

GREGORY ZILBOORG, M.D.

Mind, Medicine, & Man

With a Foreword by

ARTHUR H. RUGGLES, M.D.



HARCOURT, BRACE AND COMPANY
NEW YORK

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Acknowledgments are made to the author and to the Macmillan Company for permission to quote from William A. Robson's *Civilization and the Growth of Law* and to the Commonwealth fund for permission to quote from Henry Weihofen's *Insanity as a Defense in Criminal Law*.

166 RC
.269 3.51
1943 .25

PRINTED IN THE UNITED STATES OF AMERICA

FOREWORD

How fortunate it is that in these days of disordered thinking, feeling, and acting we have a pathfinder who so ably helps us in correcting psychological misconceptions.

In the Old Testament there are these familiar words: "Write the vision, and make it plain upon tables, that he may run that readeth it." In *Mind, Medicine and Man* Dr. Gregory Zilboorg has presented many visions, and those of us who would think straight, act with reasonable social adjustment, and feel without pathological manifestation should read this book very carefully and think upon it profoundly.

We learned from a previous volume, *A History of Medical Psychology*, that Dr. Zilboorg is a most thorough and profound medical historian, and the first chapter of this present book undoubtedly goes further than any other existing work in leading us through the devious paths of some of the early misconceptions of man and his mind, bringing us to a clear understanding of the influence of the past upon the thinking of the present.

I can think of many individuals with a special interest in the various subjects discussed in these pages who will feel that Dr. Zilboorg may be too positive and too self-assured. But I urge such persons to read carefully the text, to think profoundly, and to marshal their facts before defending their divergent points of view.

Dr. Zilboorg's discussion of Civilization and Social Sciences brings to us much of the newer conceptions concerning cultural anthropology and the present-day sociol-

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In short, the doctor's task as a writer becomes by force of circumstances a negative rather than a positive one. This negative function of the physician as a writer is not only a necessity born out of the universality of ignorance. It would be unseemly and injurious for a doctor to expound the full details of his medical knowledge and the accepted remedies to all and sundry, because even the most enlightened layman, equipped with all the book knowledge of medicine, cannot be taught the art of diagnosis. That art cannot be acquired from books but requires special training, special experience, special hardening of certain human frailties, special acumen, and highly specialized judgment that only daily, judicious, and self-conscious contact with a variety of human ills vouchsafes a promise of success.

The layman's hunger for knowledge and for understanding of medicine can be satisfied only in one of two ways: Either he must bend his efforts to learn that the things that ain't so really ain't so, or he must study medicine and become a doctor. It is obvious that the best choice for the layman—from the standpoint of his own cultural curiosity, his own safety, and the public welfare—must also be a negative one. He must commit himself to the task of unlearning what he has falsely learned, and of recognizing the widespread untruths about many ills and remedies. This trend of thought does not seem difficult to understand, nor should it be difficult to acquire; yet this is truly easier said than done. Many hard and bristling obstacles are in the way of understanding this simple principle of negative knowledge which at length becomes positive enlightenment.

These obstacles spring from the peculiar conceit of the average man, who is ashamed to say to himself and to others: "I do not know this. I do not understand that."

He seems unable to admit to himself that, keen as his mind is, there are things in this world that perhaps less intelligent but better trained people know so much better. He seems unwilling and almost unable to admit to himself and to others that there are things about and in himself which are not at all what they appear to be. He is a slave of the literal. A headache is a headache; it does not occur to him that it might be an early symptom of anything from typhoid fever to a brain tumor, or a neurosis. A stomach-ache is a stomach-ache—that is, “indigestion”—and he refuses to entertain the thought that it might be anything from an accidental, transitory discomfort requiring no pills whatsoever to a neurosis or a gastric ulcer. A pain in the arm is a pain in the arm, or an alleged neuritis, or “rheumatism,” and it does not occur to him that this pain might be a so-called neurotic conversion symptom, or a sign of gall bladder trouble or of a mild heart attack, depending on which arm or shoulder happens to ache.

And even if all these possibilities did occur to the average man, he has no way himself of making a differential diagnosis. But as a rule he does not seem to be able to give up the naïve and self-injurious prerogative to be his own sole judge over things which are outside his jurisdiction, outside his knowledge, and outside his power to control rationally. A sick person is a patient, and a patient (even if he happens himself to be a physician) is not and cannot be his own physician, because too much of his own self-respect and too much self-inflated appreciation of his own half-knowledge are at play. Too much so loudly denied yet so unmistakably present anxiety about himself and prejudice in his own favor obscure the little true knowledge he might on occasion possess. In brief, nothing is more difficult for one to do than to become

being "locked up" or "put away." We still believe that to be ill means to have a bad appendix, or a bad gall bladder, or a gastric ulcer; we are inclined to say, "He is not ill. There is nothing the matter with him. He is just neurotic." The great majority of people even today find themselves still unable to accept a truly medical point of view or to seek psychiatric help when they need it.

Let us again recall the fact that at the time psychiatry was born as a legitimate branch of medicine, general medicine had thousands of years of history to its credit. As far as psychiatry was concerned, the doctor was *only human*, and for centuries he had followed the general tradition of psychological ignorance, of intolerance toward the mentally ill, of that mixture of fear and disgust with which a mentally sick person is viewed. Consequently, from the very outset the psychiatrist had to meet the opposition of the layman, the cleric, the speculative philosopher, the lawyer, and often his medical brother. This opposition the psychiatrist still faces today, though it appears in modern dress, of course.

The minister of the Gospel even today is all too frequently inclined to believe that sound religious counsel and traditional goodness and piety will save one from or cure a neurosis. In this he unwittingly claims to be the direct descendant of the primitive shaman, who was at once medicine man and priest, and who claimed to have power over the spiritual aberration of his tribe or flock. That mental disease has nothing to do with what is commonly called "spiritual" is overlooked. That it has as little to do with morality and goodness as appendicitis has to do with righteous living seems to be overlooked. Tradition still considers it natural in some quarters to have the spiritual guide be also the self-appointed psychiatric guide of the neurotic.

times, is a man of great medical knowledge, but the very specialty seems to abandon the substance of medicine: treatment, the therapeutic intent. As a matter of fact, the so-called pure diagnostician is mostly the product of the layman's imagination. A doctor who does nothing but diagnose illnesses without treating them and following up the results will soon lose his diagnostic acumen and will be no doctor at all.

However theoretical it may be, it is possible to assume that a man might go through all the phases of medical training and yet fail to develop the necessary therapeutic intent. But it is a matter of cold practical fact that he who has never gone through all the steps of medical training will never develop any true therapeutic intent, nor will he acquire the psychological balance with regard to illness. Therefore he cannot and may not treat sick people. The psychologist who treats or "re-educates" sick people is equipped to do neither but claims to do both.

The neurotic who speaks of the doctor as a psychologist or who seeks out a psychologist instead of a doctor either tries to avoid facing the fact that he needs treatment—and thereby interferes with the very thing he needs—or he avoids treatment completely. In doing this he not only harms himself, but he perpetuates the nonmedical tradition in medical psychology which militates against the progress of the art of curing the mentally ill. It is striking and pitifully strange to a practicing psychiatrist to observe this peculiar need of the neurotic to clamor for a cure and to do his best to avoid it.

The naïve idea that he who happens to live to a ripe old age must possess the conscious knowledge of the secret of longevity constantly manifests itself in the life of the neurotic, be he depressed, alcoholic, a drug addict, or otherwise maladjusted. Rarely does a reporter fail to ask

the old gentleman who celebrates his one hundredth birthday what the rules for long life are. In the same manner, many a drinker seeks out a former alcoholic who for some reason has stopped drinking and set himself up in practice, undertaking "treatment." It is as if he who has recovered from influenza can cure influenza, and he who has had an operation for appendicitis can remove the inflamed appendix of another person. In general medicine and surgery such catering to quackery has become impossible, but in the field of psychological medicine it is still all too frequent. This writer knows of a "former" alcoholic who ran a good business of "curing" alcoholics; every now and then this specialist would disappear, leaving his patients for a time while he privately went through a period of drinking and a just as private period of sobering up.

Neither the neurotic who thinks he has cured himself nor the trained or untrained psychologist who is honestly interested in human behavior possesses the necessary prerequisites for the treatment of sick people, and it cannot be repeated too frequently that neurotics and psychotics are sick people. Nor can it be stated with less frequency that the layman still prefers the outskirts of medical psychology to the specialty itself.

It is true, however, that of very recent years some understanding of the situation has percolated into the mind of the layman, prejudiced as it is. Here and there a healthy, discriminative skepticism makes itself felt, no matter how faintly, and the psychologist seems perhaps destined to limit himself to his valuable specialty without attempting to dabble in psychiatry. The refractory ones have developed the appellation of "clinical psychologist," a term which would imply that it is possible to be a layman, a psychologist, and a clinician—that is, a psychiatrist—com-

solidity and scientific validity, something more than the use of generally accepted terms and assumptions is required. In our attempt to make our definition clearer, we may say that by psychological causes we understand emotional causes, and that we have in mind primarily unconscious emotions. Those who would be satisfied with this attempt would be wrong, and a great many would rightly respond by a number of additional questions: Do you mean to say that emotions, feelings, need no body organs? And further, what do you mean by unconscious emotions? How could one experience an emotion without being aware of it? And why emotions only? Does not mind, reason, have anything to do with mental diseases?—they are even called "mental," which is supposed to mean coming from the mind.

All these questions are again legitimate. The points they touch are well taken, and it becomes clear that it won't serve any purpose to keep forging an endless chain of substitution of one set of words by another. Words in themselves are of no value unless they express some definite concept, and in medicine even concepts are of no value unless they are supported by a definite body of facts.

We obviously cannot discuss the field of the psychiatrist's work without defining it, and we seem to be unable to define it without introducing at once a number of terms which not only are vague but which seem in addition to express assumptions rather than facts. More than that, these terms, put together in the form of a definition of a specialty, seem openly to exclude the body, leave it deliberately out of consideration, and yet they are coupled with such terms as "medicine" and "physician." Is not medicine the very science that deals with the human body? If the psychiatrist, as it would appear, deals with

diseases which, as he says, do not concern the body, why then must he be a physician?

We at once see that no sooner do we approach the very outskirts of psychiatry than we find ourselves in a rather confusing region of new terms, new concepts, new medical attitudes, or at least of what appears to be a new kind of medicine. All this makes people skeptical and even suspicious. At first stealthily and then more openly the question imposes itself: Is not all this confusion due primarily to the fact that a philosophy of some kind, or man's propensity to build up fantasies which he likes to call philosophy, has tried to insinuate itself into the solid scientific structure of medicine? Why not leave philosophy to itself and let it leave medical science to work out its own problem?

Perhaps we shall fare better in our attempt at understanding the problem if we agree that the question of psychiatry as a specialty is evidently too new and too complicated, that it cannot be solved in the manner of old-fashioned definitions in newly fashioned terms. Failure to realize this fact is perhaps most responsible for the widespread spirit of partisanship which surrounds psychiatric and psychoanalytic problems today. It is a well-known fact that psychiatry and psychoanalysis are today being discussed with a great deal of vigor and zeal in lay and medical circles, and that the opponents of modern psychiatry vie in ardor and even acrimony with its proponents. There is no gainsaying that psychiatry, particularly since Freud's discovery of psychoanalysis, has aroused a great deal of interest in and captured the imagination of medical men, lawyers, philosophers, sociologists, artists, and the laity in general, and that it has also aroused a violent opposition in as many quarters, particularly in the medical profession. All this is an indication that some strong and con-

or happy, placid or angry, we may use our blood circulation, lungs, liver, and brain to feel and manifest physically our state of mind, but it is by way of our social inheritance and habits that we express and manifest our states of mind. It is to those around us and on the world around us that we display our states of mind, our impulses, our aspirations, our inhibitions, and our retreats. Therefore the psychiatrist, by the very nature of his specialty, in addition to his purely medical training must know man as a cultural phenomenon and as a social element. This knowledge cannot be acquired by way of revealed wisdom or pure cleverness or the proverbial common sense. It must be acquired through systematic study of such disciplines as general psychology, literature, anthropology, sociology, and history—which are not taught in medical schools and which unfortunately are not yet officially considered prerequisites for postgraduate studies of those who wish to specialize in psychiatry. It is the psychoanalyst to whom credit goes for the emphasis on this essential additional training of the psychiatrist. During the last thirty years, the development of clinical psychoanalytic practice has brought about the clearest realization that the psychology of man cannot be fully encompassed by his anatomy and physiology alone, although it is limited by both.

This leads us to the question: What is a psychoanalyst? A simple answer is that a psychoanalyst is a psychiatrist who also uses the psychoanalytic technique in the treatment of mental diseases. What psychoanalysis is and what its technique is are separate questions, and they will be answered in these pages at the proper time. Suffice it for the moment to repeat what is so well known that it sounds almost like a truism—psychoanalysis established first, the existence of the unconscious (a statement which, as we

shall presently see, is not quite accurate), and second, the unconscious origin of mental diseases.

The experienced clinician will detect a mental disease even though he may be unable to give any comprehensive definition of what it is. It must be borne in mind that the term "mental disease" is used rather loosely. After centuries of dealing with mental disease, medicine is still unable to give a simple and straight statement of what it is. The reasons for this inability are many and complex. Men have never had any difficulty in noticing those who are commonly called "insane": they were "delirious"; they lost their minds; they lost their reason. The outstanding feature of a delirium is its irrationality, the disappearance of usual logic from one's manner of thinking. Since this was the first thing noticed, it was assumed that this was the very essence of mental disease. That mental disease—before it becomes flagrantly an obvious case of what the vulgar and the law call "insanity"—must start with less conspicuous manifestations was not suspected, as it was also not suspected that one might suffer from a severe mental disease and be in full possession of one's reasoning powers. The French finally recognized the existence of this form of mental illness, which they called *folie raisonnée*—reasoning insanity. But the term "mental disease," introduced by Linné and Macbride in the eighteenth century, still carried the suggestion that it was a disease of the mind, of reason, though we have gradually learned that this is not entirely the case.

Take as an example a severe depression in which a person feels constantly low-spirited and hopeless and even suicidal. The reasoning of such a person is also deeply affected, in so far as it is colored by the deep depression. Such diseases began to be called "affective"—that is, emotional—disorders. This term betrays the assumption that

acts. This scientific work, which is both difficult and complex, was done in the past forty or fifty years by Freud and his scientific followers.

VIII

One cannot be too cautious in matters psychological, particularly since the extreme popularization of psychiatric and psychoanalytic terminology has provided us with a new richness of language without offering a corresponding clarity of concepts and a sufficiently substantial body of knowledge. Words are very easily acquired, but their true meaning percolates into the popular mind with difficulty, and with a number of vitiations and confusions. The words "unconscious," "repression," "rationalization," "oedipus complex," "sublimation," "organic," "psychological," have become common currency in the realm of popular psychology, philosophy, and sociology. If we were to attempt to analyze the meanings ascribed to these words by many who happen to use them outside the specialized fields of psychiatry and psychoanalysis, we would easily see that they are frequently endowed with meanings which are either inaccurate or wholly foreign to the fundamental concepts which the words actually denote.

The unconscious, for instance, is more often than not also called the "subconscious," as if it were something we just don't happen to think about. The unconscious is not something we deliberately conceal from others, but something that is outside the field of our awareness. It denotes the whole complexity of feelings and drives which we have either forgotten or never knew, and which are not available to our consciousness. We can not evoke the unconscious by any act of deliberation or will. It stays unconscious, and it does its work in the same manner as in the case of the man who listened to Beethoven's *Third Symphony*. It is

never seen. It cannot be recognized directly. It manifests itself indirectly in human behavior, in our moods, the origin of which we do not understand but try to explain away in the same manner as our schizophrenic explained away the musical commentator's mention of Napoleon.

The unconscious is not a mere pile of memories that happen to be forgotten and deposited in a formless, mysterious mass somewhere within us, where they lie amorphous and inert. The unconscious possesses a considerable amount of energy which influences our behavior. It is "dynamic," as Freud called it. The discovery of the dynamic power of the unconscious is the true contribution of Freud, and not, as is generally believed, the discovery of the unconscious as such. The existence of the unconscious was known for many decades and perhaps centuries before him. Toward the end of the nineteenth century certain psychiatrists spoke of "unconscious cerebration." The hypnotists who preceded Freud, from the later followers of Mesmer to the famous Nancy school of hypnotism, all dealt with the unconscious, which they brought up during the somnambulistic or hypnotic states of patients. But none of them suspected that it possesses a powerful dynamic energy which acts as if automatically, totally independent of the conscious will of man, in the same manner as the beat of our heart, the contractions of our stomach, or the reflex movements of our muscles. We might say that the unconscious acts like any organ of the human body; it is a part of our biological equipment as human beings. It is not something to be ashamed or afraid of, or something to deny, any more than are the functions of the kidneys or intestines or lungs. It is subject to our rational control as little as these organs. Whatever functions it performs, useful or injurious, are functions without the participation of our deliberative intent.

Therefore such phenomena as repression or rationalization are not voluntary acts. The term "repression" is often wrongly used, either interchangeably or as synonymous with "suppression." "To suppress" means deliberately to hold back, deliberately not to say or do or reveal in action that which we wish to conceal. "To repress" means automatically to become or remain unaware. The expression frequently heard, "I repressed this or that," is strictly speaking inaccurate, in so far as it seems to convey a man's deliberate act. I do not repress anything any more than "I ache my head" or "I colic my bile duct."

This inaccurate manner of speaking has crept into our language apparently because we are loath to give up our propensity to take credit or to apologize for every one of our psychological acts. Man *unconsciously* prefers to speak in the name of his own unconscious. He even becomes the automatic advocate of it, and then he is driven just as automatically to explain away thoughts and actions which he did not choose by way of deliberative effort. He gives good reasons instead of real reasons for his thoughts and behavior, like the schizophrenic who "knew" the reason for the sour notes in the "Funeral March" of Beethoven's *Eroica*. This is "rationalization." Rationalization does not mean giving deliberately a rational formula and reasonable elucidation of one's conscious motives, thoughts, and acts. By the same token, sublimation does not mean a deliberate, conscious, and rational substitution of one act which we consider good and acceptable for another act or intent which we consciously consider bad or reprehensible. Sublimation is the automatic expression of unconscious, usually antisocial trends by way of socially acceptable and even laudable acts. Everything about the unconscious is unconscious, and it is possible to control or otherwise manage it automatically only under certain circumstances

sis, a special type of cerebral syphilis), to sharp changes of mood or overactivity and excitement (as in certain cases of cerebral arteriosclerosis). The characteristic of these mental conditions is the same as in those of febrile or toxic deliria; if and when we succeed in removing the tumor or the infection, the mental pathology disappears. The field of the organic mental diseases thus mentioned occupies the interest of both neurologist and psychiatrist for many legitimate and purely traditional reasons; but strictly speaking it belongs to the neurologist, and the psychiatrist is of particular value in such cases only insofar as he is better equipped than any other specialist to make a differential diagnosis between the organic mental disease and mental disease proper—that is, that which remains regardless of how well cured or otherwise attended to all the body organs of a given patient are.

One of the most important functions of the psychiatrist is to make a careful differentiation between a pain or malfunction of physical origin and one of psychological origin. We must always bear in mind that psychological reactions, being total reactions and having no specialized organ for their exclusive use, may express themselves through any organ or system of organs and produce symptoms which appear typically physical. Here we stumble upon another widespread misconception. The average layman and many a physician, when he does admit the conception of a physical symptom of psychological origin, assumes that the symptom—that is, the physical pain, the so-called hysterical paralysis, the neurotic nausea—is not real, but imaginary. That this is not the case is proved by our everyday experiences, but misconceptions do die hard, if at all. A psychological headache is a real headache. The patient actually suffers from an actual headache. He does not imagine it any more than he imagines a neurotic vomiting when he

in Russia at the beginning of the century, or during the influenza epidemic after the last war, there were always a great many left who either failed to contract the disease or, if they did contract it, survived it more or less easily. There were others who survived it with difficulty, and of course others who failed to survive at all. Evidently, those who failed to contract the disease and those who easily recovered from it were constitutionally the strongest. The constitutionally weaker contracted it, failed to combat it with sufficient vigor, and succumbed. They undoubtedly were constitutionally more susceptible.

Medicine does not assume a fatalistic, hopeless attitude toward these constitutionally more susceptible persons. It does not, because every illness, epidemic or accidental, may be viewed as an affliction which attacks only those who are constitutionally weaker as far as this particular illness is concerned. Medicine has a special word for this susceptibility—"diathesis." The whole historical and ethical tradition of medicine is based on the principle of treating the sick *despite* their constitution, that is, despite their selective susceptibility.

The singular history of man's attitude toward mental illness seems to have prevented him for many centuries from assuming the same medical attitude toward the neurotic and the psychotic. There is more than a lingering remnant of the past in our midst, and the psychological diathesis is conceived not as a constitutional susceptibility but as a constitutional *inferiority*. It is this ethical judgment of a mental illness that impedes to no small extent the understanding and hopes of the layman and the clinical interest and therapeutic intent of the psychiatrically untrained physician.

Perhaps, too, the slow progress of psychiatry for many centuries is due to the same factors. A true medical under-

cause any person is partial to his own self; he is naturally concerned with presenting the best side of himself, or, if deeply depressed, the worst side. We then learn no more than what the person thinks he thinks or what he thinks or feels he feels. We cannot really understand this person unless we also learn what is behind his moods and what forces and motives are behind his thoughts. The individual's explanations of the motives are only superficial, even if he happens to be well and perfectly sane, because what he thinks and feels appears to him related only to those things and circumstances which he can see more or less directly. We would have to have much more than the conscious, surface report of a person in order to know the whole truth.

A not unjustified skepticism and even resentment may be felt by the reader who may wonder at this point: By what right does the modern psychologist assume the rather bold privilege of not trusting people when they honestly relate to him what they think and feel and what the apparent causes for these thoughts and feelings are? This question is not unanswerable. The point is that the person investigating man's psychology does not distrust the patient, nor does he assume any attitude of supposed superiority. He observes what he sees, he listens to and hears what the person tells him, but he wants to know more about it, and he knows that the person is unable to tell him more directly. This seemingly queer situation is not peculiar to matters psychological; it is characteristic of everything in medicine. A patient may come to consult a doctor and tell him: "I have a pain in my right shoulder. At times it wears me out and annoys me so much that I become nervous and fidgety, I even feel nauseated and lose my appetite." This is an honest statement, but it is a poor doctor who would take it only at its face value. The

of our intestines or our blood circulation, this energy is at work beyond the threshold of awareness. We are not usually conscious of it. It flows in or tries to assume various directions. When it reaches the point of expressing itself outwardly, we are able to give it a name; it is called love, hate, aggression, depending upon the manner in which it expresses itself outwardly. But while working its way outward, while still unconscious, it has no names, for the unconscious does not think logically and it does not use our conscious, well-organized language. This energy may be compared with a fire: if the fire rages uncontrolled in a house, we call it a disastrous conflagration; if it burns in a smelting furnace, we call it a useful industrial force. In other words, our drives and impulses as they live within us are neither good nor bad, neither right nor wrong—but their expressions are either good or bad, right or wrong. This is a point not to be forgotten.

These fundamental drives, constantly in action, are as much a prerequisite of life as our physiological functioning. They cannot remain inert. They are always at work and never stop, any more than our heartbeat stops. Even in certain severe mental diseases, when the individual is reduced to purely vegetative existence and remains in a state of stupor sometimes for years, the instincts continue to work and express themselves. The individual in such a stuporous condition lives with a minimum of expenditure of physical energy. He even makes no effort to eat, and must be fed forcibly. But his unconscious must find an outlet, and it generates endless fantasies, imagery, and most complex delusionary systems of which we learn after the patient comes out of his stupor.

The original condition in which the drives find themselves is that of an inordinate, unorganized reservoir of impulses. These lack not only the conception of good or

bad but also of time or of conflict. The drives are nothing but a mass of undifferentiated impulses which make man move on and live—they are truly primitive. All they need is an outlet. In accordance with the "all-over" principle, every organ in the body may be used by any impulses as an instrument through which they can express themselves. These impulses may use the stomach, or any part of the gastrointestinal tract, or the skin, or the sexual organs. They follow a definite pattern. At first, there is a moderate accumulation of energy which is not too great; because it is not very intense, it is perceived as pleasurable. Then, as the accumulation grows, the given organ becomes tense; we perceive it as something less pleasant, as something we would wish to get rid of. As the tension increases, the feeling becomes even less pleasant; the energy must break through. This need to break through is perceived as an appetite, any appetite—a desire to eat, a sexual desire, a desire to have a long, brisk walk, a desire to sing, a desire to scratch one's skin—depending upon which pathway the energy happens to choose. We then give vent to our desire, gratify our need, discharge the accumulated energy. This moment or period of giving vent to or discharging the accumulated energy is highly pleasurable and is followed by a sort of relaxation, or somnolence, or temporary quiescence.

It is this process, when he had studied it in detail, that Freud considered characteristic of all life forces, and it is this anticipatory pleasurable component and the ultimate pleasure followed by a temporary quiescence that Freud spoke of as "libidinous," or "erotic," or "sexual" pleasures. Far from emphasizing only the hedonistic aspects of the erotic drives, Freud from the very outset stressed the unique characteristic of the libidinous drives to bring people together, to direct themselves to reality and to

people. In other words, "libidinous" or "erotic" in the Freudian sense means coming from Eros, from that force which unifies and cements our relationship to the world and which is therefore creative, productive. The pregenital forms of the libidinous drives, or the biological roots of the libido, are of course erotic in the purely hedonistic sense; in their primitive form they represent physiologically as well as psychologically forces which act automatically only in accordance with the pleasure principle.

It is seen at once that because the words "sexual" and "libidinous" usually refer to a certain physiological function of special organs, called "genital" organs, Freud's conception of the instinctual strivings of man was at once thoroughly misunderstood. What Freud actually did was to describe the physiological processes which are characteristic of *all* organs of the human body, including the genital organs, and point out that the psychological equivalents of these processes are usually pleasurable and pleasure-seeking—hedonistic, erotic. The details and the striking clarity of his observations were new, but science had been well aware before Freud that every accumulation of energy, after it reaches a certain point, has to break through. It is the feeling these natural processes generate in man that people seem to be loath to recognize, either as to their nature or as to their true origin.

We must bear in mind that the process described never actually takes place in this simple and direct form. This is the natural law of the instinctual drives—that is to say, this is how all our drives would behave all the time if many other things did not interfere. But numerous factors do interfere with this free, automatic, and constant regular discharge of accumulated life energy. First, there are biological limitations. We start our life with the use of our mouth, and this organ is for a short time the primary

organ of sustenance and pleasure, the main pathway for life and living. Some excretory functions and muscular play are combined with it. But we are weaned very soon, and as time goes on we must learn to grasp with our hands, to walk, to move about. A number of other organs, from our skin to our feet, assume importance as they enter into play. The mouth thus recedes into the background; it becomes a secondary pathway, as it were. The primary one has become our musculature, resulting in our general agility and aggressiveness. We used to be passive recipients of food; now we demand it, we reach out for it, we even fight for it. The organs through which some of our instinctual drives are expressed have changed, and the very tonus of the drives seems to have changed too; it is substituted by or combined with an aggressiveness, a graspingness, which either was not there before or was only secondary. Evidently, our instincts are rather fluid and malleable; they change both in the pathways they choose and in the manner and substance of their nature. They become transformed, adjusted in accordance with man's needs. They are subject to the various biological and social needs and influences, and they arrange themselves accordingly. Considered en masse, instincts are alike in all individuals, but as soon as we begin to study the details in which the instincts group themselves, we find that there are no two persons alike. Not only do the instincts form different groupings, but each instinctual drive is accentuated in different degree depending upon the person we observe. It is this grouping and accentuation which we must learn to detect in our psychological studies, for they leave a definite imprint on the individual and offer a clue to our understanding of his manner of meeting life situations, of what we call his "personality."

reason the opportunity arises for the grown-up individual to gain insight into his unconscious life, he finds himself baffled and deeply stirred to discover that he feels *as if* when a child he felt omnipotent and the only ruler of the world around him, that he swallowed, ate at will, chewed, tore things to bits and put them together again, that whatever he wished and "thought"—for he feels as if he had thought then—was at once achieved. This is the substance of man's tendency to believe (unconsciously) in the omnipotence of thought, in magic. This is the most important characteristic of the deepest layers of the unconscious: They contain no thought, no real fantasies, no constructions. They contain only drives and counterdrives, which our conscious translates almost automatically into words, imagery, fantasy, and logic—as if all this were thought out unconsciously and actually once accomplished.

If we make a note of this point, we shall easily understand that the words "unconscious mind" do not really mean what they seem to mean. The unconscious is no mind at all. It is a bundle of impressions, impulses, feelings, and presentations which become what they appear to us to become only when they enter consciousness; otherwise, they remain more or less primitive both in substance and in form. That is why the most civilized man seems to betray the presence of so many primitive drives. The original primitive drives of our imaginary Gargantua who is born grown-up and dies a gigantic child remain always alive, always present, always ready to assert themselves, always in need of expression. They always find a way to come out to the surface, even though in a highly modified form. When the civilized man of today, weary of the daily tasks of living, turns away for a rest, either by falling asleep or by wandering off in the undirected semislumber of daydreams, he finds himself in the midst of a swarm of

based on almost a quarter of a century of observation and treatment of mental patients—our drives, all primitive and impetuous, almost never express themselves directly when we are well, or nearly well. Something else appears to happen. From the very outset, we human beings come in contact with a rather inhospitable world. At the moment we are born, reality already has a harsh word for us. It tells us that we must start breathing—a process so painful at first that we cry out. It establishes the demand that we be satisfied from now on with living at room temperature, which is at least 28 to 30 degrees below the temperature of the intrauterine abode to which we have been heretofore accustomed. True, every effort is made to reproduce for us the intrauterine atmosphere: we are kept very warm, we are cuddled and fed before we ask for food, we are kept inert. We accept these efforts passively, and sleep most of the time. But we also cry, and we are either allowed to cry or made to cry, because "crying is good" for us. We are thus at once confronted with the drive to remain quiescent and not to breathe—even as we were quiet and did not breathe before we were born—and the drive to remain constantly active and breathe and live. These are two mutually contradictory drives. Whenever there are two or more forces which oppose each other, we are in a state of *conflict*, whether we are aware of it or not. We are in a state of conflict with the outside world, with reality, and we must establish a *modus vivendi* with this reality or we shall die.

Reality grows bigger and more demanding as time goes on. From a cold current of air gushing into our semisolid lungs at birth, it grows into a gigantic, ever present, and all-embracing power. There is the barrier of the crib through which we cannot break. There are various persons opposing us, from parent and sibling to people in

biological laws—that is to say, spontaneously, relentlessly, and in good order—our ego reviews its strength, as it were, gathers its forces which were borrowed from the id reservoir and put to practical use, and a new defensive crust is formed which stands guard between the ego and the id. It is this new crust, this new center of energies, that not only accepts the rules of the game of life and obeys them, but even anticipates the “don’ts.” It is this center that takes over the demands which the outside world has made and is making on us. From this time on, it demands that we keep clean and neat; it no longer waits for mother or father to remind us of these things. What was once a demand from outside becomes a duty which asserts itself from within. This part of our ego stands watch, its attention glued on both the id and the ego. The ego is in itself a sort of agency which tries to dominate the id in order to preserve itself. This attempt proving insufficient, the new center stands over the ego so as not to permit it to weaken. This new center is technically called the “superego.”

