

# A Response to Humanistic Psychology

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Humanistic psychology developed in large part as a reaction to psychoanalysis as practiced in the United States during the early-to-mid twentieth century, which was critiqued by humanistic psychologists as being reductive, and dehumanizing. The holding environment in which the client can be “authentic” without judgment forms the basis of the humanistic stance. Humanistic psychology’s roots are found in existential psychotherapy, however, it has deviated from those roots and developed into something uniquely American and amenable to capitalist exploitation. Writers within the humanistic tradition regularly cite psychoanalysis’ shortcomings as the impetus for their work but do not demonstrate an adequate understanding of psychoanalytic practice. With this misunderstanding a loss is produced, a loss of the transmission of analytic practice as begun by Freud. We hope to move beyond the misunderstandings and difficulties encountered by humanistic psychologists through critique, first using Buddhist psychology and then by a return to the fundamentals of psychoanalysis. We conclude that our critiques are especially relevant as humanistic psychologists seek to use their theories to position themselves as leaders in struggles for social justice.

**KEYWORDS**

humanistic psychology, psychoanalysis, existential psychology

## 1 | INTRODUCTION: A BRIEF OVERVIEW OF HUMANISTIC PSYCHOLOGY

Humanistic psychology arose out of the turmoil of the post-war era and took root in the 1960s along with the human potential movement in the United States (Grogan, 2013). Proponents of humanistic psychology tend to characterize Freudian theory as dehumanizing and tend to characterize existential psychotherapy—one of humanistic psychology's parent traditions—as unduly focused on the negative aspects of the human experience (Hoffman, et al., 2019). Turning instead towards concepts like “self-actualization” (Grogan, 2013, p. 64) and “peak experiences” (p. 88), these proponents and their self-aggrandizing leaders—Abraham Maslow, for example, considered himself to be the bearer of a “Great Message” which he was chosen to bestow on the world (as cited in Grogan, 2013, p. 85)—seek nothing less than the development of psychological methods that could lead to “human perfection” (Grogan, 2013, p. 96), both of the self and of society (Maslow, 1971). Maslow's career trajectory serves as an example par excellence of humanistic psychology: he ultimately left academic and clinical pursuits to ingratiate himself with business leaders, helping them apply psychological theories and techniques in developing means of extracting even more surplus labor value from their workers (Hoffman, 1988). One of his last achievements before his death was to develop a theory of *eupsychian management*, where working conditions should be “good not only for personal fulfillment, but also for the health and prosperity of the organization, as well as for the quantity and quality of the products or services turned out by the organization” (Maslow, 1971, p. 237); in other words, this was a theory born out of capitalist ideology that engaged psychology in an attempt to make workers happy and compliant so that capital can exploit them more effectively.

In the clinic, humanistic psychotherapists aim at increasing their clients' ability to reach their full, productive human potential and argue that neither behaviorism nor psychoanalysis can fully explore and appreciate the human psyche's “radiant and enigmatic fullness” (Moss, 2015, p. 10). The concept of the *self* takes various forms within the humanistic tradition. Early on it was described by influential psychologist and once president of the American Psychological Association Carl Rogers, as a tendency towards actualization that is driven towards personal development and fulfillment. The self is contrasted in humanistic theory with the functioning of the ego in psychoanalysis and the maintenance of functional defense mechanisms that, since Anna Freud, have been said to be the focus of psychoanalytic interventions (Moss, 2015). Whereas the ego must be propped up and aided in its struggle against the drives, the self is constantly and autonomously propelling itself towards a fully authentic way of existing.

Rogers (1957) gave a basic criterion of what is necessary in *all* therapeutic relationships to achieve constructive personality change such as empathy, unconditional positive regard, and the genuineness of the therapist. Rogers felt that the therapist must also represent an idealized state of wholeness and demonstrate congruence between their concept of self and what they experience in day-to-day living. Therefore, the ideal vision of human potentiality found in humanistic psychology is also present in the clinic, as both the client and therapist work together to reach a state of congruence, the conditions for growth. For the therapist, this is achieved elsewhere—Rogers (1957) did not give an indication of how the therapist forms to fulfill their function—and for the client this is achieved through therapeutic contact with the therapist.

