of this and a little of that. Then she waited to see what would happen. Which is to say that she followed the patient’s body; she did not lead.” (pp. 49-50) Again, we could make an analogy with counseling and learn from Hildegard: that every client’s wellbeing is also best served by tending it like a precious and unique plant. This approach also has its own timing: what one person can accomplish overnight, another might spend his whole lifetime doing. And, there is nothing wrong with either one! What is wrong is to apply pressure and impose an arbitrary deadline, instead of allowing “the tincture of time” to do its work.

During her two decades at Laguna Honda, the author also spent long periods of time in Europe, studying Hildegard’s work. Her perspective thus widened, she would notice on her coming back—even more piercingly—how she and the practice in the States have gone in two opposing directions. Her experience and new knowledge helped her realize that medicine no longer seemed so complicated.

There were not so many different things that could happen to a body after all. There were many ways that things could happen, but there were only a handful of organs and a handful of the mechanisms of disease ... (and thus) the complicated edifice of medicine seemed to collapse upon itself. I began to enjoy my patients and know that I enjoyed them and that they enjoyed me. Because I

didn't have to do very much, I knew now. With just a little bit on my part, my patients would get better. (p. 283)

And that has been exactly the experience that the author of this review has had over the years, practicing philosophy with her clients: there are only a handful of different problems and themes that bring men and women into our offices. And while knowing a lot is necessary, it is certainly not enough for a true counseling. It seems equally important to both feel and convey a genuine care and interest in the individual sitting in front of us. Also, there is something that my clients have, indirectly, led me to do: instead of thinking hard and fast about all the possible words of wisdom or ideas that could be of help, going through the philosophical councilor's "sources" in my mind, I discovered over time that more often than not, what is much more fruitful is to "just sit", as Dr. Sweet calls it, to sit for some five or ten minutes and listen to what will come. Then, our experiences being identical, "Something, somehow would happen. It would become clear what, if anything, was wrong with the patient and what, if anything, I could do about it." (p. 327) Sometimes, one could work from a place of quiet even in the midst of a quick conversation, while occasionally a five-minute silence would open a clear new path.

During her stay at Laguna Honda, inevitable changes did alter its practice of medicine. Gradually, the "anachronistic" aspects of care were replaced with more "efficient" ones. The head nurse whose only role seemed to be to be knitting blankets for her patients was removed as redundant. And as the author noticed, the redundancy was only in the eyes of the simple minded bureaucracy. "It was a lesson in the inefficiency of efficiency." Even from the economic aspect (and let alone human and social and moral ...) the new system was stressful. Instead of the "waste" of knitting, the number of injuries, falls, bedsores among the patients, as well as sick days and illnesses among the staff rose. What the author learned from the changes, and what she so lovingly and convincingly describes, is the efficiency of inefficiency.

In other words, she discovered "a connection between inefficiency and good care." What many have suspected all along, Dr. Sweet witnessed firsthand: the advertised "efficient" care pushed more and more aggressively, is no longer care. Management perhaps: "The practice of medicine had become the delivery of health care." (p. 282) When everything but medications, tests, and procedures is cut to the bone, what can we expect to happen? We are witnessing it right now, and more and more blatantly. There is no need to talk about that. When economists run the health care we can only expect one outcome: a human tragedy.

The author also recounts how, somewhat naively, she made one suggestion to her superior after the "efficiency" changes started to show deep flaws. Observing all the problems that were appearing since the budgets had to be watched, she noticed that in spite of all the talk, it would be not only better to practice slow medicine with her chronically ill patients, but also much less expensive. So she suggested that a two-year study be conducted at Laguna Honda, a study that would, she was almost certain, show the flaws of the new philosophy of health care. But she was naive. No one would conduct a study that would expose the lies. The answer she received was that the idea was "counterrevolutionary."

Reading this segment of the book, probably its heart and soul, a philosophical practitioner will learn many invaluable lessons. The stories of real men and women, stories about doctors, nurses,

and patients, speak more eloquently than any generalized theorizing. For example, the story of a Christmas celebration and the fun that made patients' lives so much more beautiful, meaningful, and thus healthier. This could be, hopefully, an invitation to read this wonderful book. To rejoice in all the "inefficiencies" done at that *God's Hotel*.

God's Hotel is truly a pilgrimage to the heart of medicine. Likewise, it can be a pilgrimage to the essence of our own profession of philosophical practice.

