



## From the Director

*Hidefumi Kotani, Professor, Director of IASCP*

### What is Psychological Assessment?

Have we forgotten Carl Rogers' historical note of caution regarding the possible negative effects of diagnosis in a medical sense? Nowadays we emphasize the importance of psychological assessment for the work of clinical psychologists, especially in Japan. Does the fact that we have succeeded in differentiating between diagnosis and assessment mean that we have overcome those negative effects which Rogers argued are a risk associated with a strict diagnostic mentality in dealing with clients?

What Rogers meant is simply that a diagnostic view can interfere with a clinician's genuine desire to understand a client as a whole person. Of course medical diagnoses are an important aspect of the process of determining whether or not a person is suffering from an illness. On the other hand, psychological assessment includes both good and bad aspects in discerning personality structure and function. Does this overcome Rogers' criticism? Not likely! Even the positive aspects of psychological assessments can often interfere with a genuine desire to see the individual as a whole because diagnoses and assessment can often address and correct successfully many aspects of a malfunctioning personality.

We do need diagnoses and assessment for an appropriate beginning to psychotherapeutic intervention, especially for severe patients such as those suffering from a personality disorder, psychosis, or child developmental problems. We need a frame of reference in order to clarify the problems and the possibilities for change. Every aspect of diagnosis and assessment is actually an agent of change or a nodal-point for

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changing personality structure or functioning. Diagnoses and assessments are hypothetical understandings of a patient's mental state and personality traits and serve to identify elements of mental illness, malfunctioning behavior, or maladaptive emotional reactions. However, hypotheses require a marshalling of evidence in their support. An important aspect of psychotherapy is to test hypotheses built on the basis of diagnoses and psychological assessments undertaken during the earlier sessions with clients. Considered in this way, diagnoses and assessments can be real agents of change and therefore might overcome to a significant degree Rogers's concern about the negative effects of diagnoses.

## Narcissistic Fantasy as a Criterion for Personality Organization

*Yoshie Kawamura, 9th year in IASCP*

Narcissistic fantasy is one of modern pathology. Narcissistic fantasy is pointed out by Bach (1977) that it could be seen in any personality structure, whereas it is a concept derived from dynamically identified phenomena of response by borderline patients. Narcissistic fantasy is defined as "a fantasy that has its roots in drives and wishes toward oneself and not in objects. Its pathological feature is becoming detached from external reality, and smoothening for oneself excessively".

I (2009) pointed out that there is an increase in those who easily lose temper or become withdrawn, in other words those who cannot develop adequate relationships with others, in modern clients. I also reminded the current situation in which therapists easily diagnose, due to their counter-transference, those clients as having severe problems of personality structure or temperament, such as personality disorder, psychotic, or developmental disorder. She noted the importance of Bach pointing out to the possibility that narcissistic fantasy could

occur in any personality structure.

I (2009) formulated the dynamics of arising narcissistic fantasy, in each of psychotic personality structure, borderline personality structure, neurotic personality structure (severe state), neurotic personality structure (higher state). I set narcissistic fantasy as a criterion for an assessment of personality structure, and presented a way to differentiate borderline reactions in neurotic group. My definition of narcissistic fantasy is that it is a reaction toward drainage or a crisis of drainage of narcissism, in other words it is the defense reaction of narcissism. One will try to save narcissism by being soaked in narcissistic fantasy. As a result, behaviors like losing temper and withdrawing occur. As the dynamic pattern of narcissistic drainage can be identified according to the ability to maintain narcissism in personality and conflict structures, it could occur in any personality structure.

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## Professional Psychotherapy What Comes into View as We Continue to Hone Ourselves

Kengo Takeno, Ballpark co.

