

Journal of Russian & East European Psychology, vol. 52, no. 1,
2015, pp. 66–96.

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ISSN 1061–0405 (print)/ISSN 1558–0415 (online)

DOI: [10.1080/10610405.2015.1064725](https://doi.org/10.1080/10610405.2015.1064725)

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An Historical-Methodological Analysis of Psychotherapeutic Reliances

Each psychotherapeutic approach is determined not only by its technique and theory but also by its general philosophy. While this philosophy has many aspects (anthropological, epistemological, axiological, etc.), at its true core lies what the author calls a “psychotherapeutic reliance.” A reliance here is understood as a certain internal active process of the client (e.g., becoming aware, learning, experiencing), which the therapist hopes for and relies upon, believing that it is precisely what is responsible for achieving a psychotherapeutic effect. This article analyzes the history of psychotherapeutic reliances, endeavoring to understand the logic of their development. The author sees an important trend for future development in “synergetic psychotherapy,” which is based on Christian anthropology

English translation © 2015 Taylor & Francis Group, from the Russian text © 2007 “Moskovskii psikhoterapevticheskii zhurnal.” F.E. Vasilyuk, “Istoriko-metodologicheskii analiz psikhoterapevticheskikh upovaniy,” *Moskovskii psikhoterapevticheskii zhurnal* [MPZ], 2007, Jubilee Issue, 1992–2007, pp. 44–70. First published as “Na podstupakh k sinergiinoi psikhoterapii: istoriia upovaniy” [Approaching Synergetic Psychotherapy: A History of Orientations], *MPZ*, 1997, no. 2. The text is published here in the author’s new and expanded version. Scientific editors: Vyacheslav Tsapkin and Fedor Shankov.

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Translated by Steven Shabad.

Always be prepared to give an answer to everyone who asks you to give the reason for the hope [*upovanie*]* that you have.

But do this with gentleness and respect.

1 Peter 3:15

“Without ontology, melancholy grabs me by the throat,” two philosophers acknowledged to each other in the already faraway Soviet year of 1974 (Mamardashvili and Piatigorskii, 1974). What grabs the psychotherapeutic throat is another melancholy—without anthropology.

The influence of psychological practice on culture has grown so much now, modern psychology and psychotherapy themselves have turned out to be so overloaded with the endless detritus of all kinds of cultures and cults that perhaps our principal professional task today consists of asking ourselves metaphysical questions: What are human beings? What is their purpose? What is the essence of our profession not as a trade but as a calling? What do we believe in?

Psychotherapy is so powerful and influential that it can no longer allow itself to remain anthropologically oblivious and not notice the power of the energy that it unleashes when it uncorks another “archetype” and releases pent-up genies from it into the emotional and social space. It is possible, of course, to brush off this responsibility and hide behind a set of ready-made justifications: we simultaneously have at our service the recent postmodernism (for which any philosophical and axiological identity is a laughable anachronism); decrepit positivism (“we proceed from facts and are responsible only for the precision of the procedures”); and both general pragmatism (“our law is the client’s benefit”) and medical pragmatism (“anything is acceptable in order to get rid of the symptoms as soon as possible”). We know too well from observing patients, however, how pathogenic the quest for an alibi is when what is needed is the courage to accept responsibility.

A period of development seems to be setting in for Russian psychotherapy where the main differentiations in it will run not along the lines of methodology, theory, and technique but along

*While *upovanie* generally denotes “hope” or “expectation,” it is rendered as “orientation” for purposes of this translation, including in the title of this article.—Trans.

philosophical-anthropological boundaries. An hour is coming and now is the time for philosophical self-determination, where every psychologist and psychotherapist who takes the profession seriously must be prepared to give an answer about his core beliefs.

* * *

This text is like an open letter addressed to all of my fellow psychotherapists, but inwardly it is addressed to those who have made their choice in favor of Christian anthropology. That choice in itself does not automatically predetermine what Christian psychotherapy may become, just as the choice of a site for building a house, even the best site, will not replace the labor of design and construction.

There are two extremes among Russia's Christian psychologists. In one case, existing psychotherapeutic schools reveal an already developed Christian psychotherapy (see, e.g., Znanadporov, 1994), and all that needs to be done is explain to the followers of psychosynthesis, Gestalt therapy, and others that, even without knowing it, they have long since been speaking in Christian prose. In the other case, psychotherapy is viewed against the background of the countless spiritual riches, depth, and authenticity of Church experience and is declared to be vacuous, worthless, and even a devil's occupation. Whoever believes that psychotherapy can be true spiritual service while remaining a real profession must choose a third path—while maintaining a sober-minded and clear spiritual position, they must treat the historical path traversed by psychotherapy with care and respect and, who knows, it could end up in the conditions of present-day culture, in spite of its fundamental secularism, and even atheism, as a “schoolmaster”¹ for Christian psychotherapy.

The subject of this article is the history of psychotherapeutic reliances. I will explain the meaning of the term. When a doctor treats a patient, he does not believe that the medicine he administers acts on its own in bringing about good health in the patient. The doctor relies on the fact that there are regenerative processes within the patient's body that need to be stimulated and supported with the medicine, and it is these processes that will restore the patient's health. His reliance consists of these regenerative processes. The teacher does not think that his explanations by themselves will produce knowledge in a pupil's head; he believes in, he hopes for, relies on the pupil's understanding. The process of this

understanding is the reliance of the teacher, for it is what generates the pupil's knowledge in the end. In psychotherapy, following this logic, the principal inner mechanism, the basic productive process that directly ensures the attainment of therapeutic objectives, can be defined as the "psychotherapeutic reliance" [*upovanie*].

Every psychotherapy school has its own theory, metatheory, its own mythology, technology, and other elements and levels, but the core of this entire, complex structure is "reliance." If overnight all of the countless books on psychoanalysis disappeared and all of the far-flung psychoanalytic knowledge was expunged, leaving nothing but its reliance—the idea of the healing power of becoming-aware, it would be possible from this idea alone to reconstruct the entire theory and technique of psychoanalysis. Conversely, if this idea were removed from psychoanalysis, its entire, enormous structure would collapse, turning into a lifeless pile of meaningless facts. As we attempt to chart the key milestones in the history of psychotherapeutic reliance, we will analyze the relevant mechanisms and processes not in theoretical or technical terms, but from a philosophical-anthropological perspective.

