1.4

A HIERARCHY OF WANTS:

Towards an integrative framework for counselling, psychotherapy and social change

Mick Cooper

ABSTRACT

The aim of this monograph is to develop an integrated framework for understanding, and facilitating, psychological and social wellbeing. It is based on the assumption that our *wants* are a core element of our being; and that the pursuit, and attainment, of these is a defining characteristic of psychological health. It is suggested that our wants can be conceptualised as existing in a hierarchy, in which higher order wants are attained through lower order wants; and that psychological difficulties emerge when our means of attaining our highest order wants are either in conflict with each other (*horizontal incoherence*), or are ineffective within our present context (*vertical incoherence*). The monograph argues that this framework can be used to conceptualise, and draw together, a wide range of psychotherapeutic theories and practices; with the therapist construed as a facilitator of more *synergetic*, and more *effective*, means of want-attainment. In addition, the monograph argues that the extent to which people can progress towards, and attain, their wants may be very dependent on the resources available in their particular life-context, such that improvements in psychological wellbeing may require social and political change. To understand how this might happen, it is argued that the present framework can be transposed to the interpersonal plane, with increased synergies in the ways that people strive to attain their wants leading to a more rewarding and fulfilling socio-political context.

KEYWORDS

Goals, social change, psychotherapy, counselling, motivation, socialist humanism.

CONTENT

INTRODUCTION

Aims

The purpose of this monograph is to develop a framework for conceptualising psychological development, distress and practice that:

1. Can integrate understandings, evidence and methods from across the psychological therapies, as well as from the wider psychological field;
2. Acknowledges the role that socio-political factors can have on psychological and social development and distress;
3. Can account for the emergence of psychological distress without pathologising those who experience it: i.e., maintaining a view of distressed individuals as agentic beings who act in intelligible and meaningful ways.
4. Develops a unified theory of psycho-social-political change.

Background

The principles in this paper are strongly informed by a background in existentialism (Cooper, 2003a); and by recent developments in social psychological theory and research on goals, personal projects, and motivation (e.g., Little, Salmela-Aro, & Phillips, 2007; Locke & Latham, 2002; Sheldon & Kasser, 1998). They are also strongly influenced by, and are attempts to progress, the ideas of the socialist humanists and the Frankfurt School (e.g., Fromm, 1961, 1965; Marx, 1988). (This point may be particularly important to emphasise at the outset, given that the emphasis on *wants* and *attainment* may be taken to imply a neoconservative agenda.) An initial attempt to sketch out some of these ideas was published in 'Socialist humanism: A progressive politics for the twenty-first century' (Cooper, 2006); though they emerged from an earlier critique of Rogerian developmental theory (Cooper, 2000). More recently, these ideas have been developed through an exploration of intra-personal dialogue (Cooper, 2003b, 2004; Cooper & Hermans, 2007); through work with John McLeod on *goals* as an orientating concept for pluralistic therapy (Cooper & McLeod, 2007, 2011); and through collaboration with a range of colleagues on the nature and process of dialogue (Cooper, Chak, Cornish, & Gillespie, in press; Cooper & Ikemi, in press; Cooper & Spinelli, 2012).

Contribution

The concept of a hierarchy of goals is not a new one (e.g., Mansell, 2005; Powers, 1973; Sartre, 1958), and has been proposed as a unifying basis for the psychological therapies in the work of Mansell (2005) and his colleagues. However, my hope is that this monograph will make a number of original contributions to the field:

1. Exploring how socio-political and other contextual factors might be integrated into a hierarchical models of wants;
2. Developing the concept of *wants* as a basic psychological category;
3. Exploring the parallels between intra- and inter-personal models of distress and wellbeing
4. Developing an understanding of cognitive-behavioural, and psychodynamic, theory and practice in terms of the intelligibility of client activity.

Pluralism and unification

To some extent, the project of developing an integrative understanding of development, distress and change sits uneasily with the pluralistic principles of acknowledging multiple pathways of being (Cooper & McLeod, 2007, 2011, in press). In Levinasian terms, it is a move towards the *finite* and defined rather than the *infinite* and open (Levinas, 1969); and in this sense carries with it the danger of rigidity, authoritarian imposition, and de-personalisation. The present framework, however, is offered at only the highest conceptual level, such that it is intended to be inclusive, and not exclusive, of all other understandings. Moreover, it is intended as a loose sketch, one that is a work in progress, and ideally one that can exist in a positive dialectical with more idiographic theories of development and change: a framework that can be deconstructed and re-envisioned, with the hope of developing ever more refined, humanised and personalised understandings of human functioning.

The present project can also be considered consistent with the pluralistic aim of building bridges across different schools of therapy (Cooper & McLeod, 2007, 2011, in press). What is clear from recent reviews of the evidence (e.g., Castonguay & Beutler, 2006b; Cooper, 2008), for instance, is that a very diverse range of psychotherapeutic methods can be of benefit to clients, even those that might appear diametrically opposed. Based on the evidence, for instance, Castonguay and Beutler conclude that therapists should 'be able to skilfully use "nondirective" interventions' (2006a, p. 361), but they also state that therapists should be able to apply such directive interventions as 'controlling emotions' (2006a, p. 365). As with a pluralistic approach, therefore, the present model looks at how it might be possible to move from a position of *either/or* to one of *both/and*, but one which retains structure and coherence and does not fall into *syncretism*: the haphazard, uncritical and unsystematic combination of theories and practices (Hollanders, 2003).

MOTIVATIONAL CONCEPTS IN PSYCHOTHERAPY AND PSYCHOLOGY

While recent years have seen a growing emphasis on cognitive processes within the psychological and psychotherapeutic fields (e.g., Clark et al., 2009; National

Collaborating Centre for Mental Health, 2010), motivational and dynamic constructs – such as *needs* and *drives* – remain a mainstay for much psychotherapeutic theorizing and practice. Moreover, as will be discussed below, such constructs are also emerging in the fields of personality and social psychology as a central focus for theory and research.

Needs

In 2010, Flanagan, in the *Journal of Psychotherapy Integration*, put forward *needs* as an integrating concept that can bridge a broad range of therapeutic models and practices. This concept, as Flanagan (2010) notes has 'no clear theoretical home', yet is one of the few constructs that is endorsed across a broad range of psychotherapeutic orientations: from humanistic psychology (e.g., Maslow, 1943) to schema therapy (Young, Klosko, & Weishaar, 2003); and to both traditional (Wolitzky, 2003) and more contemporary relational (Curtis & Hirsch, 2003) psychodynamic approaches.

The concept of needs – along with such related constructs as *drives* or *instincts* – has the capacity to function relatively effectively as a trans-orientation construct because the assumption that human beings have some basic, inherent requirements is relatively uncontroversial. Debates have raged as to which needs or drives are most fundamental – whether, for instance, for meaning (Frankl, 1984), actualization (Rogers, 1959), or attachment (Bowlby, 1969) – but the basic idea that human beings need certain psychological nutriments just as they need certain physiological ones, and that psychological distress arises when these needs are not fulfilled, is accepted across a broad sweep of orientations.

From an existential perspective, however, the concept of needs has been criticised for invoking an overly-deterministic and mechanistic image of human being, in which people are construed as being 'moved' or 'pushed' by forces that lie 'behind' their conscious, in-the-world engagement (e.g., Boss, 1963; Cohn, 1997). In this respect, it has been seen as ignoring the agentic, wilful role that human beings take in constructing their world (Boss, 1979). Moreover, for existential Daseinsanalysts such as Boss (1963), an understanding of human being in terms of needs and drives does not match the phenomenological reality of human lived-existence where, he argues, we experience ourselves as choosing towards possibilities – not impelled by forces and instincts.

The concept of needs is also less consistent with the dominant cognitive perspective of today which, like the existential approach, tends to understand human behaviour as 'goal-directed, purposive, active, and adaptive' (Reinecke & Freeman, 2003, p. 226). In addition, cognitive therapy primarily locates the source of psychological functioning and dysfunction in human thoughts processes, rather than in underlying instinctual forces or drives (e.g., Beck, John, Shaw, & Emery, 1979).

There is an additional reason, rarely discussed in the literature, why the concept of needs is somewhat problematic as a unifying construct for counselling and psychotherapy: its ambiguity. This is because any statement of a need also requires a

purpose clause: an indication of what it is a need *for*. In other words, hypotheses such as 'human beings need meaning' or 'human beings need relatedness' are, in themselves, incomplete, as what is missing is a specification of what will be forgone if the person does not attain this. Generally, it can be taken that the purpose clause is '…for psychological wellbeing,' but this is an ambiguous concept that can be defined in many ways. In this respect, it might be argued that needs are not a particularly firm foundation on which to develop psychological and psychotherapeutic theory.

Goals

In developing psychological constructs that can bridge a wide range of orientations, the concept of *goals* may overcome some of the limitations that needs face. Defined as 'internal representations of desired states' (Austin & Vancouver, 1996, p. 338), goals share the same motivational and dynamic qualities as needs, but are more inclusive of existential and cognitive perspectives, with their emphasis on the agentic, purpose-oriented nature of human being. Indeed, the construct of goals has been of particular interests to those with a more humanistic social science agenda, as they are seen as being distinctively human, differentiating us from machines (Little et al., 2007, p. 38). Powers (1973, p. xii) describes this as a concept of the person as *autonomous*, not *automaton*; with William James stating 'The pursuance of future ends and the choice of means for their attainment are the mark and criterion of the presence of mentality in a phenomenon' (in Austin & Vancouver, 1996, p. 338). Moreover, in contrast to needs, goals do not require a purpose clause: they simply exist, in and of themselves.

In recent years, the concept of goals has 'begun to see fruition' (Austin & Vancouver, 1996, p. 338) in both the fields of psychology (e.g., Locke & Latham, 2002) and psychotherapy (e.g., Holtforth & Grawe, 2002; Michalak & Holtforth, 2006). Grouzet et al. (2005, p. 800) write that 'Since the 1980s, psychological research on goals has experienced a real renaissance' and this has been in a number of areas: the types of goals that human beings have (e.g., Grouzet et al., 2005; Holtforth & Grawe, 2002), their impact on task performance (e.g., Locke & Latham, 2002), their relationship to psychological wellbeing and distress (e.g., Brunstein, 1993; Elliot & Church, 2002) and their role in psychotherapy (e.g., Cooper & McLeod, 2011; Michalak & Holtforth, 2006). In addition, there has been a wealth of research into closely related concepts, such as *personal projects* (Little et al., 2007), *personal goals* (Brunstein, 1993) and *personal strivings* (Emmons, 1986).

Karoly (1999, p. 264) argues that the concept of goals can serve as a unifying 'metric' for psychology and psychotherapy, 'capable of integrating a variety of psychological constructs that have been created over the years to address individual differences, the nature of normal and abnormal adjustment, and the nature and meaning of change'. However, while this construct may be more embracing of existential and cognitive perspectives; its orientation towards internal, cognitive representations makes it less

inclusive of the more instinctual, unconscious, affective and immediate desires that are central to the psychodynamic and psychoanalytic therapies (e.g., Magnavita, 2008). While it might be quite appropriate to describe, for instance, my desire to 'become fitter' as a goal, it would be less appropriate to use this term for some unconscious desire I might have to be closer to men. Similarly, while Austin and Vancouver (1996), like Little (2007), suggest that the terms *goals* and *personal projects* can cover the full temporal range – from the most distal life-long goals to the most immediate, proximal aims – it would not seem entirely appropriate to say that 'my goal right now is to finish typing this sentence.' I *want* to finish it, but goal seems to imply something more distal, planned, further ahead in the future.

Wants

In this respect, a psychological term that may be more embracing of the full range of dynamic constructs is that of *wants* (Cooper, 2006). These can be defined as *desires for some state of affairs*, and in this respect extend from the most distal personal projects (for instance, 'I want to be an airplane pilot') to the most immediate, short-term cravings (for instance, 'I want a cup of coffee'). Unlike goals, the term wants also covers unconscious, affective desires (for instance, 'I really wanted my mum to be upset, although I didn't recognise it at the time') as well as more consciously planned objectives ('I want to have chicken for dinner').

The term *wants* has been rarely used in the psychological and psychotherapeutic literature but, as the definition suggests, can be considered synonymous with *desires* – a term widely adopted within the psychodynamic field (Curtis & Hirsch, 2003). In everyday speech, however, the latter may be more associated with sexual and relational wants, and with unsatisfied longings (Oxford University Press, 1995), such that the former may be a more neutral and generic term. Wants, like goals and projects, stand on their own – they do not need a purpose clause and, as an *organizing unit* for psychological and psychotherapeutic thinking, have the advantage of being a term that is 'meaningful to professionals and lay-people alike' (Karoly, 1999, p. 265).

There is also evidence to suggest that wants are one of the most basic psychological phenomena. From birth, babies express wants through such behaviour as crying; and by 10 to 12 months show *communicative intent*: actively seeking help from others in order to satisfy their desires (Boyle, 2011, personal communication). By 12 months, as one of their first speech acts, infants will then use language to extend this process: for instance, pointing to a biscuit and saying 'mmm' to indicate that they would like to eat it (Boyle, 2011, personal communication).

It is interesting to speculate on why the term 'wants', so familiar in everyday language, has been so under-utilised within the psychological field. Perhaps, as with Heidegger's (1962) analysis of existence, it is so close to our everyday experiencing that it is easy to overlook – like the air around us. Perhaps, too, its closeness

to experiencing and its rawness, basicness – perhaps even vulgarity – means that it has not been considered sufficiently sophisticated for psychological theorising.

