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OVERVIEW

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ABOUT CONSTRUCTIVE LIVING

Constructive Living (an extension of the Japanese Morita and Naikan psychotherapies) is becoming increasingly well-known in academic literature and the popular press in the West. Wiley's *Encyclopedia of Psychology* contains entries for Morita and Naikan therapies. The best-selling college introductory psychology textbook, *Psychology and Life*, written by Zimbardo at Stanford devotes nearly a page to Morita therapy. The *Handbook of Innovative Psychotherapies* contains chapters on Morita therapy and on Naikan therapy. Articles about Morita therapy have appeared in *Psychiatric Quarterly*, *Psychotherapy*, *Journal of Counseling and Development*, and other academic journals. Book reviews of Constructive Living books have appeared in *JAMA*, *Psychology Today*, *Contemporary Psychology*, and elsewhere. The *International Bulletin of Morita Therapy* is published at the Department of Counselling Psychology of the University of British Columbia.

As for the popular press, the May, 1990, silver anniversary issue of *Cosmopolitan* carried a long article about Constructive Living prompting more than 5,000 readers from every state and a number of foreign countries to write asking for more information. Recent articles also appeared in *USA Today* (August

23, 1990), *Bottom Line* (December 11, 1990, pp. 11–12), *Your Personal Best* (Charter issue), *New Dimensions* (May–June, 1990, pp. 29–30), and *American Health* (March, 1991, p. 12). The November, 1991, issue of *New Woman* magazine featured a lengthy article on Constructive Living.

WHAT IS CONSTRUCTIVE LIVING?

Constructive Living follows an educational, not a medical model. The goal of Constructive Living (CL) is to help students learn to become more “realistic.” Neurotic problems seem to have their roots and expression in a sort of unrealistic approach to life. Unfortunately, traditional psychodynamic Western psychotherapy offers little toward developing a broader perspective on reality. For example, in traditional counseling modes, the typical suffering students focus much attention on the reality of inner feeling states and miss much of the varied and vital situational reality surrounding them. Western therapy repeatedly focuses attention on internal states promoting little concern with observation of external reality and behavioral objectives prompted by that reality. Similarly, Western therapy tends to emphasize the negative aspects of parenting (thus conveniently excusing the client’s responsibility for current problem behavior) while ignoring the sacrifices and service of (admittedly imperfect) parental figures. The action (Morita) and reflection (Naikan) aspects of Constructive Living redirect the students’ attention toward those parts of reality which have been systematically ignored or dismissed in the West.

Morita and Naikan therapies are practiced separately by a variety of therapists in Japan. Morita psychotherapy is practiced primarily as a medical sub-specialty within the field of psychiatry. Naikan has a wider range of practitioners and settings and covers a broader range of client complaints. Both methods are based on careful observation and intense introspection by their founders—Morita Masatake (or Morita Shoma) and Yoshimoto Ishin (Japanese family names precede the given names). My functions were to contribute to the introduction of these methods to the West; to point out the philosophical and methodological complementarity of the two to Easterners and

Westerners; and to extend the theories, methods, and applications beyond their narrow ranges in Japan. Constructive Living is a thoroughly Western therapeutic approach to living now. Its methods are increasingly adopted back into Japan as that country becomes more Westernized. Innovations in method are exchanged as I continue to lecture and present papers about CL in Japanese at the national and international Morita and Naikan meetings in Japan each year. We are in the process of repaying our debt to our mentors, although the debt keeps growing.

Introductory material on Morita therapy and Naikan therapy may be found in Reynolds, 1976, 1980, 1983, 1989, 1990, and 1991.

The Action Aspect of Constructive Living

Briefly, Morita therapy recommends the sensible life strategy of accepting uncontrollable aspects of life (such as feelings, other people, weather, outcomes of actions, and the like) while using energy and effort to affect that single element of life which we control directly, our behavior. This action element of CL prompts a minimum of talk during CL instruction and puts a premium on homework assignments to be carried out by the student. These assignments provide the student with experiential understanding of the effectiveness of constructive action in changing an unrealistic life style. Students learn that it is unnecessary to “fix” feelings or become “comfortable” with an activity before undertaking it. No multi-step process needs to proceed action—they simply do it.

Feelings may change as a result of positive activity, but such change is only a welcome by-product, not the goal of instruction. The student learns to personally assess situations and do what needs doing simply because it needs doing, not for some desired decrease in anxiety or anticipated increase in self-esteem.

Advanced students of Constructive Living come to accept themselves as part of the reality in which they find themselves. Such a perspective is not passive fatalism; rather, it provokes an active interplay between real circumstances and realistic action aimed at affecting those circumstances.

Morita therapy has a long and respected history in Japan, but it is only recently showing a growth in popularity there. The Japanese Moritist professional organization has more than doubled its membership over the last few years to more than 500 members. And the Moritist lay person organization, Seikatsu no Hakken Kai, has more than 6,000 members and well over a hundred chapters throughout the country.