In order to understand what happens, we must realize that this apparently artificial, architectural structure is no more artificial than the construction of the chemist, who in order to explain certain chemical phenomena of organic nature postulates the existence of hexagonal “rings” (like the benzene ring), which arrange themselves in chains and secondary “rings” with various little chains and additional “rings” at every corner. This hypothesis not only helps the chemist to have a graphic picture before his eyes, but helps him to reveal the nature of a number of substances heretofore misunderstood and even to discover new substances heretofore unsuspected. This is a legitimate, methodological procedure of science, and psychoanalysis naturally adopted it as one of the most productive and efficient methods.

Graphically, we can now present to ourselves the psychological structure of the individual. Surrounding the primitive reservoir (the id), enveloping it on all sides, is the ego, which is in constant contact with the outside world as well as with the id. From the latter comes the life energy; the ego takes a portion of it and utilizes it as needed. The superego, as a part of the ego, is also in constant contact with the id; it also takes its energy from the id and uses it in accordance with the principles of goodness, rightness, and correctness as we have learned them. If our upbringing was severe and harsh, the superego will be correspondingly severe and harsh. The superego will not "permit" the ego to give in to the id more than is permissible in accordance with the standards which have been inculcated into it.

But this is not all. Should the id develop too much energy, too much drive, the superego captures this drive and uses it as its own weapon. In other words, if the destructive drives of the id become too strong, so that mere compulsive tearing up of pieces of paper or hunting is not a sufficient outlet, and if the ego seems to weaken under the pressure, the superego hurls all the murderous energy of the id on the ego itself, so that the ego cannot act under the dictates of the murderous id. This is one of the most striking and almost gruesome phenomena in man's psychology. The very appearance of a murderous drive from within is treated as if murder had already been committed, and the superego becomes district attorney, jury, judge, and executioner in relation to the ego. This is the origin of many an impulsive suicide. The very emergence of a murderous drive, before it even reaches consciousness, is treated as if it were a capital crime, and self-murder, self-punishment, is imposed automatically. The superego is apt to be as primitive as the id itself, and

it makes one pay an eye for an eye, a tooth for a tooth—and sometimes even sevenfold. The superego is our harsh conscience and, unlike the law of any civilized nation, it punishes not only criminal acts but criminal intents as well. Another striking aspect of this phenomenon is partly a leftover of the omnipotent, magic phase of our Gargantuan-youngster days: Intent is mistaken for fact. It is treated as a reality and is reacted to as if it were a reality. It is a *psychological* reality, which may be totally contrary to truth and fact.

There is another characteristic of our psychological structure. Neither the id nor the superego has much to do with any actual realities. The ego is the only agency acting as intermediary between the outside world and the rest of us, whatever name we may give its parts. The ego is the sole conscious representative of the individual. But as living individuals we know nothing about the Freudian divisions into id, ego, superego. And consequently the ego, which does not know any other name for itself but that of "I," says "I feel guilty" and "I hate," despite the fact that it is the superego which scolds and the id which happens to hate. The ego seldom knows when it misrepresents itself and speaks in the name of other agencies which do not happen to be its friends at all. Only careful analysis achieved by a special technique enables us to gain insight into the situation and makes clear to us at every given situation what the ego happens to represent, sometimes to its own detriment.

And one more characteristic of this dynamic constellation—id, ego, superego: If the id, which is the reservoir of all life energies, were somehow destroyed, the individual would die. If the ego were destroyed—and the superego, being a part of it, would go too—the individual would become a disorganized, jerky, impulsive, totally

chaotic, psychologically deteriorated, delusionary person. Should the superego alone be destroyed by some means, we would have a special type of professional, animal-like criminal. In other words, not a single one of these agencies can be abolished without the individual's coming to total grief. This point cannot be overemphasized: no matter how many graphic schemata we may produce in order to facilitate our description of man, no matter into how many *parts* we may divide him, he remains indivisible. He is one, or nothing. There is no psychological element in him with which he can dispense.

That is the essential difference between the organic and the psychological man; between physiology and psychology, between medicine and psychiatry. We still carry in our body leftovers of our biological past which seem to have become unnecessary; we may cut out the appendix, the gall bladder, or the spleen and leave the person without impairment of physiological functions. We are even able to replace some vital parts of our organic system without much impairment—teeth, for instance. But we are unable to remove a single primitive psychological element from our system. We don't know how to separate these elements from the rest of our psychological whole, but if we knew how, we would be unable to achieve any good results, because man is psychologically as much a totality as a chemical substance. Remove one atom of carbon or hydrogen from a chemical substance and you have a totally different substance; the original is gone, dead. Moreover, the mere removal of one atom of the substance may make the difference between an innocuous or useful substance and an extremely poisonous one.

It is this principle of indivisibility that is primarily responsible for the chasm that exists between medicine and psychiatry. Through many centuries of practice of medi-

cine the doctor has learned to feel master over man's frailties; if there happens to be a disease which he does not understand and is unable to control, he calls upon his past experiences and feels that sooner or later he will succeed in conquering the disease. Some day he will discover what it is he should add to the sick person or remove from him, and the illness will be overpowered. In psychiatry the doctor, even when he seems to insist to the contrary, knows that the personality of man is a closely knit unit and that he cannot add or subtract anything from it in order to cure—and that if he could, he would do harm.

The psychiatrist's job is more complex than, and methodologically so different from, the established tradition of medical thought that it has baffled medicine and aroused it against psychiatry throughout the ages. It is only in recent years that the internist, surgeon, and even dermatologist began to realize that psychiatry is truly a part of medicine, and that it has and must have its own method, for it deals with things which grow out of an order of human functioning which is different from the differentiated and specialized functioning of specific organs. Hence mental diseases proper are called functional mental disorders—they are disorders of the total functions of man. A primitive drive, no matter how incongruous and primitive, cannot be amputated. An acceptable outlet must be found for it in the scheme of man's psychic economy. It must be accommodated. It is the *integration* of drives that brings about health, and not the abolition of any of them; it is their *domestication*—the domestication of their expression, not, of course, of the original impulse itself. The original impulse remains unaltered at the point of origin; it comes from the id that knows nothing of our human civilization and never will. But as it percolates through the superego and the ego it becomes domesticated; all that the

impulse needs is to be discharged. It is endowed with a certain amount of energy, and neither more nor less must be discharged if man is to function as a healthy person. Therefore if, when, and as the instinct becomes domesticated and the whole quantity is gradually discharged in attenuated, small doses, the person will remain well integrated and the id rather tame—pacified.

There are incestuous feelings in man; they flourish (unconsciously) in childhood between the ages of four and six, when the human being is not ready physiologically or psychologically to function in a normal sexual manner. A great deal of hatred, fear, resentment, and deep anxiety is associated with these incestuous drives at this tender age. Yet throughout the so-called latency period, between the ages of six or seven and puberty, a great deal of unconscious, silent work is done. If all is well, the superego—whose final structure becomes accomplished during this period—and the ego produce an integrative result of an almost miraculous nature. The incestuous drives, with all the conflicts of anxiety and hatred which accompany them, become domesticated. They appear on the one hand as an affectionate, filial attachment to the parents—that is, the primitive drive becomes domesticated, desexualized in the narrow meaning of the term "sex"; on the other hand, the primitive, direct sexual drives, still within the frame of domestication, turn toward people of the opposite sex in their original, direct form. They become *displaced* from parent to another person and become *transformed* into affection in relation to the parents. All these transformations present the substance of what is called "sublimation." Should something go wrong, and very many things may go wrong, then the domestication breaks down and the individual automatically, *unconsciously* returns—that is to say, he is driven back by the

forces of the id—to one of the earliest phases of his development. Then, at the age of twenty-five he may behave like a youngster of six and cling to his mother and have incestuous fantasies, consciously or in a modified, anxious, delusionary way. Or he may fall back to an even earlier stage; he may become semistuporous and have to be artificially fed. Or he may not break down so severely; he may fall back onto another level (still primitive, nevertheless) and express his trouble through his organs—particularly his gastrointestinal tract—*converting* his psychological conflict into organ manifestation.

Whatever the individual does—whatever the form of illness into which he is driven—he returns to an earlier level of development. He *regresses* to the time when the superego was not so strong and the id had more leeway. It is this process of regression which is responsible for the majority of if not for all mental illnesses—the severest ones (the psychoses) as well as the milder ones (the neuroses).

The domestication of instincts acquires innumerable forms and is responsible for all aspects of our civilized private and social life. Our whole civilization is a complexity of rearrangement of our primitive instincts into a great number of constellations. It is the variety of these constellations that leads us imperceptibly from the earliest stages of primitive life to our present day. That is why the knowledge of anthropology is so essential to a psychiatrist, for it is the life of primitive man that gives us clues to those psychosocial elements which operate in us within the frame of our present-day civilization. Our instinctual drives, flexible and energetic as they are, have not learned the art of domestication. It is the integrative power of the ego and the superego that holds them in harness and keeps them in the pattern of domesticated reactions. It is the ego and the superego that become civilized under the

individual is forced to do by the very power of his unconscious fantasies. It is never voluntary or deliberative. To rationalize does not mean to formulate in rational terms, but to give a good reason, which may and may not be true, instead of the real reason, which is unconscious. If rationalization were a voluntary, deliberative act, it would and should be called more simply "lying," which it is not.

On the basis of these rather brief and cursory considerations, we can see how the instinctual drives percolate into our reasoning machinery, clogging up its bushings and gears and valves with projections, rationalizations, emotional premises, and psychological realities into which our reason has no spontaneous, direct insight whatsoever. We can now also see why it seemed at first that reason had been left out of the scheme of man's psychological functioning. It was left out because there is no really good cause for separating reason, the primary organ of the ego, from the ego itself, and because unless the true functioning of our ego and its proper relationship to the sum total of our instinctual drives is fully understood, reason seems to be of no great consequence. It is highly susceptible to the influence of our unconscious forces and, as the chief agent of our consciousness, it is of paramount importance only if we become fully acquainted with those unconscious forces which interfere with its discharging its functions.

This topic could now be left temporarily and the consideration of certain peculiarities of our reasoning deferred to future chapters, were it not for the fact that one special peculiarity which is very elusive yet extremely important must be taken notice of before any consideration of the varieties of human problems is undertaken. This special peculiarity is the tendency of man to behave as if reason were sufficient unto itself and even so "purified" that by means of "pure" reason we could understand

the assumption that psychoanalysis is particularly partial to sexual problems and that it overlooks all other factors in the psychology of man is by far the most prominent and the most fallacious. However, this assumption is so deeply ingrained in the minds of people, it has become such a persistent example of our knowing so many things that ain't so, that anyone who tries specifically to correct this impression is at once confronted with the question "Aren't you a Freudian?" The implication seems to be that a man must agree with the popular misconceptions in order to be classified as an adherent of a definite, scientific system.

Freud at the beginning had no hypotheses, no preconceived notions. As a matter of fact, in his earliest articles on psychopathology he called himself a neuropathologist and neurologist. He was not very well schooled even in the psychiatry of his day, and his major interest was the central nervous system, particularly the brain. He did research work on the development of the brain of a small fish; he wrote on paralyzes in children and on motor aphasia, a brain disease. Since the practice of neurology in those days—the late eighties and early nineties of the nineteenth century—entailed constant contact with neuroses, Freud became a psychiatrist and then a psychoanalyst despite himself, so to speak. He was forced into psychopathology by the very contingencies which he had to face when called upon to treat so-called nervous patients. What he learned then was neither from books nor from the psychiatric studies of his contemporaries. Like a true scientific doctor he learned from sick people. Like Hippocrates, the founder of our scientific medicine, he learned by reading things out of patients instead of into them.

After fifty years of psychoanalysis, it is somehow puzzling to observe that the fact that fundamental clinical empiricism is the most outstanding feature of its system is

sions, as the ever accumulating clinical data imposed themselves, as they always should, on the investigator. If one sifted out of the wealth of Freud's contributions and those of his disciples only those hypotheses which found repeated corroboration in clinical work and in anthropological and psychological research, and if one left out the details of the historical evolution of psychoanalysis, it would be possible to state with considerable certainty that the contributions of psychoanalysis to psychopathology might be enumerated as follows: 1. Psychoanalysis offered us insight into the emotional evolution of man as an individual. 2. It revealed that anxiety is ever present, and that anxiety appears in so many forms that sometimes it is not at all directly perceivable objectively or subjectively but only by its characterological products and certain defense reactions of behavior. 3. It established the fact, the basis of which had theretofore been known to all branches of science except psychology, that our psychological functioning follows specific laws of energy distribution in a given system. In other words, a given psychological reaction is never accidental, but always causal and always sequential—it is always *determined*; moreover, it is a product of multiple factors—it is *overdetermined*—and it follows the principles of psychic economy.

Our emotional evolution is of prime importance; without it neither the proper mastery of anxiety nor the proper balance of our psychic economy is possible. In the process of this emotional evolution, a number of leftovers from the past are retained in the repressed sexual impulses which have failed to evolve properly and to fit into the general balance of our psychic economy. Not only are the sexual drives potent determinants of many of our reactions, but for some reason reactions, preoccupations, impressions, which have no direct relationship to our sexual

life proper, are invariably connected in our unconscious with sexual trends or, to be more correct, they are translated by our unconscious into terms of more primitive, sexual trends. These are the empirical findings in every case.

A question always brought forth when the general principles of the Freudian hypothesis are considered is: Is this Freudian hypothesis generally accepted? The answer is No. But this answer is not sufficient, except in the literal sense of the question. Insofar as the question infers a special skeptical query with the implication that the hypothesis is probably not correct, insofar as the hypothesis has failed of general acceptance, a more specific and more detailed, even though very brief, answer must be given.

Freud's system is not yet fully fifty years old. Some of his most telling and most promising formulations are not even thirty years old—a brief moment indeed in the history of scientific thought. The very recency of the major part of psychoanalysis would preclude its general acceptance. Scientific truths cannot be decided by a majority vote, and general acceptance at no time can be considered a measure of scientific validity. It has been roughly estimated that it takes from two hundred and seventy-five to three hundred years for new ideas in the field of psychology to establish themselves as scientific going concerns in clinical psychiatry. The failure of general acceptance of the body of Freudian contributions is not only in no way indicative of its relative validity or lack of it, but rather the natural and even desirable historical phenomenon. On the other hand, any student of modern psychiatry cannot fail to be impressed with the fact that explicitly or implicitly the majority of Freud's fundamental observations have been recognized and frequently corroborated by many workers. The difficulty lies only in the fact that the con-

ceptions are used too loosely and uncritically, and quite frequently in an intellectual rather than a really psychological way.

The general popular, purely verbal, acceptance of Freud did a great disservice to psychiatry in that it exerted an influence on the psychiatrist before the psychiatrist had time leisurely and quietly to submit the new ideas to the test in the privacy of his clinical work. Thus it has come to pass that after fifty years of truly revolutionary discoveries in the realm of man's psyche the general public and a good part of the medical profession seem to have become conversant with the terminology and not the substance of the ideas in question. This denotes the very phenomenon which Freud repeatedly described as scientifically and psychologically unsound, for it marks man's propensity to deal with words rather than with things whenever his ego organization is not strong enough to face those realities for which his superego created in him so many blind spots. There is no need of any complex terminology to sketch the main currents of psychoanalytic clinical ideas and indicate the fundamental processes of our emotional growth, provided we are able to overcome that faintheartedness with which our ego faces the full scope of our unconscious.

II

From birth, as long as we continue to grow biologically we represent a reservoir of instinctual drives which are intense and self-assertive and, at the beginning, chaotic and anarchic. Our drives during this early period are subject primarily to the pleasure principle, and as babies and as children we live in an atmosphere of total disregard of realities. When we learn to walk, we are so pleased with the new muscular sensation, so thrilled, that we disregard

the furniture and even the walls in our way; we run into them head-on and get hurt, and yet we try the process all over again with the same initial thrill and the same ultimate tears. Not only our instructors and our guides but immovable things take us to task and *punish* us for our exuberant hedonism. It takes time and suffering before we learn. We not only learn to understand with our intellects, but primarily and originally we learn emotionally to hold in check our own exuberance, for fear of punishment.

This is the fundamental story of man's instinctual evolution: automatic inhibition and repression of that which we enjoy in order to avoid punishment, pain, mutilation, and even death, all of which hover over us as constant threats against living and even wanting to live in accordance with and under the sway of our instinctual drives. It is impossible here to elaborate on the fact that the primitive pleasures coming from the primitive instincts are couched by the unconscious in sexual, erotic terms. Whether we doubt this postulate or not, it remains a patent, empirical fact to every conscientious investigator of our unconscious life. The reasons that so many people do appear to miss this fact may in due course become clear. In the meantime, let us recall that "sexual," or "erotic," as used in psychoanalysis, at no time means exclusively genital, and genital drives as understood by psychoanalysis do not necessarily mean drives for fornication.

As we grow on from babyhood, the field and scope of our instinctual drives increase in extent and in depth. At first we have but one organ that dominates our life: the mouth, and with it the gastrointestinal tract. For a period there is little else we live on and by. We gradually feel added to these organs our musculature, which is a source of and means for great activity. Our genital apparatus proper does not begin to assert itself as a primary pathway

with manifestations of the latter, particularly in early childhood. This is the "infantile neurosis," which every individual goes through on his way to psychological adulthood, regardless of whether he is or is not destined to develop a neurosis in later life. It is the "normal neurosis" of man, and upon the nature of this normal neurosis the personality of the adult individual depends. The instinctual forces which it releases and those that it harnesses leave a permanent imprint on our whole future manner of living. It is to the study of this normal, infantile neurosis that psychoanalysis has devoted the major part of its efforts; it is an ever living part of our past which seeks to recapitulate in a variety of forms the patterns in which it was laid down. Its nature is dynamic, of course. When our unconscious comes to express itself in dreams, in day-dreams, or in our creative work, it always speaks the primitive language of our personal infantile neurosis. That is why dreams are so important as the "royal road to the unconscious," as Freud put it. Any spontaneous activity that reflects or expresses our unconscious is couched in the terms of our own infantile neurosis. This is a very important point. It emphasizes once more the essential individualistic nature of psychoanalysis. When we do gain insight into the unconscious, we gain insight not into the unconscious trends and symbols in general, not into emotional reactions in general, but into the structure and function of the particular personality with which we happen to be dealing. We gain insight into man, not humanity. The latter becomes understood only through man and his personality.

Since we are speaking here of so-called normal development and normal personality, we might add that by "normal" we do not mean average. A normal individual, in the light of what has just been said, cannot be merely an ab-

stract, statistical, arithmetical mean; he must be an individual who, equipped with as well as handicapped by his infantile neurosis, functions in the direction of people and things—in the direction of reality—an individual in whom the egocentric and the object-libidinous or altruistic trends are so arranged that the instinctual energies flow and support both groups of trends without injuring either of the two or sacrificing one to the spurious advantage (which is actually to the detriment) of the other. By "true genital attitude" is meant just this particular arrangement. As always in nature, only approximations to the ideal arrangement are found in actual life.

IV

Not only are the forces involved in the infantile neurosis kept alive within us throughout our lives, but the major turning points in the history of our infantile psychological evolution leave deep impressions on our adult personality. The great variations of what we call "personality types" are direct results of these impressions. Let us imagine, for instance, a person whose oral trends from birth were particularly strong, simply because of some hereditary or constitutional factor. Or let us imagine a child whose mother is particularly indulgent and plays, as it were, on the oral pathways of the child, thus intensifying the oral trends which otherwise would be just average or even weak. Whether constitutional or derivative of such an intensification, these oral trends, after they go through their normal evolution and make their contribution to the genital functioning of the individual, will leave a particular imprint on the given individual. They will dominate the character of the person. We are speaking here only of so-called normal persons; the predominance of oral im-

prints, therefore, will remain within normal, healthy limits.

Very little enlightenment will be derived from our glibly calling such a person an "oral type," from our pointing out with a knowing air of superiority that he is an oral type because he loves to eat, he is too fat, he talks too much, and his favorite topic of discussion is food. We might as easily say of such a man that he is a gourmand and eats excessively and talks as excessively. The words "oral type" in such a case present a bit of that redundant garrulousness with which the popular mind treats the problems of psychology. An oral personality does not refer at all to a person who obviously and ostensibly uses his mouth too much, or even very much. The word "oral," as it is used in psychoanalytic topography, means that the personality functions primarily on the sources of psychological energy which are most active during the oral phase of development. Such a person may actually be very lean and have an inconstant and captious appetite, because the old infantile oral pleasures of childhood, insofar as they became unconsciously associated with sexual pleasure as such, were—also unconsciously, of course—repressed. These pleasures having thus become associated and repressed, the individual in question may harbor a deep, unconscious feeling of guilt, and instead of indulging himself and becoming a gourmand, he will constantly defend himself against his oral trends and develop an entirely opposite attitude toward food.

Moreover, the oral trends may, and they usually do, manifest themselves in a manner that has outwardly nothing to do with the mouth at all. Instead, they may, and they usually do, appear in the form of the individual's being rather a sociable person who does not like to be and does not tolerate being alone, even as the little baby when

life and external behavior, always utilizes the available energies for its purposes. In the presence of a great amount or a surplus of energy from oral sources, the superego uses this oral energy. It so happens that our oral reactions are not all placid. A number of them, as has been hinted above, are charged with considerable quantities of sadistic drives. Should these sadistic drives, as a result of special conditions of childhood and of the circumstances of training and education, become available to the superego, the unconscious will become involved in a constant and relentless struggle with the attacks coming from the superego.

The individual will have to betray this struggle in the character of his personality. Such an individual will have to keep all the strength of his ego constantly mobilized in order to overcome the excessive demands of the superego; he will show a certain hesitancy and insecurity and yet a certain tendency to snap judgments, as if he were trying to make up his mind as quickly as possible in order to avoid being swallowed up by the superego before a decision is made. This constant gnawing of the superego at the ego leads the individual to seek consolation from others; such people seem constantly to seek the opinion of others, and they live on compliments which they skillfully elicit without being fully aware that they themselves force others to give them. They also show considerable dependence in that they always seek the support and counsel of others even in matters of little importance.

Just as some of the oral trends have here been reviewed, one could review the anal and urinary and many other partial trends of infantile sexuality and demonstrate that the character of a person presents a definite type depending upon the respective primitive infantile reactions. Anal trends are always connected with excessive cleanliness,

parsimony, orderliness, methodical thinking, coldness of heart, purely intellectual propensities at the expense of the participation of feelings. Certain forms of urinary trends are combined with considerable ambitiousness and active pursuance of a goal; combined with anal trends, a unique persistence and a purposeful stubbornness develop. We are not interested here in presenting a detailed psychoanalytic topography—and it would be impossible to present a complete one even if we were, because the variety of combinations and constellations is incalculable and therefore not subject to enumeration. The point of major interest here is to give a more or less definite suggestion that man's normal character is not accidental, that it is determined by the conditions of his most intimate instinctual development, that what we call "character" or "personality" is the outward manifestation of definite patterns the nature and design of which are unconsciously determined.

These unconscious determinants almost never appear on the surface in their original elemental and sexual, hedonistic form. Instead, they manifest themselves through a great variety of psychological and social elaborations. This is one of the points which we should try not to forget; otherwise, we are apt to fall into philosophical obscurities or glib terminological unclarities. "Oral," "anal," "genital"—these words refer to original sources of instinctual energy and not to physiologicoanatomical units, or to deprecatory or abnormal trends. It must also be borne in mind that the sexual life, with its variants and peculiarities, varies in each individual in accordance with the given personality type. That is why one's sexual life in the narrow sense of the term serves most frequently as a clue to the very depth of man's psychological development.

The importance of this point of view is derived not

part of the world reduced to experimental sadism with no happiness afforded to the experimenter or the subjects of the experiments.

The same, *mutatis mutandis*, may be said of the scientist, the poet, the most egotistic statesman, the man of action, the contemplative solitary thinker. All these types, from the most conspicuous in history to that nameless mass which is called the "man in the street," their lives, their creative impulses, their search for happiness or giving of happiness, their fantasies for a better future, their indomitable struggle for the rights of others or their seclusion in mere work, are made up of and dictated by the dynamic forces of our instinctual drives, which arrange themselves in endless constellations of varying combinations of infantile, realistic, egotistic, so-called narcissistic, and altruistic drives. That all these drives, from the simplest to the loftiest, can be traced to their humblest origin—to masses of infantile sexual instincts which are at first but a direct extension of the anarchic, disorderly, and destructive id—is no reflection on or reason for condemnation of the dynamic functioning of man in the atmosphere of his civilization.

It is the understanding of these humble and, to the civilized mind, impure sources of man's activity that offers us an opportunity to utilize these drives in the mastery of our own world about us. Without this understanding, man's anxiety before these drives might lead, as it actually does lead in a great number of cases, to the various ways of abandoning this world while remaining alive in it—ways which are known under the name of "mental illness."

as he does. He actually is improvident. He actually is unable to concentrate. He actually does fail to get along with people. He actually does look unprepossessing and unrepresentable. His thoughts actually are muddy. He actually does not care as he should for his wife and his children. All these things are sufficient reasons, he argues, for him to feel the way he does about himself and about the future, his own and that of the world. The person suffering from attacks of anxiety while admitting that he is unable to account for them is depressed and self-derogatory. He may say that he is just tired and in need of a vacation to "rest up his nerves," or of a tonic to "pep him up." He does not display any curiosity about the causes of his anxiety, and asks the doctor to prescribe to him what he, the patient, feels would dispel the anxiety. He is not at all curious about how to prevent another attack if and when this one is alleviated or removed by "a trip," "a couple of weeks of golf," or "a good tonic." All the mentally ill, those who do and those who do not display or admit to mental suffering, have as a rule no *insight into illness*, and try to avoid being treated directly for their real illness. They either look for improvised makeshifts or openly deny that there is anything wrong with them and seek to rationalize themselves out of the possible suspicion of being neurotic or psychotic.

This lack of insight, which is always present or at least at hand during the prolonged initial stages of the illness, and the *resistance* to treatment are the most consistent and most characteristic differentiating signs of a mental illness. It is difficult to imagine a nonneurotic person who, once he happens to have a toothache or a colic, is not willing to recognize the pain, disregards it to the point of denying that he is ill, and remains steadily unwilling to be treated for relief from the pain. It is not impossible that this re-

sistance to insight and to treatment, which is shared equally by the mentally ill and those surrounding them who are normal, is responsible for the very great number of the mentally ill; early diagnoses under these circumstances are well-nigh impossible, and the great majority of the mentally ill gradually slip into more or less disabling chronicity which is difficult, very difficult, to treat.

That is why mental illness ranks as one of the most, if not the most, important public-health problems in our civilized society. We must take cognizance of certain easily available facts in order to understand the magnitude of the problem. Mental illness is always present in our community. Our mental hospitals are crowded to capacity. We do not have enough hospitals to accommodate all the mentally sick who are in need of intramural (hospital) treatment, and yet in the United States the population of public mental hospitals alone is approximately 500,000. The number of ambulatory patients may be computed on the basis of the fact that one in at least twenty persons of our population has been or is going to be under some sort of psychiatric attention. On this basis we find the unbelievable figure of 6,700,000 neuroses and psychoses in this country. Add to this the number of officially registered suicides, which averages from 20,000 to 25,000 a year—this number would probably be doubled if we consider that many suicides are not certified as such. The magnitude of the problem becomes obvious. Imagine this number always ill of some special disabling physical disease; the public anxiety would know no bounds. Yet so strong is our psychological resistance that there is little agitation and less anxiety about the problem in the public mind. There is little if any serious concern reflected in the daily press or in periodicals outside the special psychiatric press.

Then, too, the suggestibility of people, to which allusion was made early in these pages, is apt to co-operate with our apparently healthy curiosity, and one of the effects of perusing a list of symptoms might be confusion; unnecessary anxiety might be generated. By the same token, the usual procedure of relating detailed case reports is just as inadvisable, let alone the fact that any psychiatric case report is the revelation of a privileged communication on the part of a physician and that, if it is to be practiced at all, it should be strictly limited to the intimate circle of those clinicians whose business it is to study and to treat sick people.

All this may appear to have led us into a narrow and blind alley. Under these restricting circumstances, how can one learn enough to be able to discern the need for early psychiatric help? At first glance it would seem impossible, but it is not. It is not the advance knowledge of the symptoms of neuroses and psychoses that can enlighten the neurotic or the psychotic and cause him to seek treatment, but a recognition of his general orientation in relation to life. If things do not seem to go well, if time and time again one finds oneself in situations which appear similar, which feel similar although they may appear to be provoked by different circumstances, one should begin to suspect that something is wrong—with the person and not with the circumstances. If one is always lucky in always getting jobs and just as unlucky in always losing them, something must be inherently wrong—with the person and not with the jobs. If one seems to fall in love quite frequently and become disappointed just as repeatedly, something must be wrong—with the person who loves and gets disappointed and not with the person who is loved and then abandoned. If in the course of months and years one finds oneself always seeking out people,

always wanting to be with people, and yet always feeling lonely as if the people had proved for some unknown or for some apparent reason disappointing, then something is wrong—with the one who is lonely and not with the group. If one has frequent headaches and, as so often happens, even says to himself or to others, "Every time I get angry at him, or every time he or she fails to do this or that, or every time things go wrong in the office, I develop this abominable headache," something is psychologically wrong—with the bearer of the headache and not with the servants, the office, the business, or the world in general.

What the above examples intend to convey is that every neurotic and early psychotic reaction is characterized by the principle of *repetitiveness*. There is not a single neurotic, no matter how absent his insight into illness may be, who with a moderate degree of self-observation could not notice that there are things about him to which he refers as "Whenever this and this happens, I feel . . ." Whenever one begins to feel the tendency to consider his *fate* as a regrettable one, it is an indication that that fate is probably innocent and that the person in question is probably the unknowing master of his own sorry fate, which he produces by way of repeatedly and unconsciously defeating himself. This is particularly true of those persons who of recent years have become technically known as "neurotic characters." These neurotic characters are not inferior persons, nor are they otherwise inept or inconspicuous. One finds them most frequently among the active personalities, the doers of things. Their name is legion, their troubles are many, their chances for being successfully treated are good, and yet so great and complex is the resistance barrier in man's psychology that because these people are so active and always in the midst of things, they seldom suspect themselves of being the

cause of their complications in life. Perhaps some insight into the psychodynamics of the neurotic character might shed light on the nature of many other neurotic and psychotic reactions.

III

Deep in our unconscious there is the unlimited store of instinctual drives to which we have referred. These drives, while all massed together and rather chaotic, do not express themselves in a chaotic manner except in certain severe psychoses. As far as their expression in behavior is concerned, they are graded, as it were. Some of them have undergone the grind of domestication, and they surrender themselves to the ego and the superego, which take care of them passably well or even very well.

There are persons who have strong erotic drives which have become overdomesticated, so to speak. Such persons become demonstrative, affectionate, outgoing persons who seem to demand comparatively little from others but who "have a way about them," so that they not only give vent to their demonstrativeness but also elicit a reciprocal response of affection. The unconscious original drive is purely erotic and hedonistic, and its aim is the consummation of the erotic relationships toward which it strives, but this drive becomes inhibited *in its aim*, through the overdomestication. It enjoys full freedom of expression, but only as long as it continues to be inhibited in its aim. This type of inhibition may be so strong and so well accomplished that an individual of this type will puzzle many by the singular fact that despite great demonstrativeness and charm and attractiveness he or she may actually never fall in love and never marry.

The instinctual drive not only has an aim, but it also carries with it a feeling tone, an ability to become and to

inhibition

inhibition
of aim

*inhibition
of feeling
tone*

feel attached to people, to love them. Imagine now that the drive is very strong and that, at the same time, not the aim but the feeling tone is inhibited. The drive remains primitive, egocentric, hedonistic; the feeling tone, the feeling of love, is either inhibited or has never developed to adulthood, so that no love flows outward or toward anyone other than the person himself. For practical purposes, we might consider such an individual inhibited as to feeling for others. He will become a Don Juan who appears to love many but actually loves no one, whose erotic instinct always achieves its aim but never cements it with love. He will have had one thousand and three mistresses and not a single real wife.