In addition, it might be hypothesised that the term wants has relatively negative connotations in our culture – perhaps in all cultures – with particular associations to selfishness and greed. An example of this is the familiar childhood saying 'I want never gets,' which suggests that the more we desire something – or the more we *express* desire for something – the less likely we are to receive it. Indeed, although wants may be central to our phenomenological experiencing, in everyday conversation it might be considered highly inappropriate, rude, or childish to directly express this (i.e., 'I *want* x'), without some kind of tempering or apology ('I'm really sorry about this, but *would it be ok to have* x.'). A good example of this is Andy Pipkin in the Andy and Lou sketches on BBC TV's *Little Britain* (played by Matt Lucas), whose catchphrase 'I want that one' or statements such as 'I wanna go to Helsinki' are clearly inappropriate to normal adult communication. One explanation for this negative connotation of wants is that they might be understood as *demands*: that if someone is saying they have a desire for something, they are implicitly stating that they are expecting or requiring it. As will be discussed later in this paper, however, wants and demands are two quite separate things; and the capacity to express wants without making demands may be an important element of effective psychological communication.

In adopting the term wants, it is important to emphasise that this is being used to cover our highest level, most fundamental desires (for instance, for relatedness or meaning) as well as our more immediate, conscious, and verbally-expressible wishes. In fact, as will be discussed later on, these two levels of wants may be in conflict; and this is where much of the humour of Andy Pipkin in *Little Britain* comes from: that what he so adamantly insists he wants at one moment is not (as we know and he finds out) how he ends up really wanting things to be. Indeed, in this monograph, it will be argued that our lower level, most immediate wants are generally means of attaining wants that are higher up in a wants hierarchy. In this respect, when the monograph talks about getting what we want, it is not, primarily, referring to the satiation of such immediate desires as chocolate and bungee jumping, but to a holistic satisfaction of our highest level wishes: to feel, for instance, competent, free, and closely related to those around us.

Wants and world

Wants – as Little (2007), Freund (2007), and Salmela-Aro & Little (2007, p. 201) have argued in relation to personal projects – are not isolated intrapsychic entities, but are fundamentally embedded within a socio-cultural context. Ontologically, as with the phenomenological concepts of intentionality (Husserl, 1960), wants are directional: they reach out – are orientated towards – something that is beyond themselves. In other words, we do not just want (cf., phenomenology's *noetic act*), we want *something*

(cf., phenomenology's *noema*) – though this may be something internal/psychological (for instance, happiness), as well as something in-the-world (for instance, a lover). An important implication of this, as will be discussed later, is that whether or not we progress towards our wants is not only determined by our wants, per se, but also by the nature of the socio-psycho-biological context that we inhabit.

Furthermore, the very wanting, itself, can be understood to be infused with a social dimension. For Heidegger (1962), as human beings, we *fall* into a world of ready-made meanings and purposes, such that we take up the wants of our social environment – often unaware that we are doing so. A young girl, for instance, wants to have straight blond hair like Barbie, but this is not a want that has emerged from some biological or psychological necessity, but through an internalisation of social norms and expectations. Indeed, for Heidegger, even our most foundational wants (for instance, for happiness or for social wellbeing) are ultimately only social constructions, with no ultimate foundation or grounding (Dreyfus, 1997). In this respect, in contrast to the more biologistic concept of *needs*, our wants have the propensity to be complex bio-psycho-social phenomenon; such that a psychological model situated around wants puts our socio-cultural environment into the very heart of human action and experiencing.

Wants and ethics

As John McLeod and I have argued (Cooper & McLeod, 2011), the rationale for orienting a theoretical framework around an individual's goals or wants is not just scientific and psychological, but also ethical. More specifically, it can be argued that *an ethical relation to another is one in which we are willing to acknowledge, respect, and respond to their wants*. As above, this is using 'wants' in the broadest sense: not just to refer to someone's immediately expressed desires, but to the wants of their whole being in relation to their world. Indeed, in this respect, responding to someone's *holistic* wants-as-a-whole (including, for instance, to lead a meaningful life and to support their children) may mean sometimes going against their more immediately expressed wants (for instance, to help them commit suicide). Nevertheless, in contrast to a more needs-based or utilitarian ethic (e.g., Layard, 2006), the position outlined here suggests that an ethical position ultimately requires us to respect and respond to the other's *particular* wants, rather than some universalised conception of what that other *needs* (for instance, happiness or attachment). This is similar to the pluralistic position developed by the philosopher Berlin (1958), who argues that an ethical standpoint requires us to forego paternalism, and to acknowledge the Other as a human being with the capacity, and right, to self-determination of what is ultimately meaningful for them. This position also means that our understanding and definition of wellbeing should be in terms of wants: *as the capacity to progress towards, and attain, the things that we want in life.*

The corollary of this position is to suggest that, in an ethical and fair society, people have an equivalent ability to progress towards their wants. Moreover, a 'good' society is one in which the potentiality for people to achieve their wants is maximised. How this might happen, and the issue of conflicts between people's wants, will be discussed later. It should be noted, however, that this position again contrasts with a more utilitarian position which suggests that society should be structured so as to maximise the distribution of happiness (e.g., Layard, 2006). From the position outlined in this paper, this may certainly be the fundamental want of many people – perhaps the *default* want – and thereby a very important element of a well-functioning society. A wants-orientated ethic, however, leaves open the possibility that for some people, happiness may not be the ultimate goal, and that an ethical society needs to also maximise the possibility for these others to attain their wants: whether faith, authenticity, or relatedness.

A HIERARCHY OF WANTS

A basic assumption amongst many theorists and researchers in the goals-related fields – and one that can be simply extended to the concept of wants – is that goals, or personal projects, can be conceptualized as existing in a hierarchical structure: from the highest order life wants to the most immediate desires (e.g., Austin & Vancouver, 1996; Little & Gee, 2007). Much of this is derived from Powers' (1973) *control theory* and its *hierarchy of purposes*, which has formed the basis for a number of attempts to develop integrative models of clinical practice (e.g., Goldstein, 1990; Mansell, 2005).
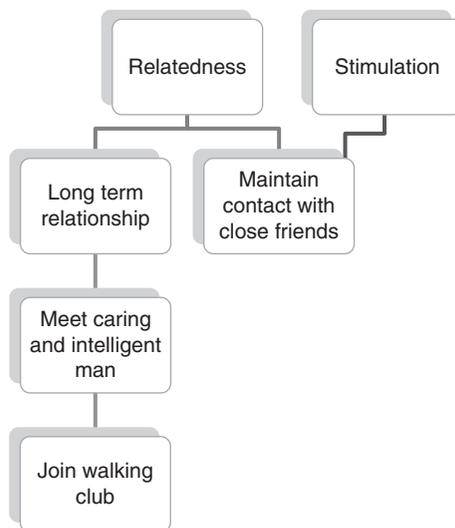

Figure 1   A hierarchy of wants

Here, higher order wants can be conceptualized as forming the *reference value* for lower order wants; with lower order wants forming the means by which higher order wants may be obtained. As indicated in Figure 1, for instance, an individual may have a highest order want to experience relatedness (Flannagan, 2010; Ryan & Deci, 2000), and one thing they may strive to do to experience this is to establish a long-term relationship. To achieve that, they may try and meet intelligent and caring men and, with that aim in mind, they might plan to join a walking club.

Multiplicity of wants

Consistent with the empirical research, this model assumes that people may have multiple wants at any one time (Riediger & Freund, 2004). For instance, right now I want to finish this sentence, and I want to get home to go to the gym, and I also want to close my window as I am getting cold. A basic principle of this model is also *equifinality* (Austin & Vancouver, 1996): the same want can be achieved through a multiplicity of sub-wants. Hence, for instance, a person may strive to attain relatedness through a long-term relationship, but they may also try and achieve it through maintaining contact with their close friends (see Figure 1). A second basic principle is *heterarchy* (Austin & Vancouver, 1996, p. 341): a want at one level may be a means of trying to attain multiple wants at higher levels. For instance, the desire to spend time with friends may also be a means of achieving stimulation and excitement.

Relationship between wants

Horizontal coherence

A critical element of this framework, which will be examined in more detail when we look at psychological wellbeing and distress, is that wants, *across* different vertical pathways, may have different kinds of relationships. In the terms of Sheldon and Kasser (1995), this is the question of whether or not they are *horizontally coherent*. Riediger (2007) suggests three types of goal relationships across pathways, which is largely consistent with other theorising in this field (e.g., Little, 1983; Riediger, 2007).

First, goals may have a relationship that is facilitative: that is, 'the pursuit of one goal simultaneously increases the likelihood of reaching another goal' (Wiese & Salmela-Aro, 2008, p. 490). This has also been termed *positive spillover* (Wiese & Salmela-Aro, 2008); and, in the language of the wider social sciences field, can also be termed a *synergetic* (Corning, 1998), *non-zero-sum* (Wright, 2000, p. 5), *win-win* or *cooperative* (Axelrod, 1984) relationship. For instance, if the close friends of the individual in Figure 1 are in a walking club, then by joining such a club, she can facilitate the attainment of contact with them, as well as hoping to meet caring and intelligent men.

Alternatively, the relationship between wants may be *interfering*, *competing*, *win-lose* or what is widely termed *goal conflict* (Austin & Vancouver, 1996; Michalak &

Holtforth, 2006; Wiese & Salmela-Aro, 2008). Here, 'a goal that a person wishes to accomplish interferes with the attainment of at least one other goal that the individual simultaneously wishes to accomplish' (Michalak, Heidenreich, & Hoyer, 2004, p. 84). For the purposes of this monograph, I will use the term *dysergetic* to refer to such relationships – the antonym of a synergetic relationship in which the whole is *less* than the sum of the parts. For instance, it may be that, in trying to establish a long-term relationship, the woman actually ends up spending less time with her close friends. Note, research suggests that the relationship between two goals is not *either* facilitative *or* interfering: in some instances, it may be both (Riediger & Freund, 2004).

Finally, there may be an *independent* relationship between the wants: that is, the pursuit of one want has no effect on the attainment of an other.

Vertical coherence

Although the literature has tended to focus on coherence and conflict *across* vertical streams in a goals' hierarchy, Sheldon and Kasser (1995) also highlight the importance of *vertical coherence*: whether or not the sub-goals actually help someone progress towards the goals that they are aiming for. For instance, a person may join a walking club, but if all the other members turn out to be women, it will not help them to progress towards the ends they are aiming for. Here, rather than talking about synergy and dysergy, we can refer to *effectiveness* and *ineffectiveness*: are the means able to attain the ends.

Coherence and context

Goal hierarchical theories, such as Powers' (1973) hierarchy of purposes and the TOTE (test-operate-test-exit) sequence that it is orientated around, have tended to focus on intra-personal dynamics: the way in which a persons' goals and wants are 'internally' configured. However, as argued earlier, wants are not isolated psychological entities, but fundamentally embedded within a social, psychological and biological context. Hence, the configuration of a person's wants, and whether or not they are coherent or effective, will be fundamentally related to the 'target' of the wants' orientation. If we take the example of the woman in Figure 1, for instance, who both wants to meet a caring and intelligent man, and also wants to maintain close contact with her friends, whether or not these wants are synergetic or dysergetic will depend entirely on the nature of the environment in which those wants are striven for. If, for example, her friends are also looking to meet caring and intelligent men, then her pursuit of this objective could bring her into closer contact with her friends. However, if they are not, or if they disapprove of her meeting such a partner, then the wants may become dysergetic. Equally, as suggested above, whether or not joining a walking club will lead her to meet caring and intelligent men is entirely dependent on whether or not

there are such men in the club. If it turns out that all the members are women, or that there are men in the club but they are all nasty and brutish, then her method will be entirely ineffective.

Here, the term *context* is being used to refer to all those processes and mechanism that lie outside of the person's immediate agentic control. This covers social, cultural, relational and political factors; but also biological, genetic and psychological processes that a person cannot immediately act on to change. For instance, I might have a biological make-up which means that I am particularly prone to experiencing anxiety when I perceive something as frightening. This is not something I can choose to immediately alter but, like other contextual factors, may determine whether or not I achieve my wants. For instance, as a boy, I might want to be 'normal' like everyone else to be accepted, and consequently aim to do 'typical' boyish things: like getting into fights and running around in abandoned buildings. But the given of my biological context means that, when I do these things, I experience tremendous anxiety, which runs against my want to not experience anxiety. Hence, a dysergetic relationship is established, but it is wholly dependent on a particular biological given.

This distinction between *agency* and *context* is, in some respects, an extension of an existential view of human being (e.g., Cooper, 2003a; Frankl, 1998), in which the human *will*, *spirit* or *freedom* is contrasted against the givens or limitations of existence. Frankl, for instance, argues that there is always some part of the human being that can stand apart from its social, psychological and biological context, and act in an *unconditioned* way. It is also consistent with the widely-cited Serenity Prayer of Reinhold Niebuhr, which asks for the wisdom to know that the difference between what can be changed and what cannot. Importantly, though, this distinction cannot be understood as an absolute one; and nor is it unidirectional, with context determining what actions might be taken. For instance, through social and political action, we can change the context around us; just as psychological action – for instance, *exposure therapy* (Marks, 1978) – can change such psychological contexts as the link between stimulus and response.

Highest order wants

Although this framework posits the existence of highest order wants – or what have been termed *terminal values* (Austin & Vancouver, 1996; Little & Gee, 2007), *core projects* (Little, 2007), or *original projects* (Sartre, 1958) – it does not specify what these are. This is an important feature of the present model, as the question of our highest order wants is highly contested, and not one that is likely to be answerable without considerable further research. Nor does it specify whether there is just one highest order want: for instance, actualization (Rogers, 1959) or

happiness (Layard, 2006); or whether multiple highest order wants might exist: for instance relatedness, autonomy and competence (Ryan & Deci, 2000). Indeed, the model allows for the possibility that there may be no definitive set of highest order wants: that the socially constructed nature of human being means that we can never claim one want, or one set of wants, as universally 'true'. It also allows for the existential possibility that, ultimately, there are *no* highest order wants (Camus, 1955; Heidegger, 1962; Sartre, 1958): that the very meaning of our being is without foundation.