A Japanese top female athlete said the following prior to competing in the World Championship: "I'm in good shape. All I have to do is get used to the atmosphere of the site." When I heard this, I knew that at best she would end up second. No matter how high the level of her talent may be, given her remark, she will not be able to become the world's best. Why? That is because the "*field*" is the principal and her "*self*" the accessory. This is called field dependence. The reason many Japanese athletes cannot win on the world stage is because they tend to think about how "*they*" can exert the strength that is closest to (but not actually reaching) their 100% potential in the "*field*," a concept that is superior to them. There is the latent perception that the field is a factor which holds down the athlete from performing at his or her full potential. It is assumed that the ability at 100%, in the game, drops to that of about 90. Ideas such as "I'm going to change the field on my own," "I will turn the superior-subordinate relationship between the field and myself around," seem to be scarce. That will not make a world champion. The athlete cannot win unless he or she goes beyond 100% and tries to reach 120 or 150. And they must turn even the site's atmosphere into their own strength. The aforementioned athlete should have said this: "I will change the site's atmosphere! And I will be number one!"

Everyone agrees that many Japanese athletes are industrious. However, I suppose that the direction in which their efforts are placed is not right. It is not about *trying to exert their regular strength in the game*. It is necessary to *keep breaking one's*

*own limit every day, every hour and every moment, continuing to meet with his/her new self*. All energy should be devoted to this.

Meeting with one's new self can generally be frightening. Many people wish for stability. They hope that once they can do something to a considerable degree, they will be able to handle everything else automatically. Once they do a job well, they like to keep using the same means. They want the magic elixir that will work anywhere, anytime. But thinking, "This is good enough," is when progress comes to a halt. That is what is truly frightening. People can easily be left behind in the flow of time. A method that once worked well is no longer the best answer in this moment of "here and now." It is the here and now that is always crucial.

"Professional Psychotherapy" is that which builds up such a psychic organization for those who strive to be "professional." Who one was yesterday is already history. Who one is today will tomorrow age. Simply put, whether you can continue to hone yourself for the rest of your life determines whether or not you are a "true professional." My clients are currently in the middle of that battle. They are facing their inner side anew, answering their own questions, in order that they keep meeting their new selves. And this is how professionals who live to the fullest in the here and now grow. Even if an athlete becomes a world champion, he or she will live again in the middle of a new battle.

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## The Originality of the Research in Clinical Psychology –The Task for the World and Japan–

Kai Ogimoto, 4th year in IASCP, Naoko Ono, 5th year in IASCP

In September, 2009, the research team from IASCP (Hidefumi Kotani, Kai Ogimoto, Naoko Ono, Yuki Nakamura, Yoshie Kawamura, Norihide Takeyama) gave a presentation as one of the topic givers in the symposia organized by the journal editing committee in the association. The title of the symposium was "The Frame of Japanese Clinical Psychology"-Considering the Essential Condition for Suitable Researches in Japanese Clinical Psychology- at the 28th annual conference of the Association of Japanese Clinical Psychology.

The purpose of the presentation was to examine the reality of contemporary research in clinical psychology which supports clinical activities.

For the presentation, we reviewed 205 papers of the latest annual academic journals from the USA, UK and Japan. We made a database from three points; theme of research, method and result. Basing on the factors of research structure made by Kazdin(1999) and the research team, these data were evaluated, then problems and tasks of the contemporary research situation were discussed.

As a result, the necessity to re-inquire the meaning of "science" which is affected by EBM (Evidence Based Medicine) and the weakness of research design (Kazdin, 1999) were pointed out. It became visible that experimental study

which was the basis of the scientific study, and psychotherapy as an experimental and quasi-experimental study were lacking.

That is to say, the process of psychotherapy derived from psychoanalysis is a sequence of small continuous experiments, so a therapeutic goal aims for the verification of a therapeutic hypothesis, and intervention techniques are skills for controlling variables. Therefore, a case study is not merely a description of therapeutic processes.

As for the response to the presentation, we felt a fluctuation among the audience in the hall. There might have been a dynamics to prevent the fluctuation. Many panelists mentioned that case study is the identity of Japanese Clinical Psychology which is what distinguishes itself from other psychologies. However, no investigation about the difference between case study and clinical description was not investigated

Receiving these responses, we had recognized the necessity for developing psychotherapy as one of the scientific methodologies. Psychotherapy is the core of research in clinical psychology. This stream will lead to the development of a new research design which is presented in the newly published book, "Introduction to Modern Psychotherapy".

