

***THE WISDOM OF THE ELDERS***  
***Psychotherapy's Elders Throw Down the Gauntlet***  
**By Michael Ventura**  
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The Anaheim Convention Center, site of last December's "Evolution of Psychotherapy" conference, is a monument to the impersonal: antiseptic cavernous halls; inhumanly and impractically high ceilings; enormous, featureless rooms; and escalators almost the length of a city block. Its decor consists of hard and soft grays and whites, relentlessly neutral and acoustically dead. Without a microphone, no one can hear you, even if you scream. In such a place, an individual has the impact of an ant. Thousands are an anthill. The building says, "Here's a force cold and huge in which you're to be subsumed." While seasoned convention-goers may take such surroundings for granted, it made me wonder, "How can anything useful happen here?"

Sponsored by the Milton Erickson Foundation, the conference brought a remarkable 8,500 therapists to Anaheim, most of whom were drawn by a faculty that featured many of the profession's revered elders. Most were in their eighties, and this might be the last chance for the younger generations to see and hear them in the flesh. As one wag told me, "These are the Sinatras of our field." He was speaking of conference faculty like Salvador Minuchin, Thomas Szasz, James Hillman, Mary Goulding, Albert Ellis, Marion Woodman, and Aaron Beck, among others—all of them old enough to be the parents and even the grandparents of the bulk of us conference ants.

However, I saw none of these elders at the preconference festivity titled "Patch Adams Day." You may recognize the name from the Hollywood movie *Patch Adams*, in which Robin Williams portrayed this very man—an M.D. who employs clowning to heal. The first conference function I attended was "Lunch with Patch Adams," held in an enormous dining room, dominated by a movie screen showing silent Charlie Chaplin comedies.

When I entered, the Little Tramp on screen was running madly to and fro kicking everyone in sight—perhaps in need of therapy? Then Patch Adams himself appeared, in full clown regalia (he claims never to wear anything else). First he told us he loved us. Then he made a speech centered on his credo: "The most revolutionary act you can commit in today's society is to be publicly happy." His audience of therapists greeted that statement with nervous (repressed?) laughter.

But when the audience was invited to ask questions, at least some of them made it clear that they had come to this conference not to be loved or to be happy, but because they desire therapy to be more than it's been and to do more than it's done. One woman asked, "How can we [the therapeutic community] make a global difference?" The next woman said, "The people who live on the bottom don't have enough of anything anymore, and *we* really have to speak out."

Such questions aren't usually considered to be the realm of traditional psychotherapy. That they were even asked is an indication that, for reasons apparent to anyone following the daily news, psychotherapy is being called upon to enlarge its sphere of concerns. For me, the question became whether this conference could give these therapists answers, or even indicate a direction toward possible answers.

The next morning's keynote speech was advertised in the brochure as addressing exactly the questions asked at the luncheon: "So many horrible things are parading around in fancy clothes and our profession is remarkably silent. Things on this planet are at a level of medical emergency . . . and the medical profession is too low key. . . . Mental illness may be a normal response to this disaster—not requiring medication, rather calling for action to create healthy contexts."

This, then, was the stated theme of the conference: a call to social action, and an exploration of what social action might mean in the context of psychotherapy. It was a subject certainly worthy of an address by one of the faculty's luminary elders, so I found it more than a bit odd that the keynote speech was given by the clown Patch Adams.

His talk was staged in the Arena of the Convention Center, an enormous hall designed more for basketball and rock concerts than lectures. The speaker on stage is dwarfed not only by the space, but by the huge TV screens above him. On those screens, Adams showed disturbing footage of terrible suffering in the Balkans and the Third World. He was quickly and histrionically overcome by the horror of what he displayed, and his behavior wasn't what one expects of clowns: he screamed in pain, he stamped his feet (yes, he did), he wept, he cried out, "Something is wrong! Please help!"

To put it kindly, many didn't find this useful, heading for the exits long before Adams's lecture was done. Again to put it kindly: a theme had been stated, but hadn't been addressed.

