

## **Cognitive Therapies: A Comparison of Phenomenological and Mediational Models and their Origins**

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This article is a response to the rapidly growing interest in and practice of cognitive therapy. With the intent to place this approach in perspective, it is shown that cognitivism is neither revolutionary, the product of a particular innovator, nor a unitary system. Rather, cognitive therapy is the culmination of three centuries of thought and debate initiated by the opposing ideas of the British Empiricists and German Romantics. The former provided the foundations for an objective and reactive or mediational conception of the mind; the latter set the premises for a subjective and proactive or phenomenological position. The history of these alternating views are traced and their modern counterparts in cognitive behaviorism, cognitive psychiatry, and cognitive phenomenology are compared relative to their differential therapeutic roles, procedures and objectives.

Across and within each of the human services professions, a cognitive approach to the treatment of human problems of living is gaining increasing credibility. The surge of articles, books, and research studies in the past decade attests to the growing interest in and a substantiation of the merits of this approach. In social work, for example, Fischer (1981, 525-47) includes the cognitive approach in the accumulation of newer methods that are contributing to a revolution in the profession's development. Within the field of psychology, Dember (1974), in an article containing the term "cognitive revolution," states that his profession has "gone cognitive." And in psychiatry, Beck (1976) has emerged as an advocate for cognitive therapy as a more effective and reasonable alternative to the limits of the traditional systems of psychotherapy.

Cognitivism may be hailed by some as "revolutionary," but a more apt (although somewhat facetious) metaphor might well be "overnight sensation"—particularly as the term is applied to the seemingly sudden ascendance of a new superstar of one kind or another. As is often the case, the "discovery" is by no means a newcomer; indeed, the star has served a long and arduous apprenticeship—either in a bit role in the supporting case of a larger drama or in the wings awaiting the deflation of the current celebrity. Such is the case with the cognitive model; well before the advent of the now established schools and systems of treatment, various explanations have

abounded about the many ways in which humans take hold of outer reality, think and reason about their experiences, use recall, and otherwise employ the powers of the mind in a conscious fashion. More to the point, even a casual study of the more prominent and established theories and schools of behavior change will disclose that ideas about consciousness and cognition have played and continue to play a derivative although implicit role in their development.

The facile use of the term "revolutionary" should be avoided for yet another reason. Unlike the many schools of psychotherapy that have come into existence over the past few decades, current cognitive approaches have not come forth as a creation of a particular innovator (e.g., Berne's Transactional Analysis, Perls' Gestalt, or Glasser's Reality therapies). Although, as will be shown, certain theorists and writers have succeeded in translating cognitive theory into particular techniques and methods, modern day cognitivism more closely resembles what Kuhn (1970) terms a "paradigmatic shift" rather than a variation on an existing theme. As such, it represents a radical movement of a community of theorists and practitioners from one existing constellation of beliefs, values, and techniques to another.

The purpose of this article is to achieve some perspective on this interest in cognitive approaches by examining the nature of this shift and giving some attention to its significance for certain critical aspects of the psychotherapeutic experience. Typically, paradigmatic shifts occur in any field when existing systems of thought and practice lose their appeal for one reason or another and other more attractive or effective models or paradigms appear to be more relevant. Although interest in the human mind has rarely dimmed over the centuries, the more formal concepts and theories about consciousness and perception have been in the making over the past three hundred years. Hence, it is worthwhile to trace the development of these ideas, to consider how their antithetical forms led to a succession of alternating psychologies and schools, and to find how these opposing and unresolved points of view have culminated in two divergent approaches to cognitive therapy, the mediational and phenomenological. This essay will conclude with a comparison of the distinct premises of each approach and their implications for the principles and techniques of practice.

A working definition of what is meant by the term "cognition" is a good starting point. It is important to note, first of all, that cognition is an explanatory rather than a categorical concept. We have little direct evidence about the actual subjective processes involved in thinking, perceiving, imagining or other mental processes used to transform experience into meaning; hence cognition is a rather simplified but useful abstraction of obviously complex processes. Second, the concept is used here in its holistic sense. This means that it is not restricted to the intellectual and rational aspects of the mind but also takes account of the more enigmatic forms of

consciousness including imagery, symbolism, and other non-verbal forms of awareness.