Maslow's rendering of self-actualization has come to take on a much broader meaning in contemporary humanistic theory, such as, “the self-actualized person has finally discovered and owned his or her own real self” (Rowan & Glouberman, 2018, p. 51). The real self is defined in a recent chapter by Rowan and Glouberman (2018) as what one truly is, behind the false self. The authors argue for the idea of the real self by indicating that it is absolutely central to the existence of humanistic therapy because humanistic therapy requires that there be a real self to have choice and responsibility. The humanistic clinic works to make what is false appear as such, so that it can be recognized by the individual and not identified with in the way of the real self. The authors state that while this view is challenged by contemporary thinking that argues for the inexistence of the self in favor of the determining

role of social constructions and biological reductions, the real self is necessary to have a complete view of the human being as that which has agency and is responsible for itself.

While it is true that both realist and cultural materialist philosophy has displaced the notion of the self, there is a third option. Where the humanist argues for a truly existing self that is the center of human experience and the cultural materialist argues for a non-existent self, constantly swayed by social and cultural forces, psychoanalysis since Lacan argues that while there is no self and that the ego is an illusion created by one's encounter with the image, there is a subject. Lacan (1981) defined the subject as a "that which represents a subject for another signifier" (p. 207). The subject is a formation of language and yet one can speak of an individual subject because of the way that the individual, what Lacan later calls the *parletre* (speaking being), is the subject of an unconscious split. Sbriglia and Žižek (2020) write, "the subject thought by the unconscious, the subject (un)born of the fact not only, as Freud discovered, the 'the unconscious thinks,' but in a further Lacanian twist, that 'it is only the unconscious that thinks'" (p. 8, emphasis in original). One can therefore reject both the notion of the bourgeoisie conscious ego as being unconditionally subsumed in social forces and speak of an autonomous agency, the drive. For humanistic psychology, this third option, can operate as a helpful formula which can be used to confront the ways that the individual is in a determinate relation with the Other (Malone, 1995) and maintain the humanistic emphasis on responsibility and individuality.

The goal of this paper is to critique humanistic psychology both from within and without, beginning with the cautionary words of America's first existential psychotherapist and then discussing the standpoint of Buddhist psychology and Lacanian psychoanalysis. These two systems were chosen because of their disparate interventions in psychologies that aim to achieve wholeness or an actualized self. It is not our intention to equate these two traditions—Buddhism and psychoanalysis—with one another, and we are wary of any facile comparisons between them, however we feel that they each have something useful to offer in a critique of humanistic psychology. We begin the paper with an overview of the development of existential psychotherapy in the United States and the transition to humanistic psychology. Following this, we turn to an overview of Buddhist psychological critiques of the aims of self-actualization and wholeness, and then a description of ego psychology and Lacanian psychoanalysis that clarifies the misunderstanding that takes place when psychoanalysis is criticized by humanistic psychologists and others in the United States. In our concluding remarks we tie these strands together and discuss how our critiques to be particularly relevant during this time when proponents of humanistic psychology are jockeying to position themselves as leaders in politics and in current struggles around social justice in the United States.

## 2 | EXISTENTIAL PSYCHOTHERAPY IN THE UNITED STATES

Rollo May (1909-1994) is widely regarded as the father of the existential movement in American psychotherapy (Yalom, 1980). A watershed event in the development of this movement was the publication of the volume *Existence*, which was co-edited by May. In his introductory chapter, May (1958b) gave voice to the fact that "many psychiatrists and psychologists in Europe and others in this country have been asking themselves disquieting questions, and others are aware of gnawing doubts which arise from the same half-suppressed and unasked questions" (p. 3). Among the questions that these clinicians were spontaneously and independently asking around the world were: How can clinicians be sure they are truly seeing the patient as they are and not as the clinician's preconceived notions and theories would have them see the patient? How can clinicians be sure that their methods are right for this particular person sitting in front of them, and that they are not forcing the patient into some sort of theoretical procrustean bed? And, perhaps most crucially: How do clinicians see their patients and their symptoms arising from the context of the patient's particular lifeworld? "In all probability," May suggests, "we have never participated in his [sic] world

and do not know it directly; yet we must know it and to some extent must be able to exist in it if we are to have any chance of knowing him" (p. 4).