## **The Historical Challenge**

By my count, from the keynote speech on Wednesday to the final lecture on Sunday, there were 145 presentations on the conference program, covering almost every conceivable angle of therapy. With such a proliferation of sessions and topics, all of the attendees must, in effect, create their own conference. That's the personal challenge of the professional ritual we call a "convention." I chose my conference to be about the theme enunciated by the keynote speech: the challenge that this historical moment presents to psychotherapy, and how that challenge might be met.

While much of what was presented on the conference program was about business as usual—elaborations and explanations of the strategies and theories of today's therapy—I found 19 sessions that seemed to deal with therapy's possible historical role in the 21st century. I immediately noticed something striking about these 19 sessions: none was presented by anyone younger than 60, and few were presented by anyone younger than 80. A field is in trouble when its radical visionaries are mostly over 80 and the younger folk are intent on business as usual. That's quite a reversal of roles. It's true that most of these elders had always been radical and visionary; still, we associate aging with mellowing, even with rigidity, not with a renewed and urgent call to action. In Anaheim, the elders—the "Sinatras"—seemed intent on singing a provocative swan song on the conference theme: What larger role can psychotherapy play in a world gone mad?

The elders' challenge to business as usual began at a session headlined "Defining Mental Health as a Public Health Problem," presented by William Glasser and Mary Goulding. Glasser, known as the founder of Reality Therapy, looked to be a traditional sort of elder, dignified and politely authoritative—you'd immediately peg him as a professor or a doctor. Mary Goulding, one of the originators of Transactional Analysis,

by contrast, was hard to classify. Ashen-faced and weakened by broken hips, there was nonetheless something wild about this woman—a no-nonsense fierceness allied with a sense of fun. "I'm 80 years old," she volunteered, "which is a rather rotten age, but, well, what can you do?"

Glasser began by figuratively kicking the ubiquitous *DSM-IV* out the window, calling it "perhaps the most dangerous and harmful book ever created in the field of mental health." So much for business as usual. Then he went after pharmacology. "How [do these medicines] work? Well, they [the pharmacologists] don't have an answer. They don't know. Ask them to define mental health; they won't be able to do it!"

Next he zeroed in on a key problem that psychotherapy has, for the most part, ignored. "Human beings have a need no other living creatures share, and if we don't learn to deal with that need, we'll become extinct: our need for power. If we don't learn how to deal with our need for power, we're not ever going to have a mentally healthy society." Goulding later encapsulated a massive critique of psychotherapy in but one line: "We've spent our training, our practice, our therapy looking for what's wrong with people, instead of what's right with people."

With Glasser and Goulding, in just one session, present-day standard practice had been swept aside and the concept of "power" had been introduced as a possibly treatable trait. Also, despite of all the history they'd experienced, they still believed there was something "right" with people and that "a mentally healthy society" was possible. If younger folk had said such things, I might have thought them naive, but for people of great experience to speak such things with fierce conviction—well, that felt more like a dare. They were unflinching in asking us to believe in extraordinary possibilities that would require extraordinary efforts of us.

Immediately afterward, Thomas Szasz, the longtime gadfly of traditional psychiatry, and strategic therapist Cloe Madanes upped the ante in a session titled "Our Larger Mission as Therapists." Echoing Glasser, Madanes called the combination of pharmacology and managed care nothing less than "a demonic alliance" that had created a quasitotalitarian medical environment in which "if a child today is prescribed medication and the parent refuses, the child can be taken away." She went on to say, "The root cause [of mental illness] has to do with the violence we inflict upon one another. Relationships, therefore, are the battlefield of treatment." But she expanded this now-traditional family therapy approach into a militant stance: "We have to organize people to help themselves, and organize them to change their relationships and determine their own future."

Szasz went even further. He said that therapists who submit to the protocols of managed care "are acting like government agents" because "it's the government that controls this." He accused "the entire mental health industry" of collusion with the essentially government-instigated idea of who fits in and who doesn't. In this sense, he said, "America is built on the idea of mental illness," and "there's no opposition that's visible." Then he threw out an enormous yet elegantly simple (not simplistic) question: "If you take what I've said seriously, what happens?"

