HOW TO BE A SUCCESSFUL PSYCHOTHERAPIST NO MATTER WHAT THE EFFECT ON BEHAVIOR: THE CORN SOUP PRINCIPLE*

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Summary An accidental discovery in a hospital cafeteria led to the formulation of non-therapeutic intervention. This paper describes how therapy may be successful for the therapist, independent of changes in the client.

Like many of the great scientific advances of the twentieth century, this paper brings together the vast clinical experience of two psychologists and a serendipitous happening that occurred one day in the hospital cafeteria. While enjoying the scrumptious cuisine, which is the standard fare of most hospital cafeterias, the senior author noted that his corn soup was bereft of corn, and contained a yellow tasteless fluid. The importance of this observation was immediately seized upon by the junior author. After an intense discussion, the philosophical implications became apparent. “Ah,” you might ask, “but what does corn soup have to do with psychotherapy?” On the following few pages we shall strike to the heart of the matter and reveal the kernels of wisdom implicit in this observation.

It is no easy task to engage in therapy that reliably leaves the client unchanged, and at the same time maintain professional standards. However, if dietitians can make corn soup that does not contain corn, surely psychotherapists can design psychotherapies that contain no therapy. It is important in designing these therapies that one have a thorough understanding of the utility of therapy for the therapist. First, and probably most essential, the therapist must continue to be paid, regularly and lavishly. Second, the therapist must win and hold the esteem of his colleagues. This means that therapy must be designed so that no criticism is possible. Finally, clients must be happy with the therapeutic process, even though there is no change in their behaviour. The outstanding non-therapist will continue the therapeutic process as long as the client is alive. We are, of course, indebted to the highly complex psychodynamic schools of thought, which have lain squarely in the tradition of non-therapy. Other scholars, amongst them R. G. Jensen (1974), have identified some of the crucial features of the “Corn Soup Principle”; to illustrate, Jensen has stated “another fundamental approach to a successful failure requires that the conceptualization and goals of the program be kept relatively obscure. If the treatment principles and goals become too concrete, there is some likelihood that an astute observer (e.g., a parent or trainee involved in the program) might ask pertinent questions such as, ‘Why are you doing that?’ and expect a concrete answer. Failure becomes more difficult once treatment principles and techniques are open to public scrutiny.

One means of maintaining a certain level of confusion is to make decisions on these matters, but insure that the decisions are not made known until the program is well under way.”

Selection Of Clients
Clients must be selected very carefully. The ideal client is one who seems to be reasonably happy, and is not sure why he or she has come to see a therapist. There are many such clients available, but in case of difficulty in obtaining them, it is the therapist’s responsibility to let it be known that everyone has their “hang-ups” and that all of us may strive to become more “fully actualized”. The unhappy client should be avoided since they have a tendency to complain about the length and outcome of therapy, and are more prone to end the therapeutic relationship. Clients with concrete problems (e.g., marriage failing, cannot hold a job) should also be avoided. There is a great danger that these people will recognize that therapy has not changed their behaviour. In addition, this type of client may complain to other professionals and thereby reduce the esteem of the successful non-therapist. Two additional qualifications of the ideal client are as follows: Clients should be young adults and they should be gullible. A handy guide for identifying gullible clients comes from Therories of Personality (Hall and Lindzey, 1968), “a gullible person, for example, is one who is fixated on the oral incorporative level personality; he will swallow almost anything he is told. Biting or oral aggression may be displaced in the form of sarcasm and argumentativeness.” Good therapeutic practice requires a lifetime’s dedication on the part of the client (some therapists have been known to give free dance lessons). Additionally, the therapist is typically older than his clients, and for this reason, at retirement the successful therapist will be able to sell his practice (this, of course, includes clients) and will thereby increase his retirement fund.

The Corn Soup Principle in Action
Or How to Conduct Therapy
It is essential that on the first meeting the therapist says only those things that the client wants to hear. The client should also be assured that he has made a positive step forward by entering the therapeutic relationship. It is additionally helpful to hint that, had the client not come to you, something disastrous may have happened. These steps should be taken so that the therapist may be assured that the client will return for the next therapeutic session.

The therapist should strive to keep interaction at this level for a considerable amount of time (the length of time depends upon the brilliance of the therapist). The road to no behaviour change is strewn with many pitfalls that the unwarthy therapist can fall into. First it is important that the therapist strenuously resist setting any goals for therapy. It is to be remembered that many therapists have stated, “it is the process of therapy, and not the outcome, that is important.” It should be noted here that if goals are set for therapy, or the client does not achieve the goal and is dissatisfied with the therapeutic relationship. In either therapy, only one of two things can happen. Either the client achieves the goal and therefore terminates therapy, or the client does not achieve the goal and is dissatisfied with the therapeutic relationship. In either case, this represents failure on the part of the client to live up to his responsibilities to the therapist.