Taking a phenomenological approach, May asserted that the existential psychotherapist should seek to understand the patient's history and symptoms "not as deviations from the conceptual yardstick of this or that psychiatrist or psychologist who happened to be observing, but as deviations in the structure of that particular patient's existence, the disruption of his [sic] *condition humane*" (May, 1958b, p. 5, emphasis in original). May and others in the existential psychotherapy movement felt that to argue over the intricacies of this or that system missed the point, and like Husserl (1931/2017) and Heidegger (1927/1962) before them, felt that what was called for was an analysis of "the underlying assumptions about human nature and arriving at a *structure* on which all specific therapeutic systems could be based" (May, 1958b, p. 6, emphasis in original). This structure needed to be something which could cross the (artificial, modern) division between subject and object, which Binswanger referred to as "the cancer of all psychology up to now" (as cited in May, 1958b, p. 11).

We feel it is important to make clear that those who adhere to an existential approach do not set themselves against the development of theory, and do not deny the existence of unconscious dynamics, behavior patterns, etc., but insist that such things "can be understood only in the context of the structure of the existence of the person we are dealing with" (May, 1958a, p. 36; see also van Deurzen et al., 2019). May was intimately familiar with the theory, practice, and historical trends of psychoanalysis, and as his work and collaborations make clear, he considered Freud's theories to be indispensable. Except for the relatively rare times where he mentioned Freud's name explicitly, May's critiques of psychoanalysis tended to focus on analysis as practiced in institutions in the United States, particularly *ego psychology*, which we discuss below. But while May found Freud to be invaluable—he asserted, in fact, that on a technical level Freud's "genius was supreme" (May, 1983, p. 14)—he did argue that the potential for psychoanalytic practice was ultimately limited; what was needed, argued May, was not to discard but to build upon and compliment Freud's ideas (Grogan, 2013; May, 1983). May was steeped in the existential-phenomenological tradition, and he asserted that "we must go below [psychological and psychoanalytic] theories and discover the person, *the being to whom these things happen*" (May, 1983, p. 10, emphasis in original). May's (1958b; 1958a) idea of "the being to whom these things happen" was based in the existential-phenomenological tradition, and for him this being was a verb and not a noun (May, 1983); this is just one of the many aspects of existential psychotherapy that has been perverted in the decades-long development of humanistic psychology.

### 3 | A DEVIATION FROM EXISTENTIAL PSYCHOTHERAPY: A CRITIQUE OF HUMANISTIC PSYCHOLOGY

Existential psychotherapy, exemplified by the work of Rollo May in the US, has been propagated by humanistic psychologists who speak of existential psychotherapy as if it were a sub-tradition of humanistic psychology. Often, these things are spoken of as combined concepts, e.g., existential-humanistic psychotherapy (EHP), which in recent years has deviated further into other hyphenated concepts like existential-integrative psychotherapy (EIP; Schneider & Krug, 2017; Hoffman, et al., 2019). Leaders in the field of humanistic psychology consider humanistic psychology to be a necessary corrective to an unbalanced focus on "human limitation" found in existential psychotherapy (Hoffman, et al., 2019, p. 239).