Obviously what happens is, as the title of their talk stated, a "larger mission": the therapist as subverter of societal demands, the therapist as organizer, the therapist as revolutionary. Szasz and Madanes were calling on therapists to stand against

pharmacology and managed care, stand against government regulation, and risk their livelihoods to achieve what Glasser had termed "a mentally healthy society."

But the audience didn't rise to its feet and cheer. It didn't vow to storm the barricades. Instead, the audience listened attentively but a bit sullenly, perhaps thinking: "That's easy for you old guys to say! Your reputations are secure. You're no longer out in the trenches earning your livelihoods." Yet no one rose up to argue with Madanes and Szasz's premises, either.

The message put forth by Madanes and Szasz was elegantly simple: submit or rebel. If you're not rebelling, you're submitting. If you're submitting, you're a collaborator in a terrible a system that endangers the mental health of your patients and your society—and you're doing it just for money. It seemed to me that, at this session's end, most listeners were only too happy to slip into the anonymity of the crowded hallways, where no one would demand of them a moral choice that they were unprepared to face.

## **A Moral Choice**

But again and again, that's what the elders demanded: a moral choice. A session two days later with Jungian analyst James Hillman and the unsinkable Mary Goulding (titled simply "Politics and Therapy") clarified the dimensions of that choice. Goulding looked as though the conference was wearing on her physically, but her spirit was, if anything, even more combustible. As for Hillman, no one could look less like a revolutionary. Tall, slim, and reserved, his quietly biting delivery tempered by a constant glint of amusement, Hillman carried himself like a patrician. But, patrician or not, he made the most radical proposal of the conference. Referring to the mental health profession, he said, "We whine, we complain, but we don't *strike*."

Was he really calling upon therapists to engage in a collective national strike? Yes, he was.

"I think we need to recognize the power that we have," Hillman said, noting that therapists have become essential to the workings of schools, prisons, hospitals, the legal profession, and even corporations. He thought that many societal functions would grind to a halt if therapists just stayed home. He wanted the therapeutic community to strike, not for higher pay, but for justice and compassion toward their patients—strike against bureaucracies, strike against managed care, strike against pharmacological quick fixes that often don't work.

Hillman went on to critique the very mind-set of the average therapist. "We're not the people to go on strike," he said sarcastically, "because we've learned anger management. It's our nature to receive, understand, interpret, analyze, but not to react in an immediate way. So, in some ways, we cut ourselves off from political engagement."

Goulding called on therapists to "get your clients involved, not just in their own belly-buttons, but in what's going on in the world." To which Hillman immediately responded, "Do we ever ask a question about a person's political life? We're very interested in all kinds of personal secrets, but do we consider their political histories? We lift repression from their sexual lives, but do we lift repression from their political lives?"

Then Goulding jumped in again. "Why should all these insurance companies control the private lives of our patients? They wouldn't, if we hadn't played dead. Say no to the insurance companies. It isn't too late!"

A somewhat flummoxed, young-ish therapist came to the floor mike and stated the obvious in a low shocked tone: "What you're advocating is an abandonment of therapeutic neutrality." Hillman responded that therapeutic neutrality "is a shibboleth. The very fact that you're neutral is a position."

The theoretical basis for this new, more political position for therapists had been discussed by family therapy pioneer Salvador Minuchin in a talk the day before titled "Family Therapy—New Developments." Many would argue that Minuchin, now aged 84, changed the practice of psychotherapy more than anyone since Freud. Every therapist I know who's watched him work testifies there's never been anyone better in the consulting room. Now, in a soft, poetical, somewhat rabbinical style, he consistently seemed to nail what was going on at any moment, putting into words the unstated mood of the moment.

In his workshop, he said what all the elders were emphasizing: "People are responsible for their social system." (Why this ancient truth was a new idea to the field of psychotherapy wasn't discussed in my hearing.) Minuchin went further, adding, "People want to be healers, they want to be helpful. What produces change is if the therapist is able to elicit from people their sense of responsibility for each other. We're responsible for everybody who's part of our group. And our group is, first, the family, but then the community."