The total opposite will obtain if the instinctual aim is severely inhibited and the drive itself is combined with a welter of aggressive instincts. We shall then have a Don Quixote. The drives will break through into action. Life will be full of endless, painful, and exhausting activity, while the inhibition of the erotic aim will transform itself into a magnificent idealization. Dulcinea will be ever present in conscious fantasy, never in reality, and the man, bombarded by his instinctual drives, will bombard life itself with their impulsive power, victorious over nothing and defeated by his own aggression. This is the neurotic character: he acts out his unconscious fantasies instead of living them out directly or vicariously in literature, the theater, or art. He must act them out not directly on himself but on the outside world: on combating windmills or real enemies, by entering into endless business ventures in which he succeeds brilliantly only in order to bow at the last moment to his strict superego, which defeats him. The superego always makes him pay with ruination for the daring license with which he disregarded it so successfully for a while. This is the pattern of the men who make three

or four or ten fortunes in a lifetime through a series of successive losses and resurrections from poverty. Their unconscious need to lose when they are rich is as strong and dynamic and resourceful as their conscious need to gain when they are poor. All their instinctual forces, particularly their aggression, are directed onto the outside world, and when victory comes the same aggression is redirected against the very thing they created, but primarily against their own selves. This is their *repetitive* pattern. The neurotic character does not as a rule appear abnormal, although with certain psychological elements rearranged such persons may show gross abnormalities—more to the psychiatrist than the layman.

IV

With the neurotic character as a point of departure, we may now proceed to consider what would happen in the extreme case when instinctual drives, instead of being acted out in various ways, are all pent up and are all, without exception, directed inward—not an iota of instinctual energy turned outward. Let us disregard for the moment the fact that such a combination would seem unthinkable at first. If all the instincts turn inward, they cannot maintain themselves in the organized scheme of id, ego, and superego. The energies used by the ego to deal with reality will then have to return to their source. The energies invested in the superego in order to deal with our ethicosocial reactions will have to return to their source. This source is the id. The energies, having thus been reaccumulated within the id in their original unorganized and undifferentiated form—where they remain, still in accordance with our hypothetical case, turned totally inward—must produce a hypothetical person who pays no atten-

instinctual

tion to the world, who does not talk and does not respond to stimuli, as if paralyzed and anesthetized. Neither stimuli from without nor stimuli from within would then make any impression. Such an imaginary human being would be like a piece of semirigid rubber or wax. If you lifted his arm the arm would remain upraised. If you twisted his leg, it would remain twisted. If the stimulus to urinate or defecate came from the physiological system, this rather strange, imaginary being would urinate and defecate right there and then. Should we, however, try to stimulate him too much—as if in a forceful attempt to awaken him—the whole mass of the id drives turned inward might suddenly turn outward, and the man would hit us impulsively, as if to ward off by means of violence any interference with this inertness and unthinkable self-sufficiency.

The above description is not that of an imaginary being. It is, rather, a more or less accurate description of a person suffering from what is known in psychiatry as a "catatonic stupor," a form of schizophrenia. Such a patient displays even that peculiar physical pliability which is technically known in psychiatry as "waxy flexibility." The impulsive, blind outburst of aggression under certain stimuli is also characteristic of this condition.

Between the acting out of drives and the catatonic stupor, between these two striking psychopathological extremes, one will find the whole scale of imperceptible transitions from what is known as neurosis to what is known as psychosis. The various appellations which are used in psychiatry to denote various abnormal conditions do not denote diseases in the strict sense of the word. The term "mental disease" is only a generic designation.

Physical diseases are separate entities. They are due primarily to some definite outside agency which injures or

invades the organism—be it a severe blow that breaks a leg, or a host of bacteria producing an abscess or a generalized infection. There are, of course, diseases which are not due to any outside invasion but to the degeneration or atrophy or malfunction of a given organ, but in these cases the disease still remains a separate entity because it is caused by the affliction of a definite organ—be it the liver or a body fluid like the blood.

A true mental disease, that is, a psychological disease, does not presuppose any such possibility. Nothing is destroyed. Only the functions, few or many, become disorganized. We may speak of the whole psychological organization as an organ, if you wish, and may conceive of the groupings of the energies which are fed from the reservoir of the primitive instinctual drives—the id, the ego, and the superego—as our psychological organ. Freud aptly named it our “psychic apparatus.” This apparatus—loosely and mistakenly called “mind” and artificially divided by old academic psychologists into emotion, will, reason, and sensation—this apparatus, seemingly so simply made up of three elements, is actually highly complex. Its complexity is due primarily to the fact that it has at its disposal innumerable instinctual drives which produce innumerable combinations. The primitive sadistic drives may be taken over by the ego or the superego, for instance. These and all the other drives remain unmodified only in the id; outside this obscure reservoir they present imperceptible transitions toward domestication and an endless variety of combinations with each other. Therefore in referring to mental illnesses it is impossible to speak of disease entities; it is possible to speak only of personality reactions, which challenge any attempt at classification.

Mental disease, then, is a personality reaction in which the unconscious conflicts come to the fore in such a way as

to incapacitate the individual. The measure of this incapacity is, strictly speaking, unknown. We are accustomed to use, for want of any other convenient one, the social yardstick. If a person is unable to function within the scheme of the human community, whether he has a subjective appreciation of his incapacity (as is generally the case in neuroses and depressions) or whether he has no appreciation of it (as in the major psychoses), the person is mentally ill. Once this loose and admittedly inaccurate but more or less generally accepted criterion is adopted, we must be mindful of the great dangers such a yardstick presents. At first it would seem to be a rather innocuous criterion. After all, physical diseases could in a measure be considered from the same angle. Any physical illness eventuates in a social incapacity subjectively perceived or objectively observed, or both. A physically sick man does not wish to and cannot work or otherwise be active in the community. On the other hand, we would not consider a man suffering from arthritis a well man merely because, having taken a great deal of alcohol or a small dose of morphine, he feels no pain and therefore gets out of bed, dresses swiftly without feeling any discomfort in his arms, and goes to a dinner party or to a meeting or to church. This man is still ill with arthritis, despite the fact that he is back in social circulation and doing well for the time being.

This obvious consideration is unfortunately not always, if ever, applied in mental illness. Because the functioning of the psychic apparatus is not open to direct inspection by eye or microscope or by means of a chemical reaction, one speaks of various degrees of social adjustment as actual degrees of mental health. Imperceptibly, a silent agreement has been made that mental health is a sort of social conformism, a sort of complete and passive and

cheerful acceptance of the standards as they happen to exist in a given group or class. This misconception cannot be undermined too violently and too thoroughly, and yet it is one that is proving most refractory to the assaults of reason and humanistic respect for the individual. This implied standard of conformism springs not from psychiatry but from the particular aspects of our industrial, mass civilization; it crept into psychiatry quite unnoticed. Neither conformism, nor holding a job, nor being "reasonable," nor just getting along with people, is a sign of mental health, although being unreasonable, being unable to get along, being unable to hold a job, may be and often are indications of mental illness. One may make an excellent social impression and even function seemingly well socially and be no healthier mentally than the arthritic was free of his arthritis when, under the influence of spirits or morphine, he danced about the ballroom and was chivalrous to the ladies like a perfect gentleman.

V

What is, then, the criterion of mental health—or rather, of mental disease? Are there any purely objective, well-defined signs of mental disease, clear enough so that any good observer, particularly a psychiatrist, can recognize them with ease and certainty? This question can be answered in the affirmative only with regard to fully developed psychoses which show gross abnormalities of behavior, active delusions, hallucinations, and various other grossly unrealistic trends, and in some cases of severe depressions and very conspicuous neuroses in which "acting out" is prominent. With regard to all other cases—and they are, unfortunately, the majority of neuroses, neurotic characters, and mild or incipient psychoses—there is no

difficulty of diagnosis

obvious external sign conspicuous enough to be called a real sign of illness.

Mental illness is the most discreet of all human afflictions. This discreetness is one of the greatest and most painful difficulties psychiatry has yet to overcome. Even the most acute psychoses which set in with dramatic suddenness, and naturally all other well-defined psychotic reactions, have a long history of gradual and discreet, clandestine development. What we see and recognize as an illness is actually the end product of a long illness which developed so imperceptibly that no one ever recognized it.

As we reconstruct the history of many illnesses, we can see by way of hindsight how the illness developed. In a particular case, we can recognize retrospectively that the keen disappointment which the young man showed some years previously when he failed in his biology exam was actually the beginning of his illness. It all seemed so natural then. A vacation was suggested. The boy refused to go alone or with his father but clung to his mother, and it was his mother who went with him on his vacation. All this appeared understandable enough and very convenient, too, because his father was preoccupied with his business and was unable to leave at the time; the preference for his mother proved a very happy turn. She went with the boy, and she did him a great deal of good, and he came back refreshed and was all right. True, he did not return to college, but in this he and his mother agreed; he preferred to learn his father's business instead, and his father gave him a job and he did rather well for a while. Then, just as he was promoted to be direct assistant to his father, the misfortune occurred. He collapsed one day, and for years afterward he remained a resident of a mental hospital—seclusive, gaunt, in the throes of persecutory ideas,

ogy or clinical acumen of modern psychiatry itself, but rather one growing out of the fundamental nature of man and his psychic apparatus. If we could systematically examine every individual in the manner of a routine checkup, psychiatry of today possesses enough clinical experience and psychological insight and enough critical, scientific means of examination to enable us to uncover the presence of a neurosis or an incipient psychosis even in those cases in which the manifestations of mental illness are too discreet to be observed externally by others or subjectively by the person who is being examined. Unfortunately, such a routine checkup is impractical because of the general prejudice about mental illness, supported by the generalized absence of psychological insight. One does not wish to be suspected of being neurotic; one does not know that one is neurotic until the neurosis is fully and painfully developed.

There is another feature in this problem which could be turned to maximum advantage and is yet not fully utilized. The most frequent manifestations of the early stages of mental disease are a variety of physical symptoms: mild gastric disturbances, vague generalized discomfort, disturbances of appetite, headaches, lassitude, fatigability, "heart flutters." These come first to the attention of the general medical man, the modern semispecialized descendant of the old family doctor. Experienced general medical men frankly admit that from 25 to 35 per cent of their patients come with physical complaints which cannot be explained at all on any organic basis, or can be only partly explained on that basis. Unfortunately, it is not sufficient to attest this purely negative finding. To know that a given stomach-ache does not seem to have any demonstrable organic basis, and therefore to conclude that it *must* be of psychological origin, exposes us to the danger

is thus charged with doing a job which only a well-run and well-staffed organization can do, and it is unfair to the patient.

These expensive and foolish ways of resisting intramural treatment are traditional and conscious, and they are based on the traditional, unconscious, inherent attitude which betrays an almost total lack of faith in any treatment of mental diseases, or rather on the belief that if you leave the patient alone and exercise only physical supervision to prevent a suicide, that is all that is necessary. Questions are asked or inferred. "What does the psychiatrist do in and outside a hospital that we, the sympathetic and understanding relatives, cannot do with proper nursing supervision? Will the psychiatrist *talk* to the patient? And thus make him even more introspective? Is not the patient's trouble too much introspection anyhow?" (There is the mistaken view that introspection is the cause of the trouble rather than the manifestation of it.)

That all this skepticism is directed primarily against psychotherapy can be easily demonstrated by the fact that there is much less or almost no resistance to the suggestion that some physical methods of cure be applied, such as the convulsion therapy which has been in vogue of late. Thousands of patients have been treated with insulin, metrazol, cardiozol, and more recently with convulsions induced by means of an electric current. It is not necessary now to evaluate the true result of this shock therapy. What is important to note is that the average man is inclined to accept this form of therapy. He thinks that his bias in favor of this method is due to the fact that he understands it better than the other methods. He does not, of course. He does not know why he believes in the efficacy of these violent measures. He does not know their dangers. He is not much concerned, for instance, with the violence of the

convulsions, or with the fact that the number of apparent cures is small, or, what is more important, with the fact that those who use the shock therapy do not themselves know why it produces results—if they believe they have obtained good results.

Vague and untestable theories are offered which not only the layman but even the well-trained medical man does not understand. To state that under the influence of the violent convulsions something happens to the brain, and that the nervous system and the cerebral centers of the individual undergo a positive change which brings about a readjustment, is to state a vague, general assumption which is not even a real theory. There is no suggestion in this formulation of any clear conception as to what causes the disease, what the convulsion does to this cause, why and how the person bows to the convincing argument of the convulsion, which often literally breaks his back. Any medical theory, even a false one, must be based on clear-cut conceptions of an alleged cause of the disease with which the doctor is dealing. Any theory which itself admits that it has no definite hypothesis as to cause and true psychobiological effect is a mere belief. It remains only a belief even when it is couched in the idiom of scientific language. The only more or less clear assumption which seems to stand out in the general discussion of convulsion therapy is that the brain is the seat of mental illness and that something useful is done to the brain when the patient is induced to have from two to forty convulsions, lose consciousness, and under certain conditions even forget that he has had convulsions.

This forgetting of the convulsive attacks is frequently set forth as one of the humane features of this treatment which is so dramatic in its course and so inconspicuous in its effect. Two fundamental issues of psychopathology are

thus brushed aside by two inferences: (1) that the brain is the "seat" of all neuroses and psychoses, even of those that the organic neurologist himself calls functional; and (2) that forgetting severe and shocking events is a useful aspect of the therapy of mental diseases. The first of these inferences has been discussed. Of the second, it may be stated as an almost axiomatic truth that true forgetting is impossible unless actual destruction of some brain substance is present. Even when patients are ordered by a hypnotist to forget certain things, and the patients actually forget what they have been ordered not to remember, it has been proved that they suffer from a special type of dissociation of consciousness which is also characteristic of certain neuroses and psychoses. Moreover, it has been proved that even that which has been forgotten by means of hypnosis can be and ultimately is fully recalled under certain special circumstances. In the meantime, while the events are stored away in the unconscious they are not idle, of course. They exert their dynamic influence, which is charged with anxiety in all its gradations from perplexity and so-called nervousness to true horror. To consider solid forgetting a desirable aftermath of a treatment in cases of mental disease is injudicious. The phenomenon of such forgetting might prove a source of satisfaction to the operator and the observer, but it is doubtful whether it is not a source of future serious danger to the psychic economy of the subject. What is forgotten is never dead until the person who "forgets" is also dead.

This discussion might be pursued in greater and more revealing detail, but for present purposes it is sufficient to demonstrate the fundamental partiality of the public and the profession in general toward anything that diverts us from facing our own psychological problems with clear insight, serene memory, and that courage which true insight

provides. True insight relieves us of anxiety in the same manner as turning on a light in a dark room relieves us of the sense of uncertainty and discomfort, which is a dim form of anxiety. The fear of insight drives us to seek for magic, no matter by what dramatic and painful means. It bars the way to the enlightened acceptance of psychotherapy whenever psychotherapy is needed.

II

In the cases of those persons who seem to have accepted psychotherapy, we find the same characteristic skepticism. The questions asked betray the same psychological bias. "Is he a psychoanalyst?" "Is he a Freudian, a Jungian, or an Adlerian?" Even many of those who prefer the only legitimate psychoanalysis in existence, the Freudian, do so because they are prejudiced in its favor and not because it represents to them the rational therapy of choice. They choose their method in advance and proceed to seek out the physician who is going to do for them what they have prescribed for themselves.

This attitude is a feature inherent in the present status of medicine as a whole, not only in psychiatry. With the possible exception of surgery, in which the patient dares not consciously demand an operation if the surgeon does not advise it, the present-day enlightened patient himself appears to have taken over an essential and fundamental part of purely medical functions. In our day of extreme specialization, many a patient seems to make his own diagnosis in advance and then choose the corresponding specialist whom he will put in charge of the treatment. The patient thinks that something is wrong with his stomach, although he actually may have a neurosis or a bad heart, and he goes to a stomach specialist; he thinks that some-

thing is wrong with his foot, although he may be showing early signs of some neurological condition, and he goes to an orthopedist. It is natural enough for a sick man to wish to be certain that he will be in good hands and that he will be treated correctly; but it does seem irrational for a sick man, unable to treat himself, to be able to conclude that treatment is needed and almost automatically to make diagnoses and prescribe for himself special treatment and choose a doctor accordingly. The implication would seem to be that a doctor is no different from a carpenter who knows how to put up a shelf in your kitchen, a man whom you call in and direct to put up that shelf in accordance with plans and specifications which you yourself have worked out.

What is true of medicine is true of psychiatry, where it is the patient who prefers to decide whether the Freudian, the Adlerian, or the Jungian technique will do him the most good. But in matters psychiatric it is not only the high degree of specialization which is responsible for this bias that does neither medicine nor patient any good. There is a special interest in theories of psychotherapies. This interest does not always spring from rational sources, but rather from the same source from which mental diseases come: from the fear of facing one's self, from the need to keep repressed what has been repressed, from the need not to know. It springs from that principle which we establish for ourselves the first day we are confronted with a severe psychological conflict. On that day we make automatically what at first appears to us the easiest choice: we repress, "forget." For the rest of our lives we exert on ourselves the utmost pressure to keep things forgotten even if they cause us all kinds of difficulties. We fail to recognize the cause of these difficulties, and we use the whole psychological armamentarium at our disposal—from ra-

tionalization to the formation of delusions—to keep our true conflict in the state of being forgotten. This is again that resistance of which we have spoken, an almost indomitable psychological force. This is why Freud once stated that the process and goal of psychotherapy is the re-education of the individual in overcoming his resistances.

Psychoanalysis falsely appears in the popular mind as a procedure dealing only with sexual problems, and since our sexual problems are our most delicate problems, charged with more anxiety and more resistance than any others, we oppose psychoanalysis and seek other theoretical orientations, as if theories change man. The general conception of the theoretical differences between Freud, Jung, and Adler is that the last two believed that psychoanalysis in the Freudian sense was not necessary. If we were to examine carefully the theories of Adler, Jung, and the host of very minor lights who offer their own theories, we would find that they all have these things in common: They offer nothing positive as different from Freud; they are mostly polemical; what they have to offer is a series of theoretical considerations in support of their opinion that Freud was wrong and that neither his theory nor his technique of treatment is necessary, that one could do without Freud and without Freudian psychoanalysis. It is a negative attitude that characterizes all these theories, even those which would retain for themselves Freud's term "psychoanalysis"; it is an attitude of destroying rather than of making a positive contribution. It is as if one should set himself to prove that the sun and sunlight are unnecessary, because we can turn on the electric switch, or light a candle, or strike a match. All these sources of light can be used, but without true daylight none of them could have been discovered, and artificial light is at best only an auxiliary. It should be noted that the factual discoveries

of both Adler and Jung can be found fully incorporated in the system of Freud; it is not the rejection of their findings that separates them from psychoanalysis, but their rejection of psychoanalysis. None of the divergent theories is actually related to the therapy of mental illness; they could even be disregarded insofar as our interest in psychotherapy, and its environmental adjuvants which are offered by a properly organized mental hospital, are concerned.

A more pertinent question in this respect is: Who should be considered as properly equipped to practice psychotherapy, any kind of psychotherapy, and who should be considered properly equipped to practice the special psychotherapy known as psychoanalysis? Before the answers to these questions are given, it is necessary to clarify one more point. It has already been made clear that the general interest in what is mistakenly called "schools" of psychotherapy, from the standpoint of its psychological structure, presents an obscure mixture of anxiety, automatic resistance, and prejudice which is only thinly diluted in one's natural conscious concern for one's welfare. As a result of these unconscious trends, the inquiring spirit of man assumes in matters of psychotherapy an almost aggressive attitude, and the demand is raised with ever increasing persistence that the psychotherapist, particularly the psychoanalyst, abandon his secretive attitude about his technique. If this technique is so truly scientific, the argument runs, and if it is so well founded on empirical observations, why not disclose this technique to any intelligent observer? Why keep it a secret, as if it were not a scientific procedure but an esoteric philosophy? The fact of the matter is that there are no secrets of psychotherapy or psychoanalysis which those who practice it do not wish for some reason to disclose. Yet this tech-

does know anatomy and happens to know it well. He will then have understood the surgeon's topographical explanation and will yet know little more than that the appendix was duly taken out. His understanding will fail to be enhanced by his excellent knowledge of anatomy, because he knows no physiology and no bacteriology. Therefore he would not know how the surgeon proceeded, why he had to deal so gently with the peritoneal lining, why he used a special pump during the operation, why and when he had to use a cautery, and why it took the surgeon so long to do this simple appendix operation—for he will not know anything about the patient's anemia, signs of possible peritonitis, the dropping of the pulse rate, or the possible signs of shock. In short, the true technique will not be known to the layman; he cannot be taught, because technique cannot be taught to anyone except the man who is especially equipped and who can be trained by means of actual practice. All this is true of medicine as well as of surgery—be it the management of a pneumonia or that of a diabetes. It cannot be less true of psychotherapy, and there is no reason why the man whose previous education is not sufficient should believe that psychotherapy, unlike surgery, can be taught to any inquisitive, enlightened questioner. No exposé of technical procedures actually teaches much, and therefore no such exposé is required—unless it be, as it inevitably will be, to spread knowledge of many things that ain't so.

The question as to who is fit to do psychotherapy, and especially psychoanalysis, is thus reduced to the question of what the proper training of the psychotherapist and psychoanalyst is, or should be.

III

Considering the purely practical aspects of the problem, it would seem that we should discuss the qualifications necessary to become a psychotherapist first, and those necessary for a psychoanalyst second. There are hundreds of thousands of mentally ill in public institutions and many more at large, while the number of properly trained psychoanalysts is only about two hundred and fifty in the whole of the United States. There are still fewer psychoanalysts in England, and the number in the various other parts of the world varies from two or three (in some Latin American countries) to fifty or sixty (in India and Japan). Yet for purposes of didactic clarity, it will be more practicable if we consider the qualifications of a psychoanalyst first.

We defined a psychoanalyst as a psychiatrist who is also especially trained to practice psychoanalysis. The fact that he is, or should be, a psychiatrist cannot be overemphasized. It is well known that there are many who believe that psychoanalysis is a specialty in itself, and that medical and psychiatric training are not an absolutely necessary prerequisite. There were and are brilliant but medically and psychiatrically untrained minds among psychoanalysts who could and do teach physicians, psychiatrists, and psychoanalysts a great deal. However, what interests us here is not the knowledge and the ability to teach. There are a great many brilliant research physiologists and chemists who are not medical men and who possess an immense store of knowledge and who teach brilliantly in medical schools; some of them are truly irreplaceable. But at their very best they cannot treat people; they have not had the necessary training. By this we understand actual training

in treatment, and not merely the formal preliminary fulfillment of certain standard requirements. Such men do not possess this training and therefore they cannot treat patients. This is of particular importance, and cannot be overemphasized as far as the treatment of mental diseases is concerned.

The lay psychoanalyst does have a special mission to fulfill in deeper research in anthropology and sociology and in teaching and training future psychoanalysts; he need not be concerned with the actual treatment of sick people. But the psychoanalyst must be a psychiatrist for the same reasons that any psychiatrist, as has been explained, must be a medical man. His is a special technique which more than any other method of treatment deals with the unconscious and the unconscious causes of the neuroses and psychoses. The psychoanalyst, by virtue of his special technique, is able to penetrate deeper than any psychiatrist into the otherwise unavailable strata of human psychology and thus make available new psychological facts and new psychological characteristics of mental diseases. His method is invaluable not only in treatment but also in research and the constant advancement of our knowledge of those regions of the psychic apparatus which only he is trained to explore.

Whether the analyst is in private practice or in a hospital, he can see but very few patients during his day's work; his work is psychologically confining, and he does not possess the great advantages of seeing many cases day in and day out, as does the hospital psychiatrist. Were the analyst not to receive thorough psychiatric training in a hospital, he would lose as much of his value as the internist who had never had any training in a general hospital. He would lack one of the most essential components of his training, a training which must be complete. Medicine

and psychiatry are very harsh fields of endeavor; they require all or nothing. This is as it should be, because a doctor cannot do half-work in the treatment of sick people. Although he cannot cure all patients, he must be so trained as to be able to cure fully those who can be cured. Palliatives and half-measures—into the use of which one is forced by half-training—are not of medicine, although they are frequently found in the practice of medicine.

What has been said of the psychoanalyst may be said with equal emphasis of the psychotherapist who is not a psychoanalyst: He must be a psychiatrist, he must have had sound psychiatric hospital experience and should preferably be as familiar as is possible, without necessarily being a psychoanalyst, with the principles of the functioning of the unconscious. The psychotherapist will never have as direct a knowledge of the unconscious as the properly trained psychoanalyst, because the major prerequisite for a psychoanalyst is to have been himself properly psychoanalyzed by an authorized analyst. Only in this manner does one achieve that ability to be in direct contact with the unconscious without which no scientific psychoanalysis, investigative or therapeutic, is possible. The psychiatrist who knows no psychoanalysis, no matter how handicapped in many respects, will do less harm to the patient than a psychoanalyst, no matter how well equipped, who has had no adequate psychiatric training. To know the unconscious is of great value, but if a psychiatrist does not know it well and yet has had a wide experience with many mental patients in hospitals, he will know a great deal about the various forms of human behavior under a number of conditions, and he will have a mass of clinical observations to draw upon which will serve him and his patients in good stead. His knowledge may then be purely empirical and the treatment in many respects eclectic—as

a great many branches of medicine are. But it is only when eclecticism becomes an exclusive principle of therapy that it does harm, because it then fails to observe many things which an open mind and clinical experience would sense and grasp at once.

During the past twenty years great contributions to psychiatry have been made by a number of men who were not psychoanalysts but who did not throw the unconscious out of court. However, it must be repeated that the psychiatrist, while utilizing certain conceptions dealing with the unconscious, cannot by and of himself become an analyst unless he is properly trained, his own psychoanalysis at the hand of an authorized training analyst being the basic part of this training. A common objection has been raised against this basic requirement, and it would hardly need any mention if it were not still persistent and widespread. Why, it is asked, does a psychoanalyst first need to be psychoanalyzed?—Freud was not analyzed. This observation is correct. But by the same token, no one taught Galileo Galilean optics, or Newton the Newtonian laws of thermodynamics, or Copernicus the Copernican heliocentric system. We cannot expect every physicist to be a Galileo or a Newton of and by himself, nor every astronomer a Copernicus. It is the great privilege of the common man that he can be taught and trained in that which the great geniuses were never taught by anyone and which they learned nevertheless.

There are serious misconceptions which becloud the general views on psychotherapy. The reasons for these are manifold. The most important of them is the mistaken view that psychotherapy is any measure that affects the human mind. By the same token, a little over one hundred years ago opium and other hypnotic drugs were considered psychological remedies because they affected one's state of

mind. Psychotherapy is a series of procedures—anything from the mental hospital organization and routine to psychoanalysis—which deal directly with the patient's psychological conflicts. It deals with them not on the basis of clever deception but on that of actual understanding of these conflicts and the functions of the total personality. That is why the general practitioner or surgeon or neurologist, despite his close relationship with his patient, cannot practice psychotherapy unless especially trained, although he may exert a great deal of psychological influence on his patients.

This brings us to one of the most important problems in the treatment of mental diseases, one which is clouded by a number of misconceptions. What is the goal of psychotherapy? What is it the psychotherapist wishes to achieve? The surgeon who removes a diseased organ is certainly concerned with more than the mere removal of the organ. Unless the case is desperate and it is an urgent matter of life or death, the surgeon thinks of the functional result of the operation; he must avoid formation of adhesions which might prove more bothersome than leaving the diseased organ in its place; he must avoid disfigurement as much as possible; he must see to it that certain things are administered to the patient to replace the lack of needed substances caused by the removal of the given organ. One cannot be satisfied with the removal of the thyroid gland and let the patient die of hypothyroidism. A part of the surgical treatment is the properly supervised and judicious administration of thyroid substance after the thyroid gland has been removed. Should the surgeon's goal be limited to the removal of the diseased organ, he would be no surgeon at all, still less a doctor.

The psychotherapist whose goal is the mere removal of the offensive symptom is no psychotherapist at all. What

is to be expected from the treatment of a mental disease? In a general way, one could answer: restoration of the patient to the normal state. This statement is correct as far as it goes but, frankly, it does not go very far. Under "normal state" one apparently has in mind the preneurotic or prepsychotic state, when the patient was supposed to have been entirely well. Actually, however, there is not a neurosis or a psychosis whose history does not extend back to the early life of the individual, as in the case of the young man who wished to kill his father. A careful study of any neurotic patient never fails to reveal that there were many signs of neurosis in evidence for years which were somehow neglected by the observers and the patient himself until the condition became too obvious and too disturbing. In the same way, the prepsychotic personality of a patient always shows a number of characteristic signs which were the basic manifestations of the psychosis before the latter became all too obvious. The whole question of the goal of the therapy of mental disease is complex and in many respects obscure. In a general way, one can say that a proper reconstruction of the psychic economy in the direction of realistic functioning is the true goal. It would of course require a great deal of time and space to describe in detail the nature and the technique of this reconstruction, its probability and its difficulties, and what has already been said of the value of the discussion of technique could be repeated about this problem.

There is a further problem of importance: the goals which mental patients seek to impose upon the psychotherapist, particularly the psychoanalyst. Here again a great contrast is to be observed between the patient's attitude toward the medical man and his attitude toward the psychoanalyst. All the patient expects from the medical man is to be relieved from pain—as if to say: "Doctor,

please take this ache or this colic away and I shall be all right. I shall take care of myself. I consider that health is a state of feeling well and not being aware of my organs."

Many different things and much more seems to be expected from the psychoanalyst. "Will I be happy afterward?" the patient asks frequently. Many years ago, at the very beginning of his career as a psychoanalyst, Freud answered this question by saying: We try to remove their symptoms and leave them with that unhappiness which is common to mankind. Psychoanalysis is not a method of manufacturing happiness, and any procedure calling itself psychotherapy which sets for itself the aim of making people happy transgresses the confines of scientific, psychological medicine and enters that no man's land which lies between naïve sociological magic and quackery.

Another fantasy anticipating special psychotherapeutic results deals with becoming a good man and with what is miscalled "facing reality." As a citizen, the doctor would rather see a man good than bad, but as a matter of fundamental medical principle he cannot be concerned with the goodness or badness of the patient. He cannot draw a moralistic line of demarcation and refuse to restore to health those who are not good people. If this were not so, it would mean that we would impose upon the physician by virtue of his being a physician the supreme judgment as to who deserves to be healthy and who does not. A physician is not a god and, what is more important, he is a human being. Medicine traditionally considers that it originated in temples, and mythological tradition always considers the first healers to have been gods who chose medicine as their specialty. There is a leftover of this tradition in the trend which demands that the psychoanalyst make us good and happy. A great many objections have been raised against psychoanalysis because of its alleged indiffer-

ence to moral values. It is not indifferent to these values, but as a medical, therapeutic discipline it follows medicine's most charitable tradition of not permitting the physician to become the judge of a human being. It intends to remain within the frame and tradition of medicine, which requires that the sick be ministered to without resentment and without moralistic discrimination. It is the educator, the judge, and the religious guide who are charged with the overseeing of the goodness and badness of man, and not the doctor, regardless of his specialty.

