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Tullio Maranhão, *Therapeutic Discourse and Socratic Dialogue: a cultural critique*, London: University of Wisconsin Press, 1986, \$22.50, xv + 276 pp.

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How can a close scrutiny of Socratic dialogue bear upon the controversy about the nature of therapeutic discourse waged within the professional community of therapists? Therapeutic discourse is a 'cultural subsystem' (26) akin to philosophy, religion, science and politics. It affects our outlook on life and the world by and large and provides us with 'principles for action'. As an attempt to integrate, in discourse, 'theory and practice' (xii), it embodies a recurring theme of 'the Western cultural tradition'. In ancient Greek culture and society, Socratic dialogue was a significant endeavour to preserve, in discourse, the unity of 'representation and action' (xiv) throughout historical change; in our society, the transformation of therapeutic discourse, in the spirit of either modernist 'conservatism' or postmodernist 'revisionism' (xii), faces very much the same problems. For, in its quest for unity, therapeutic discourse meets an 'epistemological puzzle' (xiv), bestowed by Socrates' philosophy, which originated 'one of the essential tensions of the Western cultural heritage' (230), the tearing dilemma between 'fragmentation' and 'integration' of a 'trinity' constituted by 'knowledge, power, and rhetoric' (236). As it happens, 'the struggle to integrate knowledge, power, and rhetoric into a unity is as frustrating as the struggle to delete one or two members of this trinity and arrive at a consistent wholeness' (xiii-xiv). Therapeutic discourse, then, replicates 'a cultural theme endeared to us since the Greeks' (6), and can be likened to Socratic dialogue as one of several 'attempts to resolve the puzzle'. Like other 'subcultural spheres of discourse', such as 'the Platonic and Socratic, the Aristotelian, the Christian, the political, the scientific', it propounds a 'new cultural constellation' (237) of the elements of the triad: a theory or a system of knowledge, a rhetorical practice, and a pattern of authority relations in discursive interaction. These tenets define the author's 'anthropological point of view' and guide his 'cultural criticism' (xv) of both forms of 'discursive practice' (8).

Therapeutic discourse hinges on a 'dialogical situation' (4) to accomplish integration. Since all forms of therapy 'are based on verbal actions' and 'cannot avoid the dialogical procedures', 'the claims for independence and originality by different schools become untenable' (125). Psychoanalysis and its reformulation in Merton Gill's analysis of transference, on the one hand, 'structural' (54) and 'systemic' (57) family therapies, on the other, are the 'subspecialities' (xiv) here taken into account. In Freud's view, treatment is based upon 'reflection', not upon 'action'. What cures is the emotional impact of insight on the patient's mind, the unexpected, symbolic interpretation of his or her behavioural leanings,

which leads to a plausible reorganization of his or her life history. Cure is not to be obtained 'by means of the actions relating to the here and now of the analytic interaction', but 'through consciousness'. Success in therapy depends on the rational reconstruction of the past, not on the agreement reached through dialogical negotiations. Cure is 'knowledge', not 'rhetorical maneuver' (17). Hence, in Freud's view, treatment relies heavily on metapsychology, and the theory of symbol formation and interpretation. In the later phase of his writing, Freud moved from a 'functionalist (unconscious, preconscious, and conscious)' to a 'structuralist (id, ego, and superego) picture of the mind' (21). The ego is not 'the exclusive product of intrapsychic forces' (24); it is 'a far more complex entity than the function of consciousness' (22). Two other elements are equally decisive, the external world and the 'communicative actions' (24). As a consequence of this outlook, 'psychoanalysis can neither be regarded as symbol interpretation alone, nor as interaction or negotiation pure and simple' (21). Freud, however, did not change his views on clinical practice.