It is clear, as Yalom (1980) noted, "by no means is the American field of humanistic psychology synonymous with the Continental existential tradition; there is a fundamental different in accent" (p. 19). Thus, generally speaking in the United States, there are two separate "camps" (Schneider & Krug, 2017, p. 11): the marginalized camp, those

who adhere to the Continental view of existential psychotherapy—“existential-analytic”—exemplified in the recent publication by van Deurzen, et al. (2019) and which can still be found flourishing in Europe; and the dominant camp in the United States, those who have followed the EHP/EIP trend. It is not a stretch to say that current trends in EHP/EIP—and its “obsession with self-fulfillment, inner selves, individuation, and individuality... [which] are now some of the most toxic elements of American psychology” (Grogan, 2013, p. 321)—are evolutions of the American diversion of the existential movement in psychotherapy.

Rollo May was vociferously opposed to the directions that he saw this new “existential-humanistic” trend going in (Grogan, 2013). During an interview with Kirk Schneider—one of May’s proteges and, ironically, the most prominent voice in the EHP/EIP movement—in 1987, May lambasted mainstream psychotherapy as a profession of gimmicks (Schneider, et al., 2009). He defined gimmicks as techniques that target one or another symptom and that fail to take a broader look at what is at stake for the patient who has brought their case and made a demand on the clinician. May stated, “Freud and Jung and the rest of the really great men who began our field; their purpose was to make the unconscious conscious. And . . . there’s a great deal of difference between them [and the technique-oriented therapists]” (Schneider, et al., 2009, pg. 420). The gimmick approach, May thought, engenders boredom (Schneider, et al., 2009) and the mass production of a new set of interventions designed to tackle a complaint and increase consumer satisfaction with therapy services. May’s words can be read as a warning, or a prophecy, meant for those who dared to take on the responsibility of treating a patient. The descent of humanistic psychology into a profession based on gimmicks, as May so poignantly advanced the term in the literature, begins with boredom, having lost the scent, the thrill of the chase, the symptom and its signifying function (Schneider, et al., 2009; Lacan, 2007). Buddhist psychology also speaks of gimmicks as a fundamental misappropriation of an act, and it is to Buddhist psychology that we now turn to hear another way in which to critique the therapeutic turn toward palliative care and creative distractions.

#### 4 | CHÖGYAM TRUNGPA AND BUDDHIST PSYCHOLOGY

“Buddhism” means different things to different people. There is much debate over whether it is a religion, a type of spirituality, or even a form of psychotherapy (Watts, 1961), and it has been argued that even the fact that there is such a concept as “Buddhism” is a western colonial imposition on aspects of cultures which developed on the Indian subcontinent and spread throughout the pre-colonial Asian continent (Nongbri, 2013). For the purposes of this paper it is perhaps easiest to conceptualize Buddhism as a group of nontheistic traditions which are focused on investigating mental suffering and developing systems of mind training and ethics which are intended to alleviate such suffering (Trungpa, 1999; Watts, 1961). The Buddha explicitly avoided metaphysical speculation (Bodhi, 2005; Watts, 1961), and his fundamental insights can be distilled into what are called “four noble truths” (Trungpa, 1973; Wegela, 2009): (1) to live is to suffer; (2) we suffer because of our belief in the existence of a solid, unchanging self or “ego,” which we try with all our might to protect; (3) this suffering can end; (4) we end our suffering by following the Buddha’s example of training in mindfulness combined with ethics, compassion, and skillful action, all of which has the effect of releasing the ego’s grip on us.

Writing in a tone resonant with Rollo May, the Tibetan meditation master and refugee Chögyam Trungpa (1973) discussed the pitfalls of what he called “spiritual materialism”: in our effort to alleviate our suffering, “we can deceive ourselves into thinking we are developing spiritually when instead we are strengthening our egocentricity through spiritual techniques” (Trungpa, 1973, p. 3). The very goal of self-improvement, of what humanistic psychologists refer to as “self-actualization” (Grogan, 2013, p. 64) actually reifies our belief in a solid, unchanging ego, which can only ever produce more suffering. Recognizing this, many people fall into a sort of reverse pitfall where they try

to destroy their ego through aggressive means: they may “struggle to eliminate ego’s heavy hand but... that struggle is merely another expression of ego” (Trungpa, 1973, p. 153).

