
 Commentary

The Socratic Method as a Synthesis Type of Cognitive Psychotherapy and Jung's Transcendent Function: A Commentary

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ABSTRACT

Application of the socratic method, also known as socratic dialogue or socratic questioning, to counseling and psychotherapy was examined as a major trend in philosophical counseling. The emphasis was on the affinities of the socratic method and cognitive psychotherapy, especially Aaron Beck's Pierre Grimes' cognitive therapy models. The work of major theorists of modern applications of the socratic method in education and counseling, such as Leonard Nelson, Gustav Heckmann, and Pierre Gimes, were also examined. Case studies quoted from a summary of one of the usually very long dialogues of socrates as recorded by his disciple Plato, as well as Padesky's case study of socratic questioning in an individual counseling session based on Beck's model of cognitive therapy (CT) were analyzed and interpreted. Additionally, common points of the socratic method, such as cognitive psychotherapy and Carl G. Jung's transcendent function, were briefly discussed.

Keywords

Socratic method; Socratic dialogue; Socratic questioning; Philosophical midwifery; Cognitive therapy; Cognitive behavior therapy.

K⁵th-century Before Christ (BC) Athenian philosopher who inspired millions of books to be written on his life, death, and work. He lived in the 5th century BC, the Golden Age of Athens, or Pericles, the great statesman and general, when democracy marked its upheaval and culture flourished. Socrates (469-399 BC) managed to produce a perennial tradition inherited from the modern world.¹ Socrates did not write anything. All we know about him comes from other authors and especially from his student Plato, who recorded his teacher's dialogues with other students in a series of writings called "Plato's Dialogues".² Socrates' ideas still inspire modern educators, counselors, psychotherapists, and family therapists, as well as philosophers and life coaches, to rediscover his methods and ideas and hybridize them with modern ones to apply socratic ideas and techniques in everyday therapy and counseling.³ The socratic method, dialogue, or inquiry was Socrates' method of teaching and philosophical inquiry. It became a tool of self-discovery and self-healing of the "diseased" thinking and moral processes of young men who served as his students, which may be the reason for causing interpersonal conflicts in relationships. Emotional problems, anger, and violence may likely spring

from an erroneous pattern of thinking and communicating coupled with poor self-awareness.^{4,5} For this reason, Socrates never silenced his adolescent students in a custodial fashion but rather valued and examined carefully each and every bit of their crude and often rude questioning with humor, empathy, careful listening, and patience.² Relationship and rapport in the socratic dialogues mattered as much as in modern cognitive psychotherapy, especially one by Aaron Beck.⁶ His young students saw him as their mentor and admired and trusted him greatly.² Trust is very important in dialogue, especially in the therapeutic dialogue of counseling, because the client may allow the counselor to act as a catalyst and a guide when the client overcomes resistance.⁶ This very cognitive sense of systemic questioning has been used today in modern cognitive therapy. Systemic questions in the modern counseling room could mean "What is the main problem you would like to discuss?" "What makes it a problem for you?", "Do others see it that way?", "What would you try to improve the situation?", "Have you tried it already?", and so on.^{7,8} Obviously, those would be more open-ended questions than those asked by Socrates, which often had a lot of words or even paragraphs, and their answers by the students would be either short, laconic, or sometimes even a yes or no reply.⁸

As in modern cognitive therapy, the socratic method was direct and active.^{6,7} Socrates' endeavor was to direct his students to think their way through correct understanding through questioning, dialogue, hard thinking, and observing each other's words and actions. First, he claimed not to know "the ultimate truth" or prescribe to an academic "recipe" of acquiring knowledge. That is the notion of ignorance, or *aporia*. This might remind us of modern cognitive therapists' sincere disapproval of knowledge in the therapist-client relationship.⁷ Secondly, Socrates did not consider that he was a teacher or that he had anything new to teach. Thirdly, his way of leading his students to knowledge and wisdom or truth was constructive, and it would build up through having others help him understand by using logic and reasoning through open-ended questions, brainstorming syllogisms, and stating emotions and ideas that were put to the test in a search for reaching consensus among the participants.⁹