In order to obviate the shortcomings of an excessive reliance on metapsychology, the analysis of transference endeavours to 'integrate the communicative aspect of therapy with the theory of the psyche' (25). As a result, rational consensus becomes a necessary condition to preserve the 'dialogical basis' of the interaction, an element 'which bears at least as great a responsibility for treatment as Freud's metapsychology' (35). Moreover, the psychoanalytic session can be regarded as 'a negotiation between two different narrative structures', the narratives of the patient and the analyst (28). From this point of view, 'what seems to cure is not the right interpretation, but just any interpretation plausible for the two interactants, and the great therapeutic move resides in the deconstruction of the analysand's narrative', that is, in picking out 'some underlying themes', which could be *any* 'as long as agreed upon by both' (49). The question, therefore, does not seem to be one of 'knowledge', as much as 'one of rhetoric' (48). The 'program for an analysis of transference', however, does not propose rhetorical manoeuvres too powerful to break the patient's resistance to interpretation, and still assumes that 'the weight of the intervention must be borne by the correctness of the insight and not by the persuasive power of the rhetoric' (34). Moreover, 'the issue of power is not explicitly addressed' by Gill and Hoffman's analysis of transference, as it is not by psychoanalysis.

Family therapists, on the other hand, seem to acknowledge that 'power dominance is one of the healing gifts'. They assume that 'the divorce between system of knowledge and therapeutic interventions is complete' and design a form of therapy 'centered on rhetoric and power alone' (50). But among them, whereas structural therapists regard therapy as 'a rhetoric' capable of effecting a 'change in power relations' and challenging the family's hierarchy (81), systemic therapists think that healing does not necessarily 'entail a change in behavior', but just implies 'altering the client's view of the problem'. For reality is 'a reflex of symbols' constructed by language (93) and 'power is not an autonomous sphere

of action', but 'a metaphor' in a system of communicative interactions 'to be given rhetorical use' (92). Systemic family therapists, then, simply act as 'rhetoricians' entering and leaving communicative processes governed by 'cybernetic mechanisms' (83). Rhetoric, however, 'is insufficient to define anything' (95); because, as the whole survey aims to show, the 'curing element' of therapeutic discourse is not its 'persuasion strategy', independent from power and knowledge (125). On the contrary, 'the rhetoric of therapeutic discourse owes its strength to the knowledge which stokes it, and to the hierarchy which guarantees its deployment' (127).

The discussion of Socratic dialogue too aims at showing that 'neither knowledge, nor power, nor rhetoric can be built as absolute grounds' (180), being, as it is, impossible 'to tear this trinity apart' (231). Besides, it sheds light on the question whether therapeutic discourse can 'feed itself exclusively on the art of communication', or whether it is 'in need of an ethical grounding' (139). The 'Socratic-Platonic endeavor' (183) to 'create a new culture' (148), it is argued, arises as an attempt at 'integrating different spheres of discourse into one' (215). The ensuing dialogical practice is 'an existential whole activity encompassing all spheres of life'. It has 'an element of philosophy' (178), in the sense of a quest for 'the virtuous truth of sincerity' (181); an 'element of education' that attempts to 'persuade' of the truth; 'an element of therapy', in its 'plight to unravel the truth within the soul of each interlocutor' (178); and an element of politics, as it demands awareness of the 'power asymmetries' casting it in the mould of the 'entire polity' (215). A discourse, then, which 'could not be divorced' from the 'moral interests' of a human being searching for virtue, involves a philosophical standing 'not unlike the conception of the therapeutic' (190). And it seems 'worthwhile' indeed 'to compare the Greek philosopher's quest for man's goodness to the pursuit of well-being in psychotherapy' (200).

The Socratic dialogical – 'educational/political/philosophical' – practice is 'founded on consensus' (182). The 'Socratic consensus', and the 'therapeutic rapport' likewise, are 'stratagems destined to keep the argument flowing towards a possibility of understanding' (188). Both discursive practices have to avoid 'the erosion of communicative consensus' (196), in order to be able 'to do therapy' on the one hand (197), or carry on the philosophical pursuit of man's 'wholesome quality' on the other (199). Such 'absolute quality of wholesomeness' (201), now 'virtue, now wisdom, now knowledge, now goodness', is the 'ethical imperative' on which both practices are founded; it is the essence of 'our communicative habitude', and it provides the grounds for consensus. Therapy and dialectic, in either practice, are the 'means to bring it to fruition' (216). Dialectic can then be seen as the 'curing element' (125) of Socratic dialogue, as it overcomes the 'tension' between 'mimesis' and 'methexis' (215), that is, the irreconcilable opposition between the fixity of any given copy or description of reality, and the continual readjustment of the wholly interdependent system of our 'descriptive categories' (138). Dialectic accomplishes 'the methetic function of showing false

interrelations among things' (174) by keeping aloft our well-known 'trinity' (xiv), and 'it provides the speaker with something beyond rhetoric', outside the 'encroachments of power positions, and independent of any mimetic knowledge of reality' (208). But where does such a function reside in therapeutic discourse?

