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Socratic Questioning in *Alien Landscapes*?

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Jonathan Glover believes that philosophical questioning can play a role in helping people live better lives. Many of us lead lives that are less good than they could be because we have belief systems that are implausible, or overly rigid, or because we are unsure of our values, or need to revise them. Socratic questioning can play a role in enabling people to come to see that their current views or way of life might need changing. Thus, by questioning, a fundamentalist Christian may come to reassess their belief that only those who have accepted Jesus as their savior will be saved (“Is it really plausible that God would condemn those who happened never to hear the gospel?”), and a workaholic may reassess their implicit valuing of work above all things (“Would you want this sort of life for your children?”). The idea that the world can be made better through conversations that lead individuals to question and reassess their worldviews is a general theme in much of Glover’s work. *Alien Landscapes?* is an extremely rich book that develops many ideas; one is the idea that Socratic questioning might play a role in better understanding and treating mental disorder.

There are at least three different ways in which Glover thinks Socratic questioning might play a role in psychiatry:

1. Questioning to clarify problems

The first chapters of *Alien Landscapes?* describe interviews that Glover conducted with people diagnosed with Antisocial Personality Disorder held at Broadmoor Hospital (a high-security psychiatric hospital). Glover is interested in clarifying what might be meant by the claim that people with ASPD lack a conscience. Is it that they are incapable of empathy (they

don't know they cause other's pain)? Or is it a problem with sympathy (they know they cause pain, but don't care). Or that they feel no guilt? Or that they don't understand moral concepts, or something else? Glover seeks to use Socratic questioning to explore the value systems of people with ASPD; for example he asks his interviewees what they would do if made invisible by the ring of Gyges. The resulting interviews are extremely interesting and demonstrate how Socratic questioning can enable a more nuanced mapping of an individual's value-system. Glover is surely right that such questioning can facilitate a better understanding of what might have gone wrong in cases of personality disorder, and potentially offer some clues as to how such conditions might be treated.

2. Questioning to treat symptoms

Glover believes that Socratic questioning might also be used as a form of therapy. He discusses a soldier whose task was to shoot down aircraft attacking his warship. At the crucial moment, a technical fault meant that his rapier missile did not fire. As a consequence, bombs landed on the warship, killing many. The soldier was in no way responsible, but felt profoundly guilty and suffered from Post Traumatic Stress Disorder. In considering how such a man might be helped, Glover suggests that he might benefit from being asked certain questions. Glover notes that train drivers often feel guilt when a train, which could not possibly stop in time, kills someone. The soldier might be asked to consider such cases and asked how his case compares. "Do you blame the driver of the train that kills the person who jumps into its path?" "Should he go on feeling bad about what happened if it is possible to stop doing so?" "Are you really so different from the train driver?" (p325). As another example, Glover considers how Socratic questioning might help those with anorexia who adopt a value system that revolves around control and food. Noting that it is easy to see other people's "mind-forged manacles", he suggests that a therapist might describe someone else who ruins their life via the adoption of an overly narrow value system, for example a religious fundamentalist who sees nothing in the everyday world but sin and temptation, and ask "How is your way of seeing things less stifling..?" (p353). The basic idea seems to be that psychiatric symptoms can be dependent on systems of belief or value that need challenging.

3. Questioning to reconstruct lives

Finally, Glover thinks that Socratic questioning might be employed to help those whose lives

have been damaged by mental illness and who are now faced with the task of self-reconstruction. He considers the writings of Simon Champ, who suffered from schizophrenia for many years. Once Champ's symptoms were controlled by medication, he still needed to reconstruct his sense of identity and autonomy. Champ managed to do this himself, via a process of self-directed reflection. This involved, for example, revising his sense of identity, which has previously been linked to ideas of paid employment, so that he could think of himself as making other contributions. Glover notes that Champ's self-directed project required unusual powers of self-reflection and thinks that others might need help to reconstruct a sense of identity and autonomy. This might involve a "long recurring Socratic conversation that goes deep inside the person" (p387).

