Robert Charles Carson (1930-2006): Obituary

Charles A. Sanislow
Yale University, csanislow@wesleyan.edu

Follow this and additional works at: http://wesscholar.wesleyan.edu/div3facpubs

Part of the Behavioral Disciplines and Activities Commons, Behavior and Behavior Mechanisms Commons, Clinical Psychology Commons, Mental Disorders Commons, and the Psychological Phenomena and Processes Commons

Recommended Citation
Robert Charles Carson passed away September 23, 2006, after a period of declining health. Born January 6, 1930, in Providence, Rhode Island, the son of Robert Earl Carson and Mae S. Hamill, he attended LaSalle Academy. Bob grew up when Providence was a tough city. Observing peers getting involved in organized crime, he realized it was time to leave home. A viable pathway out was offered by the Navy, and he proudly served on the U.S.S. Midway (1948–1949). Superior test scores and recognition of his potential by teachers at LaSalle led to an academic scholarship being arranged for him at Brown University, where Bob played football. Those who did not know Bob might be surprised to learn that this sinewy Irishman of smallish stature played fullback, a position known for holding back the line. What Bob lacked in size, however, he more than made up for in character and determination. He graduated Phi Beta Kappa and was nominated to the Sigma Xi Scientific Research Society.

He went on to earn his doctorate in clinical psychology under Janet Spence at Northwestern University in 1957. Bob felt fortunate to have Janet as a mentor; she was a match for his strong will, and he credited her with teaching him how to think and write scientifically. Upon graduation, Bob’s mother asked him why he hadn’t become a “real” doctor. He explained that the PhD was actually the highest university degree, a fact he was cleverly able to prove to her by pointing out that only PhD candidates were bestowed the honor of individually walking to the platform to receive their degrees. Mae was satisfied.

Following graduation, Bob spent three years on the psychiatry faculty at the University of Chicago before accepting academic posts in psychiatry and psychology at Duke University in 1960, where he spent the remainder of his career. In the course of his tenure at Duke, he directed the clinical psychology internship program and served as head of Duke University Medical Center’s Medical Psychology Division. In the Department of Psychology, he directed the doctoral clinical program and served as chair. A maverick, Bob refused to wear a white coat when seeing patients on the hospital ward, standing up to the dismayed psychiatry chair while earning a loyal following of residents motivated to learn Bob’s brand of psychotherapy. But Bob was a team player as well. As psychology chair when the Duke department first considered splitting the clinical and experimental programs, he rallied support to keep the department unified. Years later, when he was no longer chair and the department proceeded to split, he chose to remain in both departments.

In the course of his career, Bob was a fellow of the American Psychological Association and a charter member and fellow of the Association for Psychological Science. He served in officer and committee roles in those organizations. He was a member of the Southeastern Psychological Association, the Association for the Advancement of Behavior Therapy, and the Society for the Exploration of Psychological Integration. He held numerous editorial posts, including a consulting editorship for the Journal of Consulting and Clinical Psychology. A clinical diplomate of the American Board of Professional Psychology, Bob was expert with the Minnesota Multiphasic Personality Inventory (MMPI). He would amaze students by describing their clients in detail after having seen only their MMPI profiles; his publications on the MMPI have been highly cited.

Bob was a master psychotherapist and a true original. He imparted many principles to his students that they would learn from no one else. He told us never to do in psychotherapy that which we were most impelled to do; because the client was expert in his or her psychopathology, the therapist’s task was not so much to avoid getting “hooked” but to get “unhooked” as quickly as possible. Those of us who had the good fortune to observe and learn from him appreciated his talents for wrangling order from disorder and for blending warmth and humor while directly confronting pathological interpersonal process in a disarming and compassionate way. He took on only cases that had failed to resolve with other—typically multiple—psychotherapies. Among his generations of students, some may recall him firmly establishing a contract with one client by declaring that if she really wanted to commit suicide, she was with the wrong professional because he “didn’t do suicide,” and then blithely offering a referral to a mortician should she prefer that route. He went on to tell her, “If you
want to do it differently, I’ll be in my office for you at 7:00 tomorrow morning.” She engaged in the psychotherapy process, made amazing strides, and reported back lasting success years later. Or, in response to the client who incessantly drove everyone away with his endless complaining, Bob spent an entire session focused on his own “grief” over a “painful” hangnail and in one session cleared up the client’s propensity with lasting effect. Then there was the client who, after nearly 20 years of failed analyses and various therapies, pleaded with Bob to take her on. Initially declining because of textbook demands, he eventually acquiesced, but only on the condition that she present with material interesting enough to warrant inclusion in his text. As she related various problems with escalating drama, students watched from behind the mirror, awestruck as Bob responded, “Nope, seen that one before, that one, too, you’ll have to do better.” She responded by getting down to serious business, whereupon Bob said, “Now that I do.” A productive one-year period of therapy ensued. Bob was artful in quickly forging an ironclad therapeutic relationship, and he had the skills of a surgeon when it came to excising defensive pathological behavior with lasting effect. In these cases and many others, he achieved lasting change more quickly and over a shorter period of time than most therapists.

