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UNIVERSITY OF ALBERTA

HUMOR, FORGIVENESS, AND ALTRUISM IN EMERGENCY SITUATIONS: AN INVESTIGATION

by

NIKI WOSNACK

A THESIS

SUBMITTED TO THE FACULTY OF GRADUATE STUDIES AND RESEARCH

IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE

OF MASTER OF EDUCATION IN COUNSELLING PSYCHOLOGY

DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

EDMONTON, ALBERTA

SPRING, 1990

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DEGREE: MASTER OF EDUCATION

YEAR THIS DEGREE GRANTED: 1990

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FACULTY OF GRADUATE STUDIES AND RESEARCH

The undersigned certify that they have read, and recommended to the Faculty of Graduate Studies and Research for acceptance, a thesis entitled HUMOR, FORGIVENESS, AND ALTRUISM IN EMERGENCY SITUATIONS: AN INVESTIGATION submitted by NIKI WOSNACK in partial fulfilment of the requirements for the degree of MASTER OF EDUCATION.

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Dr. B. Hague (Supervisor)

Dr. D. Wangler

Date: March 30/90

DEDICATION

To my husband, Rick, and to my three daughters, Rikki, Jennifer, and Krysta. Without your love, support, and encouragement this would not have been possible. I love you and I thank you.

ABSTRACT

This thesis is comprised of three separate areas of study: humor, forgiveness, and altruism in emergency situations - each with attached bibliography. The first section consists of two chapters which explore humor as a psychological phenomenon then address humor within counselling. The initial chapter presents theoretical explanations of humor within a historical framework. This is followed by a review of the literature and conceptualization of humor as a complex human phenomenon straddling cognitive, affective, physical and social domains. The second chapter in this section focuses on humor within counselling. It includes an introduction to several schools of psychotherapy (Logotherapy, Provocative therapy, Paradoxical therapy and Natural High therapy) which utilize humor as part of the therapeutic encounter. Kubie's (1970) opposition to the use of humor within psychotherapy follows, as does a list of potential risks and benefits associated with humor in counselling.

The second section consists of two chapters which explore forgiveness as a psychological construct before addressing implications for counselling theory and practice. Christian theological origins and related terms such as reconciliation and agapé are included. Psychological explanations of the mechanism underlying forgiveness which include Freudian, Jungian, and humanistic perspectives precede discussion of the integration between theology and psychology. The second chapter explores forgiveness as a psychological process and presents a review of anecdotal literature related to forgiveness and psychotherapy.

The final section, altruism in emergency situations, includes a historical overview and review of the literature before exploration of motivational theories underlying altruistic acts. Motivational theories are conceptualized as egoistic or altruistic in nature and include arousal/cognitive theories, trait theories, and moral motivation theories. The relationship between empathy and altruism is addressed and concluding statements suggest that moral motivation theorists, particularly those espousing the ethic of care and responsibility (Gilligan, Noddings, & Shogun) currently provide the most adequate explanation for heroic behaviors.

ACKNOWLEDGEMENTS

To the Dynamic Duo, Dr. J. J. Mitchell and Dr. B. Hague, words appear inadequate. Your generous gifts of time, of honesty, of knowledge, and of presence allowed me to turn this thesis into a reality. (Get the idea I'm contemplating starting up a fan club?) What you have taught I will carry with me forever. Thank you.

Additionally, I would like to thank my brother, Marc, and Mom and John for spending evenings proof reading my rough drafts instead of enjoying themselves like regular people! I love you guys!

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CHAPTER I

INTRODUCTION

The primary objective of psychology is to explain the "why" and "how" of human behavior. As such, psychology addresses individual and group response to stimuli in such a way that it attempts to account for variation of response. During my years of study I developed an interest in humor, forgiveness, and altruism in emergency situations. All three topics, which are treated as separate and distinct, appear to be complex universal human responses to a variety of stimuli. In the case of humor and forgiveness an introductory chapter outlining a review of psychological literature on the subject precedes a second chapter focusing on humor and forgiveness within psychotherapy. Altruism within emergency situations is presented without reference to therapy as individuals rarely seek counselling after responding to emergency situations in an altruistic manner.

My choice of topics stems from personal interest. I have always valued humor in individuals with whom I've come into contact. I've wondered why some people "lose" their sense of humor and what purpose humor serves. As a professional counsellor, I wondered whether humor helped or hindered the therapeutic process. The answers to these questions were not found within my course of studies at the University of Alberta. Humor, as a topic of study, was not even addressed. I had the same experience with the phenomenon of forgiveness. Although forgiveness has been explored through Christian theological perspectives, forgiveness as a psychological phenomenon

appeared almost non-existent. What function does forgiveness serve within the human psyche? Is it an avoidance strategy or an act of healing or "letting go"? What are the implications of introducing forgiveness as a possibility within the therapeutic environment. Finally, I confess to avid curiosity when topics related to altruism in emergency situations arose. Reports of heroic acts in times of crisis spurred my interest as I wondered whether or not, in similar circumstances I would have the courage to act. Why do some people intervene while others do not? This area of inquiry was, once again, not included in my studies.

I am grateful therefore, that my thesis provided a vehicle for exploration of each topic: humor, forgiveness, and altruism in emergency situations and helped me to investigate some of these questions. Following is a detailed summary of the three sections of this thesis. Please note these are three separate and distinct areas of study, each with it's own bibliography attached.

Section Summary

Section I (Chapters II and III)

Section I explores humor from a psychological then psychotherapeutic perspective. Chapter II entitled "Humor as a Psychological Phenomenon" includes an historical overview of humor from philosophical perspectives before the introduction of psychological theories. Views of humor as: (1) an effort to gain superiority over others, (2) a reaction to incongruous stimuli,

(3) a tension release/relief mechanism, (4) a psychological vehicle which promotes development or maintenance of well being within the organism, precede psychoanalytic explanations of humor as a sophisticated defense mechanism. Freud's contention that humor provides a relatively safe method for discharging aggressive or sexual psychic energy included recognition that social factors also impact on humor appreciation or response. Belief that humor can be a social act spurred response from social psychologists who view humor as a communication tool used to enhance, maintain, or retard development of interpersonal relationships. Difficulties encountered with empirically based attempts to study humor are outlined and conceptualization of humor as a psychological phenomenon straddling cognitive, affective, psychological and social domains is presented. Finally, current research, primarily centered around humor response is discussed, as are difficulties inherent in empirically based research which negates complex internal processes and the importance of spontaneity to humor appreciation and response. An interactionist framework is necessary as humor involves the person, past experiences and present perceptions, and specific situational factors.

Chapter III focuses on humor within the therapeutic environment. A general discussion of humor - bane or boon - is augmented by Thomas Kuhlman's (1984) assertion that humor must be ***appropriate*** to the therapeutic context from which it arises. Exploration of humor as beneficial to the client within several school of psychotherapy include: (1) Logotherapy,

(2) Paradoxical Psychotherapy, (3) Provocative Therapy, (4) Natural High Therapy, (5) Other Therapies. All of these view humor as a therapeutic tool or as an indication of healing or wellness within individual clients. Kubie (1971) presents counter arguments and contends that therapist generated humor within the therapeutic environment is potentially damaging to clients. A summary of possible benefits and risks to using humor within counselling follows. Finally, recognition that humor within therapy has the potential to hurt or heal according to the skill of the therapist involved and the manner in which humor is used precedes a review of empirical investigations of humor. This concludes Section I, humor as a psychological and psychotherapeutic phenomenon.

Section II (Chapter IV and V)

Section II explores forgiveness from a Christian theological and psychological perspective before discussion of forgiveness within psychotherapy. In Chapter IV, Christian origins of the concept of forgiveness precede psychological views of forgiveness. Traditionally, forgiveness has been viewed as a theological construct. The word forgiveness carries powerful associations or attributions within Christian communities. Clarification of these attributions necessitates explanation of related terms such as reconciliation, a coming together of that which belongs together but is apart (Donnelly, 1986, p. 17), and agapé, universal or brotherly love, a feeling of care and concern for man's common humanity, and of their relationship to forgiveness. Once theological boundaries to forgiveness have

been described, explanation of psychological perspectives are presented which include psychodynamic (Freud, Jung) and humanistic (Rogers, Frankl) frameworks. Following these, investigation centered upon the integration of psychology and theology as they relate to forgiveness is explored.

Chapter V presents forgiveness as synonymous with psychological terms such as "letting go", "working through" or "acceptance", all of which signal an internal process which results in healing or growth. Recognition that forgiveness is paradoxical, that is, forgiveness builds personal strength through recognition or "owning" of one's weaknesses or imperfections, is supported by psychologists (Pingleton, 1989; Studzinski, 1986). A summary of work by Smedes, Augsburger, Cunningham, and Dabrowski with comments from other psychologists in this field, lays the foundation for their premise that authentic forgiveness promotes healing of psychological hurts. Authentic forgiveness appears to include the following components: (1) free will, (2) willingness to face hurt and to "own" one's feelings, (3) courage, (4) separation of the hurtful act from the person who initiated it, (5) ability to confront oneself and others, (6) a reframing of hurt into an opportunity for personal growth, (7) renegotiation of relationship. Finally, a review of current literature, exclusively anecdotal in nature, addressing forgiveness within psychotherapy is included.

Section III (Chapter VI)

Section III introduces a new topic of study, that of altruism in emergency situations. Altruism is viewed as a subset of prosocial behavior

which has the following characteristics. It is: (1) voluntary, (2) directed toward helping another, and (3) is carried out without expectation of external reward. Historical antecedents and sociobiological explanations of reciprocal altruism precede psychological investigations of altruistic behaviors following the stabbing death of Kitty Genovese in 1964. Latané and Darley (1970) initiated studies on bystander intervention in emergency situations. They defined emergencies as involving: (1) actual harm or the threat of harm to life or property, (2) specific, unusual, rare, and unforeseen circumstances, and (3) a necessity for immediate, often urgent action. Their research spurred inquiry into the source of motivation behind altruistic acts.

Most motivational theories which seek to explain altruism fall into two camps - egoistic versus altruistic. A discussion of the difference between egoistically and altruistically motivated altruism follows with input from theorists such as Dabrowski, Rushton, Eisenberg, Straub, Kohlberg, Gilligan, Cialdini and Pilivain et al. Relationships between altruism and empathy, cognition, arousal, personality traits, and moral development are explored.

Although no comprehensive theory currently exists which can adequately explain altruism in emergency situations, the evidence appears to support interactional approaches which explore the relationship between the person and the situation. Reductionist perspectives which negate the impact internal processes have on altruistic acts in times of crisis do not adequately explain this phenomenon. The work of Shogun (1988) and others in the area of moral development, particularly those whose writings center on the ethic

of care and concern (Gilligan, 1982; Heyd, 1982; Kohlberg, 1984; and Brell, 1989) appear promising as their work provides a framework from which bystander intervention - or failure to intervene in emergency situations, can be understood.

SECTION I

CHAPTER II

HUMOR AS A PSYCHOLOGICAL PHENOMENON

CHAPTER III

HUMOR IN COUNSELLING

CHAPTER II

"HUMOR AS A PSYCHOLOGICAL PHENOMENON"

Introduction

Origin of Terms

The psychological investigation of humor could not begin without some explanation of the origin of this term. "Humor" was originally a latin word meaning moisture or fluid. Writers from several periods of history including the Renaissance believed there were four bodily fluids or "humors" including yellow bile (choler), black bile (melancholy), phlegm (mucus), and blood. An equal balance between these humors was thought to produce a normal, balanced disposition or a "good humor". If one or more humors were present disproportionately, it was believed that the individual's temperament would be affected in some way so that they would be "out of humor".

1. Choler, or yellow bile, was thought to be produced by the gall bladder. An excess of choler led to a choleric mood or humor; that is, irascibility and proneness to upset or anger.
2. Melancholy, or black bile, referred to a thick, dark bile believed to be secreted by the kidneys or spleen. Heavy secretions of black bile presumably caused gloominess, dejection, or depression.

3. A person was considered to be in a sanguine mood when an excess of blood was present. The mood was characterized by confidence, hopefulness, and a cheerful spirit.
4. Phlegm, referred to a cold, moist mucus believed to produce a phlegmatic temperament; that is sluggishness and apathy (McGhee, 1979, p. 5).

Definition of Terms

Gradually, humor began to be used to describe moods, characteristics, verbalizations, events; all of which showed an appreciation for incongruous, ludicrous, or comic situations or events. The definition of humor includes references to the bodily "humors" already described and then relates humor to the quality of being laughable, comical, or funny. Also noted were descriptors which indicated an appreciation of actions, events, situations, or verbalizations which were construed as pertaining to the incongruous, ludicrous, or absurd.

Although humor appears to be a universal human phenomenon, and despite its prevalence in our daily lives, a comprehensive definition of this term from a psychological perspective does not yet exist. This may be due to the complexity and elusiveness of the humor phenomenon as well as to our lack of understanding of its functions. Writers such as Kuhlman, McGhee, and Goldstein have commented on the flexibility and spontaneity associated with humorous behavior and on inherent difficulties noted with attempts at rigid categorization. Research indicates this is not a recent realization as

evidenced by Sully's statement: "hardly a word in the language - and it seems to be exclusively an English word - would be harder to define with scientific precision that this familiar one." This notion was reiterated in 1984 by Thomas Kuhlman. "A definition of humor is not attempted; rather, humor is conceived as a putative link between certain classes of responses and certain classes of stimuli that occurs under certain contextual conditions" (p. 10).

This explanation is limited in that it negates emphasis on the "human" component so necessary to the study of humor appreciation and response. Perhaps the most complete discussion of this phenomenon is found in P. McGhee's book, ***Humor: Its Origin and Development*** where humor is defined by what it is not.

> We must conclude, then, that humor (like beauty) is something that exists only in our minds and not in the real world. Humor is not a characteristic of certain events (such as cartoons, jokes, clowning behaviors, etc.) although certain stimulus events are more likely than others to produce the perception of humor. Humor is not an emotion, although it may alter our emotional states, and we are more likely to experience it in some emotional states than others. Finally, humor is not a kind of behavior (such as laughter or smiling) although specific types of behavior are characteristically related to the perception of humor (1979, p. 6).

In summary, although a precise definition of humor from a psychological perspective does not exist, the importance of including complex variables such as behavioral response, physiology, emotion, cognition, perception, spontaneity, and social influences cannot be overlooked.

Parameters of Study

Connected to difficulty with definitions are the number of terms used to connote humor or humorous perceptions. "Ludicrous", "absurd", "funny", "amusing", "ridiculous", "incongruous", "mirthful", "knee-slapping", "comedic", "farcical", "jests", "wit", "ridicule", "satire", "pun", and "sarcasm" are but a few.

Whatever words are used to define this term, several factors appear relevant. First, humor is an intrinsic response to an internal (intrapersonal, cognitive) or external (interpersonal, cognitive) stimulus. This is readily acknowledged by watching individual or group reactions to comic or ludicrous stimuli. No two people (groups) respond in identical fashion. Secondly, humor appears to be predominately a cognitive response to stimuli although physiological or behavioral components such as tension reduction, laughter, or smiling accompany this response. This implies that an individual's humor response depends largely on his ***perception*** of that which has been noted. Additionally, a person's "set", attitude, attributions, and related affective colorations determine whether or not something will be viewed as humorous. Research (Levine & Redlick, 1955; McGhee & Grodzitsky, 1975; Miller & Bacon, 1971) indicates that stimuli with high affective components, particularly when the attached affect is negative, are rarely perceived as

humorous. Finally, spontaneity, another integral component of humor appreciation, complicates studies of humor responses in that something that strikes one as funny at one moment in time may not produce the same reaction at a later date. Thus, difficulty with replication of studies measuring humor responses and problems associated with obtaining test/retest measurements continue to impede systematic research and make difficult the analysis of empirical data.

Another difficulty arises when one tries to separate humor responses from related physiological components such as laughter and smiling. It has been noted in previous research that not all laughter is humorous. Non-humorous laughter as a response to tickling, triumph, anxiety, anger, joy, bitterness and embarrassment will not be examined in this chapter. However, inclusion of laughter as it relates to humor appreciation will be reviewed primarily from the perspective of laughter as a behavioral response indicating humor appreciation. The same may be said of smiling, another behavioral pattern which straddles the humorous/non-humorous continuum.

Before continuing with detailed explanations of the difficulties encountered by researchers investigating humor, it is necessary to define the scope of this thesis. Appreciation of humor and response to humor will be the major focus of this chapter. Inclusion of historical and contemporary explanations of the psychological function humor serves will enable the reader to approach this topic from a "global" perspective before humor and its effect within the therapeutic setting is explored. Additionally, the effects

of cognitive, social, emotional, and physiological factors on humor appreciation or response will be addressed.

The Psychology of Humor: Theory

Before offering a review of the current research available in this area, a synopsis of major theories or philosophical explanations detailing the functions humor serves will be provided. Whenever possible, historical perspectives and their contemporary correlates with attendant variations on a central theme will be reported. Inherent weaknesses to the major theoretical camps presented will be detailed in chart form at the end of this section.

Superiority Theories

Some of the earliest references to humor in Western literature (Aristotle, Plato) describe it as a process of gaining superiority over others, the environment, or specific situations. Aristotle, in ***The Poetics***, stated that wit (in this case treated as synonymous with humor) involved noting the ludicrous in some defect, deformity, or ugliness which is neither destructive or painful. This theme of noting one's superiority over others was reiterated in Plato's ***Philebus*** when he described humor as a delight in the suffering or misfortunes of others. Over the years a slight variation in this theme has been noted. Feelings of elation over the favorable comparison of oneself to others which facilitated enjoyment or laughter at another's expense was added. Hobbes is perhaps the most well known advocate of this innovation

as he viewed laughter (now being accepted as humor appreciation or response) as a "sudden glory" achieved by observing the infirmities of others and comparing them with the "eminency" of oneself. The main difference between the views of humor held by Aristotle and Hobbes appears to involve a difference in the perspective of who is laughing at whom. Aristotle and Plato felt the person who experienced humor would view himself as a "superior" person while Hobbes saw laughter as an indication of inferiority. He stated that laughter was indeed a method of disparaging others by by differentiating oneself or "triumphing over" those less fortunate. Thus sarcasm, ridicule, and satire can be viewed as humorous responses which allow one to rise above those with whom one comes into contact. Hobbes' theory has been categorized by some as a "degradation" theory because it presents a narrow viewpoint that one laughs only at that which celebrates our own achievements or the failure of others. In other words, we laugh ***at*** others; not ***with*** them. Alexander Bain (1875) extended Hobbes perspective with his statement, "The occasion of the ludicrous is the degradation of some person or interest possessing dignity, in circumstances that excite no other strong emotion" (1899, p. 257).

Thus Bain adheres to Hobbes' view of humor as an attempt to triumph over respected or significant others or over events while adding an insightful proviso which accounts for one's lack of humor in response to affect laden stimuli. He argued against opposing views of humor, as well, particularly those proposed by cognitive theorists who stressed the importance of

perception of incongruous aspects to humorous stimuli. Bain stated that incongruities were not a prerequisite for laughter in contrast to degradation, which was always present.

Stephen Leacock viewed laughter (here presented as humor response) as a "primitive shout of triumph". He added that although the origin of humor had its roots in cruelty, its appearance was becoming more "civilized" in recent years. Thus he attempted to expand earlier views by noting the mediating affects of socialization on man's aggressive nature.

Incongruity Theories

Another attempt to explain humor includes cognitive explanations advanced in three basic branches: (1) incongruity, or surprise theories, (2) configurational theories, and (3) information processing models. Incongruity theorists (Kant, Schopenhauer, Guthrie) explain humor as a response to ideas or perceptions which deviate from expectations or which would not habitually be viewed as possessing any degree of similarity or relationship to one another. This theory, as well as those supporting superiority theories, has undergone several variations over time.

Kant, generally accepted as the father of incongruity theory, viewed laughter (hereby seen as synonymous with humor response) as "an affectation arising from the sudden transformation of a strained expectation into nothing" (Kant, 1790, Bk. 2, Sec. 54). His explanation categorizes humorous response as a cognitive release mechanism which operates by building a "set" or expectation and then negating or nullifying the outcome. Surprise theories

which stress the "shock" or unexpectedness of the outcome as a necessary ingredient for humor are an offshoot of this perspective.

Schopenhauer, a proponent of humor as a cognitive response to incongruity, believed that humor occurred as a result of our desire to "escape" from reason. His description of the ludicrous follows, "The source of the ludicrous is always the paradoxical and therefore unexpected subsumption of an object under a concept which in other respects is different from it" (Schopenhauer cited in Monro, 1957, p. 148). Safety as a component of humorous stimuli has been noted by several incongruity theorists. Guthrie claimed that amusement occurred in disharmonious situations with the proviso that one must also be assured that everything is "all right" before one can find a situation or event humorous. Further support of this variation on the incongruity theme was noted by Spencer who coined the term "descending incongruity." He stated that our attention must be suddenly transformed from great things to small before something could be viewed as humorous. Laughter, viewed as a release of "nervous" energy, is accepted as the by-product of humor appreciation.

Configurational theorists, in contrast to those advocating incongruity, believe that sudden insight or "falling into place" of incongruent ideas or perceptions are the most important components operational in the generation of humor. Gestalt theory, with its emphasis on figure/ground perception, can be considered configural in nature. Maier discussed the effects of unexpected configurations as:

> The thought configurations which make for humorous experiences must: (a) be unprepared for; (b) appear suddenly and bring with it a change in the meaning of its elements; (c) be made up of elements which are experienced entirely objectively; (d) contain as its elements the facts appearing in the story, and those facts must be harmonized, explained or unified; and (f) have the characteristics of the ridiculous in that its harmony and logic apply only to its own elements (Goldstein, McGhee, 1972, p. 12).

Thus, humor occurs with perceptual shifts, a standpoint also touted by Gregory Bateson, who believed that humor initiated a "play frame" or set where any given action, gesture, or thought whether verbalized or not no longer represented the action gesture or thought it normally represented. This means that when we experience or respond to humor we are really responding to a perceptual shift in the relationship between figure and ground.

More recently, several theorists (Suls, Shultz) have posited humor response as comprised of two stages: (1) perception of an incongruity initiates the process, but (2) resolution of the noted incongruency completes the humour response.

> According to this account, humor results when the incongruity is resolved, that is, the punch line is seen to make sense at some level. Lacking a resolution the respondent does not "get" the

joke, is puzzled, and sometimes even frustrated (Suls, 1982, p. 2).

Acknowledgement that a playful "set" or "safe" environment (Suls) is necessary to evoke humorous response was also noted.

Information processing models have been used by Koestler (1964) who stated that humor was the result of a "bi-association" or transference of thought from one frame of reference to another normally incompatible frame ruled by divergent patterns or logic in an anxious or aggressive atmosphere. Leventhal (1979) incorporated cognitive stimulus with sensory and contextual input, and affect when he stated that humor appreciation involves integration of objective (stimulus oriented) and subjective (sensory - emotive - social) processing. This model may provide the conceptual framework necessary to link affect, sensory and environmental data, and cognition as component parts of the complex process involved in understanding humor.

Study of both Incongruity and Superiority theories reveal emphasis on motivational aspects of humor response. Disparagement theories, with their emphasis on triumph over others, may be compared to theories which espouse external locus of control. Here the focus is on gaining superiority over others. One's self concept appears dependent on one's ability to overshadow significant others. Humor as intrinsically motivating or pleasurable is not considered. In contrast, incongruity theories, although utilizing perception or resolution of incongruities as a motivational factor, rely heavily on internal processes, thereby avoiding the weaknesses

encountered with superiority theories but creating new difficulties. Incongruity theories fail to adequately explain social or emotive motivation for humor generation. In summary, cognitive theories such as Superiority or Incongruity theories, although plausible, appear simplistic and fail to satisfactorily address the complexity of humor as a human phenomenon.

Tension Relief/Release Theories

Theorists who believe humor is a tension relief/release mechanism fall into several camps. These include: (1) biological adaptation theories, (2) arousal theories and (3) tension release theories.

W. MacDougal is perhaps the most well known advocate of biological adaptation and survival theory. He viewed laughter (treated as synonymous with humor response for the purposes of this chapter) as an instinct whose function was to offset the effects of depression, sympathy, and other disagreeable emotions. He felt that without this innate defense mechanism, the human organism would be in danger of sinking into despair; a factor which would, in turn, lessen chances of survival. Thus, humor is a device geared toward allowing us to distance ourselves from perceptions or cognitions which result in negative emotive stimuli. Related arguments supporting humor/laughter as a human instinct include its occurrence soon after birth (within the first four months of life), the universality of laughter as a human phenomenon, and the cathartic effects of laughter on the biological organism.

Berlyne is among the most well known psychologists to analyze humor as a psychological phenomenon involving shifts in arousal levels. A rise in arousal was identified as "arousal boost" and a drop in arousal was referred to as "arousal jag" (relief). Berlyne felt that the key to understanding humor lay in understanding fluctuations in arousal levels. He viewed a moderate level of arousal as optimal, and described humor as a homeostatic mechanism geared toward maintaining these optimal levels of tension which facilitated the organism's ability to function efficiently. He viewed collative factors, that is, attempts to collate experience despite the presence of novelty, incongruity, strangeness, complexity, surprise, or contradiction; as the stimuli which trip this homeostatic mechanism by increasing or decreasing arousal levels. The anxiety produced by confrontation with various stimuli may be dissipated through laughter or humorous responses. "Man has long affirmed laughter as necessary for biological survival and recognizes that the absence of laughter and humor and play impair physical and psychological health" (McGhee, 1983, p. 117). The connection between physical well being and humor will be discussed in the next section.

Physiological Theories

Only recently have psychologists begun to explore the physiological correlates to humor response. Although most research conducted deals with laughter as a physiological survival mechanism, its occurrence as a response to perceived humor allows for exploration of this topic in this treatise. J. Walsh (1928) was one of the first physicians to prescribe laughter as a habit

to be encouraged as "a potent factor for health." He described the diaphragm as a major muscle whose location allowed it to "massage" all organs above and below, thereby modifying circulation of blood during laughter. The resultant oxygenization of blood was compared to benefits gained from physical exercise. This observation has been supported in much of the research conducted in more recent years.

Fry (1969, 1971, 1977, 1979) has conducted extensive research in physiological effects of laughter. He found, and subsequent research supports this finding, that along with the benefits described by Walsh, laughter stimulates the production of endomorphine, the body's natural pain reducing enzyme. Relaxation following laughter allows heart rate, muscle tension, and blood pressure to return to normal levels, which in turn has an impact similar to participation in physical activities. His conclusion is that humor, and laughter as its physiological correlate, are important components in the maintenance of physical health.

During the last 20 years research on the brain, particularly that geared toward identifying cerebral localization of function for specific tasks, has suggested that certain portions of the cerebellum are activated when tasks are performed. Studies in hemispheric lateralization and humor suggest that humor appreciation is dependent on integration of both the left cerebral hemisphere (analytic, language oriented, successive processing) and the right (holistic organization, simultaneous processing, spatial overtones). Svebak (1975, 1977), as a result of electro-physiological studies of cerebral

hemispheric stimulation, suggests that laughter co-ordinates processing of both hemispheres simultaneously and produces an optimal functioning cerebral level which allows one to process both the gestalt along with subtle nuances inherent to the stimulus. This supports research conducted by Fout who argued that incongruity of the "whole" is noted through simultaneous processing associated with the right cerebral hemisphere before sequential processing, a left hemispheric function, solved the incongruency through a process of analysis. Both functions are necessary for the person to experience a humorous response. Although our understanding of the physiological correlates of humor is incomplete, the majority of research appears to substantiate the hypothesis that humor appreciation involves physiological changes which have beneficial effects in terms of exercising cognitive abilities and maintaining physical health.

Psychoanalytic Theory

No treatise on humor would be complete without inclusion of Freud's writings on humor (1928) and jokes (1905) which have spurred academic interest in both topics and have generated research which accounts for much of our current knowledge in this area. Freud was the first psychologist to explore humor (jokes) in systematic detail, and he also was among the first to combine different theories as part of his explanation of the functions that these two human behaviors serve.

Freud viewed humor as a sophisticated defense mechanism utilized to relieve psychic tension generated by conflicting emotions. Humor allows

tension to be discharged in a socially acceptable manner, without interference from the super ego, which censors and prevents direct acting-out of our sexual and aggressive instincts. Therefore, humor allows us to deceive the super ego into allowing release of sexual or aggressive drives normally restricted by the super ego. The result of this release is a pleasurable relaxation of anxiety or tension. Freud claims that humor allows us to:

> . . . obtain pleasure in spite of the distressing affects that interfere with it; it acts as a substitute for the generation of the affects, it puts itself in their place . . . . The pleasure of humor comes about . . . at the cost of a release of affect that does not occur; it arises from an economy in the expenditure of affect (Freud, ed. Strachey, 1963, pp. 228-229).

In later work Freud (1928) added to this explanation by stating that humor was used to alter the relationship between super ego and ego in an effort to reduce painful emotions, particularly those associated with guilt. Thus, the super ego makes the problem which originally appeared huge or insurmountable to the ego appear small; in much the same fashion as a parent comforts an upset child. Thus, as Freud understands it:

> humour has a liberating element . . . . It is the triumph of narcissism, the ego's victorious assertion of its own invulnerability. It refuses to be hurt by the arrow of reality or to be compelled to suffer. It insists that it is impervious to

> wounds dealt by the outside world, in fact that these are merely occasions for affording it pleasure (Freud, 1928, p. 217).

Freud's inclusion of incongruity theory strengthens the psychoanalytic explanation of humor. He states that we laugh when our minds compare two psychic processes, one complex and requiring energy, the other simpler and short circuiting the first. He also defines humor as a release mechanism when he describes it as a ***method for providing discharge of psychic energy***: "(by the help of a joke), the satisfaction of the purpose is made possible and its suppression, together with the 'psychical damming-up' that this would involved, is avoided" (Freud, ed. Strachey, 1963, p. 118). Freud's writings did not neglect Superiority theory. He viewed humor and joking behavior as mechanisms which release aggressive or sexual drives not otherwise socially acceptable. This is the case with tendentious jokes.