#### 4.1 | Resonances between Buddhism and Lacanian Analysis

Freud’s (1961c; 1961a) criticisms of religion are well-known. He was adamant that the religion of the “common man” (1961a, p. 22), the “patently infantile” (p. 22) belief in a supernatural parent in the sky, was “the only religion which ought to bear that name” (p. 23). Freud also cautioned against mystical practices that have the aim of restoring the individual to a state of unity with the divine (Parsons, 1999). As mentioned previously, Buddhism is not a religion in the sense that Freud found deplorable (Trungpa, 1973; Watts, 1961). Buddhism and psychoanalysis have been in academic conversation with one another since at least 1922 (Cernovsky, 1988), and this conversation “has been fraught with conflict and misunderstanding” (Rubin, 1996, p. 33). The psychiatrist Joseph Thompson—writing under the pseudonym Joe Tom Sun (Sun, 1924)—wrote the first known attempt at reconciling the two traditions (Rubin, 1996). Both Buddhism and psychoanalysis are, according to Sun (1924), “based upon the theory that uncontrolled desire... is the salient etiological factor in the neuroses” (p. 40). Sun argued that the goals of both psychoanalysis and Buddhism are “to unify the mind, to make conscious the unconscious, that is, to bring peace, an end to conflict and sorrow” (p. 43).

Even though there are resonances between psychoanalysis and Buddhism, they are not interchangeable, and they cannot be arrogantly “mixed and matched” (Puhakka, 2012, p. 213). But while they are different, they do have much in common (D’Amato, 2015; Hoffer, 2015; Nimanheminda, 2008). As Cernovsky (1988) notes,

*Both psychoanalysis and Buddhism offer healing which is defined as a liberation from the bondage of misconceptions and thus from the suffering this bondage entails. Although the goal is defined as a change in cognitive structures, i.e., in the individual’s theory of the world or existence, both psychoanalysis and Buddhism use very concrete techniques to induce such cognitive change. (p. 56)*

Both Buddhism and psychoanalysis take an approach that does not aim at constructive personality change and does not make promises about the development of a fully actualized self; rather, both of these traditions demonstrate that the image one has of oneself is fundamentally an illusion, or imaginary, and that something other than one’s self image is operant in the production of behaviors. In the next section, a brief history of psychoanalysis in the United States will be used to argue that the psychoanalysis criticized by humanistic psychology was itself a post-Freudian misunderstanding of Freud’s experience in the clinic.

## 5 | PSYCHOANALYSIS AND THE HUMANISTIC CHALLENGE

In the post-WWII psychoanalytic milieu, the tripartite model of the mind developed by Freud (1961b) was used as the foundation for a newly developed analytic system upheld by its proponents to be the successor of Freud’s own work. The system was called ego psychology and it soon became the dominant psychoanalytic model in the American academy due to the influx of European immigrants (Wallerstein, 2002). Existential and humanistic psychotherapists such as May, Maslow, and Rogers would have felt the full force of ego psychology’s hold over clinical institutions, theories, and practices. It is argued therefore, that what was known of psychoanalysis in America and the English-speaking world more broadly, was predominantly those schools that developed after the Second World War: ego

psychology, self-psychology and later the relational movement. Therefore, the true targets of humanistic psychology's critiques are post-Freudian psychoanalytic practice and these critiques should be met with an explanation of the fundamental difference between treatment efforts based in Freudian experience and those that came after.