Cognition can be understood both as a state and as a process. As a state, cognition refers to the personal knowledge that one has accumulated and organized over time. Polanyi's (1961) refinement of personal knowledge is helpful here as he differentiates between *explicit* and *tacit* forms of knowledge. The former is accessible to the individual insofar as it can be called up when required. Explicit knowledge can also be articulated, shared with others, and generally understood in conventional terms. Tacit knowledge, on the other hand, is knowing what we cannot tell. It embodies a kind of latent awareness, the hunches, cues, and generally unformed impressions that are called into being by experience. As an analogy, the basic outline of facts or the note cards put together in preparation for a speech stands for explicit knowledge since it involves the ideas that the speaker knows and wishes to convey to his audience. During the speech, however, a number of unanticipated metaphors, associations, or embellishments may come to mind; these thoughts can be said to float up from the copious reservoir of the speaker's tacit knowledge.

As a process, cognition refers to the many functions of the mind that strive to create a sense of order and meaning out of what would otherwise appear to be chaotic and cluttered experience. Attention and perception, the transformation of gained impressions into concepts and symbols, recall, imagery, judgment, and the comparison of new ideas with old, are all examples of cognitive processes. These functions are assertive and intentional in the endeavor to make sense out of non-sense so as to fashion a modicum of personal security in a confounding world. In this way, cognition makes possible some sort of intelligent interaction and exchange with others or, conversely, the potential for dissension and strife.

### **The Roots of Modern Cognitivism**

Just a casual gaze at the rows and shelves of literature on the topic makes the attempt to say something inclusive about the human need to explain mind, consciousness, truth, or reality somewhat gratuitous. Likewise, the attempt to capture even the essence of the exquisite arguments woven by earlier philosophers of the mind will fall short of its goal. Yet something must be said to underscore the point that many of the beliefs that we now hold about the mind (often without question or doubt) as well as the current disputes about which paradigm of cognition should prevail are indeed derivations if not recapitulations of much older axioms.

The epistemology of the mind has no one starting point. It is, however, important to call attention to the critical question posed in one of Plato's dialogues, the *Meno*. Here it is asked, "What is virtue?" Seeking more than

just a simple definition, the question is concerned with how we really “know”: How can we discover something (e.g., virtue—or truth and love) if we don’t know what it is; how do we think about or make sense out of something that cannot be observed or touched; do we possess an innate knowledge that allows us to discover meaning or must this knowledge be gained always through experience? These questions have served as points of departure for major schools of philosophy and psychology and have generated rather contradictory theories about the nature and existence of consciousness, intuition, and knowledge itself (Grene, 1966).

In the main, the emergence of these remarkably sophisticated theories and assumptions had to await the Age of Enlightenment. It was in this period that the functions of perception, imagination, and other reality-creating instruments of the mind first became the objects of penetrating investigation and discourse. As Engell (1981) observes, “The history of creative imagination from 1660 to 1820 was a human drama unfolding by stages. Seldom in Western culture has one idea excited so many leading minds for such a stretch of time. It became the impelling force in artistic and intellectual life, in literature and philosophy, even in much political and social thought from 1750 on” (p. 4). Assumptions about the creative powers of the mind flowered over this period as each thinker elaborated or controverted the ideas of his predecessor. Two major and lasting schools of thought emerged out of these times: first, the British Empiricists who gave primacy to the senses as the sources of perception and knowledge (knowledge can only be gained); then, in reaction, the German Romantics who gave primacy to the mind and imagination as that which determines reality and its meaning (knowledge is innate).

If only to show how the doors to modern cognitivism were opened a bit by ideas that have not lost their richness, let us consider briefly the arguments of a few representatives of each school. The lasting ground rules for the study of the mind (at least in the tradition of British Empiricism) were first laid by Thomas Hobbes. Hobbes’ theory was revolutionary in its time: Our sense of reality, understanding, and the continuity of our experiences are formed when the mind pieces together the elements of perceived experience, combining them in the search for meanings; thus, order and reality emerge from the “contexture” of imagination (Engell, 1981). Enlarging on *what* the mind does, John Locke added his ideas about *how* the mind works. Through perception by the senses, the mind represents its environment by the production of simple ideas. These ideas, in turn, can be manipulated, merged, or compared with other ideas and in this way transformed into complex ideas. Locke’s assumptions about the receptivity of the mind cleared the path for the emergence of other more expansive themes. At the same time, the impact of his conception of the mind as a passive and blank tablet has been lasting. The belief that the mind cannot initiate its own ideas but can only receive

impressions of the objects of the outer world came to be converted (and to some extent, misrepresented) into theoretical justifications for an empirical and behavioristic psychology.

