Diverse Pursuits at the Psycho-Easel

David O'Hare (Ed.)

Psychology and the Arts

Brighton, England: Harvester Press,

1981. 335 pp. \$40.00 (£22.50)

Review by Vladimir J. Konečni

David O'Hare is lecturer in psychology at the University of Otago (Dunedin, New Zealand). He is author of a chapter in H. Bonarius, R. Holland, and S. Rosenberg's Personal Construct Psychology. Wladimir J. Konečni is associate professor of psychology at the University of California, San Diego (La Jolla). He is author of a chapter in D. Deutsch's The Psychology of Music.

In the 1960s and 1970s, largely as a function of Berlyne's "new experimental aesthetics," there was a considerable resurgence of interest in the relation between psychology and the arts. The debate concerning definitional and theoretical issues has been lively, indeed sometimes couched in strong terms. Although it has not culminated in a precise delineation of the field, there has been a sufficient number of solid experimental findings and methodological contributions to maintain excitement and growth.

It would be unfair to look to Psychology and the Arts as the long-awaited synthesis; its goals clearly did not include theoretical grandeur or even a comprehensive survey of the field. Editor O'Hare points out that in the book "there is no hegemony of theoretical orientation, nor even unanimous agreement between contributors as to what constitutes the central issues in the empirical study of the arts" (p. 27). Even his half-hearted claims that "[O]ut of (the) variety . . . can . . . be seen some unity of purpose and direction" (p. 27) is not credibly defended. O'Hare's introductory chapter, valuable as it is from substantive and integrative points of view, ends with a resigned shrug regarding the book's organization and common threads: "The ensuing chapters all may be seen as attempts to bring order to the variety of conflicting observations which abound whenever matters of taste and judgment are brought to the fore" (p. 28).

What the reader gets is a mixed bag of chapters that vary in ambitiousness,

length, amount of material not available elsewhere, quality of theory and experimentation, and degree of tedium—in short, the equivalent of proceedings from a conference (although this was actually not the case here). The rough edges, however, do not obscure the considerable amount of interesting material contained in this book.

In the introductory chapter, O'Hare thoughtfully discusses the ways in which artists' "manifestoes" and the works of philosophers, art historians, and critics have (and have not) influenced the empirical study of artistic creation and appreciation. The following chapter, by Lindauer, is ostensibly concerned with the phenomenology of aesthetic experience, but in fact its entire first half is needlessly written as if it were an introduction to the whole volume, so the case for the desirability of paying more attention to phenomenological experiences in art never gets convincingly made. When Lindauer finally gets around to specific research issues, the work turns out to be mundane and fraught with problems.

The three subsequent chapters—by Eysenck, Machotka, and Gardner, respectively—are mostly reviews of these researchers' efforts, and thus there is little continuity among them. Eysenck discusses individual differences in aesthetic preferences, but one is distracted from some interesting things he has to say by the unfortunate insistence on resurrecting from oblivion his 40-year-old studies. Machotka's account of the relation between aesthetic choice and coping with conflict is written from a psychodynamic perspective and draws heavily on his recent book on the nude. In places, the analysis is insufficiently informed by the more recent research on human aggression. In attempting to draw a developmental portrait of children's perceptions of art, Gardner relies heavily on the Harvard Project Zero; the portrait suffers from the usual problems associated with developmental-stage theories.

In Chapter 6, Ortony discusses what makes (linguistic) metaphors metaphors and the psychological processes associated with the comprehension of them; the chapter is almost completely devoid of references to art, including literature. Dowling's chapter, on meaning in music, is delightful in a breezy way, but it leaves too much unsaid, especially considering that it is the only chapter dealing exclusively with music. O'Hare's second chap-

ter is a well-reasoned critique of various studies of perceived attributes of artistic style and a discussion of issues of individual differences in style discrimination.

Chapter 9, by Gordon, on the left-right organization of paintings and photographs, is a model of how to proceed in order to make the psychology of art exciting and relevant for the artist, art historian, and psychologist alike. Gordon first presents testable propositions about left-right differences (e.g., Gaffron's 1950 description of the "glance curve") and then subjects them to a rigorous experimental scrutiny. As Gordon says,

the general problem of left and right in art raises... interesting... issues including the status of phenomenal reports as evidence, the testability of theories of artistic composition, the ability of the psychology of perception to deal with weak effects, and whether laymen are appropriate subjects in research in this area. (pp. 211–212)

In another outstanding chapter, Crozier and Chapman provide a timely review of the prestige-of-communicator and social-class effects on aesthetic preference. Finally, Pickford discusses what he persists in calling "psychopathological art." Pickford himself says "a good artist . . . can create good art, and questions such as whether he has tuberculosis, a wooden leg, no arms, is left-handed or colour blind, or occupies a bed in a mental hospital, are not primarily relevant to considerations of the quality of his works" (p. 281). Yet, one soon hears of "psychotic art" and "neurotic art"-but about "pictures made by delinquents" and "alcoholic patients' drawings." The chapter, however, abounds with interesting observations about the use of art in diagnosis and psychotherapy.

