Sociotherapy as a Contemporary Alternative

M. Kubilay Akman

Abstract: Sociotherapy was launched as a therapeutic system in 20th Century, which has very strong theoretical and historical relations with the discipline of Sociology. Why there was a need to suggest a new way of therapy, while psychotherapy is existing? We have witnessed that there are some social dimensions of psychological problems which require a solution based on “socialization” between therapists and patients. There is a “healing power” in socialization and it has been the basis for all sorts of group therapies, including Sociotherapy as well. In this paper, we will have the opportunity to discuss the theoretical knowledge on Sociotherapy and consider its possibilities for applying contemporary socio-psychological problems in society. Knowledge society gives us a suitable platform to practice various therapeutic disciplines to find a solution for the problems created by the same society. This paper may be seen as a part of this purpose, finding viable and operative solutions to socio-psychological problems that today’s individuals experience in their daily lives.

Keywords: sociotherapy, clinical sociology, group therapy, interpersonal therapy, psychotherapy

Introduction
When we have a look to therapy-related activities it is obvious that there is a great dominancy of psychotherapy over all other types of therapeutic ways around the world. Discussing the historical, theoretical and scientific reasons of this situation is really a wide topic and not possible at all to cover in the scope of this paper. However, we should at least mention here that the understanding and conception based on “individualism” and consideration of “self” as nucleus of society inevitably bring a person-focused, individual-centered perspective of therapy concept and psychotherapy finds a
suitable basis somehow in this discursive intellectual / scientific environment. Individual psychological problems are mostly coming from social causes and limiting their cure, healing and therapy on an individual level prevents possible alternatives to create substantial solutions for them. Our tendency is not to continue through a critique of psychotherapy. However, it is better to know why sociotherapy is not so wide-spread in academies, therapeutic institutes and hospitals. This individualistic discursive perspective has blocked the improvement of sociotherapy until 21st Century, although it has a history and background for decades.

The main focus of psychotherapy is based on the person; however, for sociotherapy the object-situation is more important. Psychotherapists are concerned with intrapersonal systems, as for sociotherapists, the situation and its social conditions are much more determining. Sociotherapy consider social, cultural and environmental issues as effective parts of creating a therapeutic way (Edelson, 1970: 176). This theoretical understanding will be helpful below to understand how sociotherapy works.

Academic and scientific researches, publications and lectures on sociotherapy have existed in the USA and Europe since first half of 20th Century. There are outstanding researches we will mention below and application of sociotherapy continued uninterruptedly until today. The interest of the writer of this paper on sociotherapy began from early 2000s. This discussion on the main concepts and perspectives of sociotherapy may be considered as a modest contribution to a subfield of sociology which has a greater potential in the future than it has so far had. Although, historically it has been defined as a part of sociology and as its therapeutic application, sociotherapy seems really compatible to other fields of social sciences as well, such as anthropology, management, political sciences, social work, etc.

In the following pages of this article is presented the possibility of a “ usable” and “relevant” sociology, how to perform a therapeutic activity through a sociological perspective and the advantages of sociotherapy in terms of providing solutions to socio-psychological problems of contemporary individuals. Of course, this is a field which requires further discussions and one may consider this paper as a first step into sociotherapy, if one is not acquainted yet with this field.

**Ontology of Sociotherapy**

When sociology was “born” as an independent and “positivist” social science, it used to have a very practical approach and tools. In works of Comte, Spencer, Durkheim and other classics, the existence of sociology had the least in common with an abstract, philosophical and sophisticated discourse. Their conception of sociology was pretty practical and pragmatic. However, by the time, especially in the 20th Century sociology somehow came closer to a more philosophical level. Even, it was not easy to decide if some names were sociologists or philosophers, for instance Marcuse or Adorno. Sociotherapy can be considered as a return of sociology to its applicable technical and functional value again.
As L. Alex Swan states, “sociology must be real, relevant, useful, and applicable” (Swan, 2014: 153). Sociotherapy is one of the ways for a more useful and functional sociology. For this purpose, “we must change the way we train sociologists to produce scientist-practitioners whose role is to create the specific contextual knowledge and understanding for application and social intervention” (Swan, 2014: 327). Because, it is not easy to realize the required transformation toward a therapeutic sociology with conventional approaches at sociology departments of our academies, we need to find new strategies for training of future sociologists.

