UTUSHI AND *MA*: INFUSING TWO JAPANESE CONCEPTS INTO WESTERN PSYCHOTHERAPY (COMMENTARY ON MORIOKA)

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ABSTRACT. The cultural problem described by Morioka (2008) and his concepts of *utushi* and *ma* are compared and contrasted to western concepts that convey somewhat overlapping meaning. These include inner critic, underdog voices, identification, projective identification, and organismic valuing process. Morioka's ideas are linked to the work of Rogers, Cooley, Mead, and Lewin. We discuss how *utushi* and *ma* might be studied empirically. We find them to be refreshing, new concepts that may point to phenomena that are active ingredients in psychotherapy.

Keywords: inner critic, underdog voices, identification, projective identification organismic valuing process

The problem identified by Morioka (2008) is that of one's authentic voice becoming "lost within the voices of dominant others" (p. 1). Morioka asks, "How can we remain within, and expand, a chronotope, space and time so as to accept our own voices at ease?" In the West, his question has perhaps been explored more in literature than in psychology. In *Tropic of Capricorn* Henry Miller (1961) reminisced about childhood, lamenting the loss of his own individual voice and that of his friends as they grew to adulthood. Recalling the singular joy of eating rye bread with his companions, he described them as follows,

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Each one was surrounded by a distinguishing aura, by a well-defined identity which was preserved inviolate. With the entrance into life these traits of difference fell away and we all became more or less alike and, of course, most unlike our own selves. And it is this loss of the peculiar self, of the perhaps unimportant individuality which saddens me and makes the rye bread stand out glowingly. The wonderful sour rye went into the making of our individual selves; it was like the communion loaf in which all participate but from which each one receives only according to his peculiar state of grace. Now we are eating of the same great loaf, but without the benefit of communion, without grace. We are eating to fill our bellies and our hearts are cold and empty. We are separate but not individual (p. 130-131).

A distinctive aspect of the problem articulated by Morioka (2008), and illustrated by Miller, is that it is embedded not only in the psychological and interpersonal lives of individuals, but also in the cultural. Morioka views culture and the person as part of the same whole that is to be understood. This non-western unity facilitates a more comprehensive analysis in which an individual's experience of alienation is cast in a broader context.

The severe problem in Japanese life that Morioka (2008) described and starkly illustrated in the case of Ms A seems related to what Western therapists have called an inner critic. It is as if another were inside the self, a stern interiorized representative of cultural (including familial) expectations and standards. In effect, one part of the self is harshly judging another part of the self--or warning against any action that might bring down a harsh judgment:

This inside self-other relationship gives [one] the possibility to escalate evaluations by others in anticipation

In her inner critic, Ms. A could see aspects of others in her office and of her mother, who had "an eye that is severely checking me"

In many forms of therapy, most dramatically in Gestalt and Emotion-Focused therapies (e.g., Elliott, Watson, Goldman, & Greenberg, 2004; Greenberg, Rice, & Elliott, 1993), a therapeutic approach is to engage the critic in dialogue, which is externalized by using empty chairs. The goal is to find meaning bridges--words acceptable to both underdog and critic voices--across which there can be communication and mutual understanding (see Brinegar, Salvi, Stiles, & Greenberg, 2006)

Morioka's (2008) response to the alienation problem posed by such controlling, unassimilated voices within oneself is to assert that restoration of one's authentic voice is possible through conversation at the boundary zone between self and other, and that

psychotherapy can provide a context for such conversation. It is a distinctive feature of dialogue that dominance relations among internal voices can change. Rather than a client's speech always being a monologue, there is the constant possibility that some other, normally suppressed internal voice can speak and thus, for the moment, become the client's center of experience. Therapists often support such expression by underdog voices. Presumably their therapeutic purpose is not so much to advocate for a particular position as to open a dialogue across the boundary that would be impossible so long as the underdog is denied expression.

