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The Social Construction of Psychotherapy

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THE SOCIAL CONSTRUCTION OF PSYCHOTHERAPY

Psychotherapy, by its very name, draws our attention to a person's inner life. In fact, the term 'psychotherapy' is derived from the Greek psycho (soul) and therapeuein (to nurse or nourish) thus suggesting that the purpose of psychotherapy is to nourish the soul. The reference to soul implies a romantic orientation to therapeutic process where emphasis is placed on those aspects of a person that are essentially intangible yet ever-present. Phrases such as "moral fiber," "emotional sensibility," "creativity," and "passion" come to mind when we think in romanticist terms. Typically, we locate these "qualities" within the person and therapy is the profession designed to help us get at them.

To many, Freud's psychoanalysis provided a quasi-scientific technique for examining this mysterious "soul" or psyche. In this regard, Freud provided a link between the romanticism of the nineteenth century and the rise of modernism in the early twentieth century. In fact, Freud has been identified by many as responsible for making psychology in general and psychotherapy in particular "scientific."

The efforts that have followed Freud's frontiering contributions to psychology have maintained a sort of schizophrenia between rational, scientific method and the respect and awe of our mysterious, inner passions. We see it in any history of the therapeutic profession; a constant attempt to develop a method or technique that will allow us to say something about a person's inner life. In most therapeutic models, the attempt is to externalize the internal. This may take the form of paper and pencil tests or stories and descriptions of some specified materials. A person's psychic life is eventually measured and evaluated by his or her performance on these pre-established exercises. As Gergen (1985) has argued, the quest to chart internal (what he calls endogenic) processes ultimately relies on external (exogenic) methods.

What is most interesting about this strange marriage between romanticist notions of the psyche and modernist attempts to explain, predict and control it is the continued focus on individuals. Additionally, the intriguing question that surfaces is <a href="https://www.nob.new.nob.new.nob.new.nob.new.nob.new.nob.new.new.nob.ne

My own attempt in the present chapter is first to examine how psychotherapeutic process has been socially constructed. The rise of the profession can be associated with a continued concern on the self contained individual (Sampson, 1993) and in that regard, the social construction of psychotherapy as we know it is strong testimony to the prominence of modernist discourse. I begin by describing the pervasive construction of therapy as individually and (in most cases) internally focused. In so doing, my attempt is to establish the dominant construction of psychotherapeutic practice as a candidate for deconstruction. A deconstruction of this privileged view simply locates the significance and scope of psychotherapy within its historical and cultural context. Consequently, we can say that what we take to be the unquestionable contours of the profession are byproducts of relational interplay. More directly, to deconstruct psychotherapy is to see it as a social construction emerging within a particular cultural discourse. My second aim is to entertain the burgeoning re-constructions of psychotherapeutic practice in a postmodern world where relational engagement is privileged

over a staunch individualism.

Modernism and Psychotherapy

Freud's success in delivering psychotherapy to the modern world is not divorced from critical historical and social influences. The rise of modernism at the turn of the twentieth century was in large part due to the growing capacity of persons to expand their communities via increased options in transportation and communication. With such expansion, people depended less on family and close friends in times of difficulty. The expansion of relational networks also increased venues for comparison. The integrity of one's way of being in the world was now open for comparison and evaluation within a broader arena. A man might be like his family and close friends but less like his successful and socially graceful business associate. But to which relationship should he turn for advice? Which one should serve as his self-evaluative measure? It is not so far reaching to suggest that psychotherapy at this time was appealing not only for its newfound linkage with science but also for its ability to substitute family and friends as confidants. To explore the impact of these changes, it is useful to understand the scope of modernism.

In this section I will try to provide only a summary of modernism. For more extensive treatment of this topic, there are several excellent sources (see Berman, 1982; Levenson, 1984; Turner, 1990). My main objective here is to connect the rise of modernism at the beginning of the twentieth century with the rise of psychotherapy as a profession. How is it that psychotherapeutic practice becomes, at this historical moment, a broadly accepted cultural form of life?

Rationality, Individualism, and Scattered Communities

Twentieth century modernism is a continuation of the "turn to reason" associated with the Enlightenment of the late eighteenth century. Within this discourse, rationality is featured and reasoning abilities are viewed as an individual possession (Macpherson, 1962; Sampson, 1993).