What exactly is Socratic questioning supposed to be? And how is it supposed to work? When talking of Socratic questioning Glover has in mind something like the discussions that go on in a philosophy seminar. The process works

By asking people what they think...pressing them to state their views with maximum clarity and explicitness. Then they are challenged to defend their beliefs in the face of counterexamples and opposing argument. The student is pushed into a journey of self-exploration, rather than being given "the answers" by the teacher." (p.9)

Glover believes that such questioning can have a transformative impact on people's lives. His evidence for this claim is that through his teaching he has seen cases where students come to radically reassess their worldviews (Glover, 2008).

Glover's seminars sound wonderful. My initial concern when reading Glover's description was that his ideas about the transformative power of philosophical discussion failed to mesh with my own experiences of teaching. Glover's students may be engaged in self-exploration; re-evaluating their basic values and beliefs. Mine mainly rehearse fairly standard arguments in the hope of being able write a 2:1 essay. On reflection, however, I think this concern can be overcome. Too often university students and academic philosophers fail to be deeply challenged by Socratic questioning because they are not sincerely interested in working out what to think, but rather employ the method for instrumental ends. They aim to construct an

argument that is good enough; to get a 2:1, or to get a paper published. To my shame (in the light of reading Glover's book) I have often supported such thinking in the advice I have given to students; I have, for example, told students writing essays that they need a firm conclusion and arguments for it, but that they shouldn't worry too much whether they actually believe the opinions that they express. If used as a form of therapy, however, the worry that academic philosophy might be better characterized as a form of academic game rather than as a journey of self-discovery and construction might be overcome. Those mentally disordered people who seek therapy are generally unhappy with the way their lives are currently going. In such a situation those utilizing Socratic questioning may be hoped to be willing to sincerely re-evaluate their current beliefs and values. It is worth noting too that Glover's Socratic questioning would differ from the types of questioning that go on in philosophy seminars in further important respects - that might help move it away from the point-scoring enterprise that characterizes much academic philosophy. In contrast to the aggressive forms of questioning that go on in some seminars, Glover's Socratic questioning is supposed to be "gentle" and to involve "sympathetic questioning" (p.340). The questioning is supposed to go on for a long time. The aim is to help people to sincerely re-evaluate their existing worldview, rather than to produce an answer that is defensible for some strategic purpose.

There is much that is attractive about Glover's idea that Socratic questioning can help people to re-evaluate their beliefs and values in ways that enable their lives to go better. The basic idea seems plausible, and the application of Socratic questioning as a form of therapy is politically and morally attractive in so far as it pushes against the tendency to see mentally disordered people as other or alien. The use of Socratic questioning as a form of therapy assumes that people with many mental disorders are roughly rational. This assumption should often be accepted, both because it is frequently true, and also because acting on the assumption that mentally disordered people can be rational can go some way towards shoring up or constructing that rationality. Most of us need to engage in rational discussion with others in order to construct sensible worldviews; people with mental disorders will need social support in developing systems of belief and value at least as much as do the rest of us.

I'm persuaded by the general idea that a program of Socratic questioning might help many of us, including many mentally disordered people, to come to lives better lives. However, I'd like to push Glover on two issues:

First, is there any way of providing courses of transformative Socratic questioning cheaply? The potential expense of possible forms of therapy is a hugely important question in determining their viability. Mental disorders are prevalent, and expensive therapies cannot be utilized on a mass scale. My worry that Socratic questioning as therapy might be very expensive arise as, in Glover's descriptions, transformative Socratic questioning comes across as something that requires a skilled questioner. I can imagine that a series of conversations with Glover might help me to lead a better life. But Glover is a great philosopher. When thinking of the sorts of question that might help an individual suffering from some mental disorder he can draw on a wealth of knowledge, and has a fine eye for the apt comparison (an anorexic might be like Jeanette Winterson's mother, a soldier with PTSD might feel guilt like a train driver). I worry that developing the expertise to conduct Socratic questioning is quite hard. What's more, suitable therapists for conducting Socratic questioning need not only to be clever, but also to be morally good (as they will work in a position of power with vulnerable people). Here lies the nub of the problem. Both clever people and good people are in short supply, and those who are both clever and good are even scarcer – their time will be expensive, and Socratic questioning of the transformative type will frequently take a lot of time. In this regard, I worry that Socratic questioning as therapy looks too like traditional psychoanalysis – it might well work, but it requires a long-term individualized program administered by an expert, and is thus too expensive to be of any practical use.