Resort to a Jungian model may come in handy here. The elements of the 'trinity' (231), knowledge, rhetoric and power, may be likened to three out of the four Jungian 'psychological functions' (see C. G. Jung, *Collected Works*, Volume 6, par. 83), respectively to 'thinking', 'feeling' and 'sensation'. But the author treats the three notions rather ambiguously, so that it is not altogether clear whether they can be consistently referred to the Jungian functions as such, or to their content, objects and projections. Further, the achievement of the Socratic 'wholesome quality' can be compared to a process in the development of personality described by Jung as 'integration'. For, as one knows, the process of integration may lead to a sense of 'wholeness' and balance resulting from the welding together of all the elements and functions of the psyche. Such a condition is to be equated with health; as Jung says, it is 'the goal to which the psychotherapeutic process ultimately leads' (*Collected Works*, Volume 12, par. 32). Jung also points out that the activation of this process is symbolically expressed by the emergence of a 'quaternity' (*ibid.*, Volume 9, i, pars 713–18); the case of alchemy, where 'a vacillation between three and four . . . comes out over and over again' (*ibid.*, Volume 12, par. 31), is most significant in this regard. Thus, it may also be worth noticing that, in Socratic dialogue, our author singles out dialectic as a fourth element to be added to the 'trinity'. Dialectic might accordingly be matched with 'intuition', the fourth Jungian psychological function, and a function 'which is chiefly dependent on unconscious processes of a very complex nature' (*ibid.*, Volume 9, i, par. 503).

The 'ethical foundation' (243), which therapeutic discourse is in need of, can then be described as the need to integrate intuition, thereby begetting a balanced relationship between conscious and unconscious processes of the mind – a fact that is otherwise brought out by further considerations in Dr Maranhão's discussion, leading to the core of his cultural analysis. In his view, the harsh 'duel between modernity . . . and postmodernity' has reawakened 'the tantalizing dilemma of the unity versus fragmentation of the trinity' (239). But how can it be solved in the context of a 'culture of literacy', such as ours is, which, to a large extent, has 'blurred the distinction between representation and action', or, in other words, between the 'mimetic copy of reality' and the 'methetic intervention over' it? In our culture, knowledge has been reduced to texts and language, and 'textual knowledge' is pitched 'as a form of dialogue', without 'coming to grips with the antidialogical nature of texts' (243). Now, there are 'two cultural inventions', such as 'dialogue' and 'self-reflexion', that 'seem to allow us' to attain to the ethical grounds of our discursive practice (223). They can both be seen as viable means to integration, but nowadays it would be 'unrealistic' to suppose that we could 'abandon the mind's function of