> Tendentious jokes make possible the satisfaction of an instinct (whether lustful or hostile) in the face of an obstacle that stands in its way . . . . Since our individual childhood and, similarly, since the childhood of human civilization, hostile impulses against our fellowman have been subject to the same restrictions; the same progressive repression as our sexual urges . . . . A joke will allow us to exploit something ridiculous in our enemy which we could not, on account of obstacles in our way, bring forward openly or consciously; the joke will evade restrictions and open sources of pleasure that have become

> inaccessible. By making our enemy small, we achieve the enjoyment of overcoming him . . . " (Freud, ed. Strachey, 1963, p. 103).

Also noted in ***Jokes and Their Relations to the Unconscious*** was recognition that social elements not previously addressed as important, affect humor appreciation and response. Freud stated that jokes must involve at least three people, the comic two, the humor only one. Thus the recognition that joking behavior is an effort to generate humor often has a social context, "a joke is the most social of all mental functions that aim at a yield of pleasure" (Freud, ed. Strachey, 1963, pp. 102-103).

Freud's approach was the first to acknowledge the complexity of humor analysis. His integration of cognitive, emotional, motivational, and social factors operational in humor greatly contributed to our understanding and appreciation of its psychological significance. Later theorists postulate Freud's concept of humor may be more effective when viewed as a process of taboo violation (Alford, 1982). This constitutes a shift from emphasis on drive reduction to cognitive process and more adequately explains tendentious jokes within group or societal structures.

Social-Psychological Theories

Most sociological theories approach humor as a communication tool. The prevalence and importance of humor for development and maintenance of interpersonal relationships affect both the individual and the group within

a social context. Important factors mediating use of humor as a social regulation device appear to include:

1. the context; the audience and situational variables must be taken into consideration. One cannot joke about all things in all situations.
2. appropriateness; an implicit understanding (whether conscious or not) that humor can enhance or destroy social relationships.
3. context; humor may be used to communicate feeling, thought, etc. which might not be acceptable in a "serious" framework.
4. affiliations; humor may be used to communicate affiliation between different groups, or within a group environment.
5. control; use of humor may promote social control of the individual or individuals. It may be used to provoke confrontation or cohesion.
6. cultural components; these affect recognition and appreciation of topical issues or events as humorous.

Although the social variables related to humor appreciation and response have been noted, research in this area appears sparse and disjointed.

Problems with Past Research and Theoretical Perspectives

How does one best study humor? The answer to this question has not been ascertained. Humor, in its complexity, poses many problems for current research. Failure to adequately define this phenomenon, lack of control over component variables such as spontaneity, salience, hereby defined as "the

mental set established in a receiver to perceive certain events as funny" (Kulman, 1984; Goldstein, Suls & Anthony, 1972), attribution, or affective response to perceived stimuli all impact studies of humor.

One approach used in humor research has been the development of rating scales, cartoons with and without captions, jokes, records, etc. These materials are shown to random members of selected groups whose judgments along a humorous/non-humorous continuum or whose laughter is then used to indicate degrees of humor response. This response is then graded on four or five point rating scales used to classify reactions to potentially "humorous" material. Humor responses obtained in this manner are correlated to personality traits in an effort to enhance understanding in both areas. Generally speaking, these studies have not added substantially to our knowledge of humor and how it works. One of the greatest difficulties is our inability to conceptualize a theory of humor encompassing the four major components of human existence, (a) cognitive, (b) emotional, (c) physical, and (d) social. Humor permeates so much of our daily existence that a sound theory used to explain its relevance to the human condition or its functions must incorporate all four aspects. Failure to incorporate these spheres of influence has impaired our ability to comprehensively explain humor or its affiliated physiological responses.

Cognitive

Incongruity, incongruity-resolution, superiority, and to some degree psychoanalytic explanations of humor all have unique strengths. Although

they supply motivational aspects such as a desire to triumph over others, to solve noted incongruencies, or to satisfy normally repressed instinctual drives, they fail to explain satisfactorily the social communicative components of humor, as well as those where enjoyment of word play or nonsensical reasoning are evidenced. Additionally, with the exception of psychoanalytic theory, affective elements are largely ignored, an omission which seriously impairs the integrity of these theories. Observations of human interaction involving humor suggest affective affiliations having strong implications for individual or group humor appreciation or responses. It is not enough to state that humor occurs when strong emotions are not felt, for indeed, humor is often used to disguise the presence of strong feelings such as anger, rage, or sexual desire. Intellectual or cognitive explanations of humor rely excessively on content, and fail to account for the interaction between humor and the three spheres of influence already noted.

Emotional

Psychoanalytic theory is one of the few which recognizes and explores fully the affective component in humor. It is my belief that not only is the repression or subsumption of feelings an important component in humor appreciation, so are the expressive elements. Humor appreciation and its motoric counterpart, humorous laughter, are vehicles for expression of feelings whether they be examples of joy, of anger, or of jealousy. This expressive element has not, to date, been examined sufficiently - partly

because of the difficulty with replicating the spontaneity associated with their expression.

> The introduction of the emotional factor makes clear the need to assess separately judgements of funniness and expression of mirth and provides an internal mechanism for the well rounded social cultural observation that smiling, laughter, and humor judgement can be (and remain) highly correlated even though the level of one of the factors is moved about by some selected independent variable to which the other responses are insensitive. It is obvious that we may laugh heartily at poorly constructed incongruities, rate them as poor and silly, and recognize that we had one hell of a good time (Leventhal, Safer, 1977, p. 346).

Leventhal and Safer address another issue, that of the effect of our emotional "set" to humor appreciation and response. Mood exerts a definite impact on what we perceive as humorous or non-humorous. One who is depressed will not find amusement in stimuli that amuses others in a "playful" frame of mind. Despite difficulty with replication of mood or affect, study of humor appreciation or response conducted without consideration of this element is lacking a vital component.

Physical

Physiological correlates such as humorous laughter and smiling as well as their effect on the human organism should be included in the study of

humor. Maintaining optimal arousal levels as a mechanism for physical well being has been studied by notables such as Berlyne, Fry, and Bushnell and Scheff. Although we generally accept the beneficial effects one's "sense of humor" has for maintenance of individual health, this component has been lacking or included in a superficial manner by most theorists. One cannot ignore physiological aspects of humor when proposing theoretical explanations as to the functions humor serves. The resultant impact of humorous laughter on the respiratory, circulatory, and cardiovascular systems, with psychological benefits of stress reduction and relaxation may well become significant motivational factors which increase the probability of a specific response occurring. If laughter makes me feel better, there is a pretty good chance that I will respond to future events by laughing when I consider this response appropriate.

Social

Social aspects of humor, until recently, have been largely ignored by psychologists. Humor response, however, usually takes place in a social context. The social element appears to intensify individual reactions in humorous stimuli. What produces a solitary smile may often result in laughter when one moves from individual to group settings. Theories that ignore social components or the communicative elements of humor cannot hope to grasp the totality of humor responses or appreciation.

All of the theories proposed to explain humor as a psychological construct can be subsumed under the four spheres of influence already noted.

Thus, superiority and incongruity theories are essentially cognitive explanations of humor, arousal and health theories take a physiological perspective of humor, psychoanalytic theory addresses emotive aspects of humor, and social theories incorporate social psychological views of this topic. The following chart details noted weaknesses with each theoretical camp.

Current Research

Current research is both sporadic and disjointed. Only within the last 20 years have psychologists begun to explore the more subtle facets of humor. Emphasis on *response* (rather than stimulus) prevails. Laughter, or mirth responses used to delineate humor appreciation appear beset with problems as they require subjective evaluations of funniness rather than objective measures. Additionally, isolating and defining the precise dependent variables hampers research in this area.

Research on the effects of humor within educational settings suggests that teacher self-disparagement used to facilitate student-teacher rapport has the effect of damaging student esteem for the teacher involved (Zillman & Stocking, 1976). Content appropriate related uses of humor, conversely, may contribute significantly to increases in student perceptions of teacher effectiveness (Bryant, Crane, Comisky & Zillman, 1980). Therefore, humor used to make a point educationally appears to enhance instructor appeal (Hazel, Bryant & Harris, 1982) particularly with adults. Research with school aged children indicates differences in the effect of humor when paired with

NOTED WEAKNESSES IN PROPOSED HUMOR THEORIES

	Cognitive Theories		Physiological Theories		Emotive Theories	Social Theories
	Superiority Theories	Incongruity Theories	Arousal Theories	Health Theories	Psychoanalytical Theories	Social Learning Theories
Failure to explain/ address why stimuli perceived as humor to one may not be perceived that way by others	•	•	•	•		•
Doesn't adequately account for non-sensical humor	•	•	•	•	•	•
Doesn't address the relationship between affect and humor	•	•	•	•		
Neglects social elements of humor appreciation		•	•	•		
Minimizes effect of cognitive humor			•	•		
Doesn't address physiological correlates of humor	•	•			•	•
Not testable			•		•	
Does not adequately address negative humor (self ridicule, sarcasm)		•	•	•		
Does not address humor as direct/indirect communication		•	•	•		
Difficulty with categorization of humor response					•	•

incidental and intentional learning. Attentive students do not appear to benefit significantly from humor interjected into lecture material, particularly at ages eight and above (Hauck & Thomas, 1972). Some evidence suggests that incidental learning, particularly in young children, is enhanced by the addition of humorous stimuli perhaps as a result of increased attending behaviors (Chapman & Compton, 1978).

Studies of humor and arousal appear to lend support to Berlyne's theory of "arousal-boost" rather than her belief in the "arousal-jag" mechanism. Research incorporating documentation of changes in galvanic skin response (Langevin & Day, 1972) and those utilizing electromyographic measures (Chapman, 1976) support the "arousal-boost" mechanism as operational in the humor appreciation or incongruity resolution.

Research into the mediating effects of tendentious humor on assertion or aggression is mixed; however several generalizations seem relevant. McGhee (1979, 1980) postulated that individuals who consistently demonstrated laughter or humor initiation would also possess patterns of social assertiveness, including both dominance and aggression. Results suggest that highly developed social assertiveness correlates with humor scores. Other studies suggest that use of humor may facilitate problem solving abilities among children (Goodchilds & Smith, 1964).

The effects of hostile humor on the individual within a group appear to function inversely with social status (Gutman & Priest, 1969). The implications of this study may explain why people enjoy humor where the

"bad guy" gets his "just desserts" more than similar situations depicting the "good guy" being punished. Further research by Zillman and Cantor (1974), and Zillman and Bryant (1976) indicates one feels free to enjoy witnessing mishaps or misfortunes of others provided the victim is seen as deserving of his or her fate. This suggests a wide application to this viewpoint as even "good guys" occasionally make mistakes which may then be punished without arousal of feeling of pity or guilt.

Humor as a coping strategy has been studied rather extensively. Some support for theories advocating humor as an effective mediator for stress or anxiety has been noted (Dixon, 1980). Personality theorists such as Freud, May, and Allport support this perspective. Indications that individual humor production as opposed to humor appreciation alone may be necessary to significantly reduce stress or tension was suggested by Martin and Lefcourt in their 1983 study. Later research by Nezu, Nezu and Blissett (1988) differentiated anxiety from depression and found humor moderated depressive symptomalogy more effectively than anxious behavior. Recognition that social factors and cognitions were not considered or included as dependent variables in this study was also noted.

More recently, attempts to integrate cognitive and psychoanalytic models of humor function have been noted (Kuhlman, 1985). This most unexpected finding involved a consistently higher mirth rating generated by taboo humor. Suggestion of a transference of emphasis from Freud's theory of humor as a drive reduction mechanism to a taboo violation strategy

enables one to incorporate cognitive incongruity theories which the motivational aspects of psychoanalytic theory advocate. This amalgamation would, Kuhlman suggested, explain social factors influencing humor not previously addressed in Freud's original work.

In conclusion, a review of traditional theories suggests a more "global" approach is necessary if one wishes to make significant advances in understanding of humor and its functions. My belief is that humor cannot be adequately explained from a "pure" science perspective, nor should the creativity or "art" involved be ignored. I do not see the significance of dissecting jokes to determine which cognitive processes trigger humorous responses, nor do I think views of humor which attempt to categorize it as a drive reduction mechanism, homeostatic device, cognitive process, or communication tool in isolation do it justice. Humor involves all of these aspects in differing degrees. Humor involves the "whole" person and cannot be comprehensively explained by looking at component parts in isolation. Research which focuses on motivational aspects and resultant effects of destructive or constructive humor seems more valuable than research geared towards determining what elements constitute a "successful" joke. Humor as a therapeutic tool, to be explored in the next chapter, may provide some answers to these questions.

CHAPTER III

HUMOR IN COUNSELLING

Introduction

The use of humor in psychotherapy is presently more an art than a science. Humor is a powerful communication tool which can be used to straddle cognitive and affective domains. Although there is little empirical evidence to support its use as a therapeutic device, I believe humor is a powerful factor in promoting individual growth. Certainly, humor is not a panacea. It must be used appropriately and within the context of the unique relationship between therapist and client. As with any counselling intervention, indiscriminate or inappropriate use may be damaging to the client. The use of ***appropriate*** humor within psychotherapy has been addressed by Thomas Kuhlman:

> One soon cultivates a sense of when a humorous interlude should be made the focus of the therapy and when it is best left in the background. And one acquires a new dimension upon which to assess one's clients and their progress toward therapeutic goals. At the present time in my practice there is one client with whom I share humor as often as possible; another whose constant efforts to generate humor are discouraged; and others with whom infrequent humor is appreciated in its own right ***and*** for the light its sheds upon

> where the person is at a given time and where the person is likely to be moving in the near future (Kuhlman, 1984, pp. 5-6).

In order to explore this topic, the following chapter will include a synopsis of several psychotherapies utilizing humor as a therapeutic tool or as the goal of therapy. Frankl's logotherapy and particularly paradoxical intention will be presented as will systemic therapies which have adopted paradoxical interventions as a therapeutic technique. Provocative therapy, and Natural High therapy, which share commonalities with Albert Ellis' Rational Emotive therapy, have expanded the use of humor within counselling as a method for confronting maladaptive behavioral patterns and as an indication of movement toward self actualization. In recognition of the importance of presenting a balanced portrait of the possibilities humor presents to counselling, Kubie's lists of risks associated with introducing humor into therapeutic encounters is presented along with a list of possible benefits.

Therapies Which Utilize Humor

Logotherapy

Victor Frankl was among the first to systematically apply humor as a therapeutic device. Logotherapy, a term he coined to describe existential psychotherapy, included recognition of humor as a distancing or perspective gathering technique. In ***The Will to Meaning*** (1969), Frankl addresses the function of humor: ". . . humor allows man to create perspective, to put

distance between himself and whatever may confront him. By the same token, humor allows man to detach himself from himself and thereby attain the fullest possible control over himself" (p. 108).

This ability to distance oneself or see oneself objectively relates to earlier work by Allport (1937, 1961) which lists six criteria for human maturity:

1. Extension of the sense of self. The mature individual actively participates in the world around oneself.
2. Warm relating of self to others. The mature individual has the capacity for intimacy as well as compassion toward others.
3. Emotional security (self acceptance). The mature person can maintain a sense of proportion in the face of life's vissitudes.
4. Realistic perception, skills, and assignments. A mature person does not confuse fantasy with reality and adopts problem solving strategies to confront tasks.
5. A unifying philosophy of life. Mature people seek direction/purpose in their life.
6. Self-objectification: Insight and humor. Mature persons know themselves and are able to view self with objectivity.

The last criteria relates humor to insight, as does Allport's definition of humor as "the ability to laugh at the things one loves (this includes self in a 'wholistic' framework) and still to love them" (p. 292). Thus humorous insight allows for distancing of self from whatever issues cause pain, a

prerequisite to acceptance of self and others. As Hague (1986) states, "Insight and humor go hand in hand because they are at bottom a single phenomenon - self objectification." Hague (1988) explains this as a "process, rare and difficult to attain, of looking at oneself as if from outside, seeing oneself as an object for examination, while experiencing the subjectivity of the other." The concept of self objectification was originally addressed by Dabrowski, a contemporary of Frankl's, who developed an evolutionary, multilevel theory of human development in which those at higher levels of development "distanciate" themselves by intentionally transcending egoistic, subjective perspectives and adopting autonomous, authentic, and most importantly, empathetic perceptions of self and others.

The development of paradoxical intention, a technique of symptom prescription introduced by Frankl in 1939 and used to alleviate symptomatic behaviors in phobic or obsessive - compulsive patients, was found to effectively eliminate these behaviors by disrupting the cycle of anticipatory anxiety generated by the patient's attempts to "fight or flee" the symptom. Frankl stated:

> The reader will note that this treatment consists not only of reversal of the patient's attitude toward his phobia inasmuch as the usually "avoidance" response is replaced by an intentional effort - but also that it is carried out in as humorous a setting as possible . . . . A phobic person usually tries to avoid the situation in which his anxiety arises, while the obsessive

> compulsive tries to suppress, and thus fight, his threatening ideas. In either case the result is a strengthening of the symptom. Conversely, if we succeed in bringing the patient to the point where he ceases to flee from or fight his symptoms, but on the contrary, even exaggerates them, then we may observe that the symptoms diminish, and that the patient is no longer haunted by them (Frankl, 1967, pp. 145-147).

The role of humor in assisting the client to distance himself from his neurotic condition was emphasized by Frankl, perhaps in recognition that in many cases, the patient was observed to burst into laughter when instructed to intend the symptom. One of Frankl's well known cases demonstrates this technique:

> A young physician came to our clinic because of severe hidrophobia. He had been troubled by disturbances of the autonomic nervous system for a long time. One day he happened to meet his chief on the street, and as the young man extended his hand in greeting, he noticed that he was perspiring more than usual. The next time he was in a similar situation he expected to perspire again, and this anticipatory anxiety precipitated excessive sweating. It was a vicious circle; hyperhidrosis provoked hidrophobia and hidrophobia, in turn produced hyperhidrosis. We advised our client, in the event that his anticipatory anxiety should occur, to resolve deliberately to

> show people whom he confronted at the time just how much he could really sweat. A week later he returned to report that whenever he met anyone who triggered his anticipatory anxiety, he said to himself, "I only sweated out a liter before, but now I'm going to pour out a least ten liters!" (Frankl, 1967, p. 146).

The resultant expiration of the original symptom within a brief time span was attributed to client's change of attitude, which interrupted or arrested his anticipatory anxiety.

The fact that paradoxical intention has been used successfully by a number of Frankl's students and supporters (Ascher, 1979; Gerz, H., 1966; Febreyeyal, F., 1979) lends credence to its stature as a legitimate therapeutic intervention.

Paradoxical Psychotherapy

The use of paradox has been adopted as the cornerstone of several types of brief therapy and has been used widely in systemic approaches to family therapy. Systems therapy, often synonymous with family or marital counselling, approaches client(s) from the perspective that they are beings in relationship. The individual is a member of a number of interconnected systems or subsystems, circular in nature, whose primary aim is to maintain homeostasis or balance. Consequently, people will work actively toward continuance of functional or dysfunctional interactional patterns. Strategies such as triangulation, the joining of two subsystems against a third subsystem, are used to stabilize traditional behavior patterns, or to maintain boundaries

or alliances between group or family members irrespective of their effect on the system as a whole. Accordingly, systems therapy operates in the "here and now" and seeks to "unbalance" dysfunctional patterns of interaction which perpetuate symptomology to allow more functional patterns to appear. Change in one member of the system has an effect on the system as a whole. Humor within systems therapy can be used to challenge family alliances, myths, or meanings, to join with various family (group) members, to make a point, or to illustrate family metaphors (symbolic expressions of idiosyncratic beliefs or truths of a particular system) (Minuchin & Fishman, 1981, pp. 43-44, 48, 58, 65, 90, 109, 122, 289).

Paradox, within systems theory or as a brief therapy technique, can be utilized as a method of symptom prescription which circumvents client(s) resistance to change. When more direct methods of intervention are unsuccessful, paradox, a defiance based intervention, may be effective. The use of paradox is based on several assumptions:

1. the individual or family system operates as a self-regulating homeostatic system,
2. the symptoms act as a mechanism to maintain homeostasis,
3. the individual or family system will resist change.

As with Frankl's paradoxical intention, the intervention will eventually result in the opposite effect to what it appeared to intend. That is, client(s) will either continue a pattern to the point of absurdity or defy the counsellor's instruction thereby accomplishing the therapeutic goal of decreasing

symptomology. The uses of therapeutic "double binds", statements or questions that allow choice between two or more comparable positive alternatives, are closely aligned to other paradoxical techniques geared toward overcoming client resistance to change (Weeks & L'Abate, 1982, pp. 246).

Anecdotal literature involving paradox suggests that humor plays a large part in paradoxical intervention. Some schools of systems therapy such as the Milano group (Boscolo, Cechin, Palazzolia & Prata) discourage humorous delivery of paradoxical approaches to therapy although they note that client response may include laughter when symptoms are prescribed. Other systemic therapists (Bateson, Erickson, Minuchin, Haley) deliver paradoxical statements in a humorous or playful tone. Client(s) response to paradoxical interventions may vary from indifference to humor, surprise, shock, denial, hurt, or anger.

> The most common emotional reactions we have observed to paradoxical interventions are humor and confusion. Both these reactions seem to indicate that the intervention is on target. Most clients are upset by their symptoms. If they can laugh at the symptom, see it as absurd, or gain some distance from it, then the symptom has acquired a different emotional meaning. Humor itself is paradoxical. The punch line of a joke contradicts or meta communicates on the previous line. It could be argued that a humorous response indicates a reframing of the

problem from something to feel sad about to something to feel glad about (Weeks & L'Abate, 1982, p. 229).

At least part of the humor generated in paradoxical psychotherapy appears to stem from the process of cognitive restructuring whereby something once greatly feared becomes viewed as something absurd or laughable, a process which results in a shift of power away from the "symptom" and toward the client. Thus Frankl's assertion humor allows us to distance ourselves from personal issues evolves to include insight as a by-product of humor. One difference between Frankl's use of paradoxical intention and paradoxical intervention as prescribed systemic therapies involves the position of the client. Frankl laughed *with* his clients and treated them as equals. Strategic therapists, particularly those engaged in brief therapies, have been criticized for presenting themselves as superior, often enigmatic individuals who dispense "truths" to clients in a condescending or deliberately vague manner. Use of letters and notes with puzzling comments suggest game playing and one wonders if clients will ever be let in on the joke.

Provocative Therapy

Another current psychotherapy which utilizes humor to facilitate client insight is Provocative Therapy developed by Frank Farrelly. His use of critical humor such as ridicule, sarcasm, and mimicry is geared toward forcing the client away from established maladaptive cognitions and/or behaviors toward socially/emotionally appropriate ones. One of the central tenants in

this therapy is the belief that: "people exhibit oppositional behaviors . . . . If urged provocatively (humorously and perceptively) by the therapist to continue in his or her self defeating, deviant behavior, the client will tend to engage in self-and other-enhancing behaviors, which more closely approximate the societal norm" (Corsini, 1981, p. 684).

Farrelly's beliefs appear consistent with Freud's in that humor is "rebellious" and his use of humor to circumvent the defensive ploys presented by individual clients highlights this refusal to follow established patterns of interaction. Corsini (1981) views this approach toward therapy as based on five major assumptions. First, people are capable of change. Second, people are not fragile creatures - they have strength. Third, people respond to challenges. Fourth, people have a tendency to respond to situations or events in well established interactional patterns. Fifth, and this may well explain why Farrelly's "critical" humor works, people receive non-verbal messages more strongly than verbal messages.

In answer to criticism directed toward the sarcastic, often biting approach adopted by therapists practicing provocative therapy, Farrelly states that sarcasm or ridicule is never directed toward the patient but is used to provoke change in maladaptive behaviors.

> Since often the provocative therapist transmits very negative feedback (to sensitize or desensitize, set limits, provoke reality resting, etc.) he or she must also counterbalance that with highly positive non-verbal messages (for support, to make more

palliative the rather bitter pills all of us must swallow at times, etc.) (Farrelly cited in Corsini, 1981, p. 684).

Farrelly's work appears to have parallels in several other psychotherapies. His configuration of inappropriate coping strategies closely resembles the approach taken by Albert Ellis (Rational Emotive Therapy) in attacking irrational belief systems. Use of sarcastic humor is also reminiscent of paradoxical techniques already described in that clients receive incongruent messages when they are urged to continue self-defeating behaviors. Finally, some aspects of provocative therapy appear consistent with Reversal Theory (Apter, Fontana, Murgatroyd, 1985). Reversal therapy revolves around the concept that people alternate between paratelic (playful, spontaneous, arousal seeking) states and telic (serious, future oriented) states. Failure to move flexibly from one state to another often results in socially inappropriate behaviors. Farrelly's use of humorous exaggeration to confront maladaptive behavior closely resembles the use of humor as a "flooding device--using grossly amusing images of the consequences of the client's behavior repeatedly" (Murgatroyd, 1987, p. 234) generally associated with those practicing psychotherapy from a reversal theory perspective.

Natural High Therapy

This form of psychotherapy, developed by Walter O'Connell, advocates humor as a ***goal*** of therapy rather than an indicator of adaptive behavior. Therapists utilizing this perspective maintain a "here and now" orientation and demand active participation from their clients. Humor is viewed as the

vehicle through which self actualization (natural high) is reached. Focal concepts include the use of humor geared toward provoking clients into giving up irrational "demandments" and "negative nonsense" which constrict the development of positive self esteem and social interest, two aims closely aligned to the work of Alfred Adler. Corsini, in his discussion of innovative therapies, highlights the importance of humor with Natural High Therapy.

> A premise of Natural High theory is that early constrictions are always potential stress reactions. Humor, coming after SE (self-esteem) and SI (social interest) expansion and an appreciation for life's paradoxes, gives a distancing perspective, a "God's eye view," that nips constrictions in the bud. Humor is the chief coping capacity. Beyond being in the service of the ego addictions, humor is a perspective in the service of the self, the royal road toward actualization (Corsini, 1981, p. 561).

Individual therapy sessions move quickly to group sessions where "encouragenic" strategies are used to facilitate client growth. Patients move through three stages or levels in their development toward self actualization. Initially, they struggle to move from external to internal locus of control thereby generating an internalized sense of self worth. During the second stage, clients work toward developing positive social interest and the ability to encourage and be encouraged by others. Finally, the person transcends "ego addictions" and various "demandments" in order to explore higher level goals inherent in self actualizing persons. O'Connell's development of

humordrama incorporates teaching individuals to develop a sense of humor within a therapeutic context.

As in Provocative Therapy, many of the tenets developed by Albert Ellis which contain reference to humor as a tool to challenge irrational belief systems have been incorporated. Utilization of a cognitive-humanistic counselling perspective, however, precludes the use of critical humor practiced by Farrelly.

Other Therapies

Several other schools of therapy utilize humor as a instrument to encourage change. One of these is Rational Emotive Therapy, developed by Albert Ellis, which follows a "present" centered approach to challenge or attack a clients' irrational beliefs. Behavioral, cognitive, and emotive strategies are adopted to provoke the client into giving up "shoulds", "musts", "ought tos", or other "demandments" which constrict their enjoyment of life. The following excerpt illustrates the therapist's use of humor to direct the client's awareness of her attempt to restrict therapy to a superficial or "safe" level.

C-27: I can't imagine existing, uh, or that there would be any reason for existing without a purpose!

T-28: No, but the vast majority of human beings don't have much purpose.

C-28: [angrily] All right then. I should not feel bad about it.

T-29: No, no, no! Wait a minute now. You just ***jumped.*** [Laughs] You jumped from one extreme to another! You see, you said a sane sentence and an ***insane*** sentence. Now, if we could get you to separate the two - which you're perfectly able to do - you would solve the problem. What you really mean is: "***It would be better*** if I had a purpose. Because I'd be happier." Right?

C-29: Yes.

T-30: But then you magically jump to: "Therefore I ***should***!" Now do you see the difference between, "***It would be better*** if I had a purpose," and "I ***should***, I ***must***, I've ***got to***?"

C-30: Yes, I do.

T-31: Well, What's the difference?

C-31: [laughs] I just said that to agree with you!

T-32: Yes! See, that won't be any good. We could go on that way forever, and you'll agree with me, and I'll say, "Oh, what a great woman! She agrees with me." And then you'll go out of here just as nutty as you were before!

C-32: [laughs: this time with genuine appreciation and good humor] (Corsini, 1984, pp. 216-217).

Although humor appears to be used frequently by counsellors who adhere to this school of therapy, mention of humor as a therapeutic device

is minimal and generally treated as part of the repertoire of strategies for attacking a client's irrational beliefs.

Gestalt therapy, originally developed by Frederick (Fritz) Perls, also advocated a "present" centered, phenomenological approach. Subsequently, Gestalt Therapy underwent a period of change, perhaps in recognition that Perl's charismatic personal characteristics were a large part of his therapy. This therapy remains experiential in nature with a strong focus on developing client awareness of "what is" for them in the present moment. The goal of therapy is client self acceptance and esteem.

Counsellor's who practise from this perspective seldom mention humor as a vehicle to promote authenticity or change. However, several techniques, most notably enactment and exaggeration, allow for the use of humor to facilitate increased self awareness. Polster and Polster (1973) address the issue of humor as it relates to enactment of unfinished business. "Humor is a creative recognitive of the redeeming aspects of what may otherwise be experienced flatly or as merely negative" (p. 243).

Lefcorert et al. (1974) assert the use of humor is directly related to an individual's locus of control. Those who view events or situations as under their control (internal) will engage in humor more than those who view events or situations as beyond their control (external). George and Dustis (1988) emphasize the importance of humor as a personal attribute of group leaders to produce modelling effects, facilitate the healing process, normalize concerns, and to create bonding between group leaders and group members.

Although they add qualifications to the use of humor within counselling which include directing critical humor toward irrational behaviors or beliefs rather than toward persons involved with the group, they advocate humor as an effective therapeutic tool.