Nor is social conformism the goal of psychoanalysis, or of any psychological therapy. We use the term "psychoanalysis" in full awareness that it is only a specialized form of psychotherapy, but as far as the goal of mental health goes, there should be no differences among the existing psychotherapies. Psychoanalysis is here chosen to represent them all merely because it is the most far-reaching and because, by reason of its great but not very profound popularity, so many unreasonable demands are made on it. The reference to conformism is made to illustrate one of such demands. So frequently the words "to learn to face reality" are used in the sense of learning to conform, to comply with the demand of our social environment, to assume the pliable, almost disindividualized existence of an invisible particle of society. Nothing can be further from the goal of psychological therapy, and nothing would be more destructive and deadening if this were one of the goals. To live in a balanced relationship to society is one thing, but to conform to every demand of one's society and thus to give up any creative impulse, any originality of thought or of purpose, would be suicidal not only to the individual but to society as a whole. There lurks behind this misconception a wish to get completely rid of all wishes and strivings and to become an inert mass floating

hither and thither in conformity with every ripple of the indolently anxious waters of Babbittism. This is a not entirely healthy ideal, since it envisages an almost completely anesthetized ego and a thoroughly anemic id. It is a fantasy about something that never existed and never will exist except in severe illness. It is the fantasy of a very troubled conscience which wants dissolution without pain. It is a search for what is called a "philosophy of life" and not for the health of one's psychological endowment.

As a counterpart to this attitude, there is the one which looks forward to a "perfect" analysis, one which would provide perfect freedom, an ability to do whatever one wants happily, without discomfort, without fear, without being ashamed or feeling inferior. Even a cursory analysis of this goal will reveal that the underlying fantasy is that of conquering the superego and the discomfort caused by social pressure and conscience, of weakening it in favor of one's instinctual drives in the hope that the ego will be induced to co-operate with these drives joyfully and without any restrictions. This is an unconscious ideal which is so fully antisocial that it can mean only one of two things: either the ideal of a cheerful, antisocial, criminal career or, what is more probable, the ideal of becoming a playful baby which can do as it pleases, and bask in the sparkle of its drives with no one disapproving. Neither of these possibilities can be considered a healthy, nonneurotic, or practicable ideal. They betray the search for what might again be called a "philosophy of life," and a lurking belief that the psychoanalyst is a mythological demigod into whom we project our own unconscious dreams and whom we therefore consider (unconsciously) a benevolent master of life and a willing servant of our infantile wishes.

There is yet another typical fantasy connected with being psychoanalyzed—that of perfect curability. It is in-

lief, as if this dispassionate intellectual impartiality were actually always present whenever truly scientific problems are discussed, as if the very presence of intense controversy and strong feelings of disagreement were a sign that the problem under discussion is not scientific. The very validity of the scientific issues and the scientific reliability of those who represent the issues involved are considered heavily impaired if not denied by the very fact that such a violent controversy has arisen. This belief has become so strong that we seldom take the trouble to verify its validity and instead try to avoid the issue in one of two ways: Either we reject all the contentions of all the partisans concerned as not pertaining to science, or we prepare an intellectual mixture of all the controversial contentions involved, pare off some, dull the edges of others, and sand-paper down the roughnesses of still others, and accept this eclectic mixture as representing the factual truth which has supposedly been overlooked by all contending parties. The controversy is actually not solved in this manner, but we have the consolation of having escaped its heat without offending anyone.

Were we not so thoroughly partisan in our belief that scientists have or betray no emotions, and were not this stubborn belief a part of our own emotional bias, we might easily discover that man has always felt keenly about things that matter to him and fought fiercely for the discoveries which he has made and which he believes to be true—that the combination of his deep feelings of love for his new discovery with the aggressive drive to protect that which he loves produces controversy, blind spots, temporary intolerance, unfairness, all the attributes which characterize a battle. No battle, no matter how lofty the ideal which is at stake, presents a pleasant sight; it is grim, grimy, harsh, bloody, and contemptuous of both life and

death. This is true not only of political and religious and philosophical controversies, but also of scientific ones. We all wish it were not so, we believe it ought not to be so, but these our idealistic strivings are no reason for our mistaken belief that it is not so. Socrates paid with his life in a similar controversy; Aristotle almost did; Savonarola did; Copernicus might have; Galileo almost did. The contempt in which those were held who dared to start studying human psychology scientifically should be borne in mind; the sneering suspicion which met Pinel's reorganizations of mental hospitals in France is a case in point. The attacks on Darwin for his inferential denial of God are not yet fully over even today. The derisive contempt with which Pasteur's investigations were met by his scientific colleagues is a lively testimony to the prejudices which gnaw the scientific mind at times of transition from one scientific truth to another. The violent controversy between Bechterev and Pavlov about conditioned reflexes is a modern illustration of the same prejudice.

The controversy which exploded around the Freudian discoveries in the past generation should not surprise us, nor, let us repeat, should our basic intolerance lead us to the conclusion that the facts must be wrong just because they aroused so much quarrel. If we are to master the dimming influence of our biases, we must admit that no one defends oneself so violently or is so much disturbed as the man who is called upon to face something new which he never suspected and which he had always (unconsciously) kept hidden from himself as a result of the very anxiety which turns him away from self-knowledge. We would have had more right to suspect that the discoveries made by psychoanalysis were of little factual validity, and of less practical use, if they had been accepted without any controversy or battle; indifference and placidity would

have suggested that they were not really very vital to man. Scientific equanimity and dispassionate serenity are the modern myths of our scientific Olympus and—as on the old Greek Olympus—passions, jealousies, and hatreds rage on in the spirit of one of the oldest although not the best traditions of man.

The only way which offers us a moderate hope of attaining some conception of the truth, with the minimum clouding effect of our intellectual evaluation by our emotional biases, is the historical one. We can treat the whole controversy, or all the major controversies which have been and are seething around psychoanalysis, as being themselves phenomena of how man's mind works on the great battlefield of scientific ideas. We can review this battlefield in the same manner as the historian who wishes to understand what the combatant generals had in mind, how they tried to carry out their plans, what the various objectives were, which were achieved by whom, which were only partial and incidental objectives, and which were the major ones. This method would ensure us against that acrimony or fear which forces us against our best intentions to avoid the real issues and retire behind the battle line, or to become engulfed by the issues and become combatants at the very moment when we set ourselves to be observers and students.

Let us return for a moment to Freud's conception of the psychic apparatus. This conception embodies two salient features: first, that the major part of this apparatus functions under the influence of the unconscious, which is charged with a great deal of energy and which is a dynamic force; and second, that the nature of this apparatus is structural and plastic. For purposes of clarity, we shall repeat that Freud conceived of it as a topographical constellation, as what he called the id, the ego, and the super-

ego. Neither any one of these elements nor the whole constellation is to be conceived of as something organically fixed and visible. This formula is a working hypothesis which helps us to understand and make practical use of a mass of natural phenomena. Moreover, if this structural idea does not correspond to the truth in nature, we shall never be able to think of it in any other terms. One of the limitations or great gifts of our human mind is the need to present things to ourselves spacially; our scientific thought is unable to proceed differently.

The existence of the unconscious and the postulate of its dynamic power were accepted by Adler and Jung, and even by those who today attempt to create a new and rather platitudinous philosophy of culturalism which implicitly and explicitly rejects almost everything Freud has ever written. On the question of the unconscious there is no controversy, except in those scientific circles in which psychology has never occupied any place and which still consider psychology either a part of abstract philosophy or a mechanistic wirepulling of our central nervous system.

Freud did not at once formulate his conception of the psychic apparatus. The first phenomena with which he was confronted were the direct expressions of human instincts, particularly sexual instincts, and he devoted a number of years to the study of these phenomena. He started pondering the problem in the last decade of the nineteenth century, and it took him almost a quarter of a century to collect, classify, and evaluate the immense mass of his observations. During this period he formulated his libido theory and the principles of the functioning of the unconscious, and he kept searching for the origin and mechanisms of anxiety and those forces which are primarily concerned with repressing the many trends and impulses which are held back from being fully lived out. It

was during this period that Freud studied the reservoir of energies which are primarily hedonistic and selfish and primitive. From the very beginning he sensed that there was a great deal more in our psychology than the mere hedonistic impulses. He called some of these elements, with which he was not yet directly acquainted, by certain names, considering the latter merely temporary labels. Thus, he spoke of the "censorship" which distorts our thoughts and even our seemingly spontaneous dreams, and he spoke of the "ego" as the more or less conscious aspects of what we call "self." He went no further for a while. He couldn't, for he did not then know enough. His attention was concentrated on the libidinous drives as he observed them in neuroses, psychoses, and dreams, as he understood them to operate among primitive peoples and—in a distorted, condensed, sublimated, or otherwise modified form—in our daily, normal, civilized life. Libidinous drives occupy a most prominent place, and consequently he paid particular attention to them at first.

By the end of the second decade of his study, enough observations had been accumulated on phenomena theretofore not fully understood, and Freud now devoted his attention to these. The phenomenon of what he called "censorship," the direct social pressures and our response to or struggle with them, the singular propensity of man to punish himself or to appear as if he seeks on occasion pain instead of pleasure and death instead of life, man's inordinate ability to hate to the point of crowding out love (and it was only on love, Eros, which Freud's views were primarily based)—all these phenomena did not escape his observation, but he seemed temporarily to exclude them from his scientific analysis, even as a physicist excludes friction from his experiments when he studies the phenomenon of inertia. The physicist actually does not

exclude friction, for no one can exclude natural phenomena and their effects; he artificially disregards friction while concentrating on the major problem, and later on he examines the phenomena of gravity and friction and corrects his original observations. Freud almost intuitively proceeded in the same manner.

It was during this period that Freud incurred all the opposition that the scientific and the professional, moralistic world could muster (and it was a great deal) to hamper his work and to prevent the growth of its influence. The world that opposed Freud then, as if unable to recover from the first shock, paid little attention to and understood less his contributions after 1920, and the objections leveled against him are still strikingly directed against what he had to say in 1896, 1900, and 1905, thus effectively excluding a proper scientific evaluation of psychoanalysis.

Boldly and quite sure of his ground, which was well fertilized with a quarter of a century of plowing and hoeing and careful study, Freud made a step *Beyond the Pleasure Principle*. He subjected to a painstaking examination all those drives which seemingly contradicted the libido theory. He observed these contradictions without any concern that he might prove wrong in his previous conclusions, which were based on twenty-five years of laborious work. Within a very few years, he re-examined man's behavior as an individual and as a member of a group (*Group Psychology and the Analysis of the Ego*), and formulated his hypothesis of the topography and economic functioning of the psychic apparatus, which he had not understood before (*The Ego and the Id*).

These new contributions of Freud led to the opinion among those who had not studied him, or at least not judiciously, that Freud had changed his views. They went fur-

ther and considered that, since Freud himself had changed his views, he must have been wrong—as if supplementing and elaborating and deepening one's views is not seemly for a scientist. In actuality, Freud did not happen to change his views at all. He merely added new descriptions and finer details of phenomena which he had theretofore neglected or failed fully to understand. He discovered that what he had been studying for twenty-five years was primarily the id, and he found little that he could change in or add to his discoveries of the id forces, the primary instinctual drives. But he found it was necessary to consider the ego in its relationship to the id; he found the ego to be an offspring of the id without which it cannot live. He found the ego a willing playmate of the id but frequently an unwilling servant of the superego, which Freud had encountered under the guise of "censorship" early in his work, some quarter of a century before. Now he found it possible not only to study in detail the other components of the psychic apparatus, but also to inquire more closely into the problem which had baffled him for almost forty years, the problem of anxiety. He did this in his *Inhibition, Symptom and Anxiety*, in 1926.

Again the word spread generally that Freud had again changed his mind. And again the word was untrue, for Freud could not have changed his mind about something he had not known before. The problem of anxiety had remained avowedly a problem until 1926. Freud observed the manifestations of anxiety, studied empirically its ways and manners, but he was admittedly uncertain of its origin. He was more enlightened on the subject when he was able to understand the biological role of anxiety and the role of the superego in its formation. To consider this a change of mind is unreasonable. It is as if we are watching in a casual way the growth of a building and see

cement, stone, and steel used to make a good foundation. We walk off and when we accidentally return to the structure weeks later, we find ourselves ushered inside and upward, and we are impressed with the planks used for the floors; we hear the foreman describe the quality of the flooring. We may then walk off again, wondering whether the architect is really reliable: only recently we saw him use concrete and stone and now he seems to have changed his mind and uses only wood instead; he must have discarded the use of cement and stone as unnecessary. If we return again a month later in the same frame of mind, we may even laugh at the architect, whom we shall find now using slate and heavy wooden beams instead of planks or cement and stone—but we have overlooked the fact that it is the roof being put on a nearly completed structure.

The personal histories of the conflicts with Freud are of no historical importance, and these will be left out of our discussion. The details of Freud's formulations, valuable and interesting as they are, are of no special value in a discussion of the major trends of the controversial issues and of their meaning in the history of this chapter of scientific thought. If we view the work of Freud as a whole, and if we bear clearly in mind its beginnings (the foundation), its growth (the flooring), and its end (the roof that Freud had time to put on before he died), then we shall be able to see these controversies in their proper light. The structure that Freud built is far from complete—no scientific structure is ever completed as long as science exists—but the unfinished parts of this structure are of no great import to us at the moment.

With these limitations and qualifications in mind, let us return to 1910 and 1911, when Freud had barely completed less than twenty years of study of the unconscious. The theory of sex and infantile sexuality had already been

Weakness of Adler -
Does not see the id

formulated, as well as the first theory of dreams. Considerable headway had been made on the road to the understanding of the id—although its designation had not yet been invented. It was the keen intuition of Alfred Adler that at that early date sensed the great importance of ego psychology for the understanding of man. The human ego functions in relation to the outside world. Nature, as a part of the outside world, always reminds man of his frailty. A tornado will swiftly put an end to achievements of years of effort, and a physical illness or old age is as effective in reminding man of his weakness; but somehow the impact of these natural forces against our ego does not stagger our self-confidence. On the contrary, it stimulates us to ever newer efforts and inventiveness. The real sense of inferiority, or inadequacy, or insecurity, torments us in our struggle with our fellow men and with social forces in general. Alfred Adler centered his attention on this struggle of the ego with its social environment.

Many of Adler's observations were not only correct but anticipated the development of psychoanalytic insight into man's inner life by more than two decades. This was Adler's contribution, and it might have become a fruitful and original one if it had not been for the characteristic psychological difficulty with which Adler was confronted, a difficulty common to all who are not sufficiently scientific or psychologically elastic to grasp the scope and power of the reservoir of our instinctual forces, which we call the id. The id is the biological basis of human psychology, and no scientific psychology is possible without due assessment of the biological substratum of man's functioning in his civilization. Adler, perhaps without realizing it, abandoned even the tenuous biological ties which his theory had originally established by his consideration of so-called organ inferiority. He rejected completely the

biological basis of man and unwittingly espoused the traditional self-adulatory, narcissistic attitude of man toward himself; he put man in the very center of life as a whole; he took the current aspects of civilization, the social pressures, as the only sources of personality conflicts. Thus he turned his very progressive, almost prophetic, presentiment about the role of ego psychology into a really reactionary attitude. What had impeded the development of a scientific psychology for many thousands of years was just this attitude—that man is ready-made in a ready-made society, and that man's struggle for power in this ready-made society and the restrictions this society puts on his ego are the source of all psychology, its beginning and its end.

The retrogressive feature of Adlerian psychology was primarily responsible for his rejection of Freud, for his falling back on persuasion and purely rational formulations in therapy, and on social reform for the ultimate change of man. Imperceptibly, this attitude abandoned the medical, biological orientation. Adler's theory became a social theory; clinical considerations became replaced by rationalistic aspirations for social reform or, less openly, by a strange combination of individual conformism and social protest. It is as if Adler stood up and said, "There is only the ego and nothing but the ego, and society is its prophet," or, on occasion, "As far as our ego is concerned, there is nothing but society, and the ego is its prophet."

Those who sooner or later deflect from psychoanalysis with emphasis on so-called culture make the same psychological mistake. They take culture not as a derivative of man's biological growth but as something preformed, as if it were an independent elemental force. They reject the whole substance of man's instinctual life (the id) as if it were nonexistent or as if our biological substratum itself

were totally a part or a derivative of culture. The ego is recognized as the only measure of man, the superego (society) as the only source of anxiety. Such an artificial and diffuse construction of an imaginary man forces the adherents of this orientation to extol man's attributes of creativeness, pride in achievement, self-respect, and idealism, as if these were preformed elements in human psychology and not higher forms of man's psychological evolution. It is as if we should consider the pleasure of breathing in fresh air an esthetic, social manifestation of our appreciation of the beauties of a walk in the mountains or in a park and not primarily the adjuvant of the physiological oxygenation of our blood. Such an orientation inevitably leads to the exclusive consideration of the struggle that has always existed between the individual and society. On occasion it gives the impression of being very liberal and democratic, but fundamentally it is retrogressive in that it amputates man from his nature and wraps him up in an idealized and diaphanous fantasy of perfection to come.

It is difficult, of course, to find a good reason why one should object to a person who prefers to paint for himself an idealized conception of man. There is no harm in this type of idealistic aspiration, and some good might even come from this faith in the essential goodness and beauty of man's ego. It is unfortunate, however, if this idealization, which belongs to philosophy—or, if you wish, to a philosophy of life—claims the right to intrude into a medical discipline which demands that we know man as he is and not as he might or should or some day will be. It is also important to evaluate this idealization from the standpoint of its psychological origin. If it springs from faith in man despite or because of all we know of him, and because we do not deny any of his fundamental weaknesses and handicaps, such a faith might become one of the motive

forces for a true creative effort for the betterment of man. But if this faith springs from an assertion which is based on a denial of what man really is, then it is based on a fantasy which is futile from the scientific point of view.

Such fantasies are generated by anxiety. It is our fear to recognize the id that forces us to deny it and claim that we just cannot find it, that we do not see it, that he who asserts its existence suffers from a fantasy. This has been the fate of all those who did not dare to face man's biological, primitive nature; they always escaped into fantasies of the preformed man in a preformed world. The Bible certainly cannot be suspected of having been too derogatory of man, and yet the age-long and wise intuition on which it is based described the original fall of man not in terms of social pressures and religious postulates but in terms of his own frailty, his inability to withstand the demands of his hedonistic, unsocial, and antisocial id. The fall of Adam and Eve and the tragedy of Cain were human tragedies which the very substance of man's living has perpetuated for ages. And for ages man has been afraid to see in himself the sources of his original fall; he has been afraid to behold the serpent within himself that beckoned him with the offer of forbidden fruit.

The modern exclusivistic culturalist who claims the field of psychological therapy as his own makes the sorry mistake of overcrowding the concept of culture with many aspects which are foreign to it. He makes of this culture a sort of Januslike serpent with one face frowning like a cruel superego and the other smiling like an ally of the ego, even as a part of this very ego. All this is a little confusing, we admit—but such confusion is inevitable in all those cases where man is not considered in his totality.

Carl Jung, whose profound insight into psychological phenomena made him a wonderful observer and a keen

Jung's rejection of the id.

clinician, found himself stranded in a confusion similar to that of Adler. At the moment when Freud was completing his study of the id, Jung, like Adler, felt the need to reject it. Unlike that of Adler, however, Jung's rejection of the id was based not on a positive finding or on the presentiment of such a finding, but on a purely negative impulse. Adler sensed the importance of the ego and its ways and means to defend itself against injury. He was no more ready to formulate a clear conception of it in 1911 than Freud was. Freud preferred to wait and study, to preserve what he had already learned and that of which he was sure; he formulated the concept of the ego a few years later, when he had enough observations to justify his doing so. Adler could not wait; he preferred to drop what had already been learned and to take the first available vehicle through which the ego acts—society, civilization—and to build around it a philosophy instead of a working hypothesis.

Jung's real interest was the very subject he and Freud had been studying, the id—man's instinctual drives, his sexuality, his infantile sexuality—and all the conflicts which are thereby generated in man. Jung's very fascination with the subject confronted him with a problem much more difficult than Adler's. Jung was unable fully to face what he saw; yet he was equally unable to deny what he saw. Jung's conflict was between the superego and the id. He solved the conflict by means of a characteristic psychological compromise. Jung accepted the existence of a considerable part of the id, but he disindividualized and desexualized it. The whole id became not a reservoir of drives which press and burden the individual but an inheritance rather impersonal and symbolic. He postulated the existence of a collective unconscious which is alike in all people. This unconscious is the carrier of a universal

symbology, and everything that man feels and lives on in his unconscious is the result of these collective universal inheritances. It is as if one postulated the existence of collective lungs or brains. Jung went beyond the individual into the universal, whereas a psychology, particularly a psychology which is interested in the treatment of mental disease, cannot lose itself in universals.

Jung's contribution cannot be overestimated, because many of his empirical observations were poignant and cut deep into man's unconscious. But he failed to justify his claims. He too, once he had taken his position, found it necessary not only to assert it but to discard everything psychoanalysis had discovered up to that time, and to assert that his was the only explanation of all the psychological phenomena which come to man's attention. Again like Adler, Jung felt the need to assert that he had found *the* source of all psychology, as if the latter has but one source and as if Freud derived it only from the id. To a considerable degree Jung's original difficulty was the same as Adler's; both men sensed before Freud that the libido theory alone did not suffice. But their scientific personalities being what they were, they precipitously threw themselves beyond psychology and back into philosophy. Both Adler and Jung were, with one exception, Freud's most brilliant and most capable colleagues and pupils, and both apparently could not stand the slow pace and the tenacity of Freud's scientific work. Intuitively running ahead of him, knowing not clearly what they rightly anticipated, they became lost in monistic generalities. That our universe is pluralistic and that we ourselves and our psychology are pluralistic, they had to overlook or to deny, and they became regrettably lost to psychoanalysis.

Almost the same can be said of Otto Rank, who was almost a genius and one of the keenest minds ever to have

Rank

worked with Freud. Rank anticipated the need for a more definite clarification of the problem of anxiety. He formulated his views before Freud was fully ready to state the results of his observations on the same problem; Freud revised his views on anxiety two years after the appearance of Rank's formulation. What there is truly empirical or clinically verifiable in the Rankian observation was accepted by Freud and became a part of psychoanalysis, as were accepted some of the basic observations of Adler and Jung. But once Rank had formulated his hypothesis of "birth anxiety," he found it necessary to reject everything psychoanalysis had learned and to consider birth anxiety as the one and only source of all psychological difficulties. He too fell victim to theoretical and philosophical exclusivism.

The place of the so-called controversies with Freud in the history of psychoanalysis is clear. These controversies were not brought about as a result of disagreement about facts observed, but as a result of mental attitudes which were purely theoretical and which threatened to deprive psychoanalysis of its scientific foundation—its clinical empiricism. It is not dangerous to create theories, but it is dangerous to press theoretical and philosophical preconceptions in place of clinical facts and working hypotheses. The controversies are in themselves highly instructive, insofar as they reflect the fundamental problem with which psychology has struggled from the very beginning of man's interest in the science of man. They reflect our own fear of our own selves, and our methods of defending ourselves against that which we ourselves seem to seek: insight.

sensitive and responsive to the vital problems of his day.

While many individual psychiatrists during the past four hundred years have failed to live up to the demands inherent in their professional interests, psychiatry as a whole has continued in the path of sociomedical problems. An ever increasing demand for the humane treatment of the mentally ill kept the psychiatrist in the very midst of the struggle for the preservation of the dignity and freedom of the individual which was the keynote of the French Revolution and its less cataclysmic reverberations in England and in Germany. The building of public institutions for the mentally ill not only engaged the social, humanitarian ideals of the psychiatrist but made it inevitable that he take special interest in the administration of his country, in politics and public finance.

There was and is another reason for the psychiatrist's imperative interest in public problems, one that keeps him intimately in active contact with the civilization of his day. In the sixteenth century the witch was considered not only a crass sinner but also and primarily a criminal sinner who had to face the admonition of the Church as well as a regular trial in the courts of law, canon and secular. The psychiatrist had to have an intimate knowledge of the law of the land, to protect the alleged criminal as much as to treat him. Scientific and humanitarian interest in criminology thus became an integral part of psychiatric interests. It is quite evident that long before psychiatry became a separate medical specialty it was made aware of sociological, cultural problems as intimately associated with its scientific and therapeutic work.

In the course of the nineteenth century psychiatry accumulated a vast amount of clinical observations. The latter part of the century became very much concerned with bringing order into this impressive but confusing

mass; this was the golden age of classifications. It must be remembered that despite the mass of material and the vast experience the profession possessed, it still did not possess a real working psychology of mental diseases. Perforce it limited its classificatory work to what we may call the "appearances" of mental diseases, not their inner, psychological content. What mental disease was remained pitifully unclear, and it was known under its more or less derogatory names of "insanity," "psychopathies," "mental degeneration." What it is that makes a man strange and even queer and yet keeps him from being "insane" was not clearly understood. It is not completely understood today, but at the end of the nineteenth century no one had an inkling of the dynamics of human psychology. The neuroses were not fully differentiated and still less understood.

The problems of human psychology, however, did not wait for the psychiatrist to understand them; they imposed themselves on the observer. These problems began gradually to slip away from the hands of the philosopher, the theological moralist, and the lawyer, who for centuries had considered them their pre-eminent domain. The psychiatrist, gradually even though unofficially, was imperatively called upon by life itself and by the nature of psychiatry to attempt to solve these problems. Psychiatrists began to write articles on criminology with increasing frequency. They studied the lives of artists, writers, and philosophers, seeking to point out the psychopathic components of their talents or geniuses. The relationship between genius and insanity, insanity and crime, crime and heredity and insanity, became a serious, pre-eminently psychiatric problem. No working solution of the problem was in sight, however. The formal aspects of the issues

seemed clear, but a working psychological hypothesis was wanting.

It is on this background that our century opened. It looked askance and puzzled. Biology and natural sciences, which had helped general medicine rise to what only a century ago would have appeared unimaginable heights, failed to offer any coherent natural history of the human mind. Darwinism and microscopic pathology served as an extraordinary impetus and instrument for the development of embryology, for the study of the natural history of the human body from its inception to adulthood. But the application of biological thinking to the embryology of the human mind was still considered unthinkable, and it was left to our century to perform this task or at least properly to embark upon its performance. This work was carried out on the initiative and under the impetus of psychoanalysis as it was founded and elaborated by Freud.

The above statement should be considered not in the light of the writer's obvious adherence to the majority of Freud's scientific tenets, but rather in the light of the actual development of the social sciences during the past thirty years. Even a cursory perusal of recent anthropological and sociological contributions reveals rather conspicuously the influence of psychoanalysis on both the method and the deductions of contemporary social scientists. It is interesting to observe that the views of Adler and Jung, which are seemingly more biased in favor of a purely sociological and philosophical orientation, have left a comparatively small imprint on the social sciences. Freud's hypotheses have apparently proved much more useful to the anthropologist in the field and to the student of social phenomena in general.

There is a potent reason that psychoanalysis should have influenced social sciences to such an extent. Since

psychoanalysis is a discipline which studies the deeper and most primitive layers of the psyche and their relationship to the individual's reactions to his current life, the psychoanalyst was at once plunged into the very midst of sociological problems. Insofar as the individual's ego psychology is to be understood, we deal constantly with social reactions, with the individual's responses to his environment, with his reciprocal relationship to the civilization in which he lives. Insofar as the major sources of psychological energy are to be found in the id and in that pelucid, partially differentiated area which marks the points of contact with the ego and the superego, and again insofar as we carry within our unconscious dynamic leftovers of our infantile, primitive past, the psychoanalyst is forced to deal with the problems of our cultural past as well as with those of our current civilization.

That is why Freud's mind turned toward anthropological and sociological problems soon after his libido theory had been formulated and he became aware of the new problems which emerged from his detailed study of the id. Freud was not an anthropologist, of course, any more than Aristotle was a psychologist or a biologist, but his intuitive apprehension of the primitive drives in man proved as fruitful as Aristotle's sagacious presentiment of certain principles of biology and psychology. Freud's speculative hypothesis about the earliest, prehistoric phases of the development of the human community was at first as startling as it appeared incredible. He conceived of the primitive horde of man living under the autocratic domination of the male head of the primitive family. He conceived of a state of fear and revengeful spirit on the part of the sons, who waited for the time to come when they would be strong enough to join together in a concerted effort of murderous co-operation and kill their father.

or useless. Within a period of twenty years, Freud's original anthropological hypothesis not only proved useful in clinical work but also became recognized by some of his previous opponents in the field of anthropology. The fact that the most primitive layers of our unconscious still follow the most ancient primitive patterns lent considerable support to Freud's concept of the primitive horde. The revengeful attitude of an eye for an eye—known as the talion principle—the murderous and cannibalistic trends, are all found in the unconscious of our civilized man, and they offer a mass of detailed data corroborating the history of man's instinctual growth and subsequent cultural adaptation.

The old anthropology, like the old psychiatry, never was concerned with the question of the dynamics of psychological factors. Its proponents studied only the external manifestations of human life, only the forms rather than the content. It was under the impetus of Freud that both psychiatry and anthropology turned their attention to the ideational content and dynamic values of psychological reactions. It was this new angle of approach that led to discoveries of what actually goes on in man and how primitive cultures actually functioned. The anthropologist, since Freud's contributions have attracted his attention, has changed considerably in his method of approach. He not only now collects formal data but seeks to understand the actual content of the thoughts and feelings of the primitive individual. He sets down the folklore and elaborated beliefs of the "savage" not as paralogical curiosities to be listed for the record but as fundamental manifestations of deep, psychological meaning. Through the comprehension of these meanings he is able to reconstruct the history of primitive civilization, and through it the history of man, as an evolution of our instinctual drives

and their modification in the process of solving our human problems and in our adaptation to nature and to our fellow men.

The anthropologist began to study psychoanalysis and the psychoanalyst began to study anthropology. The so-called paralogical thinking of the primitive man became thoroughly comprehensible and even highly logical, not in the sense of the formal logic of our intellect but in the sense of the dynamic relationship between human drives. By the same token, the logical intellectualizations of man, which had never been able to shed much light on man's real motives and on the self-contradictory aspects of his behavior, were accorded their proper place in human psychology (it proved to be a very modest place indeed), and man's true motives and behavior became understood in the light of his rather paralogical unconscious.

It is easily seen that this first incursion into social sciences by psychoanalysis was not accidental. It grew out of the keenly perceived need to look for special sources of information which neither anatomy nor physiology was able to provide. Psychiatry was immeasurably enriched as a result. The theretofore totally incomprehensible mental diseases, such as schizophrenias (the old *dementia praecox*) and a number of related psychopathological reactions, suddenly acquired a clear, logical meaning. It was discovered that the manner of thinking and the nature of the emotional experiences of the schizophrenic—his hallucinations, his delusions, his elaborated yet so disjointed fantasies—are not due to some fundamental intellectual defect but to a psychological regression to a primitive, archaic level of instinctual expression and adaptation. The schizophrenic proved to be the experimental laboratory for the newer hypotheses in psychopathology. Just as primitive civilization offered a clue to the understanding

of certain mental diseases, so did a deeper understanding of mental diseases offer greater understanding of the primitive civilization. The worship of the dead among the Balinese and certain aspects of the suicidal drives in modern man were found to be psychodynamically related. The puberty rites and human sacrifice among primitive peoples were found to be related to a number of modern depressive and anxiety reactions found in neuroses and psychoses. The delusionary formations in the schizophrenic were found to be related to the magic orientations of some of the primitive peoples.

The opening of these new and rich sources of knowledge opened also a new chasm between general medicine and psychiatry. General medicine, concerned exclusively with anatomy and physiology, found itself as much a stranger to anthropology and other social sciences as the law is a stranger to chemistry. This added element in the divorcement of medicine from psychiatry was naturally highly regrettable, but regrettable as it was, it brought psychiatry a step farther on its road to becoming a definite medical specialty.