Inductive reasoning is a socratic notion of purely cognitive skills also used in modern cognitive therapy.⁷ The monitoring of reasoning and flow of thoughts, as well as the emotional stature of the speaker and his contradictions, were all tested through questions, a process known as the *elenchus*, or examination or refutation.⁹ This examination was often done in a provoking and challenging play of words that, just like a gadfly rouses a horse, as Socrates used to say.⁸ Thus, the facilitator of the socratic dialogue had to "bother" the participants with questions, sometimes too challenging for them, in order to stimulate their reason and stir up their emotions in a quest for self-exploration that could lead to the recognition of a common-sense fact or a universal truth.⁹ This examination might also remind us of universal definitions, concepts that hold the same value and meaning for everyone, and is a term used in modern cognitive therapy.⁷

Socrates adopted this perspective, believing that his mission to the world was to help humans understand their lack of wisdom and embark on a quest to acquire wisdom. This could be achieved by adopting a healthy way of living, thinking, and acting, starting primarily with realizing their contradictory beliefs and maladaptive thoughts. This is what Aaron Beck, the father of cognitive therapy (CT), a type of cognitive behavior therapy (CBT), would call automatic thoughts, schemata, and cognitive distortions, which will be examined later in this manuscript.¹⁰ CBT has been found through empirical studies to work especially with depression and anxiety and also with panic attacks, agoraphobia, social phobia, and other phobias, bulimia, post-traumatic stress disorder (PTSD), obsessive compulsive disorder (OCD), and schizophrenia.¹¹ CBT may last anywhere from 6-weeks to 6-months, and it works with a particular situation or problem, maladaptive thoughts, disturbed emotions, physical feelings, and actions.¹¹ Beck's CT has been empirically proven to be very effective with depression and inner talk, and it also honors the therapeutic relationship and rapport unlike other treatments.⁶ *Introspection* was one of the most important contributions of the socratic method, which influenced modern cognitive therapy.⁷

Socrates was the first to spend his entire life painstakingly and ascetically exploring this mysterious inner talk. For Socrates, this mission was a call from Apollo, the delphic God. He often

said that he heard the voice of a *daimonion* or a deity, which was one of the reasons he was put to death, as he was accused of introducing new deities or being involved in a sinister new cult as well as corrupting the youth with morbid and eccentric teachings. However, the *daimonion* he heard talking to him was rather the voice of his conscience.⁹ This *daimonion*, this "inner demon", would rather be the inner speech that we all have, the self-talk. Socrates was the first to notice the importance of our self-talk and its cognitive distortions, or what Grimes et al⁴ would pinpoint as very important *pathologos*, the Greek word for abnormal reasoning, or Beck's cognitive distortions: flights of reasoning and logic, or "logical errors".^{6, p310} According to Beck, such would be arbitrary inferences or *catastrophizing* that catastrophic events may happen.⁶ For instance, one may think, "It happened to me before, so it may happen again".¹⁰ Negative thoughts of *selective abstraction* are when one selects a negative incident and generalizes it to other similar incidents.⁶ Such a thought might be: "I messed up with fixing the lawn mower, so I may not be able to fix the car".¹⁰ When one exaggerates by generalizing negative incidents, that is known as *overgeneralization*.⁶ Such a thought could be: "I didn't make it in the statistics test, so I may mess with all my other tests".¹⁰ When one blows things out of proportion, that's *magnification*.⁶ One may think, "I failed this math test, so I'm a horrible student".¹⁰ On the contrary, when one smooths things out, making them appear not to be a big deal, that's *minimization*.⁶ One may think, "Drinking beer is OK; it's not like drinking wine or spirits, so I may have another six drinks for tonight. Besides, I'm not driving anyway".¹⁰ When one takes it personally, as if one could read others' thoughts related to this person, then that's *personalization* or *mental reading*.⁶ That person may wonder, "Did this happen because of me too?" "I bet I'm the laughing stock of my colleagues"; "she may think her dog is more handsome than me".¹⁰ Often, one may label himself or herself, which is *labeling*.⁶ That person may think, "I'm a loser".¹⁰ Finally, one may think black or white, like there is no gray or middle ground, also called *dichotomizing* or *polarized thinking*.⁶ For instance, this person may think, "I either become rich or I'll be a failure".¹⁰ Other cognitive distortions may be *imperatives*.¹⁰ For instance, one may think, "I should know better" or "I have to please my second wife no matter what, so she doesn't leave like my first one", etc.¹⁰

