Psychological chauvinism and nuclear war

Journal of Counseling and Development, 67

Walsh, RN

1989

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Peer reviewed
Psychological Chauvinism and Nuclear Holocaust: A Response to Albert Ellis and Defense of Non-Rational Emotive Therapies

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A 1986 article by Albert Ellis on psychology and nuclear holocaust did not address certain key issues and made inaccurate criticisms of non-rational emotive therapies. This article attempts to correct these errors and to emphasize the importance of open-minded cooperation among psychologists of differing theoretical persuasions.

For several years I have taught seminars on rational-emotive therapy (RET) and have been deeply concerned about nuclear holocaust (Walsh, 1984). I therefore began reading Dr. Ellis's (1986) article, "Fanaticism that may lead to a nuclear holocaust," with considerable initial interest. Unfortunately, interest rapidly turned to alarm because the article seemed severely, even dangerously, flawed.

The article is composed of three parts. The first part outlines the dangers of nuclear war posed by fanatics. The second part suggests ways in which RET might change the beliefs of such people should they enter therapy, and the third part attacks diverse non-RET psychotherapies.

The article's flaws are fourfold: (1) It does not deal with the central, practical, issues facing therapists working to prevent nuclear war; (2) it makes grossly inaccurate criticisms of diverse non-RET psychotherapies; (3) the author makes logically and philosophically impossible knowledge claims; and (4) the author falls into the very trap of fanaticism that he warns against.

PSYCHOTHERAPY OF ADVERSARIES AND FANATICIS

The first of these four flaws is simple to point out but not simple to redress. It is that the article focuses almost entirely on what RET therapists would do if they got fanatics into their consulting rooms but ignores the much more difficult question of how to get fanatics, or even people of differing ideologies, into the consulting room in the first place.

This is not to say that it is impossible. For example, Carl Rogers (1986) ran successful groups with high-level international politicians of widely varying ideologies, with Catholics and Protestants in Northern Ireland, and with Blacks and whites in South Africa. So we as psychotherapists could be helpful in psychotherapeutic and educational situations. However, the real challenge—perhaps one of the most crucial of our times—is how to create these situations rather than simply sitting in our consulting rooms waiting for adversaries or fanatics to come to us.

DEFENSE OF NON-RATIONAL EMOTIVE THERAPIES

The remaining problems in Dr. Ellis's article consist of inaccurate and unsubstantiated critiques of a variety of non-RET therapies. For example, Dr. Ellis condemns, among others, Gestalt therapy, neuro-linguistic programming, and orthodox psychoanalysis as dogmatic and semimystical. Dogmatic? Perhaps, but more than other therapies? Semimystical? This is a strange claim since psychoanalytic and Gestalt therapies have traditionally been strongly antimagical.

However, Dr. Ellis's strongest and most misinformed attack is on transpersonal psychology, which he describes as authoritarian, antimeprical, antiscientific, unrealistic, dogmatic, and antisocial. This certainly sounds like a branch of psychology that should be exterminated if these claims are true. Fortunately they are not, and Dr. Ellis's remarkable misinformation and faulty logic were first noted over 15 years ago (Bugental, 1972) and are analyzed below.

However, it might be helpful to first very briefly define transpersonal psychology. Several researchers (e.g., Kohlberg, 1981; Maslow, 1971; Wilber et al., 1986) have suggested that there exist potential cognitive, moral, and motivational stages of development beyond those reached by most adults, a point also made by Asian psychologies (Walsh & Vaughan, 1980). Transpersonal psychology is particularly interested in these higher stages (Wilber, 1980; Wilber et al. 1986).

Now let us examine the erroneous claims which Dr. Ellis makes about transpersonal psychology and which he regards as "its basic premises and ideologies." The first of these claims is that:

absolute reality exists and when we find the true doctrine that reveals it, we reach absolute, invariant, unchangeable, ineffable truth.

Actually, transpersonal psychologists appear to hold diverse philosophies and the above statement is probably about as correct as saying that rational emotive therapy has as "its basic premise and ideology" atheistic materialism. This diversity of beliefs and philosophies among transpersonalists also negates Dr. Ellis's remaining claims, which are described below. It therefore appears that all of Dr. Ellis's claims are inaccurate sweeping generalizations.

However, they are also illogical and philosophically naive. Note that in order for Dr. Ellis to successfully deny the claim...
about absolute reality, which he gratuitously attributes to transpersonalists, he would have to know the ultimate nature of reality. In other words, Dr. Ellis's attempted negation of the ontology that he mistakenly attributes to all transpersonalists depends on his knowing absolute reality. This is the classic trap of making absolute statements against absolutism.

Dr. Ellis's second claim is that transpersonal psychology holds that "afterlife experiences, reincarnation, and immortality of our souls unquestionably exist and have been empirically proven." Where Dr. Ellis got this idea I do not know. I defy him to cite ontology that he mistakenly attributes to all transpersonalists anatta, pahas as a single one of his claims. Actually, some transpersonalists would hold to the philosophical perspective known in Asian philosophies as anatutto, which specifically denies the existence of a soul.