II

Social sciences became to the psychiatrist, and particularly to the psychoanalytically trained psychiatrist, an essential source of knowledge and a matter of considerable concern. The sociologist could continue in his old academic path of pure description and purely intellectual construction, or he might choose to apply the more penetrating method of psychological analysis—it made little difference to him, perhaps. But the psychoanalytic psychopathologist was faced with a real problem. For want of any help from the sociologist, he had to enter the field on his own and learn what he could. He needed knowledge

cover for hundreds of years. The crumbling of an empire or a civilization is as frightful and staggering a blow to its contemporaries as it is a dazzling and magnificent sight to the descendants of a thousand years later. But it is doubtful whether the periodic intensification of human aggression on a world-wide scale is due merely to that nonestablished although definitely stated entity entitled "neurosis of civilization," or to "universal delusions." As soon as we extend the therapeutic field of psychoanalysis to the universe, we enter the realm of Utopias, and psychoanalysis, or psychiatry, or both, become philosophies instead of therapeutic disciplines. It is rather trite to state that no philosophy has ever cured humanity of any of its troubles.

In justice it must be stated that Freud never alluded to the possibility of curing civilization. In considering our difficulties with and within our civilization, he left the distinct impression that these difficulties are of a different, noncurable order. He might as well have recalled his statement of almost forty years previously: We try to remove their symptoms and leave them with that unhappiness which is common to mankind.

Yet one cannot pass over without any further thought this aspiration to cure our culture of its ills by means of psychoanalysis. Those who recommend it directly, in the form of a "social science medical center," or those who are more cautious and merely express the general belief that, enlightened by the newer psychology, we shall achieve the ideal of democracy and a state of true international conscience, all betray that faith which is found in certain patients who dream of a perfect psychoanalysis that would in turn make them perfect.

state of dynamic pressure and seeks to reassert itself, to re-emerge to the surface.

The individual has to spend a great deal of energy to hold back and counteract this dynamic pressure. This is the typical picture of an unconscious conflict. Sooner or later the repressed does break through, in part at least. The scientist under these circumstances does not, or at least does not always, abandon the scientific attitude for which he has paid such a high psychological price, but he at once tries to reconcile this attitude with the re-emerged trends which oppose his scientific cynicism. He adopts the idealistic attitude as a rational conclusion derived from his scientific work, and tries to project into the future an ideal picture of the ultimate achievement which man is to expect. He is apt then to put his own scientific findings at the disposal of his narcissism, which has not acquired the form of an idealistic aspiration. This final solution of the psychological conflict is actually a useful mechanism in our social life. It not only helps us to obtain relief from the state of anxiety which we experience at the glimpse of what man's nature really is, but it also stimulates us to put to practical social use many of our purely scientific findings.

These are the psychological mechanisms, or the workings of our psychological instruments, which make it impossible to have a "science for science's sake" or an "art for art's sake." Whatever interests we may take up, we convert them sooner or later into activities in the service of a better future, our own or that of humanity in general. To convert our knowledge of anatomy and pathology into public health activity in order ideally to eliminate illness is the logical turn of our scientific interests. All our public activities and aspirations for the future are products of the same psychological constellation, in which the un-

realistic sense of our perfection *returns from the repressed* to become a creative, social force. The words "return from the repressed" make up the technical phrase by which Freud designated this psychological phenomenon.

We may now be able to estimate a little more realistically the question of social perfectibility by means of psychoanalysis. Yes, a great deal can be done for the mentally ill, and a great deal can be done to broaden our understanding of social phenomena, by means of psychoanalysis. But it is highly questionable whether at this or any later stage of development psychoanalysis is ready to accept our unconscious, narcissistic idealism as it returns from the repressed and make good use of it to cure society. It is questionable, because there are a number of major sociological problems which psychoanalysis does not yet understand or has not yet even approached properly. There is the economic problem, for instance. Some economists, notably George Soule, have made a valiant beginning in this connection, but it is obvious that the instinctual elements entering into the play of economic forces have not yet been properly assessed and their constellations not yet even properly conceived. Nor has there yet been any consideration of the problem of aggression in the frame of social reference. To draw a mere parallel between the individual and society and then inferentially to consider society an arithmetical, summational result of an accumulation of individuals is obviously not enough; such parallels may lead to rather singular conclusions.

If we are to aspire to a better future society by way of bringing each individual into a state of social sainthood and thus bring about the sainthood of society itself, we ought also to assume, no matter how silently, that the instinct of aggression, a biological force of no mean dynamic power, will have to be abolished. It can only be re-

fighters on the defensive, he will admit his preference for a good knockout and even admit that many of the fighters could be much more useful to society if they did some real work, and that many of them sooner or later become punch-drunk or go blind or become otherwise incapable of doing useful work. Our fight enthusiast will admit all these facts and finally say that after all no one forces the young man to become a fighter; it is his own free choice. Our fight enthusiast thus relieves himself of any sense of responsibility for the institution of prize fighting. That he and so many of his fellow men support it morally and financially, and that no young man would wish to be a fighter if no one would support fighting, does not occur to him. He is inclined to consider the institution of boxing as the creation of the prize fighter himself.

It is by means of this honest hypocrisy that we find outlets for a number of our unsavory instinctual drives. Our culture, which is represented by this set of rationalizations, is permissive, although it may contradict itself as it does in the United States, where prize fights are so popular and bullfights are forbidden—as if to say that the bull is really forced into the arena against his will while the prize fighter is in the ring as a free man. Here the concept of freedom is based totally on the disregard of or failure to recognize the imperative play of forces which lead people to become prize fighters. Having developed the conviction that the pugilist is in the ring to be battered and bled of his own free will, we can now feel free to go to prize fights of our own free will. All this gives us the feeling of being free and freedom-loving, of enjoying good, clean fun devoid of ill will and sadistic drives. Because it insists that we all have equal opportunities to become prize fighters or Presidents, this sense of freedom which our culture offers us permits and helps us to enjoy the gratification of

sadistic drives which are neatly tucked away to slumber under the protective cover of our cultural rationalization. We are helped further in this same direction by the fact that our civilized society makes prize fighting an institution. We pay for our fun as we pay for our groceries, and we are entitled to have it as we are entitled to have our groceries.

This permissive nature of our civilization is not merely a curious, psychological feature, a sort of fortuitous by-product of our civilized living. It is probably one of the mainsprings of our civilization, for any society which would offer no outlets to our repressed, forbidden drives would probably crumble under the very weight of the accumulated power of undischarged drives. This probably explains why in countries living under very severe dictatorships, where oppression is nearly absolute, the state develops strong aggressive drives which are directed toward conquest. The dictator must provide the oppressed citizens with a good opportunity to give vent to the hatred and destructive drives which they are forced to repress. This is one of the outstanding psychological features of Fascism. The more the individual citizen is forced not to count at home, to be a nothing, the more powerful the repressed drive which makes him megalomaniac in relation to the rest of the world. He feels superior to the outside world in proportion to being actually inferior in relation to the regime under which he lives, and he wants to dominate the world. Should he fail in this, he will have to destroy the very regime which made him megalomaniac, or destroy himself. This is also probably the psychological secret behind the fact that the democracies, which are in many respects more permissive in their cultural patterns, are so slow in the development of their aggression against a for-

eign enemy; they live out their aggression in smaller doses in their daily lives.

By the "permissive nature" of culture we do not have in mind only the sublimation of some of our forbidden drives, but also, if not primarily, the accepted forms of more direct expression of aggression. Sublimation is, after all, a transformation of asocial and antisocial suppressed drives into socially useful activities. Surgery does its work by way of such sublimation. We can assume, for purposes of brevity and to avoid complex psychological analyses, that the drive to mutilate and destroy, which is properly repressed, is duly expressed in the practice of surgery. The transformation of the instinct as it is seen in surgery is almost absolute; the surgeon operates only in order to preserve life, and not to put a violent end to it. He cuts to cure, and he tries to cut as little as is humanly possible and to leave as small a scar as possible. In other words, the original drives, which had as their aims (every instinctual drive has an aim) mutilation and murder, first became fully repressed. Then the aims were completely inhibited, and the drive itself became utilized for other aims, which in this case are just the opposites of the original ones. They are charitable and useful aims: the preservation of life and the maximum cosmetic results possible under the circumstances. This is a true sublimation.

What we described under the return of the repressed is not sublimation in the strict sense of the word, however, or not sublimation alone. In the case of the poker-players or the prize-fight enthusiast, the original aim—the pleasure obtained from actually gratifying the instinct, from getting something for nothing and deceiving for purposes of gain and seeing a man beaten up and beaten down—is fully preserved. It is *rationalized*, but it is preserved almost in its primordial nudity or crudity.

ity. They do. As perfect testimony to this active return from the regions of the repressed stands out the worship of the embalmed body of Lenin, in the most magnificent sarcophagus of modern times, in the Red Square in Moscow. From the purely rational point of view, one cannot help observing that there is an inherent contradiction between the abolition of the Greek Orthodox catacombs, in which the remains of saints were kept for centuries, and the erection of an open tomb containing an embalmed corpse which is no more Lenin than an image of bread is food. From the psychological point of view it is as much a fetish as any primitive fetish. It not only symbolizes the return of the repressed drives which create in us beliefs in magic; it is actually a magical instrument which inspires people to idealistic magic worship. It is the true expression of a metaphysical state of transport which must be lived through and acted out even in an atmosphere of complete historical materialism and economic determinism. The cultural, materialistic fabric of the Soviet Union, with all its hostility against anything metaphysical and superstitious, contains unmistakable and even flagrant permissive threads of idealism and magic without which it seems unable to maintain its psychological integration and cohesion. It is magic and ritualistic in nature, and it presents a direct, only slightly sublimated gratification of a repressed, primitive drive.

The same may be said about the funeral ceremonials held for the great leaders of the Soviet Union. When Maxim Gorki died, his embalmed body was borne by the leaders of the Government and his heart was carried in an urn and buried separately. Neither modern physiological science nor modern economic philosophy claims that the actual anatomical organ called the "heart" is the bearer of all that is of greatest intellectual and spiritual value in

Freud was not optimistic enough about man is fatuous; an empirical science cannot use as its points of departure such emotional predispositions as optimism and pessimism and still maintain its scientific position. These emotional premises can therefore be totally disregarded. The logical position of the extreme culturalist could be stated as follows: Culture makes man and man, who is made by culture, should remake the culture to remake man. The logical position of the extreme and literal adherent of the theory of instincts is hardly more tenable, for he dwells only on the purely personal history of the individual and is apt to fall into the error of considering man the complete master of his culture and to look upon psychiatry and psychoanalysis as the keys to the Kingdom of Heaven on earth.

The true origin of civilization is unknown and is fathomed only dimly. Our hypotheses about it have not yet been sufficiently tested. Social sciences which ponder the problem are in the same position as psychology when it looks into the origins of the human mind, or physics when it attempts to solve the problem of the origin of matter, or biology the origin of life. They are all forced to enter the intellectual twilight of metaphysics, which remains metaphysics even when expressed in terms of the scientific idiom. Psychoanalysis and psychiatry cannot escape the same fate if they attempt to offer a solution as to the origin of civilization or the cure of our social ills. All a scientific psychology of man can do in this respect is to examine the actual workings of our culture and its psychological manner of manifesting itself. Even this it has not yet been able to do very efficiently. Its method has achieved considerable efficiency and accuracy when applied to the study of individual psychology, but its application to social phenomena has not yet been properly worked out. All that can be

done at the present juncture is to point out predominant psychological forces which come to light at various stages of our civilization. One example will suffice to illustrate what we have in mind.

The late medieval, feudalistic civilization is in considerable disrepute in our modern world. When we think of the feudal ages, pictures of oppression at the hands of the feudal lords appear before our eyes, of the senseless disregard of human dignity, of the bloody adventures of lay chieftains, of the sorrow, disease, and death which were the Crusades, of the universal ignorance and superstition and the utter poverty of the passive masses of the people. We should not be deterred by these true pictures, the stark reality of which is undeniable. These aspects of medieval civilization are the external aspects of human aggression, which stands out either as an oppressive, crushing power of man over man or as a passive prostration before the strong in a spirit of self-debasing humility. We shall have the opportunity to say something more about this in our discussion of the varieties of human aggression. What we have in mind for the moment is not the ever present aspects of aggression which can be seen in all civilizations under various unattractive guises, no matter how sugar-coated by idealistic rationalizations. We are concerned primarily with the daily functioning of the average man on an average day on an average level of a cultural tradition in which man is dominated by man. The psychological nature of this functioning is the same whether in the primitive horde, in ancient Greece, in the Roman Empire, in the Middle Ages, or in our contemporary, industrial world.

The feudal culture was primarily agrarian. The industry of the time occupied a place between art and industrial production. The shoemaker was as much an artist as a

Freud was not optimistic enough about man is fatuous; an empirical science cannot use as its points of departure such emotional predispositions as optimism and pessimism and still maintain its scientific position. These emotional premises can therefore be totally disregarded. The logical position of the extreme culturalist could be stated as follows: Culture makes man and man, who is made by culture, should remake the culture to remake man. The logical position of the extreme and literal adherent of the theory of instincts is hardly more tenable, for he dwells only on the purely personal history of the individual and is apt to fall into the error of considering man the complete master of his culture and to look upon psychiatry and psychoanalysis as the keys to the Kingdom of Heaven on earth.

The true origin of civilization is unknown and is fathomed only dimly. Our hypotheses about it have not yet been sufficiently tested. Social sciences which ponder the problem are in the same position as psychology when it looks into the origins of the human mind, or physics when it attempts to solve the problem of the origin of matter, or biology the origin of life. They are all forced to enter the intellectual twilight of metaphysics, which remains metaphysics even when expressed in terms of the scientific idiom. Psychoanalysis and psychiatry cannot escape the same fate if they attempt to offer a solution as to the origin of civilization or the cure of our social ills. All a scientific psychology of man can do in this respect is to examine the actual workings of our culture and its psychological manner of manifesting itself. Even this it has not yet been able to do very efficiently. Its method has achieved considerable efficiency and accuracy when applied to the study of individual psychology, but its application to social phenomena has not yet been properly worked out. All that can be

done at the present juncture is to point out predominant psychological forces which come to light at various stages of our civilization. One example will suffice to illustrate what we have in mind.

The late medieval, feudalistic civilization is in considerable disrepute in our modern world. When we think of the feudal ages, pictures of oppression at the hands of the feudal lords appear before our eyes, of the senseless disregard of human dignity, of the bloody adventures of lay chieftains, of the sorrow, disease, and death which were the Crusades, of the universal ignorance and superstition and the utter poverty of the passive masses of the people. We should not be deterred by these true pictures, the stark reality of which is undeniable. These aspects of medieval civilization are the external aspects of human aggression, which stands out either as an oppressive, crushing power of man over man or as a passive prostration before the strong in a spirit of self-debasing humility. We shall have the opportunity to say something more about this in our discussion of the varieties of human aggression. What we have in mind for the moment is not the ever present aspects of aggression which can be seen in all civilizations under various unattractive guises, no matter how sugar-coated by idealistic rationalizations. We are concerned primarily with the daily functioning of the average man on an average day on an average level of a cultural tradition in which man is dominated by man. The psychological nature of this functioning is the same whether in the primitive horde, in ancient Greece, in the Roman Empire, in the Middle Ages, or in our contemporary, industrial world.

The feudal culture was primarily agrarian. The industry of the time occupied a place between art and industrial production. The shoemaker was as much an artist as a

craftsman and a trader. The unity of religious belief accepted the individual as he was. The underlying ideology guiding the behavior of man from the instinctual point of view could be formulated as follows: An adult person could either live his life in this world or retire into monastic self-denial. People married at a rather early age. Families were large and parents were able to live their instinctual lives on a fully adult, genital level. They were physiologically as well as psychologically real fathers and real mothers. The cult of an affectionate and obedient attitude toward the actual father and his socialized equivalents was universal. All along the line of psychological father substitutes—from the benevolent authority of the Church through the protective and considerate authority of the master of the guild to that of the real head of the family—there operated the principle of being loved and taught and protected and being grateful and loving and responsive in return for love and protection at the hands of the father. It was an almost ideal psychological constellation of adulthood, from the standpoint of the proper alignment of instinctual drives. It is possible that medieval culture owed its extraordinary stability to this constellation, despite its economic iniquity.

The ascetic life, which was so typically a feature of that age, presented a complete repression and consequent transformation of one's instinctual life into the single impulse of love of God and humanity as a whole. It produced that spirit of charity and sainthood of which St. Francis of Assisi is the most appealing example. Whether monastic or worldly, the slogan of medieval culture was love—the ultimate and most healthy achievement of man's instinctual development.

That a great many features of that remote age appear to us moderns as bleak, gruesome, cruel, and in many

more respects so very unattractive, should not deter us from seeing soberly and clearly the healthy psychological nucleus of that culture. After all, St. Francis would think even less of our culture if he were invited to spend an evening in swing-noisy night clubs. A Hans Sachs of the fourteenth century would be highly discomforted by our streamlined trains, which provide man with no opportunity to contemplate the inner greatness of man, the loveliness of animals in the pasture, and the true vastness of the universe which seems to shrink so much in size when one violates it at ninety miles an hour. Nor would Roger Bacon appreciate the expensive and intricate twenty-storied institutions of learning; he would be horrified at the sight of the milling crowds of students, who undoubtedly could not all be scholars, and unhappy indeed to behold the sight of faculty clubs and good menus and table service, when bread, water, and a cell make one able to study and to think with so much greater spiritual devotion. The quiet trader plodding beside his cart and donkey would be terrified on the floor of the stock exchange and would beyond any doubt arrive at the conviction that its members were of the Devil, that they were not traders at all but messengers of Lucifer selling the wheat that the Lord has not yet raised from the bowels of the earth and buying devilish paper indulgences for future material salvation when only the Holy Father can offer an indulgence and when salvation is only spiritual and only to be attained in Heaven.

We cannot abandon entirely our subjective evaluation of a culture of bygone days, nor our partiality toward our own, but we must keep these biases constantly in mind or we shall become even more confused than we are inevitably apt to become when we try to evaluate something

which is already out of our direct reach or is too close to our eyes to offer a proper perspective.

There were mental illnesses in the Middle Ages, of course. It is doubtful whether their relative number was greater than that of our time. The nature of these illnesses offers us some very interesting clues. The predominant type of mental illness was hysteria, a neurosis almost extinct nowadays. We still make diagnoses of hysteria today, but either we make them rarely or we are aware that the hysterical reactions that we see today are no more "classical." They are usually "mixed," as the expression goes; they are combined with other reactions more typical of other, nonhysterical neuroses.

Psychoanalytic investigations have led to the conclusion that the individual who does develop normally and who has achieved the level of psychological adulthood, and who nevertheless for many reasons does develop a neurosis, will develop a hysteria. That is to say, if the infantile, primitive, partial, instinctual sexual drives do become integrated and fused and put at the service of adult genital functioning, the neurotic conflict will break out not in relation to one's infantile, chaotic hedonism but in relation to what is known as the genital oedipus complex. This conflict can be described as follows: "I am a normal and healthy person; I fully accept my role as a father or a mother, but the trouble is that I am unable to make the final step. Somehow, I feel bound only to my father, or only to my mother, and I either do not dare or do not want to love anyone whom I do not know, anyone outside my family. But I have no right to have anything but filial or brotherly or sisterly love for the members of my family. I am a frightful, perverted person, because my feelings are either incestuous or nothing at all." This is of course not the conscious formula of the person suffering from hys-

The outstanding feature of our civilization is its acquisitive nature. Not that man has not always liked to own things and accumulate wealth, but our industrial civilization, with its emphasis on the individual's right to acquire as much as he can and to dominate and rule by virtue of his accumulated acquisitions, leaves a special imprint which is characterized by an overdevelopment or overindulgence of our instinctual drive to acquire wealth and power. The ancient ideal of Christianity, which scorned this aspect of man's instincts and which would eliminate wealth as a measure of spiritual and social value, is pushed far into the background. Ours is an economic civilization. It utilizes the natural economic factors and their psychological sources more than any civilization of the past. Its mainspring, or most conspicuous motivation, is wealth, material security, power, hoarding of that wealth and power, and the utilization of man's material insecurity to make him produce more material values for the production of more power for those who already possess a goodly part of it. It is a competitive world in which one individual not only strives to acquire more power than the other but also tries to weaken the other person enough to put him out of business and thus have the field of full play of the acquisitive instincts to himself. It is also a world of statistics and graphs, of numerological presentations of the community of man, in which humanity in general figures prominently and the average person in particular almost not at all. It is a paradoxical world, in that the ideal of freedom of the individual is most emphatically proclaimed while the formal, statistical ideal of technological orderliness overlooks the individual.

The psychological characteristics of this world could be enumerated as follows: acquisitiveness, formalism, striving for power, and disregard of the specific individual in favor

of abstractions such as corporations, or communities, or states. These characteristics are manifestations of certain types of pregenital drives which as a rule are integrated into the network of genital reactions and do not normally act independently, except under special circumstances. Our civilization does more than call upon an increase in the activity of these partial drives. It has also created special circumstances, which are important for us to note. Intricate economic factors worked slowly throughout the years of the Industrial Revolution, restricting the opportunities for security. People today marry much later than in the Middle Ages. Families are much smaller, because of economic insecurity. The use of contraceptives is as much the product of our commercial age as it is a resultant of increased hedonistic trends. In short, the culture of our day militates to a great extent against the truly genital integration of man's instinctual life.

The psychological analysis of these general characteristics in individuals reveals with surprising constancy that the tendencies to parsimony, hoarding, stubbornness, orderliness, overemphasis on cleanliness and almost cold self-assertion over others, intellectual formalism and cold logic in preference to feeling—that all these are derivatives of a primary instinctual source, which the psychoanalyst designates as “anal” or “anal-sadistic.” This term is apt to evoke a reaction of uneasiness in those who prefer to consider certain terms in their absolutely literal and anatomical meaning; we should recall what has already been said on the subject. Such a term means only that the psychological trends which it designates are derived from certain infantile reactions which originally were almost purely physiological and exclusively hedonistic, and were related to the activity of a special anatomical or physiological source or zone.

The term "anal-sadistic" came to acquire the descriptive meaning of those psychological characteristics of which we have just given an outline. The mere presence of anal-sadistic drives does not indicate any abnormality, physiological or psychological. However, any special emphasis on these drives at the expense or to the detriment of other partial drives, or the failure of these drives to become properly integrated with the other partial drives into the unity of genital functioning, will produce a neurosis. The neuroses developing under these circumstances will be of a special type known as "compulsion neuroses," which themselves are rather closely related to certain of the severer mental diseases known as psychoses, particularly the schizophrenias. If our characterization of the most active instinctual components of our civilization is correct, we would be right in predicting that compulsion neuroses and possibly schizophrenias would be the most outstanding and frequent clinical psychopathological phenomena in our civilization of today. Such a prediction would prove correct. We might also predict that the frequency of compulsion neuroses would be in direct ratio to that of hysterias in the medieval culture. This also would seem to be quite true.

Our culture, like any culture, does affect the clinical type of mental diseases, but not their fundamental cause or nature. Culture affects man deeply, but it does not change man's nature, because culture itself is a part of that very nature.

all made one mistake of which they seemed never to be aware: They considered man as an animal more or less autonomous, and they completely disregarded the animal in man when discussing his psychology, as if that psychology were a totally independent entity. Modern dynamic psychology considers man in his totality and tries not to overlook the spirit in the animal that he is, or the animal in the spirit that he has.

We are constantly subjected to the shock of realization that man uses his animal instincts in order to build his loftiest ideals, and that his loftiest ideals consequently derive their energies from his animal drives, albeit domesticated. A great many of these drives, destructive and dangerous to himself and to the human race, have become so well domesticated that today the very opposition to them seems to act almost as an instinctual drive. Our attitude toward incest, for instance, no longer requires forcible restraint on the part of the community, as it apparently did in the primitive cultures now extinct. We react against incest automatically, from within ourselves. The same may be said of our reaction to murder. There is no longer a need to repeat the experience of Cain in order to revolt against murdering a brother. Cain first killed Abel, then became frightened of the punishment which he expected. He was tormented with the fear of what people would do to him, if and when he were discovered. It is interesting to note how the intuition of man expresses itself in the story of Cain's crime. The Lord made a mark upon him, set him free, and enjoined others from avenging the blood of Abel in any violent way. The symbolic value of this special mark is of deep psychological significance. Bearing the mark of God—the mark of conscience within—the future Cain was to be stopped from committing a murder by the very voice of his conscience. His superego could and

would warn him in advance of his committing the act, torture him in advance for the intent, and thus prevent the act.

Our conscience protects us automatically from committing the act of incest or murder. It is true that the statute books of all civilized nations specifically forbid incest and murder, but the law in this respect merely reflects in a formal manner that which we oppose almost instinctively anyhow. It is doubtful whether the average man of today could comfortably and serenely commit murder even if the statutes failed to say anything about it. On the other hand, under certain circumstances men do commit these crimes, and then the law steps in to do its duty. The fact that these crimes are still being committed and that the law, supplanting the ancient chieftain, has to intervene and avenge the community for the wrong done is highly instructive.

Our conscience is a form of fear. It is not fear of an external force threatening to punish us for our transgression that prevents us from committing a crime, but a constant fear of our own judgment of our own selves. The external, punitive force becomes psychologically incorporated within us, and from then on we need no statute books or police officers to watch and threaten us. This explains why an intent, even a "bad thought," is apt to torture us as if we had actually committed a transgression; our conscience is in this respect a much more severe judge than the law, for the law never punishes the intent itself, no matter how criminal the intent may be. Our conscience is a sentinel always on the alert, always ready to strike. Even the avowed murderer cannot indefinitely part with his conscience, and he feels the need to proclaim his innocence to the last; he needs the delusion of innocence, of which he wishes to convince himself or at least convince others.

The very fact that the job of our conscience seems to be that of an internalized watchdog, policeman, district attorney, prejudiced jury, judge, and even executioner would seem to indicate that all is not well and serene within us, even when we are at our best. It would seem to indicate that the drives which we consider criminal are not destroyed by our conscience but are alive and dynamic and forceful, and that we need the constant operation of our conscience to keep us in a state of civic and moral equilibrium. This feeling that our conscience produces is called "the unconscious sense of guilt," the sense of uncertainty which besets all so-called normal people in so-called normal life. It is a sense of insecurity, of anxiety, which is always within us although not always clearly perceived as such. On occasion and under certain inner or outer circumstances, these ever living drives break through the barriers of our civilized conscience and we commit a crime. The law then steps in in a spirit of primitive, retributive revenge and imposes punishment. Profound repentance on the part of the criminal, extreme torture on the part of the criminal conscience, seem to be of no avail. Even the criminal's attempt to commit suicide is thwarted, so as not to deprive the state of the job of revenge. Conscience does not count once it fails on a single occasion, and the primitive method of primitive punishment must be applied even as in the very remote days when man had no conscience and was dealt with only by means of force.

The particular psychological elements of crime and the psychological manner in which the law deals with it are special subjects which will be discussed in a special chapter. Crime and law were cited here merely as examples of the mutual and reciprocal aggression which at times characterizes the relationship between the individual and society. This is only one of the numerous forms which ag-

against this hypothesis. It would seem probable that this is a purely philosophical, not a psychological, question. It is true that the tendency to disintegration, to dying, is at work within us in each organ, but it is doubtful whether we ought to consider this tendency an independent instinct. After all, an instinct is a force; it is a mass of energy striving to express itself. The tendency to disintegration or death seems more like a resultant of the waning of the life forces than an independent force, and it therefore does not appear to be an instinct. Yet in those people in whom inertia or the impulse to self-destruction is so great that they seem to be making no biological effort to live, there does appear to be a force that literally drags them to their death, and it is difficult to avoid the impression that a separate instinctual force does on occasion operate in the direction of death. However, from the practical point of view it is of little consequence whether the death or aggressive instinct is primary, for as far as the social and abnormal mental manifestation is concerned, the psychological dynamic picture is that of a form of aggression.

It is of some importance to observe in this connection that some years before Freud—and apparently Freud was not aware of the fact—there had come from a nonpsychological quarter a suggestion to the effect that there operates in us a real death instinct. The suggestion was made by Metchnikov, the famous director of the Pasteur Institute. An original scientist and a great biologist, Metchnikov was for years interested in the problem of senescence, which he considered a disease. He thought that our fear of death is due to the premature old age which is a consequence of various unhygienic conditions created by our civilization. He sought for a method to cure human beings of premature senescence. He claimed that if man could

live long enough without getting old too soon, he would accept death with simplicity, serenity, without anxiety, and willingly, that the true biological end of one's life span—the desire to die—would come to the fore without pain or fear.

Apparently Freud arrived independently, and by way of psychological observations only, at a conclusion which was in some respects related to the conclusion Metchnikov found plausible on the basis of independent, biological observations. Many actual findings of psychoanalysis, and not only some of its hypotheses and concepts, have found corroboration in biological data independent of psychoanalysis. A careful study of these parallel discoveries by methods apparently so remote from and so opposed to one another would be well repaid and would open new scientific vistas heretofore overlooked or unsuspected.

Although this discussion may appear irrelevant to the chief topic, it serves to demonstrate at least by one example that when fundamental aspects and sources of human behavior are considered, the psychoanalyst and the biologist find themselves strikingly close to each other, groping in the same regions, searching for the same elements which compose the body of their subject matter and of their scientific interest. The popular prejudice that psychology is nearer ethics and philosophy and that biology is on the other hand a true science is one of the many examples which could have been cited early in these pages, when reference was made to those who know so many things that ain't so.

We are bound by the very limitations of our human mind to give names to certain forces which we do not know well and the true nature of which we most probably will never know. By giving these forces a name we do not learn more about them, but we at least have a tag which

helps us not to lose sight of the forces which we happen to perceive without being able to observe directly. We can study a force only indirectly. We can study what it does to us and for us in the frame of our functioning as social beings. This is the method of the true biologist, and this is also the method of the psychoanalyst. Insofar as the discoveries and coincidental findings of psychoanalysis, not unlike the discoveries and findings of modern biology, trespass beyond the narrow scope of its original problems, they touch upon problems which originally were not envisaged at all. Biology comes out of the confines of the zoological, botanical, or physiological laboratory and becomes a pragmatic theory of life, while psychoanalysis, in the light of accumulated data and without ever abandoning it, goes beyond its purely clinical, therapeutic field and tends to become a general, pragmatic psychology of human behavior.

It was not until 1930, almost forty years after he was first confronted with the unconscious of his neurotic patients, that Freud found it useful to give special recognition to the instinct of aggression. Theretofore, as has already been mentioned, his main point of scientific concentration was Eros, love, and its vicissitudes under the pressure of the instinctual drives. He found that aggression, or the death instinct, plays an extremely important part in our individual and social life, that it is in conflict with the ultimate strivings of Eros, and that man in his consistent biological search for adaptation to and mastery of life seeks to combine Eros and aggression in order to live and avoid pain and find happiness. Like any other instinct, aggression has an aim. Just as the aim of love is unity with one's fellow men, a cohesion of efforts, so the aim of aggression is to destroy this unity, to abolish life.

Its psychological earmark is hate in all its varieties—from envy to cold contempt and anger.

Both love and aggression usually turn outward toward or against reality—things, nature, people, society. Both, under certain abnormal circumstances, may and do turn inward on the individual himself. When we love only ourselves, and when all the partial components making up the love drives are withdrawn from the outside world, we become that limp, cataleptic mass which was described early in this discussion under the name of "catatonic stupor." This is a complete disintegration of our ego, its psychological death. When the instinct of aggression turns away from reality and hurls all its force onto our own selves, it actually kills us—we either commit suicide or fall victim to endless self-injuries which finally lead us to death. Neither love nor hate is a benevolent force when it is concentrated on and within or around the ego alone; the charity of love under these circumstances is as destructive as the animosity of aggression. In their pure form, both instincts are totally useless to man as an individual as well as to man as a part of society or to society as a whole.