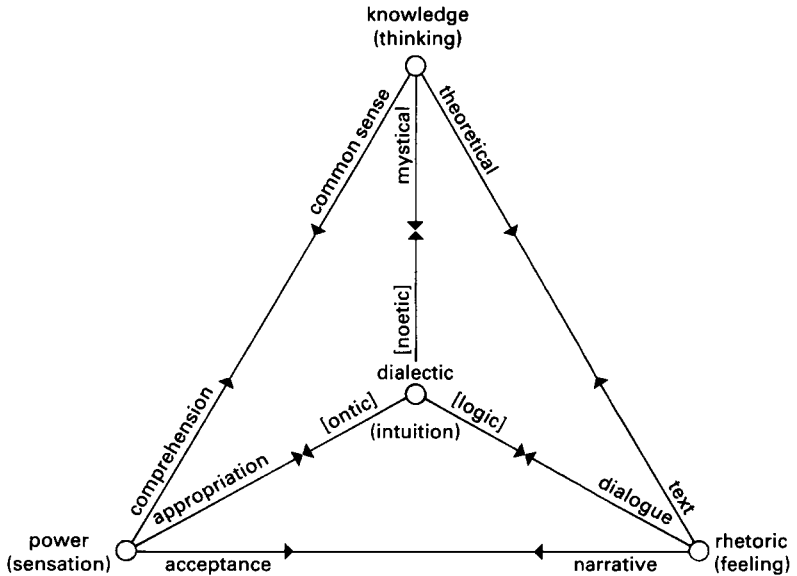


Figure 1

self-reflection' and strive to achieve the unattainable 'ideal' of Socratic dialogue (245). Therefore, to pursue integration, we ought to 'resolve the incompatibilities extant between self-reflection and text' (244). Dr Maranhão's suggestion, to explore 'other angles of approach', such as 'modes of discourse, types of knowledge, and ways of thinking' (245), may again be likened to another model, the so-called 'theory of triadic multiplication' (cf. Stephen Gersh, *From Iamblichus to Eriugena*, Leiden: Brill, 1978: 126 ff.), that can be found in neo-Platonic metaphysics, a form of discourse which takes over, in a properly self-reflexive way, the interpretation of Socratic dialogue. Quite remarkably, the author mentions *three* types of knowledge – 'common sense, theoretical, or mystical' (245); *three* 'levels of understanding' (242), or ways of thinking – 'comprehension, acceptance, and appropriation' (239); and *three* modes of discourse – 'dialogue, narrative, and text' (243). Each triad of these can in turn be seen as a tripartition of an element of the original trinity: knowledge, authority or power, and rhetoric. For we may conceive knowledge, and in turn power and rhetoric, as related to the other two members of the trinity, and, in the diagram (Figure 1), to the centre of a triangle of which they form the vertices. Modes of discourse, types of knowledge and ways of thinking can then be represented as relations connecting each vertex to the others and to the centre of the diagram. The centre is again the fourth element, which represents the integrating factor that guides the process and constitutes, in Dr Maranhão's terms, its 'ethical foundation' (183). In sum, the problem is brought back again to the dynamics of

integration, as it can be perceived in its objectual projections. Thus, both dialogue and self-reflection, as integrating practices, seem to rest on the same ground.

But where does their expediency reside? It can plausibly be argued that they both afford a practice of depersonalization and repersonalization of speech, and that such a process is essential for cure, as it involves the integration of all four psychological functions. How is that process carried out in discursive practice, either dialogical or self-reflexive, and what does it beget? Several essential steps can be distinguished and are actually recognized in Dr Maranhão's discussion. The crucial step seems to be the transformation, in discourse, of a representation into an action, of a mimetic copy of reality into a methetic transformation and rearrangement of its constituents. The methetic action is a transference ('rhetoric' or 'feeling') of assent ('power' or 'sensation') from a representation ('knowledge' or 'thinking') to another, which implies a complete recasting of the whole categorial framework ('dialectic' or 'intuition'). Assent, with its holistic implications, is the essential element. A discussion becomes a dialogic action when conferring of assent comes into play, to produce consensus or *homologia* (cf. J.-F. Lyotard, *Rudiments païens: Genre dissertatif*, Paris: Union générale édition, 1977: ch. VIII). Self-reflection allows a methetic action, as the reader – or, for that matter, the writer – does not 'take responsibility for what the text said' (221). By producing a 'separation between our discursive behavior and our personal identities' (223), self-reflection permits a 'deconstruction of . . . narratives in order to reconstruct them', in other words, a transference of assent, just as dialogic action does (224). Conferring assent involves 'spontaneous acceptance' (187) and 'the sincerity of the speaker' (148), an act 'in which the said reflects the totality of which was thought' (234); it stirs up emotions and requires an holistic intuition, in which words are dialectically transmuted into symbols. And it is 'the virtuous truth of sincerity' (181) alone, which is able to motivate the will, realizing 'the unity between words and deeds' (194). Different forms of assent or 'levels of understanding', such as 'comprehension, acceptance, and appropriation', grounded as they are 'on will' (242), transform metaphorical representations and communications into real power relations. For we act according to the sense we give to our ways of expressing personal relations and to the kind of assent we are prepared to grant them. Transferring assent is thus a way of transforming reality, as far as our personal behaviour is concerned. It is a deed which can be carried out in discourse, through a methetic action, which involves the integration of all four psychological functions. In this connection, Jung's theory of psychological types seems to be particularly relevant. It can really be deemed a substantial contribution towards the development of that science of the 'formation of character' which John Stuart Mill called 'ethology', and propounded as essential to the foundation of the 'social science' upon the 'science of mind' (see *Logic*, Bk. VI, ch. v).

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