WANTS AND AFFECT

In recent years, *telic* theories of wellbeing have been relatively widespread: hypothesising that our wellbeing and happiness is closely related to the extent to which we possess and progress towards meaningful goals (Austin & Vancouver, 1996, p. 354; Emmons, 1986). As Karoly (1999, p. 277) puts it 'Goals and emotions are intimates.' More specifically, from the empirical evidence, it is possible to posit that wellbeing is related to wants in five ways: the extent to which wants are achieved, the extent to which someone has progressed towards their wants, the velocity with which they are approaching their wants, the perceived attainability of wants, and the extent to which they are oriented towards wants, per se.

Attainment of wants

Research indicates that people feel good when they achieve their goals (Sheldon & Elliot, 1999; Wiese, 2007). Emmons and Diener (1986), for instance, found a significant positive correlation of .46 between the attainment of goals and positive affect. This appears to be particularly the case where goals are more challenging (Wiese, 2007).

Progress towards wants

Closely related to this, research also indicates that *progress* towards goals (i.e., the subjective perception of moving towards them, as opposed to their actual attainment, Wiese, 2007) also leads to enhance feelings of wellbeing and positive affect (Brunstein, 1993; Wiese, 2007). In the most comprehensive meta-analysis to date, Koestner, Lekes, Powers and Chicone (2002, p. 233) found that 'Participants reported significantly more positive affect and less negative affect over time when they had made greater goal progress,' with a combined mean effect size (*d+*) of 0.61 across nine studies. Significantly for the present model, studies also show that wellbeing is most likely to be enhanced when the goals that a person is striving for are *self-concordant*: i.e., directly related to their highest level, 'organismic strivings' (Sheldon & Kasser, 1998).

Velocity towards wants

An alternative perspective on the relationship between goals and affect is proposed by Carver and Scheier (1990), who suggest that it is the *rate* of progress towards goals, and not the progress towards goals, per se, that will determine affect. More specifically, they suggest that people will experience positive affect when they are moving towards their goals 'at a rate higher than standard' (1990), negative affect when the rate is lower than standard, and no affect when they are progressing at a standard rate. However, to date, evidence in support of this hypothesis is 'sparse' (Wiese, 2007, p. 311).

Perceived attainability of wants

Research also indicates that positive affect is associated with feeling that our wants are attainable: that we will be successful in achieving them (Emmons, 1986); and that we have control, support and opportunities to work towards their accomplishment (Brunstein, 1993). However, Emmon (1986) also found a significant quadratic relationship between expectations and wellbeing, with individuals with both high and low expectancies for success having higher levels of negative affect than those with intermediate expectancies.

Orientation to wants

Finally, as the existential psychotherapist Frankl (1984, 1986) has argued, even the awareness that one has goals, and the belief they are meaningful and important, has been found to be associated with wellbeing (Emmons, 1986; Little et al., 2007). Indeed, Emmons and Diener (1986, p. 315) found that 'positive affect is just as strongly related to having important goals as it is to the attainment of these goals'. However, Brunstein (1993) found that participants' commitment to their goals was only significantly related to subjective wellbeing when those goals were perceived as being attainable. By contrast, for unattainable goals, higher commitment actually led to reduced feelings of wellbeing.

Wants and affect

Although research has tended to focus on the relationship between wants and affect at a relatively global level, if 'affect serves as feedback indicating that either progress towards goals is being made or that important goals have been attained' (Emmons & Diener, 1986, p. 311) then it may be possible to specify more clearly what emotions arise in relation to particular want-related processes. For instance, as Ryan and Deci (2008) state, anger or sadness could be associated with having our wants or needs thwarted. In this respect, for each of the want-related processes discussed above, it is possible to hypothesise particular emotions that they might be associated with (Table 1).

Table 1 Hypothesised emotions in the presence and absence of want-related processes

	Presence	Absence
Attainment of wants	Satisfaction, accomplishment, fulfilment (Emmons, 1986); experiencing of whatever desired state was hoped for (e.g., happiness or pleasure).	Dissatisfaction, failure, sadness, loss, frustration, envy, anger.
Progress/velocity towards wants	Accomplishment, excitement, self-belief, expectation, control.	Frustration, failure, despair, disillusionment, lack of self-belief, anger.
Perceived attainability of wants	Hope, optimism, control, order, excitement, expectation.	Hopelessness, futility.
Orientation to wants	Meaning, purpose, sense of direction, orientation, order.	Meaninglessness, disorientation, chaos, directionlessness, despair.

The experiencing of positive affect as we progress towards, and attain our wants, makes good evolutionary sense. Assuming that one of the basic human wants is to survive (Maslow, 1943), a species that experiences positive affect when pursuing such wants will be more motivated to continue with its pursuance. Similarly, negative emotions when wants are not attained or pursued may serve the function of re-orientating the person to their wants.

As something of an existential footnote, however, our evolutionary design may not have 'taken into account' the fact that, at some point in our evolution, we would develop the reflective capacity to ask the question, 'What is the meaning of our existence, What is the point of surviving?' – and find no ultimate answer to this question. Hence, paradoxically, our evolutionary tendency to feel pleasure when we are orientated to, and approximate, our wants, may have the unintended consequence of making disorientation and despair the 'natural human condition.' Like Vladimir and Estrangon in Beckett's *Waiting for Godot*, we strive for meaning and purpose in a world that, ultimately, has none to give us.

Another interesting point to note here is that, for some (perhaps many) people, their wants may be about experiencing particular emotions, such that if their success or failure to achieve particular wants evokes emotions, a complex, *second order* dynamic is set up. Suppose, for instance, that one of a person's highest order desires is to experience happiness. If she then attains something that she wants, she will not only experience satisfaction for attaining that want, but also for attaining the happiness that she experienced for attaining it. Concomitantly, however, if she fails at something or feels that she is not coming closer to her wants, she not only experiences a sense of failure, but also a sense of failure for feeling that she has failed. Our goals for our emotional states, therefore, may have important implications for our psychological wellbeing, and will be discussed later on when considering implications for therapeutic work.

Discussion

Although there is good evidence that people's relationship to their wants are closely related to emotions, it is not clear which of the five processes, above, are most determinant of positive affect, nor the complexities of how they interact. For instance, although it seems likely that an orientation towards goals will lead to greater progress towards goals, which should lead towards greater attainment of goals; the reverse may not necessarily be the case. That is, if someone attains a goal, it could leave them feeling uncertain as to what to do next, and that they are no longer making good progress towards any future goals.

Based on the preceding discussion, progressing towards, and attaining, our wants, can be conceptualised as relating to wellbeing in two ways. First, there is a primary relationship: moving towards our wants, by definition, means that we are moving towards the things that we want in life, and this was given earlier as the defining quality of wellbeing. Second, however, as we have seen in this section, the process of moving towards and attaining our wants generates a number of positive affects that are generally associated with wellbeing. Indeed, as suggested above, these may be the very thing that a person wants. It might be tempting, therefore, to suggest that progressing towards our goals is a defining feature of wellbeing because of the positive affect it generates. However, for the purposes of this monograph, it is the former, *ethical* standpoint that takes precedence: moving towards our wants is good because it is what people *want*, which may or may not include the experiencing of positive affect.

THE FAILURE TO PROGRESS TOWARDS WANTS

Based on this analysis, psychological difficulties can be understood as a state in which people do not feel that they are progressing towards, or attaining, the things that they want. Here, as suggested in Table 1, we may experience such feelings as dissatisfaction, frustration and despair, and a sense of not being in control or having direction in our lives. By definition, not getting what we want in life also means that we do not experience those things that we most strongly desire.

Why is it, then, that people may not progress towards, or attain, their wants? From a teleological standpoint, the problem is not that the person does not have wants: ontologically, wants are hypothesized to exist at the core of human being. Moreover, it cannot simply be that they are not active in pursuing their wants: at the heart of this paper is an assumption that human beings are inherently agentic and purposive in their actions. Another potential explanation might be that the person's social environment *stops* them progressing towards their wants, but this would also run against the agentic anthropology at the heart of this paper: that human beings are not simply determined by their environment to think, feel or act in particular ways. We are left

with a conundrum then, of why an agentic, want-orientated human being is not achieving the things that they want.

Horizontal incoherence

A first explanation for this, consistent with the present framework, is in terms of horizontal incoherence, or dysergetic inter-want relationships. An example of this is the woman in Figure 1, who may be acting against her desire to maintain close contact with her friends because she is focused on pursuing a long-term relationship. Consequently, she might experience the disappointment and frustration of not progressing towards more intimate friendships, and also feelings of isolation and loneliness for not getting the friendships that she wants. In addition, the very existence of an internal conflict might evoke feelings of inner turmoil, confusion and disintegration in a person; and may leave them feeling exhausted and drained of resources (Karoly, 1999).

This, relatively simple, explanation of how psychological distress may emerge is very powerful, because it can account for the emergence of psychological difficulties in a way that maintains a view of the human being as meaning-orientated and intelligible. The person *is* agentically and purposefully striving for things in their life, but in doing so, they undermine other things that they want in their life and may therefore experience distress.

The hypothesis that conflict between wants is a source, if not *the* source, of psychological distress is pervasive across both the goals' literature (e.g., Mansell, 2005; Michalak et al., 2004; Riediger, 2007, p. 126) and in the wider psychotherapeutic field (e.g., Cooper, 2003b; Ferrucci, 1982; Greenberg, Rice, & Elliott, 1993; Vargiu, 1974). Indeed, Powers (1973, p. 265) writes that 'Since the time of Freud and no doubt for much longer than that, inner conflicts have been recognized as a major cause of psychological difficulties.' This hypothesis is supported by empirical research which shows that goal conflict is associated with lower levels of psychological functioning, affect, mobilization and life satisfaction (Austin & Vancouver, 1996; Cox & Klinger, 2002; Emmons, 1986; Emmons & King, 1988; Karoly, 1999; Riediger, 2007; Riediger & Freund, 2004). Summarising the research, Michalak and colleagues (2004, p. 90) write: 'most studies reveal a relation between intrapsychic conflicts and people's psychopathological status.'

Conversely, it is widely hypothesised in the goals' literature that 'harmony and integrated functioning among one's goals are essential for subjective well-being' (Emmons, 1986, p. 1065); and this is also a pervasive assumptions across the psychotherapy field (e.g. Berne, 1961; Cooper & Cruthers, 1999; Elliott & Greenberg, 1997; Hermans, 2001; Stone & Winkelman, 1989; Vargiu, 1974). Interestingly, however, the evidence here is less compelling, with a number of studies finding no significant relationship between inter-want facilitation and wellbeing (Riediger, 2007; Wiese &

Salmela-Aro, 2008); though other studies have (Sheldon & Kasser, 1995). What does seem clear, however, is that the more synergetic a person's goals, the more they tend to tend 'to engage in goal directed actions' (Riediger & Freund, 2004, p. 1522).

The origins of dysergetic inter-want relationships

Although it has been widely hypothesised, and demonstrated, that dysgertic relationships between wants is associated with psychological distress, there is less exploration of why this goal conflict might emerge in the first place.

The inherent nature of human wants

One means of beginning to answer this question is to consider whether human wants are, originally, synergetic of dysergetic. That is, when we come into the world, do our wants tend to point in the same direction; or are they pulling us in opposite directions from the start? From a humanistic standpoint (e.g., Rogers, 1959), there is a tendency to assume that, at birth, human wants form part of a coherent, integrated whole; only later to become turned against each other through the internalisation of social values. For approaches such as psychoanalysis and CBT, however, there is no such assumption; indeed, from a Freudian standpoint, the most basic human instincts – for life and for death, for instance – are diametrically opposed (Marcuse, 1966). Along similar lines, for the existential therapist van Deurzen (1998), one of the givens of existences is that we will always be pulled between the poles of different dilemmas – for instance, between a desire for relatedness and a desire for independence, or between a desire for work and a desire for recreation – for which there is no possibility of resolution. This suggests, then, that conflict between wants is, and always will be, an inherent part of human existence.

Arbitrary control

But why is it that some people, *in particular*, have more dysergetic inter-want relationships than others? One hypothesis, developed by Mansell (2005), is that some people may be particularly prone to *arbitrary control* (Powers, 1973, p. 271), meaning that they attempt 'to make behaviour conform to one set of goals without regard to other goals.' This can be likened to *tunnel vision* or *selective attention*. That is, the person gets immersed in pursuing one particular want (for instance, to lose weight), and neglects other wants that are also important to them (for instance, to be healthy). This account is quite similar to those developed in the self-plurality field (e.g., Rowan & Cooper, 1999), where it is hypothesised that people can get immersed in particular modes of being (Cooper, 1999), such that they lose sight of other wants, needs or ways of being. In fact, research suggests that people, in general, tend to be quite good at

activating higher order goals when they are tempted by incompatible lower order goals (Heckhausen, Wrosch, & Schulz, 2010); but this may not be true for all individuals, and it may also be that some individuals are less able to stand back from their immediate wants and act in ways that are responsive to their full wants hierarchy. Another way of framing this, particularly from the viewpoint of theories that hold wants are inherently antagonistic, is that some people are more able to mediate and coordinate between their wants than others: have better *ego control*. This might also be framed in terms of *meta-wants*: that some people have a very strong want to attain whatever they want at a particular time, while other people have a stronger desire to stand back from their immediate wants and take into account a wider range of wishes and aspirations.