They never appear in their pure form, because neither can be fully repressed for the exclusive existence of the other. That is perhaps the essential reason behind the fact that we intuitively feel that there is some good in the worst of us, and that is why the dictum "Love thy enemy" became the foundation of Christian aspirations as well as of the general aspirations of the majority of ethical philosophies. That is also why we like to boast of being practical and businesslike even with our best friends. That is the reason for our always preaching caution as far as our confidence in people is concerned, "because you never can tell what might happen." We intuitively sense the other man's aggression even when it is not directly visible; our own,

even if not perceived at the moment, may come out from its hiding place in the recesses of the unconscious and express itself in one of the multifarious forms it usually takes in our congress with our fellow men.

II

On many occasions and at frequent intervals our aggressive drives come out almost unmasked. When violence breaks out in connection with a labor strike, the men involved in the struggle fight not merely because they happen to have or are supplied with stones, clubs, or pistols. In order to use these weapons, each individual must possess a sufficient amount of destructive drives, which under the pressure of the social conflict become mobilized and throw the man into action. A man cannot mobilize that which he does not possess. If he fights, whether spontaneously and impulsively or because he has been taught to fight, he does it because he has something to fight with, and that something is not the weapon he uses with his hands but the instinct, the drive, to fight. This is true of the striker as much as of the strikebreaker or the police. The forces which underlie the social conflicts of our civilization possess the particular property of forcing us to store up a mass of sadistic drives, which under circumstances usually called a "crisis" are quickly put in the direct service of the contestants. The violence which we see in certain strikes, the extreme violence of revolutions and wars, represent the periodic discharges of aggression.

Aggression accumulates in proportion to the repression to which we are subjected, and it usually cannot express itself directly except in a social setting. If it does come to direct expression in an individual, we then deal with criminality. The criminal rarely openly justifies his crime. How-

ever, direct violence in a social setting becomes temporarily an ally of both the ego and the superego; the individual participating in an act of violence of a social nature—whether he is a striker, a revolutionist, a soldier, or a policeman—rarely if ever feels guilty about it and rarely regrets the act of violence. The superego lends its full support to the ego in that it justifies the violence on grounds of ethical, social principles. It makes one concession to the sense of guilt by claiming that the person doing the act of violence was provoked. That is why the most guilty and most unconscionable perpetrator of mass violence—cultured monarch or parvenu chieftain—must convince himself that he was forced to shoot, was forced to wage war, was forced to defend himself by means of murder. These complex gyrations of our psychology are the means which man uses in order to be able to fight and to kill and to die.

This analysis of the psychological components of violence en masse does not imply any moral judgment; strikes, revolutions, and wars cannot be judged in the sense of rejecting or accepting them as bad or good, unjust or just. They are elemental phenomena of our human civilization. They are forms of human aggression, and they will continue to be with us even as cloudbursts, or sand storms, or elemental forces of nature—with this difference: Nature can either be mastered or be left to rage against the strong wall of our defenses; we can harness the rapid flow of a river and even put it to use to make electric power for us; we can build steel houses which an earthquake cannot demolish. But human aggression, while it is of the nature of man, is not so easily managed; its course can be modified and its destructive power mitigated only if and when we succeed in domesticating it in the same manner as we have to a considerable extent domesticated the incestuous drives of man and regular patricide or frat-

ricide, which were the rule in the most primitive tribes of the remote past. The unfortunate aspect of this direct form of human aggression in a social setting is that it is not yet fully subject to our voluntary control. So long as our primitive drive to power and mastery extends into aspirations not only to master nature but also to rule man, and so long as masses of men aspire to rule other masses of men, the instinct of destruction will have the opportunity for its periodic Roman holidays, and in the midst of these sadistic celebrations it will militate against the very instinct of self-preservation of the human race.

It is this singular propensity of man to turn his drives against his own interests which is the most baffling biological and psychological problem. It is baffling, it is discomfiting, and it awakens in us keen feelings of anxiety, that "discontent" of which Freud spoke as the outstanding feature of our human civilization. This discontent, once perceived, acts like any deep-seated neurotic anxiety; either it makes us frightened and we become chronically and periodically panicky and pessimistic, or as if by magic we throw off this anxiety by means of just as unrealistic a flight into optimistic fantasies and denial that aggression is a part of human nature. We substitute the anxiety by its opposite and then look upon human aggression as a perversion. No matter how engulfed we may be by it, we fail to recognize it in ourselves and are even prone to boast of its absence, and we do not permit it to be mobilized until it is quite late and at times frightfully dangerous.

The true solution of this really tragic problem of civilized man certainly does not lie in the neurotic denial of his own aggression, but rather in the full recognition of its earliest manifestations. Such a recognition will lead to a non-neurotic, realistic solution of the conflict, and it will invariably carry with it possibilities of true domestication.

We must not forget, however, that social problems arising from man's psychology are not solved by psychotherapeutic measures. They can be solved only through the process of our cultural growth, through our repeated cultural failures and proper understanding of these failures. It is highly doubtful whether cultural growth can be controlled by scientific psychology. Many like to believe that it can, but we must treat and use this belief with the utmost caution and care, lest it mislead us into overlooking the very stark realities of human nature which we are so eager to harness. Eros will never become victor until and unless we see clearly and are well acquainted with our own destructive instincts.

If the most direct expression of our destructive instincts takes place only in periods of great historical crises such as revolutions and wars, the less direct expressions are always in evidence in varying degrees of being obvious. We live out our aggression vicariously by way of being interested in sensational trials, in which our cumulative aggression is euphemistically called "public opinion demanding justice." We live it out in reading detective stories, in printing and reading with avidity the reports of lynchings, murders, and executions. As far as the latter are concerned, we seem to have made some progress, since public executions are almost a matter of the past in our civilized society, but we still possess an uncanny curiosity about them. We read about automobile accidents and train wrecks with something more than and different from mere regret and compassion for the victims.

From the psychosociological point of view, it is impossible to overlook the number of suicides, 20,000 to 25,000 a year in the United States alone, and the number of accidents, which can be counted in the hundreds of thousands. The immense toll of death which our civilization takes in

times of peace is highly significant. It suggests not only that the destructive forces of our civilization make man feel unsafe, but that this very sense of unsafety adds to the conscious and unconscious anxiety of civilized man and feeds his own aggression, which rises against the very civilization he loves. This constant rise of aggression which must remain repressed breeds further anxiety and generates that form of impotent rebellion which leads to further discontent and further uncertainty. Otherwise mild neuroses thus become accentuated and lead to further psychological complications which cover the whole gamut of psychopathies from suicide to murder. It will be noticed that we have thus arrived at another indication of how culture can affect mental illness: by way of active psychological cooperation with neuroses. Apparently culture on many occasions plays the role of a powerful precipitating factor of mental illness.

III

It will have become obvious to the reader that the psychosociological considerations outlined above have carried us beyond the boundaries of the solid, empirical, scientific ground on which psychoanalytic theory rests when it deals with mental patients and their treatment. Social phenomena, because of their very nature, do not easily lend themselves to any form of scientific analysis, particularly psychological analysis. They cannot be manipulated like an experimental animal, nor can they be controlled in the manner of a patient who co-operates with his doctor.

Our proper interpretation of these phenomena is further impeded by the fact that they are not homogeneous and cannot be made so artificially; we cannot isolate for purposes of special observation the clash of economic interests which determines to a great extent the social be-

havior of man, nor can we assess properly the struggle for power within the various economic classes. We don't know how to differentiate purely political from purely economic motives, or how to separate the religious and ethical traditions of one group from the rationalizations which are used by another group under the guise of such traditions. The psychological method of approach is appealing, because it seems to promise us the hope of finding a kind of common denominator for man's behavior as an individual and as a member of the community. But we also know that man's behavior in a crowd is apt to be in almost absolute contradiction to his behavior as an individual. We do not know yet whether man as a member of an organized society is more subject to the psychological laws governing his individual behavior or to those governing his behavior as a member of a crowd.

It is not a little jolting to our self-complacency even to assume that a well-organized democratic state might from the psychological point of view prove to be a crowd rather than a coherent, co-operative gathering of self-conscious, enlightened individuals. To meet this shock one is prone to point out the evolution of our standards of education and the increasing freedom of participation in communal life as signs that the free man of today in the modern democratic state is more an individual than a particle of a mass. From the standpoint of the self-estimation of the individual, this is undoubtedly true, but it is uncertain whether it is true from the standpoint of his actual psychological functioning. We have no accurate way of measuring man's mass psychology, but we do have ample although only suggestive evidence that our modern man, as a member of the community, finds himself constantly under the impact of those forces which are more characteristic of a crowd than of individual behavior. The immense advantages of

education and the spreading of knowledge cannot be overestimated, but literacy and education are not always single-edged blades. The propaganda quality and the advertising, "selling" quality of our culture contribute more to our disindividualization than we are willing to admit, and they justify Tolstoy's bitter remark more than three-quarters of a century ago that the invention of book-printing did more than any other agency of civilization to make ignorance uniform and universal.

In consequence of all these uncertainties as to method and as to actual understanding of social phenomena, and in consequence of our total ignorance as to how much of the ant, the bee, and the termite there is in our social behavior—how much of our social behavior is determined by purely biological factors which we discard almost totally in our social philosophies—it is clear that the social sciences are still in their early infancy and that a dynamic psychology can now do little more than describe some of the aspects of our social behavior. Broad interpretations and curative, psychosociological prescriptions do fascinate us, but from the practical point of view they are as premature as they are at times unavoidable. We must bear in mind these cautioning qualifications now, as we are about to attempt to visualize some of the varieties of human aggression which our civilization represents in the midst of the greatest crisis since the breakdown of classical culture.

IV

When the sons came of age in the earliest human family and were powerful enough to compete with their father, they naturally were confronted with his opposition; he would not tolerate any competition which was primitive and brutal. The sons and brothers who had competed

among themselves could not individually stand up against the powerful father, and they had to compose their differences. The need to secure food as well as sexual partners, all of which was in the hands of the head of the family, brought the brothers together and, thus organized, they overpowered the selfish, dictatorial father. It would seem, then, that the first co-operative effort of human organization was prompted by economic and sensual motives and was inaugurated with the deed of murder. There is no reason for the concept of this gruesome origin of the human community to frighten us away from a contemplation of the subject. As has been said earlier, there are anthropologists today whose researches of the past twenty years have made them withdraw many of their original objections to this hypothesis of Freud.

If we follow this hypothesis and cast a glance on the course of our civilization and then look a little more closely at our contemporary civilized society, we shall be impressed with the fact that so many aspects of our life still bear more than faint traces of that primitive aggression which was originally fratricidal and patricidal. We shall remember the thesis that our culture derives its stability and its dynamic force not so much from what primitive drives it represses as from what primitive drives it permits to return from the repressed in various modified guises.

The primitive community solved its tragedy of repeated patricide by the creation of the totem system; it was forbidden to kill and eat the totem animal as long as the man related to the totem was alive. The aggression against the father was fully inhibited. The inhibition, as well as the prohibitions involved, was displaced on the totem. The carnal aggression was released against the totem only immediately after the natural death of the father. The par-

liamentary monarch or Prime Minister, the Presidents of our modern democracies, present an excellent symbol of the primitive father. This symbol is inviolable, psychologically speaking untouchable. The stability of the English parliamentary system owes a great deal to that freedom to attack the Government and the person of the King which serves as a perfect channel through which endless masses of bitter aggression springing from the old patricidal sources are drained off. In America it is the President who is placed in the same psychosociological relationship to the community.

The community itself is considered a group of equals in relation to the authority of the Government. The members of the community are all sons, brothers who are standing together in co-operative anticipation, waiting for the day when formalized, although sublimated, symbolized murder will be duly committed—the expression “brotherly love” is not accidental, considering the origin of the human community. It is difficult to find any function of our democratic society which surpasses or even approximates an electoral campaign in intensity and blatancy of aggression. Acrimony, anger, hate, slander, venality, appear—everything except actual, direct homicide. The proverbial lid is literally off the reservoir of patricidal drives, and society hurls itself on its symbolic victim with all the energy of a primitive cannibal. It is primitive cannibalism, whether it expresses itself in campaign slander, whispering campaigns, political maneuvering, or flattery of the indolent who do not care. A father is to be killed by way of democratic ceremonial, and a new one will at once be set up by way of the same ceremonial. The brothers, united in the democratic effort, then settle down to live their normal lives of poise and respectability.

Recognition of the fact that a true democratic political

system functions in accordance with the rhythmic and symbolic pattern of the primeval patricidal birth of a community of brothers is one of those psychological acts which we cannot perform without considerable effort. It is not easy for us to admit that everything we love, admire, worship, and consider sacred in our institutions has such humble and dark roots. The anthropologist who studies the more primitive societies subjects to an equally direct analysis the complex institutions and functioning of the primitive polity. It is because we are human and because we spring from those humble and lowly sources that we derive some satisfaction from the fact that we have removed ourselves to a considerable extent from the original darkness whence we came. But we do not deprecate the luxurious foliage and the stateliness of shape of an old tree only because its roots are deep in dirt and surrounded by worms.

We may safely state that, all other conditions being equal, it matters little what particular political form of government a nation has, provided it functions constitutionally in such a way that it provides the maximum outlet for the modified, patricidal aggression which we carry within us, and the maximum possibility for the patricidal brothers to co-operate for mutual benefit. It is economic inequality and insecurity which attract and accumulate the aggressive drives within us and try to disrupt the co-operative adhesion of the descendants of the primitive brothers. It is this aggression that leads to further crises and to the inevitable impairment of the stability, and even to the final restriction, of that harmonious distribution of our instinctual drives which is ideally inherent in a civilized society.

We can see that in the days of the primitive horde, when the brothers got together and killed their father,

two fundamental creative drives were gratified at the same time: the libidinous, which has already been mentioned, and the economic. The instinct of aggression could and did and does find considerable and socially safe and useful gratification in the mastery of nature, in production of those necessities, material and cultural, which the brothers need. But the diversion of our patricidal drives into the political channels of the democratic process, of what we might call normal, periodic, and symbolic patricidal crises, does not appear sufficient. The competitive mastery of nature and of the fruits which this mastery bears contains the very seeds of disruption of the community. It produces those periodic crises which do not follow any man-established pattern of peaceful murder. It accumulates aggressive energy that culminates in revolutions and civil and international wars.

One can clearly see this struggle for psychological equilibrium throughout the history of European civilization. The struggle for political liberty, for the right to overthrow a government legitimately—the struggle for a parliamentary system and democracy—bloody as it was, proceeded with comparative ease and achieved most of its goals in a comparatively short time. But the economic struggle seems to be more difficult, more painful, more slow, and more dangerous, and it has been going on since the days of ancient slavery. The bulk of human aggression seems to be channeled into the reservoir of economic mastery of man by man, which naturally leads to the discomforts and anxieties and insecurities which in turn undermine the psychological and social stability of our civilization.

It is not difficult to discern in our present-day crisis that Fascism or Nazism, which we occasionally but mistakenly call totalitarianism, is a cataclysmic attempt to revert the

those tendencies which are commonly called antisocial and criminal. One of the deepest reasons for the bitter opposition which was aroused by psychoanalysis is the very discovery of the true psychological affinity that exists between the normal, respectable, and respected citizens of our community and those whom we call mentally sick and criminal. Our own ego does not cherish this type of affinity and naturally rejects it.

In normal individuals the criminal and neurotic drives are repressed. They stay repressed and remain unknown to us as long as we are mentally well and socially virtuous. We are well and virtuous only because we have repressed those drives so successfully that they are held in full check and "nothing is further from our minds." In order to be able to accept the genetic psychology which claims that we all harbor criminal and neurotic drives, we must be able to lower the tone of the anxiety in which our superego holds us in order to keep us ignorant of these drives. This we cannot easily do. The superego, in order to be successful, uses all the strength at its disposal to effect a thorough repression, and in doing so it overextends itself, thus assuring a sufficient margin of safety, and creates certain blind spots in our reasoning on the subject. We must not forget that to admit the presence of forbidden drives within us means to admit the presence of forbidden unconscious wishes, of forbidden intents, and that our psychic apparatus treats intents as if they were facts. Such an admission automatically arouses within us anxiety—a sense of guilt—which in turn increases just as automatically the intensity of repression. It is this complex although invisible psychological work that is technically called "resistance."

It is difficult for the ego to overcome this resistance until it learns that psychological reality is not reality but

fantasy, and should therefore be treated as such. Those few who do succeed on occasion in gaining spontaneous insight into their infantile trends are yet unable to rid themselves of the anxiety and the sense of guilt with which these fantasies and infantile experiences are charged. The *Confessions* of St. Augustine are highly revealing in this respect. St. Augustine mistook the unconscious for an agency ethically responsible for his drives and thoughts, and he wrote with a profound sense of unworthiness. The fourteen centuries that have passed since St. Augustine have changed little in this respect, and we still use to some extent the Augustinian terminology. We still make our superior soul pay the penalty for the intentions and frailties of our inferior soul.

That this resistance is not hopelessly insurmountable and that the overcoming of it is not injurious to the ego and to the personality as a whole is amply proved by the beneficial therapeutic effect of psychoanalysis. The newer psychology has percolated into certain school systems in which children are managed and taught in the light of our newer knowledge of the development of the child. It has percolated to a great extent into those psychiatric, social-service, and civic agencies which have to deal with problems of delinquency among children and youths. Psychiatric orientation and views are also now being used in certain prison systems, where the psychiatrist in charge heads what is called a "classification clinic." The very name suggests that more psychological insight is being used to classify and manage the prison population. The fact that the clinic is headed by a psychiatrist suggests that the findings of psychopathology are recognized as being of prime importance in the understanding of the criminal. The existence of several "open" prisons in the country, prisons without the medieval high walls, testifies also to the fact

that the prisoner is now at least tentatively being considered an individual human being and not merely a piece of biped refuse which society through its agency called the law throws out into the public trash basket called the prison system.

These are, of course, signs to the effect that psychiatry is gaining ground, and that it seems to be able to pierce even some heavy prison walls. It would be a mistake, however, to overlook the fact that taking care of a criminal in a more intelligent way *after* he is sent to prison, utilizing our knowledge of modern psychiatry in order to manage the prisoner better and to make easier the administration of the prison business, contributes little if anything to the solution of the problem of criminality. Such measures do very little for our better understanding of the genetic psychology of crime. There is still a great chasm between psychiatry and the administration of justice. There is a wide and deep canyon between psychiatry and the whole spirit and mechanics of the law in relation to the criminal. This can be demonstrated most clearly if we choose as an example the respective attitudes of psychiatry and the law in relation to capital offenders, and particularly to those capital offenders at whose trials the plea of "insanity" is interposed. If we wish to examine these attitudes in their proper perspective, we ought to cast at least a brief glance at the psychology of the law itself when it deals with these problems.

II

We need not here consider civil law, which has proved a more flexible system of regulating human relationships than criminal law. Civil law, based primarily on economic relationships, naturally adjusted itself to the change of economic conditions; we could not very well expect our

to justice as a religious sentence, in order to avoid the obvious suspicion that criminal justice is essentially based on the spirit of vengeance in relation to the criminal. This suggested motive of vengeance is serious enough not to be passed over as merely an expression of unwarranted intolerance or disrespect of the law. There are good psychological reasons why such a suspicion cannot be easily disposed of.

It will be recalled that the suggestion has been made that the law appears to be a socialized form, a projection, of our superego. Its formalized procedural aspect we may now disregard; this apparently has its own psychological origin, and it lends magic authority to the act of justice. Its system and manner of punishing are to us of particular interest. It has already been pointed out that the superego, this typical product of our socialization, proceeds in a rather primitive manner. It demands an eye for an eye and a tooth for a tooth. It follows the talion principle, the most ancient and most primitive principle of justice. In certain neuroses in which the drive to self-punishment is paramount, we find that some of the symptoms are patterned on this principle. If it is the hand that from the standpoint of the neurotic's superego has done something wrong, it is the hand that will ache; if the person's mother used to suffer from severe headaches and the neurotic person out of primitive hostility wishes unconsciously that his mother should continue to suffer from headaches, such a person will develop neurotic headaches; if the person (unconsciously) wishes someone's death hard enough, that wish, being in accordance with the principles of unconscious reaction a deed, becomes murder, and the bearer of this wish without knowing why will become depressed and develop the inexorable need to die, to kill

himself. It is a hand for a hand, a headache for a headache, and a life for a life.

The attenuated form of this vengeance on the part of the superego appears in us as pangs of conscience, as a sense of unworthiness and sinfulness in the absence of any realistic reasons for these tormenting feelings. The ancient tendency to emphasize that justice is not revengeful but an authoritative religious sentence is due perhaps to the partial and uncomfortable awareness or intuitive perception that legal punishment, like the one usually meted out by the superego, does contain an elemental drive for vengeance in the true spirit of the talion principle. The minor form of or the preliminary step toward punitive acts on the part of our superego is a state of unworthiness, a sense of guilt, a state of moral self-torture, of self-imposed penance. It is not surprising, therefore, to find that in ancient Egypt criminals against the state were first sentenced to punish themselves by way of suicide, even as today in the German military caste an officer who has dishonored the clique is offered the opportunity of shooting himself. The code of Manu was definitely based on the intuitive concept of penance and self-punishment, as if its makers actually, rationally understood the working of the psychic apparatus.

The criminal commits the criminal act when his instinctual drives temporarily overcome the resistance of the superego and thus overwhelm the ego, which is forced to do the bidding of the id. As soon as the impulse is discharged and the special id drives are thus temporarily gratified and silenced, the superego re-establishes itself and asserts its demands. Even the hard, defiant criminal then feels (unconsciously) repentant. His challenging, snarling, boisterous defiance of the law, or his sullen, apparently indifferent, emotionless attitude, is in most cases

but an automatic covering, boastful or humbled, of the sense of guilt. The writer has never failed to find it deeply buried in the unconscious of the apparently confirmed criminals of whom he has had the opportunity to make a psychological study within the walls of a prison. Many criminals, as a result of this inner penance, kill themselves soon after the crime; the true psychological motives of this type of suicide are usually overlooked, and we explain it away by saying rather glibly that the criminal preferred death to being apprehended, or something equally vacuous from the psychological point of view. The fact that the criminal whose act of robbery yielded him a goodly sum of money proceeds to gamble it away, to get rid of it in debauchery, is probably motivated in no minor way by unconscious repentance and the need to lose, to deprive himself of what he wrongfully acquired.

The ancient code of Manu apparently recognized this psychological truth. Translated into our present-day psychological language, the judge recommended that the transgressor recall his superego and, in communion with it, do penance. The law thus applied tended to reinforce the power of the superego and raise it to the point where it became able to mete out the necessary punishment, as it does in severe depressive psychoses. The transgressor of the law was ordered to wound himself and then walk until he fell dead, or to throw himself into fire, or to go into battle and be killed by the enemy. This extreme form of penitential discipline, like the form of severe penance for sin imposed by the Christian Church some nine or ten centuries ago, represents an effort to make the transgressor his own administrator of punishment. But apparently this psychologically correct method of mobilizing within the transgressor his own sense of justice was not the rule, or at any rate presented but a phase in the development of

criminal law—perhaps only a fleeting, almost accidental phase. The less obvious but powerful need for revenge stood out far more conspicuously in the administration of justice. This motive of revenge pushed the religious and ethical motives into the background, and the procedure of formal punishment came forward. William A. Robson, a contemporary student of law, considering this problem and recalling some observations found in Sir J. G. Frazer's *Psyche's Task*, put it very aptly by saying: "What was at first a religious rite later became a civil function, the sacrifice developed into execution, the priest steps back and the hangman appears."

III

Even though it may be euphemistically called retribution, and even though it may be formalized with all the procedural solemnity which the law provides in order to emphasize that it is an almost mystical act of justice, punishment by death or by carefully dosed periods of imprisonment cannot fully conceal the element of revenge from which it springs and which it still embodies. It is difficult to find any truly rational explanation for the fact that one capital crime is called first-degree murder and another second-degree or manslaughter, that one calls for the death penalty and another for imprisonment for life, or thirty, twenty, or ten years. The only explanation the law can give for this seemingly so accurate measurement and allotment of penalties is that that is what the law demands and that is why it is just.

The above statement might at first appear unfair. It might be pointed out that the law does try to investigate the motivation of the criminal and therefore the psychological basis of the given crime. This objection is to a

woman with whom he was involved. He was properly and humanely treated, permitted to recover fully under the solicitous protection of the same law which then tried him and convicted him for murder and sentenced him to life imprisonment. He escaped a death sentence merely because the jury in this state had the discretionary right to return a verdict of "first-degree murder with capital punishment" or "first-degree murder without capital punishment."

This case brings out quite blatantly the fact that the state sought "adequate punishment" only, and not that justice took fully into consideration all the external circumstances of the crime and the fact thereof as well as the psychological factors involved, particularly the factors of true mental disease. The psychological history of the crime seems to be of so little concern to the court because the psychological history of legal punishment is fundamentally a history of the evolution and changes of forms of vengeance. As we look back into the older forms of justice, we find some enlightening hints as to this aspect of penal procedure. As far back as the twelfth and fifteenth centuries and even, although less frequently, in the seventeenth and eighteenth centuries, in France, Germany, Switzerland, and Spain courts would sit with full observance of procedural rules and try and sentence to death and charge the executioner with carrying out the sentence on horses, sheep, dogs, rats, worms, caterpillars, and grasshoppers. The punishment of animals could hardly be considered an act of ethicoreligious justice. It reveals more clearly the motivation of that destructive hate and revenge which is conspicuous in the talion principle. Not only animals but inanimate things used to be equally the objects of hate cloaked in juridical form. Robson, who has been cited before, compiled a number of interesting data

in his *Civilisation and the Growth of Law*. In his oration against Aristocrates, the great Greek orator Demosthenes claimed that "if a stone or a piece of wood or iron or anything of the kind falls and strikes a man, and we are ignorant who threw it, but know and have in our possession the instrument of death, proceedings are taken against such instruments in this Court."

This displacement of one's aggression or love from man to the instrument used by man is a well-known psychological mechanism. Freud described it in great detail and found it particularly operative in the so-called compulsion neuroses, in which the original feeling of hate, love, or fear becomes displaced from one object to another which is less directly connected with the object arousing the feeling, till, through a long chain, it becomes displaced onto the smallest, least relevant, thing. Compulsion neuroses are also characterized by the adherence to special ceremonials which are quite private and differ with each individual patient. Such patients may, for instance, become convinced that they must count up to five each time they pick up a fork, or that they must rub their hands in a certain manner each time the clock strikes the hour. Failure to perform this private ceremony produces a sense of discomfort, at times even severe anxiety.

There is something deeply primitive and elemental in this apparent psychological affinity between the mechanism of displacement on the smallest thing and the ceremonialization of one's behavior, which apparently has an unconscious magic meaning and magic power to relieve anxiety. There must be considerable anxiety in man when his hate against a person or a thing that has injured him tries to assert itself. This hate-aggression is automatically inhibited by the superego, as all aggression is. The demands of this aggression and the automatic objections

which are raised by the superego generate anxiety. The anxiety is then relieved by the displacement and ceremonialization of the aggression. The juridical aggression against inanimate objects, which Demosthenes considered good and rational both in substance and in form, is also found in the English law of "deodands," instruments causing the death of a person. "An animal such as a horse or ox, and inanimate objects such as carts, boats, millwheels, weapons, and caldrons were the commonest type of deodand"; they were forfeited to the King "for the appeasing of God's wrath." Here the motive of revenge is bluntly conspicuous. The displacement onto the instrument is clear.

How important it is to take into consideration the deeper, unconscious trends of law formation and law administration can be seen from the fact that purely rational explanations sometimes fail fully to shed light on certain aspects of "legal reactions," such as displacement of our wrath onto inanimate objects. On the other hand, such purely rational explanations sometimes fit so well that they mislead us, because they conceal the actual meaning of the trend of the law. It is easy, for instance, to say that the community is willing and even eager to get rid of a criminal member of the community in order to protect itself against his criminal trends, and that this is the simple, rational motive behind, let us say, capital punishment. That this rational motivation is partially responsible for the creation and administration of our system of justice it is unnecessary to contest. Yet if this were the only motivation, it is doubtful whether man would have the heart to do this cruel justice so consistently. After all, a criminal member of the community should arouse as much charitable sympathy as wrath. Are not we in our Christian civilization at least taught to forgive and turn

is addressed in the spirit of this common interest. It is an old plea, and it has been made many times, particularly in America, where in the past twenty-five years psychiatry, under the influence of newer psychological investigation and knowledge, has resumed its efforts with renewed vigor and perhaps with some success.

In the hope that this lengthy preamble will help at least to some extent to dispel the initial mutual distrust which we must admit exists between psychiatry and the legal profession, the psychiatrist could speak approximately as follows.

IV

GENTLEMEN: You have been committing to prisons and sending to the gallows hundreds of thousands, perhaps millions, of men and women for many centuries. Our prisons have not diminished in number in the course of these centuries. I must admit that fewer people are now being legally executed, and that when they are so put to death it is almost exclusively for the crime of homicide. The number of homicides fluctuates, depending upon different countries and other conditions of which we know very little. It is certain, however, that the fluctuations do not appear to stand in any relation to the fluctuations in the number of executions.

You might be interested to know that some fifty years ago, one half a century ago, sociologists discovered a curious phenomenon in this connection. It appears that the number of homicides in a given country in a given period is roughly in inverse ratio to the number of suicides in the same community for the same period; as the number of suicides drops, the relative number of homicides rises, and vice versa. There is a deep psychological relationship between these two forms of man's behavior toward human

place in a discussion so fundamental and so serious. There is little that I can do to allay your suspicions, because I cannot talk in any other way than a psychiatrist and psychoanalyst. I beg you merely to recollect that all I ask for is a hearing in the interests of a common cause.

To clarify the situation a little, I may say this. Many of the things which I have already stated and am about to state are really not new. Henry Weihofen, of the Law School of the University of Colorado, compiled a number of telling data in his *Insanity as a Defense in Criminal Law*. He cites the great Scandinavian philosopher Höfding who, after a careful study of the state's authority to punish crime, came to the conclusion that "historically punishment has been developed from the instinct of revenge or retaliation." Höfding was a philosopher, of course, and you may question his authority to discuss the true meaning of the law. But you will beyond any doubt accept the great scholar and legal authority Sir James Stephen, who as far back as 1883 stated in his *History of the Criminal Law of England* that "the criminal law stands to the passion of revenge in much the same relation as marriage to the sexual appetite." This terse statement needs no comment, but you will permit me to call your attention to the fact that what Sir James Stephen said amounts to the blunt assertion that criminal law is legitimized revenge.

That you don't like to consider yourselves legitimized representatives of the sadistic instinct of revenge, I do not doubt. I fully share with you this dislike. However, in this respect you, as lawyers, are in the same position with regard to the problem as I am in my capacity as psychiatrist. We both wish to reach the core of the matter, and we try to bury our likes and dislikes and accept the truth as life presents it to us. We are all aware, of course, that there are

many philosophical and metaphysical formulations which circumvent the question of vengeance and rest on concepts of abstract justice. You will permit me to set aside abstractions of this kind. They are fascinating and appealing to me as much as they are to you and to all human beings who enjoy intellectual pursuits. But insofar as we are now engaged in consideration of certain special problems, we may say that philosophical rationalizations, while lending ethical consolation to our propensities, do not change the substantial psychology of the phenomena in question, and it is this psychology that happens to engage our attention.

The disagreement between you and me is neither personal nor of very recent origin, and it is not due at all to the fact that I am a twentieth-century psychiatrist and psychoanalyst. Four hundred years ago a similar dispute arose, and Johan Weyer, the founder of modern psychiatry, shook and shocked the legal world by his claim that not one of the witches and sorcerers was anything but a mentally sick person. Great secular judges and great lawyers and state attorneys, many of whom were progressive minds and kindly souls, made speeches and wrote books and predicted that civilization would come to an end if Dr. Weyer's views prevailed. Dr. Weyer was a good physician and a very kindly and pious man, but he used very harsh language, and the lawyers reciprocated by returning the full value of expletives. The recusant Weyer appeared to them an impertinent and blasphemous upstart. Many of the things he had to say could be repeated today without appearing too dated. The disputes originated by Weyer raged unabated for almost two centuries.