A large community of the German scholars who had studied the work of the British philosophers opposed the sterility of the Empirical position and, by the beginning of the 19th century, developed a more elaborate and variegated conception of the mind. The German Romanticists agreed that the senses played an important (but elemental) role in the apprehension of outer reality. However, they contradicted the premise that ideas in the mind are stimulated by objects in the world. The mind, in their view, is not a simple mirror of reality, but an intricate and inventive instrument able to fashion its own reality.

The predecessor of and inspiration for many of Kant's ideas, Johan Tetens, did not deny that the mind acts to sort sense impressions into meaningful images and ideas. However, this ability represents only the mind's primary and elemental function. There is a second level of thought and imagination on which the mind is capable of reordering and transposing these images into forms that represent reality in ways that were not apparent in the initial perception. And on an even higher level of imagination, the mind not only rearranges images but creates something so unique that it bears no resemblance to the original event. To illustrate, let us say that the first level is represented by someone observing clouds in the sky. At this stage the idea of "clouds" is registered in one's mind in accord with one's particular interests—as a forewarning of a change in weather or as a classification. On the second level, imagination takes over and the image is transformed into other fancied conformations such as grazing cows or reclining figures. On the third level, the original image is evocative insofar as it impels the person to, for example, write a poem about clouds or paint an abstract water color which, as a product, bears no direct similarity to the first experience.

Kant added still another critical dimension to Tetens's thesis. His elaboration of the construct of a *schema* nullified the notion of the mind as a reactive mirror of outer reality. Now perception and cognition are endowed not only with imaginative and creative potentials, they are also guided by a mind that selects, determines, and defines the meaning and nature of events as they are encountered. For the schema embodies a pre-existing set of rules and orders that are naturally imposed on experience. These categories of understanding assure that, whatever reality may happen to be, it cannot be captured by or represented in the mind in its true form. In contrast, then, with the empiricists who believed that a one-to-one relationship could be achieved between the object in space and the idea in the mind, Kant asserted that, in knowing, it is not the mind that conforms to things, but things conform to the mind. A *noumenal* or real world does exist "out there," but our *phenomenal* world, or the world as we know it, cannot replicate it in its true form. Hence, in Fichte's

terms, the mind is the catalyst in the dialectic between the inner person and outer experiences. Reality is only what the mind determines it to be and everything must be brought back to the reflection of the self if it is to have any effect on the practical aspects of living (Engell, 1981, p. 227).

The consequences of the Enlightenment remain with us now. Of particular interest, the two distinct and antithetical positions on how the mind works set the patterns for two tracks of thought affecting the subsequent development of cognitive theory and practice. One position is *objective*, emphasizing the influence of external events or stimuli that arouse the senses and the processing mechanisms of the mind. The other is *subjective*, giving primacy to the mind as that which selects, determines, and defines external reality. In later discussion, the former will be called the “mediational” view in which cognition is seen as an intervening variable between the input of stimuli and the output of mental or behavioral expression. The subjective position will be termed “phenomenological” insofar as the mind assumes an executive function in the creation of reality. From an historical standpoint, Buss (1980) sees these tracks constituting “psychological revolutions in terms of a transformation of the subject-object relationship” (pp. 41-45). He states that prevailing theories of human behavior in successive eras alternated between two paradigms: (a) Person Constructs Reality (e.g., the phenomenological view); and (b) Reality Constructs the Person (e.g., the mediational view). Revolutions thus involved either a shift from (a) to (b), or from (b) to (a).

Hence, we find that by the late 19th century, American psychology had already divorced itself from its philosophical heritage and was striving to identify itself with the rigorous and more respectable methods of the natural sciences. In this period, the Structuralist School of Titchener and Wundt was an odd mixture of subjective and objective conceptions of mind and behavior. On one hand, consciousness was understood as a composite of innate and stable sensory components; on the other, this enduring structure of consciousness could be inflected by changes in mental associations evoked by outer stimuli. Basically, the Structuralists adhered to the Lockean principle that knowledge can be derived only from direct experience.