These intrapsychic accounts do not, in fact, explain *why* some individuals' wants hierarchy may be more dysergetic than others, but they do explain why it may be more *destructive* in some individuals than others. They also point towards the importance for psychological wellbeing of being able to move flexibly between different wants.

Conflict between sub-goals

If it is assumed that the highest order wants are – or, at least, have the potential to be – non-conflicting, then one explanation for why dysergetic goal relationship might emerge is because the *means* (i.e., sub-goal) that a person develops to attain one higher order goal may come into conflict with another higher order goal; or because two sub-goals may come into conflict. For instance, I want to be liked by people around me, and I also want to express myself creatively. These two, highest order wants are not necessarily in conflict, but if I try and be liked by suppressing any artistic flair I have (I don't want my friends to think that I am a wimp), then this does become dysergetic with my want to be creative. And if, for me, the most satisfying way of expressing my creative flair is by dressing up in women's clothing, then this may become highly dysergetic with the things that I am trying to do to be liked.

Contextual limitations

But why would we choose to develop means of trying to attain our wants that are dysergetic with other wants, particularly if we assume that human beings are intelligible organisms who tend to act in the most meaningful and rewarding ways? As evident in the example above, and as discussed earlier, key to understanding this is an appreciation of the role of contextual factors. In the example above, for instance, the desire to be liked and the desire to express my creative flair only become dysergetic because I inhabit a context in which people will think I am a wimp if I am creative, or if I dress in women's clothing. If I inhabited an environment in which people were entirely

valuing of these things, then no dysergy would be necessary. From this standpoint, then, conflict arises between a person's wants because of limited resources in their context (Michalak et al., 2004; Riediger & Freund, 2004). This is an individual-level equivalent to social psychology's realistic conflict theory, which holds that 'limited resources lead to conflict among groups' (Aronson, Wilson, & Akert, 1999, p. 486). It can be described as follows:

> [O]ur wants are often in tension with each other…because we inhabit an environment in which the achievement of one want frequently necessitates the subjugation of another. A person in a context of limited financial resources, for example, might only be able to achieve their desire for financial security by suppressing their desire for excitement and stimulation: for instance, by taking a job in a fast food restaurant. Alternatively, in that environment, the person may be able to actualise their desire for stimulation by forming a musical group with their friends, but then they might have to compromise their desire for financial security. (Cooper, 2006, p. 88)

This perspective cuts through the debate about whether a person's wants are inherently synergetic or dysergetic, by suggesting that it will be dependent, to a great extent, on the person's context. More specifically, it might be proposed that, in themselves, most higher level wants are not inherently dysergetic to other higher level wants and, in an *ideal* environment, it might be possible to satisfy most wants together (i.e., a relationship between the wants that is independent, if not actively synergetic). But in a context of limited resources, the means to progress towards one want will inevitably undercut progress towards other wants.

Here, the term 'resources' is used in the widest possible sense: not just economic and social goods, but anything in the person's context which they might need to fulfil their wants, such as love, respect, and time. For instance, *conditional positive regard* (Rogers, 1959) might be understood as one example of a limited contextual resource, in which the love and approval of others is not unconditional, but dependent on the person experiencing the world in a particular way. Similarly, it might be argued that the fact that I get tired at 10.30 at night is a limited bio-psychological contextual resource; and one that evokes a dysergic relationship between particular wants. When I get home, I want to spend time with my children, and I also want to relax in front of the television; and in an ideal world I might be able to achieve both wants. But the fact that my energy is limited means that the attainment of one want means the sacrificing of another. I can spend time with my children, but then I will be too tired to watch television; I can watch television, but by that point I am too tired and irritable to spend time with them; and also by then they are likely to be asleep – another limit of the contextual resources available.

Consistent with *rational choice theory*, the assumption here is that, in a situation of limited resources, the person will tend to act in a way to maximise 'benefits' and minimise 'losses'. They act in the most intelligible and meaningful way at the time, but

in doing so they act counter to other wants, and this creates conflict in the person's internal system. The person does not get (all) of what they want, and they experience such feelings as dissatisfaction, frustration, loss and confusion. This is a result of contextual limitations but, crucially, this is not a deterministic or causal relationship, in which a passive human being is *made* to feel a certain way by their environment. Rather, the model remains of an agentic, purposeful human being who experiences dissatisfaction *through* their encounter with a resource-limited world.

A question this raises, though, is if the person is always acting in the most rational way, always maximising their wants to the best of their abilities within their context, then how can this ever be improved upon? What, in other words, is the point of a therapeutic intervention if the person is already always doing the best that they can? One answer to this question might be that, although we are always acting in ways that maximise benefit, based on our *knowledge and understanding of contextual factors*, our knowledge and understanding is never complete, such that there is always the possibility of finding more synergetic ways of acting. For instance, I choose towards watching television and neglecting my children because the desire to relax feels most important to pursue; but perhaps there is a more synergetic option. For instance, unbeknownst to me, it might turn out that one of my children really enjoy watching the same television programmes that I do, such that I could both be relaxing *and* spending some close time with one of my children. It may also be that I can learn about means of achieving wants that are more synergetic to attaining other wants. For instance, I might discover (I haven't!) that playing cards with my children is as relaxing as watching television. In this respect, *therapy becomes a process in which we develop a greater knowledge and understanding of how we might find synergies within our context, such that we can progress towards more of our wants, more of the time*.

Note, epistemologically, this theory that our wants come up against some 'external' reality takes the present framework beyond a wholly phenomenological or constructivist standpoint. It suggests that there is some kind of real world out there, and one that may be more or less consistent with our phenomenological construction of it. At the same time, however, this is not a move towards a wholly realist epistemology, for how we perceive and construct the world is still considered critical to how we act towards it. Furthermore, the social context that we come up against, to a large extent, is the phenomenological reality of others, such that we are referring to the reality of an inter-experiential (Cooper, 2005) field.

This hypothesis, that non-optimal psychological functioning is linked to a limited understanding of the potential synergies in our context, may be particularly relevant to understanding how people's pasts may affect their present functioning, and how therapy might help someone move forward in their lives. Take the example of a client who was brought up in a neglectful environment, and learnt to protect themselves from hurt by withdrawing from close, intimate relationships. Here, by being withdrawn, the person experiences the pain of isolation and loneliness, but

such withdrawal was the intelligible thing to do within their context: the desire to not feel rejection and abandonment was that much stronger. As the person grows up, however, their context changes, to the point where, as an adult, they no longer inhabit an interpersonal environment in which they will be rejected if they seek out intimacy with others; but the problem is, they continue to assume that they will. Here, then, the person may be able to learn that the adult world is actually different: for instance that their therapist, and by extension others, will not reject them if they seek out intimacy. And this means that their desire to avoid rejection and their desire for intimacy could actually exist in synergetic relationship – if they can recognise, and truly believe, that this possibility is available in their context.

But why doesn't the person, as an intelligible and meaning-orientated being, quickly pick up that their environment has changed, and revise their behaviours towards it? Why do people remain with old patterns of behaviour that are not achieving the desired effect? Again, here, we can conceptualise this fairly easy in terms of want or meta-wants: that, actually, there is also a desire to maintain some kind of cognitive consistency whereby the world is not constantly changing, but is a fairly recognisable and manageable place. Hence, what we might suggest is that a dysergy actually exists between two meta-wants: to maintain this relatively constant view of the world, and to respond to the world as it actually is.

Note, though, that whether or not synergies are available is still wholly dependent on how their social context is configured. If the person, for instance, is in a relationship with someone who has a very *avoidant* style of relating (Ainsworth, Blehar, Waters, & Wall, 1978), it may be that they continue to experience rejection if they try and actualise their desire for intimacy. In this respect, helping people to establish greater wellbeing cannot just be about supporting people to find the synergies in their environment, *but also about creating an environment in which more synergies are possible*.

Take the example of a young man who wants to feel good about himself, wants to be free of physical harm, and wants to have sex with other men. As a boy, he is bullied and teased for having these homosexual desires, and learns that he must suppress this want in order to actualise his desire for physical safety, and in order to try and feel good about who he is. Through therapy, this young man may begin to learn that, in fact, he can both feel good about himself *and* want to have sex with other men: the two desires are not inherently dysergetic. However, if he continues to live within a homophobic environment, his desire to have sex with other men may continue to be dysergic with his desire to be physically safe. Hence, social change, as well as psychological change, is required to allow this man to experience the optimal level of synergy.

Vertical incoherence

Accounts of why people do not get what they want based on inter-want conflict are relatively consistent with psychodynamic and humanistic theorising; though, as will

be argued later, they can also account for cognitive-behavioural theories of change. However, a learning-based cognitive-behavioural perspective offers an additional means of understanding why people do not get what they want: because the things that they are trying to do to get it, within their particular context, are not very *effective*. Whereas the issue of synergy and dysergy, therefore, focuses on *horizontal coherence* across goal systems, we can also ask the question of *vertical coherence* (Sheldon & Kasser, 1995) within any one branch of the want hierarchy. Here, as Sheldon and Kennon (1998, p. 1319) write, 'an action system is optimally configured when purposes at higher levels of the system are readily served by behavioral competencies at lower levels of the system'.

As with the hypothesis that horizontal coherence can sometimes be lacking, the hypothesis that people are sometimes vertically incoherent does not contradict the proposition that people are agentic beings who act towards their world in meaningful and intelligible ways. It simply states that even though we may have very good reasons for trying to do something in a particular way, our knowledge and understanding of contextual factors might be such that what we do does not bring about the desired results. For instance, if I want to attract women in a nightclub, I might genuinely believe that the best thing is can do is to approach them with some corny chat up line: for instance, 'The only thing your eyes haven't told me is your name.' And, indeed, for one or two women, this might be effective in achieving my higher order want; but it is quite possible that, in terms of the reality of my social context, such an approach will have the opposite effect.

The origins of ineffective strategies

Why might people develop ineffective strategies to get what they want? Perhaps the most straightforward explanation is simply that they have not yet learnt the particular effects that an action will have within their context; or they have learnt it wrongly – perhaps through trying to figure it out for themselves or through the input of others. For instance, a person may attempt to overcome feelings of fear and panic by trying to rid their head of panicky thoughts whenever they start to emerge. For the person – indeed, for many of us – this is an entirely intelligible behaviour: we feel something we do not like and we try and get rid of it. However, the psychological contingencies of this situation mean that, the more the person tries to rid themselves of these thoughts, the more afraid they become of them, and the more panicky they actually get. Hence, if they are taught a more effective strategy for dealing with the panic – for instance, that they should remind themselves that the panicky feelings will eventually subside – then they may be more enabled to achieve the state of relaxation that they desire.

In relation to past experiences, it may also be that we have learnt, or acquired, particularly means of achieving wants that were effective within a previous context, but

within the present context are not so helpful (Mansell, 2005). So, for example, when I was ten, it may have been very effective to use corny chat up lines to attract girls, but as an adult man in an adult context, it becomes counterproductive, and I have yet to learn that this is the case. Alternatively, I might have learnt as a child that the best way to get my need for love and attention met was by being very compliant and submissive and, as an adult, I continue with this strategy, even though my context might be such that people are actually less loving when I do so. Hence, therapy can help me learn about myself and the effect that my actions have, such that I may be able to find more effective ways of progressing towards my wants within my particular context.

Clearly, such an account of the aetiology of psychological distress begins to overlap strongly with the account developed in the section, above, on dysergic inter-want relationships. It suggests that as children, we develop ways of progressing towards our wants – both horizontal and vertical configurations – that maximise our ability to attain them. However, as contexts change, so our strategies can become outdated, such that therapy may be able to help us find more synergetic and effective means of progressing towards our wants. In many respects, as will be argued below, this is essentially a statement of how the insight-based therapies, like the psychodynamic and humanistic approaches, conceptualise the therapeutic process. However, critically, the framework also acknowledges that there may be much that we can learn about how to attain our wants that is not about unlearning past strategies, but is about acquiring new and better means for doing what we do: for instance, learning breathing exercises as a means of not experiencing panic. In this respect, the framework puts insight-based and learning-based/cognitive-behavioural understandings side-by-side: as complementary means of understanding how people can progress towards wellbeing and attaining their desires.

Awareness

In terms of why people do not proceed effectively towards getting what they want, a key issue may also be awareness of their higher order wants. If someone is not really conscious of what they want most fundamentally from life, it may be difficult for them to find ways of moving towards this – particularly when they are strongly wanting something else.

Unrealistic expectations

Vertical incoherence may also be less due to the lower order want and more to do with the higher order want, in that whatever strategy the person uses will be ineffective within their circumstances. That is, people may have overly-high expectations, and there is good evidence to suggest that this is associated with lower levels of wellbeing (Emmons, 1986). There is also evidence that perfectionist traits – again, associated

with overly-high expectations – can lead to particular psychological difficulties, such as poorer outcomes in counselling and psychotherapy (Cooper, 2008). Hence, one aim of therapy may be to help people develop more realistic expectations of what, within their personal context, it is 'reasonable' to want.