Dr. Ellis's third claim is that transpersonalists believe that:

all living and inanimate things merge into one fundamental unity. By understanding and blending with this undivided oneness, we can overcome our human limitations, get in direct touch with God, eradicate all disturbances and handicaps, and achieve boundless bliss.

It is not exactly clear what Dr. Ellis means by this statement, particularly "understanding and blending with this undivided oneness." Perhaps he is referring to unitive states of consciousness such as Maslow's peak experiences, in which the individual's sense of identity expands beyond "the skin encapsulated ego" to increasingly encompass the world and all people. These states have been studied in contemplative, deep hypnosis, advanced therapy, experimental psychedelic sessions, Asian psychologies, and in spontaneous occurrences (Maslow, 1971; Shapiro & Walsh, 1984; Wilber et al., 1986). Interestingly enough, these transpersonal states occur most often in the psychologically healthy and tend to eliciting positive aftereffects on personality (Walsh & Vaughan, 1980), but who would claim that they "eradicate all disturbances and handicaps"?

As to Dr. Ellis's dismay that some transpersonalists suggest that "all living and inanimate things merge into one fundamental reality," he will be even more dismayed to learn that this is the claim of contemporary physics. Thus David Bohm (1973), "one of the world's foremost theoretical physicists" (Webber, 1986, p. 23), refers to this indivisible whole as the holomovement and notes that "all forms of the holomovement are inseparable, thus in its totality, the holomovement is not limited in any specifiable way at all." (p. 139) As to getting "in direct touch with God," not all transpersonalists believe in Her.

Dr. Ellis's fourth claim is that transpersonalists believe that:

by following transcendental teaching and by ignoring much of our normal intellect and senses and abandoming the scientific method and findings of science we can achieve perfect knowledge, peace, perfect unity with the universe, perfect joy, and perfect physical and mental well-being.

Again, not a single article in any transpersonal journal makes any of these claims, and experimental research articles appear in them regularly. For example, one of the major transpersonal therapeutic techniques—meditation—has been the subject of several hundred empirical studies, and a recent anthology received the 1985 Outstanding Academic Book of the Year Award (Shapiro & Walsh, 1984).

Transpersonal psychologists, therefore, do appreciate and use science. However, they also appreciate other modes and areas of knowledge (e.g., intuition and spirituality). Dr. Ellis's concern about transpersonal psychology's stance vis à vis science therefore becomes understandable, but no less remarkable, given his own position. Time and again, both in the article under discussion and elsewhere, Dr. Ellis argues, apparently unknowingly, for logical positivism. This is the philosophy that science is the best or only approach to knowledge. However, logical positivism is not only logically contradictory (please show us your scientific proof that science is the best means to knowledge), but also reductionistic (it excludes value, purpose, and meaning), and widely discredited among philosophers ("logical positivism is dead, or as dead as a philosophical movement ever becomes." [Passamore, 1967, p. 56]).

Dr. Ellis then goes on to claim that many transpersonal therapists follow extreme cults (e.g., Bhagwan Shree Rajneesh and the Rosicrucians) and that "some of the antiscientific causes espoused by transpersonal leaders and used widely in their therapeutic practices" include things such as sorcery, exorcism, and magic, to list but a few. Personally, I have never heard of any transpersonal psychologists who espouse any of these things, and the three people he cites as examples—Armstrong, Johnson, and Benedetti—are apparently "shamans" and "rebirthers," rather than transpersonal psychologists.

Of course, anyone can call himself or herself transpersonal and I know some nutty people in the field, but I also know some nutty people in the field of rational-emotive therapy. I personally wish some transpersonal psychologists (and psychoanalysts and humanistic psychologists) were more intellectually and scientifically rigorous, but I also wish some RET practitioners, including Dr. Ellis, were too.

Jerome Frank (1982) noted that "people become what they believe their enemies to be." Dr. Ellis apparently believes that many non-RET psychotherapists are fanatical, irrational, and unscientific, and therefore his enemies. Unfortunately, in attacking them he has become these things himself. It would be a tragedy if his misunderstandings were accepted by other psychologists.

I agree with Dr. Ellis about the dangers of fanaticism and false beliefs and the need to correct them. However, to quote two people who Dr. Ellis would probably regard as dangerously mystical and antiscientific: "to straighten others you must first do a more difficult thing—straighten yourself." (the Buddha) (Byrom, 1976, p. 59) and must also "first remove the beam from your own eye." To be effective global therapists we must be aware of this "nose-beam phenomenon" and work to recognize our own assumptions and biases (Walsh, 1984).

I agree that psychologists have a crucial role to play in ensuring human survival but not if we continue to attack one another out of ignorance and bias and to claim that "my school" is the only true way. Rather, let us do at the psychological level what we are attempting at the international; namely, to set aside traditional boundaries, biases, conflicts, and special interests and welcome for objective appraisal the potential contributions of all schools. Anything less than this may be tragic for our psychological community and fatal for our planet.

REFERENCES


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