A community is, among other things, a political entity. Here Minuchin dovetailed with Goulding and Hillman. One can't enact responsibility for a community without taking stands, and to take a stand in a community is, inherently, a political act. There's nothing neutral about it. For Salvador Minuchin, as for Hillman and Goulding, the therapist's mission is to awaken the sense of responsibility. There's nothing neutral about responsibility, either.

But how, concretely, could psychotherapy attempt this task? Gestalt therapist Erving Polster took on this question in a session grandly titled "The Next Giant Step for Psychotherapy." Polster, too, had the benign, authoritative presence of, say, a professor emeritus, but on this day, he sounded a little like an old-style union organizer. Addressing how psychotherapy can play a larger, more direct, role in the community and in history, he proposed to extend psychotherapy, especially the techniques of family therapy, into communities "of people who come together for the purpose of attention to the self." He envisioned large therapy groups, consisting of about 200 people, that would be "a harbor of safety where people can explore their minds." These groups would go on "indefinitely" and be "available for a lifetime." With so many working together in these groups, an individual therapy session "would cost less than a movie," he calculated.

In a sense, Polster proposed that we institutionalize friendship and group connection. But he, too, demanded of his listeners a dangerous moral stance: abandon the tried and true (and profitable) way of doing things and become, in effect, therapeutic community organizers and leaders. This, indeed, would be a "giant step."

His audience listened attentively but showed no eagerness to behave like giants. In fact, what was striking about the questions from the floor, in all these sessions, was the questioners' general tone of timidity. I don't know where the woman disappeared to who boldly asked on the first day how therapists could make a global difference, but when

proposals that answered this question (strike, form communities, abandon insurance companies) were presented, no one in my hearing vowed to take action.

Cultural anthropologist Mary Catherine Bateson, the daughter of Gregory Bateson and Margaret Mead, directly addressed the timidity of this audience of generally affluent therapists. On the stage of the vast arena, she sat in a plush armchair and looked like everyone's favorite aunt or beloved grandmother. But, in her friendly and almost casual delivery, Grandma laid it on the line: "All of us are complicit in a world system that maintains poverty and leads to environmental degradation. We're all part of it. But we're hooked." She asked, "How many of us feel that, without an automobile, we couldn't live our lives, couldn't be ourselves? We know the automobile is central to the problem," yet we do little or nothing about that. She compared us to Southern slaveholders, who knew the evils of slavery, but "did not know how to be themselves" without their slaves. Echoing Hillman's call to treat a client's politics, Bateson suggested that the source of political timidity is that "we're using a lot of our energy to repress and stop thinking about the asymmetries in our relationship to the rest of the world."

Jean Houston, one of the prime movers of the human potential movement, boldly tried to pierce that repression. Tall and theatrical, with sweeping gestures and amusing autobiographical asides, Houston said that we're living in nothing less than "the most critical time in human history. This is the time when what we do makes a difference, profoundly, in whether we [as a species] live or die."

In her mid-60s, Houston was younger than most of the radical elders, and hence more active. She's trying to lead the way by example. Her response to the challenge that she put to us was much the same as Polster's: "It's a question of people getting together in teaching-learning communities—and wherever I go I try to set one up." She made clear that, in a time of fundamental historical transition such as ours, we're each cocreators of the future. For Houston, the future isn't something that just happens. The future evolves not out of what we wish, but out of what we do. She called upon her listeners to *do*.

### **Will Psychotherapy Change?**

At this immense conference, with its 8,000 attendees and dozens of faculty presenters, a small number of significant people were trying to spark a movement—no less than a sea change in the practice of psychotherapy. Should therapists dare to be moral agents in the service of justice? That was their challenge. But the challenge involved more than talk. What was being presented was a fundamental shift in thinking about the therapist's social role—something not easy to absorb in the increasingly hectic and exhausted air of a massive conference. Easier to handle and more fun to contemplate was what might be called the Hollywood aspect of the proceedings. For here, indeed, were the stars of the profession, and some were making what might be their last appearance on the stage. Wasn't it wonderful that they were still so sharp and combative and articulate? Won't it be fun to tell your grandchildren (in the profession, that is) that you saw them?

