ShrinkRapRadio #397, April 3, 2014, James Alexander Ph.D. interviews David Van Nuys, Ph.D.

(transcribed from www.ShrinkRapRadio.com by Yann Derobert)

**Excerpt:** Today's guest is... me! We're turning the mic around today.

**Introduction:** Dr. James Alexander, Australian Shrink Rap Radio listener and my guest on Shrink Rap Radio #341 about the hidden psychology of pain suggested that listeners might be interested in knowing more about me, and he urged me to submit to an interview by him. I was initially reluctant but recognized he was offering me a gift and it would be rude to turn him down. For more detail on both Dr. James Alexander and myself, please go to the show notes on ShrinkRapRadio.com. Now here's the interview.

**Dr James Alexander:** Welcome to Shrink Rap Radio! My name is Dr. James Alexander. And today, I'm putting on the couch my favorite psychologist and probably yours too: Dr. Dave. Here's the interview. Dr. David Van Nuys, welcome to Shrink Rap Radio!

Dr David Van Nuys: Well what a privilege it is to be on your couch for once!

**Dr James:** Yes! So it's turning things around a bit and I must explain to the listeners how this has come about. A few weeks ago, maybe a month or so ago, I invited you to submit yourself to an interview, primarily because, well, you have in various interviews in the past, revealed little bits and pieces about your own personal history. I consider that you're a psychologist that has grown during a very interesting and formative era in psychology. I think you were possibly a graduate student in the late 50's and went back in your career in psychology in the 60's and I became a psychologist during the 1980's and really grew up as a psychologist listening or reading stories about the very formative years during the 50's and 60's, the postwar era.

**Dr Dave:** Okay! I need to cut in and let you know: you're making me a little older than I actually am. I was a graduate student in the mid-60's.

**Dr James:** Okay! That's great! (laughs) Thanks for the correction, I don't want to rob you of any important valuable years. Nevertheless, even more interesting, you were a

student during the 60's and, as I was saying, to a psychologist of my age group, that's a very fascinating era, when psychology was taking shape as a social phenomenon that it is today. And with a bit of arm bending and condoling, I got you to agree to make yourself the subject of an interview so that others, or firstly so that I can have an interesting conversation with you, which I've hankered to do for quite some time, but it also occurred to me that many other people would also be interested in your observations and your experiences of our profession over the last few decades. So that's how it came about. And heh... you weren't entirely sure whether you had anything of interest to offer and I assured you that I had the idea that you have and my guess is that many of your listeners will agree as well. So if we could just launch into it and I'm wondering: Dr. Dave, do you consider yourself to be a pioneer in psychology?

**Dr Dave:** Oh, first of all I want to thank you for urging me to go ahead and summon up my courage and do this, and hopefully it will turn out well. Now you're asking me about being a pioneer, no I don't regard myself as a pioneer but I do see myself as having some kind of a gift, if you will, a sort of semi-conscious or perhaps unconscious nose for where things are going. I don't know if you... did you ever see the movie "Forest Gump"?

**Dr James:** Yes, I did.

**Dr Dave:** Well I haven't seen it in a long time, but I seem to recall that there were scenes using trick photography where they inserted him, you know one of the presidential inaugurals, I think we see him standing next to Kennedy or Bill Clinton or somebody, and then you see him with Elvis and a number of famous settings like that.

Dr James: Yeah.

**Dr Dave:** And so I feel a little bit like Forest Gump in that way of having been present for some key moments. Another way I thought about it is that I'm an early lemming – hopefully not going off the cliff (laughs) with all the lemmings -

**Dr James:** Yeah.

**Dr Dave:** But having some kind of an unconscious sense of where the crowd is going in a way, so that I'm kind of an early adopter in many situations. For example, podcasting. I started podcasting in 2005. I wasn't the first podcasting by any means but most people

date the beginning of podcasting in 2005. I came a little late, it took me little while to get it all figured out, so I think my first podcast is maybe in August of 2005. My market research career. I quickly, or at some point before it was happening yet, I realized that the focus groups that I had been doing in person could perhaps be done online. And so I was among that very early group of people to do focus group market research online. In college, (laughs) I can keep going on about this!, I got into motorcycles before college students in general did. Right now it's very common in the US for lots of college students to be on motorcycles, but this was well before the Japanese invasion of affordable motorcycles, and before it became fashionable, and motorcycles were mostly associated with Hooligans (laughs) in this country and so, there weren't very many people at the Ivy league college university where I went who had motorcycles, but I got one for a period. I was also... I was probably one of the early adopters in terms of the psychedelic revolution, early interest in yoga, before sort of spirituality caught on big time over here. So, not a pioneer but somewhere in the... in that pack, in the early pack.

**Dr James:** Yes it would seem that you've been on the ground floor of the lot of the decisive change that went on during that era. This is part of the reason why I was very interested in getting your observations

**Dr Dave:** Sure.

**Dr James:** What got you interested in psychology to begin with?

**Dr Dave:** Well, you know, I was originally accepted into... at the University of Pennsylvania, into electrical engineering and in fact I had a full scholarship in electrical engineering which perhaps might also help to explain my interest in podcasting and technology and so on, but I quickly figured out that my high school preparation really wasn't strong enough and also I don't think I had these study skills and discipline at that point in my life to take on something quite that heavy duty. So I ended up switching out of engineering very early, fortunately they let me keep my scholarship. I ended up majoring in creative writing actually. And so, that was my major with a heavy dose of philosophy along the way and... But I did try as soon as I switched out of engineering, I did try taking a course, an introduction to psychology. And I was quickly turned off to psychology. I thought that would be a real option somehow psychology...