Contextual factors

As with horizontal coherence, the extent to which a person's strategies for getting what they want are effective is not only dependent on the strategies, but also on the context in which they are expressed. For instance, if all the women that I am trying to pick up find my corny chat up lines adorable, my strategy may still be very effective at getting me what I want. Alternatively, take the example of a young girl who wants to be an astronaut, and goes through a training to achieve this goal. Whether or not this is successful will be dependent on a range of contextual factors, such as whether she has the motor skills to complete the training. Another contextual factor, however, might be whether or not her there is sexism in her training environment, such that whatever she were to do, she would never to be able to succeed in her career. Here, the woman's goals are unattainable, but this is not due to some psychological or biological given, but due to inequities in her social context. This raises the point, again, that issues of psychological wellbeing are intimately tied in with issues of social justice: in a sense, for every issue that a client is grappling with, we are implicitly making a judgement about whether it is reasonable or unreasonable for them to be expecting to be able to achieve their want. If it is reasonable, and if social inequities are preventing them from moving towards their wants, then the implication of this is that what we need to help people change is not their internal configurations, but their social and political context.

IMPLICATIONS FOR THERAPEUTIC PRACTICE

While 'A fully systematized, goal-centered conception of psychotherapy is not yet available' (Karoly, 1999, p. 285), there have been recent attempts to translate such goal-orientated hierarchies into a specific system of therapy (Karoly, 1999; Mansell, 2005). One example of this is the *methods of levels* developed by Carey and colleagues, in which clients are provided with a supportive and encouraging space, and *how* and *why* questions, to explore up and down their wants' hierarchy (Mansell, 2005, pp. 164–166). However if, as in the present framework, therapy is understood as a process of helping clients to develop more synergetic and effective means of progressing towards their wants – *re-configuring* (Michalak et al., 2004) their ways of doing things – it can be proposed that all therapies, implicitly if not explicitly, are striving to work in this way. In the following sections, therefore, I wish to show how each of the major therapeutic theories and practices can be embraced within this understand, and how it can thereby serve as an integrating framework for the psychological therapies field.

Person-centred, humanistic and existential approaches

Model of the organism

The basic assumption underlying the humanistic approaches, as discussed above, is that human being come into the world as a fully integrated organism, with an innate ability to discern what they like and do not like (the *organismic valuing tendency*), but come to be estranged and alienated from themselves due to social forces, particularly conditional positive regard (Rogers, 1959). Such a model may be understood to suggest that psychological distress is *caused* by society but, as I have argued above and previously (Cooper, 2000), such an interpretation runs against the person-centred emphasis on human beings as agentic, purpose-orientated organisms who are not simply passive recipients of environmental conditioning (Bohart & Tallman, 1999). Alternatively, it might be taken to indicate that there is some 'non-actualising' part of the individual that internalises social values but this, then, becomes inconsistent with the concept of the actualising tendency as a unified force, and raises the question of why a person would want to act(ualise) in non-actualising ways. 'A more logically consistent way of understanding Rogers' fundamental development conflict, then',

> might be to construe it as a conflict between the self-actualising tendency [i.e., the desire to experience the world in a way that others approve of] and *non-self-actualising sub-systems* of the actualising tendency: such as the tendency to actualise one's creative potential, or the tendency to actualise one's potential to nurture. In other words, Rogers' developmental model can be understood as proposing that the organism inhabits a world in which to actualise one potentiality – its 'self' – it must inhibit the actualisation of other potentialities. (Cooper, 2000)

Unconditional positive regard

In the terminology of this paper, the basic person-centred account of psychological distress can thus be understood in terms of dysergies: that the person's desire for approval pulls in an opposite direction from their desire to actualise other potentialities, because they have inhabited an environment of limited resources: in which the actualisation of one of these desires necessitated the subjugation of the other. And here, in terms of a theory of practice, the person-centred emphasis is on providing a client with *unconditional positive regard* (Bozarth, 1998), in which they can come to accept and integrate the whole of their being. In the present terminology, this can be understood as the therapist providing the client with an environment in which they can learn that their desire to be liked and other desires are not, necessarily, dysergetic. Rather, they can do all the things that they want to do *and*, in the present context, still be liked and valued by someone. Through this experience, the client can come to

be 'more themselves' – i.e., develop ways of being that are more synergetic and more attuned to the full spectrum of their wants.

The self-healing capacity

Within this context, it is also hypothesised that the person's actualising tendency will be manifested as a natural *self-healing capacity* (Bohart & Tallman, 1999): that the person will *self-right* and move towards a resolution of their issues for themselves. This is supported by the empirical research, which shows that minimal or placebo interventions can be remarkably effective in helping people achieve greater levels of wellbeing (Bohart & Tallman, 1999; Cooper, 2008). With respect to the present framework, one means of conceptualising this is to hypothesise that, given space to reflect on themselves, their wants and their context, people will naturally tend to move towards more synergetic and effective means of striving to attain their wants, rather than less. Indeed, it might be argued that this *is* the actualising tendency: the inherent capacity of people to find more synergetic and effective ways of doing things given time space without external demands.

Accessing deeper wants

Within the person-centred and humanistic approaches, there is also a strong emphasis on helping clients 'get back in touch with' deeper organismic needs (Sheldon & Elliot, 1999, p. 483). This can be understood as our highest level wants; and that through connecting with, and developing our awareness of, these wants, we can develop ways of acting that are more orientated towards (i.e., vertically coherent with) them. This may be through an emotion-orientated dialogue, through which the person comes to understand how they really feel about things, and what they really want in life. It may also be through such strategies as two chair work (Greenberg et al., 1993; Perls, Hefferline, & Goodman, 1951) – or other methods for facilitating dialogue amongst different 'parts' of the person (Cooper & Cruthers, 1999) – in which the person not only comes to recognise the underlying wants of these different parts, but also begins a dialogue across them to find more synergetic ways of functioning.

For instance, a therapist notices that a client is constantly rubbishing themselves, and invites them to move into a second chair to speak to themselves from that position. They do so – 'You're useless, you can't do anything, you're a waste of space' – and when they go back into the *underdog* chair (Perls et al., 1951), they notice how weak and pathetic they feel. They cry, apologise and plead for the topdog to leave them alone. Then they begin to notice that, actually, they also feel pretty angry, and begin to express this too: 'Why don't you leave me alone, you're always having a go at me.' Back in the topdog chair they say: 'But I really want you to be good,

I really want you to do your best, sometimes you just give up.' 'Yeah,' they say from the underdog position, 'but the amount of pressure you put on me makes it impossible to achieve anything, I need some time to think.' Slowly, the two different parts start to listen to each other, and to think about ways in which both sets of wants might be met. 'How about you just remind me if you think I am not getting on with things,' says the underdog, 'but stop all this yelling.' 'Ok,' says the topdog, 'but I need you to listen to what I say and not just go into feeling sorry for yourself.' From a humanistic standpoint (e.g., Vargiu, 1974), a central assumption in this process is that the underlying wants of both parts are valid, however destructive the lower level sub-wants might appear to be. While each of the parts, therefore, may initially want to eradicate, control or ignore the other (cf. arbitrary control), the emphasis is on getting to the roots of each of the wants, and finding creative ways in which more of the clients' most fundamental desires can be met more of the time.

Existential assumptions

As has been discussed throughout this paper, the model of human being proposed is also highly consistent with a number of the existential assumptions that tend to underpin the humanistic approaches:

- People act in intelligible ways: are orientated towards purposes and meanings;
- We exist as beings-in-the-world;
- We have choices, and are not wholly determined by either internal forces (e.g., drives, needs) or external ones (e.g., socialisation);
- The world is not one of unlimited resources, but we face very real restrictions;
- There may be no, ultimate, purpose to our existences.

Psychodynamic approaches

Intrapsychic conflict

Across the psychodynamic therapies, the concept of intrapsychic conflict plays a key role in understanding the aetiology of psychological distress (Curtis & Hirsch, 2003; Wolitzky, 2003), and particularly conflict between different wishes and desires. In the classical Freudian model, for instance, the *id*'s desire for unadulterated, hedonistic gratification comes up against the *superego*'s desire for moral and socially sanctioned behaviour, with the *ego* that part of the person that is attempting to mediate between these two powerful forces (Magnavita, 2008). Here, conflict can give rise to such feelings as low self-esteem, shame and guilt, as the person feels that they are failing to live up to their ego ideal (Yakeley, 2012). Moreover, because the suppressed desires do not go away (*the return of the repressed*), 'unacceptable' aggressive and sexual thoughts and feelings may break through to the surface, expressed in indirect and damaging ways;

with psychosis the result if the id impulses entirely dominate. Here, psychological health is associated with greater ego control: the ability to maintain a more synergetic balance between our different desires, and in relation to the particular reality that we inhabit (Yakeley, 2012).

Repression

A central concept within psychodynamic thinking is that of repression: 'The process by which an unacceptable impulse or idea is rendered unconscious' (Rycroft, 1995, p. 157). The ego, threatened with unacceptable wishes and impulses, experiences anxiety, and uses a variety of *defence mechanisms* to push the unacceptable desires out of consciousness. In terms of the present framework, this can be understood to mean that, at times, we will experience wants that we do not want to experience (a *meta-want*), and will consequently try to rid ourselves of that latter want in a range of different ways. Again, the wants come into conflict, though in this instance it is not between two *primary* wants, but between one want and one meta-want.

Insight: from unconscious to conscious wants

As in the psychodynamic model, goals' related theorists and practitioners have argued that some wants may lie outside of consciousness (Freund, 2007, p. 254; Mansell, 2005, p. 159). A key element of psychodynamic work, therefore, is helping clients to develop insight: to become more aware of their most fundamental desires, wishes and feelings. This may be facilitated in a variety of ways: as with the person-centred approach, simply providing clients space to talk, and with an emphasis on saying whatever comes into their mind (*free association*), clients may begin to identify basic wants and desires. The therapist may also offer interpretations to help the client understand what the meaning of the behaviour or symptom – that is, what it is trying to achieve – might be. As discussed earlier, within the present model, this emphasis on helping clients to develop insight into their feelings and behaviours – including their underlying wants and desires – makes good sense. If a client is not aware of a want, it may be more difficult for them to progress towards it, and particularly in relation to the reality of their context.

Working models

The idea of *internal working models* of self, other and relationships is central to many of the more contemporary, attachment and relational-based psychodynamic therapies (e.g., Curtis & Hirsch, 2003). This Bowlbyian concept can be defined as 'expectations about the self, significant others, and the relationship between the two' (Pietromonaco & Barrett, 2000, p. 156) which can then guide the way that we plan towards the

future. This is wholly consistent with the perspective of the present paper, which suggests that we may develop certain expectations and assumptions about our context, which lead us to develop certain strategies for achieving our most basic wants. As with psychodynamic theory, internal working models may be based on the reality of early experiences, but if we carry them through into adulthood, and if they are no longer consistent with the context that we inhabit, they can be very counterproductive.

Within contemporary psychodynamic practice, as with the person-centred approach, there is also an emphasis on providing clients with *corrective relational experiences*, in which they can begin to recognise the possibility of synergies between their different wants.

Transferential interpretations

This then leads to the process of *interpreting the transference*, in which the therapist helps the client to see how they are projecting onto their therapist ideas, feelings and wishes that derive from previous figures in their life (Rycroft, 1995). For instance, the client perceives the therapist's formal manner as an indication of disinterest and lack of care; whereas for the therapist it is an expression of professionalism and a profound care for their client's wellbeing. Here, by developing an understanding of how their perception of their context does not match its reality, the client can identify more effective and synergetic ways of progressing towards their wants. If, for instance, the client experiences the therapist's formality as a sign of disinterest, and if they have a basic want to feel cared for by others, then they may express anger at the therapist or criticise and belittle them. This, however, is an unnecessary – and potentially counterproductive – activity, as the therapist does already feel care for them. The client, then, has the potential to develop a more accurate understanding of how their world works and responds to them and, in doing so, find better ways of attaining their wants.

Cognitive-behavioural approaches

The agentic individual

As with the present framework, the social cognitive theories underlying contemporary cognitive-behavioural therapy view the human being as a motivated and purposive agent (Bandura, 2001; Bandura & Locke, 2003; Reinecke & Freeman, 2003), who intentionally strives to make things happen through their actions (Bandura, 2001).

Cognitive 'errors'

Within the cognitive approach (Beck et al., 1979), *systematic errors in thinking*, or *cognitive distortions* (Reinecke & Freeman, 2003), are seen as a key aetiological and maintenance factor in psychological distress, for instance: overgeneralisations,

black-and-white thinking and selective abstraction. This may seem to directly contradict the present assumption that human beings act in meaningful and intelligible ways. However, even though such ways of thinking may be in error and unhelpful, they can still be understood as the person's best efforts to think through their problems, and come up with meaningful understandings and solutions. As learners, for instance, it would be only natural to generalise from specific examples. If my father is abusive to me, why would I not also assume that other men would also abuse me? Here, the development of 'mature' thinking – multidimensional, relativistic and flexible (Beck et al., 1979) – can be seen as a skill and a technique that we can learn (for instance, through cognitive therapy), but not necessarily one that we should be expected to have.

Moreover, with respect to the present model, we can also understand 'erroneous' thinking as a purposive activity, in that it is intended to attain particular wants. For instance, a view of the world as black-and-white may be much more reassuring and comforting than one in which we acknowledge the multidimensional and ambiguous nature of reality. If people, for instance, are either good or bad, I know where I stand, do not have to think too hard, can much more easily determine how to respond in a situation. Indeed, in an environment of infinite resources, it might be possible that we could think in very black-and-white ways *and* still thrive, because we could still achieve all the other things we wanted to. But in a multidimensional reality, where things are not black-and-white, seeing things in this way means that we undermine our ability to achieve other things (i.e., a dysergetic relationship exists between these wants). So, for instance, I come to see my ex-partner as entirely evil because she hurt me when our relationship ended. This may be a comforting view, but I also then lose out on, for instance, the love and affection that I might gain by continuing a friendship with her. In this respect, cognitive therapy might help me to see that the short-term gain I get from seeing things in a black-and-white way has so many costs that it is really not worth it: it helps me re-configure how I go about getting what I want so that I can get more of what I want more of the time.