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Book Review

Denise D. Cummins, *Good Thinking. Seven Powerful Ideas That Influence the Way We Think*, Cambridge University Press, New York, 2012, hardcover. ISBN 978-0-521-19204-0. 199 pages.

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What do economists mean when they refer to you as a “rational agent”? What are the best ways to decide, argue and solve problems? Why is analogy at the core of human cognition? How can a psychologist label your idea a “creative insight?” And what about judging right from wrong?

Answers to these questions are rooted in the critical—and sometimes counterintuitive—concepts that experts use to make decisions. Their methods determine a number of relevant decisions: whether we are guilty or innocent, where we should invest our money, whether a drug effectively treats a particular illness, etc.

Denise Dellarosa Cummins—philosopher and psychologist—explores the way experts across various fields argue and deal with very challenging issues that directly impact our lives. Focusing on ideas and insights that profoundly shape the way people think and live, mainly in the Western world, her book goes into many relevant areas: cooperation and conflict, rational choice, moral decision making, truth-functional logic, causality, hypothesis testing, problem solving, cognition and analogical reasoning.

Experts—such as policy makers, writers, scientists, lawyers, teachers and so on—reason and make decisions in a variety of ways using a number of techniques, some legitimate and some not. But how should experts think and make decisions? Are experts good thinkers? As Cummins points out, despite their lengthy educations, experts are pretty insulated within their particular disciplines. So they are mainly used to looking at the world through only one pair of glasses (or one epistemic paradigm), instead of thinking interdisciplinarily and out-of-the-box.

There are models of reason that dominate Western thought and are the pillars grounding our ability to fly planes, build bridges, and create laws and democratic systems of government. These are outcomes of a painstaking process of reasoning, evidence evaluation, and learning from past mistakes. Observation and experiment, as well as hypothesis testing and causal reasoning or an argumentative approach, are valuable because almost everyone can appeal to the results, so they facilitate an attitude of open inquiry that grounds the scientific approach as well as the best professional practice (Albert 1968 and 1978; Bachelard 1972; Hayek 1982; Dewey 1910, 1916 and 1938; Lynch 2012; Morin 2008; Perelman & Olbrechts-Tyteca 1958; Popper 1945 and 1972; Rawls 1996; Nozick 1981; Rorty 1979 and 1989; Sosa 2009; Watkins 1984).

Given the fallibility of human reasoning, skepticism about the value of reason has emerged even within the scientific world (Feyerabend 2010). But Cummins endorses the idea that skeptical worries can be answered. The Western scientific approach contributes to generating public reasons,

assessable from an inter-subjective and diachronic point of view that is also relatively open and transparent. Publicly assessed reasons are not to be confused with ultimate reasons, because science is a never-ending process. But together with some other “jewels in the crown,” like analogical reasoning, creative problem solving, game theory or brain-sciences applied to decision-making, they constitute “knowledge bridges” taking us from what we already know to what we want to know (p. 3).

One of the book’s major topics focuses on the cases when you are not the only one choosing. Game theory (Morgenstern & von Neumann 1944) is a rich and interesting paradigm, mainly if we deepen our understanding of the cooperative approach (Nash 1950) by looking at the Prisoner’s Dilemma and at the so-called Trust Games related to the principle of reciprocity. Results of some studies in experimental-economics show that “decision makers are generally less selfish and less strategic than game theory predicts, and they value social factors such as reciprocity, fairness and relative social status more than the theory predicts” (p. 23). So, these results indicate that people find cooperation rewarding and lack of cooperation distressing in Prisoner’s Dilemma games: “Whether you’re selfish or generous, transacting with a cooperator is always the better bet” (p. 25).

Other relevant cases Cummins discusses are about choosing what is most likely to give you what you want. The concept of a rational agent is the cornerstone of classic decision theory (Edwards 1955). The desirability of a choice is called its utility: it is a measure of satisfaction; whatever makes you feel happier or more satisfied. But calculating probability is “usually the fly in the ointment” (p. 33). Bayes (1763) proposed a way of making decisions based on calculating the probabilities. Bayes’ Rule is considered the optimal statistical model for making decisions about risk, and states that the probability of a hypothesis given the data (the posterior) is proportional to the product of the likelihood times the prior probability.

When applied, the probabilities involved in Bayes’ theorem may have any of a number of probability interpretations. In one of these interpretations, the theorem is used directly as part of a particular approach to statistical inference. According to the Bayesian interpretation of probability, the theorem expresses how a subjective degree of belief should rationally change to account for evidence. According to Gigerenzer (1994, 1995, 1996), we have only been expressing information in terms of probabilities and percentages since the 1700s, but our cognitive systems evolved over millions of years to process information in frequency. In fact, you can visualize frequencies without even counting. We do it automatically. What our perceptual and cognitive system registers is quantities or frequencies, not percentages.