**Dr James:** But Dave what sort of year is this?

Dr Dave: Okay. I started... let's see... I was in the class of '62, the graduating class of '62. So, I guess actually I did start undergraduate in 1958. So this would have been

around '58-'59

**Dr James:** Yeah

Dr Dave: And so, this intro to psychology class was all about running rats and things like that. And so, it was not at all what I imagined... The professor I remember, standing up in front of one of those tiered lecture rooms, you know, he was down at the bottom, we were up high somewhere looking down, and he said: "If you're taking this class because you're hoping to figure out your own idiosyncrasies or the quirks of your friends, you're in the wrong place...

**Dr James:** (laughs)

**Dr Dave:** ... Psychology is the science of the study of animal and human behavior."

(laughs)

Dr James: Yeah

Dr Dave: And it seemed like it was mostly animal behavior.

**Dr James:** Yeah

Dr Dave: And indeed that's what had drawn me to take a class in psychology. It was: yes, I was interested (laughs) in my own personal quirks and idiosyncrasies as well as my friends' as were, I think, a all lot of people in that class

Dr James: Absolutely. And you have to wonder how many people were turned off and how many potentially great careers in psychology were discouraged during that era of radical behaviorism

**Dr Dave:** Yes. I think you're right

Dr James: Hum... Yeah, sorry, go on!

Dr Dave: Yeah! So you might wonder, well... "how did you get in the psychology then?".

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So, I was initially turned off but then I think it was the summer before my junior year, I heard about clinical psychology as a profession from one of my high school buddies that I got together with. Well I had never heard the term "clinical psychology", I had no idea what it was so I asked him: "What is clinical psychology?". And he said: "Well it's just like being a psychiatrist only you don't have to go to medical school". And, I had actually considered psychiatry, just kind of on a hearsay basis but... but I ruled out medical school. But I thought: "that sounds intriguing. That sounds maybe like something I could do. Tell me more!". He said: "Well, I'm a Rogerian...". And I said: "Ho... What's that?". And he said: "Well, it's named after this fellow Carl Rogers, a psychologist, and basically, he has this theory of therapy where whatever the person says, you kind of just repeat back to them what they've said". And I thought: "Well, that sounds like something I could do". (laughs) So, as strange as it sounds and as naive as I was, that really kind of planted the seed to consider something called "clinical psychology" and so as I looked into it, I found that one of the doorways into that would be to take a class in abnormal psychology or what's also known as psychopathology.

**Dr James:** Hum hum

**Dr Dave:** And that was indeed a course where I could find out about my idiosyncrasies, frighteningly so (laughs), as well as my friends'

**Dr James:** Hum hum

**Dr Dave:** And I loved that class, and I threw myself on the mercy of that professor, later I think I might have take one or two other psychology classes... and I threw myself on his mercy to write me a letter for recommendation out of the hundreds of people who'd been in this course, which he did. And as a result, later... you know, initially, I got that degree in clinical psychology ... in creative writing and graduated and took a job, my first job, that summer job, really, was going to be a full time job at a department store, and I was an advertising copyrighter. And so I realized: "Oh my god! I need to find a, really, more of a career". And so, I applied to some schools, looking to get into clinical psychology. I discovered I was going to need to get into a masters program if I had any hope and later into a doctoral program. So I applied to a number of masters programs. And again in my characteristic fashion of deep study I chose the university of Montana in Missoula by virtue of having looked at some catalogues of graduate schools and the picture on the catalogue showed two guys throwing a grizzly bear into the back of a pickup truck.

**Dr James:** (laughs)

**Dr Dave:** And I thought: "Surely, this place will let me in with my mediocre grades...

**Dr James:** (laughs)

**Dr Dave:** and no major in psycho... no undergraduate major in psychology". And indeed they did! But only provisionally! They said: "Well, you'll have to take some makeup classes, undergraduate classes, and you'll have to really apply yourself and get straight As"

**Dr James:** Whoa

**Dr Dave:** So that's what I did. I went to... I got into the University of Montana in Missoula, applied myself very much and got straight As and but they also... they also had me teaching an intro to psychology class right out of... you know... I just graduated with a BA *not* in psychology. So I was reading a chapter or two ahead of students

Dr James: Yeah

**Dr Dave:** of my students. And that's probably served me well in the podcast as well... I learned to be a quick study.

**Dr James:** Yeah

**Dr Dave:** But very... but a very anxious one.

Dr James: Hmmm...

**Dr Dave:** But what drew me to the idea of becoming a therapist... very naively, because I had never been in therapy... but I had always been one of those people that people trusted and, of course, lots of people who go into this profession have the same story... People would confide in me and they'd say: "you're the only one I've ever told this to, you're the only one I would trust to tell this to". And so, that made me feel like I would be a natural... and I was... my interest in creative writing was really that I was interested in what I called the brass tacks of human existence. The real... the real deep

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stuff of what it is to be a human being. And I thought that being a therapist would be about that, that it would be an opportunity to... to be involved with people at that level.

**Dr James:** Yeah... What sort of position in society did psychology hold at that time? You said that you'd never heard of clinical psychology before and you were really shocked when you turned in your first psychology class. So I gather that psychology was not a prominent discipline or profession at that time...