Becoming-aware and suggestibility

The key process that, in Sigmund Freud's concept, provides a psychotherapeutic benefit is that of becoming aware. All of psychoanalysis is a struggle for "where Id was, there Ego shall be." This substitution of the ego for the id consists not so much of expanding consciousness, as is usually assumed, as of expanding the will. In other words, the psychotherapeutic benefit lies primarily in the fact that the ego, as a result of analysis, ceases to be a puppet controlled by the id, but itself becomes the center of volition. Desires may continue to emanate from the id, but the ego rids itself of the id's despotism, especially the cruel and destructive kind that was carried out covertly, through proxies. Psychoanalysis sheds the light of reason on all of these behind-the-scenes machinations, exposes all of the disguised figures, lays bare all of the forces operating underground, and the ego can now consciously and freely make decisions about which impulses to act on and which to reject. (I should note parenthetically that when you mentally approach this triumphant moment of psychoanalysis, this culmination of a very long road of psychoanalytic efforts, you feel sorry, as a human be-

ing, for the poor ego. The conspiracy has been exposed, the masks have been ripped off, the secret is revealed . . . But after all, one has to go on living, and do so with the same underground figures that had been trying to fool the ego, circumvent censorship, and make the ego serve their interests. In this new life that has opened up, illuminated by the cold light of psychoanalysis, the ego will have to voluntarily cooperate with the forces that it just recently, along with the psychoanalyst, had pursued and had finally cornered—after all, there are no other contents in consciousness. The excitement and flavor of a detective story, a chase, stalking, the deciphering of a secret code, the latent passion of interrelations in the stalkers' camp—all of this ends so drearily and bleakly, there is so much in sadness in psychoanalytic knowledge and so little that is heartening and inspiring, that the mutual tendency of both the patient and the analyst to keep prolonging the “serial” by adding episode after episode is more than understandable. It is not just a matter of the complexity of the emotional processes and the financial benefit from lengthy treatment.)

So while the main consequence of putting the ego in the place of the id is that the ego turns into a source of volition, it is the process of becoming aware that provides this result. The whole expectation of psychoanalysis is that it will be able, by force and cunning, to dig down to the knowledge hidden in the unconscious and compel the patient to acknowledge the objective truth about himself, to become aware of it. *Confession*, of course, clearly has a ring of compulsion about it, but it is all justified as long as the act of becoming-aware takes place and the patient accepts the new, true knowledge, no matter how unpleasant it is for him. Knowledge heals. Becoming-aware, therefore, was the main reliance of early psychoanalysis. Freud, who is perceived by the public at large as the discoverer of the irrational depths of the human soul, was actually a rationalist to the marrow of his bones. Everything lends itself to explanation, even what would seem to be irrational and random: mistakes, slips of the tongue, dreams. Freud was the apotheosis of rationalism, the full personification of the famous Baconian motto, “Knowledge is power.” While it was well known even before Freud that “the sleep of reason produces monsters,”* it was perhaps Freud

*An allusion to an etching of that title by Francisco Goya.—Trans.

who became the principal and perhaps last apostle of reason who believed unreservedly in its miraculous power, in the notion that if the light of reason does not actually vanquish monsters, it does tame them.

Even Freud's contemporary psychotherapists by no means always shared this deep-seated reliance that Freud had toward reason and consciousness. But before describing the reliances that replaced Freud's, it is worth mentioning the key mechanism on which psychotherapy before Freud—what may be called the prehistory of modern psychotherapy—relied in its work. This was the mechanism of *suggestibility*. In the course of a session of hypnosis, a patient would have instilled in him a behavior that he was to perform or thoughts that he was to think, or states that he was to experience for his own good. The doctor knew best what was good for the patient, and the doctor also knew what the patient needed to do, think and feel in order to attain this good. The patient's role was to entrust himself to the doctor as much as possible, to obey him, and then he would have every reason to expect the treatment to succeed. This mechanism of trustfulness and suggestibility was what the doctor, the psychotherapist, could rely on in his task of curing patients.

Freud accomplished a revolution of enlightenment in psychotherapy. By comparison with the anthropology of the old, suggestive psychotherapy, psychoanalytic anthropology was, despite all its flaws, far more humane. Freud injected knowledge and freedom, the freedom of consciousness, into the psychotherapeutic image of man. It did not merely become *permissible* for the patient to learn something about himself in the course of treatment; self-understanding, achieved with the analyst's help, became an essential task, on which the entire success of treatment ultimately depended. The patient was also given back the human right to decide for himself what was good for him and what was bad. Finally, in psychoanalysis he ceased to be simply a passive object of treatment but became a partner, even if not an equal one, in conducting the therapeutic process. Compared with the following psychotherapy schools and trends, psychoanalysis is sometimes perceived as a fairly authoritarian and monologic system, but against the background of the suggestive psychotherapy that was dominant before Freud, it looks like a genuine liberator.

Spontaneity

Profound changes began to occur in psychotherapeutic anthropology already during Freud's lifetime. As they settled the mainland of the new psychotherapy that Freud had discovered, the colonists began to discover territories that were in stark contrast with the one where Freud had landed. Perhaps the most radical differences were found by the psychodrama of Jacob Moreno. The very method and lifestyle of the psychodramatic provinces were a daring challenge to the psychoanalytic metropolis. Indeed, is it possible to imagine anything more radically different from the canonical psychoanalytical couch than a psychodramatic scene? more different from a solitary patient lying still on the couch than a protagonist playing in a circle of group members? more different from a neutral analyst looking off to the side than the director of a psychodrama who actively controls the process? These and other differences are so obvious that we can omit them here and focus on what is most important to us. Psychodrama in no way expects the patient to penetrate with cold reason into the secret depths of his soul; it relies on creative spontaneity, on the notion that these depths themselves, the entire human being wants to burst out in fantasy, game-playing, and action. And one need only help this process along for it to pour out with its natural, healing power, in creative, spontaneous expression, everything that hurts, that has been repressed, deferred, and has fallen into decay in the person, and thereby to bring him not only deliverance from suffering but full-fledged, creative self-expression.

If Sigmund Freud discovered a land of freedom for psychotherapeutic anthropology and himself explored and used the portion of that land that may be called the Freedom of Consciousness, then Jacob Moreno became the director and governor of the republic of Free Will.² Of course, this is not the conscious, rational, and at the same time, intense and dreary will that searches for a law, a necessity, and sees its freedom following that necessity and law. This is, so to speak, an uninhibited will, an anarchic one that does not ask for anyone's permission and not because, as Lev Shestov wrote, if you ask whether something is permitted, of course, they will not permit it, but because it does not have the question itself in its uninhibited nature. Spontaneity is a primal will, one that seems to have operated before the distinction between good and evil; it

is creativity as a primal phenomenon that creates existence out of nothing, a generative wellspring that does not even think of asking what is good and what is bad, what is forbidden and what is permitted, it simply generates and savors this very process. When free will is discussed in the philosophical and psychological literature, it is customary to differentiate between rational, conscious will, on the one hand, and arbitrariness, on the other. In the first instance, the person relies on his perception of existence, and not necessarily a rational, reasoned perception—it may be an intuitive, experiential understanding of existence, wisdom, but in any case it involves a kind of knowledge such that, by acting in accordance with it, the person finds and realizes his true human freedom. In the second instance, the person acts solely on the basis of his desire, his whim, while intentionally ignoring religious commandments, societal norms, and even the laws of nature. “I want” is the author, initiator, and irresponsible performer of an arbitrary act. Even though rational will and arbitrariness are radical opposites, what they have in common is the fact that both these acts are already, so to speak, devoid of innocence, naiveté, directness. They are already the result of a struggle between the higher and the lower in a person, the rational and the irrational, the wise and the stupid, except in one case the higher has triumphed and in the other case the lower has; in one case, the rational, in the other case, the unreasonable; in one case, the sighted but cool, in the other case, the hotheaded but blind. It is not that arbitrariness, desire, and whim do not know the norm; they specifically do not want to know. Unlike both of them, spontaneity is, we repeat, “uninhibited will,” a self-acting existence, the beating of life itself from its deepest sources and layers, where not only has the apple not been plucked, but the tree of knowledge of good and evil has not even been planted. Spontaneity knows no law, but it does not know sin, either; its metaphor is the wind, which, like a spirit, blows where it wants, along the way turning windmills, blowing sails, tearing off roofs, but not for any particular reason or motive, not “for” or “against,” but that is just the way it is. This is why, when you meet a person who is endowed with this gift of primal freedom, a person who is spontaneous not through learning, not through some exploit or as a reward, but precisely as a natural gift, you just feel how easy it is to breathe around him, how somber, gloomy, heavy thoughts, constraints, and rules dissipate, how light your step becomes and