Treating the cognitive distortions of *self-talk* or the conscience's inner voice was the leading force in recognizing the conditions in which *elenchos* (in its original Greek form or *elenchus* in its popular Latin form) applied, and we find this information, especially in the early Plato's dialogues of Socrates with his students.⁹ Socratic *elenchus* is what Beck would call the examination of evidence, the core of his therapeutic model.⁶ The conditions were: *rationality* or *regularity* (relying on reason and its "at random" product or *ergon*); *teachability* or *learnability* (everybody is teachable and can learn); *explicitability* (explicit or concrete understanding and expression of understanding the object of the talk and its nature); and *inerrancy* (avoiding errors, as a proof of mastery while making errors would be a lack of mastery and expertise).⁹ Getting better through practice could be the gist of what Overholser^{7, p2} calls the integration of the socratic method with modern cognitive therapy, "*focusing on self-improvement*". Thus, self-regulation through "*guided discovery*" would be the main goal of focusing on self-improvement.

Participants in socratic dialogue must realize when they do not possess mastery and that they shouldn't pretend to do so, otherwise that leads them to failure; uniqueness (the particular skill somebody has mastered signifies his/her uniqueness in the contribution of dialogue or inquiry); distinctness of subject matter (each skill, mastery, or craft has its own distinct nature and its own subject matter). Somebody may possess a skill in a particular subject matter while possessing none in another; knowledge or wisdom (the expert or "craftsman", the master, in other words, knows his subject matter and thus is wise in this subject matter and able to teach it to others).⁹ Thus, knowledge and morality are identical for Socrates.⁷ All this journey from self-exploration to reaching a valid universal truth may culminate in the next level of both traditional and original Socratic as well as modern cognitive therapy, which is cultivating virtue in everyday life.⁷ Thus, developing a healthy and positive lifestyle of physical as well as moral and social hygiene is very important in everyday life and in everyday communication and relationships with ourselves and others.

Coming up with your own ideas rather than storing old ideas and mere knowledge from others is a process of creation, genesis, or birth. Socrates called this process *philosophical midwifery* or *maeutics*, inspired by his mother's craft, who was a midwife and helped women give birth to babies. Likewise, Socrates helped people give birth to their own thinking style, to their own healthy patterns of thought, thus leading to healthy and genuine emotions and correct and conscious choices in life rather than inheriting other people's patterns of thought. Inheriting other people's thoughts may happen in one's close milieu, such as a family, when parents and relatives induce in the children their own way of thinking and mentality. That self-directed creative learning gave Socrates' young disciples a truly independent way to develop their personalities, a sense of morality and reasoning, and thus the skill to be fully responsible and aware of their choices in life and the way they relate to others.⁴ This self-directed approach could remind us of modern cognitive therapy's goal to focus on self-improvement.⁷

Modern philosophers have brought the socratic method to the classroom and later on to group therapy, family therapy, and individual counseling. One of them was Nelson¹² an Englishman of the early and mid-twentieth century who emphasized the individual teacher-student model of Socratic questioning. Nelson¹² introduced the socratic method in the public schools of early England. He was one of the first to believe in the freshness of the socratic dialogue and its pragmatic method, which was not fiction or just a part of history books, but a technique and a theoretical basis for exploring conversations, even those everyday conversations of young students, just like those of youth that Socrates questioned in a so different time period and society. And that's because there is a basic assumption behind the socratic method: that it is worth talking about how to live.¹³ Leal¹³ answered those who criticize subjectivity and too much guidance through rhetorical questions by Lageman¹⁴ saying, "Don't judge before you try it... All voices talk within us".¹³ p.123 In other words, we are all products of what we are told by others, of what we learned from our teachers, our parents, and other older people, and we all need a mentor and somebody to guide us through exploring ourselves, an attempt at critical self-analysis,¹² an answer to positivism (preoccupation with

mathematical and scientific methods), dogmatism, and relativism (emphasis on how relative every concept and idea is) of "our modern" times.¹² Lageman¹⁴ however, maintained that the socratic inquiry needs to expand from its individualist dimension and not limit itself in exploring the process of individuation, but also move from "knowing thyself" to "knowing thy family and thy relationships".¹⁴ p.222