**Dr Dave:** Well I don't know that clinical psychology was... in fact, I think clinical psychology as a profession was born in the US in post-World War II. And since World War II ended in 45, you know, and there was something called the Boulder Conference in which the profession of clinical psychologists got shaped... so, in a way, yes I was a child of the 50's and I started college in the late 50's, and graduate school in the middle 60's so... it was... So I was really an inheritor of the psychology of the 50's in a way as I began to get into it. And so that was mainly one that had a strong public perception that was linked strongly to psychoanalysis. There had been very popular movies which I don't know if any but any of the listeners will recognize the titles: "The Three Faces of Eve", "David and Lisa", and even an earlier one called "The Snake Pit" about a horrible mental asylum. And so... and then there was a very popular book that I read called "The Fifty-Minute Hour", which was a very well written sort of fictionalized account of a psychotherapist giving kind of very dramatic case histories, a number of them like short stories and really fascinating. And so, that had really captured the public imagination. I think it really defined what a psychologist who was a therapist was in the public imagination including my imagination. But then, as I found out in... you know, in college and then later in graduate school, behaviorism was just starting to be a public force. A public force due primarily... it was an academic force, already, but it was starting to be a public force partly because of a utopian novel that B.F. Skinner wrote called "Walden Two" which I also read at the time. It had a very wide impact and it had a strong impression on me as a young impressionable guy. And I'm still a pretty impressionable guy so... as my listeners probably recognize. So that's kind of what the public perception was at that time.

Dr James: So, again, this is a... you know, this is a fascinating era for me as a psychologist with also an interest in history... that there was the popular perception of applied psychology with a vision of psychoanalytic therapy...

**Dr Dave:** Yes

**Dr James:** ...whereas, in academic circles for quite some time the behaviorist revolution was well and truly under way, and that was becoming more popular via "Walden Two" from B.F. Skinner

**Dr Dave:** Well, in academic... Yeah, in academic circles of course it wasn't so much Walden Two

Dr James: No

**Dr Dave:** Than all of the research and all of the... all of his students who were out evangelizing...

**Dr James:** Yeah

**Dr Dave:** ...in academia, but in a very doctrinaire way.

**Dr James:** Yes. And then also you had this third force in psychology, the humanistic psychology... beginning to evolve I guess around the era when you were beginning your career in psychology...

Dr Dave: It didn't become... get into my awareness really until I graduated.

Dr James: Ha...

**Dr Dave:** Until I graduated with my Ph.D. Or right around that time.

Dr James: Ha ha

**Dr Dave:** Not till around... It didn't get into my awareness until around say 69-70.

**Dr James:** Okay. What did you find appealing then in humanistic psychology at that time?

**Dr Dave:** Well, I was trained in a psychoanalytic model at the University of Michigan. I got into the... was admitted to the clinical psychology program from... after getting my masters, in Montana where they had no clinical psychology at that program. In fact there

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was no masters level training that one could get as a therapist at that time. So, you know, I discovered I had to get a Ph.D. and I would have to go on to do that if I wanted to be a therapist. And just by happenstance I got into Michigan which was a major school to get into, on the one hand, but also one of the last bastions in academic psychology of the psychoanalytic point of view.

Dr James: Ha

**Dr Dave:** At that time. And I don't know if it's still held there now. I would really tend to doubt it. I should check up on that. But I would really tend to doubt it because hum... the more scientific model really really won the day. So I was trained in the psychoanalytic model but I really, really rejected it. It seemed too pathologizing to me, too authoritarian, and plus it was the 60's and we were generally rebellious anyway, you known, so... I was looking into alternatives. And so what... And one of the alternatives that was floating around at the University of Michigan at that time, particularly among the graduate students and junior faculty, was the encounter group movement. And so that was really my first introduction to what you might call humanistic psychology or a spin-off of humanistic psychology

Dr James: Hum

**Dr Dave:** As I first was a member of an encounter group which just blew my mind and then became an encounter group leader. And of course some of the values of both encounter group movement and humanistic psychology were a "here and now" kind of orientation, a self disclosure kind of orientation, a valuing of personal experience, of subjective experience, and an emphasis on the importance of authenticity and mutual feedback.

Dr James: Hum

**Dr Dave:** Those were all values that I resonated with very quickly, that I didn't find represented in the training model that I was being exposed to at the University of Michigan. And so it had great appeal to me as a young person. It was by virtue of the focus group that I was... not focus group, encounter group that I was in, I got tons of praise for who I am...

**Dr James:** Hum

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**Dr Dave:** ... in essence, which I never got from my faculty.

Dr James: Ha

**Dr Dave:** And so I felt, you know, where I had a lot of self doubt about "Jesus had I chosen the right place to go? Had I chosen the right profession? Was I really suited for this?", the feedback that I was getting from the encounter group that I was in was: "You're a wonderful person, a wonderful listener, you're empathetic, you're...", you know

**Dr James:** Hum

**Dr Dave:** So it was total confirmation.

**Dr James:** Dave, I mentioned... during that era, to receive that kind of feedback was possibly... would have been an unusual experience for anybody. My guess is that family cultures, and the prevailing culture of the time, was not so aware of the need to give children or young people positive feedback. And there would have been something unimaginable, something very unique about being in an encounter group where there was an attempt to total honesty and heh... you know a valuing of people that perhaps was not so much part of the prevailing culture. Is that what it was like?