The model of ego psychology builds on Freud's three main players: the ego, the id, and the super ego, all of which function disharmoniously without the balancing act of conscious control played by the ego. Theoretically, ego psychology largely relies on the ego's mechanism of defense, as described by Anna Freud (1946) and the capacity of the individual ego to adapt to the environment as an autonomous agent free from the conflict of contradictory drives (Hartman, 1958). Psychoanalysts trained in ego psychology tackle the mounting problem of neurosis through the direct interpretation of transferences directed at the analyst by the patient (Eissler, 1953). The observing part of the ego grows in mastery over the experiencing part and makes use of transference reactions to gain insight into early object relations and how those distorted perceptions lead to interpersonal conflict. The analyst stands in a position of anonymity and, by bearing witness to the patient's transference by way of the analysts' own highly developed powers of observation and ego mastery leads the patient to work through transferences, the resulting cure being based in a remastering of the patient's ego functions.

Ego psychology placed the ego and its rational function as the fundamental agent of change and assurance which is aided by the work of the analyst. The analyst uses clinical interventions, like interpretation, to help the patient's ego overcome obstacles that stunted the ego's full development (Eissler, 1953). By gaining insight into the neurotic problem that the patient is facing, their transferences that are imposed on the analyst, and repressed wishes that cause great anxiety, the patient ego is led to a place of security and adaptation through the use of mature defense mechanisms. In existential and humanistic challenges to psychoanalysis, the mechanistic and overly technical artifice that was developed by ego psychology was exploited and called out for what it was—a theoretical system that left no room for that which did not work in the human experienced and was not amenable to the dictates of reason (May, 1983). Which, as Lacan (1993) argued throughout his seminars, is absolutely counter to the Freudian experience, he stated, "To be a psychoanalyst is simply to open your eyes to the evident fact that nothing malfunctions more than human reality" (p. 82). Ego psychology's insistence on a practice that valued the ego's conscious control over innate biological forces has led to critiques of psychoanalysis as reductive and lacking an understanding of human relationships (Grogan, 2013).

May (1983) was not oblivious to this disintegration of Freud's own teaching found in ego psychology and distinguished between Freud's use of reason as *ecstatic*, meaning reason as a form of global comprehension that does not exclude "intuition, insight, [and] poetic perception" (pg. 80). Ecstatic reason is distinguished from what post-Freudian analysis comes to rely on, namely *technical* reason, that which is "married to techniques, reason as functioning best when devoted to isolated problems, reason as an adjunct and subordinate to industrial progress" (p. 80-81). May praised Freud's insistence on the individual's fragmentation and irrationality and the ability of the analytic process to help the patient become aware of and accept her own incommensurability. May wrote, "the development of psychoanalysis in later decades, particularly after the death of Freud, has been to reject his efforts to save reason in its ecstatic form and to accept exclusively the latter—namely, reason in its technical form" (p. 81).

## 5.1 | Psychoanalysis and the Cathartic Method

Tracing the history of Freud's practice and the later developments of Lacan, one can demonstrate that Freudian and Lacanian psychoanalysis cannot be equated with the efforts of ego psychology, the clinical practice that was the target of humanistic critiques. To clarify what of psychoanalysis is missed and misunderstood by humanistic psychology, a brief overview of Freud and future psychoanalytic develop is warranted. The history of psychoanalysis begins with

Freud's modification of the *cathartic method* developed by Josef Breuer to treat cases of hysteria (Freud, 1957). Freud and Breuer (1955) argued that hysterical symptoms were the result of the presence of a trauma. Trauma is specifically defined and cannot be generally applied to the result of any and all harrowing experiences. Freud and Breuer stated:

*any experience which calls up distressing affects—such as those of fright, anxiety, shame or physical pain—may operate as a trauma of this kind; and whether it in fact does so depends naturally enough on the susceptibility of the person affected. (1955, p. 11)*

Freud and Breuer demonstrated that the experience of a tragic and distressing event does not always result in the development of a trauma. This is often due to the work of a reaction equal to the effects of the event that is engaged in by the victim. In many cases, the individual reacts to the event and discharges the force of the psychological affect that was present during the event and a trauma does not develop. If a physical act—such as revenge—that can dispose of the delinquent charge is not available, Freud and Breuer (1955) wrote, “language serves as a substitute for action; by its help, an affect can be ‘abreacted’ almost as effectively” (p. 8). Freud and Breuer discovered that physical acts can be substituted in speech, a transmutation of psychological energy into symbolic referents.