Heckmann,¹⁵ a German philosopher who fled Germany and moved to England in WWII, took the socratic method to a different plane as he focused on group dynamics, and eventually, his theory became versatile for classroom teaching as well as group and family therapy. Almost all Heckmann's¹⁵ techniques or measures can also be used in individual counseling. Heckmann¹⁵ came up with his six measures of socratic dialogue: *content impartiality* (working with client on holding judgment or opinion (especially to others if in group therapy) and monitoring his or her own subjectivity in order to be emotionally detached from the question being observed and approach it rationally); *working with the concrete* (counselor makes sure that thoughts become concrete and not too abstract or vague and that accurately reflect client's personal experiences); *mutual understanding* (counselor checks if all participants in group therapy are on the same page and understand each other's thoughts or mutual understanding between counselor and counselee in an individual session); *focus on the current question* (bringing client or group participants back to the current question; stressing the "here and now" of the session); *striving for the consensus* (reaching an agreement on valid inter-subjective statements that leads to an inductive conclusion about the error-free common-sense truth that has been observed as an important cognitive skills and reasoning exercise); and last, but not least, *facilitator interventions* (counselor guides the discussion rather than defending his or her own opinion and plays the role of the "referee" in the group/family therapy and the role of the vigilant, often challenging, coach in the individual sessions, as the Socratic "gadfly", a famous Socrates' metaphor acting as the voice of conscience and obeying his or her own conscience).^{8,15} Heckmann¹⁵ obviously noticed a very cognitive quality in the socratic dialogue.

Carl G. Jung's¹⁶ concept of the *transcendent function*, though different, might be compatible with the socratic questioning of Cognitive Therapy.¹⁶ The transcendent function is the mediatory and transitional force that works between consciousness and the unconscious. Working on the transcendent function, the Jungian analyst works on emotional and maladaptive behaviors, erroneous thinking, and emotional blocks of the client that in socratic and cognitive theoretical orientation may be called "core beliefs", "schemata", or "automatic thoughts" and for the Jungian analyst are unconscious and conscious images and emotional traumas. Images, symbols, and archetypes, however, may be treated by the socratic/cognitive therapist as the thinking, emotional, and behavioral material to work with actively and directly rather than through the elaborate and laborious slow-pacing indirect and less active method of further and deep analysis of symbols, images, and archetypes that the Jungian analyst would be expected to do.¹⁶

Both ancient and modern examples of the Socratic Method were considered, one original from Plato's Dialogues and two

modern, an individual counseling session and a family counseling session. In Gorgias⁸ 47, one of Plato's Dialogues, there was the story of Pollus conversing with Socrates. A summary was preferred because the original dialogue was too long and contained background and details irrelevant to the purpose of this paper. Socrates worked with Pollus' anger problem, which emerged as he could not accept valid inter-subjective statements and could not control his arrogance. Padesky¹⁷ offered another example of how to change one's mind; let's call him Stuart, who had self-defeating thoughts.

In Gorgias⁸ 47 1el, Pollus accused Socrates of being disingenuous. He suspected Socrates of mendacity and purposefully misinterpreting other people's words in order to win in the dialogue, support his point of view, and avoid being caught in contradiction. Pollus felt betrayed and expressed his frustration in angry words. He was trying to make others align with him by making bold and provocative statements with confidence and audacity. Socrates calmly responded in a clear way that he would turn the tables on Pollus and thus prove to him that he contradicts himself and that he is the one who was dishonest to himself. But even more, Socrates assures him that he soon will have Pollus as a witness against Pollus; in other words, Socrates would make him reach a consensus, thus admitting Socrates is right about him. In a Socratic paradox, Socrates claims that Pollus misinterprets himself. The argument concludes with Socrates bringing an argument on injustice and having Pollus agree with him that nobody wants to suffer from injustice, making Pollus realize that he has done injustice to Socrates by agreeing with everybody else on the same topic as Socrates, though they have already reached consensus and talk about the same thing. By having Pollus realize that he is caught in a contradiction, Socrates enables Pollus to become a witness to his own problem and realize that his anger is directing the discussion rather than a genuine tendency to seek the truth in the dialogue. Thus, Pollus is disingenuous, and he is the one who has to work with himself. He was the source of his anger, and he should stop redirecting this anger to others. Socrates did not induce any idea in him and had Pollus agree with this, since Pollus was selfish enough to claim that his idea was originally his about the concept of suffering injustice. Thus, Pollus fell into his own trap without having an insincere Socrates make him believe whatever he wanted him to believe.⁸