Dr Dave: Yeah. I think that's very accurate. And so it was really a mind blower (laughs)

**Dr James:** Yeah

**Dr Dave:** For those of us who had the benefit of that experience it... really, when I came out of my first encounter group which... it might have been all night... I think it might have been one day, I think it was a kind of one day, one night marathon group, and by the time it was over, I was... I was high! I don't think I'd ever had a psychedelic at that point but I was high and I was accosting people who I only barely knew, you know...

**Dr James:** Yeah

Dr Dave: ... "Let's sit down and have a conversation...

**Dr James:** (laughs)

**Dr Dave:** ...I don't think we've ever deeply shared" (laughs). And it was a little bit much but they were intrigued.

**Dr James:** Did you attend any naked encounter groups?

Dr Dave: No... No, I don't think I did. No, not a... not of a formal nature. (laughs)

**Dr James:** As a student in the 80's we heard some amazing stories about naked encounter groups which we never experienced ourselves

**Dr Dave:** No, I never did do that, I didn't lead any and I didn't go to any. But... but I was, you know, I was... I did fully partake in the 60's but not that particular

**Dr James:** Yeah. One of the theories that I've got in terms of the evolution of psychology... When I started being a student in the early 80's, I was also quite heh... enthralled by Carl Rogers and the kind of values that underpinned his approach was...

Dr Dave: Yeah

**Dr James:** ...strongly appealing to me. And when I began practicing by the late 80's, I was... well, my postgraduate training was primarily a cognitive behavioral approach, which... you know, I learned... and was able to heh... regurgitate for purposes of getting my qualifications. So I tried a little bit of that... and I also tried client centered counseling approaches, and I found that it wasn't terribly effective. Now it might have been something to do with me and heh... it might not have been the method at all but I've also wondered whether our culture has evolved a lot since the 1940's and 50's when Rogers was developing these ideas, you know, his approach. And I imagine it would have been unusual, particularly for men, in the 1940's and 50's and maybe probably the first part of the 60's as well to have... to be given the space to be able to reflect about their experience, to be able to actually talk about their experience, their inner world, I imagined that would have been a very unusual place for particularly men to find themselves in and I can imagine in relation to the prevailing culture, it would have been a unique opportunity and I can well imagine it was highly therapeutic whereas in these days it seems that everybody is talking about themselves all over the place

Dr Dave: (laughs) right!

**Dr James:** You know... Obviously that's sort of a "me, me me me" generation and culture. There seems to be something less unique about the opportunity to explore or, you know, explore your inner world. So I think the culture has changed somewhat...

**Dr Dave:** Yeah, and in fact I would say that, you know, people often go: "What happened to humanistic psychology? Were did it go?". Well, to some degree, it got absorbed by the larger culture and some of the things that were very unique and exciting then are sort of all home now and taken for granted. Just like you're saying.

**Dr James:** Exactly. So... yeah, I think that's very much the case. Hum... yes, and I just wondered whether, you know, there's been so many exciting developments in psychotherapy and a lot of them, you know, the more experiential approach in psychotherapy which is still what holds my attention still seems to have an underpinning of the same values that Rogers was talking about, hum... and a lot of the macro-skills are still there as well

Dr Dave: Yes

**Dr James:** Things have gone beyond that... I kind of gather that... it seems to me that our culture now requires more than just simply a space to reflect because we tend to do... like you said, it's been absorbed into the mainstream culture and we all tend to do that to a certain degree anyway.

**Dr Dave:** Yes. Yeah, I think that Rogers is undervalued. He's, you know, not as well known and not as much appreciated for the impact that he's had and as I just said for humanistic psychology generally I think a lot of his notions have been kind of absorbed and are taken for granted.

**Dr James:** Yeah.

**Dr Dave:** But he really influenced how psychotherapy is done... Even... even by cognitive behavior therapists, people who practice that. Behaviorism I think morphed, fortunately, over time and became... I think has become much more inclusive, much more willing to drop on whatever seems to work. And it became clear... you know, one of the good developments I think is that research has shown that the hard lines that were been drawn between the different schools of therapy turned out to be not as

important as some of the skills, as you were mentioning skill-base became more accepted... skills of listening and empathizing and somehow communicating a quality of being, that is somewhat healing in and of itself, I think, for the person on the other end.

Dr James: Certainly. Yeah. Now, hum... another thing of interest to me is heh... I think it was probably in the... heh... well mid to late 90's, as I was lecturing in psychology at a university and I think I was taking doing a unit on personality theories where, you know, I would take the students, the big theories, the big models in psychology. And when it came to humanistic psychology hum... it said something along the lines of... when people like Rogers and Maslow were heh... forming the groundwork for humanistic psychology. Now doing it from very much within the framework of conventional science they had no intention of stepping away from a scientific approach.

Dr Dave: That's true.

**Dr James:** And the early developments of humanistic psychology was being seen by its progenitors as a scientific endeavor. And then something happened to it and what this textbook was referring to was the counterculture movement. "Something interesting happened on the way to the conferences" as this textbook said.

**Dr Dave:** (laughs)

**Dr James:** (laughs) and this something interesting of course was the counterculture movement.

Dr Dave: Yeah

Dr James: you know, that was, again, a very... you know, you're a young person, I guess you're in your twenties during that era, during that time and you've made some references to psychedelic experiences, hum... maybe you could tell us a bit about the impacts that you saw of the counterculture movement on psychology?