The literature relating to humor in counselling is considerably less developed than research geared toward explaining humor as a psychological phenomenon. Controversy over therapeutic uses of humor - boon or bane - within therapy may be partially responsible for this situation. Kubie, a well known psychiatrist, touched off heated debate in this area. His contention that humor had the potential to: (a) damage therapeutic relationships, (b) cause anger or hurt or inhibit client reactions, (c) minimize concerns, (d) strengthen defense mechanisms, (e) block free association, (f) disguise issues, and (g) meet therapist needs at the expense of client needs, remains the cornerstone for arguments against the use of humor in counselling. As evidence supporting either claim is largely anecdotal, personal beliefs and professional judgement play a large role in determining when humor is appropriate or "therapeutic." The possible benefits and risks related to humor in counselling follow. Many psychologists advocate caution before engaging in humor while counselling. "Indeed the premature adoption of humor in psychotherapy may be unilaterally and partially gratifying - like premature ejaculation - but it could in the long run surely prove disastrous for the total enterprise" (Saper, 1988, p. 317).

Summary of Possible Benefits of Humor Within Counselling

Humor as a Communication Tool

1. may assist in development of therapeutic relationship, facilitate bonding, sharing (Kuhlman, 1984),
2. is a relatively safe way to express concerns,
3. may be a signal of more adaptive behavior (Allport, 1968 cited in Murgatroyd, 1987),
4. may communicate alliances, affective affiliations,
5. allows the therapist to enter the client's world view as humor is often rich in metaphor (Coleman, 1962; Erickson cited in Haley, 1973),
6. can be used as a projective technique (Kuhlman, 1984; Levine & Relich, 1955),
7. equalizes the client - counsellor relationship.

Humor as a Coping Strategy

1. is a safe means of reality testing - taboo violation (Alford, 1982),
2. allows the client to distance self from issues, and to maintain sense of proportion (Frankl, 1969),
3. functions as a signal of affective control (Sands, 1984),
4. is a safe expression of aggression or hostility (Sands, 1984),
5. normalizes or legitimizes concerns (Driscoll, 1985; Lefcourt & Martin, 1986),
6. functions as a coping mechanism (Goldstein, 1976),
7. can de-escalate crisis (Smith, 1973).

Humor as Tension Relief/Release

1. may offer a release of tension/anxiety, relief from physical pain (Lefcourt & Martin, 1986),
2. may be an expression of mastery, e.g., whistling in the dark phenomenon (Levine, 1977),
3. systematic desensitization: humor appears incompatible with anxiety or anger. It may be used to assist clients to gain affective control (Ventis, 1973).

Humor as a Cognitive Strategy

1. encourages flexibility of thought, creativity, spontaneity. These may lead to insight (Allport, 1961),
2. is a perspective gathering technique (Kuhlman, 1984),
3. facilitates attitudinal change (Ellis, 1977),
4. may bypass resistance (Grotjahn, 1967, 1970; Roseheim, 1974, 1976),
5. may facilitate new or expanded awareness (Kuhlman, 1984),
6. includes an element of surprise which may facilitate cognitive restructuring (Kuhlman, 1984).

Other - Humor

1. is in itself a pleasurable activity. This may be therapeutic (Levine, 1979),
2. appeals to oppositionality in clients (Driscoll, 1975).

Summary of Possible Risks of Humor Within Counselling

Humor

1. damages the therapeutic relationship (Kubie, 1971),
2. may not be pleasurable to the client (Kubie, 1971),
3. may cause anger or hurt and inhibit expression of these feelings (Kubie, 1971),
4. may be used to meet the therapist's needs rather than the clients (Kubie, 1971),
5. can block or arrest free association (Kubie, 1971),
6. may cause pain or confusion (Kubie, 1971),
7. may disguise issues (Zuk, 1966),
8. can be a form of client resistance,
9. can increase self depreciation (critical humor),
10. may minimize concerns/issues (Kubie, 1971),
11. may be used to strengthen defense mechanisms (Freud, 1928c, Kubie, 1971).

Conclusion

In conclusion, although many therapists advocate the use of humor as a communication tool, coping strategy, tension relief mechanism, or as a sign of healing/health, one must be cautious with its use. Inappropriate use of humor has the potential to irreparably damage the counsellor-client relationship particularly because hurts delivered in a joking manner are

ambiguous and as such create confusion which may inhibit the client's expression of hurt or anger thus creating barriers to the healing process. Exploration of therapist and client interpretations and attributions to humor which occur within therapeutic encounters may minimize risks in situations where rapport between client and counsellor has already been established. Use of humor in counselling relies on the professional judgement and personal skill of each particular therapist. Thus, effective therapists will use humor effectively while ineffectual therapists will use it ineffectually. Humor is no different in this respect than any counselling technique which is part of the therapist's repertoire. It can be potentially helpful or harmful according to the manner in which it is used.

Empirical Investigations of Humor

Traditionally, empirically based attempts to study humor as it relates to counselling revolve around the effect of humor on establishing rapport with clients, and on increasing positive client perceptions of the therapeutic process. Although results appear inconclusive, a summary of several well known studies follows.

Bernard Saper (1987) reviewed some of the studies conducted over the period from 1973 to 1984. This included Labrentz's (1973) study of the effects of humor prior to initial counselling sessions on the counsellor client relationship. Presentations of cartoon humor prior to therapy resulted in significantly higher scores on the Relationship Questionnaire than those

obtained in a control group (counselling only), a group placed in a waiting period, or those given geometric designs to examine before the initial session. A study by Huber (1974) hypothesized that therapist introduced humor would decrease client discomfort of tension as measured by the discomfort relief quotient and affect the client's perspective of the counselling relationship. The findings did not support the initial expectation that humor would decrease client tension within the counselling session. Golub (1979) conducted research to determine whether the use of humor within counselling would enhance the subject's positive ratings on both the counsellor and the counselling session. He used video tapes, actors, and detailed scripts which emphasized humor to gently confront client statements and highlight therapist-client processes. Data analysis did not show any significant difference between the subjects evaluations of counsellors who used humor and those who did not. Once again, the value of therapeutic humor remains questionable. Insufficient empirical evidence exists to determine whether humor helps or hinders the healing process. Difficulty isolating humor as a variable, replicating what is essentially a spontaneous phenomenon, factoring out situational and personality characteristics all hamper research which is essential to an empirical verification of the significance of humor within counselling.

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SECTION II

CHAPTER IV

FORGIVENESS FROM A CHRISTIAN THEOLOGICAL AND PYSCHOLOGICAL PERSPECTIVE

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FORGIVENESS AND PSYCHOTHERAPY

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FORGIVENESS FROM A CHRISTIAN THEOLOGICAL AND PSYCHOLOGICAL PERSPECTIVE

Introduction

Definitions of forgiveness vary from "the reacceptance in favour of one by whom we have been offended" to "a cancellation or remittance of a debt, fine, or penalty." Jewish tradition suggests that Christian conceptions of forgiveness stem from the Hebrew verbs **maha** (to wipe out) **nasa** (to take away) **ksy** (to cover), and more importantly **salah** (to forgive). Thus the Jewish perspective of forgiveness as "divine" prerogative precedes references within the Old Testament where forgiveness of sins is also discussed from the perspective of divine forgiveness, that is, God's forgiveness of man's transgression against His laws (sin). Exploration of forgiveness as a construct in Christian theology will precede similar discussion within the field of psychological theory. Eastern religions such as Buddhism and Hinduism will not be explored in this chapter despite the fact that "non-violence" in Hinduism and "compassion" in Buddhism are tangentially related to forgiveness. Their system of beliefs differ greatly from Christianity and are beyond the scope of this thesis.

This analysis is concerned with understanding forgiveness within the tenets of both Christianity and psychology. In contrast to the abundance of material available in theological texts, information on forgiveness and its

relation to psychological perspectives is sparse and necessitates extrapolation of general concepts from overall theories. The relationship between forgiveness within Christian theology and modern psychology will be explained following presentation of each theoretical framework.

Christian Theological Views of Forgiveness

Forgiveness is both prescribed and described in the old and new testaments. In both testaments, God the Father is presented as a patriarchal figure, the disciplinarian, both merciful and vengeful, capable of forgiving or pardoning sin or withholding His forgiveness, often extracting retribution for wrong doing. The most significant difference between the old and new testaments is the change in emphasis from "divine" forgiveness in the old, to "human" forgiveness in the new. The introduction of Jesus, Son of God, is the agent whereby this shift is made. Just as God appears to represent the father figure, Jesus presents a more nurturing presence exemplified by his commands to "love thy neighbor as thyself" and "love thine enemies". This change of focus from man's relationship to his God to man's relationship to his fellow man constitutes a major difference between the two testaments.

The Old Testament

Within the Old Testament forgiveness was viewed primarily from the perspective of divine forgiveness, that is, God's forgiveness of man's transgressions. God is often portrayed as reactive in a "human" sense,

becoming angry or proud, with the capacity to change His mind or forgive as part of His own unique state of being.

In response to these transgressions of divine will, God did not always forgive and often demanded some form of retribution for sin. One example of this principle is observed when Moses climbed Mount Sinai to receive the tablets on which the ten commandments were to be written. The Israelites, uncertain of Moses' fate, constructed a golden calf and began to worship it instead of Yahweh (God). God threatened to kill all of them but Moses interceded and God allowed him to punish only the idolators, approximately 3,000 people. Moses then asked God's forgiveness.

> Moses then went back to Yahweh and said, Oh, this people has committed a great sin by making themselves a god of gold. And yet, if it pleased You to forgive their sin . . . ! If not, please blot me out of the book You have written! Yahweh said to Moses, "Those who have sinned against Me are the ones I shall blot out of My book. So now go and lead the people to the place I promised you. My angel will indeed go at your head but, on the day of punishment, I shall punish them for their sin. And Yahweh punished the people for having made the calf . . . " (Exodus 32:31-35).

This pattern of acceptance ***after*** punishment is repeated in other sections of the old testament where God is portrayed as loving and wrathful, just but exacting, punishing but forgiving. In short, God is a powerful

controlling figure who does not tolerate disobedience or sin without defining consequences, sometimes harsh consequences, but who is willing to forgive sin and reconcile with his followers.

The New Testament

In the new testament, the life and teachings of Jesus Christ introduce a new element. Where the old testament emphasized divine forgiveness, Jesus' actions and sermons emphasize human forgiveness. Some examples of Jesus' statements regarding forgiveness are provided:

> And when you stand in prayer, forgive whatever you have against anybody, so that your father in heaven may forgive your failings too (Mark, 11:25-26).
>
> . . . and forgive us our sins, for we ourselves forgive each one who is in debt to us (Luke 11:3-4).
>
> If your brother does something wrong, rebuke him and, if he is sorry, forgive him. And if he wrongs you seven times a day and seven times comes back to you and say, "I am sorry," you must forgive him (Luke 17:4).
>
> Yes, if you forgive others their failings, your heavenly Father will forgive you yours; but if you do not forgive others, your Father will not forgive your failings either (Matthew 6:14-15).
>
> Then Peter when up to him and said, "Lord, how often must I forgive my brother if he wrongs me? As often as seven times?

> Jesus answered, "Not seven, I tell you, but seventy-seven times (Matthew 18:21-22).

Jesus told many stories or parables in which forgiveness was emphasized as an underlying theme. One of the best known involved the prodigal son of a prosperous man who "squandered his money on a life of debauchery" (Luke 15:13). When his money was gone, the young man decided to return to his father's home to seek employment as a servant as he felt unworthy of being included with other family members. His father, instead of reproaching him for past behavior, welcomed him back into the family, an action which enraged the prodigal son's older brother who protested his father's generosity in accepting the errant son back into the family.

> Central in this parable is the total acceptance by the father of one who, by the world's judgement, is not worthy to receive. The difficulty in one human being forgiving another is found in the figure of the older son who bitterly protests his father's kindliness to his brother. The story can be seen as an analogy of the depths and availability, of God's love for human beings, as well as the difficulty humans have in sharing that love with one another, (Pastor, 1986, p. 57).

This parable introduces the concept that forgiveness allows us to create new possibilities or new relationships. It is essentially a "freeing" act motivated by love or acceptance for self and other(s). Failure to forgive

constricts our ability to move out of the grip of irreversible history, and maintains our stance as prisoners of our past.

A second parable, that of the unforgiving debtor, highlights the relationship between being forgiven and forgiving and brings into focus the concept of responsibility for one's actions. In this story, a servant owes his master a huge sum of money which he is unable to pay. The master orders that he, his family, and possessions be sold in payment of this debt. The servant begs his master to be patient and give him time to raise the capital he owes. His master, feeling sorry for him, cancels his debt and allows him to go free. After leaving his master's presence, the first servant meets another servant who, in turn, owes him a small amount of money. Despite his fellow servant's pleas for patience and vows to repay the debt, the first servant has him thrown into prison. When the master hears what has happened he sends the "wicked" servant to the torturers until his debts are paid. Jesus ended this parable by saying, "And that is how my heavenly Father will deal with you unless you each forgive your brother from your heart" (Matthew 18: 35).

Thus, the concept of retribution for wrongful behavior introduced in the old testament is reiterated in the new testament. Additionally, Jesus acknowledges his Father's power to forgive (pardon) and/or effect retribution for wrong doing while focusing his actions and words on assisting man to understand and practice ***human*** forgiveness.

Reconciliation

Reconciliation stems from the Latin word ***re-concilio*** meaning "to come together again." Traditionally reconciliation carried the function of initiation into the Christian community and the renewal of faith and fellowship with God and community after sins had been purged. Borobio (1986) defines it as "uniting what was split, cancelling debts, making friends of enemies, peacemaking in quarrels. Reconciliation requires communication and meeting in many relationships, the central one of which is that between the merciful God and the sinful human being" (p. 100). Reconciliation then functions as the culmination to the process of forgiveness. The 1986 national meeting of the Federation of Diocesan Liturgical Commissions focused on this topic from several perspectives. Doris Donnelly detailed the relationship between reconciliation and forgiveness.

> A great deal of confusion exists in our use of the words "forgiveness" and "reconciliation". For me, the equation has three terms. The first is hurt, which needs to be identified, tested, and owned before we proceed to forgiveness, which is possible only by reaching to a power beyond us. Forgiveness demands that we look our hurt straight in the eye, that we assess the damage done to our psyches, our bodies, our spirits, and with all our wits about us choose - decide - will to forgive. That may sound preposterous, but only in that way is healing to be found. The third and final step of the equation is

> reconciliation, which is a bringing together of that which belongs together but is apart (1986, p. 17).

Marion Pastor adds to our understanding of reconciliation by summing up the writings of the noted theologians Taylor, MacKintosh, Redlich, Cobb, Piper, Klassen, and Barton.

> . . . the cited theologians are speaking of divine forgiveness. To them human forgiveness too is a free action based on the loving and generous nature of the forgiver, in which the intention is to remove the barriers to relationship which have been set up by the offender. For most of them it carries the further connotation of a restoration to fellowship. It may or may not involve the mitigation of punishment in part or in whole (Pastor, 1986, p. 22).

Reconciliation demands acceptance of oneself and of others which results in the creation of expanded possibilities for future relationships.

Church Doctrine

Historical accounts of church dogma related to forgiveness suggest that while Church officials espoused agreement with Christ's teachings related to forgiveness, they placed little faith in human forgiveness without establishing some form of atonement or repentance.

> Some examples are the doctrine ratified at Nicea in 326 A.D., stating that the church was the only authorized source of

> forgiveness; Augustine's doctrine a hundred years later stating that all human beings were born sinful and in need of baptism into the church or were doomed to damnation; and Anselm's doctrine in the eleventh century that Christ died on the Cross because God's justice required that someone had to be punished before he could forgive the sins of mankind (all referenced above) . . . (Pastor, p. 97).

Historical accounts of the Church's internal and external strife appear to support Pastor's contention that church officials accepted wholeheartedly Jesus' statements of the importance of human forgiveness, thus obeying the letter of the law, but dismissed these teachings as not practical or "humanly" attainable, thus denying the spirit of the law. Only recently have several well known theologians and pastoral counsellors (Smedes, Augsburger) addressed human forgiveness as a viable "way of being" in the world.

"Forgiveness is God's invention for coming to terms with a world in which, despite their best intentions, people are unfair to each other and hurt each other deeply. He began by forgiving us. And he invites us all to forgive each other" (Smedes, 1984, vii).

Thus a shift from the perspective of man as sin-full to man as hope-filled has been noted in many Christian churches over the last half century. The possible influence of psychology on theology may, in part, account for these changes and will be discussed in future sections of this Chapter.

Agapé

We must address one final component to understanding forgiveness within a Christian context - that of love. There are at least two kinds of love understood within Christian philosophy, romantic love and that of agapé, or brotherly love. Agapé love is love of man for mankind, a spiritual joining or feeling of care and concern for our common humanity. It refers to a universal, unconditional love motivated by altruistic empathetic care for others viewed as a gift from God. The Dictionary of Christian Ethics sums up the relationship between love and forgiveness in the following way:

> In love, God faithfully favors humanity with his presence and grace. In forgiveness, God "sends away" or "pardons" or "covers" human disavowal and violations of this divine initiative . . . As ***human actions***, the practice of love through forgiveness and justice expresses the response in behavior toward God and toward one's fellow human beings of what God characteristically and revealingly does toward and for the human meaning and fulfillment of life . . . . Love is the unexceptional readiness in word and deed to "bear one another's burdens, and so fulfil the law of Christ" (Gal. 6:2). Forgiveness is the "sending away" or "pardoning" or "covering" what has come between persons who as neighbors have become enemies (pp. 235-236).

Also noted is the relationship between love and forgiveness as part of the process of reconciliation. Thus agapé functions as the motivation for

initiation of the process of forgiveness which ends in reconciliation between the offender and the offended.

Psychological Views of Forgiveness

Freud

Sigmund Freud, the father of modern psychoanalytic theory, viewed religion as a "universal neurosis." He compared it to obsessional neurotic behavior in both ***The Future of an Illusion*** (1927), and in ***Moses and Monthesism*** (1939). He believed religion and obsessive-neurotic behavior both have their basis in guilt and are symbolic acts despite the fact that religious rituals are public and obsessive acts are private. He espoused the theory that religious beliefs, although useful for the development of civilization originally, had become oppressive and essentially dangerous in two respects. First, religious beliefs stunt the growth of human intellect by restricting areas of thought, suppressing doubts, and inhibiting questioning. He voiced the opinion that religion was the antithesis of the scientific process, a process to which he devoted his life. Secondly, Freud saw religion as an attempt to escape the realities of life through creation of a "God-father" image whereby adults could be succored and protected from feelings of helplessness engendered by fear in the face of an uncaring and omnipotent force such as nature. The following illustrates this point.

> In my ***Future of an Illusion*** I was concerned much less with the deepest sources of the religious feeling than with what the

> common man understands by his religion - with the system of doctrines and promises which on the one hand explains the riddles of this world with enviable completeness, and, on the other, assures him that a careful Providence will watch over his life and compensate him in a future existence for any frustrations he suffers here. The common man cannot imagine this Providence otherwise than in the figure of an enormously exalted father (Freud cited by Goldenberg, 1982, p. 19).

Thus, Freud rejected religion, including church rituals which to him resembled obsessive neurotic behavior. Freud did, indirectly, address his views toward forgiveness of others when he attacked two of Christ's statements inviting his followers to love their neighbors as much as they loved themselves and to love their enemies. This quote, although lengthy, is presented in its entirety since it provides insight into Freud's understanding of Christian doctrine and beliefs.

> Let us adopt a naive view towards it, as though we were hearing it for the first time; we shall be unable then to suppress a feeling of surprise and bewilderment. Why should we do it? What good will it do us? but, above all, how shall we achieve it? How can it be possible? My love . . . imposes duties on me for whose fulfillment I must be ready to make sacrifices. If I love someone, he must deserve it in some way . . . . He deserves it if he is so like me in important ways that I can love

myself in him; and he deserves it if he is so much more perfect than myself that I can love my ideal of my own self in him . . . . But if he is a stranger to me and if he cannot attract me by any worth of his own or any significance that he may already have acquired for my emotional life, it will be hard for me to love him. Indeed, I should be wrong to do so . . . for it is an injustice to them (my own people) if I put a stranger on a par with them. But if I am to love him (with this universal love) merely because he, too, is an inhabitant of this earth, like an insect, an earth worm or a grass snake, then I fear that only a small modicum of my love will fall to his share . . . . What is the point of precept enunciated with so much solemnity if its fulfillment cannot be recommended as reasonable?

On closer inspection, I find still further difficulties. Not merely is this stranger in general unworthy of my love; I must honestly confess that he has more claim to my hostility and even my hatred. He seems not to have the least trace of love for me and shows me not the slightest consideration. If it will do him any good he has no hesitation in injuring me . . . . Indeed he need not even obtain an advantage; if he can satisfy any sort of desire by it, he thinks nothing of jeering at me, insulting me, slandering me and showing his superior power; . . . If he behaves differently, if he shows me consideration and

> forbearance as a stranger, I am ready to treat him in the same way, in any case and quite apart from any precept. Indeed, if this grandiose commandment has run "Love thy neighbour as thy neighbour loves thee," I should not take exception to it. And there is a second commandment, which seems to me even more incomprehensible and arouses still stronger opposition in me. It is "Love thine enemies." If I think it over however, I see that I am wrong in treating it as a greater imposition. At bottom it is the same thing (1930, 21:109-10).

Thus Freud's labelled forgiveness of hostile others as ridiculous if not psychologically impossible to achieve. By viewing forgiveness as logical, Freud misses the core of the matter. Forgiveness is not a logical or reasonable process; it is part of the spiritual or mystical element in life.

> Yet it is only the person who experiences and survives the unreasonableness of life who can understand the unreasonableness of forgiveness. Once that is understood, mystery is born - and forgiveness is at its heart, a mystery (Donnelly, 1979, p. 10).

Jung

Carl Jung, a Swiss psychiatrist and contemporary of Freud and generally acknowledged as one of the most important pioneers in psychodynamic theory, spent years in self analysis. Jung, as opposed to Freud, never doubted the existence of God. His theory of evolution toward

integration of oppositional components within the psyche - shadow and ego, sensory experience and mystical or spiritual experience, love and hate - as a method of reaching "individuation", a concept which influenced Maslow's theory of self actualization, has sparked remarkable interest during the past several decades. Jung appeared ambivalent toward what he called "traditional" Christian religions, alternately praising some aspects of "creed" or dogma while denigrating others. His famous dream of God sitting on a throne and dropping fecal material on a cathedral appears to sum up his view of formalized religion. "I saw before me the cathedral, the blue sky, God sits on His golden throne, high above the world - and from under the throne an enormous turd falls upon the sparkling new roof, shatters it, and breaks the walls of the Cathedral asunder" (Jung cited by Goldenberg, 1982, p. 55).

His comments following this quote indicate belief in his view of God as immediate and living, omnipotent and free, and not bound by traditions. His definition of religion indicates belief and support for religion as a state of mind rather than a formalized institution.

> Religion appears to me to be a peculiar attitude of the human mind, which could be formulated in accordance with the original use of the term "religio", that is a careful consideration and observation of certain dynamic factors, understood to be "powers", spirits, demons, gods, laws, ideas, ideals or whatever name man has given to such factors as he has found in his world powerful, dangerous or helpful enough to be taken into careful

consideration, or grand, beautiful and meaningful enough to be devoutly adored and loved (Jung, 1938, p. 5).

Jung did not speak specifically of forgiveness, but his writing on the topic of Confession within the Catholic Church indicated he viewed this as a cathartic act whereby the individual moves from isolation to membership in the community of man. He believed that personal secrets result in guilt irrespective of whether they are harmful secrets. Confession, aimed at establishing forgiveness and reconciliation, was cited by Jung as an effective method of examining the dark side or "shadow" of the person. His term "acceptance" parallels forgiveness of oneself or becomes part of the process between forgiveness and reconciliation. "Confession is a means of confronting the shadow, of bringing the shadow to the surface, of undergoing the correction necessary for acceptance of one's whole self, even the least of oneself. Wholeness and integrity of personality are restored and reconstituted" (Jung, p. 44).

Jung also stated that he felt the protestant faiths had lost an important vehicle for promoting well-being by eliminating confession from their "creed" (Todd, 1985). He addressed the importance of confession to *another* by indicating that self acknowledgement of secrets by comparison, appeared ineffective in promoting growth. Jung also wrote that confession was the prototype of psychotherapeutic techniques. "The first beginnings of all analytical treatment of the soul are to be found in its prototype, the confessional" (Jung 1954, p. 55).

Thus Jung challenges Freud's reductionist philosophy which negates the possibility of a spiritual or mystical component within the human psyche. His belief in man's predisposition toward "wholeness", toward integration of dualities within the self, toward individuation become the cornerstone for therapy. Client verbalization and confrontation with "shadow" portions of their psyche precipitate movement toward self acceptance. Confrontation is resolved when clients begin to forgive, reconcile, and integrate conscious knowledge and experience with unconscious knowledge and experience.

Rogers and Frankl

Carl Rogers' humanistic approach to psychotherapy evolved from non-directive therapy to Client Centered Therapy to Person Centered Therapy. His belief that man is basically good and moves naturally toward self actualization if given a safe environment became the central tenet of his theory of counselling. Although Rogers did not see religion as being important to modern people, he did stress the importance of self acceptance and acceptance by others for psychological health. He viewed behavior as the individual's attempt to satisfy needs, and healthy functioning as behavior congruent with the inner self. Alienation from one's inner self results in misguided, often destructive behavior which is always an effort to fulfil basic needs. Roger's therapeutic conditions which include congruency, unconditional positive regard, and empathetic understanding, must be present to facilitate growth within individual clients. One can view unconditional positive regard as roughly analogous to agapé love, and the process of self

acceptance as resembling that of forgiveness and reconciliation within Christian philosophy. Therefore, Roger's beliefs embrace the process of letting go self hurts or hurts from others and accepting oneself and others by valuing them simply because they exist.

Victor Frankl presupposes forgiveness in man's search to find [illegible] in life. His work toward development of an existential therapy, Logotherapy, is largely a result of his experiences in several German concentration camps during World War II. Frankl maintains that an individual's central life task is to create meaning from existence. This can be done in three ways: (1) by creating or engaging in purposeful work, (2) by loving and encountering another, and (3) by accepting unavoidable suffering and using it as an opportunity for personal growth. Frankl lists suffering and death as certainties in life and stresses the self determining nature of man. ". . . man is ultimately self-determining. He does not simply exist but always decides what his existence will be, what he will become in the next moment . . . every human being has the freedom to change at any instant" (Frankl, 1946, p. 154).

Christ's commandment to love thy neighbor as thyself, a plea for acceptance of self and others through loving behavior, closely parallels Frankl's assertion that through loving another person we become a more fully human person.

> Love is the only way to grasp another human being in the inner most core of his personality. No one can become fully aware of the very essence of another human being unless he loves him.

> By his love he is able to see the essential traits and features in the beloved person; and even more, he sees that which is potential in him . . . by his love, the loving person enables the beloved person to actualize these potentialities"(Frankl, 1946, p. 134).

Frankl's writing implicitly suggests that religious beliefs might be an essential component to wellness for individual clients. "Logotherapy does not cross the boundary between psychology and religion. But it leaves the door to religion open and it leaves it to the patient whether or not to pass the door" (1969, p. 143).

> As soon as we have interpreted religion as being merely a product of psychodynamics, in the sense of unconscious motivating forces, we have missed the point and lost sight of the authentic phenomenon. Through such a misconception, the psychology of religion becomes psychology as religion, in that psychology is sometimes worshipped and made an explanation for everything (1969, p. 212).

In summary, the term forgiveness is seldom used in psychological literature and never defined (Pastor, 1986). To enable us to discuss this concept we must partition it into its component parts. Initially someone is hurt or wounded psychologically which creates a distancing from one's "self" or from others. Through a setting aside of resentment or anger, the natural reaction to pain, one freely chooses to "let go" hurt which, in turn, promotes

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UNIVERSITY OF ALBERTA

HUMOR, FORGIVENESS, AND ALTRUISM IN EMERGENCY SITUATIONS: AN INVESTIGATION

by

NIKI WOSNACK

A THESIS

SUBMITTED TO THE FACULTY OF GRADUATE STUDIES AND RESEARCH

IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE

OF MASTER OF EDUCATION IN COUNSELLING PSYCHOLOGY

DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

EDMONTON, ALBERTA

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DEGREE: MASTER OF EDUCATION

YEAR THIS DEGREE GRANTED: 1990

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THE UNIVERSITY OF ALBERTA

FACULTY OF GRADUATE STUDIES AND RESEARCH

The undersigned certify that they have read, and recommended to the Faculty of Graduate Studies and Research for acceptance, a thesis entitled HUMOR, FORGIVENESS, AND ALTRUISM IN EMERGENCY SITUATIONS: AN INVESTIGATION submitted by NIKI WOSNACK in partial fulfilment of the requirements for the degree of MASTER OF EDUCATION.

Dr. J. J. Mitchell (Supervisor)

Dr. B. Hague (Supervisor)

Dr. D. Wangler

Date: March 30/90

DEDICATION

To my husband, Rick, and to my three daughters, Rikki, Jennifer, and Krysta. Without your love, support, and encouragement this would not have been possible. I love you and I thank you.

ABSTRACT

This thesis is comprised of three separate areas of study: humor, forgiveness, and altruism in emergency situations - each with attached bibliography. The first section consists of two chapters which explore humor as a psychological phenomenon then address humor within counselling. The initial chapter presents theoretical explanations of humor within a historical framework. This is followed by a review of the literature and conceptualization of humor as a complex human phenomenon straddling cognitive, affective, physical and social domains. The second chapter in this section focuses on humor within counselling. It includes an introduction to several schools of psychotherapy (Logotherapy, Provocative therapy, Paradoxical therapy and Natural High therapy) which utilize humor as part of the therapeutic encounter. Kubie's (1970) opposition to the use of humor within psychotherapy follows, as does a list of potential risks and benefits associated with humor in counselling.