As we can see, modernism, as a cultural discourse, champions the individual. Sampson (1993) has identified this individual as self contained. Self contained individualism suggests a world populated with autonomous, intentional persons who possess the means to reason properly within the social arena. Communities do not reason. Cultures do not reason. Groups do not reason. All reasoning abilities are assigned to active agents whose rationality can be measured against culturally defined standards.

This individual and self contained focus continues the romanticist theme of inherent qualities but adds to that theme the modernist emphasis on progress. With science as a central metaphor, attention is directed toward the powers of explanation, prediction, and control. Explanation of one's reasoning abilities initiates the possibility for altering these abilities when needed. If we assume some standard rationality, then we can develop techniques to foster it in individuals. A common rationality will be followed by predictable and controllable actions that, in turn, will ensure a coherent and well coordinated social structure.

This coordinated social structure was in great demand with the rise of industrialization and urbanization in the twentieth century. Psychotherapy offered an important social service in this historical moment: a technique by which the internal self could be kept in check amidst the ever-growing complexities of daily life. In short, as possibilities for communication and

transportation expanded, individuals were given more and more opportunities to move beyond the confines of their local communities. With access to numerous and differing communities, a previously secure identity was in threat of change.

Urbanization and industrialization introduced yet another significant change for individuals. Where previously a person could discuss difficulties, problems, questions of identity with family members, close friends, community and religious leaders -- all of whom lived within the same small, local community -- the vast changes in transportation and communication technologies made such "therapeutic" conversations less likely. When confronted with a different rationality, value system, or ethical code, it was not always conceivable to discuss your own intrigue, your disapproval, or even your endorsement with those in your local network who might not share your exposure to more expansive communities. In these conditions spawned by twentieth century modernism, psychotherapy offered the means by which both local communities and broader cultures could protect the integrity of the individual.

To be a good or a psychologically healthy person then takes on a very specific meaning in modernist discourse. First there is an embedded assumption that a psychologically healthy person should possess reasoning abilities. Equipped with the proper reasoning abilities, a person will behave in an expected and appropriate manner. Thus, we can expect to identify good or psychologically healthy persons by virtue of their behaviors (what they do and say) which are actually reflections of their inner reasoning abilities. Furthermore, if we know what constitutes a good person, we can manipulate both environment and person to ensure production of a good individual.

This latter feature of modernism can be seen in this century's spawning of educational, medical, and business institutions, all of which are in some way reminiscent of the factory assembly line. These institutions have flourished with the rise of modernism in large part because they can serve as conduits for the ultimate construction of "good citizens." With institutions in place, a common rationality becomes a conceivable cultural achievement.

The "self" that was necessary for successful production in the modern world could be continually reconstructed also in the therapeutic process. As Cushman notes, "The state had to develop ways to control a new kind of subject: more mobile, less constrained by tradition and religion, less confined by role, and less predictable" (1992, p. 25). Psychotherapy became prominent as a means for controlling this new kind of subject and thus became an essential aspect of contemporary life. Thus psychotherapy's positioning within modernist, scientific discourse can be credited with the profession's cultural acceptance.

As we can see, the model science provided at the turn of the twentieth century featured rationality and, with that, individuality. The emphasis on this particular way of putting things -- that is, the privileging of science as our way of moving into the future -- created a particular form of social life. Science was viewed as the most sensible way for humanity to progress. After all, science and technology could deliver cures for disease, broader economic bases, wide-spread education and business opportunities, and an entire host of promising social advantages.

Yet at the same time that modernism was reinforcing a vision of uniform rationality, it was setting the stage for a very rich alternative. With the increasing capacity to and demand for coordinated efforts beyond the boundaries of one's protected community, there were burgeoning possibilities for a rich relational life that was populated with conflicting and incommensurate rationalities. Modern institutions such as psychotherapy and education (to name only two) are illustrations of large scale efforts to ensure uniformity amidst the growing eclecticism. Yet, in the past two decades, as these relational possibilities have increasingly moved beyond the reach

of only the elite and educated and emerged as possibilities for the broader population, the profusion of voices, values, moralities, and ethics have become more and more difficult to ignore.