Dr Dave: Well I definitely think that it had a strong, a very strong influence. And... there were some other piece of what you just said that I wanted to pick up on, I'm trying... (laughs) I'm trying to bring it back... I'm trying to bring it back... Oh yes what I wanted to say was... You're right and the textbook was right that the progenitors of humanistic psychology, certainly Maslow, probably Carl Rogers and some of the others were not

interested in an anti-scientific approach or throwing over science, they thought that it was important to conduct science although they were willing probably to accept a somewhat broader view of science and to move towards what might be called a human science.

**Dr James:** Yeap

Dr Dave: Hum... But it wasn't just the counterculture. And it wasn't just psychedelics that led to the change that led to kind of the demise in a way that... where even these intellectual pioneers of humanistic psychology began to feel disaffected with where it had gone. And what I'm referring to is what was called the human potential movement.

**Dr James:** Yeah

**Dr Dave:** Which in a way was the commercialization of humanistic psychology.

**Dr James:** Hum hum

Dr Dave: So just suddenly you had people who were seeing the opportunities to make money from heh... small amounts of money to huge amounts of money.

**Dr James:** Yeah

Dr Dave: I'm thinking of, particularly, of a program called "EST", Erhard Seminars Training, and some spin-off groups of that, which would... you know, that kind of thing goes on today, you know, where you see advertisements to go to a hotel for a weekend with a crowd of hundreds of other people to get trained in whether it's real estate or becoming a successful sales person or somehow becoming a "power person"! (laughs) In one way or another... Hum... That really seemed to happen, sort of to coincide as heh... as Erhard sort of picked up on a lot of the philosophical and practical ideas and exercises that were being developed in encounter groups and so on. And made them commercial. And got extremely successful with it. And then it got to the place where it was co-opted by the culture at large and you began to see it mocked in, you know, newspaper articles and movies and so on. And that's one of the things that happens in today's fast moving media culture is... you'd better be, you'd better hope that the media doesn't get on to what you're doing (laughs) because it will use it up real fast and we get used to things so quickly we say: "Oh that!"

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**Dr James:** Hum

**Dr Dave:** "Oh hum". It's like as soon as we can name a thing it kind of feels like we

know the thing, we're kind of done with it...

**Dr James:** Yeah

Dr Dave: ...in some respects. And I think in part that's what happened to humanistic

psychology.

Dr James: Ha

Dr Dave: And then what came was the rise of positive psychology, you know, it's very interesting and as you know I've been intrigued by it, and critical of it, and enthusiastic

about it, all at once... It showed that that initial impulse that grabbed us back in the

60's, that grabbed me, that that hunger is still there...

**Dr James:** Yeah

Dr Dave:... at large. And so, when I went to, I think it was the second World Congress

that I went to, I missed the first one, I went to the second one. There were over a

thousand psychologists there, that was like the conference that I went to in humanistic

psychology back in 1969.

Dr James: Whoa

**Dr Dave:** It would be a thousand psychologists probably at that one.

**Dr James:** Yeah

**Dr Dave:** So whoa! Here's this explosion of interest...

Dr James: Hum... hum

Dr Dave: ...you know, there's some kind of... you know there's a hunger out there for

whatever we call it

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**Dr James:** Yeah

**Dr Dave:** to focus on the positive potential of human beings and positive aspects... That is not all negative, yes there is a dark side, yes there... you know... and I agree with Martin Seligman, you know, when he says... actually he's repeating what Maslow had essentially said: "Psychology has spent a lot of time exploring the dark side of human nature and all of its fallibility and psychopathology, what about the other side of the coin?". So Seligman brought that back and a whole lot of great energy but the other interesting thing is that a lot of the people who presented at that conference and who became... who are leaders in this movement have been... are part of my cohort!

Dr James: Ha

**Dr Dave:** They were graduate students when I was a graduate student!

**Dr James:** Yeah

Dr Dave: Only they went on to do research and establish, you know, some of them becoming therapists, some of them became therapists, but some went on to research careers where they proceeded to validate and document a lot of the stuff. And one person you asked me about previously was... ACT... what's his name, I'm blocking on it...

**Dr James:** Hayes?

Dr Dave: Yes! Yeah

**Dr James:** Yep

**Dr Dave:** Yeah... What's his whole name?

**Dr James:** Is that Steven Hayes?

Dr Dave: Yeah, Steven Hayes, who I interviewed! And, you know, in part I think he's done thirty years of research... Leslie Greenberg has done thirty or more years of research... the guy I just interviewed on gratitude, he's been doing research before

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positive psychology happened on gratitude... So there were people who were interested in this, laboring in this area for whom positive psychology then created an umbrella, that they could get together under.

Dr James: Yeah. This is quite fascinating, isn't it? As a student of the 80's, I guess I sort of wistfully looked back to the 60's hum... when humanistic psychology heh... became a bit of a force within psychology and my career in psychology, I guess the three decades that I've been involved in it, it's really been a time of cognitive behavior revolution

Dr Dave: Yes

Dr James: when, at least in Australia, cognitive behavioral psychology, CBT, RET, etc. I think has dominated psychology probably for two or three decades, and as I always had humanistic values, although I would often adopt different approaches that weren't necessarily humanistic, you know, therapeutic approaches, but the underpinning of my work has always been with humanistic values. I guess I always kind of bucked at the hardline cognitive behavioral approach even though I see the validity in many respects of it...