The second section consists of two chapters which explore forgiveness as a psychological construct before addressing implications for counselling theory and practice. Christian theological origins and related terms such as reconciliation and agapé are included. Psychological explanations of the mechanism underlying forgiveness which include Freudian, Jungian, and humanistic perspectives precede discussion of the integration between theology and psychology. The second chapter explores forgiveness as a psychological process and presents a review of anecdotal literature related to forgiveness and psychotherapy.

The final section, altruism in emergency situations, includes a historical overview and review of the literature before exploration of motivational theories underlying altruistic acts. Motivational theories are conceptualized as egoistic or altruistic in nature and include arousal/cognitive theories, trait theories, and moral motivation theories. The relationship between empathy and altruism is addressed and concluding statements suggest that moral motivation theorists, particularly those espousing the ethic of care and responsibility (Gilligan, Noddings, & Shogun) currently provide the most adequate explanation for heroic behaviors.

ACKNOWLEDGEMENTS

To the Dynamic Duo, Dr. J. J. Mitchell and Dr. B. Hague, words appear inadequate. Your generous gifts of time, of honesty, of knowledge, and of presence allowed me to turn this thesis into a reality. (Get the idea I'm contemplating starting up a fan club?) What you have taught I will carry with me forever. Thank you.

Additionally, I would like to thank my brother, Marc, and Mom and John for spending evenings proof reading my rough drafts instead of enjoying themselves like regular people! I love you guys!

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CHAPTER I

INTRODUCTION

The primary objective of psychology is to explain the "why" and "how" of human behavior. As such, psychology addresses individual and group response to stimuli in such a way that it attempts to account for variation of response. During my years of study I developed an interest in humor, forgiveness, and altruism in emergency situations. All three topics, which are treated as separate and distinct, appear to be complex universal human responses to a variety of stimuli. In the case of humor and forgiveness an introductory chapter outlining a review of psychological literature on the subject precedes a second chapter focusing on humor and forgiveness within psychotherapy. Altruism within emergency situations is presented without reference to therapy as individuals rarely seek counselling after responding to emergency situations in an altruistic manner.

My choice of topics stems from personal interest. I have always valued humor in individuals with whom I've come into contact. I've wondered why some people "lose" their sense of humor and what purpose humor serves. As a professional counsellor, I wondered whether humor helped or hindered the therapeutic process. The answers to these questions were not found within my course of studies at the University of Alberta. Humor, as a topic of study, was not even addressed. I had the same experience with the phenomenon of forgiveness. Although forgiveness has been explored through Christian theological perspectives, forgiveness as a psychological phenomenon

appeared almost non-existent. What function does forgiveness serve within the human psyche? Is it an avoidance strategy or an act of healing or "letting go"? What are the implications of introducing forgiveness as a possibility within the therapeutic environment. Finally, I confess to avid curiosity when topics related to altruism in emergency situations arose. Reports of heroic acts in times of crisis spurred my interest as I wondered whether or not, in similar circumstances I would have the courage to act. Why do some people intervene while others do not? This area of inquiry was, once again, not included in my studies.

I am grateful therefore, that my thesis provided a vehicle for exploration of each topic: humor, forgiveness, and altruism in emergency situations and helped me to investigate some of these questions. Following is a detailed summary of the three sections of this thesis. Please note these are three separate and distinct areas of study, each with it's own bibliography attached.

Section Summary

Section I (Chapters II and III)

Section I explores humor from a psychological then psychotherapeutic perspective. Chapter II entitled "Humor as a Psychological Phenomenon" includes an historical overview of humor from philosophical perspectives before the introduction of psychological theories. Views of humor as: (1) an effort to gain superiority over others, (2) a reaction to incongruous stimuli,

(3) a tension release/relief mechanism, (4) a psychological vehicle which promotes development or maintenance of well being within the organism, precede psychoanalytic explanations of humor as a sophisticated defense mechanism. Freud's contention that humor provides a relatively safe method for discharging aggressive or sexual psychic energy included recognition that social factors also impact on humor appreciation or response. Belief that humor can be a social act spurred response from social psychologists who view humor as a communication tool used to enhance, maintain, or retard development of interpersonal relationships. Difficulties encountered with empirically based attempts to study humor are outlined and conceptualization of humor as a psychological phenomenon straddling cognitive, affective, psychological and social domains is presented. Finally, current research, primarily centered around humor response is discussed, as are difficulties inherent in empirically based research which negates complex internal processes and the importance of spontaneity to humor appreciation and response. An interactionist framework is necessary as humor involves the person, past experiences and present perceptions, and specific situational factors.

Chapter III focuses on humor within the therapeutic environment. A general discussion of humor - bane or boon - is augmented by Thomas Kuhlman's (1984) assertion that humor must be ***appropriate*** to the therapeutic context from which it arises. Exploration of humor as beneficial to the client within several school of psychotherapy include: (1) Logotherapy,

(2) Paradoxical Psychotherapy, (3) Provocative Therapy, (4) Natural High Therapy, (5) Other Therapies. All of these view humor as a therapeutic tool or as an indication of healing or wellness within individual clients. Kubie (1971) presents counter arguments and contends that therapist generated humor within the therapeutic environment is potentially damaging to clients. A summary of possible benefits and risks to using humor within counselling follows. Finally, recognition that humor within therapy has the potential to hurt or heal according to the skill of the therapist involved and the manner in which humor is used precedes a review of empirical investigations of humor. This concludes Section I, humor as a psychological and psychotherapeutic phenomenon.

Section II (Chapter IV and V)

Section II explores forgiveness from a Christian theological and psychological perspective before discussion of forgiveness within psychotherapy. In Chapter IV, Christian origins of the concept of forgiveness precede psychological views of forgiveness. Traditionally, forgiveness has been viewed as a theological construct. The word forgiveness carries powerful associations or attributions within Christian communities. Clarification of these attributions necessitates explanation of related terms such as reconciliation, a coming together of that which belongs together but is apart (Donnelly, 1986, p. 17), and agapé, universal or brotherly love, a feeling of care and concern for man's common humanity, and of their relationship to forgiveness. Once theological boundaries to forgiveness have

been described, explanation of psychological perspectives are presented which include psychodynamic (Freud, Jung) and humanistic (Rogers, Frankl) frameworks. Following these, investigation centered upon the integration of psychology and theology as they relate to forgiveness is explored.

Chapter V presents forgiveness as synonymous with psychological terms such as "letting go", "working through" or "acceptance", all of which signal an internal process which results in healing or growth. Recognition that forgiveness is paradoxical, that is, forgiveness builds personal strength through recognition or "owning" of one's weaknesses or imperfections, is supported by psychologists (Pingleton, 1989; Studzinski, 1986). A summary of work by Smedes, Augsburger, Cunningham, and Dabrowski with comments from other psychologists in this field, lays the foundation for their premise that authentic forgiveness promotes healing of psychological hurts. Authentic forgiveness appears to include the following components: (1) free will, (2) willingness to face hurt and to "own" one's feelings, (3) courage, (4) separation of the hurtful act from the person who initiated it, (5) ability to confront oneself and others, (6) a reframing of hurt into an opportunity for personal growth, (7) renegotiation of relationship. Finally, a review of current literature, exclusively anecdotal in nature, addressing forgiveness within psychotherapy is included.

Section III (Chapter VI)

Section III introduces a new topic of study, that of altruism in emergency situations. Altruism is viewed as a subset of prosocial behavior

which has the following characteristics. It is: (1) voluntary, (2) directed toward helping another, and (3) is carried out without expectation of external reward. Historical antecedents and sociobiological explanations of reciprocal altruism precede psychological investigations of altruistic behaviors following the stabbing death of Kitty Genovese in 1964. Latané and Darley (1970) initiated studies on bystander intervention in emergency situations. They defined emergencies as involving: (1) actual harm or the threat of harm to life or property, (2) specific, unusual, rare, and unforeseen circumstances, and (3) a necessity for immediate, often urgent action. Their research spurred inquiry into the source of motivation behind altruistic acts.

Most motivational theories which seek to explain altruism fall into two camps - egoistic versus altruistic. A discussion of the difference between egoistically and altruistically motivated altruism follows with input from theorists such as Dabrowski, Rushton, Eisenberg, Straub, Kohlberg, Gilligan, Cialdini and Pilivain et al. Relationships between altruism and empathy, cognition, arousal, personality traits, and moral development are explored.

Although no comprehensive theory currently exists which can adequately explain altruism in emergency situations, the evidence appears to support interactional approaches which explore the relationship between the person and the situation. Reductionist perspectives which negate the impact internal processes have on altruistic acts in times of crisis do not adequately explain this phenomenon. The work of Shogun (1988) and others in the area of moral development, particularly those whose writings center on the ethic

of care and concern (Gilligan, 1982; Heyd, 1982; Kohlberg, 1984; and Brell, 1989) appear promising as their work provides a framework from which bystander intervention - or failure to intervene in emergency situations, can be understood.

SECTION I

CHAPTER II

HUMOR AS A PSYCHOLOGICAL PHENOMENON

CHAPTER III

HUMOR IN COUNSELLING

CHAPTER II

"HUMOR AS A PSYCHOLOGICAL PHENOMENON"

Introduction

Origin of Terms

The psychological investigation of humor could not begin without some explanation of the origin of this term. "Humor" was originally a latin word meaning moisture or fluid. Writers from several periods of history including the Renaissance believed there were four bodily fluids or "humors" including yellow bile (choler), black bile (melancholy), phlegm (mucus), and blood. An equal balance between these humors was thought to produce a normal, balanced disposition or a "good humor". If one or more humors were present disproportionately, it was believed that the individual's temperament would be affected in some way so that they would be "out of humor".

1. Choler, or yellow bile, was thought to be produced by the gall bladder. An excess of choler led to a choleric mood or humor; that is, irascibility and proneness to upset or anger.
2. Melancholy, or black bile, referred to a thick, dark bile believed to be secreted by the kidneys or spleen. Heavy secretions of black bile presumably caused gloominess, dejection, or depression.

3. A person was considered to be in a sanguine mood when an excess of blood was present. The mood was characterized by confidence, hopefulness, and a cheerful spirit.
4. Phlegm, referred to a cold, moist mucus believed to produce a phlegmatic temperament; that is sluggishness and apathy (McGhee, 1979, p. 5).

Definition of Terms

Gradually, humor began to be used to describe moods, characteristics, verbalizations, events; all of which showed an appreciation for incongruous, ludicrous, or comic situations or events. The definition of humor includes references to the bodily "humors" already described and then relates humor to the quality of being laughable, comical, or funny. Also noted were descriptors which indicated an appreciation of actions, events, situations, or verbalizations which were construed as pertaining to the incongruous, ludicrous, or absurd.

Although humor appears to be a universal human phenomenon, and despite its prevalence in our daily lives, a comprehensive definition of this term from a psychological perspective does not yet exist. This may be due to the complexity and elusiveness of the humor phenomenon as well as to our lack of understanding of its functions. Writers such as Kuhlman, McGhee, and Goldstein have commented on the flexibility and spontaneity associated with humorous behavior and on inherent difficulties noted with attempts at rigid categorization. Research indicates this is not a recent realization as

evidenced by Sully's statement: "hardly a word in the language - and it seems to be exclusively an English word - would be harder to define with scientific precision that this familiar one." This notion was reiterated in 1984 by Thomas Kuhlman. "A definition of humor is not attempted; rather, humor is conceived as a putative link between certain classes of responses and certain classes of stimuli that occurs under certain contextual conditions" (p. 10).

This explanation is limited in that it negates emphasis on the "human" component so necessary to the study of humor appreciation and response. Perhaps the most complete discussion of this phenomenon is found in P. McGhee's book, ***Humor: Its Origin and Development*** where humor is defined by what it is not.

> We must conclude, then, that humor (like beauty) is something that exists only in our minds and not in the real world. Humor is not a characteristic of certain events (such as cartoons, jokes, clowning behaviors, etc.) although certain stimulus events are more likely than others to produce the perception of humor. Humor is not an emotion, although it may alter our emotional states, and we are more likely to experience it in some emotional states than others. Finally, humor is not a kind of behavior (such as laughter or smiling) although specific types of behavior are characteristically related to the perception of humor (1979, p. 6).

In summary, although a precise definition of humor from a psychological perspective does not exist, the importance of including complex variables such as behavioral response, physiology, emotion, cognition, perception, spontaneity, and social influences cannot be overlooked.

Parameters of Study

Connected to difficulty with definitions are the number of terms used to connote humor or humorous perceptions. "Ludicrous", "absurd", "funny", "amusing", "ridiculous", "incongruous", "mirthful", "knee-slapping", "comedic", "farcical", "jests", "wit", "ridicule", "satire", "pun", and "sarcasm" are but a few.

Whatever words are used to define this term, several factors appear relevant. First, humor is an intrinsic response to an internal (intrapersonal, cognitive) or external (interpersonal, cognitive) stimulus. This is readily acknowledged by watching individual or group reactions to comic or ludicrous stimuli. No two people (groups) respond in identical fashion. Secondly, humor appears to be predominately a cognitive response to stimuli although physiological or behavioral components such as tension reduction, laughter, or smiling accompany this response. This implies that an individual's humor response depends largely on his ***perception*** of that which has been noted. Additionally, a person's "set", attitude, attributions, and related affective colorations determine whether or not something will be viewed as humorous. Research (Levine & Redlick, 1955; McGhee & Grodzitsky, 1975; Miller & Bacon, 1971) indicates that stimuli with high affective components, particularly when the attached affect is negative, are rarely perceived as

humorous. Finally, spontaneity, another integral component of humor appreciation, complicates studies of humor responses in that something that strikes one as funny at one moment in time may not produce the same reaction at a later date. Thus, difficulty with replication of studies measuring humor responses and problems associated with obtaining test/retest measurements continue to impede systematic research and make difficult the analysis of empirical data.

Another difficulty arises when one tries to separate humor responses from related physiological components such as laughter and smiling. It has been noted in previous research that not all laughter is humorous. Non-humorous laughter as a response to tickling, triumph, anxiety, anger, joy, bitterness and embarrassment will not be examined in this chapter. However, inclusion of laughter as it relates to humor appreciation will be reviewed primarily from the perspective of laughter as a behavioral response indicating humor appreciation. The same may be said of smiling, another behavioral pattern which straddles the humorous/non-humorous continuum.

Before continuing with detailed explanations of the difficulties encountered by researchers investigating humor, it is necessary to define the scope of this thesis. Appreciation of humor and response to humor will be the major focus of this chapter. Inclusion of historical and contemporary explanations of the psychological function humor serves will enable the reader to approach this topic from a "global" perspective before humor and its effect within the therapeutic setting is explored. Additionally, the effects

of cognitive, social, emotional, and physiological factors on humor appreciation or response will be addressed.

The Psychology of Humor: Theory

Before offering a review of the current research available in this area, a synopsis of major theories or philosophical explanations detailing the functions humor serves will be provided. Whenever possible, historical perspectives and their contemporary correlates with attendant variations on a central theme will be reported. Inherent weaknesses to the major theoretical camps presented will be detailed in chart form at the end of this section.

Superiority Theories

Some of the earliest references to humor in Western literature (Aristotle, Plato) describe it as a process of gaining superiority over others, the environment, or specific situations. Aristotle, in ***The Poetics***, stated that wit (in this case treated as synonymous with humor) involved noting the ludicrous in some defect, deformity, or ugliness which is neither destructive or painful. This theme of noting one's superiority over others was reiterated in Plato's ***Philebus*** when he described humor as a delight in the suffering or misfortunes of others. Over the years a slight variation in this theme has been noted. Feelings of elation over the favorable comparison of oneself to others which facilitated enjoyment or laughter at another's expense was added. Hobbes is perhaps the most well known advocate of this innovation

as he viewed laughter (now being accepted as humor appreciation or response) as a "sudden glory" achieved by observing the infirmities of others and comparing them with the "eminency" of oneself. The main difference between the views of humor held by Aristotle and Hobbes appears to involve a difference in the perspective of who is laughing at whom. Aristotle and Plato felt the person who experienced humor would view himself as a "superior" person while Hobbes saw laughter as an indication of inferiority. He stated that laughter was indeed a method of disparaging others by by differentiating oneself or "triumphing over" those less fortunate. Thus sarcasm, ridicule, and satire can be viewed as humorous responses which allow one to rise above those with whom one comes into contact. Hobbes' theory has been categorized by some as a "degradation" theory because it presents a narrow viewpoint that one laughs only at that which celebrates our own achievements or the failure of others. In other words, we laugh ***at*** others; not ***with*** them. Alexander Bain (1875) extended Hobbes perspective with his statement, "The occasion of the ludicrous is the degradation of some person or interest possessing dignity, in circumstances that excite no other strong emotion" (1899, p. 257).

Thus Bain adheres to Hobbes' view of humor as an attempt to triumph over respected or significant others or over events while adding an insightful proviso which accounts for one's lack of humor in response to affect laden stimuli. He argued against opposing views of humor, as well, particularly those proposed by cognitive theorists who stressed the importance of

perception of incongruous aspects to humorous stimuli. Bain stated that incongruities were not a prerequisite for laughter in contrast to degradation, which was always present.

Stephen Leacock viewed laughter (here presented as humor response) as a "primitive shout of triumph". He added that although the origin of humor had its roots in cruelty, its appearance was becoming more "civilized" in recent years. Thus he attempted to expand earlier views by noting the mediating affects of socialization on man's aggressive nature.

Incongruity Theories

Another attempt to explain humor includes cognitive explanations advanced in three basic branches: (1) incongruity, or surprise theories, (2) configurational theories, and (3) information processing models. Incongruity theorists (Kant, Schopenhauer, Guthrie) explain humor as a response to ideas or perceptions which deviate from expectations or which would not habitually be viewed as possessing any degree of similarity or relationship to one another. This theory, as well as those supporting superiority theories, has undergone several variations over time.

Kant, generally accepted as the father of incongruity theory, viewed laughter (hereby seen as synonymous with humor response) as "an affectation arising from the sudden transformation of a strained expectation into nothing" (Kant, 1790, Bk. 2, Sec. 54). His explanation categorizes humorous response as a cognitive release mechanism which operates by building a "set" or expectation and then negating or nullifying the outcome. Surprise theories

which stress the "shock" or unexpectedness of the outcome as a necessary ingredient for humor are an offshoot of this perspective.

Schopenhauer, a proponent of humor as a cognitive response to incongruity, believed that humor occurred as a result of our desire to "escape" from reason. His description of the ludicrous follows, "The source of the ludicrous is always the paradoxical and therefore unexpected subsumption of an object under a concept which in other respects is different from it" (Schopenhauer cited in Monro, 1957, p. 148). Safety as a component of humorous stimuli has been noted by several incongruity theorists. Guthrie claimed that amusement occurred in disharmonious situations with the proviso that one must also be assured that everything is "all right" before one can find a situation or event humorous. Further support of this variation on the incongruity theme was noted by Spencer who coined the term "descending incongruity." He stated that our attention must be suddenly transformed from great things to small before something could be viewed as humorous. Laughter, viewed as a release of "nervous" energy, is accepted as the by-product of humor appreciation.

Configurational theorists, in contrast to those advocating incongruity, believe that sudden insight or "falling into place" of incongruent ideas or perceptions are the most important components operational in the generation of humor. Gestalt theory, with its emphasis on figure/ground perception, can be considered configural in nature. Maier discussed the effects of unexpected configurations as:

> The thought configurations which make for humorous experiences must: (a) be unprepared for; (b) appear suddenly and bring with it a change in the meaning of its elements; (c) be made up of elements which are experienced entirely objectively; (d) contain as its elements the facts appearing in the story, and those facts must be harmonized, explained or unified; and (f) have the characteristics of the ridiculous in that its harmony and logic apply only to its own elements (Goldstein, McGhee, 1972, p. 12).

Thus, humor occurs with perceptual shifts, a standpoint also touted by Gregory Bateson, who believed that humor initiated a "play frame" or set where any given action, gesture, or thought whether verbalized or not no longer represented the action gesture or thought it normally represented. This means that when we experience or respond to humor we are really responding to a perceptual shift in the relationship between figure and ground.

More recently, several theorists (Suls, Shultz) have posited humor response as comprised of two stages: (1) perception of an incongruity initiates the process, but (2) resolution of the noted incongruency completes the humour response.

> According to this account, humor results when the incongruity is resolved, that is, the punch line is seen to make sense at some level. Lacking a resolution the respondent does not "get" the

joke, is puzzled, and sometimes even frustrated (Suls, 1982, p. 2).

Acknowledgement that a playful "set" or "safe" environment (Suls) is necessary to evoke humorous response was also noted.

Information processing models have been used by Koestler (1964) who stated that humor was the result of a "bi-association" or transference of thought from one frame of reference to another normally incompatible frame ruled by divergent patterns or logic in an anxious or aggressive atmosphere. Leventhal (1979) incorporated cognitive stimulus with sensory and contextual input, and affect when he stated that humor appreciation involves integration of objective (stimulus oriented) and subjective (sensory - emotive - social) processing. This model may provide the conceptual framework necessary to link affect, sensory and environmental data, and cognition as component parts of the complex process involved in understanding humor.

Study of both Incongruity and Superiority theories reveal emphasis on motivational aspects of humor response. Disparagement theories, with their emphasis on triumph over others, may be compared to theories which espouse external locus of control. Here the focus is on gaining superiority over others. One's self concept appears dependent on one's ability to overshadow significant others. Humor as intrinsically motivating or pleasurable is not considered. In contrast, incongruity theories, although utilizing perception or resolution of incongruities as a motivational factor, rely heavily on internal processes, thereby avoiding the weaknesses

encountered with superiority theories but creating new difficulties. Incongruity theories fail to adequately explain social or emotive motivation for humor generation. In summary, cognitive theories such as Superiority or Incongruity theories, although plausible, appear simplistic and fail to satisfactorily address the complexity of humor as a human phenomenon.

Tension Relief/Release Theories

Theorists who believe humor is a tension relief/release mechanism fall into several camps. These include: (1) biological adaptation theories, (2) arousal theories and (3) tension release theories.

W. MacDougal is perhaps the most well known advocate of biological adaptation and survival theory. He viewed laughter (treated as synonymous with humor response for the purposes of this chapter) as an instinct whose function was to offset the effects of depression, sympathy, and other disagreeable emotions. He felt that without this innate defense mechanism, the human organism would be in danger of sinking into despair; a factor which would, in turn, lessen chances of survival. Thus, humor is a device geared toward allowing us to distance ourselves from perceptions or cognitions which result in negative emotive stimuli. Related arguments supporting humor/laughter as a human instinct include its occurrence soon after birth (within the first four months of life), the universality of laughter as a human phenomenon, and the cathartic effects of laughter on the biological organism.

Berlyne is among the most well known psychologists to analyze humor as a psychological phenomenon involving shifts in arousal levels. A rise in arousal was identified as "arousal boost" and a drop in arousal was referred to as "arousal jag" (relief). Berlyne felt that the key to understanding humor lay in understanding fluctuations in arousal levels. He viewed a moderate level of arousal as optimal, and described humor as a homeostatic mechanism geared toward maintaining these optimal levels of tension which facilitated the organism's ability to function efficiently. He viewed collative factors, that is, attempts to collate experience despite the presence of novelty, incongruity, strangeness, complexity, surprise, or contradiction; as the stimuli which trip this homeostatic mechanism by increasing or decreasing arousal levels. The anxiety produced by confrontation with various stimuli may be dissipated through laughter or humorous responses. "Man has long affirmed laughter as necessary for biological survival and recognizes that the absence of laughter and humor and play impair physical and psychological health" (McGhee, 1983, p. 117). The connection between physical well being and humor will be discussed in the next section.

Physiological Theories

Only recently have psychologists begun to explore the physiological correlates to humor response. Although most research conducted deals with laughter as a physiological survival mechanism, its occurrence as a response to perceived humor allows for exploration of this topic in this treatise. J. Walsh (1928) was one of the first physicians to prescribe laughter as a habit

to be encouraged as "a potent factor for health." He described the diaphragm as a major muscle whose location allowed it to "massage" all organs above and below, thereby modifying circulation of blood during laughter. The resultant oxygenization of blood was compared to benefits gained from physical exercise. This observation has been supported in much of the research conducted in more recent years.

Fry (1969, 1971, 1977, 1979) has conducted extensive research in physiological effects of laughter. He found, and subsequent research supports this finding, that along with the benefits described by Walsh, laughter stimulates the production of endomorphine, the body's natural pain reducing enzyme. Relaxation following laughter allows heart rate, muscle tension, and blood pressure to return to normal levels, which in turn has an impact similar to participation in physical activities. His conclusion is that humor, and laughter as its physiological correlate, are important components in the maintenance of physical health.

During the last 20 years research on the brain, particularly that geared toward identifying cerebral localization of function for specific tasks, has suggested that certain portions of the cerebellum are activated when tasks are performed. Studies in hemispheric lateralization and humor suggest that humor appreciation is dependent on integration of both the left cerebral hemisphere (analytic, language oriented, successive processing) and the right (holistic organization, simultaneous processing, spatial overtones). Svebak (1975, 1977), as a result of electro-physiological studies of cerebral

hemispheric stimulation, suggests that laughter co-ordinates processing of both hemispheres simultaneously and produces an optimal functioning cerebral level which allows one to process both the gestalt along with subtle nuances inherent to the stimulus. This supports research conducted by Fout who argued that incongruity of the "whole" is noted through simultaneous processing associated with the right cerebral hemisphere before sequential processing, a left hemispheric function, solved the incongruency through a process of analysis. Both functions are necessary for the person to experience a humorous response. Although our understanding of the physiological correlates of humor is incomplete, the majority of research appears to substantiate the hypothesis that humor appreciation involves physiological changes which have beneficial effects in terms of exercising cognitive abilities and maintaining physical health.

Psychoanalytic Theory

No treatise on humor would be complete without inclusion of Freud's writings on humor (1928) and jokes (1905) which have spurred academic interest in both topics and have generated research which accounts for much of our current knowledge in this area. Freud was the first psychologist to explore humor (jokes) in systematic detail, and he also was among the first to combine different theories as part of his explanation of the functions that these two human behaviors serve.

Freud viewed humor as a sophisticated defense mechanism utilized to relieve psychic tension generated by conflicting emotions. Humor allows

tension to be discharged in a socially acceptable manner, without interference from the super ego, which censors and prevents direct acting-out of our sexual and aggressive instincts. Therefore, humor allows us to deceive the super ego into allowing release of sexual or aggressive drives normally restricted by the super ego. The result of this release is a pleasurable relaxation of anxiety or tension. Freud claims that humor allows us to:

> . . . obtain pleasure in spite of the distressing affects that interfere with it; it acts as a substitute for the generation of the affects, it puts itself in their place . . . . The pleasure of humor comes about . . . at the cost of a release of affect that does not occur; it arises from an economy in the expenditure of affect (Freud, ed. Strachey, 1963, pp. 228-229).

In later work Freud (1928) added to this explanation by stating that humor was used to alter the relationship between super ego and ego in an effort to reduce painful emotions, particularly those associated with guilt. Thus, the super ego makes the problem which originally appeared huge or insurmountable to the ego appear small; in much the same fashion as a parent comforts an upset child. Thus, as Freud understands it:

> humour has a liberating element . . . . It is the triumph of narcissism, the ego's victorious assertion of its own invulnerability. It refuses to be hurt by the arrow of reality or to be compelled to suffer. It insists that it is impervious to

> wounds dealt by the outside world, in fact that these are merely occasions for affording it pleasure (Freud, 1928, p. 217).

Freud's inclusion of incongruity theory strengthens the psychoanalytic explanation of humor. He states that we laugh when our minds compare two psychic processes, one complex and requiring energy, the other simpler and short circuiting the first. He also defines humor as a release mechanism when he describes it as a ***method for providing discharge of psychic energy***: "(by the help of a joke), the satisfaction of the purpose is made possible and its suppression, together with the 'psychical damming-up' that this would involved, is avoided" (Freud, ed. Strachey, 1963, p. 118). Freud's writings did not neglect Superiority theory. He viewed humor and joking behavior as mechanisms which release aggressive or sexual drives not otherwise socially acceptable. This is the case with tendentious jokes.

> Tendentious jokes make possible the satisfaction of an instinct (whether lustful or hostile) in the face of an obstacle that stands in its way . . . . Since our individual childhood and, similarly, since the childhood of human civilization, hostile impulses against our fellowman have been subject to the same restrictions; the same progressive repression as our sexual urges . . . . A joke will allow us to exploit something ridiculous in our enemy which we could not, on account of obstacles in our way, bring forward openly or consciously; the joke will evade restrictions and open sources of pleasure that have become

> inaccessible. By making our enemy small, we achieve the enjoyment of overcoming him . . . " (Freud, ed. Strachey, 1963, p. 103).

Also noted in ***Jokes and Their Relations to the Unconscious*** was recognition that social elements not previously addressed as important, affect humor appreciation and response. Freud stated that jokes must involve at least three people, the comic two, the humor only one. Thus the recognition that joking behavior is an effort to generate humor often has a social context, "a joke is the most social of all mental functions that aim at a yield of pleasure" (Freud, ed. Strachey, 1963, pp. 102-103).

Freud's approach was the first to acknowledge the complexity of humor analysis. His integration of cognitive, emotional, motivational, and social factors operational in humor greatly contributed to our understanding and appreciation of its psychological significance. Later theorists postulate Freud's concept of humor may be more effective when viewed as a process of taboo violation (Alford, 1982). This constitutes a shift from emphasis on drive reduction to cognitive process and more adequately explains tendentious jokes within group or societal structures.

Social-Psychological Theories

Most sociological theories approach humor as a communication tool. The prevalence and importance of humor for development and maintenance of interpersonal relationships affect both the individual and the group within

a social context. Important factors mediating use of humor as a social regulation device appear to include:

1. the context; the audience and situational variables must be taken into consideration. One cannot joke about all things in all situations.
2. appropriateness; an implicit understanding (whether conscious or not) that humor can enhance or destroy social relationships.
3. context; humor may be used to communicate feeling, thought, etc. which might not be acceptable in a "serious" framework.
4. affiliations; humor may be used to communicate affiliation between different groups, or within a group environment.
5. control; use of humor may promote social control of the individual or individuals. It may be used to provoke confrontation or cohesion.
6. cultural components; these affect recognition and appreciation of topical issues or events as humorous.