how far you can see. It is much easier to forgive such a person for some injury he caused than another, uptight, righteous person who squeezes good out of himself by force of will. It is this deeply rooted nature of spontaneity that explains, above all, the psychotherapeutic effects of psychodrama, to the extent, of course, that it applies its own basic principle and does not resort, as happens quite often in conventional, eclectic practice, to other principles and mechanisms that also have psychotherapeutic potential.

So while the old, suggestive psychotherapy relied on suggestibility, which combined two bondages, two slaveries—acquiescence with the notion that “the doctor knows best,” that is, the obedience of consciousness, and submission to him in behavior, that is, the obedience of the will—the new psychotherapy began to rely on freedom of consciousness and freedom of the will.

Learning

In the postwar period of development of psychotherapy, two more theoretical “forces” emerged onto the historical stage, and the banners of each one had their psychotherapeutic reliances inscribed on them—we are referring to the mechanism of learning in behavioral therapy and the process of experiencing in humanistic psychotherapy.

In historical-methodological terms, behavioral therapy (like behaviorism as a whole) develops its thinking and practice within the category of action (Iaroshevskii, 1974), and in this respect historically ran parallel with psychodrama, but only in this respect. Behaviorism is a methodological hybrid that combines the simplified determinism of classical psychology (what D.N. Uznadze called the “postulate of directness”) and a modern vision of the subject matter of psychology (for the difference between “classical” and “modern” psychology, see Vasilyuk, 1986). The mechanistic methodology and anthropology of behaviorism predetermined the fact that behavioral therapy in a number of ways resembled the old, suggestive psychotherapy. Specifically, the “correct,” adaptive reactions of the patient that are the goal of behavioral therapy are not produced by the freedom and development of the person himself; the content and form of these reactions are imposed from outside, by the therapist. The difference from suggestive therapy is that the correct reactions are “transplanted” from the psychotherapist’s

head to the patient's behavior not through suggestion but through a specially organized learning process. I.P. Pavlov's theory of conditioned reflexes and B.F. Skinner's radical behaviorism described patterns in the formation of new reflexes based on the conditions of reinforcement. These patterns made up the scientific framework for development of the methods of behavioral therapy.

Of course, neither the concepts of behavioral research about learning nor the use of learning mechanisms in psychotherapy were limited to these mechanistic types of methodology. Neobehaviorism, the theory of social learning, and various versions of cognitive behavioral psychotherapy (Bandura, 2000; Beck et al., 1979; Ellis, 1989; Eysenck, 1960; Wolpe, 1982) introduced a more developed research methodology (specifically, A. Bandura's ideas of the "reciprocal determinism" that overcomes the mechanistic determinism of radical behavioral frameworks). But despite all of the distinctive features of psychological theories and therapeutic methods in the context of cognitive behavioral therapy, the therapeutic relationship is conceptualized mainly as a "teacher–student" relationship (Dryden and Ellis, 1986), and learning is considered to be the basic process through which therapeutic results are achieved. This was true at the very outset, when "in a seminal paper published in 1959, Eysenck defined behavior therapy as the application of modern learning theory to the treatment of behavioral and emotional disorders" (Wilson, 2000), and it remains true now. Therefore, learning is the psychotherapeutic reliance of the entire set of cognitive behavioral approaches in psychotherapy.

Experiencing

Another radical change occurred in psychotherapeutic reliances by the 1960s—the time when humanistic psychotherapy developed—and this change became determinative throughout the psychotherapeutic world. Psychotherapists in their clinical practice increasingly began to rely on the patient's experiencing. Regardless of whether this category was studied in a given psychotherapy school as overtly as in Gestalt therapy or in Carl Rogers's client-centered therapy, almost everywhere various versions took shape of a single concept of experiencing as a distinctive internal life process that encompassed a person's emotions, his mind, imagination, and will, and involved in its flow bodily functions in addition

to psychic ones. It was this process of experiencing, according to the new views, that ultimately provided a therapeutic benefit.

If we attempt, without focusing on a certain theory that explicitly develops the concept of experiencing (Gendlin, 1962; Vasilyuk, 1984, 1991), to create something like a Galtonian photograph³ of this category that records only its common, familial features and erases individual differences, here is what we will see. First, this is a total process, one that encompasses, as was just mentioned, the mind, feelings, imagination, and body responses—in short, the whole person. Second, it is a subjective process—the person senses it directly, lives it inwardly, does not separate it from himself and feels it as a reality that certifies itself, is a self-authenticating existence that does not need any external validations and does not accept any external refutations. Comments addressed to an experiencing person that do not take into account the phenomenological self-evidentness of his experiencing and attempts to dissuade him or change his mind do not succeed; they seem insulting in their distrust and are rejected, regardless of whether they may have come from the best intentions. Third, it is an involuntary process, in the sense that the subject does not tell himself to experience or not to experience something; the process unfolds in him and captures his consciousness without prior intentions or goals. Fourth, it is a productive process. Experiencing is capable of accomplishing an upheaval in human concepts, views, attitudes, tastes, positions—in everything that a person cannot change through efforts of consciousness or will power. If a person has suffered a loss, it is futile for people around him to explain to him, or for him to explain to himself, that it was inevitable and part of a natural pattern. And it will be futile for him to try through will power to take control of himself—he will have to go through the agonizing process of experiencing and let the work of experiencing take its course in his soul, and only then will he be able to feel the meaning and fullness of life again.

As reliance became the main orientation of psychotherapy, these distinctive features in it led to the development of a completely new style of psychotherapeutic work.⁴ New psychotherapeutic methods and principles took shape that corresponded to these elements of experiencing. In order to describe them in generalized form while obscuring the substantial differences among various therapeutic schools, we also need a Galtonian photograph.

Recent psychotherapy, in keeping with the total nature of the process of experiencing, is increasingly demanding a broad consciousness and polymodal perspicacity of the therapist. He will not overlook an imperceptible sigh, a dream, a turn of the head, a change in relationships with family members or even random events in which the patient has been an absolutely involuntary witness or participant. These seemingly random events in the "world channel" (Mindell, 1993) are just as important symptoms and, most important, enactors of his total process of experiencing as accidental slips of the tongue in psychoanalysis are signs of an unconscious revelation.