As thesis invites antithesis, the Gestaltists that followed (Wertheimer, Koffka, Köhler) took a contrary position. The focus of their inquiry shifted from outer stimuli toward the inner forces that bear on how the person shapes and defines the world—e.g., motivation, belief, memory, and organization of thought. Their explorations into the nature of consciousness and introspection did not prove fruitful and, with the ascendance of Watson and the behaviorists, Gestaltism faded as a substantial paradigm (Burton and Burton, 1978, 23-4). Watson and his cohorts retreated to an elemental Lockean empiricism by rejecting the possibility of subjective experience. They argued that concern with the mind would interfere with the proper scientific approach to the study of human behavior and replaced the objec-

tive mode with a controlled and experimental model of observation of behavior.

Neither space nor the purposes of this essay permits me to give rightful attention to the two major psychological doctrines of the 20th century—Behaviorism and its antithetical partner, Freudian psychoanalysis. Where the former attempted to define subjectivity out of existence, the latter not only revived this principle but also radicalized the Western world's outlook on and understanding of the irrational and subjective side of mankind. Axioms about unconscious forces and the shrouded structure and motives of the psyche, emphasis on dream-content and the unconstrained associations of the mind refashioned common beliefs about human nature once these ideas took hold in society. Yet, psychoanalysis is not without paradox as far as the relationship between objectivity and subjectivity is concerned. First, there is the paradox of roles. The relationship of analyst and analysand can be seen as an objective mind striving to dissect a profoundly subjective experience: the role of the physician conforms to the precepts of scientific objectivity and detachment; the role of the patient requires virtual abandonment of all rational constraints on thinking. Second, there is the paradox of means and ends. Psychoanalytic treatment is absorbed with the arcane, subjective productions of the mind; its ambition, however, is to restore a measure of objectivity in the form of a rational and insightful approach to living.

The dynasties of classical behaviorism and psychoanalysis were no less vulnerable to revolution in that they also fostered counteractive positions in the human relations field. Among other arguments, the former was charged with being too rigid and far removed from the existential realities of actual human experience. Psychoanalysis, on the other hand, was criticized for its rather florid and unsubstantiated speculations about the workings of the mind.

In the period following the second World War, Bruner and Krech (1949), and others were developing theories of perception and cognition, proposing that these ideas would remedy the absurdity of maintaining three separate theories of behavior in the field of psychology—need, learning, and motivation. A significant breakthrough bearing on the subsequent development of therapeutic approaches came with George Kelly's Personal Construct Theory (1955). Based on an assumption of the intentional, inquiring nature of the individual, Kelly's theory added to the phenomenological perspective by explaining how the person creates personal constructs (i.e., recurrent themes developed over experience) that allows one to make useful generalizations about encounters with what would otherwise be a baffling world. Such constructs are goal oriented insofar as they involve expectations that guide behavior in particular situations. In this theory, we see a return to the Kantian model in which "construct" and "schema" play analogous roles.

Subsequent years were marked by an increasing output of ideas about the functions of the mind—some partial, others incremental, but together enriching and contributing to a body of knowledge about how humans devise their realities and thereby justify their actions. Let me offer a few examples so as to round out this developmental account. Common sense knowledge about human language and communication came to be transformed into theoretical forms. Within the discipline of linguistics, theories of semantics called attention to the distinctly personal meanings that infuse the words people use. And taking this idea a step further, communication theorists observed that language also has a pragmatic function insofar as it is employed to express the speaker's subjective intent or purpose in his or her relationship with others—e.g., to persuade, seek affection, control. Complementing these ideas, the amplification of George Mead's earlier theory of symbolic interactionism pointed to the significance of humankind's symbol-creating characteristics in understanding of the complexities of interpersonal behavior. Rotter's (1954) expectation theory added a predictive equation to the comprehension of human actions: The ability to understand how an individual anticipates things will turn out, or what he or she thinks lies ahead provides some assumptions about how one will behave in these future events. Cognitive theory itself took a grand step forward when Neisser, in his book *Cognitive Psychology* (1967), formulated his ideas about how we create our world through experience. In turn, Rychlak (1977) contributed the telic dimension to the cognitive processes in his explication of the intentionality of thought and action. In this view, behavior is not seen as the consequence of antecedent forces; rather, the meanings that one ascribes to a particular event create a purpose which justify one's actions. Simply put, people act in the way they do, not *because of* some prior condition, but *for the sake of* fulfilling some intention or aim.