Dr Dave: Hum hum

**Dr James:** And I guess a cynical part of me thinks: "Okay, well, positive psychology is really just cognitive behavioral psychologists rediscovering humanistic psychology and repackaging it".

Dr Dave: That could be true! (laughs) To some extent! You know, to some extent I think that's true.

Dr James: It's something I'm thankful for, you know. I welcome it because I think, you know, psychology really needs to rediscover a lot of humanistic psychology values and a lot of the focus in humanistic psychology. So I think it's a great evolution but, yeah, the cynical part of me thinks: "Well, you know, it's always been there, you just chose to ignored it for the last three decades".

Dr Dave: Yeah. Well let's hope that the underlying values that you're talking about are part of what's reborn. And that it's carried forward by the people who are emerging, who have emerged, and who are going to emerge as flag bearers of that movement. And also it will be interesting to see... you know, how long "positive psychology" lasts as a movement... if humanistic psychology only had a life span of 40 years, let's say... And of course the roots of humanistic psychology go back much further into, you know, into schools of philosophy, Heidegger and Husserl and people like that...

**Dr James:** Yeah

**Dr Dave:** ... at least that far, you know, some of those threads may continue. But it may be interesting to see, you know, what will the fate be. You know, there's kind of a pendulum I think...

Dr James: Yeah

**Dr Dave:** ... that swings back and forth. And we had, you know, in psychology, we had learning theory, during the... you know, during the Skinner's heyday, everything was learning theory

**Dr James:** Yeap

**Dr Dave:** Then perception kind of moved in and because they saw that well, the brain starts to play a role in terms of perception and that... and so perception became very big. And then the cognitive behavioral, the cognitive revolution. And it seems like now, you know, sort of alongside the positive psychology that we're talking about, but more on the side, on the, you know, research side, you know, is the emergence of... of this sort of neuropsychological... what it would appear to be some kind of neuropsychological revolution...

Dr James: Hum...

**Dr Dave:** .... of a deeper understanding of brain processes. And a kind of opening of new horizons.

**Dr James:** Yeah. And you've mentioned... you referred quite a few times in your program seeing a confluence of all these different branches within psychology appearing to be heading towards some kind of melting together?

Dr Dave: Yes. And it's difficult to talk about, I think, but... so we have neuroscience there, you know, on the one hand, we have all of this neuroscience as a result primarily of more powerful imaging tools, I think, that's certainly... maybe the biggest piece of it. Along with... techniques of... well that's mostly the neuro-imaging but also there's some... you know, beginning to do brain stimulation at deeper levels of the brain and to

do monitoring at deeper levels of the brain, with very fine electrodes... So, I think, you know, there's new information coming from that, and new therapeutic approaches, and

then, interestingly, we have attachment theory

Dr James: Hum...

Dr Dave: I think we're in a time when attachment theory... it seems it keeps coming

up... attachment theory is more and more compelling. And there are different schools of

psychotherapy that seem to be able to gather around the standard of attachment theory and to kind of organize themselves around that approach I think. And we're getting

validation from the neuroscience side where we can understand some of the mechanisms

of attachment theory. And I guess I also have to back up to... and think of the... you

know, somehow here to acknowledge the social, cultural, evolutionary forces that were...

that are at work and that were understanding more and more as well... so kind of

epigenetics, I think, comes in with that

Dr James: Hum...

Dr Dave: We've got more research on the effectiveness of psychotherapy and all the

stuff that points to skills more than it does to schools...

**Dr James:** Yeah

**Dr Dave:** ...and to theoretical orientation.

**Dr James:** Hum

Dr Dave: We still have a big divide, I think, between the bio-medical model versus the

educational model, I would say... the educational/social

JA - Hum

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Dr Dave: model, that... And, you know, maybe it's not an either/or, I think we're

moving into a world increasingly where we have to say both/and

**Dr James:** Hum

**Dr Dave:** That these are... that we're talking about the same... the same universe and...

but that there are different windows into that same... it's like the elephant again.

Dr James: Hum

Dr Dave: Ant so we grab different pieces of the elephant. And one of the new things that has happened around all of that is seeing that talk therapy modifies the brain in demonstrable ways. So that kind of brings us talk-therapy-people into the room... into the conversation that we had been excluded from, in some ways, by the hard-science-

folks, you know, saying: "Now we're talking about the real stuff. We're talking about the

brain."

**Dr James:** Yeah, yeah

Dr Dave: "And we're talking about chemicals and things like that". Well, it turns out, you know, and of course it had to be so... but at least now it's demonstrable that talking

and other sorts of interventions, in fact all of experience, modifies the brain...

**Dr James:** Yeah

**Dr Dave:** ...modifies those chemicals

**Dr James:** Yeah

Dr Dave: It's said that it's all part of the whole. And so... so, you know, their interventions... I'm sensing that interventions will probably continue to be a mix of those two but that the hard dividing lines between what were previously called the schools, I think those traditional barriers are breaking down

**Dr James:** Hum

**Dr Dave:** but I'm not sure that they'll ever go away completely.

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Dr James: Hum hum

**Dr Dave:** Because of... the human ego (laughs). Because of ego and marketing.

**Dr James:** Yeah

**Dr Dave:** Because hum... and this could open up into a all other doorway about what's going on in psychology these days and where I see it all going... having to do with... both the marketing of psychology and the marketing of individuals, first of all people need... There are people with strong ego needs to make a big mark, right, and to get famous

**Dr James:** Yeah

**Dr Dave:** And so if you... if you patent or copyright as people have done, or trademark... the James Alexander Approach®, you know... then, and I shouldn't have used your name cause I don't see you as being somebody like that (laughs)

**Dr James:** I'll take the free advertising, let's say Dave (laughs)

**Dr Dave:** I apologize. But there are people out there that, you know, that are doing those things to make a big name for themselves or to go down in the history books or to... appear to have one... some piece of the debate or to make a lot of money. All of those factors, you know, very human factors are there. Plus there are... you know, there are marketing... there's the marketing of psychology, as a whole, that's... you know, they're big factors there, and individuals needs to make money so...