A second example, I have health anxiety, and tend to make things worse by searching on the internet to try and find out more about my symptoms. From an overly-simplistic CBT perspective, it might be suggested that this behaviour is simply erroneous, maladaptive or obsessive. And it is; but in terms of the present framework, it is also easy to see the intelligibility behind the behaviour: I am looking for something that will reassure me that things are not as bad as I fear. The problem is, however, that while I am desperately pursuing this want, I am neglecting many other wants I have, such as getting on with my work or being attentive to my partner and children. Moreover, this behaviour is based on a mis-understanding of the contextual reality: that, in fact, I am more likely to find things on the internet that make me more worried about my symptoms rather than less. Talking this through with a CBT therapist, having it pointed out to me, or trying an *experiment* (see below) to see whether

my assumption really fits the reality, can help me to revisit the way that I am trying to get what I want, and perhaps see that there are, actually, other more effective mechanisms of getting the reassurance I am seeking (for instance, going to see my GP).

Testing perception against reality

A central component of most cognitive and behavioural therapies is also the invitation to test out assumptions against reality through *behavioural experiments* (e.g., Beck et al., 1979). For instance, I might assume that people feel bored when they talk to me, but a CBT therapist might invite me to check this out with people, to see if this is really the case. As with the present model, therefore, there is an emphasis on looking at whether our current understanding of our context is an accurate one; and thus whether we are going about trying to attain our wants in the most effective way. For instance, I might be trying to preserve my sense of self-worth by avoiding people, on the basis that they find me boring, but this has the unintended consequence that I then feel isolated and alone. If I discover, however, that they do not, and actually they enjoy my company, then it becomes possible for me to both preserve a sense of self-worth *and* feel connected to others through interpersonal contact: by learning more about the actual nature of my context, new synergetic possibilities open up.

Skills' and knowledge training

Much of the strength of cognitive and behavioural therapies lies in their training and education of clients in particular skills and understandings. In terms of the present model, this is about helping clients to learn about contextual relationships and processes, such that they can do things that help them to get more of what they want in more effective ways. A good example of this, discussed earlier, is *exposure techniques*, which teach anxious clients that they are often better off overcoming their anxiety by staying with the feeling, rather than trying to avoid it (Marks, 1978). Another example is breathing exercises and applied muscle relaxation (Öst, 1988), in which the client is taught something that they can do which can help them progress towards a desired state or relaxation.

Assertiveness training

One CBT skills training that is particularly consistent with the present model is assertion or assertiveness training (Sanchez, Lewinsohn, & Larson, 1980). A key component of this is being clear and direct with others about what we do want, as well as what we do not want. In terms of progressing towards what we want within our social context, being able to articulate and clearly state this may be of considerable value; and being

able to hear and accept the wants of others may also be very important in terms of being able to build interpersonal synergetic relationships (see below).

Discussion

The aim of this section has been to suggest that, across the major therapeutic orientations, there are considerably commonalities in how psychological difficulties are understood, and the methods that are utilised to address these problems. Drawing these together through the present framework, we can suggest that the following processes may be of value to clients:

1. Reflection, exploration and dialogue to help clients become more aware of their highest order wants;
2. Reflection, exploration and dialogue to help clients find, within their present circumstances, more synergetic ways of meeting more of their wants more of the time;
3. Reflection, exploration, dialogue and skills training to help clients find, within their present circumstances, more effective ways of progressing towards their highest order wants;
4. Reflection, exploration, dialogue and input from the therapist that helps clients identify when they might fall in to arbitrary control, and lose sight of the 'bigger picture' of their wants-as-a-whole;
5. Encouraging clients to develop more flexible and fluid means of attaining their wants (Mansell, 2005);
6. Input from the therapist to help clients develop a greater understanding of their interpersonal, social, biological and psychological context;
7. Reflection, exploration and dialogue to help clients establish more realistic wants;
8. The provision of a *non-conditional* therapeutic relationship that, as far as possible, allows the client to express and progress towards all of their wants;
9. Exploration, dialogue and input to help clients consider whether they may need to change their socio-political, psychological or biological circumstances;
10. *Meta-therapeutic dialogue* (Cooper & McLeod, in press) to orientate the goals and methods of the therapy towards the client's higher level life goals.

Although it is suggested that, in essence, each of the psychological therapies strive to help clients find more synergetic and effective means of progressing towards their wants, this is not to suggest that they are synonymous. In particular, it can be argued that the therapies differ substantially in their views on how people most effectively learn. In the person-centred approaches, for instance, there is a strong emphasis on the individual learning for themselves; whereas CBT approaches tend to see external input as a more legitimate pedagogic force. From a contemporary educational

perspective, however, it would seem fairly clear that both processes have an important role to play in learning and development (Cooper & McLeod, in press). To internalise new understandings, we have to be actively engaged in the learning process; but external perspectives and understandings may also be very helpful in supporting us to see things in different ways. This is entirely consistent with Piaget's theory that learning involves both *assimilation* and *accommodation* (Atherton, 2011): that we need to both be able to assimilate new ideas into our existing schema, and also revise our schema to accommodate new ideas. Furthermore, given that different individuals may learn most effectively in different ways (e.g., Kolb, 1984), it seems likely that different kinds of therapies will be most effective for different kinds of individuals.

From the perspective of the present framework, it might also be useful to consider the different kinds of understandings that therapists and clients can contribute to the learning process. A client is likely to have the best sense of what is most important to them: their highest level wants. Indeed, from the ethical position outlined in this paper, only they can ultimately determine what these are. They may also know the idiosyncrasies of their psychological and social context, such that they know what is likely to work and what will not. On the other hand, the therapist brings with them a general understanding of contextual factors and processes and, crucially, can also input into the therapeutic learning the perception and realities of an 'outside' individual (Spinelli, 2001). As argued from a pluralistic standpoint (Cooper & McLeod, 2011), therefore, an optimal therapeutic relationship may be a dialogical one: with both therapist and client bringing their specific areas of knowledge and understanding to support the client in their learning.

In terms of models of dysfunction, the present framework suggests, too, that there is a great deal of commonality across therapies. People are understood as encountering psychological difficulties when the ways that they try and get things is not most effective, or most synergetic, within their context. Where these models differ is on what the most basic wants are: for the contemporary psychodynamic approaches, relationships and intimacy; for the humanistic approaches, actualisation of potential; for the behavioural and cognitive approaches, happiness. From the present standpoint, however, it makes little sense to argue over which of these ultimate meanings is, ultimately, ultimate; or to postpone integrative thinking until some final consensus is agreed. Not only are each of these hypotheses almost entirely speculative but, as argued earlier, from an ethical and moral standpoint it is ultimately up to the individual to determine their own ultimate meaning – an external proscription, therefore, is ethically as well as empirically problematic.

Although the aim of this framework is to be inclusive of a wide variety of therapeutic processes, it is important to ask what it does not include. Given the present emphasis on the client as an active agent of change what is, perhaps, excluding from this framework are the more 'psycho-technological' perspectives on counselling or psychotherapy, in which the therapist's aim is to enact change *on* the client's psychological,

emotional or cognitive mechanisms. This might be, for instance, a hypnosis-based approach, which aims to bypass the client's conscious mind, and automatically bring about some change in how they see the world. This is not to suggest that such direct changes to the client's psychological *context*, as it is defined in this paper, are not possible; but they would be outside of the scope of what would be considered counselling and psychotherapy, as they do not involve collaborating with the client as an active agency in changing how they engage with their world.

THE INTERPERSONAL AND SOCIAL CONTEXT

Throughout this paper, it has been argued that the ability for people to progress towards, and attain, their wants, is dependent on the availability of resources in their environment. How, then, might socio-political resources be increased? To some extent, and particularly from an existential standpoint (van Deurzen, 2002), resources will inevitably be limited: only so much money is available in a system, time is not infinite, and the ultimate resource limitations – death – is unavoidable. However, it is also possible to ask whether, to some extent, resources are more limited than they need to be: is it possible to increase what is available to people, helping people get more of what they want more of the time, within the inevitable givens of existence? Here, it will be suggested, the present framework can be translated to the interpersonal and social level: that is, that resource limitations, to some extent, can be ameliorated by greater synergies and greater effectiveness at the interpersonal and social plane.

Interpersonal synergies

Such a model assumes that we can essentially take the hierarchy of wants, as depicted in Figure 1, and consider the vertical strands as individuals within a relationship or social structure, rather than wants within an individual. Hence, multiple individuals can be conceptualised as striving to progress towards their wants-as-a-whole, with relationships across people taking one of three forms: independent, synergetic or dysergetic. As suggested earlier, this framework is very consistent with work in such social psychological fields as game theory, where it is assumed that people can be conceptualised as relating to others in win-win (non-zero-sum) or win-lose ways (see Mansell, 2005, p. 166; Wright, 2000). As an example of a dysergetic/win-lose relationship, I want my daughter to get to sleep at 10pm so that I can relax in the evenings and not worry too much about her. She wants to stay up until 11.30pm so that she can enjoy playing *The Sims*. So if she gets what she wants, I lose out, and vice-versa. An example of a synergetic/win-win relationship: my daughter and I both love mooching around shopping centres, and I particularly enjoy mooching with her: so I get more of what I want by her coming along, and she gets more of what she wants because, without me, there would be no lift to the shopping centre.

As at the individual level, and consistent with the game theory literature, it can be argued that moving from dysergetic relationships to synergetic relationships is a *good* thing because, by definition, it means that more people can get more of what they want more of the time, without any losses. For instance, my wife calls a meeting between my daughter and myself, and we come to the conclusion that, if my daughter can take responsibility for putting herself to bed and let me watch whatever I want to on television after 9pm, then she can stay up late. What we have done is to configure a dysergetic relationship into, at least, an independent one.

How is it possible to increase synergies at the interpersonal level? If we were to extrapolate from the individual plane, as discussed above, it might be suggested that synergies could be increased if people could develop a greater awareness of each other's wants, moving away from a self-focused tunnel vision towards an appreciation of the other. Indeed, simply having an opportunity to focus in on the dysergies and to think through possible ways in which lower level wants might be transformed such that they are more synergetic should be an effective approach. And, indeed, in game theory (e.g., Wright, 2000) as well as in couple and family therapies (e.g., Evans, 2012), this emphasis on communication across positions is held as the key to 'negotiating coordinated strategies' (Fisher, 2008, p. 75) and developing improved relationships. As I wrote in 2006:

> the more effectively people can express to each other their wants and listen to the wants of others, the more likely it is that the achievement of wants will be maximised. It may be, for instance, that my partner Helen really does enjoy getting up at four o'clock in the morning to feed our baby, and it is only through open and honest communication that I would know about that; and if she does not want to be doing that, then the more we can talk about what we want in that situation – and listen to the other person's wants – the more likely a constructive compromise will be achieved. (Cooper, 2006, p. 90)

Here, as raised earlier, it is important to emphasise that there may be a critical difference between *wants* and *demands*. In a constructive dialogue, it can be hypothesised, both parties put their wants 'on the table' – whatever they are – and this maximises the possibility that creative synergies will be found. But this is not the same as insisting or expecting that these wants will be met: indeed, it might be hypothesised that making such demands may frequently be counterproductive, with each party then behaving in a more defensive and self-focused manner.

Trust

Closely related to this, in the game theory literature, there is also a particular emphasis on the importance of trust. Fisher (2008, p. 129) writes 'If we could find ways to trust each other, we could then find win-win solutions to many of our most serious problems.' If people trust each other, they are less likely to respond to the other's actions

in defensive ways, which then leads to a spiral of mutual antagonism and increasingly dysergetic relationships.

Arbitrary control and power

Translated to the interpersonal and social level, arbitrary control, as developed by Powers (1973) refers to the attempt by one individual to control the behaviour of others without reference to that other person's wants. For Powers, such attempts are always doomed to failure and to an increase in dysergy across the system as a whole, because the wants of another cannot be subdued – by its very definition, it is what those others want.

The social context

As at the individual level, it is also important to emphasise here that the ability of dyads to find synergetic means of attaining their wants is not just dependent on their wants, but also on their social and political context. Indeed, as hypothesised by *realistic conflict theory* (Sherif, 1966), the existence of limited social resources may be a principle precursor of inter-personal conflict. Hence, for instance, conflicts between my wife and my self over who should be babysitting our children and who should go out are entirely dependent on the extent to which we can afford childcare. If we can, there is no dysergy between our wants; but if our financial or support resources are very limited, it is much more likely that the achievement of one person's wants will act against the achievement of another person's.

Social equity

In terms of the present framework, a socially equitable society can be defined as one in which all people have an equal potential to progress towards their wants. An interesting question, though, is whether this is an additional principle to that of the value of social synergy, or whether it is an outgrowth of it: that social equity, in some way, is a component part of social synergy. Based on Powers's (1973) analysis of arbitrary control, and the importance of trust in developing synergies, it might be argued that a more equitable society is likely to be more synergetic as a whole. And, indeed, Wilkinson and Pickett's (2010) recent text, *The spirit level: Why equality is better for everyone,* argues exactly this point, drawing on national-level data to suggest that society's do better when they are overall more equal. They suggest a number of arguments for this: in particular, that more inequitable societies create greater envy and social comparison across individuals, with people focused on the attainments of others – particularly where this is saturated in the media – and establishing wants for their own lives that are entirely unrealistic.

Contributing to the wellbeing of others

Sheldon and Schmuck (2001, p. 221) write that 'the source of individual happiness lies in caring for something greater than yourself', and provide evidence to suggest that is the case. The present analysis would support this hypothesis, but not just in terms of individual wellbeing, but in terms of social wellbeing as a whole. From the present perspective, if people's wants are to help other people achieve their wants, then a maximally synergetic relationship is established. You feel good, and I feel good by you feeling good; contrast this with a relationship in which I only feel good if you fail to get what you want.