Although the social variables related to humor appreciation and response have been noted, research in this area appears sparse and disjointed.

Problems with Past Research and Theoretical Perspectives

How does one best study humor? The answer to this question has not been ascertained. Humor, in its complexity, poses many problems for current research. Failure to adequately define this phenomenon, lack of control over component variables such as spontaneity, salience, hereby defined as "the

mental set established in a receiver to perceive certain events as funny" (Kulman, 1984; Goldstein, Suls & Anthony, 1972), attribution, or affective response to perceived stimuli all impact studies of humor.

One approach used in humor research has been the development of rating scales, cartoons with and without captions, jokes, records, etc. These materials are shown to random members of selected groups whose judgments along a humorous/non-humorous continuum or whose laughter is then used to indicate degrees of humor response. This response is then graded on four or five point rating scales used to classify reactions to potentially "humorous" material. Humor responses obtained in this manner are correlated to personality traits in an effort to enhance understanding in both areas. Generally speaking, these studies have not added substantially to our knowledge of humor and how it works. One of the greatest difficulties is our inability to conceptualize a theory of humor encompassing the four major components of human existence, (a) cognitive, (b) emotional, (c) physical, and (d) social. Humor permeates so much of our daily existence that a sound theory used to explain its relevance to the human condition or its functions must incorporate all four aspects. Failure to incorporate these spheres of influence has impaired our ability to comprehensively explain humor or its affiliated physiological responses.

Cognitive

Incongruity, incongruity-resolution, superiority, and to some degree psychoanalytic explanations of humor all have unique strengths. Although

they supply motivational aspects such as a desire to triumph over others, to solve noted incongruencies, or to satisfy normally repressed instinctual drives, they fail to explain satisfactorily the social communicative components of humor, as well as those where enjoyment of word play or nonsensical reasoning are evidenced. Additionally, with the exception of psychoanalytic theory, affective elements are largely ignored, an omission which seriously impairs the integrity of these theories. Observations of human interaction involving humor suggest affective affiliations having strong implications for individual or group humor appreciation or responses. It is not enough to state that humor occurs when strong emotions are not felt, for indeed, humor is often used to disguise the presence of strong feelings such as anger, rage, or sexual desire. Intellectual or cognitive explanations of humor rely excessively on content, and fail to account for the interaction between humor and the three spheres of influence already noted.

Emotional

Psychoanalytic theory is one of the few which recognizes and explores fully the affective component in humor. It is my belief that not only is the repression or subsumption of feelings an important component in humor appreciation, so are the expressive elements. Humor appreciation and its motoric counterpart, humorous laughter, are vehicles for expression of feelings whether they be examples of joy, of anger, or of jealousy. This expressive element has not, to date, been examined sufficiently - partly

because of the difficulty with replicating the spontaneity associated with their expression.

> The introduction of the emotional factor makes clear the need to assess separately judgements of funniness and expression of mirth and provides an internal mechanism for the well rounded social cultural observation that smiling, laughter, and humor judgement can be (and remain) highly correlated even though the level of one of the factors is moved about by some selected independent variable to which the other responses are insensitive. It is obvious that we may laugh heartily at poorly constructed incongruities, rate them as poor and silly, and recognize that we had one hell of a good time (Leventhal, Safer, 1977, p. 346).

Leventhal and Safer address another issue, that of the effect of our emotional "set" to humor appreciation and response. Mood exerts a definite impact on what we perceive as humorous or non-humorous. One who is depressed will not find amusement in stimuli that amuses others in a "playful" frame of mind. Despite difficulty with replication of mood or affect, study of humor appreciation or response conducted without consideration of this element is lacking a vital component.

Physical

Physiological correlates such as humorous laughter and smiling as well as their effect on the human organism should be included in the study of

humor. Maintaining optimal arousal levels as a mechanism for physical well being has been studied by notables such as Berlyne, Fry, and Bushnell and Scheff. Although we generally accept the beneficial effects one's "sense of humor" has for maintenance of individual health, this component has been lacking or included in a superficial manner by most theorists. One cannot ignore physiological aspects of humor when proposing theoretical explanations as to the functions humor serves. The resultant impact of humorous laughter on the respiratory, circulatory, and cardiovascular systems, with psychological benefits of stress reduction and relaxation may well become significant motivational factors which increase the probability of a specific response occurring. If laughter makes me feel better, there is a pretty good chance that I will respond to future events by laughing when I consider this response appropriate.

Social

Social aspects of humor, until recently, have been largely ignored by psychologists. Humor response, however, usually takes place in a social context. The social element appears to intensify individual reactions in humorous stimuli. What produces a solitary smile may often result in laughter when one moves from individual to group settings. Theories that ignore social components or the communicative elements of humor cannot hope to grasp the totality of humor responses or appreciation.

All of the theories proposed to explain humor as a psychological construct can be subsumed under the four spheres of influence already noted.

Thus, superiority and incongruity theories are essentially cognitive explanations of humor, arousal and health theories take a physiological perspective of humor, psychoanalytic theory addresses emotive aspects of humor, and social theories incorporate social psychological views of this topic. The following chart details noted weaknesses with each theoretical camp.

Current Research

Current research is both sporadic and disjointed. Only within the last 20 years have psychologists begun to explore the more subtle facets of humor. Emphasis on *response* (rather than stimulus) prevails. Laughter, or mirth responses used to delineate humor appreciation appear beset with problems as they require subjective evaluations of funniness rather than objective measures. Additionally, isolating and defining the precise dependent variables hampers research in this area.

Research on the effects of humor within educational settings suggests that teacher self-disparagement used to facilitate student-teacher rapport has the effect of damaging student esteem for the teacher involved (Zillman & Stocking, 1976). Content appropriate related uses of humor, conversely, may contribute significantly to increases in student perceptions of teacher effectiveness (Bryant, Crane, Comisky & Zillman, 1980). Therefore, humor used to make a point educationally appears to enhance instructor appeal (Hazel, Bryant & Harris, 1982) particularly with adults. Research with school aged children indicates differences in the effect of humor when paired with

NOTED WEAKNESSES IN PROPOSED HUMOR THEORIES

	Cognitive Theories		Physiological Theories		Emotive Theories	Social Theories
	Superiority Theories	Incongruity Theories	Arousal Theories	Health Theories	Psychoanalytical Theories	Social Learning Theories
Failure to explain/ address why stimuli perceived as humor to one may not be perceived that way by others	•	•	•	•		•
Doesn't adequately account for non-sensical humor	•	•	•	•	•	•
Doesn't address the relationship between affect and humor	•	•	•	•		
Neglects social elements of humor appreciation		•	•	•		
Minimizes effect of cognitive humor			•	•		
Doesn't address physiological correlates of humor	•	•			•	•
Not testable			•		•	
Does not adequately address negative humor (self ridicule, sarcasm)		•	•	•		
Does not address humor as direct/indirect communication		•	•	•		
Difficulty with categorization of humor response					•	•

incidental and intentional learning. Attentive students do not appear to benefit significantly from humor interjected into lecture material, particularly at ages eight and above (Hauck & Thomas, 1972). Some evidence suggests that incidental learning, particularly in young children, is enhanced by the addition of humorous stimuli perhaps as a result of increased attending behaviors (Chapman & Compton, 1978).

Studies of humor and arousal appear to lend support to Berlyne's theory of "arousal-boost" rather than her belief in the "arousal-jag" mechanism. Research incorporating documentation of changes in galvanic skin response (Langevin & Day, 1972) and those utilizing electromyographic measures (Chapman, 1976) support the "arousal-boost" mechanism as operational in the humor appreciation or incongruity resolution.

Research into the mediating effects of tendentious humor on assertion or aggression is mixed; however several generalizations seem relevant. McGhee (1979, 1980) postulated that individuals who consistently demonstrated laughter or humor initiation would also possess patterns of social assertiveness, including both dominance and aggression. Results suggest that highly developed social assertiveness correlates with humor scores. Other studies suggest that use of humor may facilitate problem solving abilities among children (Goodchilds & Smith, 1964).

The effects of hostile humor on the individual within a group appear to function inversely with social status (Gutman & Priest, 1969). The implications of this study may explain why people enjoy humor where the

"bad guy" gets his "just desserts" more than similar situations depicting the "good guy" being punished. Further research by Zillman and Cantor (1974), and Zillman and Bryant (1976) indicates one feels free to enjoy witnessing mishaps or misfortunes of others provided the victim is seen as deserving of his or her fate. This suggests a wide application to this viewpoint as even "good guys" occasionally make mistakes which may then be punished without arousal of feeling of pity or guilt.

Humor as a coping strategy has been studied rather extensively. Some support for theories advocating humor as an effective mediator for stress or anxiety has been noted (Dixon, 1980). Personality theorists such as Freud, May, and Allport support this perspective. Indications that individual humor production as opposed to humor appreciation alone may be necessary to significantly reduce stress or tension was suggested by Martin and Lefcourt in their 1983 study. Later research by Nezu, Nezu and Blissett (1988) differentiated anxiety from depression and found humor moderated depressive symptomalogy more effectively than anxious behavior. Recognition that social factors and cognitions were not considered or included as dependent variables in this study was also noted.

More recently, attempts to integrate cognitive and psychoanalytic models of humor function have been noted (Kuhlman, 1985). This most unexpected finding involved a consistently higher mirth rating generated by taboo humor. Suggestion of a transference of emphasis from Freud's theory of humor as a drive reduction mechanism to a taboo violation strategy

enables one to incorporate cognitive incongruity theories which the motivational aspects of psychoanalytic theory advocate. This amalgamation would, Kuhlman suggested, explain social factors influencing humor not previously addressed in Freud's original work.

In conclusion, a review of traditional theories suggests a more "global" approach is necessary if one wishes to make significant advances in understanding of humor and its functions. My belief is that humor cannot be adequately explained from a "pure" science perspective, nor should the creativity or "art" involved be ignored. I do not see the significance of dissecting jokes to determine which cognitive processes trigger humorous responses, nor do I think views of humor which attempt to categorize it as a drive reduction mechanism, homeostatic device, cognitive process, or communication tool in isolation do it justice. Humor involves all of these aspects in differing degrees. Humor involves the "whole" person and cannot be comprehensively explained by looking at component parts in isolation. Research which focuses on motivational aspects and resultant effects of destructive or constructive humor seems more valuable than research geared towards determining what elements constitute a "successful" joke. Humor as a therapeutic tool, to be explored in the next chapter, may provide some answers to these questions.

CHAPTER III

HUMOR IN COUNSELLING

Introduction

The use of humor in psychotherapy is presently more an art than a science. Humor is a powerful communication tool which can be used to straddle cognitive and affective domains. Although there is little empirical evidence to support its use as a therapeutic device, I believe humor is a powerful factor in promoting individual growth. Certainly, humor is not a panacea. It must be used appropriately and within the context of the unique relationship between therapist and client. As with any counselling intervention, indiscriminate or inappropriate use may be damaging to the client. The use of ***appropriate*** humor within psychotherapy has been addressed by Thomas Kuhlman:

> One soon cultivates a sense of when a humorous interlude should be made the focus of the therapy and when it is best left in the background. And one acquires a new dimension upon which to assess one's clients and their progress toward therapeutic goals. At the present time in my practice there is one client with whom I share humor as often as possible; another whose constant efforts to generate humor are discouraged; and others with whom infrequent humor is appreciated in its own right ***and*** for the light its sheds upon

> where the person is at a given time and where the person is likely to be moving in the near future (Kuhlman, 1984, pp. 5-6).

In order to explore this topic, the following chapter will include a synopsis of several psychotherapies utilizing humor as a therapeutic tool or as the goal of therapy. Frankl's logotherapy and particularly paradoxical intention will be presented as will systemic therapies which have adopted paradoxical interventions as a therapeutic technique. Provocative therapy, and Natural High therapy, which share commonalities with Albert Ellis' Rational Emotive therapy, have expanded the use of humor within counselling as a method for confronting maladaptive behavioral patterns and as an indication of movement toward self actualization. In recognition of the importance of presenting a balanced portrait of the possibilities humor presents to counselling, Kubie's lists of risks associated with introducing humor into therapeutic encounters is presented along with a list of possible benefits.

Therapies Which Utilize Humor

Logotherapy

Victor Frankl was among the first to systematically apply humor as a therapeutic device. Logotherapy, a term he coined to describe existential psychotherapy, included recognition of humor as a distancing or perspective gathering technique. In ***The Will to Meaning*** (1969), Frankl addresses the function of humor: ". . . humor allows man to create perspective, to put

distance between himself and whatever may confront him. By the same token, humor allows man to detach himself from himself and thereby attain the fullest possible control over himself" (p. 108).

This ability to distance oneself or see oneself objectively relates to earlier work by Allport (1937, 1961) which lists six criteria for human maturity:

1. Extension of the sense of self. The mature individual actively participates in the world around oneself.
2. Warm relating of self to others. The mature individual has the capacity for intimacy as well as compassion toward others.
3. Emotional security (self acceptance). The mature person can maintain a sense of proportion in the face of life's vissitudes.
4. Realistic perception, skills, and assignments. A mature person does not confuse fantasy with reality and adopts problem solving strategies to confront tasks.
5. A unifying philosophy of life. Mature people seek direction/purpose in their life.
6. Self-objectification: Insight and humor. Mature persons know themselves and are able to view self with objectivity.

The last criteria relates humor to insight, as does Allport's definition of humor as "the ability to laugh at the things one loves (this includes self in a 'wholistic' framework) and still to love them" (p. 292). Thus humorous insight allows for distancing of self from whatever issues cause pain, a

prerequisite to acceptance of self and others. As Hague (1986) states, "Insight and humor go hand in hand because they are at bottom a single phenomenon - self objectification." Hague (1988) explains this as a "process, rare and difficult to attain, of looking at oneself as if from outside, seeing oneself as an object for examination, while experiencing the subjectivity of the other." The concept of self objectification was originally addressed by Dabrowski, a contemporary of Frankl's, who developed an evolutionary, multilevel theory of human development in which those at higher levels of development "distanciate" themselves by intentionally transcending egoistic, subjective perspectives and adopting autonomous, authentic, and most importantly, empathetic perceptions of self and others.

The development of paradoxical intention, a technique of symptom prescription introduced by Frankl in 1939 and used to alleviate symptomatic behaviors in phobic or obsessive - compulsive patients, was found to effectively eliminate these behaviors by disrupting the cycle of anticipatory anxiety generated by the patient's attempts to "fight or flee" the symptom. Frankl stated:

> The reader will note that this treatment consists not only of reversal of the patient's attitude toward his phobia inasmuch as the usually "avoidance" response is replaced by an intentional effort - but also that it is carried out in as humorous a setting as possible . . . . A phobic person usually tries to avoid the situation in which his anxiety arises, while the obsessive

> compulsive tries to suppress, and thus fight, his threatening ideas. In either case the result is a strengthening of the symptom. Conversely, if we succeed in bringing the patient to the point where he ceases to flee from or fight his symptoms, but on the contrary, even exaggerates them, then we may observe that the symptoms diminish, and that the patient is no longer haunted by them (Frankl, 1967, pp. 145-147).

The role of humor in assisting the client to distance himself from his neurotic condition was emphasized by Frankl, perhaps in recognition that in many cases, the patient was observed to burst into laughter when instructed to intend the symptom. One of Frankl's well known cases demonstrates this technique:

> A young physician came to our clinic because of severe hidrophobia. He had been troubled by disturbances of the autonomic nervous system for a long time. One day he happened to meet his chief on the street, and as the young man extended his hand in greeting, he noticed that he was perspiring more than usual. The next time he was in a similar situation he expected to perspire again, and this anticipatory anxiety precipitated excessive sweating. It was a vicious circle; hyperhidrosis provoked hidrophobia and hidrophobia, in turn produced hyperhidrosis. We advised our client, in the event that his anticipatory anxiety should occur, to resolve deliberately to

> show people whom he confronted at the time just how much he could really sweat. A week later he returned to report that whenever he met anyone who triggered his anticipatory anxiety, he said to himself, "I only sweated out a liter before, but now I'm going to pour out a least ten liters!" (Frankl, 1967, p. 146).

The resultant expiration of the original symptom within a brief time span was attributed to client's change of attitude, which interrupted or arrested his anticipatory anxiety.

The fact that paradoxical intention has been used successfully by a number of Frankl's students and supporters (Ascher, 1979; Gerz, H., 1966; Febreyeyal, F., 1979) lends credence to its stature as a legitimate therapeutic intervention.

Paradoxical Psychotherapy

The use of paradox has been adopted as the cornerstone of several types of brief therapy and has been used widely in systemic approaches to family therapy. Systems therapy, often synonymous with family or marital counselling, approaches client(s) from the perspective that they are beings in relationship. The individual is a member of a number of interconnected systems or subsystems, circular in nature, whose primary aim is to maintain homeostasis or balance. Consequently, people will work actively toward continuance of functional or dysfunctional interactional patterns. Strategies such as triangulation, the joining of two subsystems against a third subsystem, are used to stabilize traditional behavior patterns, or to maintain boundaries

or alliances between group or family members irrespective of their effect on the system as a whole. Accordingly, systems therapy operates in the "here and now" and seeks to "unbalance" dysfunctional patterns of interaction which perpetuate symptomology to allow more functional patterns to appear. Change in one member of the system has an effect on the system as a whole. Humor within systems therapy can be used to challenge family alliances, myths, or meanings, to join with various family (group) members, to make a point, or to illustrate family metaphors (symbolic expressions of idiosyncratic beliefs or truths of a particular system) (Minuchin & Fishman, 1981, pp. 43-44, 48, 58, 65, 90, 109, 122, 289).

Paradox, within systems theory or as a brief therapy technique, can be utilized as a method of symptom prescription which circumvents client(s) resistance to change. When more direct methods of intervention are unsuccessful, paradox, a defiance based intervention, may be effective. The use of paradox is based on several assumptions:

1. the individual or family system operates as a self-regulating homeostatic system,
2. the symptoms act as a mechanism to maintain homeostasis,
3. the individual or family system will resist change.

As with Frankl's paradoxical intention, the intervention will eventually result in the opposite effect to what it appeared to intend. That is, client(s) will either continue a pattern to the point of absurdity or defy the counsellor's instruction thereby accomplishing the therapeutic goal of decreasing

symptomology. The uses of therapeutic "double binds", statements or questions that allow choice between two or more comparable positive alternatives, are closely aligned to other paradoxical techniques geared toward overcoming client resistance to change (Weeks & L'Abate, 1982, pp. 246).

Anecdotal literature involving paradox suggests that humor plays a large part in paradoxical intervention. Some schools of systems therapy such as the Milano group (Boscolo, Cechin, Palazzolia & Prata) discourage humorous delivery of paradoxical approaches to therapy although they note that client response may include laughter when symptoms are prescribed. Other systemic therapists (Bateson, Erickson, Minuchin, Haley) deliver paradoxical statements in a humorous or playful tone. Client(s) response to paradoxical interventions may vary from indifference to humor, surprise, shock, denial, hurt, or anger.

> The most common emotional reactions we have observed to paradoxical interventions are humor and confusion. Both these reactions seem to indicate that the intervention is on target. Most clients are upset by their symptoms. If they can laugh at the symptom, see it as absurd, or gain some distance from it, then the symptom has acquired a different emotional meaning. Humor itself is paradoxical. The punch line of a joke contradicts or meta communicates on the previous line. It could be argued that a humorous response indicates a reframing of the

problem from something to feel sad about to something to feel glad about (Weeks & L'Abate, 1982, p. 229).

At least part of the humor generated in paradoxical psychotherapy appears to stem from the process of cognitive restructuring whereby something once greatly feared becomes viewed as something absurd or laughable, a process which results in a shift of power away from the "symptom" and toward the client. Thus Frankl's assertion humor allows us to distance ourselves from personal issues evolves to include insight as a by-product of humor. One difference between Frankl's use of paradoxical intention and paradoxical intervention as prescribed systemic therapies involves the position of the client. Frankl laughed *with* his clients and treated them as equals. Strategic therapists, particularly those engaged in brief therapies, have been criticized for presenting themselves as superior, often enigmatic individuals who dispense "truths" to clients in a condescending or deliberately vague manner. Use of letters and notes with puzzling comments suggest game playing and one wonders if clients will ever be let in on the joke.

Provocative Therapy

Another current psychotherapy which utilizes humor to facilitate client insight is Provocative Therapy developed by Frank Farrelly. His use of critical humor such as ridicule, sarcasm, and mimicry is geared toward forcing the client away from established maladaptive cognitions and/or behaviors toward socially/emotionally appropriate ones. One of the central tenants in

this therapy is the belief that: "people exhibit oppositional behaviors . . . . If urged provocatively (humorously and perceptively) by the therapist to continue in his or her self defeating, deviant behavior, the client will tend to engage in self-and other-enhancing behaviors, which more closely approximate the societal norm" (Corsini, 1981, p. 684).

Farrelly's beliefs appear consistent with Freud's in that humor is "rebellious" and his use of humor to circumvent the defensive ploys presented by individual clients highlights this refusal to follow established patterns of interaction. Corsini (1981) views this approach toward therapy as based on five major assumptions. First, people are capable of change. Second, people are not fragile creatures - they have strength. Third, people respond to challenges. Fourth, people have a tendency to respond to situations or events in well established interactional patterns. Fifth, and this may well explain why Farrelly's "critical" humor works, people receive non-verbal messages more strongly than verbal messages.

In answer to criticism directed toward the sarcastic, often biting approach adopted by therapists practicing provocative therapy, Farrelly states that sarcasm or ridicule is never directed toward the patient but is used to provoke change in maladaptive behaviors.

> Since often the provocative therapist transmits very negative feedback (to sensitize or desensitize, set limits, provoke reality resting, etc.) he or she must also counterbalance that with highly positive non-verbal messages (for support, to make more

palliative the rather bitter pills all of us must swallow at times, etc.) (Farrelly cited in Corsini, 1981, p. 684).

Farrelly's work appears to have parallels in several other psychotherapies. His configuration of inappropriate coping strategies closely resembles the approach taken by Albert Ellis (Rational Emotive Therapy) in attacking irrational belief systems. Use of sarcastic humor is also reminiscent of paradoxical techniques already described in that clients receive incongruent messages when they are urged to continue self-defeating behaviors. Finally, some aspects of provocative therapy appear consistent with Reversal Theory (Apter, Fontana, Murgatroyd, 1985). Reversal therapy revolves around the concept that people alternate between paratelic (playful, spontaneous, arousal seeking) states and telic (serious, future oriented) states. Failure to move flexibly from one state to another often results in socially inappropriate behaviors. Farrelly's use of humorous exaggeration to confront maladaptive behavior closely resembles the use of humor as a "flooding device--using grossly amusing images of the consequences of the client's behavior repeatedly" (Murgatroyd, 1987, p. 234) generally associated with those practicing psychotherapy from a reversal theory perspective.

Natural High Therapy

This form of psychotherapy, developed by Walter O'Connell, advocates humor as a ***goal*** of therapy rather than an indicator of adaptive behavior. Therapists utilizing this perspective maintain a "here and now" orientation and demand active participation from their clients. Humor is viewed as the

vehicle through which self actualization (natural high) is reached. Focal concepts include the use of humor geared toward provoking clients into giving up irrational "demandments" and "negative nonsense" which constrict the development of positive self esteem and social interest, two aims closely aligned to the work of Alfred Adler. Corsini, in his discussion of innovative therapies, highlights the importance of humor with Natural High Therapy.

> A premise of Natural High theory is that early constrictions are always potential stress reactions. Humor, coming after SE (self-esteem) and SI (social interest) expansion and an appreciation for life's paradoxes, gives a distancing perspective, a "God's eye view," that nips constrictions in the bud. Humor is the chief coping capacity. Beyond being in the service of the ego addictions, humor is a perspective in the service of the self, the royal road toward actualization (Corsini, 1981, p. 561).

Individual therapy sessions move quickly to group sessions where "encouragenic" strategies are used to facilitate client growth. Patients move through three stages or levels in their development toward self actualization. Initially, they struggle to move from external to internal locus of control thereby generating an internalized sense of self worth. During the second stage, clients work toward developing positive social interest and the ability to encourage and be encouraged by others. Finally, the person transcends "ego addictions" and various "demandments" in order to explore higher level goals inherent in self actualizing persons. O'Connell's development of

humordrama incorporates teaching individuals to develop a sense of humor within a therapeutic context.

As in Provocative Therapy, many of the tenets developed by Albert Ellis which contain reference to humor as a tool to challenge irrational belief systems have been incorporated. Utilization of a cognitive-humanistic counselling perspective, however, precludes the use of critical humor practiced by Farrelly.

Other Therapies

Several other schools of therapy utilize humor as a instrument to encourage change. One of these is Rational Emotive Therapy, developed by Albert Ellis, which follows a "present" centered approach to challenge or attack a clients' irrational beliefs. Behavioral, cognitive, and emotive strategies are adopted to provoke the client into giving up "shoulds", "musts", "ought tos", or other "demandments" which constrict their enjoyment of life. The following excerpt illustrates the therapist's use of humor to direct the client's awareness of her attempt to restrict therapy to a superficial or "safe" level.

C-27: I can't imagine existing, uh, or that there would be any reason for existing without a purpose!

T-28: No, but the vast majority of human beings don't have much purpose.

C-28: [angrily] All right then. I should not feel bad about it.

T-29: No, no, no! Wait a minute now. You just ***jumped.*** [Laughs] You jumped from one extreme to another! You see, you said a sane sentence and an ***insane*** sentence. Now, if we could get you to separate the two - which you're perfectly able to do - you would solve the problem. What you really mean is: "***It would be better*** if I had a purpose. Because I'd be happier." Right?

C-29: Yes.

T-30: But then you magically jump to: "Therefore I ***should***!" Now do you see the difference between, "***It would be better*** if I had a purpose," and "I ***should***, I ***must***, I've ***got to***?"

C-30: Yes, I do.

T-31: Well, What's the difference?

C-31: [laughs] I just said that to agree with you!

T-32: Yes! See, that won't be any good. We could go on that way forever, and you'll agree with me, and I'll say, "Oh, what a great woman! She agrees with me." And then you'll go out of here just as nutty as you were before!

C-32: [laughs: this time with genuine appreciation and good humor] (Corsini, 1984, pp. 216-217).

Although humor appears to be used frequently by counsellors who adhere to this school of therapy, mention of humor as a therapeutic device

is minimal and generally treated as part of the repertoire of strategies for attacking a client's irrational beliefs.

Gestalt therapy, originally developed by Frederick (Fritz) Perls, also advocated a "present" centered, phenomenological approach. Subsequently, Gestalt Therapy underwent a period of change, perhaps in recognition that Perl's charismatic personal characteristics were a large part of his therapy. This therapy remains experiential in nature with a strong focus on developing client awareness of "what is" for them in the present moment. The goal of therapy is client self acceptance and esteem.

Counsellor's who practise from this perspective seldom mention humor as a vehicle to promote authenticity or change. However, several techniques, most notably enactment and exaggeration, allow for the use of humor to facilitate increased self awareness. Polster and Polster (1973) address the issue of humor as it relates to enactment of unfinished business. "Humor is a creative recognitive of the redeeming aspects of what may otherwise be experienced flatly or as merely negative" (p. 243).

Lefcorert et al. (1974) assert the use of humor is directly related to an individual's locus of control. Those who view events or situations as under their control (internal) will engage in humor more than those who view events or situations as beyond their control (external). George and Dustis (1988) emphasize the importance of humor as a personal attribute of group leaders to produce modelling effects, facilitate the healing process, normalize concerns, and to create bonding between group leaders and group members.

Although they add qualifications to the use of humor within counselling which include directing critical humor toward irrational behaviors or beliefs rather than toward persons involved with the group, they advocate humor as an effective therapeutic tool.

The literature relating to humor in counselling is considerably less developed than research geared toward explaining humor as a psychological phenomenon. Controversy over therapeutic uses of humor - boon or bane - within therapy may be partially responsible for this situation. Kubie, a well known psychiatrist, touched off heated debate in this area. His contention that humor had the potential to: (a) damage therapeutic relationships, (b) cause anger or hurt or inhibit client reactions, (c) minimize concerns, (d) strengthen defense mechanisms, (e) block free association, (f) disguise issues, and (g) meet therapist needs at the expense of client needs, remains the cornerstone for arguments against the use of humor in counselling. As evidence supporting either claim is largely anecdotal, personal beliefs and professional judgement play a large role in determining when humor is appropriate or "therapeutic." The possible benefits and risks related to humor in counselling follow. Many psychologists advocate caution before engaging in humor while counselling. "Indeed the premature adoption of humor in psychotherapy may be unilaterally and partially gratifying - like premature ejaculation - but it could in the long run surely prove disastrous for the total enterprise" (Saper, 1988, p. 317).

Summary of Possible Benefits of Humor Within Counselling

Humor as a Communication Tool

1. may assist in development of therapeutic relationship, facilitate bonding, sharing (Kuhlman, 1984),
2. is a relatively safe way to express concerns,
3. may be a signal of more adaptive behavior (Allport, 1968 cited in Murgatroyd, 1987),
4. may communicate alliances, affective affiliations,
5. allows the therapist to enter the client's world view as humor is often rich in metaphor (Coleman, 1962; Erickson cited in Haley, 1973),
6. can be used as a projective technique (Kuhlman, 1984; Levine & Relich, 1955),
7. equalizes the client - counsellor relationship.

Humor as a Coping Strategy

1. is a safe means of reality testing - taboo violation (Alford, 1982),
2. allows the client to distance self from issues, and to maintain sense of proportion (Frankl, 1969),
3. functions as a signal of affective control (Sands, 1984),
4. is a safe expression of aggression or hostility (Sands, 1984),
5. normalizes or legitimizes concerns (Driscoll, 1985; Lefcourt & Martin, 1986),
6. functions as a coping mechanism (Goldstein, 1976),
7. can de-escalate crisis (Smith, 1973).

