What is Called Thinking?

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This article explores what it is we call thinking and the role of thinking in therapy.

After nine months of weekly psychotherapy, out of the blue a man I had been seeing said: ‘You know, you really make me think’. One year later, after we had brought our sessions to an end, the same man wrote to let me know how he was getting on. Amongst the stories of the ups and downs of his life, he said: ‘I still have my thinking time every Wednesday morning. Thank you for helping me get a new life and a new way of thinking.’ This was not a cold, emotionless, intellectualising man; he was full of passion, frequently angry and irritated with lots of people (including me), he often cried during our sessions and at times was so wracked with pain that all he could do was rock backward and forward. His statements made me think about what it is people get from psychotherapy and I started to do something that none of my psychology lectures or texts had led me to do, I started to think about what it is to think.

To think is to…

Reason, deliberate, rationalise, calculate, problem solve, to work something out. It is also to attend to, pay heed to, have regard to, have the notion of, to bear in mind. It is to consider, meditate, ponder over, to reflect. And to picture in the mind, conceive, create, imagine, to conjure up. All of these words have their own nuances and give a different flavour to what thinking is.

Philosophers have defined thinking in a variety of ways e.g., a process that involves bringing concepts or ideas before the mind (Descartes and Locke); a process that constitutes a sequential series of ideas or images in the mind (Berkeley and Hulme); an activity that employs verbal images in a form of inner speech (Hobbes) (Hendrick, 1995). These definitions differ regarding whether we think in words or express our thoughts in words, but all of them emphasise that thinking is a process and have at the heart of their conceptualisation the notion of mind. This has been criticised by Ryle (who called this the ‘dogma of the ghost in the machine’) and the radical behaviourists. For example, B. F. Skinner stated: ‘The real question is not whether machines think but whether men do’ (Skinner, 1969). However, most people who engage in what we might loosely term psychotherapy tend to accept as given some concept of mind and thinking.

In 1951 Martin Heidegger gave a series of lectures entitled Was heisst Denken?, a phrase for which there is no precise translation but means What is called Thinking? or What calls for Thinking? (Farrell Krell, 1993). In the lectures Heidegger challenged many of the things that people usually call thinking, questioning whether people have indeed learned to think:
We come to know what it means to think when we ourselves are thinking. If our attempt is to be successful, we must be ready to learn thinking...As soon as we allow ourselves to become involved in such learning, we have admitted that we are not yet capable of thinking. (Heidegger, 1951, in Farrel Krell, 1993, p.369)

Heidegger holds out some hope, as he feels it is possible to learn thinking, not unlike learning a craft or learning how to shoe a horse, although he does not imply this is an easy thing to do:

We can learn only if we can unlearn at the same time...we can learn thinking only if we can radically unlearn what thinking has been traditionally. (p.374)

Is having new ideas or changing our thoughts and beliefs thinking?
In George Orwell’s Animal Farm the animals, following an impassioned speech from the boar Major, obtain ‘a completely new outlook on life’ which enables a revolution to take place on the farm. This permits new ideas, previously not possible, to come about and a new manifesto to live by: ‘No animal shall ever sleep in a bed’; ‘Four legs good, two legs bad’; ‘All animals are equal.’ Whilst I would not argue that this is a bad thing (some ideologies are better for both individuals and society in general than others), what seems crucial is that none of the animals learn how to think: all that has happened is that one set of rules or beliefs has been replaced by another. When the animals start to be exploited by the pigs, who gradually become like the human masters before them, the weaknesses of consciousness raising, adopting slogans and just changing one’s beliefs become apparent. One by one the slogans are corrupted—as the pigs take to living in the farmhouse: ‘No animal shall ever sleep in a bed with sheets’; when they emerge walking upright: ‘Four legs good, two legs better’; and eventually, ‘All animals are equal, but some are more equal than others’. The pigs are able to do this because of the power that they can exert over the other animals. Mau said power is at the end of a gun—the head-pig Napoleon has trained ferocious dogs that terrify the animals not only into obedience, but also into not questioning or thinking. His deputy Squeeler has the power of intelligence and is articulate so is able to twist words and rewrite history persuading the animals to accept the new ideas.

In my opinion, mental health practitioners also frequently exert considerable power in attempts to get their clients to adopt new ways of seeing the world or their problems. Psychiatric diagnoses are proclaimed and frequently not thought about, consequently being both accepted and adopted by clients, not just as descriptions of their psychological states but as explanations of their distress, even though all psychiatric diagnoses as explanations of behaviour are circular and nonsensical. Cognitive therapists and behaviour family therapists provide good examples of how mental health practitioners can get people to change their beliefs, but like all therapies that utilise such techniques, these changes are fragile as they run the risk of being changed by more powerful others. In other types of therapy the power dynamics may be more subtle and the attempts to get people to change their ideas about
themselves and the world more gentle, but I would question whether, at their heart, they aim to help people to learn to think.