The Harvester Press apparently does not use technical editors. The subject index is rudimentary, and there is no author index. The large number of typographical errors is distracting, including a misspelling of the editor's name on the cataloging-data page. a large number of sentences begins in the e. e. cummings style. In one of the chapters, a new move is made in the crusade against sexist language: He/his paragraphs alternate with she/her ones (pp. 143-144). The effort to avoid mixing British and American usage (the contributors are evenly divided) is carried to the extreme of altering journals' names (e.g., American Behavioural Science, p. 318). A quote from an article in a French journal is given

without translation (pp. 202; the article was paradoxically translated from English), whereas elsewhere the French text appears in translation only (p. 247), or terms that are awkward in English are used instead of the French equivalent ("Art Extraordinary," p. 281). In short, the publisher has done this useful, and occasionally exciting, book a serious disservice.

On Carrying Your Own Doctor Inside (and Outside)

Dennis T. Jaffe Healing From Within New York: Knopf, 1980. 314 pp. \$10.95

Review by Carl E. Thoresen

Dennis T. Jaffe is a member of the executive faculty of the Saybrook Institute in San Francisco, California, as well as visiting lecturer in the Department of Psychiatry at the University of California (Los Angeles) School of Medicine. He is coauthor with L. Allman of Abnormal Psychology in the Life Cycle. Carl E. Thoresen is professor of education and psychology at Stanford University. He is coauthor of The Behavior Therapist with T. J. Coates.

Something is fundamentally wrong in how we provide care for the troubled, the diseased, and the ill. We have become so discriminating in our many specialties, particularly within medicine, that the wholeness has gone out of our treatment. Too often selected bits and pieces of the person are carefully scrutinized, but the integrated whole of the person, the living context if you will, goes ignored and unexplored. Although we may know how to diagnose hundreds of diseases (of course, there are real problems of misdiagnoses), we do not know how to diagnose health. Because we can hardly diagnose health, we understandably stumble in knowing much about the etiology of health. Thus, questions like "Are you in good health?" and "What can I do to maintain good health?" are extremely difficult to answer. Unquestionably, understanding what good health is all about has suffered badly from an extreme preoccupation with the pathology paradigm and its focus on the pathogenesis of specific diseases, its often dichotomous logic (disease or no disease), and sometimes its "magic bullet" search for the cure for each disease. This kind of "pathological thinking" often favors single remedies, such as medication or surgery, for acute problems when in fact they are multiple chronic problems emerging gradually over the long run. Yet health is more than pathology, and healing is more than medication.

Part of the health problem stems from a sometimes myopic view of what constitutes rigorous scientific research. Clearly, when health is viewed as something more than the absence of specific diseases or infirmities, it is a relative term making for difficult measurement and assessment problems. Health is related to a number of factors-especially cognitive, social, environmental, genetic, and behavioral ones-and is linked intimately to how the person lives day by day. No one is simply healthy. Rather, our degree of health depends on the ongoing mix of demands, resources, and habitual response patterns in our lives.

In Healing From Within Jaffe recognizes that something is seriously wrong in how we care for people and their presumably physical problems. He recognizes, along with a growing number of health professionals, how modern medical care often widely misses the healing mark. In a text addressed primarily to the intelligent lay person (and I think to many professionals as well), he rejects the pathological paradigm of medicine with its disease-care orientation, often in the hospital setting, because it fails to provide genuine health care and because disease care is often "too little and too late." In the ancient tradition of Hippocratic medicine, rediscovered by Dubos and popularized by Cousins, among others, Jaffe views health as living in harmony with oneself and with the environment and maintaining a balance in the face of changes and challenges. From this perspective, diseases are not so much physiological abnormalities to be cured as they are chronic responses to the circumstances of living. Further, symptoms are not to be suppressed with drugs or even equated with disease; instead, they are to be analyzed for their personal meaning as well as alleviated by personal action. Symptoms say something; they offer an opportunity to learn and to change.

The spirit of Jaffe's approach to health and healing is perhaps best captured in Sir William Osler's famous dictum to medical students: Ask not what kind of illness the patient has, ask what kind of patient has the illness. For Jaffe effective treatment takes place when the helper mobilizes the person's own resourcesthe "inner healer," especially in the cognitive arena-to reestablish his or her disrupted sense of balance and harmony. With this emphasis on self-change and personal healing, Jaffe understandably features a broad spectrum of concepts and techniques. Thus, the book's 18 chapters are divided into 3 parts: The Many Faces of Disease, Health, and Healing; Illness and Human Relationships; and Working for Your Health: A Self-Help Program. Chapters range from the Healing Relationship to Dialogues with the Self: Using Your Inner Healer.

Optimistic but too uncritical

The real strength of this book lies in its optimism and openness to concepts and techniques. A wealth of possibilities is suggested, with examples taken from Jaffe's own private practice in which he collaborates with a physician. In essence what Jaffe advocates is a self-control strategy with a heavy emphasis on the self-observation and self-exploration of thoughts, feelings, and behavior-a kind of dynamic cognitive-behavior modification. Jaffe's implied recognition of the reciprocal and interacting influences in a person's experience—cognitive, behavioral, environmental, and physiologicalcould be termed an expanded cognitive social learning approach. His major concern, for example, in giving what he calls placebo power to patients, could be recast as enhancing self-efficacy.

His consideration of the personal and social meaning of illness is provocative; how many physical diseases are socially sanctioned, even reinforced, ways of what I call "miscoping" with demands? The physically ill patient is seldom held accountable for getting sick or even for staying sick. The attributions for disease are typically directed to exogenous pathogens, those infectious bugs that strike down the presumably innocent. Highlighted here are the "secondary gains" of becoming and remaining ill, the social sick role, and especially the family as the crucible in which a host of diseases can be concocted. "You make me sick!" can be literally true when it comes to families, as is its corollary, "You keep me