I must conclude this brief chronicle of events leading to modern cognitivism with a beguiling puzzle. The recent years have witnessed the unfolding of what is truly an illuminating conception of the mind—one so captivating that, judging by the effusion of books and articles, it faces the risk of becoming another fad. I am speaking of what is variously termed the bicameral mind, the bimodal brain, or simply, left brain and right brain forms of thought. There is now solid evidence that each of the hemispheres of the brain serves a different function in human thinking and consciousness. Left hemispheric thought is analytical, object-based, and contained within the boundaries of language and rationality. As a complement, right hemispheric thought is diffuse, intuitive, symbolic, able to capture wholes and relations, and is not bound by logic and rationality. Does this new conception of mind bring us full circle and cast the ideas of the Enlightenment philosophers in a new light? Unwittingly, were the disputes of the Empiricists and Romanticists really primal attempts to say something about the faculties of



either or both hemispheres of the brain? Locke's notion of the reception of simple ideas is not unlike the functions of the left brain. Kant and his colleagues, however, enlarged on these ideas by ascribing intuitive, imaginative, and visionary attributes to human thought. Is this association of present and past an unwarranted analogy, or did Enlightenment scholars intuitively sense what we now know with greater certainty?

### **The Role of Cognition in Psychotherapy and Behavior Change**

However the question is answered, the preceding survey points to the fact that the development of cognitive theory should be seen as evolutionary rather than revolutionary. In this regard, it is still in the process of emergence and definition. The formal role of cognitive theory in relation to psychotherapy, counseling, or other forms of planned change is more of an *orientation* to the resolution of human problems than a distinct technology, ideology, or system of methods.

As an orientation to change, cognitivism plays a key but implicit role in many traditional forms of treatment but, at the same time, represents some critical, explicit differences. The implicit role is evident when certain generic characteristics of planned change are considered. First, most systems of behavior change are characterized by their explanatory frameworks, metaphors, or theory structures that ultimately offer clients a new way of understanding their problems, their source, their role in solving the problem, and the solutions they might expect. In a sense, this can be described as giving the client a new cognitive map, a new framework of comprehension, and so, a new orientation to reality. Second, the interactive or dialogical nature of the treatment relationship (enhanced by the persuasive influence of the therapist) induces the client to re-examine and redefine the ingrained and well-worn assumptions about self and world. The process of rethinking one's recurrent emotions, meanings, imputed causes, ethical issues, and so on amounts to an active process of cognitive reorientation. And the actual experience of rehearsing, attempting, and observing alternative solutions to the problem results in marked changes in one's cognition—assuming that thinking, feeling, and acting comprise an irreducible whole.

The differences between cognitive and other traditional approaches to change are rather explicit insofar as they represent a deviation from the well-entrenched assumptions about the human state that represent each of the major systems of therapy. Where *psychodynamic* models of therapy are based on axioms of inner psychic structures, unconscious mechanisms, drives, and motives, cognitive approaches generally refrain from this sort of inferential and speculative thinking. Rather, it is assumed that more conscious factors guide behavior and that these conditions are accessible to the reflections and observations of both helper and client and so, can be changed.

These conditions include the manner in which the client sorts out his/her world of experience, organizes and ascribes meaning to his/her impressions, and above all, concerns the development of basic premises, constructions, and intentions that pattern one's approach to living. Where *trait and personal-ity* theories are rooted in the assumption that distinct patterns of behavior can be characterized and used as predictors for how the person will act across life situations, cognitive approaches question the notion of a more or less fixed psychological portrait of the person as well as the idea of the general consistency of one's behavior. In contrast, attention is directed to special person-situation configurations and the meanings they hold for the individual. Needless to say, cognitive approaches refute the contentions of applied behavioral analysis systems that ignore the role of cognition in behavior change.

Depending on how particular cognitive approaches are applied, two additional distinguishing features may be observed. At least in its phenomenological form, cognitive practice attempts to mitigate the imbalance of the professional-client relationship by striving to create a more collegial climate, a partnership, within which the participants are engaged in mutual search for meanings and solutions. Questions of the definition of reality, intention, and motive are pursued from the standpoint of the client's constructions; thus, the imposition of the helper's diagnosis, precepts, and prescriptions is minimized. Second, the types of cognitive approaches that rest on a dialectic point of view—one that is comfortable with the contradictions of living—consider the optimal goals of therapy in terms that take issue with traditional therapeutic objectives. A return to, or the attainment of, a measure of stability, balance, or a steady state is typically the criterion for effective therapy among the traditional schools. But as Riegel (1976) argues, consistency is not the hallmark of the secure and competent person; rather, it is one's ability to contend with a changing world. The stable periods of life are often illusory and usually short-lived. Ordinarily, developmental, situational, cultural, relational, economic, and other changes call upon each of us to anticipate and respond with inventive and resilient problem-solving skills.