So difficult have these voices been to ignore that in the psychotherapeutic profession the expansion of relatedness has had dramatic impact on the listing of recognized diagnoses. Earlier in this century there was no difficulty in gaining agreement that homosexuality was pathological. Today this diagnosis of abnormality is nowhere to be found in DSM IV. Where premenstrual syndrome figures as a legitimate diagnosis today, we can find no trace of this psychological problem in earlier manuals. These two examples provide us with interesting data. Is it the case that science has helped us <u>discover</u> the true nature of these facets of psychological life <u>or</u> is it the case that as homosexuals and women have been recognized as legitimate voices -- through expanded technologies -- our understanding and tolerance for alternative rationalities has expanded? In sum, science originally generated a preferred discourse that ensured protection of the individual's autonomy and freedom. But, as more and more facets of the culture have been invited into the conversation, our sense of what makes a good or healthy person and what is rational has been questioned.

At this point it is useful to discuss modernism as more than technological or scientific advancement. Here I would like to turn our attention more directly to the <u>selection</u> of the scientific metaphor that is the hallmark of this century. To highlight science as a <u>metaphor</u> is to associate this way of life with a way of talking or <u>language</u>.

Modernism as a Discursive Option

Modernism, as described above, is a "way of talking" or a discursive option. To consider individualism as a conversational resource rather than as a reality is to shift the terrain of our discussion. Rather than simply reflect reality, the modernist way of talking has created a particular kind of reality. This reality includes all the features I have outlined: objectivity, individuality, uniform rationality, and progress. To put it this way is to say that modernism provides a distinctive discursive repertoire.

We often do not recognize the mark of modernism because it has inscribed itself in our way of living. In psychotherapy where attention is directed to our inner processes, we do not question whether or not we have internal feelings, emotions, thoughts, and so forth. We seldom find ourselves pondering whether intentionality is central to our own or others' actions. We are not likely to wonder if the attention we give to outcomes, products, and goals is well placed. And, clearly when challenged, we do not hesitate to offer facts or evidence to support the rationale behind our actions. In fact, it is commonplace to expect that our conversational partners will be able to (or at least should be able to) offer reasons for their actions and that these good reasons will (and should) meet some objective criteria for evaluation.

The discourse of reason is so commonplace to us that the concerns I raise in the paragraph above are most likely to be viewed as curious rather than coherent. We simply expect others to be able to provide rational and objective evidence supporting their claims. We expect people to be individually responsible for their actions and to lay claim to their intentions. It is difficult to disrupt this way of relating to each other and worth questioning why we would want to in the first place.

Yet, to see these views as byproducts of a particular approach to language rather than as

descriptions of the essential nature of reality provides us with some means for employing alternative resources. For, to see our words as reflections of our interiors is not necessarily the case but is, rather, a discursive tradition. It is a tradition identified as representational and has strong roots in modernism and science.

The Representational View of Language

According to the traditional view of language, we generally treat words and gestures as if they pictured an independent world. This tradition fosters a belief that there could be a correct way to put things, a better method for reaching truth, or a more accurate representation of what is really there. And, if language pictures reality and it is individual speakers who utter words, then accurate representation of reality must be accomplished by <u>individuals</u> whose words reflect the inner workings of their minds. With this view in place, it is not difficult for us to describe how we have come to focus on individuals and their words or actions as a way of understanding the internal, mysterious mind or psyche. Additionally, it is not difficult to appreciate <u>how</u> psychotherapy has secured such a dominant cultural position. By this reasoning, psychotherapy gains significance as a profession necessary to cultural progress.

It is also not difficult for us to recognize the connection between this representational view of language and scientific method. In both the belief is that we can know with certainty. A representational view of language positions language as a conveyor of what is "really" there. Thus, a speaker's words and gestures are taken to be accurate reflections of his or her knowledge and thereby, a reflection of reasoning abilities. In science, we can have knowledge via proper methods -- which are, of course, born of individuals' abilities to reason.

Steeped as we are in the representational view of language, it is not difficult to understand the current and popular vision of psychotherapy. To recap, our traditional orientation dictates that language represents reality. Thus, when a person speaks or acts, she or he is depicting reality either accurately or inaccurately. The veracity check in play here has us comparing the supposed "inner representations" of the individual with the established and presumably univocal, social criteria. By locating the nexus of meaning inside the individual, we are then prompted to explore any need for change or adjustment on an individual basis.