Dr James: Hum

**Dr Dave:** So, you know... and to get famous.

**Dr James:** Yes, there's a whole lot of factors involved beyond purely theoretical, isn't there? Or choices between theories

**Dr Dave:** Yes. And ha... so, if you don't mind, maybe I'd say a little bit more about that?

Dr James: Sure.

**Dr Dave:** OK. Because I gave it some thought, you know, before... I knew this was coming up so I tried to think about what I could say. So... you know, psychology is not monolithic. Years ago, I think, before... maybe while I was an undergraduate or shortly before, there was a famous psychologist by the name of Sigmund Koch and he set out to write a book about psychology. And (laughs) it went into all these volumes that he never anticipated, I forget how many volumes there were... And now we have... I don't know exactly how many but over fifty divisions of the American Psychological Association. So, psychology as a whole is huge

Dr James: Hum

Dr Dave: But if we just kind of focus on psychotherapy, there are huge... there are social... we have to acknowledge that whatever our theories are, that there's also... there's a larger container. That there are social, cultural and economical forces currently impacting psychotherapy. One is what I would call the "de-professionalization", which as I pointed out one I got started I had to get a Ph.D. if I wanted to be a therapist. One of the things that has developed is that we now have masters levels training and masters levels licensing. I'm not against it. I'm not sure if a Ph.D. was required but arguably the level of preparation and so on was reduced. And in some ways that is a trend. I think one of the ways that trend is manifesting itself is with the rise of coaching. So that coaching turns out to be an end-run around licensing. You don't have to have a license to declare yourself a coach. And in fact there's quite a few Ph.D. psychologists who have chosen to call themselves... or have Ph.Ds in other fields who've, who choose to call themselves coaches because (a) either they don't want to have to go through the hoops of the licensing process, for example, maybe they didn't get their Ph.D. from a school that is A.P.A. approved, internships, etc., or... now I quest my either/or... or in their assessment coaching is more palatable to the market out there. There's a lot of people who've... who are unwilling to admit that they need a "therapist", that must mean that they have "problems", I'm making air quotes, trying to do it in my voice as well... you know that there's something wrong with them, whereas seeing a coach... "well, I'm a normal person". That's a lot more appealing.

**Dr James:** Hum

Dr Dave: So, that's one force that's going on. And that could include, you know, one of

the other things that goes on is that... there are people who've, you know... there are a lot of sort of training programs out there. They're offered sometimes by people with various kinds of licenses and credentials but their training programs are kind of open to more or less whoever wants to take them. So that you could get maybe trained in Gestalt or Bioenergetics or some other approach... some more contemporary ones that I probably don't even know about... body approaches or something... and maybe take a training that's a year long or something but... maybe one weekend. I know in the old days in the early 70's there were lots of people on a basis of a few weekends then started hold... holding, you know, putting a shingle out and advertising themselves as practitioners...

Dr James: Hum

Dr Dave: So, I do think that kind of things is going on. We have the freez... the movement... what happened was the experimentalists won the day in the university system and I'd imagine that's rather true in Australia as it is here in the US, is that true?

**Dr James:** Yes.

**Dr Dave:** Yeah, so what we have was the rise of professional schools to train people to be clinical psychologists and those are very expensive because they're not funded by the state in the way that major universities are. So they don't have outside funding, they don't have alumni funding so they're very expensive. So what happens is that the people who do go to those schools - and, by the way, those schools are under considerable pressure if they want to have their grads licensed, they may have to have their ears on the ground: "Okay, what are the courses that they have to have?" and so on, so they're subject to outside pressures -

**Dr James:** Hum hum

Dr Dave: and... hum, so one of the phenomena that are going on is that students are coming out of school, people are coming out of school at the masters level and at the Ph.D. level with huge amounts of debt.

**Dr James:** Hum

Dr Dave: So... They're saddled with debt and... their clinical decisions may be

influenced by that.

**Dr James:** Yeah

Dr Dave: You know... "Hum... can I afford to let this client go? Can I afford to refer this client to somebody who maybe has deeper expertise than I do? Well, I don't know I've got a 100.000 dollars of debt... Hum, you know, I sort of need to keep these people coming in".

Dr James: Yeah

**Dr Dave:** That wouldn't probably be a conscious process

Dr James: Yes

**Dr Dave:** But it can easily be an unconscious process.

Dr James: Yeah, yeap

Dr Dave: Another social... sociological factor is, I think, over the period of time that we've talked about, say 50's till now, the huge influx of women. Ha... into higher education generally but also into psychology and into training and in psychotherapy. In some ways I think they're better suited, I think, that they're more attuned to being deep listeners and having that empathy and almost "radar", you know, for the kind of issues that people have so... so that's wonderful but one of things that goes along with it too is, you know, due to the power and economic differential, they're often willing to work for less.