And what do we do when we are required to make decisions based on probability information? According to Kahneman and Tversky (1973), people tend to ignore prior probabilities. Fallacy is the rule, even with people who take advanced courses in probability and statistics. Usually, people are very good at classifying items according to similarity to a prototype, but not at all at making probability judgments. More broadly, we can say that people’s decisions are influenced more by how a problem is described (framed) than by the objective data contained in the problem. The “strongest framing effects are usually found when probability information is pitted against a deep-seated bias in our cognitive architecture” (p. 47). The best example of this is loss-aversion bias, people’s tendency to strongly prefer avoiding losses to acquiring comparable gains (Kahneman & Tversky, 1979). But “we are not the only ones who act this way: Capuchin monkeys do the same things” (p.

48). Moreover, people respond to changes in relative, rather than absolute, gains and losses (losing or gaining 10 dollars means more if you have only 20 dollars than if you have 200). This means “people make decisions by comparing them to a flexible reference point” (p. 49).

And dealing with decision neuroscience we can't forget overconfidence bias: both novices and experts are more confident about their decisions than is justified given the environment; as a result, “they frequently stop their search for answers before all available evidence can be collected” (p. 50). To explain some of these characteristics of human decision making, Kahneman (2003) proposed a dual-process theory distinguishing between a rapid decision-making system (called system 1) and a slower one (system 2). The first, rapid system outputs decisions based on emotion, intuition and heuristics such as causal interpretations of events and prototypes; the slower system 2 outputs decisions based on the abstract nature of the problem, particularly its statistical or logical structure. When system 1 is in charge, “we can end up being overly confident in our decisions” (p. 50). That's referred to as overconfidence bias.

Summarizing, we are frequently required to make decisions based on “calculations that are difficult to do in our heads” (p. 57). Standard economic models based on rational choice presuppose the operation of a single rational information processor, while results of neuroscience research indicate that decisions are the outcome of two separate neural processors—and the two processors also have been found to compete with each other in decision-making. Many researchers are pointing out a competition between two neural systems, an emotion-based system (amygdala) and a predominantly analytic system (orbital and prefrontal cortex). So, “when people decide to make risky decisions, the reward areas of the brain become highly active just prior to making the decision. In other words, this neural signature shows that they are anticipating large payoffs and are not thinking about the probability of payoffs (Knuston & Bossaerts 2007). This is “one reason gambling can be so addictive: the act of placing the bet can feel as rewarding as winning” (p. 55). Throw into the mix the fact that we are frequently deciding under conditions of uncertainty. With insufficient information either because that's all there is or because information is asymmetrical. At the end, as Cummins underlines, we try to avoid risk, “yet we make extremely risky decisions when facing potential losses” (p. 58).

Going to moral decision-making, how we tell right from wrong? Our intuitions in moral matters sometimes appear contradictory and rational choice theory is not particularly useful here. Are moral judgments something rational or are they emotional responses? Is there something natural and universal or do all moral and legal rules emerge from human convention (Kant 1781, 1787 and Hume 1740)? But, as Cummins points out, here's the catch: “If we were purely rational, then we would never make mistakes. But we are neither purely animal nor purely rational. We are somewhere in between, and so can choose wrongly” (p. 66). Kant believed evaluating rules (or actions) based on their outcomes is a non-starter because we can't control outcomes. Even the most careful choices can yield unforeseen disastrous consequences. What we can control, however, “is our intentions—our motives—underlying the actions” (p. 66). So the morality of an action is a function of motivations underlying it. Accordingly with his (double) formulation of the Kantian categorical imperative—will that it should become a universal law and treat humanity always as an end—some of our moral duties include maintaining one's own life, being beneficent when we can, securing one's happiness. But—as Cummins is proposing (p. 69)—at least two other deontological principles not considered by Kant merit discussion. The first is the doctrine of doing and allowing, which states that it takes more to justify doing a harm than simply allowing a harm. The second is the

doctrine of double effect, which states that it takes more to justify doing harms that were intended than harms that were anticipated but unintended side effects.