Not only is change directed toward individuals, but the language of individualism that emerges from the representational view invites a vast array of pathologies. These pathologies can be framed as possible limitations of individualist discourse.

Most obvious of the pathologizing possibilities offered by individualist discourse is the construction of a sense of personal deficit. Discussing the discourse of deficit, Gergen (1990) explains that when meaning and action are seen as originating within the individual, it is ultimately the individual who is seen as flawed, deficient, and in need of remedy. Clearly, psychotherapy becomes the natural context within which individuals may do their reformatory work.

Again, most of us would be surprised at any attempts to call these internal aspects of human life into question. Yet, by linking these taken for granted "aspects" of personhood to a particular discursive tradition, we are able to examine them by way of the social life forms they invite. Individualism, while enduring and valuable, is only one way of talking and thus only one way of being. It is the discourse that emerges within a modernist sensibility. Fully armed with the discourse of individualism we are able to locate a broad array of qualities within persons ranging from intellect to leadership to sociability to agency. It is individuals who reason, who lead, who relate, and who act intentionally. Thus, it is only reasonable to conclude that it is

individuals who should become the focus of treatment when actions or meanings do not fit with culturally preferred norms.

Limits to Modernist Discourse

Several theoretical threads have been developed that set the stage for critique of modernist discourse. My treatment of these significant movements will be brief as my aim is simply to set the stage for today's disenchantment with modernism.

First is the body of work known as ideological critique (Althusser, 1971; Marx and Engels, 1970; Gramsci, 1971). This work is important in its emphasis on the value-laden nature of any theory. In other words, all perspectives are viewed as ideological. Thus, the ability to objectively examine the social world is called into question. Any attempt or claim to objectivity is, itself, suggestive of one's values. To ignore the ways in which ideology shapes our theories of the social world is to engage in what Marx called "false consciousness."

The second critique of modernism was introduced in the area of literary criticism. Derrida (1978) and Fish (1980) among others argue that terms such as objectivity, rationality, individuality are simply linguistic conventions. They are ways of talking and nothing more. To put it this way calls into question the notion that what we are really examining when we engage in psychotherapeutic practice is a person's inner self. When we question what that psychic interior is, the literary critics suggest that our answer is a simple referral to yet another linguistic convention. There is never a point at which we can actually get to the "thing" we are talking about in its essential nature. To put it another way, our knowledge of anything is not knowledge of the "thing in itself" but is rather already circumscribed by the text or discourse in which we are emersed. Terms gain their meaning by their relation to other terms. Thus, we "know" a healthy psyche by its comparison to an unhealthy one. Further, the very terms "healthy," "unhealthy," and "psyche" are themselves terms that gain significance within a particular "text." If this is the case, then the literary critics argue that the modernist notion that we can, with proper methods, know the essential features of the world is not realizable.

The final challenge to modernist discourse is best know as social critique. Here, the emphasis is on how knowledge is constructed in a social world. Kuhn (1970) presents this perspective when he introduced his critique of science. To Kuhn, we view the world from within a perspective. This perspective is created and nurtured in social contexts. Once we are fully emersed in a perspective, it is difficult if not impossible to see the world in any other way. Thus, it is my perspective that will tell me what counts as data. In the psychotherapeutic world we could say that if my perspective is cognitivism, I will see a person's problems as, for example, the product of improper information processing or a dysfunctional cognitive schemata. It is, to Kuhn, difficult to move beyond the boundaries of our perspectives.

These three threads have provided rich soil upon which the seeds of discontent have grown. Each challenge has proposed its own antidote. For those interested in ideological critique, the antidote has been the recognition of the ideological commitments of theorists. Yet this solution presents its own problem. How do we adjudicate among ideologies? Which theory is better? Are the feminists correct (and if so, which version of feminism)? Or is it the Marxists who offer a more compelling social theory?

Literary criticism also offers some constraints. If we can not escape the confines of our language, if each term we use is simply a deferral to other terms, what can we say about the social world? Can we say anything at all? Why should we bother with professions like

psychotherapy if there is nothing substantial to be said or done?