Dr James: Hum

**Dr Dave:** So there is a whole sort of... with the insurance industry, and that's the other huge factor, they're driving things: therapies got to be quicker, shorter, and cheaper. So that's influencing us all at one level or another.

**Dr James:** Yeah.

**Dr Dave:** Another factor is graduate schools are overproducing Ph.Ds.

**Dr James:** Hum

Dr Dave: They're producing too many Ph.Ds and training them to be professors. They're training them to be scientists and professors and, guess what, there aren't that many jobs out there for professors scientists. And so, then, they're casting about to create new professions like coaching and others to create work for themselves.

Dr James: Yeah.

Dr Dave: And without an eye also to the competition in private practice, which is hugely competitive. At least in major cities, maybe minor cities here, I don't know how it is in Australia, are there lots of therapists competing with each other there?

**Dr James:** Yes, it is competitive, yeah.

Dr Dave: Yeah. It's a big country but the populations are concentrated in...

**Dr James:** Yeah, that's right.

**Dr Dave:** Yeah. And also, over here, with little or no business training.

Dr James: Hum

Dr Dave: There was no business training when I was in graduate school and according to one of my friends there still isn't. And... but if you go under private practice, you're opening a business

**Dr James:** Yeah

Dr Dave: so... many people are going into that no realizing that they're gonna go into business and it's not easy and they may have to borrow money to do it and blablabla...

Dr James: Yeah.

Dr Dave: So... and then there's the pressure for evidence based treatments which we've gone into in some of the interviews and while, at one level... you know, I've got mixed

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feelings about that. At one level I applaud the notion that there should be some kind of evidence that the things that we do work

**Dr James:** Yeah

Dr Dave: on the one hand. On the other hand, it can be very limiting in terms of what it accepts and it's very expensive to do double blind studies.

**Dr James:** I think it's also... what does that requirement do to innovation?

**Dr Dave:** Yeah

Dr James: There was a point where what Carl Rogers was doing, what Carl Jung was doing, what Freud was doing ha... were not evidence based at all.

**Dr Dave:** Right

Dr James: In all the beginnings of all the major people in their field, at some point, there was no evidence based for what they were doing whatsoever. They're innovators.

Dr Dave: Good point.

Dr James: There's a need to always have an innovative engineer profession to keep on developing, I do have a concern that a strict emphasis on evidence based can stem innovation.

**Dr Dave:** Hum hum. Yeap, I think I agree.

Dr James: Dr Dave, you know, I'm keeping an eye on the clock and hum... we're pretty well running close to an hour so I think perhaps we need to wind it up here. Hum... I found it fascinating to talk to you and I guess it occurred to me during the course of our conversation, why I found it so fascinating and enjoyable talking to you: firstly you're an erudite speaker, and it's always pleasurable just to listen to you. Secondly, you've got a fascinating history, and I think your professional career in psychology is really mirroring a very interesting era in the development of psychology. You were there, as in many of the social phenomena that you described earlier, at the ground level. And your development is... the development of your career in psychology has really paralleled the

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development in psychology in our culture which is just very fascinating. And thirdly you're probably about the most well read psychologist I've ever come across. You must be tearing through a book a week.

**Dr Dave:** I am (laughs)

Dr James: I don't think there's anybody else on the planet that has their finger on the pulse of what's happening to the extent that you do, especially in terms of psychology. So, I note also that I've managed to, perhaps cover or ask you about a quarter of the questions that I had sketched out... and we could obviously talk for days, and I don't think we're gonna get the opportunity to talk for days but I think you'll find that many of the listeners are also equally fascinated by your experiences and your observations. So I thank you very much for your time and more broadly thank you very much for your program. Hum... you know you do receive lots of very well deserved praise, and it's all extremely genuine from the public that offer it because you are creating and offering a magnificent resource for people all of the world. So thank you again for your time and thank you again for your program.

Dr Dave: Well, thank you very much for creating this opportunity. I'm really glad you kind of press me for it and also I feel so lucky to be in this catbird seat, maybe as the phrase, this vantage point of monitoring psychology and interviewing all these people from diverse perspectives. That is pretty unique. And is further evidence of what I started the interview out saying that I seem to have this instinct for getting into the right place and it feels like "Whoa this was...". Because when I started out I had no idea whether anybody was going to listen or not. And so it's been so gratifying to hear from so many listeners out there to how much this has spoken to them. And so again I just have to thank my... we didn't talk about my jungian interest... but that piece of that jungian unconscious that seems to be guiding me.

Dr James: There's a lot more that we could talk about. And who knows maybe we'll get another opportunity if I can sufficiently bind your arm again...

Dr Dave: Okay! Thanks again!"

## DR. DAVE'S POST INTERVIEW COMMENTARY

I hope you enjoyed listening to this interview. I was shy about doing it, fearing I'd have

little to say. But thanks to Dr. Alexander's good questions, it turns out there was no problem with that. In fact, I talked so much that we ran out of time. I hope that at least some of it was new information for you. In the interview I mentioned several times my youthful rejection of the psychoanalytic perspective in graduate school. If you're a regular listener, you'll know that I later came back around, recognizing that contemporary psychodynamic theory provides the most comprehensive theory of personality and psychopathology, in my opinion and that of many others. And under the psychodynamic rubric, I include both attachment theory and Jungian psychology. Thanks again to Dr. Alexander for suggesting this interview and for drawing me out.