As already noted, the various approaches to treatment that are identified with a cognitive orientation itself do not fit into one unified model. Certainly there is a common agreement about the central role of cognition in adaptation as well as the assumption that changes in adaptive behaviors depend on the working out of problems in discrimination, misconception, thought organization, premises about the world, and other conflicts of perception and cognition. But beyond this crucial area of agreement there are some significant differences—not merely in style or method but in the underlying theories of cognition themselves.

As in most organized systems of thought and practice, cognitive approaches reflect stylistic variations on central themes and individual differ-

ences in manner. For example, Ellis' Rational Emotive Therapy (1974) focuses on the absolute beliefs people cling to and the things they tell themselves that get in the way of a more rewarding life. Raimy (1975), in turn, defines the basic task as the achievement of greater accuracy where reality is concerned by a change in the client's misconceptions.

The differences in theoretical positions are far more profound since they represent the objectivity-subjectivity debate already described: Are individuals essentially reactive to their environment or do they create their environment? The first position was termed "mediational." Here cognition is defined as an informational processing system producing certain outputs in response to inputs coming from the outside. The second was termed "phenomenological." Here cognition is defined as proactive, creative, and selective with the mind itself determining what is outside and what that outside means. The mediational view also sees the mind as a repository of past experiences which have become the rules that govern the individual's response to this immediate life situation. From the phenomenological standpoint, cognition is understood in *dialectic* terms—meaning that we are able to think in accord with any number of possibilities and are not bound by the nature of our previous experiences (Rychlak, 1977).

The idea of dialectic thought deserves further elaboration. Let us say that, on the basis of past experience, I have come to believe that it is safer to maintain a distance in my relationships with others. A mediational position sees my past experience as the determining factor of my belief and might require me to review these experiences and re-examine the misconceptions they have caused. But in dialectic terms, I would need to become aware of the fact that my premise, "It is safer to be distant," is merely a reversal of the premise, "It is frightening to be close." This awareness eliminates the need to turn backward in time to review the justifications I have invented and, instead, directs me toward the actual nature of my immediate relationships and the meanings I ascribe to them. More important, this kind of cognitive awareness offers me more than one option with regard to how I deal with my relationships: I am free to continue to choose the path of greater security while remaining aware of the cost of the loss of closeness; or I am free to choose the riskier path, meanwhile remaining aware of the cost of the loss of security. In either case, I am no longer a slave to one idea.

These divergent viewpoints represent something more than a disagreement among scholars. In more practical terms, each of the two philosophical and theoretical positions justifies and supports a discrete approach to practice with its own set of prescriptions, role definitions, and goals. I believe that this contrast can be illustrated by comparing briefly the elements of two forms of the cognitive-mediational approach (cognitive behavior therapy and cognitive psychiatry) with a recent form of the cognitive-phenomenological approach. In this comparison, I will show the implications of each

model for some of the critical dimensions of the therapeutic experience: how the client is perceived and understood; the therapist's role; the focus and content; and the preferred outcomes of therapy.

### *Cognitive-Behavior Therapy*

Although it is grounded in experimental psychology, cognitive-behaviorism represents a large step away from applied analysis and its rejection of the significance of mental processes. This approach is supported by Bandura's Social Learning Theory (1977) which, from the mediational standpoint, underscores the regulatory functions of cognition. Here the person is seen as both an agent and an object of environmental influence; simply, a reciprocal set of influences are in process between person and environment. Within this reciprocity, cognition is identified as the causal factor in determining adaptive or maladaptive and affective patterns (Wilson, 1978). As outer stimuli have the power to evoke perception and thought, it is the accuracy and effectiveness of cognition that determines whether subsequent behaviors are properly adaptable.

Therapeutic procedures are similar to those used in the human learning laboratory. The therapist's role is that of diagnostician-educator; he or she evaluates cognitive patterns and arranges learning experiences that will change these patterns and thus, their affective and behavioral consequences. Complementing the therapist's expert role, the client assumes the role of the subject who is expected to follow the imposed protocols. The content of the experience is, in the main, the symptoms of the client's maladaptive patterns of thought and behavior. Accordingly, the preferred outcome is the attainment of better adaptive patterns and the elimination of the symptom.