You are fully aware, as I am, that Weyer won the battle he started, but as I shall submit presently, it was only a partial victory. I have taken the liberty of making these

a strictly philosophical one, and as a medical man I must desist from any philosophical indulgence.

Yet I must emphatically submit that I do not feel at home surrounded by a defense lawyer, a district attorney, and the jury. They are all good and keen and eager to serve, and they all take their duties seriously and discharge them conscientiously. When they all individually and jointly ask me whether the defendant in the dock is in my opinion insane, I must candidly state, if I am to remain true to my professional knowledge and faithful to my oath, first, that I do not understand the question, and second, that since I don't understand the question I do not know whether the defendant is insane or not. I admit the situation is embarrassing and puzzling to all concerned, but it is beyond my knowledge and power to remedy or alleviate it.

I know, of course, that in most communities the law assumes that any doctor of medicine should be able to answer this question, particularly a psychiatrist who has devoted all his professional interest to the study and treatment of mental disorders. Yet I must state not without dismay and regret that I cannot answer the question posited to me. The reason for my failure is simple. I do not know what "insane" means. I know what a mental disease is, but "insanity," or "lunacy," as the law used to call it until not very long ago, is not a medical term, nor is it a psychiatric condition. True, it was explained to me that the court and the jury are not interested in determining whether the defendant is "medically insane"; they wish to know whether the defendant is "legally insane." No doctor, no matter how learned and proficient he is in his professional work, is able to know whether a man is legally insane, because such a condition is unknown to him. It is not a psychological condition.

I am sorry that I am unable to be of any service to the defense, or the prosecution, or the court, or the jury. I assure you that I do not wish to interfere with the proceedings or delay the clarification of the issue, if any there be forthcoming, but we have reached a point which is the very crux of the matter. You will readily agree with me, I know, that the law would not claim that there are medical and legal pneumonias, medical and legal fractures of a leg, or medical and legal cases of measles. The distinction is made only in cases of the so-called insanity of those accused of a crime.

You will be in order and quite correct when you point out to me that I must be unclear as to the real wish of the law. The law does not really ask for my opinion; as a matter of fact, expression of opinion on my part as to legal sanity or insanity of the defendant would not or might not be admitted as evidence. All you ask of me as a psychiatrist is to report to you whether the defendant knew at the time he committed the act the difference between right and wrong and whether he knew the "nature and quality" of the act and the consequences thereof. Upon my answers to these questions, which is your established "test for legal insanity," the jury will determine whether the defendant was legally sane or insane. My answer is simple: Except for totally deteriorated, drooling, hopeless psychotics of long standing, and congenital idiots—who seldom commit or have the opportunity to commit murder—the great majority and perhaps all murderers know what they are doing, the nature and quality of their act, and the consequences thereof, and they are therefore "legally sane" regardless of the opinions of any psychiatrist.

You may also ask me, if I happen to stand before the United States Supreme Court or a court in one of the

seventeen states of the Union which consider this question legal, whether the defendant had will power enough to resist the impulse to commit the act which he did commit. I fully respect the thought behind this question. Chief Justice Shaw of the Commonwealth of Massachusetts and Chief Justice Gibson of Pennsylvania sensed the inadequacy of the "right-and-wrong test" a century ago, and they realized that man may kill as a result of an irresistible impulse. They decided that if the presence of such an impulse could be established in a given defendant, he could be considered "legally insane." Justices Shaw's and Gibson's intuitions were correct, and they correctly tried to introduce their innovation into the otherwise inadequate law which had been imported textually from England. As a psychiatrist, I find myself unable to answer your question within the scope of its legal definition. From the psychological point of view, the impulse could not have been resistible, since the act was carried out in accordance with the impulse. It is difficult for me to conceive of an impulse which is resistible but not resisted.

We have reached a rather disquieting parting of the ways. This is undesirable from both your point of view and mine. Your rules are unintelligible to me, and my inability to follow them is unintelligible to you. Weihen, to whom I have already referred, was harsh but correct when he said that insofar as your rules are clear, they are clearly unsound.

This makes our parting complete, and the situation as completely unsatisfactory. Perhaps I may be allowed to trace briefly the origin of this unsatisfactory state of affairs. It is not necessary for me to recapitulate to you the history of your rules, their evolution and place in the criminal law of today. As specialists in your field, you know this history much better than I. But in my position as psychi-

atrist I conceive it my duty insofar as this subject touches on public questions—and I know of few more important public questions than the problem of crime and justice—to explain to you and through you to all those who are known under the name of “the public,” the microscopic reproduction of which is the jury, the psychological, not the procedural or juridical, history of your rules. May I therefore proceed along these lines? I have no doubt of your indulgence, but I cannot easily forget that even the Saxon code of 1572, defining certain crimes of witchcraft and allotting what are called adequate punishments, found it necessary to point out that a certain Dr. Weyer had claimed that witches were mentally sick, but that since Dr. Weyer was a medical man and not a jurist his opinions were not very important and should be disregarded by the courts of Saxony. However, Weyer’s views prevailed ultimately, as far as witches and sorcerers were concerned, and it is from the knowledge of this fact that I derive courage to pursue the discussion despite my misgivings.

Originally the medical doctor and the jurist were in complete agreement. They were both ignorant of human psychology, and they fully shared the belief in superstitions and in witches. Toward the middle of the sixteenth century, the doctor discovered that some forms of criminal behavior were actually mental diseases, and the jurist and the doctor parted ways. The jurist continued to obey the law, as was his business and duty; the doctor continued to study medical psychology. They parted company, not in a very peaceful manner. Bitter fights raged between them, and off and on they have been raging for almost four hundred years. The doctor has learned a great deal in four hundred years; so has the jurist, but not about mental disease.

clause, that the report of the Department of Mental Diseases was "admissible as evidence of the mental condition of the accused," was crossed out as unconstitutional. As to the law of New Hampshire, the final decision as to the sanity of the accused is still left to the jury—that is, to a group of laymen who have full authority to overrule the findings of psychiatrists.

I cannot refrain from frankly expressing my skepticism about the efficacy of improvements such as these. I cannot refrain from voicing my doubts as to the fundamental value of such minor improvements in the attitude toward transgressors of the law, particularly those transgressors who are manifestly afflicted with a mental disease. Not that such progressive steps are not welcome, but they mark only procedural improvements and not those inner changes which are imperatively dictated by our scientific evolution and that humanism which seems to have been crowded out from our industrial culture.

There is something fundamentally inhuman, or perhaps too crassly human, about a principle that seeks vengeance by all the intricate intellectual and technical means at its disposal, by all the resources of the state machinery, by all the resourcefulness of sadism that only a legitimized prosecution of abstractions produces in our civilization. Many inspired efforts and many perspicacious and penetrating minds are wasted on the analysis of the finest points of intellectual constructions, which have so little to do with the human being who faces them and so much with the principle of preserving the dignity of these abstractions.

I shall grant that this is a harsh and perhaps bitter utterance. I sincerely hope that you will accept it with all the forbearance and objectivity which you so frequently show

in the study of certain facts when you are not called upon to decide the fate of a man in the dock.

I frequently hear, and I am not an exception, as you know, that the psychiatrist who argues against the imperfection of criminal jurisprudence is fundamentally wrong, because his is a theory that denies the responsibility of the criminal for his crime, not only of the criminal who is "insane" but of all criminals; that his is a theory that considers criminal behavior a disease and not a crime; that if this theory were really accepted by the law, society would be exposed to the danger of real breakdown under the crime waves which such a laxity of the law would create.

I cannot deny that you are correct in the positive part of your statement. Modern psychiatry does consider crime a social and pathological phenomenon, and it believes that this phenomenon can in most cases be treated as a disease. It is also true that on the basis of this opinion psychiatry does not concern itself with the philosophical question of responsibility and punishment. However, I find it impossible to agree or even sympathize with your fear, and fear it is, that society would suffer when punishment is alleviated or even abolished. This fear is as old as humanity itself, and finds little realistic justification. There were serious and honest voices who cried out in desperation that if the prosecution of witches were stopped, thousands of guilty people would be permitted to torment humanity without punishment, and the world would go under. Great lawyers and great clergymen were indignant, and more desperate than indignant; but the world did not go under and the witches and sorcerers did uncannily disappear from this world.

There is a story about a member of the French Chamber of Deputies who made an impassioned plea for the abolition of capital punishment. As he finished, one of

his colleagues exclaimed: "Now let the gentleman assassins come in!" The "gentlemen assassins" don't "come in" merely because the law appears to be lax. The law punishing the criminal has as much to do with the prevention of crime as the prohibition of the sale of firearms with the prevention of homicides.

It is this fear of the murderer and the hate of him that seem to be the factors underlying the perseverance with which the law insists on a psychiatry of its own. It is difficult to explain the law's attitude toward a psychiatric expert witness on any other basis. The psychiatrist is called into court not to tell of his expert knowledge but to become an ally of the defense or the prosecutor. The very admission of experts testifying for either side is an indication that the law permits an added device to be used by both the defense and the district attorney. Doctors are not saints, even if they are specialists; they are plain citizens, whatever their specialty. To subject a specialist to the pressure of his emotions, which are never scientific, means to try to pervert his scientific objectivity. I do not wish to give the impression that the law is the only agency responsible for the many and unsavory deficiencies of psychiatric expert testimony. But in so far as the law does admit such testimony, it is the duty of the law to take and make this testimony authoritative, free of prejudice, and unhampered by any extraneous pressures.

In order to achieve this, the law will have to give up its own unrealistic, semimediæval psychiatry and accept the scientific psychiatry of today, just as it accepts the physics and the chemistry of the scientific world without going to the trouble of imposing on the modern expert physicist pre-Newtonian physics or pre-Galilean optics. If it ever were able to accept the scientific clinical psychiatry of today, it could then establish definite standards for the

psychiatric expert and not admit to the witness stand rather indiscriminately any medical man who by virtue of various contingencies chooses to consider himself or is generally considered an expert. The law would then have no need for the device of discrediting psychiatry by permitting two different groups of psychiatrists to represent the two contending sides in the court. Science cannot represent any side but the side of factual truth; the court, which by definition and substance never takes sides, should appoint the psychiatrist who will establish the necessary facts for its guidance, even as is done today in Massachusetts, although only in cases of murder of the first degree.

The confusing and unjust and corrupting influence of the system as it exists today can be easily demonstrated. The psychiatric expert as he takes the witness stand knows from the very outset that he is not going to be questioned on what he as a clinician thinks of the accused. What is wanted from the expert is a statement in terms of the so-called test for insanity, which is either identical with or a verbal variant of the test as it was handed to us by the fifteen judges in connection with the celebrated M'Naghten case of one hundred years ago. In other words, it is considered that the scientific psychiatrist must automatically accept the psychiatry which the law has espoused and disregard his own scientific psychiatry whenever it is at variance with the psychiatry of the law.

The result is a very paradoxical one. The expert, who by virtue of his appearance as a witness has to drop almost all his psychiatric knowledge as unusable by the law, is actually forced to become a lawyer, and he must spar with the lawyer who has become a psychiatrist. The lawyer prods the doctor with his legal, psychiatric expertness and the psychiatrist is forced to defend himself with the

psychiatry has to say about the criminal, you may follow me at least tentatively and temporarily in some of my practical considerations, so that jurisprudence and psychiatry can join hands and co-operate in a job which is obviously a job and a goal which we have or might have in common—the protection and true rehabilitation of society, so that it would perhaps stop producing the horrible criminals of the type to which I have been referring, and rehabilitate the criminal to a society made able to accept him. It is a very idealistic goal, of course. Like all great goals, it may never be attained. But it may be approximated, and who knows but what it might even be attained—as was attained the goal of rehabilitating society to the point where it no longer produces witches, because the witches were rehabilitated to society. The lawyers, judges, clergy, governments, scholars, and public of the fifteenth century certainly did not believe the attainment of this goal possible; they even hated and fought and persecuted those who dared to voice the hope that the goal could be achieved. Yet it was ultimately achieved.

My message to you is therefore hopeful, although I admit rather melancholy; my plea is determined but not bitter. There is still a great deal to be said, but I find that I can conclude my argument very soon with but a few additional considerations and suggestions.

Perhaps it will prove helpful if we consider together a fundamental inconsistency in the present criminal law. I have not mentioned this inconsistency before, and the understanding of it is vital indeed.

The civil code is intelligent about the mentally ill. It provides for the commitment to a mental hospital of any person who is found too sick mentally to be competent to take care of his affairs, to sign a will, or to transact the usual daily business. The law is careful that no one's con-

teenth century and was supported by the attorney of the state invoking the authority of Lord Hale. The young French psychiatrist whose genius left a memorable imprint on our specialty despite his untimely death, Georget, exclaimed: "Can we help wondering at these sentiments of Lord Hale, who seems to make more account of property than life! No excuse for the unfortunate man who, in a paroxysm of madness, commits a criminal offence, while civil acts are to be annulled, even when they have no relation to the insane impressions that might have influenced his conduct." And Ray added: "The language of the law virtually addressed to the insane man is, your reason is too much impaired to manage your property, you are unable to distinguish between those measures which would conduce to your profit and such as would end in your ruin, and therefore it is wisely taken altogether from your control; but if under the influence of one of those insane delusions that have rendered this step necessary you should kill your neighbor, you will be supposed to have acted under the guidance of a sound reason; you will be tried, convicted, and executed like any common criminal whose understanding has never been touched by madness. As for any physiological or psychological ground for this distinction between the legal consequences of the civil and criminal acts of an insane person, it is in vain to look for it. That the mind, when meditating a great crime, is less under the influence of disease and enjoys a more sound and vigorous exercise of its powers than when making a contract or a will few, probably, will be hardy enough to affirm; and yet the practice of the law virtually admits it. The difference, if there be any, would seem to be all the other way. In the disposal of property, the mind is engaged in what has perhaps often exercised its thoughts; the conditions and consequences of the transaction re-

quire no great mental exertion to be comprehended; and there may be nothing in it to deprive the mind of all the calmness and rationality of which it is capable. Now, criminal acts, though abstractly wrong, may under certain circumstances become right and meritorious; and, if the strongest and acutest minds have sometimes been perplexed on this point, what shall we say of the crazy and distorted perceptions of him whose reason shares a divided empire with the propensities and passions?"

Ray's query has been answered by psychiatry in the course of the past century, but jurisprudence is still deaf to it and continues to function on the basis of its psychiatric double standard.

I have nothing more to add with regard to the law's relationship to human psychology. It is a complex and confused and inconsistent relationship, and it cannot be cleared up unless the law divorces itself from the common prejudices of public opinion and espouses the knowledge offered by the advancing science of man. Until this happens, it is difficult if not impossible to accept the term "justice" at its face value, for man will always continue to smuggle his own murderous drives into the halls of justice by cloaking them with all the solemnity and self-righteousness of which only a cruel superego is capable. This psychological process is almost automatic with us, and the court is called upon to punish and to order killed only to keep our own consciences free, not to cure society or to do abstract justice. We demand that the law remain relentless only in order to protect our own inner complacency at the expense of those who were unfortunate enough to commit a crime. It will be a bright and solemn day in the history of mankind when the law comes to the realization that by being as exacting as it is in criminal cases it serves not only the instinct of plain vengeance but

the unwarranted self-aggrandizement of the average man, who refuses to have insight into his own inner cruelty and therefore enhances his self-admiration at the expense of someone else's troubles and even life.

One example of how conspicuous is this self-complacency and how it operates will suffice.

In Lillian Hellman's play *Watch on the Rhine*, a murder is committed. Teck, the Rumanian adventurer and gambler who is on good terms with the German Embassy in Washington, suspects or is informed by his gambling partners in the Nazi Embassy that Kurt Müller is a fugitive from Nazi justice, that he is a prominent leader of the underground anti-Nazi movement. Kurt is devoted to his anti-Nazi ideals. His loyal wife and his three children are devoted to him and to his work. He is a tender, understanding father, a warmhearted and loyal husband. His heart quivers with compassion for his family and with scorn against Fascism. He has faced death many times, but his courage never wavered and his efforts in combat remained unstinted. Teck demands money. Either the ransom is paid or he will report Kurt's presence in America, where Kurt has just brought his wife and children for a much needed rest; they are at the home of his mother-in-law. Teck is cool, relentless, venal; he wants ransom money right there and then, or the Nazi henchmen will know how to take care of Kurt. At first Kurt does not fully realize Teck's game, but as it dawns on him that Teck is merely a gambler in dollars and a trader in human life, he is overcome with animal rage. He attacks Teck—and kills him. Kurt is bewildered. When he comes to bid good-by to his wife and children, he is heartbroken, sobbing, but with courage unabated. He goes off, back to Germany on his underground mission to destroy the power that is Hitler.

dispensers of justice when the life of one of their agents is to be avenged. There is no true rational explanation for this apparently rational trend of thought. The provisions of the Production Code, which is officially not a law, are as interpreted here but an expression of that sensitiveness which only a highly insecure ego displays under the pressure of a very strict superego. The anxiety thus generated appears under the guise of vindictive justice.

It is this vindictive justice, when it is transposed from the Production Code to the criminal code, that is responsible for many socially useless, scientifically unjustified, and culturally injurious executions.

I had the opportunity to study in great detail the record of the case of young Volkman, a youth of nineteen who raped and killed a little girl. There is little doubt left in a psychiatrist's mind, after he has studied the life history of Volkman, the history of his crime, his behavior in court and in the death house, that he was a dementia praecox (schizophrenic). He killed the daughter of the pastor of his church. He used to play the violin in church on Sundays, and he sang in the choir. He and his family attended church. He was adjudged sane in the presence of incontestable clinical evidence of severe mental disease. His crime, even on the cold, stenographic record of the court proceedings, stands out as an impulsive, psychopathological act. Volkman was executed.

So was Albert Fish, the sixty-five-year-old hopeless schizophrenic who from his early youth had been possessed with sadistic, cannibalistic fantasies. He ate excreta. The examining doctors found about thirty pins buried in his abdomen, which he had stuck into his flesh from time to time for sheer pleasure. He continued to indulge in the same kind of pleasure in the death house, using a sharp piece of meat bone. He was adjudged sane.

Fiorenza, the twenty-six-year-old upholsterer who raped and killed Mrs. Titterton, was a typical schizophrenic. In his teens he was already psychopathic and was in a special mental institution. While there, the psychiatrists considered him mentally ill and prognosticated the possibility of a criminal future. He was adjudged sane, convicted, and executed. His behavior to the very last was that of a schizophrenic.

These three "legally sane" criminals are not exceptions. Many such men have been executed after long trials and months of waiting in the death house.

I need not reiterate the reasons why scientific psychiatry considers these acts of justice irrational and useless, but I am ready now to answer the question of why it is not "just as well" that they were put out of the way. It is not, because science, our culture, and even the law want psychiatry to explain why man kills and how people can be prevented from becoming murderers. Psychiatrists cannot study the psychology of dead murderers. Nor is it possible to study successfully those obviously deteriorated psychotics whom, if they commit a crime, the law sends for safekeeping into special "hospitals for the criminal insane." The so-called obviously insane are not psychologically accessible, and therefore they are poor research material for our purposes. To deprive the psychiatrist of the opportunity to study murderers carefully and for long periods of time, for months and years, and still to demand answers to these questions, is as unreasonable as it was to deprive students of the opportunity to dissect cadavers and still demand that medicine know human anatomy. Executions and life imprisonments, complete isolation of the criminal, deprive medical science of its only good source of information and deprive society of that knowledge which it wishes the psychiatrist to be provided with and to provide.

accepted Freud's psychology, because we always knew that it led to atheism; now, when Freud has pronounced himself unequivocally an atheist, it is even more clear to us that we were right all the time; Freud has proved our point beyond any further doubt." That Freud's views on religion might possibly have been only an expression of his personal attitude was apparently not considered. That unconditional opposition to religion, or any opposition to religious belief, was not inherent in the Freudian system of psychology seemed unthinkable. That Freud contradicted himself even when he took a stand against religion remained unnoticed. That his contradictions on the subject of religion were both logical and psychological has not been properly pointed out by either his opponents or his followers.

It is not difficult to detect an element of welcome in the general attitude toward Freud's antireligious platform, as if this stand added obvious and irrefutable substance to the violent criticism of psychoanalysis, which was general, sustained, and almost unshakable. Freud's views on religion were accepted or rejected too uncritically and too readily. Injury is always done to truth, and violence to justice, when in the midst of a serious controversy we welcome a logical misstep of an opponent merely to ease our conscience, which would otherwise reproach us for lack of curiosity and failure to understand what our opponent has to say.

Let us recall and fix in our minds that Freud was a rather unskilled philosopher and that he was not a social scientist. He was a doctor and a psychologist and a great artist, a master of the written word and a lucid, incisive, although at times a little morose, intellect. He was a great humanist, but his was also a strict mind. Superficiality disturbed him. The question of how man lives within him-

choly way and rather serenely anxious when he contemplated the biological strivings and limitations of man and his inordinate aggression. The central point of Freud's fascination was man's great capacity for love, and with considerable pessimism he wondered about man's inordinate capacity to hate, to kill, and to seek death. He was stirred by the vistas which revealed themselves before him when he studied the transformation of man's self-love and hedonism into love for others and altruism. In this preoccupation Freud was the true descendant of Aristotle and St. Thomas Aquinas. He lent more than casual support to these two men by the mass of empirical data which was unknown to Aristotle or St. Thomas and which he accumulated during six decades of assiduous and productive work. Yet Freud would have been the last man in the world to admit the affinity of his findings and ideas with the thought of Aristotle and St. Thomas. He would have been the first to say that it was Plato from whom he derived greater inspiration, that he was neither Christian nor monk, and that he felt foreign to St. Thomas, even if he had ever cast a casual and uninterested glance at the cover page of the *Summa Theologica*.

Broad philosophical systems and the inner empire of religion were of little value to Freud, because in them the individual seemed to him lost. Anything that threatened the autonomy of the individual he treated with skepticism, suspicion, and even contempt. It is not difficult to see where Freud made his mistake when he was confronted with the major phenomena of human living—civilization and religion. Freud was always so careful not to judge man that he left the question of values to be answered by the healthy individual himself; consequently, he betrayed a methodological weakness in his estimation of the values of civilization and religion in their proper perspective. One

almost senses in Freud reverberations of the eighteenth century. The French political philosophy of *Le Contrat Social* demanded the utmost freedom for man within the broad limitations imposed upon him by the voluntary contract which he was supposed to have concluded with his fellow men. Civilization insofar as it restricts and hampers man appeared to Freud a violation of this contract. Religion as one of the most restrictive forces in our civilization was, therefore, injurious both in form and in content.

Freud, who never failed to stress the polarity of human nature, the tendency to be passive and submissive as well as active and domineering, overlooked the immense role of religion in relation to man's passivity. Perhaps it is this error that also made him overlook, or pass over in silence, the relationship between the intensification of manifest homosexual drives whenever religion shows signs of losing its hold on a given civilization. This phenomenon has become particularly obvious since the last war, especially in Germany under Hitler. Freud was more interested in the psychological parallelism between the individual and certain aspects of civilization; therefore he centered his attention primarily on the psychological mechanisms of culture and religion insofar as those mechanisms could also be found operative in the individual as an autonomous unit. Whenever he saw in civilization a psychological constellation which was similar to that of an individual neurosis, then it was a neurosis of civilization. A neurosis in an individual must be cured—a neurosis in society must be rejected. It is to be noted that it was not cure that Freud advised, but rejection on the basis of purely intellectual analysis of the psychological components of the alleged social neurosis. In relation to civilization, he appears not as the therapist but as the bearer of severe protests. Freud was the greatest representative of the Renaissance which

humanity was fortunate enough to have in the otherwise gruesome and bloody half-century of our age. Like Erasmus, he was keen and challenging and libertarian and critical. But unlike Erasmus and many other great and pious humanists, Freud was closer to the classicist and the rationalist; he opposed religion because he honestly believed that "religion decries the value of life." It may be repeated that it is on the problem of values that Freud's methodology was stranded or even shattered.

In order to understand the true relationship of psychoanalysis to religion, we must keep definitely in mind what it is we discuss when we use the term "psychoanalysis." Is it psychoanalysis as a therapeutic technique? A technique of treatment of a disease, a rational, empirical, and scientific technique based on causal principles, cannot be of any worth in evaluating anything but the efficacy of its curative power. It is obvious that the technique of psychoanalytic treatment has nothing to contribute to problems of estimating social and religious values.

Is it psychoanalysis as a philosophy? This we cannot consider, for the simple reason that there is no such philosophy. There are many people, among them this writer, who derive certain social, religious, and philosophical considerations out of the body of facts accumulated by psychoanalytic research, but this does not make psychoanalysis a philosophy. Botany and zoology present an enormous mass of factual material; philosophers might make use of these facts, but this use would not elevate botany and zoology to the status of philosophies.

Is it then the body of empirical facts and the accompanying working hypotheses that we have in mind when we use the word "psychoanalysis"? This should be the case. It is quite obvious that we ought to limit ourselves to the consideration of the facts which psychoanalysis has to

submit; we ought to postpone consideration of the question of philosophical or religious values until we are in full possession of that which has been observed and described. This is the prerequisite of any learning; we should comply with it and avoid that carping state of mind which rejects in advance any or all of the facts of psychoanalysis only because Freud himself happened to have his own way of estimating certain rules of life.

Moreover, facts, like faith, cannot be rejected. Facts stand, no matter how much one may insist that they do not exist, and faith stands in the mind of man, no matter how sharply many people may choose to reject it.

II

Freud's attitude toward religious values is a highly interesting psychological phenomenon. He treated religion now as if it were an expression of the nature of man which he did not particularly like, and then as something superimposed on our culture and as something highly undesirable because it is infantile, neurotic—an illusion. He gave no evidence of being interested in the actual function of religion in the frame of our cultural growth. He did not go beyond pointing out that the psychological mechanisms of religious expression were those of a neurosis, and on the basis of these mechanisms he rejected religion. Yet Freud described in similar terms the psychological mechanisms involved in the creation and application of art and assumed a totally different attitude. "The substitutive gratifications [of unconscious, forbidden, and infantile drives], such as art offers, are illusions in contrast to reality, but none the less satisfying to the mind on that account, thanks to the place which fantasy has reserved for herself in mental life." Freud did not decry the psychological in-

fantilism of art, nor did he call art a cultural neurosis, nor did he reject it on the ground of its being an illusion.

Even in his consideration of religion, Freud contradicted himself. He stated in his *Civilization and Its Discontents*: "Nor may we allow ourselves to be misled by our own judgments concerning the value of any of these religious or philosophic systems or of these ideals; whether we look upon them as the highest achievement of the human mind, or whether we deplore them as fallacies, one must acknowledge that where they exist, and especially where they are in the ascendant, they testify to a high level of civilization." Unfortunately Freud, who almost admitted in this passage that his own judgment concerning the value of religion might be a purely personal bias, never pursued the matter any further. It would seem that having dealt all his life with problems of psychopathology and having continuously occupied himself with the effort to disperse the nonrealistic fantasies and illusions of neurotic and psychotic patients, Freud confused neurotic, false belief with faith, particularly religious faith. In addition, he seems to have accepted his personal opposition to religion as one based on his scientific psychology. Scientific knowledge is essentially different from religious knowledge, and it is impossible to measure one by the other; they have no common methodological denominator.

It is totally outside the scope of our discussion to try to analyze the psychological and philosophical relationships between science and religion. Such an analysis would inevitably lead us into a discussion of theology, and the writer is not a theologian. His contribution to such a discussion would only enhance the confusion of the issues involved. Moreover, whenever science has worked to put theology on a scientific basis, and whenever theology has

attempted to put science on a theological basis, so much strife has been generated that the dignity of both has been considerably tarnished and humanity has suffered, not only intellectually, but spiritually and physically as well.

There is a great deal of feeling in religious faith. The psychologist of the future will probably acquire both the courage and the insight necessary to enlighten us on the deeper psychological forces and mechanisms underlying religious faith. All faiths, except perhaps the Moham-medan to some extent, are pervaded with such a spirit of humility and of service to God and man that one is fascinated and yet frightened to see how much aggression and intolerance are aroused as soon as a religious controversy is kindled. Religion does appear to be a repository of great masses of aggression and therefore, from the point of view of its psychological function, religion does seem to be the force which harnesses a greater amount of aggression than any other spiritual agency. This aggression comes out of its repression with the utmost intensity as soon as some unknown element is touched to disturb or to question a given religious faith. The cynic might merely point to the floods of blood and waves of hatred accompanying religious strife as signs of the very incongruity of religion, of its basic instability; he therefore might reject it as irrational and useless and even injurious. The less cynical and more contemplative might wonder whether some forty centuries of monotheism is really a sufficiently long time for the human race to learn to be faithful to religious belief, and whether the religious crises were not a direct result of our general cultural, economic crises. Human history bears ample proof that it was not religion that produced these crises but a number of potent factors which merely engulfed the religious life of the race in their stormy waves. This was the history of the

Kingdom of Israel and of the Roman Empire. Not Luther, not even Savonarola, certainly not Henry VIII, represented purely religious issues, although their struggles, which grew out of the very essence of the march of civilization, produced great religious controversies, schisms, hostility, calumny, combat, bigotry, and perversity. We must again defer our hopes to the future psychologist who may be able to decipher this tragic puzzle. Clear it is for the moment that when religious individuals or groups act in such a manner as to give full vent to all the human weaknesses, it is not their religion but their human deficiency that makes them victims to the disrupting trends of life.

It is of little scientific or philosophical value to point to what many scientists, including Freud, have called the "fallacies of religion." One cannot consider the postulates of religion scientific fallacies and feel that some point is proved, for religion was never based on scientific proof.

There is more than a lurking suspicion in one's mind that the fundamental anxiety of man, his deep-seated insecurity, plays its rather cynical, Mephistophelean role in both scientific and religious questions. The scientist in all his sagacity sooner or later reaches a blind alley wherein he is lost in the mist of the unknown and perhaps unknowable; he then defends himself against the trembling voices of anxiety by demanding that religion either give him scientific proof of its validity or desist from beckoning his troubled mind. The religious man who, in all his faith and devotion, stumbles upon the fullness of his anxiety demands that science either accept his religion and then give him succor or desist from trying to seduce him with the obviousness and tangibility of all that is measurable and gives one such an illusion of power and mastery over the universe. One wonders whether some ingenious critic

of empirical and experimental science might not turn the tables and say, not entirely without right and plausibility, that science ought to be rejected because it is an outlet for man's inordinate infantile, peeping, sexual curiosity, because it is merely a formalized expression of his faith in himself and in his ultimate mastery over nature and man. Such a critic might even assert that science is an infantile, neurotic adaptation which leads us to destroy life while claiming that we aspire to achieve the opposite.

Very few in our age of mass production of Flying Fortresses would countenance such an argument about science, for we are too thrilled with self-adulation over our mass production, and we overlook the bomber-and-tank aspects of it. We must overlook the destructive forces of our scientific civilization, because we cherish our delusions of scientific goodwill, of light in the midst of darkness. It is hardly necessary to remark that this imaginary argument about science is as tenuous as Freud's about religion. Freud's argument, we must repeat, involves a consideration of values to which science has no answer and never will have. The problem of values belongs to that inner and anxious longing for the re-establishment of that true brotherhood of men on earth which may have existed for a fleeting moment in the remote past and then disintegrated as a result of the reciprocal aggression and common sense of guilt which came from the primal murder of the father.