The psychotherapeutic response, however, to the totality of the process of experiencing is not only a refined perspicacity and an "expanded" consciousness on the part of the psychotherapist but a completely different mode of personal involvement by the therapist in the psychotherapeutic process than in previous psychotherapeutic eras. It was for good reason that Carl Rogers's psychotherapy, which was first called "nondirective" and then "client-centered," eventually was given the name "person-centered." This final name expresses the conviction of one of the leaders of recent psychotherapy that the holistic involvement of the psychotherapist's own personality in the therapeutic process is not a forced concession to the ineradicable reality of transference relationships but a valuable core of psychotherapy in its own right, without which genuine and beneficial changes in the patient's personality are not possible. The full radicalism of this revolution has not yet been properly assessed by the theory and philosophy of psychotherapy; this assessment is hampered by the quite understandable internal tendencies that make psychotherapists struggle theoretically, methodologically, and ideologically (Varga, 1994) to avoid under any circumstances taking on too much personal responsibility for the therapeutic process and especially for changes in the personality, life, and fate of the patient.

Without getting into a detailed discussion of this topic, we will merely define the problem here in passing. There is no question that a psychotherapist, like any person, should not take on more than he can handle. There is also no question that it is harmful to indulge the infantile tendencies of patients who sometimes seek to shift the responsibility for their lives to the therapist. These are basics. If the issue were confined to these basic truths, what would make psychotherapists so fervent in the way they sometimes rush to uphold their right and even obligation to remain a person

with limited responsibility and, simultaneously, the patient's duty to become a person with unlimited responsibility for all of the benefits and consequences of participation in psychotherapeutic work. This fervor does not seem to derive at all from theoretical views or pragmatic expediency; it derives somehow from the psychotherapist's own personal, spiritual life, with where and how he draws the boundaries of his limited responsibility and to what or to whom, according to his conscience, he is responsible, to whom he is accountable.

What corresponds to the subjectivity of the process of experiencing in recent psychotherapy is the principle of phenomenological trust (see Rodzher [Rogers], 2002). This refers to the willingness to accept the testimony of the patient's subjective experience *as is*, not as a sign of something else that must be deciphered and expunged but as a self-sufficient reality that can count on respect and trust. This does not mean, of course, that the psychotherapist should naively believe that the neighbors of a psychotic patient have actually constructed a hyperboloid and irradiate him through the wall at night, but rather should accept the terror experienced by the person as reality and empathize with this emotion, which is no less frightening just because the building committee can vouch for both the neighbors' decency and the fact that they are not behind the wall. Finally, what matches up with the involuntariness of experiencing and its productivity is the strategic principle of recent psychotherapy that consists of following the process. If the psychotherapist is convinced that genuine and beneficial changes in the patient's consciousness and personality come from the productive work of experiencing, he must turn into a participant in the psychotherapeutic process who is just as *obedient* in the literal sense as a poet who does not fabricate anything but, specifically by straining his entire being, digs through the noises of randomness and arbitrariness to the real truth of the poetic melody that is heard; as a novelist obeys a self-developing plot and is often surprised by his heroes; as even a conductor—in the paradoxical notion of Osip Mandelstam (1987)—obeys an orchestra.

Communication

Besides experiencing, another category of human existence has become a focus in recent psychotherapy of theoretical constructs

and wonderful psychotechnical discoveries. We are referring to the category of communication. Of course, the entire history of psychotherapy could be reinterpreted from scratch in its key, nodal moments in terms of communication, by depicting it has a series of changes in the methods of constructing a therapeutic dialogue between patient and therapist. Such an interpretation of history would be productive, and therefore valid; nevertheless, only in postwar psychotherapy did this dialogic paradigm itself begin to occupy an increasingly dominant position by gradually spreading from the domain of psychotherapeutic relationships and interaction between therapist and patient, that is, from the domain that belongs to communication views, as it were, by natural right, to other domains and aspects of psychotherapy. It stated its claims to be granted the assignment to form psychotherapeutic concepts, even with regard to what seemed in the past to be fully “monologic” items, such as the patient’s personality, the causes of emotional disorders, and the results of the therapeutic process.

The creative potential of this paradigm proved to be so great that it exceeded all of the boldest expectations. It provided such elegant, brilliant, and persuasive theories and made it possible to develop such an effective technology of psychotherapeutic work that one began to get the impression that psychotherapy could do anything, that it could work miracles not only in its original realm—the clinic of neuroses—but also in the other hottest spots of modern social life, where it seemed that no one and nothing could help anymore. Psychotherapy, that last offspring of nineteenth-century European culture, entered a flowering period and, with the ease of a genius, began to take up the most varied problems: from the reconciliation of communities and nations that had been warring for decades (e.g., Carl Rogers in South Africa) to a cure for cancer, from the creation of super-effective teaching methods to care for comatose patients and patients who had had a deep, schizophrenic defect for many years, whom traditional medical personnel had long since become accustomed to regarding as waxworks with working physiological systems.

A special feature of this triumphant period of recent psychotherapy, which made the word “impossible” a rare anachronism, was the fact that all of these miracles were created not by three or four psychotherapeutic gods whose success could always be “explained” by a most persuasive reference to their names: “Why,

that's Virginia Satir (Carl Rogers, Fritz Perls)!" but by many, many masters who did not necessarily have particular charisma but were merely skilled and had successfully assimilated and creatively developed the experience of their brilliant teachers. For example, neurolinguistic programming, which was so popular in our country until recently, represents, according to the original idea, an attempt to mass-produce psychotherapeutic geniuses by injecting extracts⁵ of effective therapeutic communication strategies taken from the work of great, charismatic masters into the ordinary minds (or even spinal cords) of psychotherapeutic recruits. This experiment may be said to have succeeded, with the one caveat that instead of geniuses the assembly line has smoothly churned out and is churning out psychotherapeutic broilers, quite muscular and exuberant ones, but marred with the stigma of being dietetic and faceless according to an indestructible law of nature that accompanies everything in which secrecy and mystery are replaced with reason and mechanism.

We cannot get into a critical analysis here of neurolinguistic programming (NLP), although our therapeutic community badly needs a calm, sober, and systematic analysis of this phenomenon. But no matter how much disdain or delight we show toward neurolinguistic programming, we must acknowledge the historical fact that it was this psychotherapeutic school that created the preconditions for transforming psychotherapy into a mass-scale profession. This transformation is a highly important event in our profession, on which its fate depends. The number of professionals in a given field is a significant historical factor, regardless of their quality. (Whether we like it or not that the thickness of the directory of the Writers' Union, while not on the level of *War and Peace*, is quite comparable to *The Devils*, even though there are scarcely more writers than during the period when psychotherapy was in its infancy, this number for many people, from readers to publishers, is a significant, meaningful fact, and without knowing it an understanding of the so-called literary process would at least be incomplete.) So psychotherapy largely owes this recent special feature of its professional makeup—its mass scale—to the communication paradigm, which the creators of NLP, R. Bandler and J. Grinder, pupils of Gregory Bateson, applied to a methodological analysis of the therapeutic process.