Humor as Tension Relief/Release

1. may offer a release of tension/anxiety, relief from physical pain (Lefcourt & Martin, 1986),
2. may be an expression of mastery, e.g., whistling in the dark phenomenon (Levine, 1977),
3. systematic desensitization: humor appears incompatible with anxiety or anger. It may be used to assist clients to gain affective control (Ventis, 1973).

Humor as a Cognitive Strategy

1. encourages flexibility of thought, creativity, spontaneity. These may lead to insight (Allport, 1961),
2. is a perspective gathering technique (Kuhlman, 1984),
3. facilitates attitudinal change (Ellis, 1977),
4. may bypass resistance (Grotjahn, 1967, 1970; Roseheim, 1974, 1976),
5. may facilitate new or expanded awareness (Kuhlman, 1984),
6. includes an element of surprise which may facilitate cognitive restructuring (Kuhlman, 1984).

Other - Humor

1. is in itself a pleasurable activity. This may be therapeutic (Levine, 1979),
2. appeals to oppositionality in clients (Driscoll, 1975).

Summary of Possible Risks of Humor Within Counselling

Humor

1. damages the therapeutic relationship (Kubie, 1971),
2. may not be pleasurable to the client (Kubie, 1971),
3. may cause anger or hurt and inhibit expression of these feelings (Kubie, 1971),
4. may be used to meet the therapist's needs rather than the clients (Kubie, 1971),
5. can block or arrest free association (Kubie, 1971),
6. may cause pain or confusion (Kubie, 1971),
7. may disguise issues (Zuk, 1966),
8. can be a form of client resistance,
9. can increase self depreciation (critical humor),
10. may minimize concerns/issues (Kubie, 1971),
11. may be used to strengthen defense mechanisms (Freud, 1928c, Kubie, 1971).

Conclusion

In conclusion, although many therapists advocate the use of humor as a communication tool, coping strategy, tension relief mechanism, or as a sign of healing/health, one must be cautious with its use. Inappropriate use of humor has the potential to irreparably damage the counsellor-client relationship particularly because hurts delivered in a joking manner are

ambiguous and as such create confusion which may inhibit the client's expression of hurt or anger thus creating barriers to the healing process. Exploration of therapist and client interpretations and attributions to humor which occur within therapeutic encounters may minimize risks in situations where rapport between client and counsellor has already been established. Use of humor in counselling relies on the professional judgement and personal skill of each particular therapist. Thus, effective therapists will use humor effectively while ineffectual therapists will use it ineffectually. Humor is no different in this respect than any counselling technique which is part of the therapist's repertoire. It can be potentially helpful or harmful according to the manner in which it is used.

Empirical Investigations of Humor

Traditionally, empirically based attempts to study humor as it relates to counselling revolve around the effect of humor on establishing rapport with clients, and on increasing positive client perceptions of the therapeutic process. Although results appear inconclusive, a summary of several well known studies follows.

Bernard Saper (1987) reviewed some of the studies conducted over the period from 1973 to 1984. This included Labrentz's (1973) study of the effects of humor prior to initial counselling sessions on the counsellor client relationship. Presentations of cartoon humor prior to therapy resulted in significantly higher scores on the Relationship Questionnaire than those

obtained in a control group (counselling only), a group placed in a waiting period, or those given geometric designs to examine before the initial session. A study by Huber (1974) hypothesized that therapist introduced humor would decrease client discomfort of tension as measured by the discomfort relief quotient and affect the client's perspective of the counselling relationship. The findings did not support the initial expectation that humor would decrease client tension within the counselling session. Golub (1979) conducted research to determine whether the use of humor within counselling would enhance the subject's positive ratings on both the counsellor and the counselling session. He used video tapes, actors, and detailed scripts which emphasized humor to gently confront client statements and highlight therapist-client processes. Data analysis did not show any significant difference between the subjects evaluations of counsellors who used humor and those who did not. Once again, the value of therapeutic humor remains questionable. Insufficient empirical evidence exists to determine whether humor helps or hinders the healing process. Difficulty isolating humor as a variable, replicating what is essentially a spontaneous phenomenon, factoring out situational and personality characteristics all hamper research which is essential to an empirical verification of the significance of humor within counselling.

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SECTION II

CHAPTER IV

FORGIVENESS FROM A CHRISTIAN THEOLOGICAL AND PYSCHOLOGICAL PERSPECTIVE

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FORGIVENESS AND PSYCHOTHERAPY

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FORGIVENESS FROM A CHRISTIAN THEOLOGICAL AND PSYCHOLOGICAL PERSPECTIVE

Introduction

Definitions of forgiveness vary from "the reacceptance in favour of one by whom we have been offended" to "a cancellation or remittance of a debt, fine, or penalty." Jewish tradition suggests that Christian conceptions of forgiveness stem from the Hebrew verbs **maha** (to wipe out) **nasa** (to take away) **ksy** (to cover), and more importantly **salah** (to forgive). Thus the Jewish perspective of forgiveness as "divine" prerogative precedes references within the Old Testament where forgiveness of sins is also discussed from the perspective of divine forgiveness, that is, God's forgiveness of man's transgression against His laws (sin). Exploration of forgiveness as a construct in Christian theology will precede similar discussion within the field of psychological theory. Eastern religions such as Buddhism and Hinduism will not be explored in this chapter despite the fact that "non-violence" in Hinduism and "compassion" in Buddhism are tangentially related to forgiveness. Their system of beliefs differ greatly from Christianity and are beyond the scope of this thesis.

This analysis is concerned with understanding forgiveness within the tenets of both Christianity and psychology. In contrast to the abundance of material available in theological texts, information on forgiveness and its

relation to psychological perspectives is sparse and necessitates extrapolation of general concepts from overall theories. The relationship between forgiveness within Christian theology and modern psychology will be explained following presentation of each theoretical framework.

Christian Theological Views of Forgiveness

Forgiveness is both prescribed and described in the old and new testaments. In both testaments, God the Father is presented as a patriarchal figure, the disciplinarian, both merciful and vengeful, capable of forgiving or pardoning sin or withholding His forgiveness, often extracting retribution for wrong doing. The most significant difference between the old and new testaments is the change in emphasis from "divine" forgiveness in the old, to "human" forgiveness in the new. The introduction of Jesus, Son of God, is the agent whereby this shift is made. Just as God appears to represent the father figure, Jesus presents a more nurturing presence exemplified by his commands to "love thy neighbor as thyself" and "love thine enemies". This change of focus from man's relationship to his God to man's relationship to his fellow man constitutes a major difference between the two testaments.

The Old Testament

Within the Old Testament forgiveness was viewed primarily from the perspective of divine forgiveness, that is, God's forgiveness of man's transgressions. God is often portrayed as reactive in a "human" sense,

becoming angry or proud, with the capacity to change His mind or forgive as part of His own unique state of being.

In response to these transgressions of divine will, God did not always forgive and often demanded some form of retribution for sin. One example of this principle is observed when Moses climbed Mount Sinai to receive the tablets on which the ten commandments were to be written. The Israelites, uncertain of Moses' fate, constructed a golden calf and began to worship it instead of Yahweh (God). God threatened to kill all of them but Moses interceded and God allowed him to punish only the idolators, approximately 3,000 people. Moses then asked God's forgiveness.

> Moses then went back to Yahweh and said, Oh, this people has committed a great sin by making themselves a god of gold. And yet, if it pleased You to forgive their sin . . . ! If not, please blot me out of the book You have written! Yahweh said to Moses, "Those who have sinned against Me are the ones I shall blot out of My book. So now go and lead the people to the place I promised you. My angel will indeed go at your head but, on the day of punishment, I shall punish them for their sin. And Yahweh punished the people for having made the calf . . . " (Exodus 32:31-35).

This pattern of acceptance ***after*** punishment is repeated in other sections of the old testament where God is portrayed as loving and wrathful, just but exacting, punishing but forgiving. In short, God is a powerful

controlling figure who does not tolerate disobedience or sin without defining consequences, sometimes harsh consequences, but who is willing to forgive sin and reconcile with his followers.

The New Testament

In the new testament, the life and teachings of Jesus Christ introduce a new element. Where the old testament emphasized divine forgiveness, Jesus' actions and sermons emphasize human forgiveness. Some examples of Jesus' statements regarding forgiveness are provided:

> And when you stand in prayer, forgive whatever you have against anybody, so that your father in heaven may forgive your failings too (Mark, 11:25-26).
>
> . . . and forgive us our sins, for we ourselves forgive each one who is in debt to us (Luke 11:3-4).
>
> If your brother does something wrong, rebuke him and, if he is sorry, forgive him. And if he wrongs you seven times a day and seven times comes back to you and say, "I am sorry," you must forgive him (Luke 17:4).
>
> Yes, if you forgive others their failings, your heavenly Father will forgive you yours; but if you do not forgive others, your Father will not forgive your failings either (Matthew 6:14-15).
>
> Then Peter when up to him and said, "Lord, how often must I forgive my brother if he wrongs me? As often as seven times?

> Jesus answered, "Not seven, I tell you, but seventy-seven times (Matthew 18:21-22).

Jesus told many stories or parables in which forgiveness was emphasized as an underlying theme. One of the best known involved the prodigal son of a prosperous man who "squandered his money on a life of debauchery" (Luke 15:13). When his money was gone, the young man decided to return to his father's home to seek employment as a servant as he felt unworthy of being included with other family members. His father, instead of reproaching him for past behavior, welcomed him back into the family, an action which enraged the prodigal son's older brother who protested his father's generosity in accepting the errant son back into the family.

> Central in this parable is the total acceptance by the father of one who, by the world's judgement, is not worthy to receive. The difficulty in one human being forgiving another is found in the figure of the older son who bitterly protests his father's kindliness to his brother. The story can be seen as an analogy of the depths and availability, of God's love for human beings, as well as the difficulty humans have in sharing that love with one another, (Pastor, 1986, p. 57).

This parable introduces the concept that forgiveness allows us to create new possibilities or new relationships. It is essentially a "freeing" act motivated by love or acceptance for self and other(s). Failure to forgive

constricts our ability to move out of the grip of irreversible history, and maintains our stance as prisoners of our past.

A second parable, that of the unforgiving debtor, highlights the relationship between being forgiven and forgiving and brings into focus the concept of responsibility for one's actions. In this story, a servant owes his master a huge sum of money which he is unable to pay. The master orders that he, his family, and possessions be sold in payment of this debt. The servant begs his master to be patient and give him time to raise the capital he owes. His master, feeling sorry for him, cancels his debt and allows him to go free. After leaving his master's presence, the first servant meets another servant who, in turn, owes him a small amount of money. Despite his fellow servant's pleas for patience and vows to repay the debt, the first servant has him thrown into prison. When the master hears what has happened he sends the "wicked" servant to the torturers until his debts are paid. Jesus ended this parable by saying, "And that is how my heavenly Father will deal with you unless you each forgive your brother from your heart" (Matthew 18: 35).

Thus, the concept of retribution for wrongful behavior introduced in the old testament is reiterated in the new testament. Additionally, Jesus acknowledges his Father's power to forgive (pardon) and/or effect retribution for wrong doing while focusing his actions and words on assisting man to understand and practice ***human*** forgiveness.

Reconciliation

Reconciliation stems from the Latin word ***re-concilio*** meaning "to come together again." Traditionally reconciliation carried the function of initiation into the Christian community and the renewal of faith and fellowship with God and community after sins had been purged. Borobio (1986) defines it as "uniting what was split, cancelling debts, making friends of enemies, peacemaking in quarrels. Reconciliation requires communication and meeting in many relationships, the central one of which is that between the merciful God and the sinful human being" (p. 100). Reconciliation then functions as the culmination to the process of forgiveness. The 1986 national meeting of the Federation of Diocesan Liturgical Commissions focused on this topic from several perspectives. Doris Donnelly detailed the relationship between reconciliation and forgiveness.

> A great deal of confusion exists in our use of the words "forgiveness" and "reconciliation". For me, the equation has three terms. The first is hurt, which needs to be identified, tested, and owned before we proceed to forgiveness, which is possible only by reaching to a power beyond us. Forgiveness demands that we look our hurt straight in the eye, that we assess the damage done to our psyches, our bodies, our spirits, and with all our wits about us choose - decide - will to forgive. That may sound preposterous, but only in that way is healing to be found. The third and final step of the equation is

> reconciliation, which is a bringing together of that which belongs together but is apart (1986, p. 17).

Marion Pastor adds to our understanding of reconciliation by summing up the writings of the noted theologians Taylor, MacKintosh, Redlich, Cobb, Piper, Klassen, and Barton.

> . . . the cited theologians are speaking of divine forgiveness. To them human forgiveness too is a free action based on the loving and generous nature of the forgiver, in which the intention is to remove the barriers to relationship which have been set up by the offender. For most of them it carries the further connotation of a restoration to fellowship. It may or may not involve the mitigation of punishment in part or in whole (Pastor, 1986, p. 22).

Reconciliation demands acceptance of oneself and of others which results in the creation of expanded possibilities for future relationships.

Church Doctrine

Historical accounts of church dogma related to forgiveness suggest that while Church officials espoused agreement with Christ's teachings related to forgiveness, they placed little faith in human forgiveness without establishing some form of atonement or repentance.

> Some examples are the doctrine ratified at Nicea in 326 A.D., stating that the church was the only authorized source of

> forgiveness; Augustine's doctrine a hundred years later stating that all human beings were born sinful and in need of baptism into the church or were doomed to damnation; and Anselm's doctrine in the eleventh century that Christ died on the Cross because God's justice required that someone had to be punished before he could forgive the sins of mankind (all referenced above) . . . (Pastor, p. 97).

Historical accounts of the Church's internal and external strife appear to support Pastor's contention that church officials accepted wholeheartedly Jesus' statements of the importance of human forgiveness, thus obeying the letter of the law, but dismissed these teachings as not practical or "humanly" attainable, thus denying the spirit of the law. Only recently have several well known theologians and pastoral counsellors (Smedes, Augsburger) addressed human forgiveness as a viable "way of being" in the world.

"Forgiveness is God's invention for coming to terms with a world in which, despite their best intentions, people are unfair to each other and hurt each other deeply. He began by forgiving us. And he invites us all to forgive each other" (Smedes, 1984, vii).

Thus a shift from the perspective of man as sin-full to man as hope-filled has been noted in many Christian churches over the last half century. The possible influence of psychology on theology may, in part, account for these changes and will be discussed in future sections of this Chapter.

Agapé

We must address one final component to understanding forgiveness within a Christian context - that of love. There are at least two kinds of love understood within Christian philosophy, romantic love and that of agapé, or brotherly love. Agapé love is love of man for mankind, a spiritual joining or feeling of care and concern for our common humanity. It refers to a universal, unconditional love motivated by altruistic empathetic care for others viewed as a gift from God. The Dictionary of Christian Ethics sums up the relationship between love and forgiveness in the following way:

> In love, God faithfully favors humanity with his presence and grace. In forgiveness, God "sends away" or "pardons" or "covers" human disavowal and violations of this divine initiative . . . As ***human actions***, the practice of love through forgiveness and justice expresses the response in behavior toward God and toward one's fellow human beings of what God characteristically and revealingly does toward and for the human meaning and fulfillment of life . . . . Love is the unexceptional readiness in word and deed to "bear one another's burdens, and so fulfil the law of Christ" (Gal. 6:2). Forgiveness is the "sending away" or "pardoning" or "covering" what has come between persons who as neighbors have become enemies (pp. 235-236).

Also noted is the relationship between love and forgiveness as part of the process of reconciliation. Thus agapé functions as the motivation for

initiation of the process of forgiveness which ends in reconciliation between the offender and the offended.

Psychological Views of Forgiveness

Freud

Sigmund Freud, the father of modern psychoanalytic theory, viewed religion as a "universal neurosis." He compared it to obsessional neurotic behavior in both ***The Future of an Illusion*** (1927), and in ***Moses and Monthesism*** (1939). He believed religion and obsessive-neurotic behavior both have their basis in guilt and are symbolic acts despite the fact that religious rituals are public and obsessive acts are private. He espoused the theory that religious beliefs, although useful for the development of civilization originally, had become oppressive and essentially dangerous in two respects. First, religious beliefs stunt the growth of human intellect by restricting areas of thought, suppressing doubts, and inhibiting questioning. He voiced the opinion that religion was the antithesis of the scientific process, a process to which he devoted his life. Secondly, Freud saw religion as an attempt to escape the realities of life through creation of a "God-father" image whereby adults could be succored and protected from feelings of helplessness engendered by fear in the face of an uncaring and omnipotent force such as nature. The following illustrates this point.

> In my ***Future of an Illusion*** I was concerned much less with the deepest sources of the religious feeling than with what the

> common man understands by his religion - with the system of doctrines and promises which on the one hand explains the riddles of this world with enviable completeness, and, on the other, assures him that a careful Providence will watch over his life and compensate him in a future existence for any frustrations he suffers here. The common man cannot imagine this Providence otherwise than in the figure of an enormously exalted father (Freud cited by Goldenberg, 1982, p. 19).

Thus, Freud rejected religion, including church rituals which to him resembled obsessive neurotic behavior. Freud did, indirectly, address his views toward forgiveness of others when he attacked two of Christ's statements inviting his followers to love their neighbors as much as they loved themselves and to love their enemies. This quote, although lengthy, is presented in its entirety since it provides insight into Freud's understanding of Christian doctrine and beliefs.

> Let us adopt a naive view towards it, as though we were hearing it for the first time; we shall be unable then to suppress a feeling of surprise and bewilderment. Why should we do it? What good will it do us? but, above all, how shall we achieve it? How can it be possible? My love . . . imposes duties on me for whose fulfillment I must be ready to make sacrifices. If I love someone, he must deserve it in some way . . . . He deserves it if he is so like me in important ways that I can love

myself in him; and he deserves it if he is so much more perfect than myself that I can love my ideal of my own self in him . . . . But if he is a stranger to me and if he cannot attract me by any worth of his own or any significance that he may already have acquired for my emotional life, it will be hard for me to love him. Indeed, I should be wrong to do so . . . for it is an injustice to them (my own people) if I put a stranger on a par with them. But if I am to love him (with this universal love) merely because he, too, is an inhabitant of this earth, like an insect, an earth worm or a grass snake, then I fear that only a small modicum of my love will fall to his share . . . . What is the point of precept enunciated with so much solemnity if its fulfillment cannot be recommended as reasonable?

On closer inspection, I find still further difficulties. Not merely is this stranger in general unworthy of my love; I must honestly confess that he has more claim to my hostility and even my hatred. He seems not to have the least trace of love for me and shows me not the slightest consideration. If it will do him any good he has no hesitation in injuring me . . . . Indeed he need not even obtain an advantage; if he can satisfy any sort of desire by it, he thinks nothing of jeering at me, insulting me, slandering me and showing his superior power; . . . If he behaves differently, if he shows me consideration and

> forbearance as a stranger, I am ready to treat him in the same way, in any case and quite apart from any precept. Indeed, if this grandiose commandment has run "Love thy neighbour as thy neighbour loves thee," I should not take exception to it. And there is a second commandment, which seems to me even more incomprehensible and arouses still stronger opposition in me. It is "Love thine enemies." If I think it over however, I see that I am wrong in treating it as a greater imposition. At bottom it is the same thing (1930, 21:109-10).

Thus Freud's labelled forgiveness of hostile others as ridiculous if not psychologically impossible to achieve. By viewing forgiveness as logical, Freud misses the core of the matter. Forgiveness is not a logical or reasonable process; it is part of the spiritual or mystical element in life.

> Yet it is only the person who experiences and survives the unreasonableness of life who can understand the unreasonableness of forgiveness. Once that is understood, mystery is born - and forgiveness is at its heart, a mystery (Donnelly, 1979, p. 10).

Jung

Carl Jung, a Swiss psychiatrist and contemporary of Freud and generally acknowledged as one of the most important pioneers in psychodynamic theory, spent years in self analysis. Jung, as opposed to Freud, never doubted the existence of God. His theory of evolution toward

integration of oppositional components within the psyche - shadow and ego, sensory experience and mystical or spiritual experience, love and hate - as a method of reaching "individuation", a concept which influenced Maslow's theory of self actualization, has sparked remarkable interest during the past several decades. Jung appeared ambivalent toward what he called "traditional" Christian religions, alternately praising some aspects of "creed" or dogma while denigrating others. His famous dream of God sitting on a throne and dropping fecal material on a cathedral appears to sum up his view of formalized religion. "I saw before me the cathedral, the blue sky, God sits on His golden throne, high above the world - and from under the throne an enormous turd falls upon the sparkling new roof, shatters it, and breaks the walls of the Cathedral asunder" (Jung cited by Goldenberg, 1982, p. 55).

His comments following this quote indicate belief in his view of God as immediate and living, omnipotent and free, and not bound by traditions. His definition of religion indicates belief and support for religion as a state of mind rather than a formalized institution.

> Religion appears to me to be a peculiar attitude of the human mind, which could be formulated in accordance with the original use of the term "religio", that is a careful consideration and observation of certain dynamic factors, understood to be "powers", spirits, demons, gods, laws, ideas, ideals or whatever name man has given to such factors as he has found in his world powerful, dangerous or helpful enough to be taken into careful

consideration, or grand, beautiful and meaningful enough to be devoutly adored and loved (Jung, 1938, p. 5).

Jung did not speak specifically of forgiveness, but his writing on the topic of Confession within the Catholic Church indicated he viewed this as a cathartic act whereby the individual moves from isolation to membership in the community of man. He believed that personal secrets result in guilt irrespective of whether they are harmful secrets. Confession, aimed at establishing forgiveness and reconciliation, was cited by Jung as an effective method of examining the dark side or "shadow" of the person. His term "acceptance" parallels forgiveness of oneself or becomes part of the process between forgiveness and reconciliation. "Confession is a means of confronting the shadow, of bringing the shadow to the surface, of undergoing the correction necessary for acceptance of one's whole self, even the least of oneself. Wholeness and integrity of personality are restored and reconstituted" (Jung, p. 44).

Jung also stated that he felt the protestant faiths had lost an important vehicle for promoting well-being by eliminating confession from their "creed" (Todd, 1985). He addressed the importance of confession to *another* by indicating that self acknowledgement of secrets by comparison, appeared ineffective in promoting growth. Jung also wrote that confession was the prototype of psychotherapeutic techniques. "The first beginnings of all analytical treatment of the soul are to be found in its prototype, the confessional" (Jung 1954, p. 55).

Thus Jung challenges Freud's reductionist philosophy which negates the possibility of a spiritual or mystical component within the human psyche. His belief in man's predisposition toward "wholeness", toward integration of dualities within the self, toward individuation become the cornerstone for therapy. Client verbalization and confrontation with "shadow" portions of their psyche precipitate movement toward self acceptance. Confrontation is resolved when clients begin to forgive, reconcile, and integrate conscious knowledge and experience with unconscious knowledge and experience.

Rogers and Frankl

Carl Rogers' humanistic approach to psychotherapy evolved from non-directive therapy to Client Centered Therapy to Person Centered Therapy. His belief that man is basically good and moves naturally toward self actualization if given a safe environment became the central tenet of his theory of counselling. Although Rogers did not see religion as being important to modern people, he did stress the importance of self acceptance and acceptance by others for psychological health. He viewed behavior as the individual's attempt to satisfy needs, and healthy functioning as behavior congruent with the inner self. Alienation from one's inner self results in misguided, often destructive behavior which is always an effort to fulfil basic needs. Roger's therapeutic conditions which include congruency, unconditional positive regard, and empathetic understanding, must be present to facilitate growth within individual clients. One can view unconditional positive regard as roughly analogous to agapé love, and the process of self

acceptance as resembling that of forgiveness and reconciliation within Christian philosophy. Therefore, Roger's beliefs embrace the process of letting go self hurts or hurts from others and accepting oneself and others by valuing them simply because they exist.

Victor Frankl presupposes forgiveness in man's search to find [illegible] in life. His work toward development of an existential therapy, Logotherapy, is largely a result of his experiences in several German concentration camps during World War II. Frankl maintains that an individual's central life task is to create meaning from existence. This can be done in three ways: (1) by creating or engaging in purposeful work, (2) by loving and encountering another, and (3) by accepting unavoidable suffering and using it as an opportunity for personal growth. Frankl lists suffering and death as certainties in life and stresses the self determining nature of man. ". . . man is ultimately self-determining. He does not simply exist but always decides what his existence will be, what he will become in the next moment . . . every human being has the freedom to change at any instant" (Frankl, 1946, p. 154).

Christ's commandment to love thy neighbor as thyself, a plea for acceptance of self and others through loving behavior, closely parallels Frankl's assertion that through loving another person we become a more fully human person.

> Love is the only way to grasp another human being in the inner most core of his personality. No one can become fully aware of the very essence of another human being unless he loves him.

> By his love he is able to see the essential traits and features in the beloved person; and even more, he sees that which is potential in him . . . by his love, the loving person enables the beloved person to actualize these potentialities"(Frankl, 1946, p. 134).

Frankl's writing implicitly suggests that religious beliefs might be an essential component to wellness for individual clients. "Logotherapy does not cross the boundary between psychology and religion. But it leaves the door to religion open and it leaves it to the patient whether or not to pass the door" (1969, p. 143).

> As soon as we have interpreted religion as being merely a product of psychodynamics, in the sense of unconscious motivating forces, we have missed the point and lost sight of the authentic phenomenon. Through such a misconception, the psychology of religion becomes psychology as religion, in that psychology is sometimes worshipped and made an explanation for everything (1969, p. 212).

In summary, the term forgiveness is seldom used in psychological literature and never defined (Pastor, 1986). To enable us to discuss this concept we must partition it into its component parts. Initially someone is hurt or wounded psychologically which creates a distancing from one's "self" or from others. Through a setting aside of resentment or anger, the natural reaction to pain, one freely chooses to "let go" hurt which, in turn, promotes

healing and acceptance and the ability to start fresh, opening the door to renewed relationship(s).

Integration of Psychology and Theology

If one accepts Jung's statement that modern psychotherapy has its roots in the Christian tradition of the confessional, why are words like "forgiveness" so seldom seen in psychological literature? Perhaps modern psychology, while borrowing some of its concepts from Christian philosophy, finds it difficult to credit the source? What is the risk involved? To answer those questions it is necessary to view the commonalities and differences between these two fields of inquiry.

Initially Freud's theories impacted formalized religion in several ways. Studies such as J.M. Mecklin's, which concluded that medieval saints were not a product of divine grace but rather of their unique environment, or the theories of sociologists who stated that psychoanalysis would replace Christianity in coming decades served to antagonize both parishioners and theologians. Gradually, several articles such as that by Anton Boisen in 1936 who presented the argument that insane clients could be helped achieve integration of personality through the intervention of religious workers trained in psychology signalled the beginning of pastoral counselling which included the insights from both psychology and Christianity. Rollo May, a minister and existential psychologist, felt that the merit of religion in one's life should be based on whether or not it strengthened self esteem and one's

sense of dignity, thereby increasing mature decision making skills. The literature relating to Religion and Mental Health shows the prevalence of psychological terminology in discussions of healing or illness. Indeed, the creation of journals such as ***Pastoral Psychology, Psychology and Theology,*** and ***Pastoral Care*** are an indication of the interplay between psychology and Christian theology.

Before proceeding with literature relating to integration of theology and psychology it is necessary to underline points of divergence as well. Traditionally, theologians have characterized psychologists as being too experience or affect oriented, and as placing too little emphasis on personal responsibility. Many psychologists, conversely, viewed theologians as dogmatic because of their emphasis on intellectualization while negating the emotive component within human interactions. Where do they meet? Both theology and psychology are concerned with man's well being. Although psychology focuses on healing of the mind, and theology healing of the spirit, both seek to integrate different aspects of the psyche in the restoration of "wholeness". Both believe man has the capacity to change. Psychology views change by emphasizing the "natural" while theology views change from a "supernatural" perspective. Both believe that love is essential for healing despite the fact psychology equates love with health, and theology equates it with salvation.

Rosenberg, in his study of psychology and theology, has outlined benefits to Christian understanding as a result of psychological literature.

Initially, he states the church has been able to make a distinction between *real guilt*, which can be resolved through confession, and *neurotic guilt*, which can be resolved through psychotherapy. Additionally, the understanding that self love and acceptance must precede love and acceptance of others is a result of psychological study. A more relaxed attitude toward sexuality was another benefit he noted as was the increasing importance attached to providing psychological training to ministers. Integration of the two fields has also benefitted psychologists by providing understanding of the importance religious principles may hold for individual clients and enabling therapists to enter their "world view" more completely as advocated by most current schools of psychotherapy. Indeed, the realization that psychology is not a substitute for religion and religion does not guarantee mental health (Rosenberg, 1980) opens the door to integration of both fields of inquiry, which can result in enriched understanding in both fields. Forgiveness is one topic which bridges this gap. It has the potential to alleviate real as well as neurotic guilt and to increase acceptance of self and others.

Mowrer (1961) strongly supported the stance that real guilt does exist and criticized psychodynamic therapists for their emphasis on neurotic guilt which abrogated the individual's need to atone for past behavior. Thus psychological healing (forgiveness of self) cannot occur without acknowledgement of wrongdoing followed by restitution or attempts at restitution.

> . . . Just so long as a person lives under the shadow of real, unacknowledged, and unexpiated guilt, he ***cannot*** (f he has any character at all) "accept himself"; and all ***our*** efforts to reassure and accept him will avail nothing. He will continue to hate himself and to suffer the inevitable consequences of self hatred. But the moment he (with or without "assistance") begins to accept his guilt and his sinfulness, the possibility of radical reformation opens up; and with this, the individual may legitimately, though not without pain and effort, pass from deep, pervasive self-rejection and self torture to a new freedom, of self respect and peace. (p. 54)

Bruce Narramore, an advocate of integration between psychology and theology, exemplifies the extent to which integration has already taken place through his use of psychological terminology to address a theological concept - that of forgiveness.