# Memorial Conference of Dr. Takeo Doi

## Introduction

In July 2009, Dr. Takeo Doi, a Japanese psychoanalyst who is internationally well known for his concept of “Amae,” (a book titled “Anatomy of Dependence”) passed away. After retiring from Tokyo University, Dr. Doi taught at International Christian University as a professor of psychology, and more about his endeavors at the university can be found in Professor Tomabechi’s article in the next issue of International Journal of Counseling and Psychotherapy (IJCP) published by Institute for Advanced Studies of Clinical Psychology (IASCP). On November 17, 2009, a memorial conference for Dr. Takeo Doi was held at International Christian University.

The conference included a memorial lecture by Dr. Kazuya

Yoshimatsu, director of Shikiba Hospital, and a symposium. Dr. Yoshimatsu’s memorial talk was entitled “On Dynamic Psychotherapy: What I Learned from Dr. Doi,” and the symposium, “The Tasks and Possibilities of Modern Psychotherapy,” in which mainly researchers of IASCP presented a topic, and discussions were held. Issues that questioned the past, present, and future of psychotherapy were raised, and each participant’s feeling for Dr. Doi built up, and the conference became a place where abundant information and energy - so much so that they could not be placed within the time frame - were exchanged. (Editors)

## What I Learned from the Lecture of Dr. Yoshimatsu

*Naoko Ono, 5th year in IASCP*

The title of the memorial lecture was “On Dynamic Psychotherapy: What I Learned from Dr. Doi.” Dr. Yoshimatsu told us three essential points for dynamic psychotherapy which he had learned from Dr. Doi. They were “People, Words and Truth” and the lecture went on clarifying these points. Dr. Yoshimatsu sometimes presented his private episodes.

For “People”, Dr. Yoshimatsu said “In order to become a good psychotherapist, it is necessary to know people well.” This phrase seemed to be ordinary at a first glance. Actually, these words were meant with the clinical practice as follows; ①Do not write clinical record during the therapy. ②Write the record with axis of “the theme of the session” “the flow of the session” “the specific dialogue” after the therapy session. As I heard this, I felt Dr. Yoshimatsu is consistently focusing on and being with the person in front of him during and after the therapy session.

There are three kinds of “Word” that ①relates with “me” ②relates with the outer world ③is abstract. Dr. Yoshimatsu talked about the goodness of Japanese words as it is, and mentioned the importance of talking in easily understood Japanese words instead of using a lot of abstract words. Also he insisted that although western psychiatry is originally a foreign thing for Japan, there is the meaning to practice psychiatry in Japanese words. I suppose this is because both the practitioner and the client are living in Japanese world. As Dr. Yoshimatsu spoke the wonderfulness of Japanese words in Japanese, I felt his pride and love toward Japan, and a sense of broad rich space inside me. And thought that this sense is related to the attitude of how I face psychotherapy.

About “Truth”, Dr. Yoshimatsu said “Process of psychotherapy is to verify hypothesis.” Facing a client, there is a hypothesis. When the therapist faces a fact to verify this hypothesis, the sincerity not to juggle the fact is very important. His words “if this diligent and sincere attitude seeking for the truth wavers, you must quit research activities” had a great

power that made me re-ask to my heart about my attitude and behavior toward psychotherapy.

There are still a lot of contents which I will not mention here. However it was not only the contents that moved me. As I attend this lecture, I learned much more from Dr. Yoshimatsu his presence. I felt the person of Dr. Doi from the lecture, but I also felt the presence of Dr. Yoshimatsu who is experiencing Dr. Doi at the conference room from the way of his talking. Although the topic of the lecture was serious and talked in detail specifically, Dr. Yoshimatsu created the atmosphere of the room not too tight. Also, the way of using the time frame was very interesting. He changed the speed of speaking, and it seemed that as if he was directing the whole lecture. The frame of one hour seemed much longer and more fruitful to me.