Individual is not a lonesome “person” disconnected from society for us, during sociotherapy sessions. We need to locate a client into his/her social contexts and “in sociotherapy the social personality of the person is involved. It is the public individual in interaction. The viewpoint taken by the director of the session directs his attention toward the group as structure. A general catharsis is intended” (Cornyetz, 1945: 463). This catharsis is a way of healing/treatment for socio-psychological problems of a person. During this Conference you will have the opportunity to follow a comprehensive presentation on Viktor Frankl’s logotherapy system by another colleague. According to Frankl’s “Logotherapy approach to interactional group therapy, the treatment dynamics of noticing, actualizing, and honoring are facilitated or triggered by six elements of group treatment (…): group balance, group task orientation, group cohesion, dynamic group reflection, existential group reflection, and experimental participation” (Lantz, 1998: 98). This is something more or less we expect from sociotherapy as well: a therapy process based on harmony and interaction in group.

The understanding which emphasizes that problems which have social backgrounds and causes require also social ways of solution is the main principle for the ontology of sociotherapy, flourishing in the realm of sociology. Based on this main principle, there is a lot common between sociotherapy and other varieties of group therapies in spite of all differences in technical and theoretical levels.

How Does It Work?
Socioterapy is a field in which interpersonality is a crucial requirement, although its approach to interpersonal socialities are pretty different than psychotherapy’s approach. Because of this reason, “sociotherapeutic ideology point of view emphasizes the therapeutic value of the multiplicity of interpersonal and social situational encounters occurring in the patient's treatment setting” (Armor, 1968: 247). Sociotherapists are using and manipulating social milieu and environmental components for a kind of "milieu therapy," or with another naming "group therapy." In their understanding, “mental illness is caused by social and environmental factors, usually those occurring with the patient's recent life situation” (Armor, 1968: 247). So, they use this environment and situations as powerful therapeutic tools.

The practical approach of “sociotherapy helps people to regain self-respect, rebuild trust, feel safe again, overcome unjustified self-blame, re-establish a moral equilibrium, have hope, live without terror,
forgive those who have harmed them, apologize to those whom they have wronged, and regain their rightful place in the community” (Richters, 2010: 105). With another expression, sociotherapy is a way for regaining the lost harmony together with people, with whom probably we have shared losing process of this harmony previously, via mutual mistakes.

Paul Wilkins, in his “person-centered sociotherapeutic model” provides us some important points to establish a balance between “we” and “me”. According to Wilkins: “The We implies a connectedness, an inter-relatedness that goes beyond the organism.” With this perspective, we are all belonging to “We” and harming “We” is something like you are harming yourself. Based on this consideration, “We is more than an immediate community, more than humanity, more than all living things. It is our planet in its totality” (Wilkins, 2012: 243). Regardless if you have a “person-centered” or “group-centered” sociotherapy concept, these points seem applicable anyway.

There are some essential differences between psychotherapy and sociotherapy. According to J. Stuart Witely, “psychotherapy is primarily a listening process, with understanding coming from the therapist’s interpretation of the individual’s communications and facilitating the development of a more stable emotional life. Sociotherapy is a more active process, with behavioral change coming from the experience of new and more satisfactory ways of coping with interpersonal interactions” (Whiteley, 1986: 721). As you can see, the therapeutic power of sociotherapy is more dynamic and necessitates interaction.

Clients need to change themselves and their behaviors in therapeutic process: “Sociotherapy is the relearning of social roles and interpersonal behavior through the experiencing of social interactions in a corrective environment” (Whiteley, 1986: 721). Rand L. Kannenberg calls it “Resocialization” process; as a therapeutic way which requires relearning established problematic values and behaviours; being liberated from previous learnings of social environment (family, school, friend groups, Etc.) and changing social roles with more effective and beneficial ones (Kannenberg, 2003: 90). Sociotherapists are effective participants and organizers of these resocialization activities.

L. Alex Swan has defined his strategies and system in sociotherapy as “Grounded-Encounter Therapy” (GET) and according to Swan’s theory GET “is a process of encounter, interpretation, and situation analysis which allows for the discovery of essential facts and explanations that are grounded in the social situation (context) of the clients. It provides for the devising of strategies, plans, and approaches for change, growth and development that are also grounded in the social context of the clients” (Swan, 1984: 62). GET’s diagnostic and therapeutic techniques are shaped through “the personal encounter between the clients, and between the clients and the therapists. Through the dialogues and sharing of feelings and thoughts, clients can communicate to each other their concerns and describe their situation so that an authentic Picture emerges” (Swan, 1984: 63-64). Seeing this authentic picture may be understood also as seeing a picture of final solution for socio-psychological problems.
Towards a Successful Sociotherapy

Annemiek Richters and her colleagues have stated that: “The term sociotherapy may suggest a medicalizing approach to social problems. The point of sociotherapy, however, is that its therapeutic value comes from the active input of the group members as they participate, question, advise, influence and correct each other in their social contact” (Richters, 2010: 99). This social contact is the key for a high level of success in sociotherapy.