> I suggested guilt was the root of all psychological defense mechanisms. Not until tendencies toward rationalization, repression, reaction formation, intellectualization, isolation, and a host of other defenses are revealed in their true light - as ways of avoiding the frightening experience of guilt - can we begin to make significant progress in therapeutic guilt reduction. This analysis of a client's defenses against guilt open him up to a

deeper experience of the reality of God's forgiveness (1981, p. 252).

Psychological terminology is only one signpost of the integration taking place between psychology and theology. Discussions of the relationship between guilt and forgiveness or empathy and forgiveness which can be found in both psychological and theological journals further substantiate the existence of integration between these two fields of inquiry. The only significant point of divergence revolves around the origin of man's ability to forgive. Theologians credit man's ability to forgive to God's gift of his Son, Jesus, whose example of unconditional love and mercy transcend demands for justice or retribution and extend compassion and mercy in their stead. Psychological theories view forgiveness as an intentional "humanly" inspired decision to accept oneself or others by integrating painful events into one's psyche in such a way that the individual feels empowered and does not foreclose on future relationships.

CHAPTER V

FORGIVENESS AND PSYCHOTHERAPY

Introduction

This chapter examines the process of forgiveness from a psychological perspective, integrating pastoral psychology with secular psychology. The work of Augsburger, Smedes, and Cunningham will be summarized - then critiqued. An introduction of forgiveness as a decision making model involving cognition and resolution of strong emotional issues will be presented. Summaries of recent articles in which discussions of forgiveness within psychotherapy is addressed will follow. Finally, integration of theory with therapeutic practice will be summarized. This chapter will not include a discussion of forgiveness from the perspective of different schools of psychotherapy. However, statements by therapists who address forgiveness will be presented. No distinction between psychotherapy with children or adults, individual clients or groups will be made, although notation of gender and number of clients will be included.

The Process of Forgiveness

Forgiveness as a process must first be defined. I define forgiveness as an intentional, genuine, authentic decision to let go the emotional "baggage" of past hurts or grievances, and to move fully into the present and future

unencumbered by the weight of the "baggage" we have cast off. Augsburger (1981) defines forgiveness this way,

> Forgiveness is letting what was, be gone; what will be, come; what is now, be.
>
> In forgiving, I finish my demands on past predicaments, problems, failures and say good-bye to them with finality. I cancel my predictions, suspicions, premonitions of future failure and welcome the next moment with openness to discover what will be. I make a new transaction of affirming integrity between us now (1981, p. 52).

The process of forgiveness has been viewed from various perspectives. Some writers claim it is analogous to Kübler-Ross's stages of grieving which include denial, anger, bargaining, depression and acceptance (Linn & Linn,1979). Others have followed the writings of Augsburger, Smedes or Cunningham. A synopsis of these authors' work detailing the process of forgiveness follows.

Augsburger

Augsburger (1981) proposes a step by step process of forgiveness. The first step involves regaining a sense of "valuing" or worth toward the wrongdoer. This includes acknowledgement that one cannot rewrite the past. Step two involves movement toward loving the wrongdoer or seeing him as "precious" again. This in turn, leads to a cancelling of demands to "undo" deeds; the task assigned to step three. The fourth step involves working

through anger and pain felt by both, and the initiation of trust which follows genuine, authentic intention and repentance. Step five involves opening the door to tomorrow by dropping demands for guarantees of future behavior. The final step is that of reconciliation or celebrating love in the mutual recognition that relationships have been restored. Augsburger states that each step is extremely difficult and must be taken after reflection and with great care.

Studzinski (1986) reiterates Augsburger's theme of forgiveness as letting go past hurts but adds only mature personalities are capable of genuine forgiveness. He states that empathy, "one's ability to feel with another" not addressed by Augsburger, is an integral component in the process of forgiving. "Genuine forgiveness is related to an acceptance of one's own imperfections and of the impersonality of many of life's vissitudes, in short, a basic recognition of one's communality with one's fellow(s) through empathy" (p. 14). He also validates Augsburger's contention that forgiveness is motivated by love when he states "Forgiveness liberates people so they can attend to other important issues in their lives; it is a labour of love for the other and for oneself" (p. 20).

Peters (1986) also views forgiveness as motivated by "nobler" instincts. He states that forgiveness stems from man's "power of enablement" (p. 9). He distinguishes power of enablement which believes in fresh starts, healing, and growth from power of domination which is ego-centered and imprisons by seeking conquests rather than connections. Power of enablement "is

creative and builds bridges towards those who have to be supported . . . it dares to do and say the things of weakness, and does not let itself be worried or discouraged by physical torture, economic exploitation, dogmatic expulsion, and social stigmatisation" (p. 9).

Smedes

Smedes (1984) also proposed a stage theory to describe the process of forgiveness. He defined forgiveness as a process for "coming to terms with a world in which, despite their best intentions, people are unfair to one another and hurt each other deeply" (1984, p. xii).

The first stage of forgiving involves hurt that, by virtue of the fact it is personal, unfair, and deep, creates internal "crisis". He defines personal pain as that which affects *you*, unfair pain as undeserved or unnecessary pain, and deep pain as that which involves betrayal, disloyalty or brutality. Acknowledgement of hurt must precede healing. This acknowledgement or recognition that we have been hurt leads to the second stage, that of hatred. Smedes believes that hate is a sign of sickness and a natural response to any deep and unfair pain. He distinguishes it from anger which he views as a healthy response to various situations. He goes on to say that people deny or disguise hatred which eliminates forgiveness and healing. Healing, the third stage, is obtained through forgiveness which involves detaching one from the hurt, letting it go, and viewing the wrongdoer as a "weak, needy, fallible" human being. He added that people who forgive are the only ones healed. The conditions for movement through the final stage, "coming

together", involve honest communication between both parties. Both need to listen and understand the verbalization of pain suffered, the depth of that pain, the affective response to the pain, and a new commitment to the relationship in the future. This involves recognition of authentic "intentions" toward one another, not guarantees which carry strings attached.

Smedes goes on to list several things forgiving is not. Forgiving is not forgetting, excusing, smothering conflict, accepting people, or tolerance.

> You do not ***have*** to forget after you forgive, you may, but your forgiving can be sincere even if you remember.
>
> You do not excuse people by forgiving them; you forgive them at all only because you hold them to account and refuse to excuse them.
>
> You do not forgive people by smothering conflicts; if you forever smother people's differences, you rob them of a chance to forgive.
>
> You do not forgive people merely by accepting them; you forgive people who have ***done*** something to you that is unacceptable.
>
> You do not have to tolerate what people do when you forgive them for doing it; you may forgive people, but still refuse to tolerate what they have done (1984, p. 49).

Elizondo (1986) also addresses the importance of not forgetting that which we choose to forgive and relates this to his reactions to reading the

inscription "Let us forgive but never let us forget" posted above a monument erected in honor of the French citizens who were put to death in German concentration camps during the Second World War. He states that remembrance of past hurts can be a "great teacher and even a source of growth and development in our abilities to be sensitive to others" (p. 77). Elizondo, as does Smedes, views forgiveness as an intention act of loving generosity which transcends anger and hatred and converts pain to peacefulness.

Forgiving invisible people, those who have left or died, people who don't care, monsters, ourselves, and God was addressed by Smedes as areas where forgiveness is particularly difficult. Smedes ends his book by stating that forgiveness: (1) is a slow process which is enhanced by understanding some of what went on from the wrongdoer's perspective, (2) is fraught with confusion surrounding the incident; (3) involves accepting the fact that anger and forgiveness can "live together in the same heart," (4) is not a "wholesale" process and must be related to specific events, and (5) must be freely given or not at all. He addresses the question of, "Why forgive?" in the following way: ". . . because forgiving is the only way we have to make a better fairness in our unfair world; it is love's unexpected revolution against unfair pain and it alone offers strong hope for healing the hurts we so unfairly feel" (1984, p. 124).

He goes on to explain that forgiveness is an act of love and that "getting even" never evens the score, "Getting even is a loser's game."

Forgiveness moves us away from pain and creates new possibilities in our lives.

Cunningham

Cunningham (1985) defined forgiveness as: "a process of reframing in which the restoration of integrity to oneself and one's relationship to others and to God is a central process" (1985, p. 141).

He presented a four stage model analogous to Erickson's developmental crisis model in which each stage of development demands the completion of certain psychological tasks. He views these stages as cyclical, not linear, and states that an individual may repeat any stage a number of times. In the first stage, judgement versus denial, the individual is faced with the hurt, betrayal, or injustice and experiences feelings of anger as well as hurt. He must then decide whether or not to open himself to the reality of what has happened (judgement) or deny its existence. The second stage, that of humility versus humiliation, revolves around the sometimes unconscious decision to internalize the injury and engage in self blame (humiliation) as well as other-related blame or to own one's own imperfections and perceive the wrongdoer empathetically and openly (humility). The third stage, opportunity for mutuality and negotiation, is characterized by a "letting go" or putting aside one's desire for retaliation, a reframing of the affront, and movement toward reconciliation. He states that as a forgiver is finally able to deal with the hurt in a constructive manner, so the wrongdoer can move away from defensive postures and also experience healing along with

reconciliation. He does not explain how this takes place although he does write that the offender's participation is optional and will not hinder the forgiver from experiencing complete healing of hurts originally engendered.

The fourth and final stage, that of actualization of a new sense of awareness and perception includes a redefinition of the relationship between the two involved parties. "It is a realistic acceptance that we all live with scars that are tender and easily opened . . . . The process of forgiving culminates in the courage to accept the realities of one's life and to move on in faith and humility" (1985, p. 145).

Cunningham concludes that forgiveness cannot restore one's innocence and does not always renew relationships but it does restore one's sense of integrity, allow personal growth to continue, promote "wholeness", and when consistent with a client's belief structure, restore a sense of relationship with God.

Dabrowski

Although Dabrowski did not address the issue of forgiveness separately, his theory of Positive Disintegration can be seen as analogous to the process of forgiveness. His belief that conflict is an essential component of human development, and that personal crisis presents an opportunity for growth underlies his contention that positive disintegration involves initial breakdown of lower level functioning or a pulling apart of "psychic structures." This is followed by disintegration of existing structures, a concept similar to the Piagetian process of accommodation, and reintegration of new

higher level psychic structures which subsume earlier structures in a qualitatively different form. Thus "breakdown" relates to individual reaction to deep hurt, and initial severing of relationship toward those responsible. Disintegration refers to the active process of forgiveness - a transformation of hurt and anger into acceptance and a "letting go" of old resentments. This process culminates with reintegration which parallels the process of reconciliation, restoration to fellowship, and results in new and qualitatively different levels of functioning.

Berg (1985) relates Dabrowski's five hierarchical levels of development to the process of forgiveness. People responding at Level I of development are motivated by desire to seek revenge or retaliation. They do not accept personal responsibility for their actions. Egocentrics tend to view forgiveness as a sign of weakness. Although they may appear to forgive or utter sentiments such as "I am sorry," they do not genuinely forgive but harbor old resentments and blame others for their misery.

Level II people are characterized by ambivalence. They remain egocentric but have developed an awareness of social opinions. They are predominantly motivated by a desire to avoid pain, and this, coupled with limited self-awareness inhibits their ability to restore or heal relationships.

At Level III, the ambivalence generated at earlier levels of development is increasingly channelled toward intentional behavior. Awareness of the difference between "what is and what ought to be" facilitates movement toward higher levels of development. This person

recognizes that relationships consist of "give and take" and begins to move toward reinstatement of relationship.

The Level IV stage of development heralds the advance of autonomy, authenticity and personal responsibility. "The Level IV person, in his sense of responsibility to the 'ought' feels called to heal the hurt and to act as a 'lure' to the offended. This allows the offender to grow and seek 'what ought to be'" (p. 27). Individual behavior becomes "other directed" and is motivated by love, in contrast to behavior motivated by anger or fear seen at earlier levels of development.

The final level, Level V, is characterized by advanced empathy, unconditional love and acceptance for others, in short, attainment of the 'personality ideal' (Hague, 1986). Few individuals attain this stage of development and regression to lower levels is not viewed as a possibility.

> Personality ideal is the active driving, 'luring' force of the secondarily integrated (Level V) person, . . . secondary integration is so stable that regression to lower levels of functioning is not possible even under extreme stress (Hague, 1986, p. 133).

Dabrowski's theory serves to highlight the complexity of the process of forgiving. To be authentic forgiveness must be intentional and freely given despite awareness of risks involved in forgiving. It must be motivated by love or concern for others as well as self. This suggests that young children who engaged in "Say you are sorry," behaviors do so in imitation of adults or to

avoid punishment without the commitment to establishment of new or qualitatively different relationships characterized by "mature" individuals who have attained higher levels of development.

Summary

The theories presented thus far are stage theories which describe forgiveness as a process. They highlight the complexity of forgiving. However, framing the process in stages opens the door to misconception. Kübler-Ross' five stage theory of loss is one example. Despite her efforts to publicly recognize loss as a uniquely individual experience which allows for variation of response evidenced by her efforts to present grieving stages as cyclical, not linear, criticisms arose. Other theorists claimed her attempts to categorize loss as a series of stages to be overcome negated the individuality inherent in coping with loss. Further criticism revolved around her failure to address non-apparent loss such as relocation and in her neglect of what Schneider (1983) presents as a final stage of grieving, that of development of individual capacity to extend beyond grief and establish new balance or "wholeness" by making new commitments in life. The same difficulty is found with Augsburger, Smedes and Cunningham. Current research suggests forgiveness can be viewed from a decision making model which includes the following ***components*** not placed in order of priority.

1. Free will. Forgiveness cannot be forced on an individual. It must be a ***genuine, authentic*** decision to work - and it is hard work - at letting

go the pain on unjust hurt and opening the possibility of restored relationship.

2. Willingness to face hurt. Forgiveness does not mean hurt is denied. It is the opposite; forgiveness involves allowing oneself to freely experience the hurt involved.

3. Willingness to own feelings. Forgiveness involves acknowledgement that with hurt, particularly unjust hurt, feelings of anger and a desire for revenge are "human". The individual must own these feelings, not deny them, if forgiveness is to be possible.

4. Courage. It takes a great deal of courage to face one's inner self and admit to strong emotions - particularly those which society tells us are ignoble - and see ourselves as merely "human". It takes courage as well, to look beyond those feelings and view someone who has hurt us as another fallible human being.

5. Reframing. Sometime during this process angry feelings are set aside, not forgotten, in order to free one's energy to move ahead with life. This involves reframing the hurt into an opportunity to grow or learn. Ability to do this may function as an indicator that one has sincerely "forgiven" the offender.

6. Separation of the hurtful act from the person who initiated it. Distancing the offense from the offender is necessary, particularly if the relationship is important enough that one chooses to renew it.

7. Confrontation. Forgiveness involves the ability to confront oneself honestly and to own responsibility for one's actions as well as the necessity to honestly confront the wrongdoer if one desires restoration of the relationship. This involves risk but is necessary to re-establish trust; for without trust no relationship is possible.
8. Renegotiation. This is part of the process toward reconciliation with self or others. A new understanding and mutually agreed upon "relationship" must be defined.

To reiterate, forgiveness appears to be both a cognitive and emotive process involving decision making skills as well as resolution of strong feelings such as outrage, anger, and deep hurt. It takes time, must be genuine, and requires courage, honesty, and the ability to expand one's self awareness. Pastoral psychologists suggest that completion of the task of forgiving also involves a restoration of one's relationship with God. Both pastoral psychologists and secular psychologists report a lessening of anger and anxiety following a decision to forgive oneself or others. Personal experience suggests this does, in fact, happen along with a restoration of one's sense of well being. Further study in this area is necessary to fully understand this complex phenomenon. It appears Soren Kierkegaard was right when he said "We live our lives forward but we understand them backwards."

Other Literature Relating to Forgiveness and Psychotherapy

R.C.A. Hunter (1978) presented one of the first articles dealing with forgiveness within a therapeutic context. He presents four case studies in which "genuine" forgiveness is seen as a process which enables an individual to resolve internal conflict through "cessation of animosity, which in turn is related to a reduced need for defensiveness, justification of unacceptable impulses (reactive and instinctual), an acceptances of one's own imperfections and of the impersonality of many of life's vissitudes, in short, a basic recognition of one's community with one's fellow men through empathy" (1978, p. 171). He goes on to distinguish between genuine forgiveness and reaction formation, an unauthentic, often habitual forgiveness which is "obtrusive and onerous" through which the forgiver seems to "nurture the memories of past injustice."

Paula Ripple (1978) addresses another dimension of forgiveness - forgiveness as part of the suffering inherent to human existence. She states that, "Suffering is a reality of human life" and equates forgiveness as a part of the "how's" of suffering. "Like blind men and women we grope in a world of textures, afraid to touch the jagged edges of life. But those who reach out to embrace them find that the same jagged edges that have pierced them have also made them whole" (1978, p. 136). Forgiveness, for Ripple, consists of the courage to acknowledge or touch the "jagged edges" of our pain, and to use the suffering we experience as a springboard to personal growth. She

is also one of the few authors to address forgiveness from the perspective of a person who wants to be forgiven.

> We may not believe in ourselves enough to believe we can be forgiven. We may not know how to find the words to tell another that we are sorry for having failed. We may even have believed the myth that "love means never having to say you are sorry! . . . Each need for forgiveness and each expression of this need is a loving act of trust (1978, p. 11).

Thus the courage and willingness to risk already addressed in terms of the forgiver becomes an integral part of one's plea to be forgiven. Ripple brings to light the issue of a common humanity in that each person, during the course of their life time will, deliberately or inadvertently, cause as well as receive unjust pain. Dealing with this hurt or suffering in a manner that results in healing and personal growth is the test of our existence and the goal of psychotherapy.

Brandoma (1982) offers a theological and therapeutic analysis of forgiveness. He believes forgiveness arises out of violation of one's sense of fairness which in turn generates anger. He then points out both positive and negative consequences of anger. Positive by-products of anger focus on its ability to generate energy, protect the self, and begin defensive/corrective actions. Negative by-products are the generation of destructive fantasies or a "payback" mentality, and loss of trust which results in rigid behavior

patterns, strain on interpersonal relationships, adoption of "hidden agendas", and escalation of negative interactions.

His view of the process involved in forgiving includes ownership of one's own need in the original situation. "If we didn't want anything from anyone, they couldn't hurt us, we wouldn't get angry, and they wouldn't need forgiving" (1982, p. 43). The second component to forgiving is giving up the egocentric eyeglasses with which one views others. ". . . it is taking a more empathetic and subjective view of the other's behavior" (1982, p. 43). Meeting the above two conditions sets the ground work for setting aside one's anger - which engenders risk - and deciding to forgive self or others. Brandoma addresses the relationship between forgiving oneself and others when he states, ". . . this process of self-forgiveness is endemic, if often implicit, to the process of forgiving another and the whole process of living" (1982, p. 49).

Morton Kaufman (1984) states that "clinical practice points to the role of two phenomenas of human experience: forgiveness and courage" (1984, p. 178). He goes on to state forgiveness of self or of others for "real" or perceived hurts is necessary for growth and requires great courage. Through analysis of two case studies Kaufman concludes:

> To forgive then, means to accept the inevitability of fate. It comprises the understanding that nothing "real" can be changed about the past, that hoping for such a change makes real life an

> absurd parody, a deceit promising magic salvation against a real present with its vital pain and pleasure, love, hate, hope and the ultimate acceptance of the journey to death. This is the aspect of reality that emerges as the true therapeutic goal . . . The courage to forgive is an ongoing process, a progression toward growth and adult responsibility" (1984, pp. 183, 187).

Fitzgibbons (1986) presents both "cognitive and emotive uses of forgiveness" as a therapeutic technique to facilitate the release of anger in clients. He begins by stating there are three possible behaviors for coping with anger - denial, expression, and forgiveness. He goes on to explain that denial of anger results in repression and displacement while expression of anger has limited value but does not address man's desire for justice or expunge the desire for revenge. Indeed, habitual expression of anger can estrange family and friends and result in psychosomatic illness. Therapeutic functions of forgiveness include the following:

> Forgiveness is a powerful therapeutic intervention which frees people from their anger and from the guilt which is often a result of unconscious anger. Forgiveness: (1) helps individuals forget the painful experiences of their past and frees them from subtle control of individuals and events of the past; (2) facilitates the reconciliation of relationships more than the expression of anger; and (3) decreases the likelihood that anger will be misdirected in later loving relationships and lessens the

> fear of being punished because of unconscious violent impulses. Forgiveness frees others from their guilt, expedites the resolution of depressive episodes, and leads to a decrease in anxiety as anger is released" (1986, p. 630).

One point of contention rising from this article focuses on his statement that forgiveness helps individuals "forget" painful experiences. Smedes (1984) states, "When we forgive someone, we do not forget the hurtful act . . . The test of forgiving lies with healing the lingering pain of the past, not with forgetting that the past ever happened" (1984, pp. 38-39). If one focuses on the second part of Fitzgibbon's point, that of regaining control over one's future by relinquishing past hurts, both authors appear to be in agreement. Fitzgibbons organizes his therapy sessions by beginning with cognitive exercises which focus on forgiveness. He asks patients to reflect daily on present or past hurts, concentrating on "letting go" of resultant anger. The next few sessions consist of a discussion of the daily exercise as intellectual forgiveness is viewed as a prerequisite to emotional forgiveness. Psychodrama techniques adopted from Moreno's work include re-enactment of painful life events and verbalization of anger.

Fitzgibbons lists decreased anger and anxiety, compassion toward those who have inflicted pain, and a greater acceptance of past hurts as indicators of progress in therapy. He feels that obstacles to forgiveness include lack of modelling by significant others such as parents, inability of others to

acknowledge wrong doing and seek forgiveness, recidivision of painful acts, and patient refusal to "own" their denial of anger.

Hope (1987) addressed forgiveness as a integral part of the healing process which is the goal of psychotherapy. He described terms such as "work through", "let go" and "accept" as euphemisms for the process of forgiving which, "refers to a voluntary act, a decision, a choice made about how a person deals with the past" (Hope, p. 240). He pointed out that unconditional acceptance modelled by the therapist assists in allowing the client to experience the benefits of a forgiving attitude, thus opening the door to widening coping strategies. He also stated that forgiveness is a paradoxical act as, superficially, pardoning wrongs committed against us appears to contradict one's self interest. He then outlines how forgiveness involves a reframing of the client's perspective on a conscious level and a loosening of rigid, restrictive judgemental ways of viewing the behavior of others and one's self. Ultimately, the benefit of forgiveness is that people free energy previously used to seek retribution and are able to redirect this energy to live "more fully in the present."

Hope presents a case illustration of a young man who made many positive changes in his life after forgiving his father.His analysis of this case centered around the fact Tom had been "stuck" by his resentment and ambivalence toward his father and projected these emotions onto other areas of his life. His decision to forgive his father enabled him to move beyond his ambivalence and focus his energy toward taking control of his present life.

He ended with the following statement. "By choosing to forgive his father, Tom greatly increased his options and freedom to grow. By changing the one thing he could control, his own attitude, he defined an otherwise chronically negative set of self-images" (Hope, p. 244). Hope's final statement illustrates Dabrowski's earlier belief that movement toward higher levels of development is reflected by intentionality, a "taking charge" of one's life, recognition of the "give and take" present in mature relationships, and the courage to risk despite the vissitudes of human existence.

Bandmen addresses the aspect of forgiveness only tangentially. He quotes Kuntz (1981) and Kaufman (1980) as having defined guilt and shame as emotional states affecting self-concept. Self acceptance and self affirmation are necessary before healing can occur. "And when we have disappointed or broken some cherished internal value of our own, or done some regrettable deed, we have also to learn how to wipe the slate clean, to forgive ourselves. True nurturance of self embrace these two caring and forgiveness" (Kaufman, p. 155 cited in Bandmen, p. 89).

Bandmen adds that self blame leads to avoidance of responsibility which can only be resolved by self acceptance. This leads to a definition of forgiveness as "a process of letting go and accepting the self in a holistic form" (1988, p. 20). Bandmen's conceptualization of forgiveness as a healing process is characterized by one's ability to accept and affirm the "self" he sees mirrored in others. His comments imply that forgiveness requires inner strength, and acceptance of personal responsibility for action or inaction.

The decision not to forgive, in contrast, may indicate low self esteem or self blame in which personal responsibility for action or inaction is negated, signaling a low level of development as described by Dabrowski in his theory of Positive Disintegration.

Pingleton (1989) explores forgiveness within the psychotherapeutic process as one of the most recent attempts to utilize what he describes as a "theological term to describe a psychological process." His article outlines forgiveness from a theological perspective before discussion within a psychological framework. He states that forgiveness is necessary whenever one feels a sense of loss which results from being unjustly hurt. "This loss is experienced psychologically as diminishment of the self in terms of esteem, pride, omnipotence, which results in deeper awareness of one's humanness and underlying vulnerability, helplessness, dependency, and inadequacy" (1989, p. 30). This hurt results in anger, a reaction engaged in to prevent further or additional hurt. He stipulates that "les talionis" or the law of the talon - man's apparent predisposition to seek retaliation or retribution - is the underlying motivation for this anger.

Pingleton posits that acceptance and a "working through" of pain and hurt is crucial to resolution of these issues. He states that one must stop perceiving others through egocentric needs, wishes, and longings and give up "self protective anger and punitive guilt" before one can develop healthy autonomous functioning. Therefore forgiveness of self and others is

dependent on acceptance of personal responsibility for actions, and on realization that

> the greatest damage of the offense - often greater than the offense itself - is that it destroys my freedom to be me, for I will find myself dominated by the inner rage and resentment - . . . Forgiveness is neither understanding nor forgetting, nor ignoring. It is an act of generosity which deliberately overlooks what has been done in order to remove the obstacle to our friendship and love" (Elizondo, 1986, pp. 71, 78).

This quote highlights the shift from seeking retribution to letting go of anger and resentment, the "emotional baggage" which impedes the building of relationships, before setting these feelings aside in order to function authentically within our relationships.

Summary

In summary, the authors discussed in this segment of the chapter emphasize the importance of resolving hurt and anger engendered by unjust acts through forgiveness of self and others. Forgiveness appears to be similar to other more widely accepted psychological terms such as "letting go" or "working through" or "acceptance" and does not include denial or a "turning of the other cheek" as popularized in the writings of Freud and others. Indeed, it is the paradoxical nature of forgiveness which may, in part, account for psychologists' failure to address it. "The humbling paradoxical experience

of becoming strong enough to admit and accept one's weaknesses is in this way powerfully growth producing" (Pingleton, 1989, p. 32).

Therapy which focuses on forgiveness as a therapeutic technique has healing and personal growth as its' goal. Part of the resultant increase in self-esteem which occurs with working through the process of forgiveness may revolve around a sense of efficacy that arises out of successful resolution of problematic issues involving strong emotions.

Several of the therapists quoted advocated use of the term forgiveness within therapy since the powerful associations it arouses can carry more impact than similar terms such as "letting go". Also noted was the possibility of increased resistance with use of this term. However, this was not presented as a drawback to therapy. Only Richard Fitzgibbons (1986) practices therapy which focuses on forgiveness not as a by-product of the therapeutic encounter, but in a systematic approach which begins with self reflection and continues to re-enactment and resolution.

It is clear that much work in this area remains to be done. Psychology must recognize that forgiveness, like humor, is a human phenomenon worthy of detailed study and analysis. Traditional views which place forgiveness within a theological framework must rethink this position as the relationship of forgiveness to healing is unmistakable and as such, remains a key component in personal growth. Psychotherapy, as a field of inquiry, cannot afford to continue to ignore a phenomenon that holds great significance for

large portions of the population. We cannot ignore any avenue that leads to reduction of psychological pain.

A wise man will make haste to forgive
Because he knows the true value of time
And will not suffer it to pass away
In unnecessary pain. (Samuel Johnson)

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SECTION III

CHAPTER VI

ALTRUISM IN EMERGENCY SITUATIONS

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Introduction

What motivates an individual to risk injury or death to come to the aid of another, often a stranger, in a crisis? What differentiates those who help from those who don't? Attempts to answer these questions following the stabbing of New York's Kitty Genovese in the 1960s spurred subsequent research. Although details of this research will be presented later in this chapter, current research has not provided us with definitive answers to these questions. Our inability to achieve a comprehensive understanding of this complex phenomenon is reflected in our difficulty defining it. Although the definitions of altruism posited by psychologists vary, several facts appear consistent: First, altruistic behavior must be voluntary. Second, an altruistic act has as its goal the desire to benefit another; someone separate from the self. Finally, altruistic acts are carried out without expectation of external reward. Thus, altruistic acts are viewed as intentional and as a subset of prosocial behavior which includes not only altruistic behaviors but acts of protection, sharing, sympathy, and cooperation between individuals or groups. Eisenberg describes the difficulty of operationally defining altruism for research purposes when she states, "Often implicit in definitions of altruism are concepts of self-sacrifice, empathy, noble actions, and the lack of expectation of external gain for the actor" (1982, p. 110). Her recognition of

the sacrificial nature of altruism reiterates that of Rosenhan (1978) who stated that most human learning is centered on rewards, while altruism requires the sacrifice of rewards.

Altruism touches on fields of inquiry which relate to the nature of human beings. Traditionally individuals have been viewed as either evil, good, or neutral. Machiavelli, Hobbes, and Freud viewed people as inclined toward evil and individual acts of charity or helping as merely efforts to gain something for the self. This train of thought may well be the forerunner to reciprocal or kinship altruism. The second perspective, that of people as inherently good advocated by Rousseau, Maslow, and Rogers, states that individuals will help others because of their constructive or positive nature. This "humanistic" standpoint incorporates belief in human potential for "pure" or "self-sacrificial" altruism. The last view which presents human nature as neutral, suggests that each individual is a product of the environment with potential for good or evil. Locke, Watson, and Skinner all advocated the individual's capacity to behave altruistically as the result of life experiences, not inner nature.