### *Cognitive Psychiatry*

This approach is best represented by the work of Beck (1976) and, like cognitive-behaviorism, stands for a considerable departure from traditional models in his own field of psychiatry. In contrast with the unconscious determinants of psychoanalysis and the effects of the stimulus in conditioning models, cognitive psychiatry defines a linear sequence in which a stimulus evokes certain conscious meanings which, in turn, generate certain emotions. These conscious meanings constitute what Beck calls "personal rules" which, as the mediating influence between stimulus and emotion, are the focus of change.

The conditions of therapy are roughly similar to those of the preceding mediational model. The therapist is again the diagnostician and the one who designates treatment procedures. In response, the person with a problem becomes a patient and is subject to these procedures. However, diagnosis is

not limited to such labels as "maladaptive." Traditional psychiatric categories are employed to classify particular aberrations; they are defined, however, in terms of cognitive disorders. For example, Beck explains depression as the devaluation of domain; paranoid state as an unjustified intrusion into domain; anxiety neurosis as danger to domain; and compulsion as the self-command to perform specific acts to avoid danger (p. 84). The techniques used to modify these cognitive distortions include reality-testing, authenticating conclusions, and changing ground rules. Where the focus of treatment is the patient's ineffective personal rules, the intended outcome is the resolution or cure of the particular psychiatric disorder.

### *Cognitive-Phenomenological Approach*

This approach is represented by Goldstein's (1981) social learning model which is based on existential-phenomenological constructs. Here, cognition plays the critical and proactive role in the client's orientation to this world, expressing the intent of the person to create a semblance of meaning and order as he or she struggles toward valued goals. As a means of adaptation, cognitive processes are simultaneously involved in the client's striving to conserve a measure of personal integrity and identity while he/she contends with the pressing problems of living. In this frame of reference, the client may be understood on more than one level. Certainly the client may be regarded as one whose conflicted or distorted premises and beliefs deprive him or herself of a more full-blooded existence. But at the same time, it can be appreciated that these conflicts or distortions are not indicative of some sickness or defect; rather, they can be discerned as manifestations of the client's valiant, but worn-out attempts to cope with the personal chaos of living. Moreover, the client does not exist within a social vacuum; thus, it is necessary to take account of others in the client's system who, in some way, may be participating in the problem.

The change experience more closely fits an educational rather than a therapeutic model. Optimally, it is a cooperative venture in which both helper and client contribute their respective domains of expertise. The former is an expert in the field of human relations, learning, and change; the client is the expert about the things that may be the concerns of change—i.e., one's culture, values, needs, and goals. The focus of the experience is on the immediacies and exigencies of living and include the climate and transactions within the helping relationship itself. If they can be called techniques, the methods used conform to a problem-solving approach and the Socratic dialogue. The meanings of the client's experiences are explored in relation to the way the client selectively attends to the world, how he/she conceptualizes the events of living, the interpretations he/she ascribes to them, where he/she places him or herself within them, and above all, the intentions and purposes

of these conditions. The goal is neither cure nor symptom reduction but the development of principles of living and problem-solving skills that will contribute to a more autonomous existence.

### Some Parting Thoughts

Considerable ground—historical, philosophical, and theoretical—has been covered in this essay so as to offer a clearer perspective on the emergence of modern cognitive approaches to treatment. It is hoped that the attention given to these developmental factors proves that cognitivism is neither a new and fashionable fad nor one more therapeutic gimmick. Both the mediational and phenomenological models, as products of three centuries of thought about the human mind and its processes, offer substantive, practical, and coherent schemes for dealing with human problems. Moreover, these approaches have some distinct advantages and merits. They are applicable to the broad range of human dilemmas—personal, interpersonal, and environmental—as well as the range of human systems including the dyadic, family, and group. In the main, most clients can respond positively to a cognitive orientation since it is concerned with the common-sense, familiar, day-to-day predicaments of ordinary living. In this regard, it is not restricted to the “ideal” client who is voluntary, verbal, and as is the case in other therapeutic systems, willing to be socialized into the lexicon, procedures, and rules of the system. And without exhausting the list of possible benefits of this orientation, the experience of working with a cognitive therapist provides the client with something more than a relief from symptoms. Of greater consequence, it offers the client creative new ways of thinking and problem-solving that can be transferred to the many other aspects of one’s existence.