Of course, Freud was already brilliant at the communicative style of thinking. Most of his metaphors, and even highly important

categories for psychoanalysis such as the ego, censorship, and others have a manifestly communicative nature. This became clear in Bakhtin's early analyses of Freudianism (Voloshinov, 1927), but it was a paradigmatic category of psychotherapy into which communication was gradually transformed, achieving its full power in Gregory Bateson's methodological explorations and Jacques Lacan's linguistic psychoanalysis.

The communication paradigm, we repeat, began to form not only concepts of the process of interaction between patient and therapist, which was more than natural, but also an understanding of the nature of the personality, the causes of psychopathology and even the results of the psychotherapeutic process. As for concepts of the human personality, it began to be viewed as consisting entirely of a "dialogue of voices," as a polyphony, as a "speaking animal" [*parle-être*], that is, a being whose very "cells" are by nature words, and whose most intimate processes of exchange are speech, the exchange of words, dialogue. How popular and productive the dialogic understanding of the personality proved to be in psychotherapy is demonstrated by the remarkable work by V.N. Tsapkin "The Personality as a Group—The Group as a Personality" [*Lichnost' kak gruppа—gruppа kak lichnost'*] (1994). The most graphic example of a communicative understanding of the etiology of some psychic disorders is the concept of the "double bind" (Beitson [Bateson] et al., 1993), with which a "schizophrenogenic mother" forms the schizophrenic structures of her child.

An equally vivid example of a communication concept of the outcome of psychotherapy is Lacan's famous formula in which "the subject begins analysis by talking about himself but in doing so does not address you, or he addresses you but does not talk about himself. If he is able to talk about himself and address you while doing so, then the analysis is over" (Lacan, 1966, p. 261). This formula sounds overly paradoxical only because of the naturalistic habit, which is hard to eradicate, of conceptualizing everything, especially serious things such as the outcome of treatment, in objective and object-related terms. For its depth and precision, however, this formula can safely be included in the golden treasury of psychotherapeutic thought. The importance of this brief and concise formula is hard to overestimate. Like a small railroad switch, it sends to the garbage dump the trainloads of incoherence and stupidity that have piled up and continue to be produced at the

reputable enterprise called “Scientific Research on the Effectiveness of Psychotherapy,” thereby freeing the tracks for a theoretically fruitful and practically convenient solution to this problem. It is not to be found in the old dead end where laborious efforts are made with the aid of the latest computers and sophisticated statistical programs to mine material that is absurd from a psychotherapeutic standpoint only because it is desired so much by insurance offices and the bureaucrats responsible for psychotherapy, who demand “objective criteria” in a matter whose entire essence, whose entire objectivity, is subjective. The solution to this problem, as Lacan’s formula reveals to us, is located on a completely different horizon, not where we endeavor, apart from the patient’s personality and consciousness, to determine what was in him before and what there is after the course of psychotherapy, but where we ourselves are participants and figures in his speech, his human remarks about himself. The irritation of bureaucrats whose official duties require them to make sure all the numbers agree is quite understandable—as is the resentment of the “pure scientists” who perceive the lack of clear, unambiguous, objectively recordable results of psychotherapy as mindlessness and quackery. But the notion that the success of psychotherapy can (and must!) be judged according to how well the patient has learned to talk about himself and his problems will seem persuasive and true to any unbiased person, even one who is unversed in psychotherapy but who through his line of work or from personal experience knows the full power of human words, which are capable of moving mountains, reviving the dead, as well as, alas, killing the living.

In summing up the discussion of the dialogic paradigm, we can say that it created not merely a new “reliance” but transformed this very category of reliance, as it were, from the inside. By “reliance” we have, until now, meant the process at the patient’s pole that the psychotherapist stimulates, summons up and facilitates and by doing so expects to achieve psychotherapeutic results; but with the ascendancy of the dialogic paradigm this very concept of two separate, albeit intertwined, processes—the process of psychotherapeutic influence and some productive psychic process in the patient himself—underwent changes. The psychotherapeutic process began to be conceptualized not as the interaction, combination, and nexus of two letters, such as “w” and “e,” but as the life of the integrated word “we,” which does not break up into parts without losing its

meaning. When Milton Erickson (1995) promises the patient, "My voice will go with you," he is just overtly expressing what is actually occurring not only in Ericksonian therapy but in any other. Psychotherapy does not affect the patient's consciousness in a way that we can somehow separately record the psychotherapy and the consciousness and evaluate how the consciousness changed after the psychotherapy. Psychotherapy and consciousness mutually mediate each other, unite their circulatory systems in a way that no "psychotherapy" exists after a meeting with this patient, but what exists is only a real psychotherapeutic case precisely with this patient. Similarly, no "consciousness of the patient" exists after psychotherapy. As soon as psychotherapy has taken place (in the sense in which one can say whether poetry has taken place in this poem), the patient's consciousness has absorbed the voice, the personality, the thought—in short, the spirit of the completed psychotherapy.

Of course, even within the dialogic paradigm itself excesses of naturalistic thinking and the mechanical actions that accompany it are inevitable, and then the reliance of psychotherapy again begins to stretch out to separate poles. Then at the patient's pole there is an "internal dialogue" whose organization, stimulation, and refinement are actually conceptualized as the process that yields a psychotherapeutic result. At the other pole, which may be represented by radical followers of NLP, the reliance is moved all the way over to the therapist's actions, so any lack of success in therapy is treated simply as the psychotherapist's failure or mistake. This implicitly establishes an extreme faith in technology, which, by leveling out the two personalities of the therapist and the patient, is declared to be fundamentally self-sufficient and a definite guarantee of success if all the operating instructions are followed. Any talk about secrets and depths of the psychotherapist's personality and the patient's personality that many, in spite of the technology, have the last word, are ironically declared, from a position of radical communicative technicism, to be a ludicrous justification of incompetence, similar to the complaint of a mechanic who blames his inability to repair a car on the "whims" of the engine (Bandler and Grinder, 1995).

* * *

If we try to take a panoramic view of this entire historical succession of psychotherapeutic reliances, we will notice that as

each reliance has appeared, the previous ones have by no means dropped out of circulation in the world of psychotherapy. Among the multicolored flags of psychotherapy schools one can still find some that bear the same mottos that were etched on the banners of early psychoanalysis or psychodrama. Systems also emerge that offer new versions of old reliances. For example, as alien as cognitive psychotherapy is to psychoanalysis, in a certain sense it is a derivative of the psychoanalytic reliance toward the process of becoming-aware, pinning hopes in its practice on the idea that becoming-aware of “automatic thoughts” and various kinds of “biases” may restore sound thinking for the patient.