In Plato's,⁸ one of the many dialogues of Socrates with various adolescent and young adult students, there are many cases similar to Pollus. Another is Callicles,⁸ 482a6-c3 where we have the same pattern of erroneous thinking that was governed by emotional disturbances and feelings of insecurity, automatic and dysfunctional thoughts, maladaptive behaviors, and maladaptive personalities, as happened with many young and rich students who were spoiled. Callicles had the tendency to make strong egoistic arguments with others, accepting only his point of view but at the same time contradicting himself, being dishonest and inconsistent since his views were not genuine but held only for the purpose of winning the argument. Callicles expressed disbelief in Socrates argument with Pollus. Dwelling on the same topic, Callicles, just like Pollus, initially held the view that doing was preferable to suffering, but after a long dialogue with Socrates, Callicles, just like Pollus, switches to the belief that suffering is preferred to doing, since he realizes that a series of acts of injustice cause suffering to people,

and Callicles, just like Pollus, has seemed to prefer suffering to sticking to his actions, since Callicles agrees that Pollus' actions would turn people's lives upside down. That is a contradiction in Callicles, as it was a contradiction in Pollus. They pretend to despise injustice, though their thoughts are capable of producing it. Their acting was against Socrates, as they disagreed with Socrates on things that they would agree with others, but not with Socrates was a proof of their inconsistency, injustice, and erroneous thinking that resulted in anger and hostility. Realizing this, silenced them, made them feel a sense of shame, and drop their attitude, gradually calming down. Such arguments may happen between friends, students, and teachers, among colleagues, and, of course, in families, especially in the angry dialogues of teenagers with their parents.⁸

In the case of Stuart, Padesky¹⁷ (Appendix), in the role of the counselor or therapist, let Stuart open up and explore various aspects of his thinking, picking up words and phrases that she thought were key to this exploration, such as "complete failure" or "*my kids would be happier with somebody else*" or "*my brother's kids looked happier*" or "*I'm still depressed*". Instead of just throwing some examples of how good he was with his wife and his children and how untrue his self-statements and his self-labeling were, she rather took the risk to share with him this spontaneous adventure of going on a trip in therapy without a specific destination. Thus, the results were rather original than predetermined and self-fulfilling, and therefore, in the end, the questions were truly genuine rather than rhetorical.¹⁷

In the modern therapy room, Socratic questioning was always considered to be part and parcel of cognitive psychotherapy, and its cognitive quality was recognized early. Surprisingly, however, as Padesky¹⁷ sharply observed, early textbooks and articles in cognitive psychotherapy did not really mention how Socratic Questioning could be done or what exactly was the technique to be used in an actual session. That was until Overholser⁷ published first on the practical issues of modern Socratic questioning. However, as Padesky¹⁷ p.6 insists, the main question that was often raised by experienced cognitive therapists was "*How do you know what questions to ask?*". Padesky¹⁷ realized that Socratic Questioning was degraded by modern therapists to the single goal of monolithic and simplistic questioning for the single goal of changing the client's mind and fixing the problem.

Modern cognitive therapists seemed to understand very little about Socratic philosophy. Even worse, they never really appreciated the empirical quality of guided discovery, a cognitive journey that was much closer to Socrates' search, not just for fixing problems but for wisdom, maturity, a moral and healthy lifestyle, and virtue.¹⁷ Padesky¹⁷ offered a great metaphor by saying that cognitive therapists set for a pre-planned trip by making sure they don't digress from the road and knowing exactly where they may stop for their destination, but doing so, they miss all the possible detours that could bring the client and the therapist to a better place and discover new underlying issues and new ways of coping. Thus, Padesky¹⁷ emphasized the importance of the therapeutic relationship and the role of the therapist and counselor as a mentor and facilitator rather than the traditional biomedical model role of the clinician fixing the problem, taking the client from

insanity to sanity, and “spoon-feeding” him or her with what the counselor may think is the “right” or “healthy” or “normal” way of thinking. Such a clumsy and hurrying way of asking questions may unintentionally lead to a self-fulfilling prophecy that having the client agree with the counselor and see the counselor’s point may equal cure or mind-change.¹⁸ Such mind changes are usually temporary, or sometimes the client may agree with the therapist just to be kind, embarrassed, or to escape the tension and pressure of answering those questions or discovering some painful facts. Therefore, Socrates’ original tradition, although it should rather be adapted to the brief and clinically suitable set of questions that Padesky¹⁷ offered, is much closer to the concept of guided journey and is much more successful, as Padesky¹⁷ testified from her own clinical experience after experimenting with her clients on over 100,000 Socratic questions. This guided discovery could have four different stages: asking informational questions (facts), listening, summarizing, and finally synthesizing and examining the analytical questions. It may also remind us of some of Heckmann’s¹⁵ measures. As Overholser⁷ pointed out, the focus on self-improvement and cultivating virtue in everyday life align nicely with Padesky’s¹⁷ emphasis on the journey, the synthesis, and the analytical quality of the questions. Thus, clients’ autonomy and independence would be honored instead of being too directive and counselor-centered.