The critiques offered by these two traditions are significant in the deconstruction of modernism. Yet it is the social critique that offers the most promising antidote to modernism. Social critique privileges relationships. And, rather than describe language as a conveyor of essences, the social critique describes language as a performance. Language is something that we do together in social interplay and thus it is the way in which we create our worlds.

As we have already seen, it has been the very working of the modernist logic that has propelled us into a more relationally sensitive, postmodern world. Such movement has given rise to the critiques of modernism identified earlier. This is a world where "individuals" continually confront rationalities whose contours are markedly different. Television, film, video, satellite connections, telephone, print media, jet transportation propel us into the world of the "other." Does our rapid emersion in this world foreshadow the demise of psychotherapy? To this point, psychotherapy has served the modernist world as an institution that maintains cultural standards for individuals' emotional and reasoning abilities. Does movement into a relationally complex world with shifting rationalities signify the death of psychotherapy or can psychotherapy be reconstructed within this relational world?

The Construction of Psychotherapy in a Relational World

By deconstructing the modernist discourse from which the psychotherapeutic profession emerged, we free ourselves to consider alternative constructions of both psychotherapy and social life. To deconstruct modernist discourse requires that we describe our prominent way of talking as just that, a way of talking. This discourse, rooted as it is in the scientific metaphor, directs our attention to the possible explanation and articulation of the essential aspects of whatever phenomenon we are examining. Thus, in therapy the modernist goal of preserving and adjusting one's selfhood begins with the therapist and client exploring the reaches of the client's true self. The essential features of this true self will vary from one psychotherapeutic model to another. Yet they all strive to treat these basic, enduring features of the individual.

Now, in a world where access to multiple rationalities and forms of life is easily available through advances in media, transportation, and communication technologies, what form might psychotherapy take? Gergen (1991) has argued that these technological advances have created a sort of "social saturation" in that we become populated with others. It is no longer meaningful to talk about a core identity when our identity shifts by virtue of the relational context in which we are presently emersed. If I am a successful professional does that negate the possibility of being a good mother? Doesn't motherhood require constant presence and attention which full emersion in my profession would prohibit? Beyond my identities as professional and mother, who am I in my community, to my friends from foreign countries, to others enrolled as I am in Latin dance classes? How can I manage all these identities and more without slumping into anxiety about which one is "real" and thereby pathologizing all others? Can psychotherapy in this relationally complex world be something other than a context for fine tuning and reinstating a unified sense of self?

Two possibilities are available. One would have us creating psychotherapeutic practice that is focused on relational engagement. Thus, instead of treating individuals, the psychotherapist would now treat relationships. The second option would identify psychotherapy as a profession charged with attending to processes of construction themselves.

As we know, the first option has been explored in great depth. The second option, I believe, offers more longevity and promise for psychotherapy as a cultural resource.

Relational Psychotherapy

There have been a variety of attempts to introduce the relational element into an understanding of psychotherapeutic process. The work of Harry Stack Sullivan (1953) and the object relations theorists (Fairbairn, 1952), as well as some variations of humanistic psychology and cognitive psychology introduced the relation between self and other as a significant source of identity. Speaking of these early relationally focused attempts, Cushman states,

They had to adjust psychoanalytic theory to the broad historical trend of personal relatedness while staying within the limitations of the masterful, bounded self. Because the individual . . . obviously is not a completely self-contained entity, interactional activity, nourishment, guidance, and a cultural frame of reference had to be brought from the outside to the inside. (1992, p. 54)

These efforts were followed by the family therapy movement. Clearly, the pioneering work of the early family systems therapies illustrated in the works of Bateson (1972), Watzlawick, Beavin, and Jackson (1967), Minuchin (1972), Haley (1971), and Jackson (1968) was radical in its time for its shift of focus from individuals to integrated systems. Examining social behavior as a byproduct of interrelated parts working in concert provided many years of rich research and creativity in the therapeutic profession.

Ironically, however, these early attempts to introduce a relational element maintained the essentialist argument of modernism. These models based on General Systems Theory (Bertalanffy, 1968; Laszlo, 1973) can be cast as a simple shift from the objective observations of individuals to the objective observations of systems such as families or groups. Recognition of the dynamic interplay among participants edged psychotherapy beyond the limits of the psyche and into the world of communication. However, at that time the grip on the modernist proclivity toward universal rationality, objectification, evaluation, and control was still strong.

