Is the Clinical Practice of Psychology a Science?

The question "Is psychology a science?" is not a new one. The members of the psychological profession continue to disagree on the answer. Sometimes, I am afraid, it is rather intense disagreement. Those psychologists who consider themselves to be primarily clinicians will insist that the practice of psychology is, to an important extent, intuitive. They see psychology as many physicians view medicine, primarily as an art in which much is bound to elude scientific method. However, other psychologists insist that their own orientation requires verification of all data with which they deal. Some are outspoken in their criticism of methods that employ the so-called "subliminal" clues. Among these are the statistical, experimental, physiological, and perhaps the industrial psychologists. Therefore, the answer given to the question—Is psychology a science?—depends on who is consulted.

I believe that such evidence as would be available to the clinical psychologist must, for a long time, be gathered in what may not be an orthodox, scientific manner. The proof that would be necessary to validate some of the tools of the clinical psychologist requires extensive longitudinal studies, such as the Air Force is now conducting in the psychiatric screening of aviation cadets. It is easy to insist that clinical psychology relinquish its "unscientific assumptions" and return to the fold of "true science." However, if clinical psychology is not to go out of existence altogether, either it must continue as it is or the means for scientific inquiry and investigation must be provided. This entails a considerable amount of work, trained personnel, facilities, and, most important of all, time. Very, very few financial grants for such all-inclusive studies are available.

It would be fortunate if this editorial would reach the receptive ears of some individual who is in a position to allocate sizable funds for such human progress, although I am aware of the fact that other areas of investigation have an equally valid claim for sponsor-ship. If funds were available, I would recommend the administration to the half-dozen psychological tests most frequently used for the prediction of human behavior, and a few of the promising new techniques, to an experimental cross section of a representative American community. Regular follow-ups of the activities, adjustment patterns, and mental health of the psychologically tested subjects in later life would be required to obtain criterion data and check hypotheses. Rather than validity studies of individual tests—as is the common practice now—a psychological battery of tests should be treated comprehensively as part of an integrated psychological examination. What is needed is a psychological equivalent to sociology's Middletown.

Most clinical psychologists join their colleagues in the belief that what exists, exists in some quantity and can be measured. They agree, further, that it should be measured and assumptions should be verified. It is proper to ask, however, whether valid measurement is possible under the very limited experimental conditions presently available to investigators in this area. Does human personality with its infinite complexity lend itself to atomistic analysis or statistical appraisal? Are the little experimental forays that presently constitute the bulk of clinical psychological research really meaningful?

Psychology can be a science. Much of what is called psychology is scrupulous in its adherence to the scientific method. Other areas—especially personality appraisal and prediction of human behavior—require a comprehensive program of investigation and experimentation before they can be accepted into the ranks of the disciplines that underviably follow the scientific tradition. In the meantime, as far as these areas of psychology are concerned, good art may be preferable to poor science.

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