Morioka (2008) describes and illustrates characteristics of that boundary zone, using the concepts of *utushi* and *ma*. As he notes, *utushi* is a broad concept involving a transition of time, a shift or change in space, a representation, and mirroring, reflection, projection, responsive action, and empathic exchange in the therapeutic dialogue. It is a dynamic, unitizing and distinctly non-western concept that evokes the singularity of each therapeutic moment and points toward the possibility, as Morioka puts it, of "X" appearing "as part of Y inside Y", an empathic and receptive state of joining self and other that produces change in meaning systems.

Utushi, as we understand it, describes an aspect of how two people in dialogue may join into a single system. It involves an interiorization of the other that includes but goes beyond empathy. It can perhaps be considered to encompass the concepts of both identification and projective identification, two Western concepts that each describe processes by which parts of the other come to be inside the self. Very roughly, *identification* refers to my feeling your feelings and motives because *I* want to, consciously or unconsciously. *Projective identification* refers to my feeling your feelings and motives because *you* want me to, consciously or unconsciously (Stiles, 1997). To the extent that therapists' and clients' voices reside and speak from within each other, the locus of intention becomes blurred and indeterminate. What one person feels or says may proceed from the accumulated experiences of either of them. It becomes more sensible to view the dialogue as the working of a single complex system rather than as an exchange between two discrete people. It is this sort of dialogical meshing, Morioka (2008) suggests, that holds the possibility of new perspectives and therapeutic change. Therapists encourage and facilitate *Utushi* through efforts "to keep the experience of the therapeutic conversation unfinished ... [which] makes a potential space where things of different levels can be crossing".

We find the concept of *utushi* useful in attempting to understand how change transpires in therapy. *Utushi* helps to capture the unique space and time aspects, the psychological states, and the action tendencies within a moment of therapy. As a unitizing concept it reminds theorists of the gestalt of such a moment and forces one to appreciate a necessarily global perspective. Each of these components is required to fully appreciate that moment and its meaning. In the case of Ms A, for example, if the critical event in which Ms A stated, "It is more exact to say rather I don't have the

capacity to continue the work than to say I lost confidence" had occurred earlier, in a different cultural context, perhaps even in a different setting, or with a different person (e.g., parents), then it would likely have had a different meaning and impact. *Utushi* helps one appreciate the concrete situation. Further, *utushi* is focused on a critical moment of therapy that deserves more study, the moment in which a change in meaning occurs.

One momentary consequence of this mutual interiorization is a dialogue in which problematic experiences can be examined and re-evaluated. The shifting of evaluations is observable in the therapeutic process. As Morioka (2008) puts it:

> Our speech is always reflecting an evaluative accent. Especially it most clearly appears in the expressive intonation. One can say that the exchange of the intonation is the main task in our ordinary conversation. (p. 102)

This passage recalls Rogers's (1951) concept of the organismic valuing process. According to Rogers, each experience is valued by the person as positive, neutral, or negative to one degree or another, reflecting the experience's potential to enhance or damage the person. However, as the client and therapist join in the therapeutic dialogue, previous experiences are revived in a different context, shared with another, and their value changes. This can be observed during the course of therapy: "The intonation of the word changes in a different context with the other. The same word may get another meaning" (Morioka, 2008, p. 103).

Achieving *utushi* and the possibility of such re-valuing of experience involve the therapist's, as well as the client's, feelings and evaluations in the moment. Morioka described the therapist's sense of these evolving evaluations using the concept of tonus. "The sense of tonus that therapist tentatively receives changing process of tension in the here and now situation is a sensor for catching the internal state of the client and the quality of the therapeutic relationship" (p. 104).