The therapeutic models developed in those early years illustrated the modernist allegiance in a variety of ways. Some touted a "preferred" or "normal" family structure achieved through communication that created and maintained appropriate boundaries, hierarchies, and subsystems (Minuchin, 1974). Others maintained the modernist focus on objective observation by attempting to examine behavioral sequences surrounding or associated with an identified problem and then offering a new frame for making sense out of those very sequences (Watzlawick, Weakland, and Fisch, 1974). There were many variations on these particular methods but the genre was the same: problems were no longer located within individuals; now they were located within systems or relationships. The well-trained therapist could closely examine and observe these systems and intervene to eliminate unwanted problems.

While the relationships among participants or among behaviors was acknowledged in this early work, the relational sensibility erasing objectivity, univocal rationality, and active agency was not yet achieved. Therapists were still beholding to preferred family structures and preferred interactional patterns. Clients who did not change as a result of these therapies were still labeled "resistant" and thereby pathologized for not accommodating the normalized routine.

The early systems therapies evolved into "second order" or constructivist therapeutic models where attempts were made to incorporate the relationship not only among those in the system being observed (the family system) or the relationships among their actions but also the

relationship of the observer (therapist) to the observed (family, couple, etc.). Maturana captures the thrust of this "new" move when he says "everything said is said by an observer to another observer that could be him- or herself" (1988, p. 27).

The focus of the second order systems models was the self-reflexive processes of the observer. In an attempt to incorporate the relational terrain of observer and observed, these theorists and practitioners denied the observer's objectivity. This move clearly is consistent with the relational sensibility of a constructionist orientation, yet in so doing, the constructivists unfortunately essentialized the observer's cognitive and perceptual processes. They reasoned that no observer is free of biases and thus any observation made of another system must, by the very self-reflexive nature of language, be more a statement about the observer.

As we can see, the focus of this wave of relational therapy was on the <u>internal</u> processes of the observer (therapist in this case). Again we can recognize that there is an essential object offered for our attention. We remain within a representational view of language because from this orientation we must rely on the therapist's words and actions to tell us of his or her perceptual and cognitive processes.

This is only a small sampling of the relational efforts in psychotherapy. As with earlier therapeutic models where individualism was centered, the attempts to move into the relational domain marking the past twenty to thirty years in the profession have not positioned us much beyond the challenges offered by modernism. These challenges include the simple acceptance of dysfunction or disease as actual states of being rather than ways of talking, the positioning of the therapist as one who can "know" disease and dysfunction when he or she sees it rather than one who sees problems as discursive constructions that are jointly achieved, and the notion that therapy will or should cure psychological and social distress rather than therapy as a conversational arena within which new relational realities can be constructed. In sum, the social construction of the individualist and relational models of therapeutic practice all maintain the discourse of modernism thereby privileging objectivity, individualism, and a univocal rationality. Thus, psychotherapy remains a profession charged with helping individuals (and now families and groups) fit in to idealized social structures.

The problem with this is that as our abilities to explore new and different relational realities grow, the psychotherapeutic profession credited with helping us "fit in" may become obsolete. Psychotherapy as constructed in this multivocal, postmodern world must be reconstructed if it is to endure. Psychotherapy's long-standing focus on individuals (or individual units such as groups and families) and a common rationality is at cross-purposes with the multiplicity we live today. Instead of <u>adjusting</u> identities to some cultural standards, the demands presented require <u>construction</u> of various and often competing <u>relational</u> possibilities. Is it possible for us to reconsider what psychotherapy is? Can it be reconstructed as a context we turn to for conversational engagement about various ways of juggling multiplicity, moving beyond consistency across contexts and relationships as well as beyond rationality in harmony toward the polyphony of multiple rationalities?

Psychotherapy as Relational Engagement

An alternative construction of psychotherapeutic practice has emerged within a more fully relational sensibility. Here the relational component is not offered as an addendum to the well established individual focus as we see in the early systems and second order work. It is not simply another element to be examined objectively or whose understanding we approach via words and actions that are meant to represent aspects of essentialized relationships or

perceptive/cognitive abilities of those in relation.