Bob’s clinical approach was guided by the theories of Sullivan, his foremost intellectual hero. His actions were informed by empirical findings from social and cognitive psychology to a degree that was ahead of his time, as he worked against a prevailing analytic zeitgeist. Carson saw the value in empirically encoding psychotherapy process, as a means both to diagnose and to guide clinical intervention. The 1960s and 1970s were an exciting time at Duke with rich and spirited interaction among faculty in clinical, social, and personality psychology. During sabbatical, Carson also mingled with the stellar social psychology faculty at the University of North Carolina at Chapel Hill, and in these environments, he integrated Leary’s interpersonal theory with experimental social psychology and the matrices of communication theory to formulate an empirically based approach to dynamic psychotherapy, which he set forth in Interaction Concepts of Personality (1969), now a classic and a must read for anyone serious about doing psychotherapy.

Of all of his accomplishments, Bob was most proud of being a teacher. He taught psychology to undergraduates virtually uninterrupted since his senior year at Brown. In 1989, he was appointed a G. Stanley Hall Lecturer by the American Psychological Association, and in 1993–1994, he was named a Duke Trinity College Distinguished Teacher. A standing ovation was routine at the end of each semester of his undergraduate abnormal psychology class. After one such semester’s end, he was moved to tears when his students presented him with a framed copy of the local newspaper article they had arranged to have written to honor his extraordinary teaching. Bob labored for two decades on the production of the 6th through the 11th editions of Abnormal Psychology and Modern Life; several of these volumes were the largest selling undergraduate abnormal text in the United States. From this work, an Annenberg/Corporation for Public Broadcasting 13-segment telecourse series, The World of Abnormal Psychology, was produced, which began airing in 1992. Bob also took great pride in the number of doctoral students that he had mentored; he chaired more than 40 doctoral dissertations, including that of the first African American woman to earn a psychology degree from Duke.

Bob taught his students that to support their views required thoroughly learning the position of the other side, a principle that he himself embraced. He was comfortable with generating controversy and was an outspoken critic of the conventional wisdom on several contemporary issues. Among these were prescription privileges for psychologists, which he argued would diminish what psychologists uniquely had to offer. He maintained that the person–situation debate remained unsettled. He criticized the “biologicization” of mental disorders and saw the “decade of the brain” as offering a distraction from the magnitude of all that remained unknown and unexplained about the mind as well as having the untoward effect of removing a sense of agency from mental patients. He made no bones about the failings of the Diagnostic and Statistical Manual of Mental Disorders, arguing that it should be scrapped entirely. His willingness to dive into controversy enabled him to critically examine the schizophrenia construct.

Bob was a rare combination of scientist, philosopher, and clinician, a very warm and open human being with an unbridled sense of humor and a precocious spirit. He and his buddies were known for their high jinks at conventions, taking great joy in pulling outlandish pranks on one another. Bob was also very generous. Financially secure from textbook sales, he used his retirement to negotiate two junior faculty lines. He then made a clean break from the academic world, learned to play golf, followed football, and immersed himself in learning about his Irish heritage. Always a lover of music, he credited Frank Sinatra with reinvigorating his generation with hope and romantic excitement. Bob wasn’t defensive about who he was, including his demons, and he took responsibility for his decisions and his faults. Bob found solace being with dear friends in smoky nightclubs where jazz was being played. Although it was a sad note that he would have lived longer were it not for his excessive smoking and drinking, he boldly and proudly asserted his right to indulge in these habits. True to form, Bob Carson did it his way, right to the very end. All who knew him will miss his spirit, brilliance, and penchant for straightforward communication. You always knew where you stood with Bob. When he was in your corner, you were in it together. Whether you were a student, a client, or a friend, his rare combination of support, warmth, and honesty was unflinching.

Robert Charles Carson left behind three children, Kelly Leigh Carson, David Allen Carson, Carolyn Marie Carson; three grandchildren, Hope Marie Markham, Lisa Michelle Markham, and Stephen Lawrence Markham; and many very grateful students.

Charles A. Sanislow
Yale University