Then Cummins delves further into the purposes of morality and logic, dealing with both philosophers and some relevant contemporary output from neurosciences. Then on the stage it's causality, the cement of the universe (Michotte 1963 and Cheng & Novick 1977). What causes what? Or better: how does your brain decide what causes what? As Cummins says, we can “think of theory-based causal reasoning as belief-based reasoning” (p. 105). What does this mean? People devote more attention to processing data that are inconsistent with their beliefs, but they do not necessarily learn from that process by revising their beliefs. So where causality is concerned, we resist changing our minds even in the face of disconfirming evidence” (p. 106).

A cause is an insufficient but necessary part of a scenario that is unnecessary but sufficient for an event to take place (Mackie, 1974). When people evaluate causal arguments, they activate and retrieve information from memory concerning alternative causes and disablers. Two key points we can summarize are that people are sensitive to co-variation between events and often base their causal inductions on the strength of the co-variation; and that we “also need a plausible story connecting the two events” (p. 113).

As human beings, “we want to maintain a knowledge base filled with true beliefs, particularly true beliefs about what causes what” (p. 114). This means we have to test the truth of our beliefs via a process called hypothesis testing based on assuming the belief is true, then on deducing what it predicts and, finally, on testing those predictions. This process is very challenging because “people are genuinely bad at this” (p. 114). Even if we are aware that a number of pitfalls occur in our intuitions about hypothesis testing, mainly because our beliefs and expectations influence how we interpret the so called “facts,” human reasoners are mainly seeking evidence that confirm beliefs, and having experts engaged with trying to falsify beliefs and hypothesis is not so easy—despite that at the heart of scientific inquiry we find hypothesis testing by “disproof” and “falsification” (Popper 1934). Seeking evidence that confirms beliefs may also affect our problem solving procedures (p. 138), creating the so called “framing effects” (the way a problem is described influences how we think about it) and making it harder and harder to think out-of-the-box and bridge different domains of expertise strengthening our analogical mind that is the core of cognition (p. 169).

A very interesting book for philosophical practitioners, mainly due to the author's interdisciplinary approach and ability to summarize relevant outputs from both human and neurosciences.

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Book Review

David H. Brendel, *Healing Psychiatry: Bridging the Science/Humanism Divide*.
MIT Press, Cambridge, M.A., 2006. ISBN: 978-0-262-51325-8. 178 pages.

REVIEWED BY CAROL STEINBERG GOULD
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David Brendel's masterful book is more urgent than ever. At a moment when neuroscience is colonizing the humanities and social sciences, ever more mental health professionals are agreeing with the distinguished neurologist, V.S. Ramachandran that "it is only a matter of time before psychiatry becomes just another branch of neurology." Brendel's title has a double meaning: There has long been an inimical, neurotic silence between psychobiological and humanistic psychiatrists. Brendel's concern is to heal the practice of psychiatry itself so that psychiatrists can better heal their patients, most of whom seek to alleviate their mental suffering and sadness. To this end, Brendel argues for an explanatory pluralism that would not only start a conversation between psychiatrists in the warring camps, but also bring flexibility into the clinical practices of both. Rejecting reductionist monism and its accompanying physicalism, Brendel argues for an explanatory pluralism in psychiatry, which he grounds in the philosophy of classic American pragmatism.

While tackling important technical issues in philosophy of science and of medicine, Brendel writes with a voice at once personal and empathic, a voice that expresses authentic concerns for patients with their anguish and for a profession that is too factionalized to reach consensus on treatment modalities. He acknowledges the social and economic pressures on the profession: the tyranny of managed care, the medical ethics driven more by bureaucracy than by rigorous critical analysis on the moral issues, the spiraling cost of healthcare, and the therapists' vigilance about legal problems. His main focus is, however, on philosophical theory, which he supports with not only philosophical analysis, but also brief, compassionate clinical narratives.

Brendel begins by introducing the view that he opposes, one that has profound implications for psychiatry: explanatory monism, a belief in the essential unity of all knowledge through the reduction of every claim about the world to a set of scientific propositions. He presents as a paradigm of explanatory monism E.O. Wilson's theory of "consilience," the claim "that facts and theories can be linked in order to create a 'common groundwork of explanation' spanning all the natural sciences . . . and ultimately subsuming the social sciences and humanities as well." Brendel, who has breathtaking command of philosophical and psychiatric literature, shows how this would work in psychiatry, by describing a unified view of bi-polar disorder, as one illustrative example. As Brendel tells us, this would ultimately reduce all claims about a patient's disorder, symptoms, unique etiology, and treatment to claims about the patient's neurobiology. From a methodological standpoint, consilience would bring a gratifying neatness to a messy bundle of observations. Some philosophers of science, for the sake of theoretical clarity, would take this one step further by arguing that neurobiological claims are theoretically reducible to the language of physics.