As Overholser⁷ maintained, there is a great need for future empirical studies, as most of the studies are qualitative and case studies, in particular. However, there are some important, insightful, and valid empirical studies that exist. Grimes et al⁴ ran a series of early empirical studies (simple correlation) in Socratic Therapy/Counseling, or, as Grimes et al⁴ called it, Philosophical Midwifery, or also Dialectic as a Mode of Rational Psychotherapy (DMRT), and its clinical application was called Grimes²⁴ as a Mode of Rational Psychotherapy (GDMRT). The research tested the efficacy of GDMRT as well as which theoretical orientations could match GDMRT. The results suggested a moderate correlation ($r=0.655$) between GDMRT and long-term treatment of self-blame, anxiety, feelings of hostility (from others), outward hostility (to others), denial, blaming others, fear, and worry.⁴

In conclusion, the use of the socratic method as well as the stories and the moral lessons from Plato’s⁸ Dialogues themselves added to that wisdom as well. The cognitive character of the Socratic Method and its being a part of cognitive therapy and even Beck’s CT could hardly be doubted. Despite any criticisms for demanding more than simply questioning or more than focusing on thoughts and rationality, and reasoning, the Socratic Method is far more than mere questioning or even dialogue. It is rather a perennial and quite practical model of self-empowerment, which goes far beyond the mechanical use of techniques as a panacea. Socratic Counseling has many affinities with Jungian aspects of transcendent function and therefore it is not just a way of treating abnormal thinking and reasoning, but rather more complex, as the whole person and whole personality are considered and honored in a positive and optimistic approach to find new ways and new ideas. After all, the Socratic notion of the self-directed and mentor-guided journey for self-improvement, virtue, and wise everyday living along with empathy and sympathy while honoring life itself

and other people’s independence and autonomy may be very important in both teaching and counseling.

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APPENDIX

Pedesky¹⁷ offers a dialogue from a case study, that of Stuart (not a real name), as an example of implementing the socratic method in modern counseling/psychotherapy:

-Stuart: I'm a complete failure in every way.

-Counselor: You look defeated when you say that. Do you feel defeated?

-Stuart: Yes. I'm no good.

-Counselor: What do you mean when you say "I'm no good?"

-Stuart: I've completely screwed up my life. I haven't done anything right.

-Counselor: Has something happened to lead you to this conclusion or have you felt this way for a long time?

-Stuart: I think I see myself more clearly now.

-Counselor: So this is a change in your thinking?

-Stuart: Yes. (Pause) I went to that family reunion and I saw my brother and his kids and wife. They all looked so happy. And I realized that my family's not happy. And it's all my fault because of my depression. If they were in my brother's family, they'd be better off.

-Counselor: And so, because you care about your family, you then decided you were a complete failure, that you've let them down.

-Stuart: That's right.

-Counselor: You also indicated there was a changing in your thinking. You've been depressed many times. And you've seen your brother and his family many times. How did you think about this in the past?

-Stuart: I guess I used to always think I was OK because I tried to be a good husband and a father. But I see now that trying isn't enough.

-Counselor: I'm not sure I understand. Why is trying not enough?

Stuart: Because no matter how hard I try, they still are not as happy as they'd be with someone else.

-Counselor: Is that what they say to you?

-Stuart: No. But I can see how happy my brother's kids are.

-Counselor: And you'd like your kids to be happier.

-Stuart: Yes.

-Counselor: What things would you do if you were less depressed or a better father in your own eyes?

-Stuart: I think I'd talk to them more, laugh more, encourage them like I see my brother do.

-Counselor: And these things you could do even if you were depressed?

-Stuart: Well, yes, I think I could.

-Counselor: Would that feel better to you-trying some new things as a father, rather than simply doing the same things?

-Stuart: Yes. I think I would. But I'm not sure it would be enough if I'm still depressed.

Counselor: How would you find out?

-Stuart: I guess I could try it a week or so.

-Counselor: And how will you evaluate whether these changes are making your children feel happier?^{17 p.3}