Another problem with consciousness-raising is that historically it has not only been associated with introducing people to new ideas, but has also consisted of shutting down thinking. Orwell describes this brilliantly in 1984, where societal control of what can be thought is paramount, and control of language instrumental:

_The object of Newspeak was not only to provide a medium of expression for the world view and mental habits proper to the devotees of Ingsoc, but to make all other modes of thought impossible...it was designed to diminish the range of thought._ (p.305)

One of the party's slogans provides a pertinent warning to therapists regarding their propensity to get people to see the world and themselves a different (i.e. the therapist's) way:

_Who controls the past controls the future. Who controls the present controls the past._

Perhaps learning thinking rather than having new thoughts and beliefs might be a better aim for the therapeutic encounter.

**What calls for thinking?**

Heidegger said 'science does not think'. He would not have had much regard for evidence based practice either. _Was heisst Denken?_ is a critique of what we call thinking, but it also refers to the other meaning of call—it asks what calls on us to think? Heidegger believed that:

_We are capable of doing only what we are inclined to do. And again, we truly incline toward something only when it in turn inclines toward us, toward our essential being...We learn to think by giving heed to what there is to be thought about._ (p.369)

He believed that we incline towards what is thought provoking. What is most thought provoking is what is not being thought about. This is elusive and always withdraws. Heidegger believed thinking involves holding oneself in the draft of that which withdraws.

Stories of scientific and philosophical discovery, which often come during dreams or periods of not consciously and mechanically thinking about a problem, might be more illustrative of what Heidegger calls thinking than the scientific method itself. For example, Bertrand Russell, having stopped pondering and working on a proof of the existence of God, on leaving a tobacconist, threw his tobacco in the air and exclaimed 'Great Scott, the ontological argument is sound!' (Stenfert Kroese, 2001). Ted Hughes’ poem _The Thought Fox_ (Hughes, 1982), a poem about the creative process, also lends itself to insights about the type of thinking Heidegger describes. In it Hughes describes the arrival of a poem and how it comes not through
deliberate conscious visualisation or writing, but through something more mysterious, through something he can only sense:

*Through the window I see no star*
*Something more near*
*Though deeper within darkness*
*Is entering the loneliness*

The fox/poem is somewhere both *out there* and *in him*. He senses it getting ever closer, bit by bit, moving quicker and quicker until:

…*with a sudden sharp hot stink of fox*
*It enters the dark hole of the head.***
The window is starless still; the clock ticks
*The page is printed.*

John Lennon said that many of his songs ‘just arrived’ in his head. Michael Angelo, when asked was it hard to sculpt the Venus de Milo, is purported to have said: ‘No, what was difficult was finding the piece of stone that contained the Venus’. Perhaps most creative acts have this quality, and this comes closer to what Heidegger calls thinking. My own thinking for this paper (and lecture that preceded it) was not only triggered by sitting down and pondering on the subject, reading books, having conversations with others, and the writing/re-writing process. Many of the ideas seemed to come when I was not trying hard to think about the subject, seemed to come from the outside, or from some outside place inside what might be called me, arriving sometimes with a ‘sudden sharp hot stink’, sometimes in a more whispery fashion. Holding oneself in the draft of what is thought-provoking, inclines to us and at the same time withdraws, is not easy. For me it often happens whilst walking the dogs. For Wolfensberger, who describes holding things in cubby-holes in his mind, it happens a lot in the shower (Wolfensberger, 1994).

Socrates attempted to hold himself in the draft of thought provoking things by continually asking questions, of himself and others, by never feeling he fully understood anything, and by never giving anything permanence by writing it down. Perhaps therapy can be an arena where such thinking is possible, and perhaps what people may take from therapy might not be a new set of beliefs but a capacity to think in everyday life? Perhaps supervisors and supervisees, in talking about therapeutic work, can also hold themselves in that draft. After all, Heidegger also said:

*What calls on us to think demands for itself that it be tended, cared for, husbanded in its own essential being, by thought.* (p.390)