I suspect that economically viable treatments for mental disorder will need to be “black-box” therapies. A black-box therapy would be a form of what Donald Mackenzie (1993) terms “black-box technology”. Black-box technologies are so named because they are typically sold in black boxes. Black-box technologies may originally have been hard to develop, but have now been perfected so that they can be produced on an industrial scale. An unskilled user can now buy them off-the-shelf and get them to work. Lasers offer an example. When it comes to forms of therapy, successful drug therapies provide the clearest example of black-box therapies. Developing drugs is of course difficult, but once the right chemical has been found they can ideally be produced on a mass scale and taken with reliable effect by people with little understanding of how they work. Paracetamol, or the contraceptive pill, would be examples.

I think it will only be possible to develop black-box therapies for mental disorders if cases of disorders can be thought of as falling into kinds, as opposed to being unique to each individual (Cooper, 2013). Mass produced therapies are developed to work on the assumption that in the relevant respects the problems of those in the treatment group are all fundamentally the same. Note that although drug therapies offer the clearest promise of black-boxability, other forms of therapy might also be black-boxable. Manualized forms of Cognitive Behavioural Therapy offer examples; these enable relatively unskilled therapists to administer programs of therapy based on a manual. Alternatively, in some cases self-help books or online courses might be designed so that individuals with a certain kind of problem (compulsive hoarding, say) can self-administer forms of therapy by working through exercises.

My first question for Glover is whether it would be possible to manualize Socratic questioning? Could a book or computer-program be designed to enable someone to work through the right sorts of questions to re-evaluate their worldview? Or, if transformative Socratic questioning requires conversations with an actual person who asks individually tailored questions, how skilled does the questioner need to be? Tied with this question I'd like to know how Glover's envisaged Socratic therapy compares with the type of questioning that some Cognitive Therapists already use. Texts in cognitive therapy describe the use of a method known as "Socratic questioning" or "guided discovery" which seeks to use questions to enable a client to reflect on what they already know and to use it to self-discover solutions to their problems (for overviews see Overholser 2010, Padesky 1993). The method described within the cognitive therapy literature comes across as less individualized, and as requiring a less-skilled interviewer, than does Glover's. For example, Padesky (1993) offers novices a list of "good Socratic questions that a therapist might ask almost any client", which include the following: "Have you ever been in similar circumstances before?, What did you do?, How did that turn out?, What do you know now that you didn't know then? What would you advise a friend who told you something similar?" (p.1). Does Glover think that an interviewer trained to ask such questions (or a self-help book that posed them to readers) might be enough to provide transformative Socratic therapy?

My second question for Glover is whether he is too quick to assume that helping individuals to develop systems of belief and value that better fit epistemic norms (coherence, plausibility, etc) will help them to lead more flourishing lives. In his discussion of cases where Socratic

questioning might help someone to lead a better life I worry that Glover picks the easy cases. Glover discusses the soldier with PTSD who suffers from unjustified guilt. Seeing that he was not responsible might help him. But what of the soldier who has done terrible things and is culpable? Suppose that the truth is that he's cruel, selfish, cowardly and that the world would be better off without him. Is that the sort of truth that someone might come to live with? I guess the hope would be that an individual who comes to believe himself vicious would decide to set about changing his actions and character. But suppose I have good reason to think that I will not be able to become a better person; either because a history of failed attempts makes it inductively plausible that I will continue to do evil things, or because my problems with impulse control, say, stem from brain damage. Or, consider a different sort of case where the link between truth and human flourishing looks shaky, where a vulnerable individual manages to refashion a livable life through believing falsehoods. Suppose a mother's child dies horribly, and her life is destroyed by grief. She goes to see a spiritualist, who claims to communicate with the dead child who reports being much happier living as an angel. The mother finds some peace, but, we suppose, the beliefs on which this peace is based are epistemically poorly grounded. What would be the role of the Socratic questioner here? Should false but comforting beliefs sometimes be left well alone?

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