A natural movement to synergy

Just as it has been argued that space and time alone, without extraneous demands, allows for the emergence of intra-individual synergies, so it has been hypothesised that the natural trajectory of the human species is towards increasingly synergetic ways of being (Corning, 1998; Wright, 2000, pp. 7, 19): a process that might likened to Rogers' (1980) *formative tendency*. Wright (2000, p. 7), for instance, writes that non-zero-sumness, 'is something whose ongoing growth and ongoing fulfilment define the arrow of the history of life, from the primordial soup to the worldwide web.' Here, as Wright writes, it is easy to mock the contemporary world and highlight its deficiencies, but compared with the brutality of the previous centuries, there is a slow but steady movement towards more interdependent, synergetic and reciprocally altruistic relationships, in which people become increasingly moral, respectful and caring towards each other. Corning argues this synergistic position in evolutionary terms, that synergies survive because, overall, they are the fittest way of meeting the demands of an environment. He writes. 'Cooperative interactions in nature that produce positive functional consequences, however they may arise, can become "units" of selection that differentially favor the survival and reproduction of the "parts"' (Corning, 1998, p. 16).

LIMITATIONS AND AREAS FOR DEVELOPMENTS

As a work in progress, it is clear that there are aspects of this framework that are not yet clearly thought out, and/or require further consideration:

1. What of the problem with striving for wants? The model is very much based on the assumption that orientation to wants is a good thing, but how does this sit with the idea that *being* can be more important than *doing* (e.g., Fromm, 2005), or the value of time to reflect and contemplate, without any immediate aims (Foresight Mental Capital and Wellbeing Project, 2008). Indeed, one area of thinking that is clearly not well-integrated into this framework as it currently

stands is Buddhist thought, which very much locates the source of psychological distress in human desire.

2. The framework makes a fairly rigid distinction between acting-towards-wants, and our bio-psycho-social context. But, clearly, how we act can change our context. For instance, if I consistently expose myself to something I am afraid of, the association between the stimulus and the response can become diminished.

3. An area that has been touched on, but not fully explored, is meta-wants: our wants about our wants. This is an interesting area for exploration, and may be a key to understanding want-orientated processes. For instance, would it be a healthier psychological position to have a strong desire to get what we want, or are we psychologically more functioning if we can tolerate not getting what we want.

4. Wants and *expectations* – which of these is actually the key driver of psychological health and wellbeing. For instance, if someone asked me if I wanted to be a famous football player, I would answer in the affirmative, but not achieving this goal does not cause me distress, because I do not ever expect it to happen. For a want to be linked to emotions, then, must there also be some element of expectation.

5. The theory needs application to counselling and psychotherapy practice, and evaluation, in a more direct way. This might involve:

   a. Assessments of clients that directly involve asking them what they want from life, and how they currently strive to achieve it

   b. Focusing therapy on helping clients identify what their highest level wants are

   c. Inviting clients to consider how their wants may be in conflict, and what they might do to help them be more synergetic

   d. Encouraging clients to dialogue across different wants

   e. Explicitly discussing with clients how they might, more effectively, progress towards their wants

   f. Exploring with clients what is under their agentic control, and what might be contextual factors that they have no immediate control over.

   g. Helping people to identify times when they may be prone to arbitrary control, and developing strategies for maintaining a more horizontally and vertically synchronous outlook.

6. How can the need for vertical coherence (i.e., effective means of doing things) be understood at the dyadic and social level; indeed, is it relevant at this level?

7. How do the different forms of social input interact: for instance, what happens when a young girl who has internalised the social want of being like Barbie encounters the social limitation that she cannot?

8. How might we learn across levels: for instance, trust would seem to be key at interpersonal level (Wright, 2000), what might that mean at intrapersonal level?

CONCLUSION

The framework outlined in this paper is a preliminary attempt to draw together a wide range of therapeutic perspectives into a unified framework of psychological distress and development. This is not to undermine the unique contributions of these different approaches, but to re-conceptualise them in ways that are inherently complementary rather than contradictory. This can then serve as the basis for both a more pluralistic view of therapeutic change, and also a pluralistic practice. There remain many aspects of the framework to be worked out, but the basic idea that human beings can reconfigure towards, and learn, better ways of doing things is a shared vision across the psychological therapies. This framework can also help understand relations and change at a social level, and help us move towards a more equitable and psychologically health society.

REFERENCES

Ainsworth, M. D. S., Blehar, M. C., Waters, E., & Wall, S. (1978). *Patterns of Attachment: A Psychological Study of the Strange Situation*. Hillsdale, NJ: Erlbaum.

Aronson, E., Wilson, T. D., & Akert, R. M. (1999). *Social Psychology*. New York: Longman.

Atherton, J. S. (2011). Learning and Teaching; Assimilation and Accommodation [On-line: UK]. Retrieved from http://www.learningandteaching.info/learning/assimacc.htm

Austin, J. T., & Vancouver, J. B. (1996). Goal constructs in psychology: Structure, process, and content. [doi:10.1037/0033-2909.120.3.338]. *Psychological Bulletin, 120*(3), 338–375. doi: 10.1037/0033-2909.120.3.338

Axelrod, R. (1984). *The evolution of cooperation*. New York: Basic Books.

Bandura, A. (2001). Social cognitive theory: An agentic perspective. [doi:10.1146/annurev.psych.52.1.1]. *Annual Review of Psychology, 52*, 1-26. doi: 10.1146/annurev.psych.52.1.1

Bandura, A., & Locke, E. A. (2003). Negative self-efficacy and goal effects revisited. [doi:10.1037/0021-9010.88.1.87]. *Journal of Applied Psychology, 88*(1), 87-99. doi: 10.1037/0021-9010.88.1.87

Beck, A. T., John, R. A., Shaw, B. F., & Emery, G. (1979). *Cognitive Therapy of Depression*. New York: Guilford.

Berlin, I. (1958). Two concepts of liberty. In H. Hardy (Ed.), *Liberty* (pp. 166-217). Oxford: Oxford University.

Berne, E. (1961). *Transactional Analysis in Psychotherapy*. New York: Grove Press.

Bohart, A. C., & Tallman, K. (1999). *How Clients Make Therapy Work: The Process of Active Self-Healing*. Washington: American Psychological Association.

Boss, M. (1963). *Psychoanalysis and Daseinsanalysis*. New York: Basic Books, Inc.

Boss, M. (1979). *Existential Foundations of Medicine and Psychology* (S. Conway & A. Cleaves, Trans.). Northvale, NJ: Jason Aronson Inc.

Bowlby, J. (1969). *Attachment*. New York: Basic Books.

Bozarth, J. D. (1998). *Person-Centred Therapy: A Revolutionary Paradigm*. Ross-on-Wye: PCCS Books.

Brunstein, J. C. (1993). Personal goals and subjective well-being: A longitudinal study. [doi:10.1037/0022-3514.65.5.1061]. *Journal of Personality and Social Psychology, 65*(5), 1061-1070. doi: 10.1037/0022-3514.65.5.1061

Camus, A. (1955). *The Myth of Sisyphus* (J. O'Brien, Trans.). London: Penguin.

Carver, C. S., & Scheier, M. F. (1990). Origins and functions of positive and negative affect: A control-process view. [doi:10.1037/0033-295X.97.1.19]. *Psychological Review, 97*(1), 19-35. doi: 10.1037/0033-295x.97.1.19

Castonguay, L. G., & Beutler, L. E. (2006a). Common and unique principles of therapeutic change: What do we know and what do we need to know? In L. G. Castonguay & L. E. Beutler (Eds.), *Principles of Therapeutic Change that Work* (pp. 353-369). Oxford: Oxford University Press.

Castonguay, L. G., & Beutler, L. E. (Eds.). (2006b). *Principles of Therapeutic Change that Work*. New York: Oxford University Press.

Clark, D. M., Layard, R., Smithies, R., Richards, D. A., Suckling, R., & Wright, B. (2009). Improving access to psychological therapy: Initial evaluation of two UK demonstration sites. [; Research Support, Non-U.S. Gov't]. *Behaviour Research and Therapy, 47*(11), 910-920.

Cohn, H. W. (1997). *Existential Thought and Therapeutic Practice: An Introduction to Existential Psychotherapy*. London: Sage.

Cooper, M. (1999). If you can't be Jekyll be Hyde: An existential-phenomenological exploration on lived-plurality. In J. Rowan & M. Cooper (Eds.), *The Plural Self: Multiplicty in Everyday Life* (pp. 51-70). London: Sage.

Cooper, M. (2000). Person-centred developmental theory: reflections and revisions. *Person-Centred Practice, 8*(2), 87-94.

Cooper, M. (2003a). *Existential Therapies*. London: Sage.

Cooper, M. (2003b). 'I-I' And 'I-Me': Transposing Buber's interpersonal attitudes to the intrapersonal plane. *Journal of Constructivist Psychology, 16*(2), 131-153.

Cooper, M. (2004). Encountering self-otherness: 'I-I' and 'I-Me' modes of self-relating. In H. J. M. Hermans & G. Dimaggio (Eds.), *Dialogical Self in Psychotherapy* (pp. 60-73). Hove: Brunner-Routledge.

Cooper, M. (2005). The inter-experiential field: Perceptions and metaperceptions in person-centered and experiential psychotherapy and counseling. *Person-Centered and Experiential Psychotherapies, 4*(1), 54-68.

Cooper, M. (2006). Socialist humanism: A progressive politics for the twenty-first century. In G. Proctor, M. Cooper, P. Sanders & B. Malcolm (Eds.), *Politicising the Person-Centred Approach: An Agenda for Social Change* (pp. 80-94). Ross-on-Wye: PCCS Books.

Cooper, M. (2008). *Essential Research Findings in Counselling and Psychotherapy: The Facts are Friendly*. London: Sage.

Cooper, M., Chak, A., Cornish, F., & Gillespie, A. (in press). Dialogue: Bridging personal, community and social transformation. *Journal of Humanistic Psychology*.

Cooper, M., & Cruthers, H. (1999). Facilitating the expression of subpersonalities: A review and analysis of techniques. In J. Rowan & M. Cooper (Eds.), *The Plural Self: Multiplicty in Everyday Life* (pp. 198-212). London: Sage.

Cooper, M., & Hermans, H. (2007). Honouring Self-otherness: Alterity and the Intrapersonal. In L. M. Simão & J. Valsiner (Eds.), *Otherness in Question: Labyrinths of the Self* (pp. 305–315). Charlotte, NC: Information Age.

Cooper, M., & Ikemi, A. (in press). Dialogue: A dialogue between focusing and relational perspectives. *Person-Centered & Experiential Psychotherapies*.

Cooper, M., & McLeod, J. (2007). A pluralistic framework for counselling and psychotherapy: Implications for research. *Counselling and Psychotherapy Research, 7*(3), 135–143.

Cooper, M., & McLeod, J. (2011). *Pluralistic Counselling and Psychotherapy*. London: Sage.

Cooper, M., & McLeod, J. (in press). From either/or to both/and: Developing a pluralistic approach to counselling and psychotherapy. *European Journal of Psychotherapy and Counselling*.

Cooper, M., & Spinelli, E. (2012). A dialogue on dialogue. In L. Barnett & G. Madison (Eds.), *Existential psychotherapy: Vibrancy, legacy and dialogue* (pp. 141-157). London: Routledge.

Corning, P. A. (1998). "The synergism hypothesis": On the concept of synergy and its role in the evolution of complex systems. [doi: DOI: 10.1016/S1061-7361(00)80003-X]. *Journal of Social and Evolutionary Systems, 21*(2), 133-172.

Cox, W. M., & Klinger, E. (2002). Motivational structure: Relationships with substance use and processes of change. [doi: DOI: 10.1016/S0306-4603(02)00290-3]. *Addictive Behaviors, 27*(6), 925-940.

Curtis, R. C., & Hirsch, I. (2003). Relational approaches to psychoanalytic psychotherapy. In A. S. Gurman & S. B. Messer (Eds.), *Essential Psychotherapies: Theory and Practice* (2nd ed., pp. 69-106). New York: Guilford Press.

Dreyfus, H. L. (1997). *Being-in-the-World: A Commentary on Heidegger's Being and Time, Division 1*. Cambridge, MA: The MIT Press.

Elliot, A. J., & Church, M. A. (2002). Client articulated avoidance goals in the therapy context. [doi:10.1037/0022-0167.49.2.243]. *Journal of Counseling Psychology, 49*(2), 243–254. doi: 10.1037/0022-0167.49.2.243

Elliott, R., & Greenberg, L. S. (1997). Multiple voices in process-experiential therapy: dialogue between aspects of the self. *Journal of Psychotherapy Integration, 7*(3), 225–239.

Emmons, R. A. (1986). Personal strivings: An approach to personality and subjective well-being. [doi:10.1037/0022-3514.51.5.1058]. *Journal of Personality and Social Psychology, 51*(5), 1058-1068. doi: 10.1037/0022-3514.51.5.1058

Emmons, R. A., & Diener, E. (1986). A goal-affect analysis of everyday situational choices. [doi: DOI: 10.1016/0092-6566(86)90137-6]. *Journal of Research in Personality, 20*(3), 309-326.

Emmons, R. A., & King, L. A. (1988). Conflict among personal strivings: Immediate and long-term implications for psychological and physical well-being. [doi:10.1037/0022-3514.54.6.1040]. *Journal of Personality and Social Psychology, 54*(6), 1040-1048. doi: 10.1037/0022-3514.54.6.1040

Evans, G. (2012). Couple counselling. In C. Feltham & I. Horton (Eds.), *The Sage handbook of counselling and psychotherapy* (pp. 581-589). London: Sage.