Ma is the second concept Morioka (2008) introduced to characterize the boundary zone between self and other. As he explained, *Ma* refers to the distance between the talking self and the talked about self in one's internal world, the space created in inner conversation between the internal author and the internal addressee. *Ma* thus describes the taking of perspective that allows one internal voice to address another. It may also describe the space between two people when they are joined in conversation, though the *ma* is lost when the mutual engagement is lost. *Ma* involves self reflection and appears similar to Cooley's (1902/1922) *looking glass self*, Mead's (1934) distinction between the *I* and the *me*, and the psychoanalytic concept of the observing ego. *Ma*, however, is distinguished by its characterization as a chronotope. Incorporating space and time into a single concept, it is the creation of a dynamic, lively, distancing between self and self, and between self and other. Morioka (in press) suggested that the *ma* that could not open between Mr. B's internal voices when the

client was alone (e.g., because one voice was too threatening to the other) can be opened in the therapeutic interaction through *utushi*. So, in therapy, Mr. B recalled a childhood friend saying, "I don't enjoy being with you" (p. 9 in ms). The therapist connected this heretofore private childhood experience with the client's present work situation. In bringing these two temporally separate events into dialogue, the dyad as a system made a previously private and temporally distant thought both public and meaningful in the present. By closing the dialogical space between therapist and client (through mutual interiorization, *utushi*), it became easier to open a space (*ma*) between the clients' internal voices--an opening for internal perspective and dialogue. Thus, through an *inter*personal dialogue between a distinct therapist and client, what also takes place is an *intra*personal dialogue between parts of the client, in which both voices may express themselves aloud through both people (cf. Brinegar et al., 2006; Goldsmith et al., submitted). Or, to put it the other way round, the internal dialogue that could not take place is made possible by being externalized in therapy. The *ma* becomes tangible because of the *utushi*, or exchange of internal voices between client and therapist. This is a new *chronotope*--a time and space created within the therapy room that may, in effect, allow dialogue between parts of the person that had not previously spoken with each other. In the process, according to Morioka, Mr. B experienced deep relief. Why and how such a sequence of events in therapy produces such a powerful effect is deserving of much more study.

As empirically minded psychotherapy researchers, we find ourselves asking how one studies the phenomena of *utushi* and *ma*. Are there probabilistic or deterministic laws related to these concepts to be discovered? If so, how does one pursue them? Fifty years or more of psychotherapy research has made it clear that the relationship between therapist and client is a powerful predictor of change, but relatively little empirical work has focused on the phenomenology of the therapeutic relationship, especially at the point of change in meaning systems. Morioka's (2008) approach was to explore verbal exchanges in psychotherapy and interpret them in an attempt to persuade the reader of the validity of the concepts. This could be elaborated into a theory-building case study approach (Stiles, 2005). However, it would be still more convincing if research could incorporate reports by the client and by independent observers. Elliott's (1986) technique of interpersonal process recall is one method to gain the client's view. This involves conducting an interview with the client after the session in which recorded segments are replayed and the client's experience during the session is explored. Another approach that could be adapted is Luborsky's (1996) symptom context method; a researcher could gather episodes illustrating *utushi* and *ma*, including pre and post segments, and compare them with other therapy episodes. A third, similar method would be to follow the procedure used by Silberschatz and Curtis (1993) in studying psychotherapy case formulations. They compared therapist interventions that were formulation-consistent with those that were formulation inconsistent and measured the

impact of these interventions on the patient's level of experiencing. Similarly, investigators could identify therapist interventions intended to elicit *utushi* and *ma* with non-eliciting interventions and compare client responses. A fourth approach would be to prepare a series of systematic case studies Such as those in the online journal, *Pragmatic Case Studies in Psychotherapy*, to show episodes of *utushi* and *ma*. A fifth approach would be to attempt to devise a series of critical experiments to demonstrate the lawful properties of *utushi* and *ma* (cf. Lewin, 1931). Undoubtedly other methods could be found to systematically study *utushi* and *ma*.

In sum, we find the concepts of *utushi* and *ma* to be new and refreshing, and to hold potential for advancing our understanding of change in psychotherapy. They point to phenomena that may be active ingredients in psychotherapy. Creative methods to study the concepts should be devised.

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