Alfred Adler hypothesized that while "other schools of psychiatry have their successes ... they do so less by their methods than when they happen to give the patient a good human relationship" (2, p. 343). In the following I should like to offer a confirmation of this hypothesis.

When I began my research my intent was not to confirm any of the tenets of Individual Psychology as a school of psychotherapy. Rather, it was an attempt to affirm my own conviction that humanness (7, 10) is the central factor in the effectiveness of any therapeutic endeavor. I have never considered myself a follower of the Adlerian school of psychology, nor have I been more than cursorily exposed to this position. My theoretical framework for the practice of psychotherapy would be best characterized by what has been called the "third force" (16)—an existential-humanistic approach (6, 17). Only after I had written a paper dealing with humanness as a variable in psychotherapy (7) was it called to my attention that I had inadvertently offered a de facto confirmation of the above quoted hypothesis.

A Brief Survey

Since the classic study by Fiedler (11) which demonstrated that experienced therapists of various theoretical orientations were more similar to each other than inexperienced therapists of the same school, considerable doubt has been cast upon the value of adhering to any one particular school. Thus there was the development of the "eclectic" approach. While eclecticism in and of itself is not bad, it seems to have led to a "watering down" of the whole therapeutic enterprise.

A more tenable hypothesis derived from Fiedler's work is that the more experienced psychotherapists come to an important discovery, namely, that it is more a question of who they are and how human they can be, than what techniques they employ, that effects behavior change. With experience and comfort their relationships with their patients become more "real." Novitiates tend to keep their textbooks, techniques, and bits of technical information between themselves and their patients; they try to be "right" according to the book. It is only with maturity and experience that therapists
come to realize that understanding and warmth in the relationship transcend technique.

Further evidence to suggest that psychotherapists of different orientations are more similar to each other than one might expect comes from a study of Gatch and Temerlin (12) in which tape recordings of therapy hours by existentially oriented and psychanalytically oriented therapists were compared with respect to what was actually said during the hour. No significant differences were found.

If we look at apparently diverse approaches to behavior change we see the emergence of an answer. Studies with drugs (20) have shown that positive effects can be obtained with a drug of little pharmaceutical value provided that a positive physician-patient relationship exists. Cerletti (5) and Gorham and Sherman (13) have demonstrated similar findings with convulsive therapies.

Recently another form of psychotherapy, "behavior modification," has emerged (3, 14, 23). It is based on traditional learning theories and uses rewards, punishments, and desensitization for effecting behavior change. These "behavior therapists" feel it is their techniques which cause change to occur. Although Lazarus (15), a behavior therapist, has stated that desensitization is more effective when good rapport and trust exist between therapist and patient, it seems that behavior therapists in general give little more than passing acknowledgement to the role of trust, care, and understanding in their practice.

It appears that psychotherapists generally live in the illusion that application of a specific technique is the way for change to occur. But the data seem to indicate that it is rather the kind of relationship between patient and therapist that is the most important factor in psychotherapy. We do not effect change—change happens in the light of a truly human encounter.

AN EXERCISE IN COOPERATION

As stated earlier, my orientation can best be thought of as an existential-humanistic one. However, I have found that it has much in common with Individual Psychology; and I am not alone in this as I have only recently found out (much to my chagrin). Several other psychotherapists have come to similar conclusions (see 1, pp. 7-9, 4, 19, 21).

By an existential-humanistic position I mean that I see man as
essentially self-determining, capable of making his own choices, and being responsible for his choices. Man is unique and must be viewed as a whole rather than in terms of his parts. Man creates his own world and develops his unique mode of being-in-the-world (lifestyle). The task of psychotherapy is to help the patient elucidate his world and find new possibilities for action. It is a here and now approach in the sense of phenomenology. The therapist’s task is to see the patient’s world as the patient sees it. Can the patient recognize his world in the therapist’s description of it (22)? Adler expressed it as, “We must be able to see with his eyes and listen with his ears” (2, p. 340). Through such sharing of the patient’s world and the understanding gleaned from such understanding, the patient understands himself.

The therapist must be genuinely concerned with the well-being of the patient. He must respect the other as a person with regard for the growth possibilities inherent in all human beings. There should exist “unconditional positive regard” (18, p. 283). This does not mean that the therapist must accept all behaviors of the client, but rather that his main concern should be for the integrity of the person who is behaving.

Therapy is not a set of techniques, but rather it is an empathic, genuine human relationship. Existential humanism is an attitude which underlies all techniques. We have seen from the aforementioned studies that no matter what techniques we have at our disposal, there is no substitute for humanness, mutuality, and understanding.

An existential-humanistic psychotherapy and Adlerian psychology mesh on the importance of a human relationship, where there is cooperation between patient and therapist, where each is trying to understand the other’s world.

In such an atmosphere growth occurs. In Adler’s words, “Psychotherapy is an exercise in cooperation . . . We can only succeed if we are genuinely interested in the other” (2, p. 340).

More effort should be expended in exploring the parameters of the human relationship in therapeutic dialogue than on the technical aspects of psychotherapy. Techniques may be of value, but no technique can substitute for human contact. While psychotherapy may be a learning process (3) or social learning (2), little learning will take place with humans without an atmosphere of relatedness, trust, and understanding. We should be investigating those parameters of the therapy relationship which facilitate change. Some of
these have been discussed elsewhere (7, 8, 9, 10). I recognize that trying to find out what are the characteristics of a human relationship is difficult, but not impossible.

**References**