Now an increasingly noticeable eclectic trend is under way. Various psychotherapy schools, while retaining a nominal organizational separateness and holding on to institutional barriers, are converging in terms of their composition, technique, and theory, borrowing a great deal and discovering a great deal independently of one another. This eclectic trend also pertains to the parameter of the organism of a therapeutic school that we have called the “reliance.” Many currents that have developed especially rapidly in recent decades simultaneously rely on multiple reliances. For example, Ericksonian hypnotherapy achieves brilliant psychotherapeutic results by combining two of the analyzed reliances—suggestibility and experiencing. Erickson’s nondirective hypnosis creates a state of consciousness in the patient in which the processes of the patient’s productive experiencing intensify and literally blossom. The therapeutic principles and images that are introduced by the psychotherapist in the form of metaphors, fables, or jokes are relevant to this living process of experiencing, mediate it and precisely for this reason prove so effective, in contrast to the linear inculcation of the old, pre-Freudian suggestive psychotherapy, a tacit condition of which is the patient’s abandonment of his knowledge, his will, and his emotions—in short, in a certain sense an abandonment of his personality. The new nondirective hypnotherapy actually creates a highly propitious milieu for the patient’s experiencing, that is, for the internal, intimate, personality-based process from which a person understands that it is *he* who is living. Ericksonian hypnotherapy discovered methods of suggestion that worked without enslaving the patient’s personality.

Although the eclectic and integrative trends are engendering more and more new and complex combinations and are creating

more and more new varieties of the psychotherapeutic art, alongside them ancient, primitive forms that, it seemed, should have long ago become the focus of psychotherapeutic paleontology continue to be produced. Moreover, in terms of their viability and mass scale they not only hold their own with the more developed and sophisticated psychotherapeutic systems but also sometimes begin to sweep over and cover the entire domain that in the consciousness of the public at large is associated with the word “psychotherapy.” The most graphic example of this kind is the enormous empire of coding that originated in remote Feodosia and covered the entire territory of the former Soviet Union. The speed with which this primitive form of psychotherapy spread, the financial transactions that essentially attract more and more new recruits from among physicians and psychologists constitute extremely interesting material for a sociological and sociopsychological analysis of the consciousness of today’s average post-Soviet citizen. We, however, must point out from the perspective of the problem of the reliances of psychotherapy that the so-called coding method is a relapse of the oldest of psychotherapeutic reliances—suggestibility.

* * *

Is there some internal logic to the succession of psychotherapeutic reliances? Although the history of psychotherapy cannot be described as a linear, progressive process, we can discern an overall trend showing through the succession of psychotherapeutic milestones. If we step back from all the particulars, details, lateral spinoffs, and backtracks of a specific historical process, the principal line around which the arrow of the historical compass of psychotherapy nervously hovers, leads from slave to personality. The example of coding reveals in the most salient and crude form the real internal basis of the naked principle of suggestibility. It is the temptation of slavery, the lure of objectness.

There is a propensity in man for slavery, a desire to abandon the daily efforts to be a person himself and to perceive someone else as a personality. The humanity of existence is “achieved by force,” beginning with the vertical position of the body, which requires a continuous volitional effort, and ending with prayer, a conversation with God. But we want so often to give ourselves up to indolence, to give up the human calling, to sit down, or better yet, to lie down, to relax, to cover our eyes; we want so often

to somehow mechanically secure the success achieved through previous efforts, so that our status or experience, knowledge, or titles, acquaintances or habits, will finally do some work for us. It is sometimes so convenient to perceive someone else as a role, a function, an illness, a character, a job title, a type, and so on, rather than as a personality. If this tendency to "escape from freedom," to escape from a personality-based existence is a common human weakness, in the clinic of alcoholism and drug addictions (which in the 1990s was almost completely occupied by the coding method), this tendency is especially strong. Volitional impairment is one of the most important symptoms of the flattening of the personality from substance abuse. This tendency is what the coding method exploits. An alcoholic patient who is too tired or does not wish to fight his addiction is so attracted to the notion that he may allow himself in this treatment to simply turn into an object that the doctor will manipulate at will, that he is willing to do anything, as long as it does not require any of his volitional efforts, his human participation, his freedom. It is worth recalling that a slave, strictly speaking, is an object, so in Latin they are even referred to by the same word, *res*.

It is this pole of slave and object that the historical trend in psychotherapy opposes. We stress that what is occurring is not only and not so much a change in the views of man in psychotherapeutic theory as the actual implementation in psychotherapeutic practice of a type of relationship that calls for the actualization in the patient of a greater or lesser degree of slavery or freedom. A devotee of the coding method may well think during his leisure time that a person is born to be free, just as a bird is born to fly, but by his own practical actions he puts his patient in circumstances in which the propensity for slavery in the latter begins to develop, to intensify, by receiving its ideological justification and social reinforcement.

Without turning away from all the flaws and defects in modern psychotherapy, we must give it credit for not following, as a rule, the path of least resistance and not taking advantage of the fact that the patient "is happy to fool himself" but expecting and demanding freedom and truth from him. The very concepts of modern psychotherapy concerning freedom, truth and the personality are often deleterious and limited, but as the therapy gains insight it calls them forth. Psychotherapy helps a person to accomplish the effort to see the painful truth about himself, to go beyond the neurotic

tendency to mindlessly subordinate oneself to the expectations of other people or a social group, to expectations that do not take into consideration that person's real calling. Psychotherapy, finally, gives him the opportunity to articulate the truth of his emotions, which had been carefully concealed from others and from himself. Psychotherapy everywhere fights against pharisaical conformism, and although in doing so it often falls into amoralism, the justification for it can be found in the fact that it does not for a minute want to leave the reality of emotional life, the truth of the soul, because it rightly senses that there is an intimate and indissoluble connection among truth, freedom and the personality.

When you try to delve through the variety of psychotherapy schools that have succeeded one another to the inner meaning of the history of psychotherapy, the supreme value that psychotherapy was called upon to serve begins clearly to show through. Every profession is justified, in the final analysis, by some higher value, and it must orient itself above all with respect to this value. Jurisprudence serves justice; science serves truth; art serves beauty. All of them technically may serve, and do serve, something else: legal knowledge may be used to acquit a guilty person or to charge an innocent person; science may serve war and the system of political totalitarianism; art may be used successfully for commercial purposes (e.g., for advertising). Thus, psychotherapy as well may serve (and does serve) health, business, and advertising, too, but the higher, supreme value is irreducible to these limited purposes and tasks and cannot be derived from them. The hero of one fairy tale who is being lured into selling a magic penny trumpet replies that it is not for sale and it is sacred. Bearing in mind this wonderful distinction between being for sale and sacred, we can say that psychotherapy can do and does a great deal for sale—surviving, it believes, by virtue of this “realism” and “adaptivity,” but in reality *it lives* and is justified by its sacred, supreme value. The name of the value is freedom of the personality. This does not refer, of course, to rights, but to *the inner freedom of the personality*—freedom of the will, of consciousness, of conscience, of emotion.

What is next? Creativity and prayer

Freedom of the personality, therefore, is the axiological summit to which the overall vector of the history of psychotherapy aspires.

Of course, the general idea of freedom as the supreme value of psychotherapy needs a systematic methodological, scientific, and technical elaboration, but the necessity of comprehending in which direction the main pathways of the development of psychotherapy will go prompts an effort, without waiting for the results of a sequential, conceptual consideration of this idea, to peer into the future using a living example, a personage, a symbol of freedom.