Under no circumstances should the therapist observe the client’s behaviour or record observations. Some of the more
outstanding therapists in the field do not even keep a record of the date, and it is well known that one quite successful therapist could not remember his name, much less those of the clients. Accurate data keeping has led to many case terminations. For those of you who work in public institutions that require accurate record keeping, we suggest forging them, or at best, do them all at the end of the month. As an alternative to behavioral observations and subsequent data keeping, the therapist should focus his attention on the client's earliest childhood experience, in an attempt to unravel the psychosexual history. It is of particular importance that toilet training of the client be unravelled. This developmental stage has only recently been re-evaluated and its importance underscored. For example, J. W. Hamilton (1974) has demonstrated a connection between psychosexual development and some automobile accidents. In concluding his article, Hamilton says, "the rear end collision can be seen as an attempt to master the fear of anal rape by the father via identification with the aggressor in the striking of another car from behind." This, by the way, is an excellent example of the sort of meaningless remark that the non-therapist should rehearse. There are, of course, many other useful phrases that the therapist can call upon. These phrases should be inserted in the therapeutic communication, in so many as possible, in a random manner. For example, Jung (1938) has said, "a complex may behave like an autonomous personality, which has a mental life and a motor of its own." Other illustrative examples from the authors are as follows: "Um hum, it probably has to do with the way you have grown," "It seems to be that you have made some steps forward," and "Get in touch with your feelings." Feelings have that nebulous quality that non-therapeutic therapy demands. They cannot be adequately described or properly identified, hence years of innocuous dialogue may be obtained by concentrating on there "facets of personality."

In order to avoid an analysis of the client's current behaviour in relation to its environment, the therapist should under no circumstances see the client anywhere but in his office, between the hours of 10:00 a.m. and 3:00 p.m. This serves to make the environment as artificial as possible and therefore reduce the frequency of deviant behaviour (this reduction in frequency occurs only in the office.) In this regard, the office environment itself should be made as unusual as possible. Once this is done, the therapist may utilize learning theory principles while, at the same time, remaining assured that the newly conditioned behaviour will not generalize to the natural environment. It is helpful in the design of these office environments that one consult Hollywood movies made in the period 1927-1935.

Miscellaneous. Sometimes extraneous points that the successful non-therapist must be cognizant of

Confusion."There is no such thing as a truth or reality for a living human being, except as he participates in it. he is conscious of it. has some relationship to it." (May, 1960). This clearly states the ideal client-therapist relationship. It is apparent that the client can only understand reality as he participates in it with the therapist. In as much as this is true for the client, it is true for the therapist.

No one can understand reality or participate in it without the help of the non-therapist. As long as the non-therapist keeps the therapeutic relationship obscure, the ideal of a lifetime of therapy is laid upon a firm foundation. Buytendijk (1960), elaborates by stating, "the phenomenological approach to feelings and emotions starts from the undeniable fact that consciousness is always a being conscious of something else and that we are conscious of our existing, that means our being physically subjugated to a given situation." Quite obviously. Buytendijk is here referring to the therapist. These clearly defined considerations must be uppermost in the therapist's mind at all times.

Testing. Psychological testing is one of the most powerful tools available to the non-therapist. A vast array of clinical instruments are readily available. There are only two justifiable uses of psychological tests. The first is that the therapist may sound very learned when conversing with other professionals, as for example, when the therapist says, "the high elevation of scale 6 to scale 8 in the 8-6 profile type is consistent with the uniform diagnosis of the sample as paranoid schizophrenics" (Gelberstadt and Duker, 1965). The second major reason is that clients may be assigned a psychiatric diagnosis. This allows quick and efficient description of clients to other professionals. For example, "My 303.2 is getting in touch with his feelings." This is also useful when one is designing a filing system or when clients are to be shuffled from one ward to another, thereby being dealt with. One of the outstanding advantages of personality testing is that classification has little or nothing to do with therapy and typically assumes that the problem lies "deep within the client." Since testing has little to do with treatment, the therapist may satisfy himself with a testing session that looks good on the records and does not require a change in therapeutic direction. Finally, it must be pointed out that this can be an additional source of income that must not be sneered at.

Interpretations or more confusion. Again and again, the successful non-therapist is called upon to make interpretations in the course of therapy. As a guide to interpretations, we suggest the following: "again, generally speaking, interpretations should be offered only if and when all data pertinent to the issue under interpretive investigation appear to be covered by the interpretation and if the psychiatrist feels reasonably certain that the interpretation he has in mind is one which he considers correct and valid among several other possibilities."(Fromm-Reichmann, 1950). Interpretations serve two useful purposes: first of all, they are fun for the therapist; second, an astute non-therapist can keep the client (and sometimes colleagues) completely confused.

Confrontation. Never confront the client, as this can serve no useful purpose for the therapist. The only exception is when the client becomes aggressive and the therapist must confront in order to reduce the aggression (Carkhuff and Berenson, 1967). If clients become too aggressive, they may (1) terminate therapy or (2) make the therapeutic session unpleasant for the therapist. It is therefore essential that the therapist be as impassive, placid and non-directive as possible.

Summary
It is important that therapists do not observe or record behaviour, rather talk about feeling and early history. Do not set goals, rather set hazy objectives that neither client nor therapist fully understand. Keep the therapeutic relationship and environment as artificial as possible. Several tactics are available: confusing the client and psychological tests are excellent practice. Finally, it is suggested that clients should not be confronted with misbehaviour of any sort, as this serves, at best, to make
therapy unpleasant for the therapist.

We realize that numbers of therapists function quite well without the insight of "the Corn Soup Principle." However, it is only by clearly stating basic principles of action that progress may be made.

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References