The cathartic method required the patient to be in a state of hypnosis and to verbalize everything about the event to the analyst, along with the accompanying affects. If the patient thoroughly described the traumatic event in this way, Freud and Breuer (1955) found that the hysterical symptoms would disappear. Due to his inability to reliably get *resistances* to make themselves known when a patient was under hypnosis, Freud (1957) later abandoned this procedure in favor of what he called the *psycho-analytic* method. Freud found that his patient's inability to recall a particular event while in a non-hypnotic state of consciousness, constituted a resistance to treatment and helped lead to way to the discovery of *repressed* unconscious material. Rather than being something to be avoided, Freud demonstrated that it was best to work with resistance and intervene in the transference. Unlike the caricature of psychoanalysis as overly mechanistic and reliant on the analyst's own prowess, the direction of the cure is determined by the analyst's abstinence from directing the patient.

## 5.2 | Transference in Psychoanalysis

Freud (1958) introduced transference as a resistance to psychoanalytic treatment that becomes most powerfully present when the patient's associations, having come close to speaking of something that hasn't been spoken of before, resists such speech and a distorted form of the repressed idea is transferred onto the person of the analyst. Transference is something that reappears frequently over the course of an analysis as further unconscious material that has not been recognized by the subject is made known. For Freud, transference was necessary for an analysis to take place and not something to be overcome through the analyst's interventions, such as a direct interpretation about the transference feelings the patient may be displaying in the moment. Freud (1958) wrote that while transference may be very difficult to deal with and at times taxes the analyst, “it must not be forgotten that they, and they only, render the invaluable service of making the patient's buried and forgotten love-emotions actual and manifest” (p. 107). Transference emotions may be positive or negative, meaning they may contain both love and hate, making it quite difficult for the analyst to properly carry out the analysis without their own fantasy becoming involved (Quinet, 2018). Transference is something that the analyst uses to direct the cure and according to Lacanian practice they are analyzed but not interpreted. Learning to work in and through a patient's transference is therefore necessary for the analyst and must be obtained through the analyst's own analysis, as it is by way of the couch that the analyst may reach a point of destitution, when signifiers turn out to be ultimately empty.



From Freud's text, Lacan (1991) highlighted that it is when a subject's speech quits that the presence of the analyst is made known. The presence of the analyst provides resistance a compromise between the tension of the repressed libidinal forces and the patient's conscious efforts to engage in the analysis. The transferred emotions are libidinally charged and provide more material for the analysis to continue. For Lacan (1991), what is repressed is not hidden pathogens of some kind deep in the mind, but signifiers—words and what they signify—that have been left out of the subject's conscious discourse up until the point that they are spoken in analysis. Transference then, turns on an act of speech by the subject which is facilitated by the presence of the analyst.

## 6 | THE POSITION OF LACANIAN PRACTICE

From the position of psychoanalysis, what can we say about the aim of making what was unconscious, conscious? Simply, that it is a matter of being. Not the courage to be, the discovery of being, or the ontological investigation of existence and its forms as the humanistic psychology theorists would have it. Rather, it is the speaking being that is at stake, the coming into being of a locus of being that is made possible through an act of speech, one that may recognize truth (Lacan, 2007). Lacanian psychoanalysis sets its course based on the experience of the analytic clinic, which beginning with Freud, concerned itself with the unconscious and what could be deciphered, spoken but unstated by the subject (Soler, 2014). Philosophical questions about the essence of man are of no concern here, only what functions in the individual, and what is necessary for achieving entry into human reality, namely the adoption of the signifier. Lacan (1981) stated that the status of the unconscious is ethical and not ontological. That which is fundamental to the individual is an ethical question and not one of being and its material or transcendental forms. The question of ethics then, is a question of the aims of a psychotherapeutic endeavor, whether that endeavor seeks to reform the individual or help them live in accordance with desire—that which is both bound by and exceeds cultural expectations and utilitarian values of pleasure versus pain.