Values reveal their true meaning not in abstract form but in an embodied form in a specific person, his life and whole makeup. The value category of sacredness would remain a hollow abstraction without Sergius of Radonezh or Francis of Assisi. For the value of the "inner freedom of the personality," in Russian culture there is no fuller, more consummate personification, no more persuasive model, than Alexander Pushkin. But why him? What evokes this inspiring feeling of freedom the most when you read Pushkin or about Pushkin—the youthful follies? the independence in the face of authority? the love of political freedom? the fascination with Gypsy freedom? No, all this is secondary. What is first and foremost is freedom of expression. Freedom of the personality was realized in Pushkin, above all, most deeply and most powerfully in his freedom of expression. Pushkin was able to comment on everything, to say everything, by every possible means, and with his entire being. No one can give this freedom to a person, but no one is capable of taking it away, either. Such freedom of expression does not mean an external permission to speak, but a method of existential breathing, the ability to *dare* to speak in the face of any external and internal prohibitions and the ability to *know how* to speak in the face of an environment of narrow-mindedness. In this context words become a creative act of realizing the fullness of a person's life, and not merely a matter of literary creativity.

But isn't that what psychotherapy ultimately wants, isn't that its most cherished dream? Let us once again consider the Lacanian formula In which the analysis can be considered complete when the patient is finally able to talk about himself while addressing the therapist. It expresses not only a communicative criterion of the effectiveness of psychotherapy but also an anthropological ideal. The fact that the patient in the course of psychotherapy has acquired and manifested freedom of expression, has managed to incorporate his existence into his words and has been able to express himself intelligibly and fully to someone else (the psychotherapist) is a

wonderful fact that attests to the success of psychotherapy. But what is immeasurably more important in this fact is the evidence that there has not simply been a change in the patient's mode of functioning but a change in the very essence of the person, his mode of being. Perhaps this is all that psychotherapy really strives to do—to discover in a person the ability to *know how and to dare to articulate himself*. Freedom of expression in this context acquires an ontological flavor that requires one to recall that human expression is a deeply rooted, vital act that contains transformative energies. In a deep and open articulation of himself a person does not merely strengthen and heal himself emotionally and find a meaning to his existence; he changes in his ontological core, and the object-related in him, determined by object-related elements, is transformed into the verbal, into *logos*, into a purpose. And the person increasingly becomes what he is supposed to be—a verbal being, a “parlettre” (Lacan).

This “know how and dare to articulate himself,” this inner freedom of expression, as the ultimate value of psychotherapy, condenses all of the reliances on which it has pinned its hopes in various schools and trends during various historical periods. “Know how and dare to articulate himself” means entrusting oneself to someone else; it means the recognizing of one's depths that are hidden from a superficial view; it means creatively uncovering one's depth in its spontaneous manifestation; it means understanding, accepting, and expressing one's experiencing; it means entering into a free dialogue with someone else. Freedom of expression in psychotherapy is a synthesis of trust, freedom of consciousness, freedom of will, creative experiencing, and dialogue.

But if freedom of expression, as an integral symbol of the inner freedom of the personality, turns out to be the dominant feature of the entire historical development of psychotherapy, psychotherapy should take a fresh look at itself and reinterpret itself as a cultural practice. To this end, it is worth looking around us and asking ourselves where else, in what realms of culture, is free expression the central, vitally important, and irreplaceable act? The answer is obvious—in poetry and prayer.

This comparison enables us to formulate a predictive hypothesis: the logic of the historical development of psychotherapy should bring two categories to the fore, into the ranks of the main psychotherapeutic reliances: creativity⁶ and prayer. The categories

of creativity and prayer will become the growth points of psychotherapy, centers of the crystallization of fundamental theoretical and methodological innovations. Therefore the cultural reference points of psychotherapy must be replaced in the new century. When it first appeared it was oriented toward medicine as a special type of cultural practice; now, under the above hypothesis, art and asceticism⁷ are increasingly becoming such models for psychotherapy. As for the first reliance, creativity, examples already exist of psychotherapeutic systems that have made creativity the cornerstone of their method. Russian examples include *Therapy by Creative Self-Expression* [Terapiia tvorcheskim samovyrazheniem] by M.E. Burno (1989, 2003) and *Mask Therapy* [Maskoterapiia] by G.M. Nazloian (2001). The rapid development of various currents of art therapy is also on this historical track. All that is needed here is a precise arrangement of methodological focal points. Then psychotherapy will certainly be able to carry out and put the principle of creativity into effect, when it is not merely a secondary use of various arts in psychotherapy (as is most often the case in many art-therapy approaches) but when psychotherapy itself becomes an art that incorporates and synthesizes, if necessary, other arts. There is no basis for the disputes that are rekindled from time to time about whether psychotherapy is a “science” or an “art.” This kind of categorization is not a matter of conjecture about a given that supposedly exists but a challenge, a task that can be accomplished or not accomplished. Psychotherapy *can become* an art.⁸

The second major area of the future development of psychotherapy, under the above hypothesis, involves the category of prayer. Although experiments in creating psychotherapeutic methods that put prayer at the center of their constructs also exist already (see, e.g., Rose, 2002), this fact does not negate the fundamental question of whether psychotherapy can, in general, include the category of prayer in the horizon of its theory and its method, and whether it thereby destroys the basic conditions of its existence that establish psychotherapy as a distinctive cultural institution. In a more general form, it is a question of whether there is a radical, ineradicable contradiction between psychotherapy and religion, specifically between psychotherapy and Christianity. Precisely the fundamental relationship is at issue, because on the empirical surface, where random (albeit common) manifestations are chosen for mutual assessments, there are both a huge quantity of mutual grievances and condemnations

and quite a large number of examples of uncritical “fraternizations” and unhealthy, symbiotic fusions. In considering this question from the perspective of psychotherapy, we should reformulate it as follows: does religion contradict the essential objectives and values of psychotherapy? This formulation, in turn, requires us to ask: where, for that matter, does psychotherapy get its objectives and values from, what is their source? Is it medicine? Psychology? In general, is it science? K. Jaspers gave a very specific answer to this question: psychotherapy, like any practice, “is dependent on science only in its methods, not as regards its aims” (Jaspers [Jaspers], 1997, p. 946), while the aims of psychotherapy are determined by “religion (or its absence)” (ibid., p. 945).