Modern society has some problems which are old and they need to be approached with more effective techniques. Sociotherapy is a functional response for these aged problems. In confrontation of contemporary situations, “If we had enough social intelligence, we could solve the problem directly by scientific methods, but since we have not yet developed this method of attacking our social problems, we shall probably have to go through a long period of neurotic worry, anxiety, and confusion until we finally solve the problem by wasteful fumbling -passive adaptation- rather than by the rational, direct, and effective means of science-guided active adaptation” (Bain, 1944: 457). As sociologists, more than a half century we have been discussing this kind of “science-guided” techniques for curing socio-psychological problems.

Richters and co-authors at her research report suggest us some principles for success, based on discussions conducted by Rapoport and Bierenbroodspot previously. These principles for an effective sociotherapy are:

1) two-way communication at all levels - this communication is a precondition to warrant that everyone is informed about what goes on in the group and can use that information in decision making;

2) decision making at all levels - this promotes, among other things, sympathy within the group as a whole and with individual members;

3) shared leadership - this actually means democracy, the sharing of power and responsibility;

4) consensus in decision-making – when the group cannot come to an agreement, no decision is forced, but the discussion continues until consensus is reached;

5) social learning by social interaction here-and-now - this learning will also benefit group participants in their social interaction in the wider society” (Richters, 2008: 101).

Of course, these principles may have some variations in different cases. However, they can be taken still as a foundation to keep the sociotherapy practice and applications focused on the main line. The methodological points analyzed earlier by Gerald W. Lawlor may be very effective in this main line.
According to Lawlor these are: “1) Situations and roles assigned by the director; 2) Continuing scenes; 3) Free association; 4) Life problems” (Lawlor, 1946: 275). Sociotherapists should interpret these points in their particular case and practices; afterward, they need to find their own customized methods if necessary. Flexibility is crucial for a successful sociotherapy application.

Sociotherapy is like a strategy to take the potential which already exist in societies and upgrade it with some arrangements for particular needs. It is called as ‘community-based’ sociotherapy by Richters. The power of local communities is functionally adopted into sociotherapy process in this approach (Richters, 2010: 97). Actually, people in societies and local communities are already performing a kind of “unconscious” sociotherapy to themselves and to each other. What sociotherapists recommend may be considered as a systemized version of this existing therapeutic tendency for a more effective solution to socio-psychological problems challenging at any level.

**Conclusion**

Contemporary societies have a contradictory position which provides problems and possible solutions at the same time. Many economic, social, cultural and socio-psychological problems have their origins and deep roots in societal factors. Problems are produced and spread when and where people are socializing. The main conceptual epistemology of sociotherapy is based on this reality: the source of therapeutic knowledge and possible applications are the same with the origins of these problems. Therefore, socialization or “resocialization” appears as a productive therapeutic power source for all sociotherapists, despite their theoretical differences. Sociotherapists take an active role, redesign and direct social environments for therapeutic purposes. The early literature on sociotherapy is coming from last century. However, although it started as an academic sub-discipline of sociology comparatively long time ago, it has not substantially spread as a therapeutic system widely yet. The reasons of this situation are beyond the scope of this paper. As we have tried to discuss in the previous pages sociotherapy is a very functional and practical approach to modern socio-psychological problems which may be seen even as a return to 19th Century early sociology’s practical and applicable beginning ideals. We have reasons to be optimistic or pessimistic regarding the future of sociotherapy. However, it is always better to be realistic. Sociotherapy has a potential to grow and spread as a useful therapeutic system, however it depends on conditions and preferences of today’s social scientists. If there are more social scientists who are interested in sociotherapy then this sub-discipline of sociology may attain the position it deserves though it may be a while to get there.

**REFERENCES**


Bain, Read (1944), “Man is the Measure…”, *Sociometry*, Vol. 7, No. 4


Richters, Annemiek; Rutayisire, Théoneste & Dekker, Cora (2010), “Care as a turning point in sociotherapy: Remaking the moral world in post-genocide Rwanda”, *Medische Antropologie*, 22 (1)

Swan, L. Alex (1984), *The Practice of Clinical Sociology &Sociotherapy*, Schenkman Publishing, Massachusetts, USA

Swan, L. Alex (2014), *Grounded-Encounter Therapy: Perspectives, Characteristics, and Applications*, Trafford Publishing, Kentucky, USA