Instead, the relational sensibility put forward in more recent constructions of psychotherapeutic practice (see McNamee and Gergen, 1992) draws from a very different set of orienting premises. These premises position relational engagement as central rather than as a byproduct of individuals coming together. In other words, any sense of individuality is described now as a byproduct of relatedness. This option centralizes the <u>processes</u> by which people come to create particular modes of interpretation and action.

Foregrounding processes of relational engagement rather than their products represents a significant shift. Psychotherapy from this orientation has little to do with delivering well adjusted individuals, families, or groups to the broader culture. Now psychotherapy takes as its purpose the creation of conversational opportunities -- both within the therapeutic context and beyond. In other words, psychotherapeutic practice becomes a dialogic relationship where multiple rationalities are discussed. Not all will be treated equally. But none will be demonized out of context. The chore of therapy is to bring significant conversations into the therapeutic conversation just as the therapeutic conversation should be brought to pertinent relationships. Rather serving as judge to competing identities, moralities and values, psychotherapy serves as the conversational arena within which participants can explore the discursive traditions within which such disparate views have evolved.

To fashion psychotherapeutic practice in this way is to sanction the contingency of relational life. It is to normalize (not pathologize) the indeterminacy of the worlds we construct. It is to give voice to the multiple meanings that emerge within varying social communities. To that end, the construction of psychotherapy in a relationally complex world embraces the relativity of meaning but stops short of the nihilism spawned by what some call rampant relativism. It is important to explore ways of acting and making sense of the world in relation to the context within which such constructions emerge. However, one is not ever free to construct the world alone. The emphasis on <u>social</u> construction underscores the relational engagement that is necessary for the viability and sustainability of any rationality.

Conclusions

This chapter could have easily been about applications of social constructionism in therapeutic practice. However, many have already contributed creative and compelling descriptions of such applications (see McNamee and Gergen, 1992). The less frequently considered territory is the construction of psychotherapy itself. My examination of this construction in this chapter is not so far removed from the challenges social construction introduces to psychotherapeutic practice, itself. Theorists and practitioners have translated in unique ways the indeterminacy, multiplicity and relativity of meanings, values, and forms of action in therapeutic practice. They have generated methods that centralize participants' relational enmeshment over the modernist notion of self as agent. These creative applications speak to the shifting construction of what psychotherapy is and should be that I have been addressing here. Additionally, the ways in which psychotherapists have expanded the reach of their professional work to include heated political and public issues (see Chasin, Chasin, Herzig, Roth, and Becker, 1991 and Roth, Chasin, Chasin, Becker, and Herzig, 1992), organizational contexts (Lang and Little, 1992), and broader social concerns such as poverty (Pakman, 1994) do more than simply foreshadow the significant role psychotherapy can (and

does) play in a relationally complex world.

To put it this way suggests that therapeutic process gains its significance as a cultural resource available for exploration of relational possibilities. It is the context within which people can survey a wide range of rationalities, problematizing some while privileging others -- but only temporarily. The constant shifting of contexts, relationships, and resources demands that what we problematize today may serve as exemplary performance tomorrow. Because the immediate demands of a social context require some adjudication, the choices we make are genuine choices in that particular interactive moment but may be discarded in the future.

The demands to coordinate our activities in so many differing domains suggests that psychotherapy need be less about the continual reinsertion of a unified, self contained individual and more about the expansion of identities in the every-changing sea of relatedness. Psychotherapy, in this multivocal world becomes a profession we turn to for an exploration of possibilities. No longer are there clear answers about how psychotherapy can move individuals, families, and groups toward productive participation in their communities. The form and content of productive participation is in continual flux. Therapy becomes a venue one seeks to engage in "interested inquiry" (Gergen and Kaye, 1992) of the various stories that could become real. Our history and culture have provided us with a limited range of conversational repetoires about psychotherapy. Now we may consider expansion of these repertoires. Rather than replacing healing conversations with family and close friends, could psychotherapy become a supplement to such conversations? How does it supplement, in addition, the more "disembodied" conversations we participate in via electronic means? What resources for social life do all these arenas provide and how do they work in concert? These are the questions that face a psychotherapy constructed as a relational, not an individual, phenomenon.

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