As to the continued development of cognitive theory and method, it can be expected that the respective schools will continue to refine their theories and expand the applications of their particular approaches—especially as cognitivism itself gains greater acceptance in the general therapeutic community. However, despite the impressive accretion of knowledge and research in recent years, the question remains as to whether the justification and support for each orientation more accurately represent certain philosophical preferences rather than conclusive theory or research. In one respect, the objectivity vs. subjectivity debate and its attendant questions about how humans “know” and understand remains unresolved despite centuries of deliberation and argumentation (or perhaps *because* of this history). Thus, in our Western way of thinking we assume that it is necessary and possible to understand human consciousness and so fall heir to one belief system or another.

But there is another pressing reason that allows for the choice of any of a number of theories of cognition. That is the fact that we do not as yet have access to a comprehensive and compelling theory of mind and brain—one

that would, with some finality, settle the objective-subjective, reactive-proactive debates. Although we have gained new insights into memory functions, the locus of basic emotions, and left-right hemispheric relations, the nature of mind remains a mystery. As Taylor (1978) observes, existing theories of mind and brain have failed. The dualistic view that explains mind and brain as distinct entities and the monistic position that states that mind is just another term for brain do not succeed as useful explanations. Analogic theories are not more helpful: the computer or information-processing model is attractive but facile since it cannot deal with such subjective phenomena as imagination, complex emotions, language acquisition and other creative powers. Even the conventional terms used on these pages—perception, recall, thought, and, of course, cognition itself—are very high level abstractions for processes we cannot directly identify. For that matter, it is doubtful that we can describe our very own cognitive processes for, as Nisbett and Wilson (1977) report, people have little or no direct introspective awareness and tend to resort to inventive causal explanations when asked about how they arrived at certain ideas or conclusions. There is a certain excitement in these questions about the mind since they seem to anticipate some new breakthroughs that will be truly revolutionary. At the same time, these uncertainties do not diminish the value and utility of the knowledge already gained. The state of the art is much like the state of the average person's mind at any given time: Although it is not possible to know all that can or needs to be known, it is possible to use what one knows in productive and progressive ways.

### References

- Bandura, A. *Social learning theory*. Englewood Cliffs, NJ: Prentice Hall, 1977.
- Beck, A. *Cognitive therapy and the emotional disorders*. New York: International Universities Press, 1976.
- Bruner, J. and Krech, D. (Eds.). *Perception and personality*. Durham, NC: Duke University Press, 1949.
- Burton, E. and Burton, A. The whole idea: Gestalt psychology. In A. Burton and J. Radford (Eds.). *Thinking in perspective*. London: Methuen, 1978.
- Buss, A. *A dialectical psychology*. New York: Irvington, 1980.
- Dember, W. Motivation and the cognitive revolution. *American Psychologist*, 1974, 29, 161-68.
- Ellis, A. *Humanistic psychotherapy: The rational emotive approach*. New York: Julian Press, 1974.
- Engell, J. *The creative imagination*. Cambridge: Harvard University Press, 1981.
- Fischer, J. New and emerging methods of direct practice: The revolution in social work. In N. Gilbert and H. Specht (Eds.). *Handbook of the social services*. Englewood Cliffs, NJ: Prentice-Hall, 1981.
- Goldstein, H. *Social learning and change: A cognitive approach to human services*. Columbia: University of South Carolina Press, 1981.
- Grene, M. *The knower and the known*. New York: Basic Books, 1966.
- Kelly, G. *The psychology of personal constructs*. New York: Norton, 1955.
- Kuhn, T. *The structure of scientific revolutions*. Chicago: University of Chicago Press, 1970.

- Neisser, U. *Cognitive psychology*. New York: Appleton-Century-Crofts, 1967.
- Nisbett, R. and Wilson, T. Telling more than we can know: Verbal reports on mental processes. *Psychological Review*, 1977, 84, 231-59.
- Polanyi, M. *The tacit dimension*. New York: Doubleday, 1961.
- Raimy, V. *Misunderstanding of self: Cognitive psychotherapy and the misconception hypothesis*. San Francisco: Jossey-Bass, 1975.
- Riegel, K. The dialectics of human development. *American Psychologist*, 1976, 31, 689-99.
- Rotter, J. *Social learning and clinical psychology*. Englewood Cliffs, NJ: Prentice-Hall, 1954.
- Rychlak, J. *The psychology of rigorous humanism*. New York: Wiley, 1977.
- Taylor, G. *The natural history of the mind*. New York: Dutton, 1979.
- Wilson, G. Cognitive behavior therapy. In J. P. Foreyt and D. P. Rathjen (Eds.), *Cognitive behavior therapy: Research and application*. New York: Plenum, 1978.