Brendel's enterprise is to defend explanatory pluralism, based on the traditional American Pragmatism of Peirce, James, and Dewey. One might ask why a contemporary philosopher and clinician,

like Brendel, would use classic pragmatism, rather than the more current neo-pragmatism. For his foundational principle, Brendel admirably rejects the neo-pragmatism of such philosophers as Rorty, who adopt a postmodernist rejection of scientific realism. Brendel's pragmatism is methodologically Socratic, as it requires the practitioner to revisit, refine, and refashion her beliefs and methods. Socrates, ever a realist about truth, insists that we should never be complacent about our beliefs. Brendel, arguably in the spirit of Peirce, et al., is a scientific realist who prescribes constant scrutiny of one's methodological commitments and psychiatric paradigms within a pluralistic community of inquirers.

Brendel characterizes classical American pragmatism in terms of the four 'p's: a practical approach to empirical truth, a pluralism with regard to phenomena and the tools one uses to study them, the participation of many inquirers who bring different perspectives to a problem, and the provisional nature of scientific explanation. Of the four principles, Brendel's key Pragmatist philosophers interpret them differently. They all agree, however, on core ideas: that inquiry advances only within a social context, an idea at the heart of Peirce's notion of a "community of inquiry." The Pragmatists, especially James and Dewey, reject foundationalism. Truth is "what works," which applies to not only those hypotheses having practical value for individuals, but also those hypotheses having predictive value, as well. How can this philosophical system guide clinical practice?

Brendel shares with us narratives of how he successfully applied pragmatism in the clinic, where he treated his patients using various modalities, both psychotherapeutic and biological, remaining methodologically flexible. Perhaps the most impressive, and, in places, problematic chapters of this book is "Pragmatism and the Mind/Body Problem." He could have called it "Psychiatry and the Mind/Body problem," for he takes up here the problem of how a therapist with any awareness of contemporary neuroscience can justify non-biological treatments. He displays a comprehensive acquaintance with the varieties of ontological materialism, arguing that neuroscience does not, and will not, eliminate the usefulness or effectiveness of psychotherapy and that, if anything, it adds further logical support for it. In rejecting Churchland's claim that no type of talk therapy could repair a troubled "brain," Brendel invokes Davidson's 'anomalous monism,' along with the arguments of the renowned psychiatrist/ neuroscientist Eric Kandel and the psychoanalyst Susan Vaughn.

Davidson's view is important for Brendel's argument, because it asserts that for any type of mental state, there is no specific, predictable corresponding brain state—although for each person experiencing a given experience (joy, anguish, delight in a musical performance), there is a corresponding brain event. Davidson's view entails not dualism, but that mental descriptions cannot be reduced to physical statements. It is an expression of the principle of multiple realizability such that the same symptom in several patients may correspond to different neural states and so require different treatments. Thus, Brendel emphasizes, the pragmatic, flexible psychotherapist must use pluralistic explanations and methods. For example, Patrick's depressive episode may be neurologically different from Melissa's. Therefore, while Melissa responds well to an SSRI, Patrick's responds to talk therapy rather than the SSRI that is helping Melissa. As Brendel puts it, "the ontology of human life and the methodology to treat people are separable." Wilson's consilience or Churchland's eliminative materialism would not "work" in the pragmatist's sense. Brendel is right about this.

This observation leads, however, to a question about the logic of Brendel's enterprise. Notice here that Davidson does not need pragmatism to defend his 'anomalous monism.' Similarly, both Kandel and Vaughn are ontological monists, who believe in the efficacy of psychotherapy, in-

cluding psychoanalysis. They each argue that language is a human endeavor emanating from and arguably requiring the brain. It is, after all, inconceivable that conversation would not change the brain in various ways. Hearing language delivers input to the brain. To investigate their respective arguments would take us beyond the scope of Brendel's book. Note, though, that here, again, we have two important theorists and therapists, who allow for pluralism in psychiatric practice who do not rely on the pragmatism of James and Dewey, which is, at heart, a theory of truth.