Irrespective of one's view of mankind, the study of altruism revolves around what human beings are capable of being and focuses on man's regard for his fellow man. The term altruism was originally coined by Auguste Comte (1798-1857). He was credited with founding sociology, a positivistic science, which he claimed would foster the development of values based on love for and worship of humanity. Altruism and "sympathetic instincts" were

seen as offshoots of three basic instincts: attachment, veneration, and benevolence. William MacDougal, the first to publish a book on Social Psychology, expanded this "instinctual" explanation for social behavior by declaring that "sympathetic instincts" were the "root of all altruism". Margaret Mead's study "***Sex and Temperament in Three Primitive Societies***", which included analysis of helping behaviors between the Mundugumor, a violent, aggressive, competitive tribe of headhunters and cannibals; the Arapesh, a peaceful, co-operative, non-aggressive tribe; and the Chambi, where gender differences including sharing and co-operative behaviors among women and lack of cooperation among males led credence to MacDougal's assertion that altruism is influenced by cultural variables. The effects of modelling on altruistic behavior have been explored by social psychologists during the last century.

Altruism as part of the nature versus nurture controversy was addressed by Darwin (1809-1882) when he stated humans were biologically disposed to behave in a cooperative manner socially and that man's moral sense distinguished him from lower animals. He also recognized the paradox of altruism as it related to natural selection. That is, if the most altruistic members of a group engage in self-sacrificial behavior which may result in death, then the trait of "altruism" should decrease and eventually disappear, an event which has not occurred. He never resolved this paradox but later theorists proposed the theory of "group" selection rather than individual selection (Wynne, Edwards, 1962) in an attempt to explain this phenomenon.

Group selection theories initiated speculation that altruism served as a vehicle for exchange of services which increased possibilities for survival among members of specific groups. These sociobiological explanations of altruism, particularly kinship or reciprocal altruism, appear simplistic. Their reductionist perspective negates moral, psychological, philosophical, ethical, cultural or emotive dimensions of human existence and relies heavily on instinctual interpretations of behavior,

> reciprocity explains an altruism that is more self than other-oriented; more concrete than abstract, more planned than spontaneous; more giving than doing; more personal than anonymous . . . . concrete reciprocity cannot account for the whole of our interpersonal relationships, . . . (Oosterhuis, 1984, p. 80).

Thus higher levels of altruism which involve long-term, other-directed, self-sacrificial behaviors cannot be adequately explained by sociobiology.

Resurgent interest in altruistic or helping behaviors since the 1960s is related to reactions to the stabbing death of Katherine (Kitty) Genovese. Kitty Genovese, a New Yorker, was attacked and stabbed by an assailant while on her way home from her work. Thirty eight of her neighbors witnessed the 30 minute assault, during which the assailant left and later returned. Not one of them called the police or in any way tried to assist her. She died. The subsequent publicity touched off research into bystander intervention in emergency situations. Latané and Darley (1970) were the first

to explore and challenge topical explanations that apathy and alienation were behind bystander refusal to help. Their work spurred numerous studies in the following years and is still quoted in current literature. Their definition of characteristics of emergency situations is:

> Emergency situations: (1) involve actual harm or the threat of harm to life or property, (2) are unusual or rare, (3) are situation specific and unique, (4) are unforeseen, and (5) require immediate and often urgent action (1970, pp. 30-31).

Having defined emergency situations, they presented a decision-making model to explain the intervention process. Initially, they postulated a linear progression of decisions from: (a) attention to situational clues, (b) recognition that an emergency does exist, (c) attribution of personal responsibility to act, (d) consideration of possible modes of intervention, and (e) decision whether or not to implement a plan of action. Latané and Darley's research suggests that once a situation is recognized as an emergency, the individual may vacillate between certain steps, or repeat them several times before acting. Their bystander experiments, largely laboratory experiments with the problems attendant to any situation in which real life is simulated, led to the following conclusions: A single bystander is more likely to intervene in an emergency situation than are individuals in a group of bystanders. This is largely a result of: (1) Social Pressure. An increased group size increases the possibility of embarrassment for actions taken. (2) Modelling Effects. Individuals have a tendency to imitate the behavior of

those around them, particularly in ambiguous or stressful situations. (3) "Pluralistic Ignorance." An individual's perception that others view an event as less critical will tend to make him view it as less critical also. (4) Diffusion of Responsibility. The presence of others dilutes the costs for not helping by diffusing guilt and decreasing the individual's sense of personal responsibility. These landmark studies prompted further research which has greatly enhanced our understanding of altruistic behaviors in emergency situations.

The study of altruism in emergency situations encompasses interaction between personal and situational factors. Personal characteristics include factors such as personality, mood, empathy, arousal, belief systems, and attributions. Situational characteristics involve the physical setting and include distance between observer and victim, presence or absence of others, clarity of emergency and severity of emergency. In order to arrive at a more comprehensive understanding of this phenomenon, however, some digression is necessary. An overview of several general theories of altruism precedes discussion of altruism in emergency situations.

Motivational Theories

All theories which seek to explain altruistic behavior are motivational theories. There are, however, two basic schools of thought relating to the motivation behind altruism, egoistic theories and altruistic theories (Rushton, p. 55). Egoistic theorists (Piliavin & Piliavin, Piliavin et al.) maintain that

altruistic behavior is not truly "other" directed, despite superficial appearances, as it originates as a desire to relieve the organism from stress or anxiety caused by witnessing or causing harm to another. Arousal theories fall into this category as do sociobiological theories and cognitive-emotive theories which emphasize reduction of anxiety as the basis for action or inaction. Conversely, theorists highlighting "pure altruism" contend that highly developed moral judgement, empathy, and personal integrity may signal inherent traits of an altruistic personality prone toward assisting others in times of crisis (Rushton, Sorrentino, Straub).

Oosterhuis entered this debate when she conceptualized altruism as a hierarchical, complex, multidimensional, multi-levelled evolutionary process whereby development of altruistic behaviors progressed from lower level or conventional altruism, to ideological altruism, and finally to creative altruism, the highest order of altruism, rarely attained by human beings. Motivation to engage in conventional altruism stems from egoistic concerns related to the norms of reciprocity and social responsibility identified by sociobiologists where conventions or societal rules "regulate human affairs."

> Remaining at this level of altruism is a curtailment of human potentials for giving of self, for discerning moral "truths", for an expanding of ideals, a choice of vocation, a search for significance, a creative expression. Other levels of altruism are possible, especially when one is not afraid to be considered unconventional, reactionary, or arrogant. Many individuals do

> progress beyond the order, stability and predictability inherent in the conventional level. (p. 104)

Oosterhuis added that although some individuals never progress beyond this level developmentally, conventional altruism corresponds to altruistic behaviors characteristic of pre-adolescents.

Ideological altruism, a higher order response than conventional altruism, encompasses several levels. It begins with adolescent concerns relating to social justice, the research for identity, and self awareness and progresses to actions geared toward assisting less fortunate others. Extreme examples include individuals who engage in martyrdom or "risk death rather than deny principles or beliefs." Motivation for action could be argued to fit either the egoistic or altruistic camp. Emerging adolescents engaging in altruistic acts as part of their search for identity fulfill egoistic needs as do idealists working toward social reform or social justice if they work primarily for self satisfaction or aggrandizement. Egoistic attributions break down, however, in the case of individuals who continually fight for the less fortunate despite personal cost, direct opposition, and social criticism or condemnation. I submit that there are far easier ways to gratify one's needs.

Oosterhuis provides an ingredient missing in other theories of altruistic motivation when she identifies creative altruism, a "pure" form of altruism, based on empathy and love for one's fellow man. She creates a more wholistic framework, perhaps influenced by Jung, Frankl, and Dabrowski who acknowledged the importance of recognizing man's spiritual side, an inner

directed mystical area of inquiry not addressed within natural scientific spheres.

> Creative altruism cannot be conceptualized in terms of personal gains, voluntary actions, limited relationships, specific settings, or an enduring lifestyle. As an orientation toward and experience of the other, creative altruism in both psychological and theological articulations is gift of self, a choice to bind self to the other, a recognition of mutual relatedness, regardless of one's state. (p. 201)

Creative altruism, then, cannot stem from egoistic motivations but from love, compassion, and empathy for our fellow man. Christian theology views Christ's actions as examples of creative altruism, not because of his willingness to sacrifice his life but because of his love and authentic caring and empathy for those whose lives he touched. Other individuals displaying similar characteristics might include Buddha and Mother Theresa. Dabrowski (1977) might have been addressing the concept of creative empathy when he said,

> Altruism (at the highest level of social functions) becomes an ideal, standing against the widespread selfishness of human nature . . . it is expressed in serene readiness for self sacrifice for the sake of others . . . I and thou take on a transcendental character together with a profound and intense multilevel empathy . . . Altruism encompasses all human values. (p. 185)

Perhaps it is this ability to transcend but not deny self which distinguishes creative altruism from other levels. Creative altruism is exemplified by unselfish love, a concept not usually addressed in psychological literature, but which carries "enormous creative and therapeutic potentialities, far greater than most people think. Love is a life giving force . . ." (Sorokin, 1948, p. vi). Love, in this case, is akin to agapé or universal love for mankind which transcends egoistic concerns by remaining other oriented. Fromm (1956) describes this agapé love when he states "It is characterized by its very lack of exclusiveness . . . In brotherly love there is the experience of union with all men, of human solidarity, of human at-one-ment. Brotherly love is based on the experience that we are all one" (p. 39). At least part of the "oneness" to which Fromm alludes revolves around the individual's ability to empathize or "experience with" another. In times of crisis, this capacity to share another's distress may well effect subsequent action or inaction. As such, it is worthy of further study.

Empathy and Altruism

Empathy is a distinct psychological mechanism which enables two people to communicate affect in such a way that emotion resonates between them. It has become a topic of interest to social scientists largely within the last century. Antecedents to empathy can be found in the writings of Aristotle, who commented on the animism presented in Homer which contained descriptions of arrows as bitter, eager, and panting. Plato's writing

in ***Phaedrus*** addresses the issue of unconscious projection of emotion when he states, "his lover is the mirror in whom he is beholding himself, but he is not aware of it" (Jowett translation, p. 255). Gradually, Titchener's translation of the German **einfuhlung** (feeling-in) into empathy was accepted and analysis of this concept followed. Empathetic understanding refers to a communication or identification and mutual experiencing of emotion between two or more people.

Empathy is a central concept when discussing altruistic behavior. It is either ***the*** major cause of any prosocial behavior or a great spur toward it. Various definitions abound. Rushton defines empathy as, "experiencing the emotional state of another" (1981, p. 260) while Batson and Coke define it as "an emotional response elicited by and congruent with the perceived welfare of someone else" (1981, p. 408). Hoffman adds to these definitions when he states,

> The literature on empathy often stops within the idea that the observer feels vicariously what the model feels through direct experience. This is the essential feature of empathy, to be sure, but the experience of empathy also has an significant cognitive component, at least in older children and adults (1981, p. 48).

Thus empathy appears to bridge the gap between emotion and cognition and is often considered a motivating force in emergency interventions. Research which suggests that people are more willing to help in unambiguous situations (Latané & Darley, 1970, Piliavin & Piliavin, 1972, and Piliavin et al., 1969)

and where some similarity or identification with the victim exists (Hoffman) support the inclusion of a cognitive component to empathy.

Arousal/Cognition Theories

Arousal theories focus on emergency intervention as a method of alleviating emotional distress caused by realization that an emergency exists and emphatic identification with the victim. There are several variations on the theme. Piliavin and Piliavin stated that observance of an emergency resulted in physical and emotional arousal which was, in turn, related to the severity of the emergency, the distance between the observer and the victim, the degree of empathy the observer held for the victim, and the length of time the observer was exposed to the emergency. They added that individuals attempt to reduce this arousal in one of four ways, by direct intervention, leaving the scene, indirect intervention (calling a policeman), or passive watching without intervention. How does one decide which option to take? By entering a decision-making process whereby potential costs and rewards are calculated before deciding on a particular course of action.

This work appears to follow on that of Sokolov (1963) and Lynn (1966) which postulated two distinct physiological patterns of arousal. The first was termed the "orientating response" and included an increase in skin conductance, pupil dilation, and temporary decrease in heart rate attendant upon cortical activation associated with openness to external stimuli, a sort of cognitive arousal. The second pattern of arousal, "defense reaction", was primarily an emotional arousal characterized by an increased heart rate,

constriction of the pupils, and physical mobilization. Once again, the motivation for action is basically self-serving, that of reducing one's physiological arousal level, and it appears to resemble a "fight or flight" response attendant upon entering the decision-making process and resulting in behavior, helpful or otherwise. Arousal is affected by the individual's recognition that an emergency exists, the severity of the emergency, clarity of the victim's needs, and the distance between the observer and the victim. These factors also affect behavior.

Cognitive theorists emphasize decision-making skills in terms of costs versus rewards (Piliavin, Davidio, Gaerther, Clark). The costs, as well as the rewards, are always subjective and may be affected by personality as well. Piliavin et al. list personal costs involved with emergency intervention:

1. Psychological aversion. The presence of blood or unsightly physical blemishes can adversely affect helping behaviors.
2. Risk of physical harm.
3. Time, effort and money expended or forgone.
4. Possibility of social sanction or loss of social rewards.

Their list of potential rewards included social rewards, and increased self-esteem (1981). They contended, and research supports the fact, that helping behaviors decrease as costs of helping increase. When costs of helping become prohibitive, individuals appear to distort the situation (Simons & Piliavin, 1972, Piliavin et al., 1967) or denigrate the victim (Lerner, 1970, Lerner, 1971) in an effort to rationalize non-intervention. The

presence of other bystanders becomes an additional cost for helping (Latané & Darley) as research shows that social variables such as concern over the evaluation of others inhibits helping behaviors.

Cialdini et al. (1973) present a "negative state relief model" to explain altruistic behavior. Their hypothesis is that an individual will act to relieve negative emotions aroused by seeing others harmed. Mood, defined as, "a condition of labile affective tone that is subject to change through intervention of relatively weak situational events" (Cialdini, Kenrick, Baumann, 1982, p. 339) is introduced as a motivation for engaging in helping behaviors. Individuals in a good mood are more open to their environment, outwardly focused, energetic, and apt to positively frame events; all factors which increase helping behaviors. Bad moods, characterized by internal focus, lack of interest in the environment, decreased energy, and feelings of incompetence, lead to decreased helping behaviors. Bad moods do not correlate to the arousal of negative feelings produced by witnessing emergency situations as the former often carries a low arousal level while the later results in an upsurge of arousal. Subway experiments, staged and conducted by Cialdini et al. included a victim, a model, and two observers who initiated a variety of emergency situations where black or white victims carrying liquor/no liquor, or bleeding/not bleeding collapsed so that bystander reactions could be recorded. Modelling of helping behavior/no helping behavior, and its effects on the innocent bystanders was also noted. As a result of these experiments, a process model for emergency intervention

was developed. This model begins with the bystander's awareness of the emergency situation which leads to physiological arousal. Following arousal, labelling of the event occurs. This involves processing of input such as personal, situational, and cultural variables, along with victim characteristics. A cyclical relationship between the labelling process, attribution of responsibility, and evaluation of cost/reward for actions precede a decision to help/not help, and subsequent behavior.

Martin Hoffman (1981) advocated empathy as the primary motivating force behind altruistic acts, although he supported the contention that guilt also motivates individuals to act. Empathy motivates people to help as a method of relieving the source of empathetic distress, the victim's suffering, while guilt pushes people toward helping as a method of reparation for inaction, which prolongs the victim's suffering. Psychologically, self attributions of blame or responsibility spur the individual to intervene directly or indirectly to assist victims when costs are not prohibitive. Batson and Coke (1981) make a distinction between empathetic concern (compassion, concern, warmth, etc.) which elicit altruistic motivation or the desire to help others, and personal distress (shock, disgust, fear, alarm, etc.) which elicits egoistic motivations or the desire to help oneself by relieving negative arousal states. Their research involving experiments where subjects were given the choice of: (a) volunteering to receive electric shocks in place of a victim, or (b) leaving the scene, with ease of exit controlled, supported this distinction.

Trait Theories

Trait theories which support the presence of altruistic personality characteristics have been controversial. For every advocate there is a detractor. While Latané and Darley concluded,

> There are . . . reasons why personality should be rather unimportant in determining people's reactions to the emergency. For one thing, the situational forces affecting a person's decision are so strong that the individual faced with the emergency does not have time to think; . . .
>
> A second reason why personality differences may not lead to differences in overt behavior in an emergency is that they may operate in opposing ways at different stages of the intervention process (1970, p. 115).

Dennis Krebs (1978) supported this view, "As Hartshorne and May showed a half century ago, just about everyone will help in some situations; just about nobody will help in other contexts; and the same people who will help in some situations will not help in others (Krebs cited in Rushton, 1981, p. 252).

Conversely, Straub and Rushton appear to present the most vigorous case for subscription to trait based theories explaining prosocial and altruistic behaviors. Rushton states that there is, in fact, an altruistic personality characterized by well developed empathy and "internalized norms of appropriate behavior." He further claims that these two characteristics motivate the individual to engage in altruistic acts. Empathy motivates

through increased distress at vicariously experiencing another's pain. Some empirical evidence supporting this contention may be found in studies of impulsive interventions (Clark & Word, 1974) where high levels of arousal preceded helping which occurred almost immediately. Internalized norms of appropriate behavior refers to Rushton's contention that individuals with high levels of moral reasoning, social judgement, and personal integrity engage more frequently in prosocial behaviors. He cites numerous studies by such notables as Anchor and Cross (1974), Eisenberg-Berg (1979), Krebs and Rosenwald (1977), and Straub (1974) to support these statements. His summary of the underlying motivations behind altruistic behaviors follows:

> On the basis of such motivations, this person is likely to value, and to engage in, a great variety of altruistic behaviors - from giving to people more needy than themselves, to comforting others, to rescuing others from aversive situations. Altruists also behave more honestly, persistently, and with greater self control than do non-altruists . . . the constantly altruistic person is likely to have an integrated personality, strong feelings of personal efficacy and well being, and what generally might be called "integrity" (1981, p. 264).

Straub takes an interactionist approach when he describes individuals having a "prosocial orientation" toward life interacting with situational factors to determine individual behavior. He characterizes this "prosocial orientation" as consisting of caring or concern for others, social responsibility,

empathy, and values relating to fulfillment of duty or obligations. These traits provide the motivational basis for altruistic behaviors, however, recognition that environmental factors may inhibit or negate movement toward intervention was also noted. Perceptions of self efficacies and competence also affect behavior in unusual or emergency situations.

> But even if a person possesses all the relevant characteristics, he or she will not always respond to other's needs, or promote other's goals. Every person has varied personal goals, and sometimes circumstances or situations will activate those goals that cause conflict with responding to others . . . Thus, the nature of a person's goals, other relevant characteristics, and the nature of surrounding circumstances all need to be considered if we are to accurately predict how a person will behave on a specific occasion (1981, p. 112).

Straub goes on to list parental: (a) affection or nurturance, (b) control or discipline which allows maintenance of individual autonomy, (c) induction, or "communicating to children the consequences of their behavior" (1981, p. 117), (d) modelling of prosocial behaviors and attitudes, and (e) assignment of personal responsibility for actions taken as factors which promote development of prosocial behaviors.

Speculation of the relationship of prosocial behavior to moral development addressed by Straub and Rushton led to studies in which

Piagetian and Kolbergian moral reasoning tasks were administered in the hope of linking moral judgement to altruistic acts.

Kohlberg's stage theory of the development of moral reasoning hinges on his choice of justice as a universal and the most psychologically sound criterion for moral judgement. Carol Gilligan (1982), a former student of Kohlberg, challenged this choice by stating use of the justice principle to determine one's level of moral reasoning, although appropriate for men, was inappropriate for women. She states,

> Women's construction of a moral problem as a problem of care and responsibility in relationships, rather than one of rights and rules ties the development of moral thinking to changes in their understanding of responsibility and relationships, just as the conception of morality as justice ties development to the logic of equality and reciprocity. Thus the logic underlying an ethic of care is a psychological logic of relationships, which contrasts with the formal logical of fairness that informs the justice approach. (p. 73)

Brell (1989) in the interest of moral objectivity postulates an overlying moral framework, that of "growth", which by his definition, subsumes the principles of justice and caring.

> Growth combines the rational criterion of justice with the intrinsic valuing of social connections of caring, and, in so doing, solves the problem of moral relativism by providing a principled,

> natural criterion which simultaneously stands up to formal requirements of inclusiveness, prescriptivity and universality while also explaining the role of deliberation and character in handling contextual variations. Above all, life choices, personal commitments, and conceptions of the good are not subjectively relative . . . (p. 109)

His assertion that use of the "growth" principle allows a marriage of justice (fair and equitable treatment for all) with caring (recognition of the importance of contextual details and individual concerns) however, remains theoretical in nature and does not specifically address the relationship of the "growth" principle to moral or altruistic action. Indeed, Kohlberg (1984) linked moral judgement to moral action when he stated that a moral judgement of what is right precedes a decision to act responsibly on this judgement. He further hypothesizes that those with higher stages of moral development would act altruistically more consistently than those at lower stages of development. Kohlberg's research and research by Rushton (1975) substantiate this claim. Many pencil and paper tests which included social responsibility scales as well as social irresponsibility scales (Machiavellianism), and Kohlberg's moral dilemmas appeared to have positive correlations to later helping behaviors. Thus individuals who scored high on moral reasoning tasks and social responsibility acted in a prosocial manner more frequently than did others with low scores in these areas (Anchor & Cross, 1974; Eisenberg-Berg, 1979; Rushton, 1975; Straub, 1974).

Interest engendered by impulsive bystander intervention during emergencies spurred inquiry into the nature of "irrational" helping behaviors. Piliavin, Davidio, Gaertner and Clark define impulsive helping as "a rapid, driven, almost reflexive response that appears to be insensitive to potential costs in the situation." Clark and Word's study (1974) involving a stooge subjects believed was an injured electrician surrounded by "live", potentially lethal, wires illustrated this phenomenon as subjects rushed to help without consideration of the inherent dangers/costs involved with direct intervention. Piliavin, Davidio, Gaertner, and Clark analyzed this phenomenon by categorizing existing studies to differentiate emergency situations where "impulsive" or "nonimpulsive" helping occurred, and to factor in situational differences, by looking at potential costs to bystanders in these different situations. They used only experiments in which over 50% of the subjects helped. The impulsive delineation was characterized by 85% to 100% helping approximately 15 seconds after the emergency was presented. Clarity of the emergency subject's perceptions of the situation as 'real', and previous viewing of, or interaction with the victim appear significant. Also noted was apparent disregard of other bystanders or potential helpers with focus of attention targeted only on the victim's plight. They postulated that high levels of arousal narrowed the focus of attention to negate cost/reward analysis or diffusion of responsibility effects noted by Latané and Darley (1970).

How does this relate to personality traits? Denner's (1968) premise that personality characteristics such as "concern with the 'real-unreal' distinction" and "need for information" influenced helping behaviors led to speculation that individuals who needed to confirm or clarify the reality of situations by gathering information would be less likely to intervene in ambiguous circumstances. His "theft experiments" confirmed this hypothesis; however, his design of research did not involve personal cost for intervention thus neglecting an important consideration in altruistic behavior. Michelini et al. (1975) suggested that "esteem-oriented" individuals would offer assistance more often that those who were "safety-oriented." To test this hypothesis Maslow's "needs hierarchy" was measured through construction of a sentence completion task. Esteem-oriented people were characterized as being competent, dominant, and achievement oriented. Safety oriented people, conversely, were portrayed as passive, anxious and distrustful. Experiments involved male subjects in a control group (mid range in both esteem and safety, a high esteem, and a high safety group). In identical situations, the esteem-oriented subjects reacted more quickly with a mean response time of 5.2 seconds as opposed to 13.4 for the control and 15.8 for the safety group, and with a higher percentage of helping behaviors, 81% for the esteem group, 46% for the control, and 31% for the safety group.

The work of Cialdini, Straub and those theorists advocating impulsivity as a factor in altruistic helping appear to extend logically from the phenomenological framework of Lewinism. One's life space, impinged upon

by situational variables, personal variables, attributions, perceptions, etc. affects behavior in different situations.

> The behavior of the impulsive hero or heroine no longer appears 'irrational' if one views his or her life space . . . as focusing out toward the world rather than in toward ourselves. Although there may be objective costs to the situation, they have not entered into the 'hero's' life space. Thus, these costs do not deter the action (Piliavin, et al., 1981, p. 250).

Bauer's (1980) naturalistic study which included administration of the Jackson (1967) Personality Research Form as well as descriptive interviews with ten individuals who received citations for heroic acts conflicts in part with the impulsivity hypothesis. All subjects ranked "High" in personality traits entitled order and cognitive structure, an indication that their preferred responses to stimuli included planning ahead and thinking through alternatives before acting. In subsequent interviews, each individual reported being aware of danger and of making a conscious decision to intervene although the method of intervention developed as they engaged in helping behaviors. Also noted was the subject's focus on the victim in distress which precluded consideration of personal costs for helping at the time of intervention and injunctions to stop or indifference of fellow bystanders. Other personality traits in which these subjects obtained "High" scores included harm avoidance, achievement, endurance, autonomy, dominance, and nurturance. Thus Piliavin's (Piliavin et al., 1981) definition of impulsive

helping as a "reflexive" response does not fit the Bauer findings, nor does postulation that intervention in emergency situation reflects impulsive personality traits. Their belief that attention focused on the victim's plight rather than on potential costs for helping appeared consistent to Bauer's work as did a disregard for the action or inaction of fellow bystanders.

Toward an Ethic of Care and Moral Motivation

Altruistic behavior is a complex phenomenon. Efforts to understand why bystanders choose to intervene or not in emergency situations, particularly since the stabbing death in 1964 of Kitty Genovese, have spurred experimental research into situational and personality characteristics centering around motivation to act. Currently no comprehensive theory exists, however interactional approaches, those which research the effect of the Person X Situation, have greatly increased our understanding of the process of intervention and have negated previous simplistic explanations of apathy, or alienation as the source of bystander unresponsiveness (Latané & Darley, 1970). Theories of prosocial behavior as a result of cost/benefit analysis contrast studies in which impulsive helping occurs despite prohibitive costs for helping (Clark & Word, 1974). Difficulty in researching behavior which is largely the result of ***internal*** processes, not consciously attended to by subjects, has also hampered our efforts to understand this phenomenon. Altruistic behavior in emergency situations appears to involve a complex blend of emotive, cognitive, and behavioral factors which interact with the individual and the situation to produce a specific response.

A recent article (Batson & Fultz, 1987) addresses a subtly different vein of inquiry fitting into the egoistic/altruistic debate which questions the relationship of critical self reflection to helping. They conducted two experiments with university students whose results supported their hypothesis that critical self reflection reduces self-perceived altruism, which in turn, undermines prosocial motivation to act by removing self reward and positive self attributions normally associated with helping. Batson's interest in the egoistic/altruistic debate again emerges in a subsequent article (Batson et al., 1988) where five separate studies to explore the "empathy-specific reward" hypothesis which postulates motivation for empathetic prosocial acts arises out of a desire to accrue social or self-reward (praise, honor, pride) and the "empathy-specific punishment" hypothesis which presumes prosocial motivation stems from a desire to avoid "social or self" punishment such as censure, guilt, or shame. These two egoistic motivations were then contrasted with altruistic empathetic motivations. The conclusions of all five studies suggested that empathetic altruistic motivation, care or concern for others, is operational in prosocial behavior.

> The empathy-altruism hypothesis certainly seems to be the most parsimonious explanation for the results of the five studies reported here. More and more, it appears that the motivation to help evoked by feelings of empathy is at least partially altruistic. If it is, then psychologists will have to make some

> fundamental changes in their conception of human motivation and, indeed, of human nature (p. 76).

Batson et al. address, in this final statement, one of the great difficulties assaulting psychologists. In our rush to provide logical "scientific" explanations for human behavior we refuse to acknowledge the presence of nobler instincts and scoff at theories which present man as motivated by care and concern for others before concern for self. Certainly the relationship between care and moral motivation spurred by Gilligan's (1982) work on the ethic of care and responsibility deserves further study. Shogan (1988) expands on the ethic of care and responsibility introduced by Gilligan (1982) when she states that a caring response is at its core, "other" directed and arises out of: (a) recognition that a moral circumstance exists whereby another's welfare or fair treatment is at risk; (b) a desire to help another; (c) empathetic distress at the victim's plight; and (d) a belief in one's ability to help. She goes on to address extraordinary or "heroic" caring responses such as a soldier throwing himself on a live grenade to save his compatriots or a teacher who dies pulling her students out of a bus wreck. Discussion of extraordinary caring responses is an extension of Heyd's (1982) concept of supererogatory behaviors. He defines supererogation as,

> . . . primarily attributed to ***acts*** or ***actions*** rather than to persons, traits of character, motives, intentions, or emotions. Secondly, these acts are ***optional*** or ***non-obligatory***, that is - distinguished from those acts which fall under the heading of duty. Thirdly,

> they are ***beyond*** duty, fulfil ***more*** than is required, ***over and above*** what the agent is supposed or expected to do. (p. 1)

Shogun states that as supererogatory acts are linked to "duty" they fail to account for responses in which individuals help, not out of a sense of duty, but because they care deeply for others. Acceptance of this altruistic motivation to intervene in times of crisis embraces the interactionist perspective. The person, viewed holistically as infinitely greater than a mere sum of his/her parts and imbued with the capacity to care for others as well as self, assimilates situational variables and decides whether or not to intervene. This decision cannot be understood in isolation. Additionally, it cannot be understood through the use of reductionist theories which focus on the merely physical, social, emotive, and/or cognitive. Comprehensive understanding of altruism in emergency situations must include recognition of a fifth dimension - that of the spiritual nature of humankind. By spiritual, I mean the self transcendent dimension of human beings which leads to the capacity to see oneself in the face of a stranger. This is clearly ***more*** than self gratification. It is an exploration of full human potential which includes not only that which I am, but that which I am capable of becoming.

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