Both religion and psychoanalysis—the former by way of inspiration and revelation, the latter by way of psychological investigation—seek to solve the difficult problems which impose themselves upon man in his constant state of anxiety and sense of guilt. Both seek the path that would lead to serenity and attenuation of the sense of guilt. Each uses a terminology of its own, but both seem

to have solved the problem on the basis of the same principle. Both give the principle the same name—love. One sees in love the means for ultimate salvation, the other, the means for ultimate health. This, it would seem, is a point of contact between religion and scientific psychology which no other science has ever had. Yet religion and psychoanalysis have kept apart throughout the history of psychoanalysis, largely on what seems to have been the initiative of Freud himself, but not without the most active co-operation on the part of religion. This antagonism, particularly in the light of what they have in common, is at first not easily explained. What Freud's psychological and methodological error might have been has already been suggested. Moreover, in discussing religion, particularly when he said that it decries the value of life, Freud was too general and, entirely in contradistinction to his usual succinct way of looking at things, rather diffuse and dogmatic. He confused the ideational content of religion with its ritualistic expression, its psychological elements with its institutional aspects.

While Freud was not entirely explicit on the subject, he seems to have had foremost in mind the Catholic Church; he lived most of his long life in Vienna and in the atmosphere of ancient Catholic tradition. Of liberal Catholicism he was apparently not aware. His judgment of Protestantism he never stated, but it is doubtful whether he felt more kindly toward it. Because of his individualism, Freud chose religion as the symbol of the anti-individualistic forces of our culture. That is perhaps why he concentrated his criticism on religion and overlooked many much more potent cultural forces which neglect, reject, and injure the wholeness of man as an individual. He overlooked, for instance, the maelstrom of modern capitalistic industrialism and its pressure on the

individual. Modern industrialism—whether in Catholic or Protestant countries—sacrifices the individual with increasing frequency and ever growing efficiency in favor of the whole. It does so without any formal guiding ethical authority but through the sheer pressure of the material power of man over man. It is highly doubtful whether the nonindividualistic theology of Catholicism has actually impeded the growth of man. While capitalistic industrialism does standardize man almost as much as automobiles, it is essentially irreligious in its striving for possessions and power; while it does not officially decry the value of life, it circumscribes it sufficiently to hamper man's inner creative freedom.

Freud, the profound individualist, did not express himself so violently, or at all, against this economic aspect of our civilization. What seems to have aroused his bitterness against religion is apparently something more than and different from his individualism, which he used only as a point of departure for his antireligious considerations. One wonders whether Freud, had he lived longer and preserved his analytical powers, or had he come to the examination of religion sooner, would not have revised his views on religion, or at least have corrected them to the extent of apperceiving in the religious "escape from realities of life" not a neurotic illusion but one of man's most natural functional adjustments to many of the inner realities with which he is always confronted.

Freud resented the restrictions which religious tradition imposes upon our biological urges, particularly the erotic ones, yet he could have considered the fact in a somewhat different light if it had occurred to him that these restrictions and taboos are older than our historical civilization, older than our monotheistic religions. As he himself said, they arose from a number of primitive needs which are

controlled with the same difficulty as any other basic need of man. Freud looked upon religion as the proponent of asceticism; yet if one considers the theoretical but logical possibilities of turning one's love outward to the utmost, a situation might obtain which Freud himself described so very well when he spoke of "that way of life which makes love the center of all things and anticipates all happiness from loving and being loved." If and when this way of life is ever reached by man, he naturally feels humble and serene, and he expresses the totality of his relationship to life in terms of loving God and everything living, and of being loved or striving toward being loved by God.

III

Freud had St. Francis in mind when he spoke of the way of life which makes love the center of all things, and it is the mystical quality of the imagery which accompanies this way of life, the mysterious, magic concomitants of ceremony and prayer, that Freud felt necessary to reject because he felt all this was none the less infantile and illusory. In this Freud was in error, and religion in reply committed its error in relation to Freud. Stated briefly, this reciprocal mistake could be outlined as follows.

I walk to church. In order to reach church I use my legs. I bring into play those nerves and muscles which supervise and are involved in locomotion. I walk across the street to shoot a man. I use the same set of nerves and muscles and the same brain nuclei for this purpose. I enter church, still using the same part of my neuromuscular apparatus, and I light a candle; in order to light the candle, I use my right hand, especially my thumb and forefinger, and that part of my neuromuscular system which moves my forearm, arm, and hand. I enter the office of the man

I am to kill and shoot him. To shoot, I use my right hand, especially the thumb and forefinger, and the same set of neuromuscular units.

He will be insensate who will conclude on this basis that going to church and lighting a candle are equivalent and perhaps equal to entering a man's office and shooting him, because the anatomic and physiological units used to carry out these two most divergent acts are identical. Let us assume now, no matter how preposterous the invitation may seem, that Freud and the Church both agree on one point—that the anatomical and physiological instruments of walking to church and lighting a candle and walking into a man's office and shooting him are identical. Each would draw his own inimical conclusion. On the basis of the above-established identity, Freud would say: "I reject religion and all it stands for because it is anatomicophysiologically criminal and murderous." The Church on the same basis would say: "I reject Freud because he describes the anatomicophysiological apparatus which we use to walk to church in the same terms as the neuromuscular apparatus which we use to commit murder. I further reject Freud because his anatomy is wrong, his physiology is wrong, his theology is wrong, and consequently his whole system is erroneous and sacrilegious."

Preposterous and incongruous as such imaginary reasoning might appear, Freud and the representatives of religion have repeatedly approximated this error in relation to one another. This impasse of mutual misunderstanding is so definite and final that one would have real cause to despair of ever bringing any warmth of reconciliation into this cold atmosphere of settled divergence were it not for a number of similar problems in the past which offer considerable hope in the manner of their solution. When the great minds of Islam, Averrhoes and Avicenna, introduced

posed the study of anatomy. The Church as an institution could not but reflect the scientific and cultural struggle of each given epoch. Today no Catholic would even imagine that it is imperative to oppose the study of anatomy in medical schools. The meteorological views of Innocent VIII, who ascribed storms and droughts to the machinations of witches, were as much an expression of the culture of his day as was the superstitious attitude toward witches on the part of some of the greatest medical scholars of the fifteenth and sixteenth centuries. Today Catholicism would not say that modern meteorological science encroaches upon the theological foundation of the Church. The anti-Jewish laws of Marcellus II, which in many respects parallel the Hitlerian Nuremberg Laws, were characteristic both of the man and of the times. They are sufficiently outweighed by the serene simplicity of Pius XI, who denounced anti-Semitism without mincing words and stated that the tradition of the Catholic Church is Semitic and that she considers Abraham her patriarch. One wonders why, by the same token, some judicious and contemplative and scientific Catholic mind, whose Catholicism would be as profound and unshakable as that of St. Thomas and whose breadth of vision and scientific taste would be as universal and catholic, could not undertake a careful restudy of Freud and his followers and see for himself wherein the scientific findings of these unbelievers are truly scientific and therefore, like any true science, do not, as they cannot, encroach on the theology of the Church.

Let us take as a simple example St. Thomas's assertion that sensuality is the source of evil and misuse of reason. The scientific findings of Freud demonstrated that hedonism, infantile sexuality, if persisting beyond a certain period of life leads to mental illness and other forms of maladjustment. Here we have the scientific corroboration

of the claims made by both Aristotle and St. Thomas. That St. Thomas on the basis of his attitude toward sensuality chose to take orders against his father's will and lead a saintly, monastic life, and that another person on the same basis would today choose the secular life of a family man, in no way contradicts the psychophilosophical conclusions of St. Thomas or the biopsychological findings of Freud.

The concept of sensuality which was in the mind of St. Thomas might well have been the concept of sexual indulgence in the narrow sense of the word, although his age intuitively sensed that other, seemingly nonsexual forms of sensuality, such as gluttony, are of the same sensual order. In the light of scientific, psychological investigations, Freud found it possible to establish the common nature of all sensual drives, which he called "sexual," "erotic"; the term cannot be considered alone and by itself and be forcibly re-established in its narrow sense of pertaining to the sexual organs. Any drive which provides pleasure and which is used or utilized primarily for the pleasure it provides is termed "erotic"; aggression, when it becomes coupled with pleasurable apperceptions, conscious or unconscious, is considered erotized even if it does not take the form of a sadistic perversion. The fact that for many centuries the word "erotic" made men think only of something related to the reproductive organs is undeniable and understandable, but perhaps no less regrettable. Plato's conception of Eros was certainly more broad and profound. It is a matter of taste, not truth, whether we accept the Freudian term "sexual" or the Thomistic "sensual." Freud was no more pansexual in his attitude toward and hopes for man than St. Thomas was pansensual. By the same token it matters just as little whether we use the Aristotelian term "self-love" or the

Freudian term "narcissism," provided we understand the psychological structure and the dynamics of narcissism as they are understood by modern psychological science. They encroach upon the dogma and the basic theological principles of the Church no more than the discovery of the benzene ring by the chemist or of the electric charges in the stormy clouds of the firmament by the physicist.

We may now go beyond the mere consideration of terms and take a close look at the libido theory, or the "theory of sex," as it is sometimes called. The conclusion which imposed itself on Freud was that man cannot be considered grown-up or normal unless all the component infantile drives become fused into one genital constellation. Only then does the libido acquire the capacity and quality of turning toward the outside world, toward people and things. Only then, in other words, does man become capable of true love. The term "love" from now on loses its narrow, selfish, sensual meaning; even the purely erotic aspect of this love, in the narrow sense of the word, is no longer dominated exclusively by the sensual elements of which it is composed. The child, if we look upon him from the point of view of our adult standards, is not capable of this adult love; in all his innocence, he is what Freud called "polymorphously perverse." The grown-up is alive with his filial, brotherly feelings for others, and his love flows outward; the psychological maturity of the individual leads to mature psychological fatherhood and motherhood. This change must occur even before physiological maturity sets in. Love becomes the mainspring of our psychological energy and the cornerstone of that edifice which represents our social, esthetic, and spiritual life. Love becomes the master drive which keeps permanent vigil, holding back and trying to neutralize the aggressive, antisocial drives coming from within as well as the aggres-

sive impulses aroused by the impacts of reality coming from without. Love is the source and substance of our conscience. The anxiety with which our sense of guilt is pervaded and the severity of our conscience may appear to us to be made up only of fear and aggression, but if it were not for our unquenchable need to love and be loved there would be no conscience; there would remain only animal fear and animal aggression.

It matters little which terminology Freud used. It matters little whether or not Freud, in describing the biopsychological evolution of the individual from the cradle to puberty and maturity, stopped to consider the mysterious transformation of that which we perceive and feel into cognition—consciousness. It also matters very little whether or not Freud took into consideration the religious aspects of the growth of man. From the point of view of our argument, it is perhaps an advantage that Freud failed to consider all these questions, for his conclusions could then be viewed as even more objective. In his study of the individual's development from the narcissistic, polymorphous perverse stage to the level of mature love, Freud took into consideration the mystery of human life as little as the anatomist, who dissects the various organs of the body, concerns himself with the mystery of death. What does matter is that Freud, unconcerned with ethics or religion, arrived at the conclusion that the life of man is based on creative love, on constant domestication of his aggression, on constant harmonization of the animal within him with his humanness, on the constant living of his life on the basis of love and reason instead of hate and impulse. These conclusions imposed themselves upon Freud by the very evidential force of the psychological phenomena which he observed clinically. It is not necessary to call upon complex philosophical speculations

or to exercise much logical strain to see that Freud, unknown to himself, thus established an empirical basis of life which is in total conformity with the Christian ideal.

It is baffling, and often confusing and even embarrassing, to note that our Christian thought has failed to accept and wishes to reject a scientific finding and conclusion which not only lends support to the fundamental precepts of its own ethicoreligious teaching but also brings a biological, observational, scientific proof of the revelatory intuition which has inspired religious teachers since the time of St. Augustine.

It is not accidental that the objective, biological terminology of psychoanalysis designates being in love as "being fixated on the love object." It describes the sense of oneness of adult love as different from the infantile or neurotic state of being *fixed* on the infantile object or source of pleasure, different from the disrupting, essentially non-loving, purely biological, purely animal egotism. Nor is it accidental that psychoanalysis describes the love for others than the adult sexual partner as *desexualized* and the love for the adult sexual partner as imbued and motivated by the need and wish for children, for adult parenthood. These nonaccidental designations demonstrate how our disorganized and selfish and anarchic drives arrange themselves in a harmony in accordance with an inner law, which religion has expressed in terms of morality, the sanctity of monogamy and ethics, and unity with the will of God. That psychoanalysis nowhere seems to occupy itself with problems of morality and ethics is, of course, true. But it is also true that the physiologist is concerned little if at all with the ethical and religious implications of his experimental findings. Nor does the logician consider the ethical and religious implications of his system; he studies the forms of reasoning and leaves the problem of

was not concerned with, nor did he advance any facts or any arguments against, that principle which St. Thomas called the "acting intellect" (*intellectus agens*), which produces reasoning by way of forming abstractions (*per modum abstractionis*). Where St. Thomas speaks of "phantasmas" Freud speaks of "representations"—that is, the inner images we make for ourselves of the objects of the outside world.

It would not add to the clarity of our discussion if we engaged in a detailed consideration of Thomistic psychology and compared it with the Freudian. To retranslate St. Thomas's scholastic terminology into purely modern language and then to recast Freud's own terminology into its more tangible equivalents is no easy task, yet in the opinion of the writer it is feasible, scientifically justifiable, and philosophically tenable. Suffice it to say here that Aristotle and St. Thomas were and numerous generations of philosophers since have been preoccupied with the problem of how our perceptions become transformed into thought and action. Purely materialistic explanations failed to provide a satisfactory answer, and the sharp dichotomy of body and mind succeeded as little. The search for a center in which all sensations meet (*sensorium commune*) and become integrated has always been a matter of concerted preoccupation and has never yielded really satisfactory results. Whether we place this *sensorium commune* in the heart or in the brain matters little; the riddle remains unsolved.

It is Freud's momentous contribution to the solution of this riddle that seems to be overlooked. Science probably never will be able to provide the final answer, but Freud's conception of the psychic apparatus made it easier for us to understand the dynamic process of the transition from the purely physiological to the purely mental. The psychic

apparatus is apparently the actual *sensorium commune*, the central, intermediate, obscure and yet so dynamic zone of functioning by virtue of which man is able to make the transition from automatic animal to human behavior. It is perfectly logical to look upon the psychic apparatus, particularly the area between the id and the superego, as the functional biological stratum in which man is no more a mere animal and not yet fully a human being. The psychic apparatus is just what it etymologically means: It is the apparatus, biological in nature, through which filter the conative and cognitive elements of the human personality. One cannot repeat too many times that psychoanalysis knows and claims to know as little about the soul as the religious opponent knows about the psychic apparatus. These two entities cannot be united and confused with or substituted for one another. Any attempt at such a unity or substitution is an attempt to construct a contentious artificiality, something like a scientific theology or a theological science—which is a contradiction in terms, in concepts, and in basic subject matter.

The emotional fog of mutual suspicion and open hostility which surrounds psychoanalysis has produced unserviceable controversies and some singular paradoxes. Religious dogma looks upon psychoanalysis as the essence of incorrigible materialism denying the existence of the soul; the modern dogma of Marxism accuses psychoanalysis of being too idealistic for acceptance by a historical materialist. Religion assumes that Freud is too mechanistic; Marxism, that he is too metaphysical. Both accusations are obviously unjustified; both are based on the misunderstanding of the basic scientific premises of psychoanalysis. One can answer the accusation raised by religion merely by saying that the phenomena of life and living, being what they are, manifest themselves to us in a certain way; Freud de-

scribed these phenomena not only as they appear to the outside observer but also as they subjectively appear to those observed. One can answer the economic determinist by saying exactly the same thing with the added observation that the psychology of man is not only a cultural but also a biological phenomenon, and biology is something more than mechanical physicochemical physiology. Psychoanalysis as a body of facts and working hypotheses neither explicitly nor implicitly denies economics or religion; psychoanalysis cannot deny them, because it cannot deny anything that represents human living. Both economic materialism and religion deny psychoanalysis not because they know that it is wrong but because they do not yet understand it.

IV

A point has been reached in this discussion at which one is tempted to proceed along the lines of philosophy, particularly that part of philosophy which is preoccupied with religious problems. If one were to give in to this temptation, one would run the double risk of abandoning the field of observation for that of speculation and of intruding into a domain in which, to say the least, a scientific observer is apt to find himself highly inexperienced. The writer has endeavored to the best of his ability to make clear how little psychoanalysis as an observational discipline really does encroach upon religious philosophy, and how it even lends empirical support to some of this philosophy's precepts as he understands them. He has neither the right nor the equipment to venture beyond the limits thus far reached.

It must be borne in mind that no attempt has been made here to seek a psychoanalytic solution of theological problems, or a theological solution of psychoanalytic prob-

lems. The only thing that appears really important in this discussion is to establish clearly that the psychic apparatus, or the psyche, is not the soul, that it is the instrument of the soul as much as our neuromuscular system is the instrument of our sensory-motor system. It is not a separate, anatomical entity; it is a functional instrument, charged with energy, and it works, reacts, and behaves in response to stimuli. These stimuli come from without (from the outside world) and from within (from our instinctual drives). The instinctual drives come from special organs and from the organism as a whole. These drives may be speculatively identified with the "life force," or the *élan vital*, or whatever it is that makes a living thing a living thing, whether it is an ant, a lion, a snake, or a man.

The instrument which we call the "psychic apparatus" is limited in its manner of expressing its reactions in the same way as any other instrument in our body is limited. The lungs cannot jerk as the muscles do, and the heart cannot secrete bile as the liver does. The psychic apparatus expresses its biopsychological responses by means of unconscious imagery and representations; that is its own language as much as the language of the muscles is motion and the language of the stomach lining is fermentation and the breaking-down of food. What we find in the psychological content of the psychic apparatus is a struggle of images, self-contradictory fancies, the battle of drives plastically and dynamically represented. That the psychic apparatus is not reason, not intellect, not "mind" in the usual sense of the word, is clear. When the psychic apparatus expresses itself on any matter, it expresses itself in the intimate paralogical, irrational manner of primitive representations and imagery, which are nonrealistic. Thus, realistically we know that we are voting for one candidate for the Presidency and against another. We also

know realistically our reasons, particularly if we happen to be nonneurotic. But our psychic apparatus, the unconscious core of it, knows nothing about Presidents and democracies and it reacts and feels; *it does not think*. It plays and struggles with the image of patricide. This is irrational, nonrealistic; this is the paralogical nature of our unconscious. In this case the greatest psychological achievement for us, ideally of course, is to become able to differentiate automatically between the irrational, fantastic, and unconsciously fantasied patricide and the casting of our vote for President. But even at the height of this achievement, the unconscious still speaks its own primitive language of patricide, incest, and its concomitant anxieties.

No wonder, then, that Freud found the unconscious, irrational language in which man couches his religious faith and the performance of his religious service to be the language of primitive irrational, infantile imagery. He could not have found anything else, for the psychic apparatus cannot express itself in any other way. But one cannot deny the civic value of democratic elections, the social and moral value of honoring a leader at a banquet, or the pervading value of religion, merely because our psychic apparatus is unable to designate them successively in any other way than a patricide, a primitive feast of oral passivity to the leader, or a passive infantile, self-castrative dissolution before the father.

The idiom of the unconscious in no way affects the substance of civilization, any more than the idiom of the Chinese language affects, changes, or nullifies the meaning of the history of the American Revolution when it is told in Chinese. What goes on in the unconscious the unconscious tells in its own manner. Gustav Mahler once said, in rejecting programmatic commentaries on music: "If it could

all be told in words, one would not have to say it with music." If one could say it all in the words of our conscious, there would be no unconscious. It is not on the literal meaning of the unconscious language that we must base our rational evaluation of life, but on the direction which our drives take in the process of our development.

One should not overlook the fact that even the concept of original sin or of the original fall of man finds its empirical counterpart in the findings of psychoanalysis. We may recall a French abbot of the middle of the twelfth century, the Abbot of Stella, who in order to discuss some psychological problems with one of his pious and inquiring friends, and in order to avoid any pitfalls of possible sacrilege, decided to consider the soul without touching upon the question of "what it was before sin, or is in the state of sin, or will be after sin." He thus excluded theology in order to be empirical and pragmatic. This is what Freud tried to do, although he was not entirely successful. Without knowing it in advance, Freud soon discovered that he was studying the psychological reactions of man *in the state of sin*; he was at once confronted with the anxiety, the sense of guilt, and the sexual conflicts which burdened his mental patients. He discovered that there is no man living who is not burdened with what he called "the precipitate of the oedipus complex"—man's perennial, unconscious sense of guilt. Again, it would appear that if we remove the purely terminological objections which religion raises against Freud, its dogma would find itself supported rather than denied by Freud's factual psychological findings.

This point is stressed here so repeatedly not because the fundamental precepts of religion need scientific support. As has been said, religious beliefs need no scientific proof, nor are they made less valid by scientific refutations. Sci-

ence can refute superstition, but not religious faith. It is true, of course, that at various stages of our civilization superstition was so intimately interwoven with established religion that the undiscerning mistook one for the other. But it is also true that the Church itself discarded numerous superstitions which were dispelled with the advance of science, while the fundamental principles of faith naturally remained. There was a time when the mentally ill whose psychotic delusions and trends were related to religious imagery were considered as especially blessed; today we know quite well that religious ecstatic trends in a schizophrenic represent merely the utilization of religious pseudorevelatory fantasies in the service of the psychopathological process. A schizophrenic may weave into the system of his paranoid delusions any psychological material—sexual, social, philosophical, or religious.

To remove the paranoid trends which are couched in religious terms does not mean to touch the fundamental principles of religion. This leads us directly to one of the most pronounced causes for the opposition of religion to psychoanalysis. It is claimed that psychoanalysis is based on a philosophy which when accepted invariably destroys religious faith. One could deny this assertion flatly and with a clear conscience, but it is worth while to point out here that this misconception is based on an anxious misunderstanding which motivates even the irreligious layman and not only the sincere believer. This misunderstanding could be expressed approximately as follows:

"You as a psychoanalyst claim that I am suffering from a sense of guilt because of my sexual conflicts. You will treat me and you will presumably relieve me of this sense of guilt. I have heard and myself believe that psychoanalysis is like a confession. I shall confess to you everything. And then what? Am I not in danger of being cured

of my sense of guilt and then leading a life which I consider bad and incompatible with my conscience? Does it mean that I shall be relieved of my conscience and that this relief is the goal of psychoanalysis? Isn't this a very high price to pay for feeling well? And isn't it much more decent and moral to continue to suffer rather than to become a lascivious person whom society would condemn?"

The answer to this seemingly legitimate query is that the query is not rational and that the goal of psychoanalysis implied is not its goal at all, and cannot be.

Psychoanalysis is not confession, nor is it like confession. Confession is a conscious act of repentance, and a ritual. Man can confess only that which he consciously knows, that which makes him consciously guilty; as a result of confession and the officially given absolution man feels relieved, and he is admonished and inspired not to sin any more. In psychoanalysis the patient cannot confess in the usual sense of the word. The patient gradually reveals the unconscious sense of guilt of which he has been unaware; he is not given absolution, nor does the psychoanalyst have any means at his disposal to relieve the patient of this guilt. What the psychoanalyst does do is listen and watch how the patient learns, gradually and almost imperceptibly, to differentiate fantasy from reality, infantile from adult impulses. The patient then obtains relief from feeling guilty about things of which he is not guilty at all, and he continues to feel guilty about those things of which one usually does and should feel guilty. If the patient has criminal or suicidal trends, he learns to know that his fantasied aggression against his father or mother is a left-over of his infantile past; he learns to know that the poor old grocery clerk or his foreman is not his father, and that he wishes him no evil; consequently, he no longer has the

unaccountable impulse to kill him, nor does he wish to execute himself by way of suicide.

Man cannot be cured of those ethicomoral and religious demands of his personality which live in him and make him what he is. Only the morbid, the useless, the unrealistic can be analyzed; only the unconscious conflict between the infantile and the adult—which is useless, injurious, which cripples man's psychological integrated functioning—can be analyzed. The deepest psychoanalysis is unable to reach and analyze those personality traits and fundamental human adjustments which serve the socioethical purposes of true adulthood in the psychological and social sense. Nor can religious belief, unless it is but a mark for a neurosis and therefore not truly religious faith, be touched by psychoanalysis.

It is knowledge of what is real in this world and what is endowed with a fantasied reality that one seeks to discover and can acquire by psychoanalysis. The power to discern when reason is clouded and guided by those unconscious drives which vitiate our understanding of reality is real power indeed, but it is weakened by neuroses and almost emaciated by psychoses. We thus can see that reason, instead of being excluded from the sphere of therapeutic effort, is put at the very center of the procedure. Reason cannot function properly when one has a severe physical illness. It is impaired in certain cases of brain tumors or other cerebrospinal diseases. But in no illness is it so impaired as when the psychic apparatus is disturbed in the quantitative relationship of its parts, for the psychic apparatus is evidently a much more important organ of the human *personality* than the heart, the stomach, or the brain.

The discoveries of psychoanalysis make it possible to introduce a clarifying correction in the old schematization

of how our personality functions. The scholastic philosophers and those who followed them in the wake of Descartes and Leibnitz looked for the seat of the soul somewhere in the body. An intermediate area between the body and the soul and yet within the perishable frame of man seemed to them unthinkable. They not only divided man sharply into a body and a soul, but they sharply divided their own thoughts: they were purely materialistic when they looked at the body, and as purely idealistic when they contemplated the soul. Their minds searched for a connecting link, but they did not know their own minds. The discoveries of psychoanalysis seem to have done away with this conceptual discontinuity. Life is a continuous phenomenon, and it cannot be fragmented. The visualization of the psychic apparatus, which uses all the organs and yet favors no one special organ, re-established from the biological and, if you wish, philosophical point of view the very continuity of all the so-called parts of man. It re-established the wholeness of man which thinkers and religious philosophers of all ages always sensed but never truly comprehended. The old, simple, untenable formula, body and soul, can now be modified to read body—psychic apparatus—soul. This schematic presentation seems most natural, and it would also seem in no way to impair even the strictest Thomistic tradition. But no matter how fitting it does appear, such an outline may nevertheless prove totally unacceptable to religion unless the major objection to psychoanalysis, an objection heretofore not mentioned, is met.

Psychoanalysis advanced the theory of psychological determinism. This theory appears to clash most sharply with the dogma of free will. That this is a true and undeniable clash is accepted by all concerned. The psychoanalyst who rejects religion points to psychological determinism and

the alleged Darwinism of psychoanalysis in support of his rejection. The Catholic stands on his firm ground and points to psychological determinism as a denial of his most fundamental postulate. This is a sharper parting of the ways than any other aspect of psychoanalysis can produce.

One need not indulge in sophisticated constructions of logical and metaphysical formulae to reconcile these two apparently irreconcilable positions. The writer is a poor philosopher and a poorer theologian. He does not know the subtleties of scholasticism, nor the heavy armors of scientific materialism. He has only a speaking acquaintance with them, and he cannot boast of being able to use them as tools of argument with any degree of ease. This is a theoretical disadvantage which he is happy to acknowledge and accept, but he finds himself unable to accept the apparently general agreement on the part of psychoanalysis and religion to disagree and to disregard one another with mutual suspicion and reciprocal contempt. Science cannot be contemptuous of life or of any part of it, and religion, even the most irreligious would admit, is an integral part of life. To treat it as a superstition or a disease means no more than to cloak ourselves with scientific respectability for purposes of denying that which we do not understand. On the other hand, to snatch at the term "psychological determinism" as the last word, as the slogan of a scientific attitude, and then reject the science as a whole is not in harmony with the seeking of truth. History knows many examples of bloody strife because science in the exuberance of its power and perspicacity seemed to challenge the postulates of man's faith. It must be said in full fairness that the bloodshed and the strife never were initiated by science; science always turned the other cheek until truth ultimately prevailed. Like Savonarola, only less impetuously and less flamboyantly but not less tragi-

cally, the fate of science elevated it repeatedly from apostasy to sainthood; seldom if ever did it move in the reverse direction.

The Freudian system is too young to be able to establish itself on a solid philosophical footing, but even now it can be said with certainty that insofar as it can be considered related to any biophilosophical trends it is closer to Lamarck than to Darwin, to vitalism than to mechanistic structuralism, to idealism than to materialism. The Freudian system is, moreover, not a system of thought but a partially systematized set of observations of facts not yet sufficiently correlated with any uniform theory. It is a real misfortune that the uncertainties and anxieties which have always surrounded man's attitude toward psychological problems have kept psychoanalysis in a state of isolation. Traditional science—so inept in matters psychological and so anxious to protect its dignity within the realm of that which is only directly visible and immediately tangible—has contributed perhaps more than religion to this isolation. It was left for psychoanalysis to stand alone and by the sheer power of obstinate, scientific integrity to maintain itself and display before the thinking world the rich mass of fact which it accumulated. In this struggle for scientific existence psychoanalysis itself was forced into an attitude of defense and was compelled to use its very isolation for purposes of maintaining its self-reliance. The result, as inevitable as it was deplorable, was a form of exclusivism and pride in being rejected.

Theoretically, these circumstances should have delayed the proper scientific evolution of psychoanalysis. They probably did, and yet psychoanalysis has made enormous strides in the short span of some fifty years. These years were not peaceful years. They were darkened by two profound crises that shook the very foundation of our cul-

ture; one of them is now at its height, and the end is not yet in sight. Yet psychoanalysis has made enormous strides despite all the ill winds and well-nigh insurmountable obstacles. This process is a testimony to its vitality, to its true appeal to reason despite all the confusing misconceptions with which its opponents and ill-advised friends have surrounded it.

To dismiss psychoanalysis despite the fact that so many of the objections to it which have been raised can be met with comparative ease, to dismiss it without further examination because it seems to be in conflict with the postulate of free will, means to disregard the fact which has been repeatedly stated and demonstrated in these pages, that psychoanalysis is not a philosophy, nor has it ever discussed seriously the question of free will. Psychological determinism can be as acceptable as physicochemical determinism if we do not forget that the adjective "psychological" is used in the sense of the functioning of the psychic apparatus and not in the sense of "spiritual," of pertaining to the soul. If one looks upon the psychic apparatus as an organ and not as a psychoanalytic substitute for the soul, the misconceived controversy about psychoanalysis and free will will easily recede. Man's free will cannot come to expression without free reason; reason cannot be free unless the organic or biological system within which the human personality is destined to function does function without the impediments which we, for want of any other term, call neurosis, or illness. Freud's psychological determinism never went and never could go beyond the limited frame, the *closed system*, of the psychic apparatus. The deficiencies or malfunctions of the latter vitiate the free exercise of the will as much as do deficiencies and pathological changes of the brain.

There is a characteristic story about Freud. He was

asked once whether a man could be held responsible for his dreams, and he answered: "Whom else would you hold responsible?" There is also Freud's profound sense of respect for reason, which he sought all his life to liberate from the fetters of the infantile, nonrealistic fog of a malfunctioning psychic apparatus. He wished to secure for man the true ability of free choice, which he thought impossible when the psychic apparatus is not fully integrated and harmonized, even as it is impossible to make the free choice to take part in a race if one is legless or paralyzed or ataxic. This striving for the opportunity of free choice is inherent in psychoanalysis. If psychoanalysis does not explicitly accept the postulate of free will, it does not deny it; if anything, it supports it by its striving to liberate man's reason and will from the frailties which his biological, and therefore psychological, imperfections impose on him in his daily life.

Freud's system of facts as differentiated from his fleeting excursions into fields which were foreign to him, the manner in which he struggled to disentangle these facts from the unknown, the curative faith which prompted him, the persistence with which he sought to make man inwardly free from the impediments of delusions and the disharmony of misconceiving life, his steadfast claim that adulthood, love, and a free reason are a unit and the hope and the goal of life—all these bear testimony to an unshakable faith in man's will and in his ability to make his choice freely when unfettered by disease.