Moreover, some monists appeal to the disorder that can ensue from pluralism. Their justification is in fact in the spirit of pragmatism. It is an argument that explanatory monism has pragmatic value as a theory. What their monism lacks, however is a probing analysis of psychiatry or the human sciences in which Brendel engages. No science has successfully reduced all humanistic propositions to physical ones or all psychiatric claims to neurobiological ones. So the primary groundwork for monism, unless it is aesthetic, is purely pragmatic. This is a problem that Brendel needs to address. If pragmatism can also provide grounds for monism, then is it the best starting point for his over-arching argument? If pragmatism is consistent with both monism and pluralism, then how solid a foundation is it? Brendel, in places, equivocates between the philosophical meaning of 'pragmatism' and that found in common parlance.

This in no way detracts from the value and power of Brendel's book. In his chapter on Freud, he portrays Freud as an exemplar of a methodologically pragmatic psychiatrist, a scientifically guided physician who also probed the unique subjectivity of his patients. He describes Freud's own journey from scientific monism to a pluralistic approach to psychiatry that employs irreducible psychological concepts no less than neurological and somatic ones. Freud's path famously begins with Anna O, whose symptoms violated Ribot's Law and who inspired him to develop the idea of "somatic compliance," as Brendel describes. Freud could not have developed psychoanalysis without the scientific flexibility of the Pragmatists, whom he clearly admired. Freud's notion of the unconscious may have been one of his many ideas reviled by his contemporaries, but he rightly considered it his chief intellectual contribution to Western thought. He could never have developed it had he not used the Pragmatic principles of treatment advocated by Brendel.

Brendel gracefully guides us from his analysis of Freud to his penultimate and, perhaps most cogent, chapter, "Pragmatism in Psychiatric Diagnosis." If a clinician reads only one chapter in Brendel, it should be this one. Here Brendel assaults and laments the current diagnostic practices in psychiatry, which he views as a response to the constraints of mandated (and shifting) psychiatric ethics rather than "psychiatric science." He urges practicing psychiatrists to resist the reductionism of neurobiological approaches or the rigidity of a favored theory when trying to alleviate a patient's suffering or dysfunction. He insists that clinicians must appreciate the intricate, unique subjectivity that lies beneath a patient's symptoms. In his final chapter, his use of philosophical pragmatism is utterly sound. Brendel persuades us that effective practice must be open to a plurality of approaches and to a respectful collaboration with the patient, wherever possible. Unfortunately, psychiatry itself, like all too many patients, is still in need of healing. Clinicians and philosophers alike should give serious consideration to Brendel's prescriptive claims.

In closing, let us consider what Brendel's endeavor entails for Philosophical Practitioners: once psychiatrists adopt the Pragmatic method, they will understand the limitations of their domain. Philosophical Practitioners can help psychiatry by working with patients whose anguish arises from

moral dilemmas or existential crises, problems that philosophers, trained in philosophical practice, are distinctively well suited to tackle. Brendel, a philosopher, a distinguished psychiatrist, and now a certified philosophical practitioner, understands what philosophers can achieve in the clinic. One hopes he will continue to advocate for the role of philosophers in healing the mind. Brendel gives philosophical practitioners plenty of ammunition to fight the skeptics. I have fruitfully used this book in an upper division undergraduate course on Philosophy of Psychiatry and in a graduate seminar, as well. It would undoubtedly be helpful for medical students or residents in Psychiatry.

This is an important book that should be on the bookshelf, or better yet, in the hands, of every psychiatrist, clinician, and philosopher interested in mental health.

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Carol Gould is a Professor of Philosophy who teaches Ancient Philosophy, Aesthetics and Art Theories, and Philosophy of Psychiatry. She recently began teaching *Moral Problems*, an online course. She publishes widely in her areas of specialization with articles appearing in such journals as the *International Journal of Feminist Bioethics*, *The Journal of Aesthetics and Art Criticism*, *Phronesis*, *Contrastes*, and many others. She also works as a philosophical consultant.

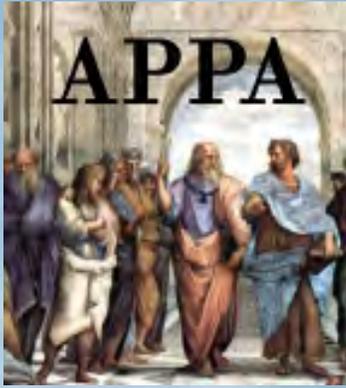
George T. Hole graduated from the University of Rochester with a B.A in physics and a Ph.D. in philosophy. He holds the position of Distinguished Teaching Professor at Buffalo State. His courses in Zen Buddhism, Existentialism, the Philosophy of Love and Sex, Moral Issues, and History of Philosophy: The Greeks, help inform his philosophical practice.

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