All well and good, except that the radical elders themselves cared not a damn about that aspect of the conference. They cared about driving home to the therapeutic community the need for a different respect for and response to the ideals of justice and

morality. Szasz said, "I believe that human beings are moral agents, even in their sleep." He added, "Justice is a very old concept, and very deeply etched into the human soul."

When Hillman said, "The entire work with the patient has been subsumed to the needs of the corporation," and Szasz responded, "Business has *nothing whatever* to do with medicine," they were doing nothing less than calling on therapists to be moral agents in the service of justice. That was their challenge. So you can understand Hillman's frustration when a man at the floor mike asked how he can be who he "really is" and still do therapy in the present status quo. It was a brave question, actually, because the man was voicing the plaintive attitude of most of the audience upon hearing these challenges. But cutting through the obfuscation of psychobabble, Hillman answered bitingly, "Who you really are? You *are* who you *are*. There's no ~~€~~really,' get rid of that ~~€~~really.'" Hillman was saying that what you *really are* is what you *really do*, not what you wish you might do. The poor man hung his head and sat down, and it was as though the whole conference had hung its head. For nowhere during the entire meeting did you hear a groundswell from the floor about anybody's willingness to take up anybody's challenge.

The challenge of the elders wasn't unspecific. They said therapists should strike, form communities, and change the fundamental way they do business and earn their livings. That challenge was directed at the people right there with them in the room. No way to avoid that. That their listeners seemed to react more to their personas than to their challenge didn't astonish our elders. Nor was there a hint of bitterness at being displayed rather than heard. They came to say their say, they said it, and what we did with it was our own affair.

Late in the afternoon of the day before the conference ended, Salvador Minuchin and Mary Goulding shared a session titled simply "Being Old." They sat at the table on the stage, both looking at ease and tired with the accumulated strain of so many presentations over the previous days. (Minuchin would tell a friend that the conference was "exhilarating and exhausting.") They sat there "being old."

Goulding posed and answered the basic question. "What's it like to be old? I'm just as young as I ever was, it's just my body that's old." But Minuchin put it more subtly: "People change in contexts. People don't change inside. People change in relationships." Which is to say: within themselves, while older people may feel more or less the same, their relationship to the world changes as a result of aging.

"I'm an elder," Minuchin continued, "an elder of my tribe, but 'elder' is a function." I took that to mean that people can become elderly without becoming elders. To be an elder is to be a repository, a resource of experience and knowledge. "One thing we have is memory," Goulding said. It was from their stores of memory that they'd issued their challenges.

But that afternoon, these veteran therapists didn't speak of challenge. They spoke of the trials and satisfactions of everyday life as you age—for example, how important touch is to the elderly. "Many of them don't get touched," Goulding said. "They need conversation, but they especially need touching." She added, "I have various kinds of boyfriends—I *really like* men." (Though curious about what "various kinds" might mean, such a question seemed improper, and I let it go.) "I know no one my age who's afraid of death," Goulding continued. "We're afraid of being mentally incapacitated."

Minuchin, who in his day had proved so much to so many, said with humorous exasperation, "At this point I need to *prove* that I can do something!" Directly after which, he slipped in what seemed to me an enormous point about doing therapy, as if to prove he still could: "One has to respect transition. Transitions are periods of chaos. Don't do therapy on people in transition. They need to have that period of depression, of chaos."

May we be old as they're old—incisive, morally and intellectually engaged, displaying no hint of self-pity, and with an eye out for the next challenge, whether or not it will be our challenge. Most of all, may we observe the dictum stated that afternoon by Goulding and enacted by her and all these elder speakers during this conference: above all, "Don't bore the children."

This was, in an odd way, the most satisfying and somehow bittersweet of all the sessions that I experienced at this conference. At the end, there were Minuchin and Goulding sitting on the stage like people waiting for a train, enjoying conversation and enjoying our attention. They'd come to us and issued their challenges. They knew that they could only point the way. They were elders, but no longer leaders—too old to lead any longer.

Now was the time for new leaders to emerge and take their place, or not. As for these radical elders, they were headed elsewhere. They'd stopped by, on their way, to tell us the truth, challenge us, and wish us luck. Now their listeners stood, applauded, and cheered—as though to say, "Thank you, and go well."

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