Ferrucci, P. (1982). *What we may be*. London: Aquarian.

Fisher, L. (2008). *Rock, paper, scissors: Game theory in everyday life*. London: Basic Books.

Flannagan, C. M. (2010). The case for needs in psychotherapy. *Journal of Psychotherapy Integration, 20*(1), 1-36.

Foresight Mental Capital and Wellbeing Project. (2008). Final Project report – Executive summary. London: The Government Office for Science.

Frankl, V. E. (1984). *Man's Search for Meaning* (revised and updated ed.). New York: Washington Square Press.

Frankl, V. E. (1986). *The Doctor and the Soul: From Psychotherapy to Logotherapy* (R. Winston & C. Winston, Trans. 3rd ed.). New York: Vintage Books.

Frankl, V. E. (1998). *The Unconditional Human: Metaclinical Lectures* (W. J. Maas, Trans.): Unpublished translation.

Freund, A. M. (2007). Differentiating and integrating levels of goal representation: A life-span perspective. In B. R. Little, K. Salmela-Aro & S. D. Phillips (Eds.), *Personal project pursuit: Goals, action, and human flourishing.* (pp. 247-270). Mahwah, NJ: Lawrence Erlbaum Associates Publishers.

Fromm, E. (1961). *Marx's Concept of Man*. London: Continuum.

Fromm, E. (2005). *To have or to be?* London: Continuum.

Fromm, E. (Ed.). (1965). *Socialist Humanism*. London: Penguin.

Goldstein, D. M. (1990). Clincial applications of control theory. *American Behavioral Scientist, 34*(1), 110-116.

Greenberg, L. S., Rice, L. N., & Elliott, R. (1993). *Facilitating Emotional Change: The Moment-by-Moment Process*. New York: Guilford Press.

Grouzet, F. M. E., Kasser, T., Ahuvia, A., Dols, J. M. F., Kim, Y., Lau, S., . . . Sheldon, K. M. (2005). The Structure of Goal Contents Across 15 Cultures. [doi:10.1037/0022-3514.89.5.800]. *Journal of Personality and Social Psychology, 89*(5), 800-816. doi: 10.1037/0022-3514.89.5.800

Heckhausen, J., Wrosch, C., & Schulz, R. (2010). A motivational theory of life-span development. [doi:10.1037/a0017668]. *Psychological Review, 117*(1), 32-60. doi: 10.1037/a0017668

Heidegger, M. (1962). *Being and Time* (J. Macquarrie & E. Robinson, Trans.). Oxford: Blackwell.

Hermans, H. J. M. (2001). The dialogical self: towards a theory of personal and cultural positioning. *Culture and Psychology, 7*(3), 243-281.

Hollanders, H. (2003). The eclectic and integrative approach. In R. Woolfe, W. Dryden & S. Strawbridge (Eds.), *Handbook of counselling psychology* (pp. 277-300). London: Sage.

Holtforth, M. G., & Grawe, K. (2002). Bern inventory of treatment goals: Part 1. Development and first application of a taxonomy of treatment goal themes. *Psychotherapy Research, 12*(1), 79-99.

Husserl, E. (1960). *Cartesian Meditations: An Introduction to Phenomenology*. The Hague: Martinus Nijhoff.

Karoly, P. (1999). A goal systems–self-regulatory perspective on personality, psychopathology, and change. [doi:10.1037/1089-2680.3.4.264]. *Review of General Psychology, 3*(4), 264-291. doi: 10.1037/1089-2680.3.4.264

Koestner, R., Lekes, N., Powers, T. A., & Chicoine, E. (2002). Attaining personal goals: Self-concordance plus implementation intentions equals success. [doi:10.1037/0022-3514.83.1.231]. *Journal of Personality and Social Psychology, 83*(1), 231-244. doi: 10.1037/0022-3514.83.1.231

Kolb, D. (1984). *Experiential learning: Experience as the source of learning and development*. Englewood Cliffs, NJ: Prentice-Hall.

Layard, R. (2006). *Happiness: Lessons from a new science*. London: Penguin.

Levinas, E. (1969). *Totality and Infinity: An Essay on Exteriority* (A. Lingis, Trans.). Pittsburgh, PA: Duquesne University Press.

Little, B. R. (1983). Personal projects: A rationale and method for investigation. [doi:10.1177/0013916583153002]. *Environment and Behavior, 15*(3), 273-309. doi: 10.1177/0013916583153002

Little, B. R. (2007). Prompt and circumstance: The generative contexts of personal projects analysis. In B. R. Little, K. Salmela-Aro & S. D. Phillips (Eds.), *Personal project pursuit: Goals, action, and human flourishing.* (pp. 3-49). Mahwah, NJ: Lawrence Erlbaum Associates Publishers.

Little, B. R., & Gee, T. L. (2007). The methodology of personal projects analysis: Four modules and a funnel. In B. R. Little, K. Salmela-Aro & S. D. Phillips (Eds.), *Personal project pursuit: Goals, action, and human flourishing.* (pp. 51-94). Mahwah, NJ: Lawrence Erlbaum Associates Publishers.

Little, B. R., Salmela-Aro, K., & Phillips, S. D. (Eds.). (2007). *Personal project pursuit: Goals, action, and human flourishing*. Mahwah, NJ: Lawrence Erlbaum Associates Publishers.

Locke, E. A., & Latham, G. P. (2002). Building a practically useful theory of goal setting and task motivation – A 35-year odyssey. *American Psychologist, 57*(9), 705-717. doi: 10.1037//0003-066x.57.9.705

Magnavita, J. J. (2008). Psychoanalytic psychotherapy. In J. LeBow (Ed.), *Twenty-First Century Psychotherapies: Contemporary Approaches to Theory and Practice* (pp. 206–236). London: Wiley.

Mansell, W. (2005). Control theory and psychopathology: An integrative approach. [doi:10.1348/147608304 X21400]. *Psychology and Psychotherapy: Theory, Research and Practice, 78*, 141-178.

Marcuse, H. (1966). *Eros and civilization*. London: Sphere.

Marks, I. M. (1978). *Living with Fear: Understanding and Coping with Anxiety*. New York: McGraw-Hill.

Marx, K. (1988). *Economic and Philosophical Manuscripts* (M. Milligan, Trans.). Amherst, NY: Prometheus Books.

Maslow, A. H. (1943). A theory of human motivation. *Psychological Review, 50*, 370–396.

Michalak, J., Heidenreich, T., & Hoyer, J. (2004). Goal conflicts: Concepts, findings, and consequences for psychotherapy. In W. M. Cox & E. Klinger (Eds.), *Handbook of Motivational Counseling* (pp. 83-97). New York: John Wiley.

Michalak, J., & Holtforth, M. G. (2006). Where Do We Go From Here? The Goal Perspective in Psychotherapy. *Clinical Psychology: Science and Practice, 13*(4), 346–365.

National Collaborating Centre for Mental Health. (2010). Depression: The NICE guidelines on the treatment and management of depression in adults *Clinical Guideline CG90* (Updated ed.). London: National Institute for Health and Clinical Excellence.

Öst, L. G. (1988). Applied Relaxation Vs Progressive Relaxation in the Treatment of Panic Disorder. *Behaviour Research and Therapy, 26*(1), 13-22.

Oxford University Press (Ed.). (1995). *The Concise Oxford Dictionary of Current English* (9th ed.). Oxford: Clarendon Press.

Perls, F., Hefferline, R. F., & Goodman, P. (1951). *Gestalt Therapy: Excitement and Growth in the Human Personality*. New York: Julian Press.

Pietromonaco, P. R., & Barrett, L. F. (2000). The internal working models concept : What do we really know about the self in relation to others? *Review of General Psychology*(2), 99.

Powers, W. T. (1973). *Behaviour: The control of perception*. Chicago, Il: Aldine.

Reinecke, M. A., & Freeman, A. (2003). Cognitive therapy. In A. S. Gurman & S. B. Messer (Eds.), *Essential psychotherapies* (pp. 224-271). New York: Guilford Press.

Riediger, M. (2007). Interference and facilitation among personal goals: Age differences and associations with well-being and behavior. In B. R. Little, K. Salmela-Aro & S. D. Phillips (Eds.), *Personal project pursuit: Goals, action, and human flourishing.* (pp. 119-143). Mahwah, NJ: Lawrence Erlbaum Associates Publishers.

Riediger, M., & Freund, A. M. (2004). Interference and Facilitation among Personal Goals: Differential Associations with Subjective Well-Being and Persistent Goal Pursuit. *Personality and Social Psychology Bulletin, 30*(12), 1511–1523. doi: 10.1177/0146167204271184

Rogers, C. R. (1959). A theory of therapy, personality and interpersonal relationships as developed in the client-centered framework. In S. Koch (Ed.), *Psychology: A Study of Science* (Vol. 3, pp. 184-256). New York: McGraw-Hill.

Rogers, C. R. (1980). *A Way of Being*. Boston: Houghton and Mifflin.

Rowan, J., & Cooper, M. (Eds.). (1999). *The Plural Self: Multiplicity in Everyday Life*. London: Sage.

Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist, 55*(1), 68-78.

Ryan, R. M., & Deci, E. L. (2008). A self-determination theory approach to psychotherapy: The motivational basis for effective change. [doi:10.1037/a0012753]. *Canadian Psychology/Psychologie canadienne, 49*(3), 186-193. doi: 10.1037/a0012753

Rycroft, C. (1995). *A critical dictionary of psychoanalysis*. London: Penguin.

Salmela-Aro, K., & Little, B. R. (2007). Relational aspects of project pursuit. In B. R. Little, K. Salmela-Aro & S. D. Phillips (Eds.), *Personal project pursuit: Goals, action, and human flourishing.* (pp. 199-219). Mahwah, NJ: Lawrence Erlbaum Associates Publishers.

Sanchez, V. C., Lewinsohn, P. M., & Larson, D. W. (1980). Assertion training: Effectiveness in the treatment of depression. *Journal of Clinical Psychology, 36*(2), 526-529.

Sartre, J.-P. (1958). *Being and Nothingness: An Essay on Phenomenological Ontology* (H. Barnes, Trans.). London: Routledge.

Sheldon, K. M., & Elliot, A. J. (1999). Goal striving, need satisfaction, and longitudinal well-being: The self-concordance model. [doi:10.1037/0022-3514.76.3.482]. *Journal of Personality and Social Psychology, 76*(3), 482-497. doi: 10.1037/0022-3514.76.3.482

Sheldon, K. M., & Kasser, T. (1995). Coherence and congruence: Two aspects of personality integration. [doi:10.1037/0022-3514.68.3.531]. *Journal of Personality and Social Psychology, 68*(3), 531-543. doi: 10.1037/0022-3514.68.3.531

Sheldon, K. M., & Kasser, T. (1998). Pursuing Personal Goals: Skills Enable Progress, but Not all Progress is Beneficial. *Personality and Social Psychology Bulletin, 24*(12), 1319-1331. doi: 10.1177/01461672982412006

Sheldon, K. M., & Schmuck, P. (2001). Suggestions for healthy goal striving. In P. Schmuck & K. M. Sheldon (Eds.), *Life goals and well-being: Towards a positive psychology of human striving* (pp. 216-230). Gottingen: Hogrefe & Huber.

Sherif, M. (1966). *In common predicament: Social psychology of intergroup conflict and cooperation*. Boston: Houghton-Mifflin.

Spinelli, E. (2001). *The Mirror and the Hammer: Challenges to Therapeutic Orthodoxy*. London: Continuum.

Stone, H., & Winkelman, S. (1989). *Embracing our Selves: The Voice Dialogue Manual*. Mill Valley, CA: Nataraj Publishing.

van Deurzen, E. (1998). *Paradox and Passion in Psychotherapy: An Existential Approach to Therapy and Counselling*. Chichester: John Wiley and Sons.

van Deurzen, E. (2002). *Existential Counselling and Psychotherapy in Practice* (2nd ed.). London: Sage.

Vargiu, J. G. (1974). Psychosynthesis workbook: Subpersonalities. *Synthesis, 1*, 52–90.

Wiese, B. S. (2007). Successful pursuit of personal goals and subjective well-being. In B. R. Little, K. Salmela-Aro & S. D. Phillips (Eds.), *Personal project pursuit: Goals, action, and human flourishing.* (pp. 301–328). Mahwah, NJ: Lawrence Erlbaum Associates Publishers.

Wiese, B. S., & Salmela-Aro, K. (2008). Goal conflict and facilitation as predictors of work-family satisfaction and engagement. [doi: DOI: 10.1016/j.jvb.2008.09.007]. *Journal of Vocational Behavior, 73*(3), 490–497.

Wilkinson, R., & Pickett, K. (2010). *The spirit level: Why equality is better for everyone*. Harmondsworth: Penguin.

Wolitzky, D. (2003). The theory and practice of traditional psychoanalytic treatment. In A. S. Gurman & S. B. Messer (Eds.), *Essential Psychotherapies: Theory and Practice* (2nd ed., pp. 69–106). New York: Guilford Press.

Wright, R. (2000). *Nonzero: The logic of human destiny*. NY: Vintage Books.

Yakeley, J. (2012). Psychoanalytic therapy. In C. Feltham & I. Horton (Eds.), *The Sage handbook of counselling and psychotherapy* (pp. 268–272). London: Sage.

Young, J., Klosko, J., & Weishaar, M. (2003). *Schema therapy: A practitioner's guide*. NY: Guilford.