**Defences against thinking**
Traditionally psychological theories have conceptualised psychological defences as defences against experiencing painful feelings, and therapies have been aimed at cathartic release or greater connection with that pain. Freud wrote extensively about repression, suppression and other ways of defending against certain memories and childhood fantasies. But these defences and associated problems can also be thought of as defences
against thinking (not just against certain thoughts or feeling states). In *Ode to a Nightingale*, Keats said ‘To think is to be full of sorrow’. The Depressive Position is aptly named, but Keats seems to be saying so much more than Klein. Poets noted, much earlier than mental health professionals, how people use alcohol—‘Ale man, ale’s the stuff to drink/ For fellows whom it hurts to think’ (A. E. Houseman, *A Shropshire Lad*). People with obsessions and compulsions and people in manic states have minds that are filled with thoughts but they are not thinking—‘They never taste, who always drink/ They always talk, who never think’ (Matthew Prior, *Upon this Passage in Scaligerana*).

Dementia can be thought of as a problem in thinking. A woman I sat with in a specialist unit once asked me (about her transport home): ‘What time does the bus come?’ ‘3.30’, I replied. ‘What time is it now?’ ‘3.25’, I would reply. We had this conversation over twenty times in three minutes, the only change being when I could gratefully add a minute to the time. Eventually I grasped a capacity to think, and said ‘Are you worried that the bus won’t come?’ to which she replied ‘Yes’ and started to recount lots of stories about how she had been left stranded in the past and how she feared this again. By 3.30 we were back to our original repetitive conversation, but in the meantime both of us had been able to think; we had held ourselves in the draft of that which withdraws.

R. D. Laing wrote extensively about how the people he met had lost (or never had) the capacity to think, for example:

JILL You think I am stupid
JACK I don’t think you’re stupid
JILL I must be stupid to think you think I’m
     Stupid if you don’t: or you must be lying.
     I am stupid either way:
     To think I’m stupid, if I am stupid
     To think I’m stupid, if I’m not stupid
     To think I’m stupid, if you don’t.

(Laing, 1970, p.22)

People like Jill have a certain logic and rationality to their thinking, but in Heidegger’s frame have not yet learned thinking.

**Thinking in therapy and supervision**

The education system should be the place where people learn how to think. But people of all ages, from pre-schoolers to university graduates, are being fed (and consequently learn to passively want) facts and knowledge rather than being given a chance to learn how to think. Hours and hours of homework which involves repetitive tasks, such as downloading information from the Internet that is later uncritically regurgitated, results in children being denied opportunities to learn to think outside school. I am not arguing that therapists should grab the role of helping people to learn to think from educationalists and others (as they have grabbed the role of offering guidance on how to live from priests). Going to an art gallery might be a more effective
way of enabling this process than going to a therapist. It just strikes me that this is one thing that we can try to do with the people that we meet. Therapy has been thought of as a place where people can introject a capacity to bear difficult emotional states. Why can’t it be a place where people introject a capacity to think? After all, many of us meet people in quiet rooms without prefixed agendas or a history of relating to our clients in a certain way. Mindful of power differences between ourselves and our clients, we do our best to create an environment where a person feels comfortable enough to ‘think aloud’. I agree with Paul Gordon that good therapists, like good poets, need ‘an attitude of reverie, a capacity for waiting, for allowing, for not getting in the way of what might emerge….their tasks are to give words what has been wordless’ (Gordon, 1999, p.126).

The phenomenological approach involves taking the stance of the sceptic (from skepticos, meaning thoughtful, reflective, paying attention to); the sceptic does not diagnose, seek or impart knowledge, but attends to where the shoe pinches (Gordon, 1999). In so doing both therapist and client (or supervisor and supervisee) might thus spend time trying to hold themselves in the draft of that which withdraws, that which is thought provoking, that which inclines towards our essential being, that which calls on us to think.

Heidegger thought it was difficult but possible to think and to ‘learn thinking’, but then he did spend much of his life in a quiet log cabin in the middle of the Black Forest. Whether such an approach is possible in the ‘New’ NHS is open to question. Therapists can struggle to find a quiet place to see people, let alone have time and space for thinking. Demands to reduce waiting lists lead to short-term therapy which, however we dress it up, is inevitably more like advice and instruction than help to think things through and to learn how to think. Expectations on us to attend meetings that never involve any reflection or lead to any action, having our minds filled with mindless edicts from senior managers, pressure to focus on risk but not to take risks and ever changing reorganisation all interfere with opportunities to think. Government initiatives like the National Institute of Clinical Excellence, National Service Framework and Best Value are prescriptive and pressure staff to take a textbook approach to ‘delivering care’. If staff are not encouraged or able to think or learn how to think, it will be difficult for them to help their clients with this endeavour. Somehow we need to find a little bit of that Black Forest in our work.

References
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