The Reflection Aspect of Constructive Living

Naikan therapy asks us to reflect on the reality of our past and present life. Naikan suggests that we examine critically those commonly held views: we have struggled to overcome the obstacles others have placed in our paths; we have succeeded, thanks to our own efforts; we are givers and not takers from the world; we rarely get the rewards we deserve. Such a perspective is unrealistic and is unsupported by consideration of our everyday existence.

Naikan offers methods by which we reflect on our past and on our current situation to gain a more accurate, authentic view of our condition. The exercises recommended in a Naikan approach to mental health invite us to look at our situations from others' points of view, not just from our own self-centered perspective. For example, CL students may be invited to estimate the amount of money their parents spent on them from birth to age twenty-one, then to estimate the amount they spent on their parents during the same period. Similar calculations are made from age twenty-one to the present or until the parents died. Of course, out of pocket expenses are not all there are to relationships, but they provide an objective, measurable scale for comparison of what was given and received materially during childhood and adulthood.

Naikan encourages us to explore the detailed ways in which the world has been supporting us even though we didn't notice the support, didn't thank people and objects for the support, or didn't feel gratitude for it. Beyond what we deserve, we are sustained. Such a realization becomes more than merely an abstract philosophical position when doing Naikan assignments. Sentiments of alienation and anomie generally decline during Naikan.

As a result of Naikan study we learn a substitute for the shaky self-esteem which must be supported by selective forgetting of our failures, our meanness, and others' efforts in our behalf. The substitute is reality esteem. Deserving or not, we continue to be supported by reality. Gratitude and a desire to work at repaying our debt to others replace our greedy endeavors to make sure we get our share.

Naikan is not about forgiving our parents. Such a task is trivial and self-serving. Naikan is about hoping our parents forgive us—for our lack of appreciation of their efforts, for the troubles we caused them, for the little we did for them as we grew up.

As the reader can well imagine, Naikan isn't likely to become popular any time soon in this country. It would be much easier to promote a therapy which sets us up as heroic victims of our pasts and focuses on the inadequacies of our parents. Unfortunately, like the old myth, that psychological insight would cure all our ills, the new myth, that discovering childhood abuse and confronting the abuser will cure our deficits of feeling and behavior, must eventually give way to realistic recognition of Western psychotherapy's essential failure.

When was the last time you saw a neurotic person filled with gratitude? When was the last time you saw a neurotic person bearing a grudge? Narcissistic suffering is neurosis. And most Western psychotherapies seem to operate to make clients even more narcissistic.

THE PRACTICE OF CONSTRUCTIVE LIVING

Instruction in CL consists of individual or group sessions during which the students' attention is directed toward the common reality upon which we all agree, toward realistic behavior based on individual circumstances, and toward reforming existing patterns of behavior and thought. Homework may include reading assignments, cleaning the garage, maintaining a journal of behavior, clipping want ads from the newspaper, writing letters of thanks (whether feeling gratitude or not) to others who served the student in the past, listing goals to be worked toward during the week or month, giving

something away each day, observing neighborhood gardens, saying "thank you" ten different ways ten times a day, getting a specified amount of physical exercise, reflection on what was received from and returned to others and troubles caused others during the day, showing up for work regularly, and so forth.

The chapters in this book provide the reader with many concrete examples of CL techniques and goals.

LIMITS OF CONSTRUCTIVE LIVING

Constructive Living is not a psychotherapy for mental illness. Illnesses such as schizophrenia and bipolar disorder require medical care and, usually, some form of psychopharmacological support. Instructors of CL are often mental health professionals, but they are not necessarily so. Constructive Living is an educational program aimed at teaching this effective lifeway to any human who is willing to learn and practice the exercises. Certification in Constructive Living is not a license to practice counseling or psychotherapy.

Certainly, there are people who don't find this lifeway acceptable. They don't come for instruction or they drop out shortly. Other people state their desire to learn but fail to do so. Possible explanations include strong commitment to other ways of seeing the world, low intelligence level, antipathy toward a particular instructor, and unwillingness to put forth the effort required. Compliance is an issue in all forms of directed behavior change, not only in CL.

It is difficult to specify diagnostic categories or personality factors which hinder learning Constructive Living. People are changeable; diagnoses and personality variables are static and fail to reflect the dynamic nature of humans. An individual may be open to learning CL at one time and not at another. At this point in time it is impossible to predict who would successfully undertake and complete a learning course in this method.

ABOUT *PLUNGING THROUGH THE CLOUDS*

This book is the sequel to *Flowing Bridges, Quiet Waters*. It reflects the current status of Constructive Living in the West.

With a couple of exceptions, the contributors to this volume are representatives of the nearly 100 certified instructors (twice that number have received certification training) in the United States and seven foreign countries. Each contributor represents thousands of students who report being helped by CL during its first twelve years of existence in the West.

This book is not a testimonial; it is a status report. The chapters range in style from academic to informal. If the contributions seem unpolished, over-enthusiastic and over-optimistic at times, chalk it up to the early successes of this innovative approach to sensible living. We have seen the excesses of therapies that merely involve self-focused talking. The sheer contrast of CL's method excites hope.