Freud (1964) compared the task of psychoanalysis and the work of the analyst to a cultural work that functions like a sea wall that protects against a raging sea. He wrote, "Where id was, there ego shall be. It is a work of culture—not unlike the draining of the Zuider Zee" (pg. 80). Lacan (2007) had much to say about these statements and the way that the English translation of the beginning line is a misrecognition that reflects the practice of American analysts. On psychoanalysis in the New World, Lacan (2007) stated, "the American sphere has so summarily degenerated into a means of obtaining 'success' and into a mode of demanding 'happiness' that it must be pointed out that this constitutes a repudiation of psychoanalysis... and that they will never know anything about it, even in the way implied by repression" (pg. 346). It is precisely this misrecognition which has spawned generations of American psychotherapists trained in ego psychology, that reduced psychoanalysis and derivative psychotherapies to gimmicks, that the authors seek to rectify in this paper through an act of regression, tracing history. Having been captivated orally by analytic lingo, we can move on to the rectum, because with the analyst's discourse now being present in the Anglophone world, the analyst can be returned to their proper place, that of shit and refuse (Lacan, 2009).

Lacan (2007) proposed a striking translation of the Freudian dictum, "Where id was, there ego will be" (p.). The subject supposed in analysis must come to take *subjective responsibility*. Soler (1996) defines this phrase: "I take subjective responsibility to be one's responsibility for meaning, regardless of the events to which one has been subjected" (p. 54). Where it was—that which is broken off, renounced, removed, sunk—"it is my duty that I come into being" (Lacan, 2007, pg. 348). The direction of the psychoanalytic cure does not follow a progressive path of personal enhancement or ego development, rather it follows the fault line of the subject's structure.

## 7 | CONCLUDING REMARKS

As mentioned in the introduction to this paper, we find our critiques of humanistic psychology to be of especial relevance in the current political climate of the United States. Humanistic psychology developed in the mid-to-late 20th century through a particular diversion of existential psychotherapy which was nursed in the distinctly narcissistic capitalist milieu of the U. S. (Grogan, 2013), and its aims of self-actualization are amenable to the dictates of the professional managerial class in service of capitalism (Agel, 1971). We have shown how the theories and aims of humanistic psychology have deviated immensely from the founding developments of existential psychology—much like the way ego psychology deviated from the work of Freud—and we have provided a Buddhist critique of the main aim of humanistic psychology, namely the reification and enhancement of a self which is putatively progressing along a teleological path to some kind of “wholeness”. The charges that humanistic psychology has levelled against psychoanalysis’ alleged overly mechanistic and negative view of human nature have been responded to with a description of psychoanalysis in the United States as practiced under ego psychology and its stark differences with Freudian and Lacanian practice.

In a quest to make the world resemble a neoliberal (“euspychian”) ideal, humanistic psychology makes use of the same sorts of frivolous “self-care” techniques that Žizek (2014) warned are in vogue for professionals and managers who are trying to squeeze out every last ounce of surplus labor value from the workers they exploit. Instead of working towards material improvements in the lives of working and oppressed people, humanistic psychologists have constructed programs where, for example, individuals with different opinions are asked to get together and talk about the feelings brought up in difficult topics such as racism and police violence (Schneider, 2013). In recent years—particularly in light of the Black Lives Matter movement—humanistic psychologists have been attempting to position themselves as leaders in the political and social justice arena(s) (e.g., Hoffman et al., 2016). Some are explicit about using humanistic psychological theory to force a reformist agenda on the world and are now even advocating for institutional power in the form of a “Psychologist General” who would have as one of their aims helping people to secure their “happiness” (Schneider, 2019, para. 5). Given that these efforts within humanistic psychology are fundamentally based on an erroneous conception of the nature of the human predicament, they can only ever bring about insufficient, superficial change which leaves structures of suffering—intrapersonal as well as interpersonal—essentially unaltered.

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