If we now apply this inquiry about sources not to objectives and values in general but to the specific value of psychotherapy that has become the dominant feature of its historical development, the value of “freedom of the personality,” we can find among world religions only one that puts the idea of freedom and the idea of the personality in the center of its theology and its anthropology, and that is Christianity. Therefore, since psychotherapy wants to understand itself not only on a technical and concrete theoretical level but in the ideological core of its existence, it must determine and clarify its relationship with Christianity. This is not simply a personal interest on the part of a Christian psychologist who wants to be consistent and harmonize his faith and professional axiology, but a central task of the philosophy of psychotherapy.⁹

The first question to be posed as part of this task is the one about “freedom of expression,” since it is the most concise formulation for psychotherapy, and the closest to it, of the value of “freedom of the personality.” Freedom of expression in the sense of a person’s effort to transform himself into words, to turn into a “talking animal,” that is, a being suffused with a semantic light, logos, and spirit, is, from the standpoint of Christian anthropology, nothing other than an effort to realize himself in God’s image and likeness. Because if God is the Word (John 1:1), then a person who wishes to unite with God faces the task of becoming the word, so that in his very “composition” he becomes kin to God. “Freedom of expression” interpreted this way in its ultimate (beyond-ultimate) manifestation coincides with the final goal of Christian asceticism—theosis.¹⁰

But what, people will ask, does psychotherapy have to do with this? Or a different question: when psychotherapy discovers the

spiritual essence of its supreme value, should it not stop on the way there, either out of a sense of protest against any religiosity or out of a sense of devout reverence for a sacred object? Should it not confine itself to the simple and understandable tasks of treatment, comforting, adaptation, and so on? But even if psychotherapy did not want to stop, but continued to dare to participate in the ultimate tasks of Christian asceticism, would this be feasible for it? Is a psychotherapy really possible that, besides striving to rid patients of symptoms, to overcome their neurotic problems, to resolve family conflicts, and accomplish other useful things, aspires to none other than a person's theosis? Is a psychotherapy possible that does not simply dream of this otherworldly horizon, but attempts to really orient itself toward such an anthropological ideal and actually incorporate it into the fabric of a specific therapeutic process? To any reasonable specialist it is clear that such a psychotherapy is impossible. But "what is impossible with man is possible with God" (Luke 18:27). Christian psychotherapy cannot be conceptualized as a self-sufficient professional activity that differs from other varieties of psychotherapy only in the fact that it has chosen Christian doctrine as its "ideology," its "myth." In its practice, it is conceivable only as an organ and function of the living Body of the Church of Christ. In its theory, it is based on the "synergetic anthropology" of the collaboration between man and God (see Khoruzhii, 1995, 1998), which is a philosophical expression of patristic theology and therefore should itself be called synergetic.

Synergetic psychotherapy is psychotherapy that in a certain sense is non-self-sufficient, unsure of itself, and unguaranteed; it uses time-tested psychotherapeutic devices and mechanisms, but cannot rely on them alone. It constructs a therapeutic situation that takes into account the patterns of the formation of a therapeutic relationship that have been learned from experience, but refuses to believe that the game of "transferences" and "countertransferences" is all there is to the mystery of the meeting of personalities; in short, it is incomplete from the outset (in terms of both understanding and action) and needs to be filled out. This is not some particularly spiritual psychotherapy; on the contrary, it is "poor in spirit," and like a beggar, it should have an open palm. That palm is prayer. Prayer is the main reliance of synergetic psychotherapy.

This is not the place to discuss specific versions of the theoretical and practical implementation of psychotherapeutic systems with

prayer as its primary psychotherapeutic reliance. That is a separate topic; for our topic of the methodological analysis of the historical succession of psychotherapeutic reliances, it is important to establish that a new reliance, as in precious periods of development, does not drive out old ones but merely organizes them in a particular manner. At various stages of the process of synergetic psychotherapy the therapeutic dialogue may rely on the process of becoming-aware, or on spontaneity, or on experiencing, or it may remain at these levels if prayer has not been born in either the patient's soul or the therapist's soul; but even in this case prayer is still the main reliance and main subject of concern of synergetic psychotherapy. (There is nothing paradoxical about concern in regard to what is absent and about hoping for it: this is how a mother may be concerned about an as yet unborn child and have hopes for it.) The ideal, most desirable state of the therapeutic relationship in synergetic psychotherapy may be called a state of "harmonious prayer." It occurs when the therapist and the patient prove capable of a degree of personality-driven openness to the face of God and a degree of solidarity in regard to the dominant meaning-related factor in the patient's life that it affords them at least a potential opportunity for joint, united, and sincere prayer about the patient's need for meaning. The closer the psychotherapeutic relationship comes to a state of "harmonious prayer" and the more prayer ultimately is freed from the cocoon of psychotherapy, the more the previous psychotherapeutic reliances—total trust, the acquisition of deep awareness, spontaneous manifestations, genuine experiencing, and the realism of the Meeting—are executed both in synergetic psychotherapy and in prayer itself—of course, in a transmuted form.

Notes

1. The Christian theologians Clement of Alexandria and St. Justin Martyr called Greek philosophy a "schoolmaster" for Christ.—Scientific ed.

2. A state of spontaneity, Moreno wrote, "is brought forth by an act of will and appears of its own accord. It is not created by the conscious will, which frequently acts as an inhibitory bar, but through liberation, which is in fact a free manifestation of spontaneity" (Moreno, 2001, p. 64).

3. F. Galton attempted, by a method of superimposing photographs of family members on one another, to isolate their common, familial features.—Scientific ed.

4. Of course, it was not the case that psychologists studied the process of experiencing and then the transformation of methods of therapeutic practice followed in the footsteps of this research. Psychotechnical understanding develops according to other laws (see Puzyrei, 1986; Vasilyuk, 1992).

5. A metaphor borrowed from V.N. Tsapkin (personal communication).

6. Because “poetry,” in the original sense of the Greek word and in its innermost core is “creativity.”

7. We should note that asceticism in Christianity denotes the art of self-construction of the personality: “Asceticism as an activity,” writes Father Pavel Florensky (1990, p. 99), “was referred to by the holy fathers not as a science and not even as moral work but as an art—as a craft—in fact, as essentially an art and a craft—the ‘art of arts,’ the ‘craft of crafts.’”

8. The works of our outstanding psychotherapist V.L. Levi (2002, 2004) are examples of the realization of this potential. How such psychotherapeutic works are viewed and assessed in an academic context is a special problem. The fictional form of Levi’s books, his principled rejection of the academic uniform, which inhibits and limits creative fantasy, should not lead anyone into haughty disdain for the scientific level of the psychotherapy created by this brilliant author. “Psychotherapy as a synthesis of arts”—as one might refer to this psychotherapeutic project—is still awaiting a critic of the arts who can properly explain, and evaluate on its merits, both the aesthetic and scientific meaning of Levi’s works.

9. The importance of this task is indirectly validated by many circumstances. By the fact, for example, that psychotherapy as a cultural practice originated and gained the most popularity and social recognition in the West, in countries with a predominantly Christian faith. It is also significant in this regard that the father of modern psychotherapy, Sigmund Freud, was not religiously indifferent but passionately repudiated religion. For example, he ardently praised the Bolsheviks’ war on religion. One can only hope that the founder of psychoanalysis did not know the true scale and methods of that war.

10. “‘The doctrine of theosis is the central topic of Byzantine theology and the entire experience of Eastern Christianity’ (Archbishop Vasil). . . . The doctrine of Theosis is the most maximalist and audacious ‘religious ideal’ that can be imagined” (Khoruzhii, 1995, pp. 123–24).

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