Dr. Yoshimatsu had a consistent attitude to be dynamic throughout the lecture. There was an accident that the banner which showed the title of the conference came off from the wall just after the lecture began. Dr. Yoshimatsu then said “Let us fix it. Dr. Doi should have said like that.”, and this was as if Dr. Doi was coming here. I remember each movement of the atmosphere of the conference room both with tension and then relief.

I think what I learned from this lecture were “what to learn from mentor” and “what makes it possible to say this is what I learned from mentor”. Dr. Yoshimatsu told us what he learned from his mentor Dr. Doi. One of the three important things for psychotherapy was “To acknowledge people.” I thought that “People” means not only client but also our own mentor. It is not easy to make in words what one has learned from the mentor. Firstly that is because it is necessary to start from feeling the depth and person oneself of the mentor. Without personifying it, it can not be said something is learned from the mentor. It needs love and also understanding of oneself. I recalled the word of Freud “ability to love” “ability to work”. This is what I learned from the lecture and what became in shape in my mind which I will make in words from now on too.



## Narcissistic Fantasy as a Criterion for Personality Organization

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The author is advancing the knowledge about neurotic (severe) group as follows; 1) They have vulnerability in the development of early latency. In many cases, problems in early latency development brought on confusion of libido, like confusion among dependency on motherhood and fatherhood. 2) As Kotani (2008) presented, because they cannot maintain self boundary and libido toward external reality within oneself, they show dependency dynamics in defense patterns of hysteria or compulsion, like acting out and internal dramatization. 3) While overly depending on compensation of narcissism from

others, they reject the objects that they might be able to depend on (counter dependency). 4) Because they have superego that is too strict compared to ego, they are likely to project their superego to others, and are hard to keep the sense of security in relationships.

Though neurotic personality structure is a group that shows good prognosis, it is hard to stabilize treatment because of above features. But first of all it is important for the therapist to understand the treatment possibility of the group with such difficulty, and to further investigate treatment techniques.



## Participating the Open House

*Nobuyuki Yoshida, Participant of Open House*

When I sustained serious injuries and was freed from the hospital bed, I was told that everyone at House of Love and Anger\*<sup>1</sup> worried about me. Then when I made a short visit to IASCP, all the staff was not there, and I was told that they would be present if I participated in the open house. That was the first time for me to join it. I did not have a particular problem or worry, but I just wanted to see them even though it seemed like an impure motive.

I was drawn to Professor Kotani's talk, and through the workshop and large group called the "LA meeting"\*<sup>2</sup>, I enjoyed the atmosphere. The three hours passed by in a flash. Since then, I have participated in it as much as possible.

When I think back, I have played given roles such as that of a student in my school days, a head of my family, a teacher, a boss, or a subordinate in school. Wherever I was, I could play hoped-for roles by positioning myself in the situation. Of course, I acted poorly and had bitter experiences many times. Social life seems like "playing given roles." No matter how much I believe, "This is the mission I must fulfill now," I play a scene of my own life, just like how actors get into character. It seemed like there were two split sides of me: one plays a role and one watches the other.

When I was told, "Let's empty our minds," I felt to be encouraged to find my real self, the self which is free from playing the roles in my home or at work. It means not to see in relation to circumstances but just see myself in my true colors. I think "making the mind empty" tells us the significance of going back to the real self from the self that is playing given roles.

I recognize myself as a person who does not want to show his true feelings to people. However, at any time in Professor Kotani's talk, or workshops, free talking, the LA meeting, I find that such part of me withdraws and becomes natural in the process, and I think, "Well, what is my real feeling?"

I hope this open house continues to be respected as a moment to be free from "Love and Anger" and to empty the mind.

\*1 Psychological Consulting Services of IASCP is known as "House of Love and Anger"

\*2 LA is short for "House of Love and Anger"



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