American Handbook of Psychiatry

PSYCHIATRY & RELIGION

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PSYCHIATRY AND RELIGION

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Psychiatry is the study of emotional and mental disturbance and illness. Religion is one's system of devotions, reverences, allegiances, and practices— whether avowed or implicit, conscious or unconscious. Psychiatry deals with illness, its treatment and prevention. Religion is concerned with the development of the spiritual aspects of personality and the enrichment of personal and social life. Ideally it should help the tolerance and endurance of pain and suffering, the maintenance of health, and the prevention of illness. Standards and values, the need to belong, the need for togetherness, the need to feel worthwhile and of value, the desire to be cared for— all of these are important in human life. They are the concerns of psychiatry and are related to religion as well.

Religion has many aspects and a varied history." The various parts of the personality are given importance by different persons and by different faiths. Reason, belief, faith, ritual, and church memberships are variously

emphasized by different leaders as essential aspects of religion. With some the intellect is stressed, and such people require explanations, demonstrations, reasons, and logic, in part following St. Thomas. Others emphasize emotion, belief, conviction, and dogma. In these they find security, on these they are dependent, and so Schleiermacher believed a feeling of dependency was the essence of religion. For Pascal hope was a cornerstone. James wrote of the will to believe. St. Augustine stressed the will rather than the intellect. G. F. Moore thought the essence of religion was the conservation of social values. Santayana believed in the beauty of religion. Others emphasized rituals, ceremonies, and sacraments. Rules, taboos, and magic have been considered very important by some. Group belonging and togetherness have been emphasized by others. Protestantism finds mediation unnecessary and has stressed the individual's direct access to God. Catholicism emphasizes help from the group, from authority, from history, from tradition. Judaism exalts and insists on social justice. "Righteousness exalteth a nation." The scientists and philosophers have by no means dispensed with religion, as is so often thought to be the case. Einstein writes of awe before the great unknown and reverence for the harmony and beauty that exists in the world of nature. Bertrand Russell, in his Free Man's Worship, although disassociating himself from traditional religion, writes eloquently of stoic struggle and devotion to duty in the face of the destructive forces of nature and man, which most people would find was essentially religious.

Rabbi Kagan quotes from the Talmud that even if a man denies God and yet lives according to him, he is acceptable to God. Many religious psychiatrists feel that Freud, notwithstanding his writings about the neurotic obsessiveness of religious beliefs and practices, was religious in the sincerity, integrity, and persistence of his devotion and research.

The existentialists bring psychiatry, religion, and philosophy together. Efforts at the denial of religion, assertions that it has been eliminated, affirmations of the reign of reason and the hegemony of science have not banished anxiety, as existentialists point out. People cannot rely on reason and science and the inevitability of progress to bring about security and relief from fear and anxiety. The self- assurance of Victorian thinking and Newtonian mechanics has been shaken by quantum mechanics and by nuclear, astro, and mathematical physics. The present was called "The Age of Anxiety" long before Sputnik appeared. The existentialists, from Kierkegaard to Tillich, speak of anxiety as being involved in actualizing any possibility, in creativity, and in the realization of selfhood. They speak of the inevitability of anxiety, its confrontation in the development of individuation, freedom, and responsibility. For Tillich anxiety is the reaction to the threat of non- being, the threat of meaninglessness in one's existence. The capacity to bear anxiety is a measure of selfhood. Mowrer speaks of integrated behavior as the capacity to bring the future into the psychological present. Allport writes of *becoming* "as an integration of the past into the present." Niebuhr says man,

in contrast to animal, sees the future contingencies and anticipates their perils. Anxiety is the concomitant of freedom and finiteness.

There are devotions, reverences, thoughts, and principles of life, action, and behavior that contribute to effectiveness and health. Religion, beneath its many varieties, consists of constructive devotions and practices. There are forces at work in patients that are not determined by what we see, touch, weigh, smell, or hear. People seem to get well because of relationships with other human beings or under the influence of ideals or in devotion to causes. Relationships with other human beings or causes are transpersonal values. Such relationships involve a dedication to the constructive forces in life. Faith, hope, love, and justice are such forces. They have been manifested in the medical profession at its best and are related to religion. The doctor who engages in an active and tireless search to heal his patient is exemplifying these constructive forces, and the patient somehow comes to identify with him and becomes inspired to join the search. Inspiration and aspiration promote health. They are factors that cannot be neglected in medicine and psychiatry. A devoted and dedicated physician or priest is able to tap and mobilize resources for growth and life in the individual (eros, agape).

Psychiatry has been related to religion both historically and ideologically. Throughout the Middle Ages there were islands of constructive humanity—love and kindness at Monte Cassino and other places. For a long

time in the Middle Ages the primitive demonological conception of illness held sway, however, particularly in connection with the mentally ill. “Thou shalt not suffer a witch to live” seemed to be a religious injunction that Judeo-Christian religion followed with regard to the treatment of mental conditions. Protestant theology, perhaps following Calvin, emphasized the inborn sinfulness of man. In Judaism there is an optimistic view about man’s ability to overcome sin. Judaism knows about Yetzer Hara and Yetzer Hatov, the struggle between good and evil, but there is the belief that Yetzer Hatov, the good, will be victorious. Catholicism offers the weight of tradition, authority, and exercises (penances) to help man overcome his destructive impulses. Protestantism leaves man more to his own inner devices—suffering and punishment—to effect contrition and salvation. Traditions and some religious faiths are often great allies in the struggle to overcome the destructive forces that appear in neuroses, psychoses, and character disorders. Ideologically St. Paul stated succinctly the problem of conflict with which much psychiatric thinking is concerned: “For the good that I would, I do not; but the evil which I would not, that I do.” In the Judeo-Christian scriptures there are many statements such as the following that deal with the problems of suffering, illness, psychology, and healing:

> Because he has set his love on me,
> I will deliver him . . .
> He will call on me and I will answer him,
> I will be with him in trouble,
> I will deliver him . . .

God is our refuge and strength,
A very present help in trouble
Therefore will we not fear . . .

Psalms 91 and 46

Love suffers long, is kind . . .
Takes no offense . . .
Is not joyful over wrong,
But is joyful with the truth;
Overlooks all.. .
Hopes all, endures all.

1 Corinthians 13

For centuries religion and medicine have been closely related. Psychiatry is a branch of medicine, and its psychotherapeutic methods at times have approximated closely those of religion. Science and religion assumed distinctive roles in society as time went on, but they continued to share common goals. In order to clarify this belief, in 1947 the Group for the Advancement of Psychiatry made a statement that they believed in the dignity and integrity of the individual and that the major goal of treatment was the attainment of social responsibility. They recognized the crucial significance of the home and its influence on the individual and the problem of ethical training. They emphasized the important role religion can play in bringing about an improved emotional, moral, and physical state. Methods of psychiatry help patients achieve healthy emotional lives so that they may live in harmony with society and its standards. Psychiatry does not actually

conflict with the morals and ethics of religion, but frees the person to assert the morality and ethics that stem from a pattern of conscious affirmation, reasoned devotions, and accepted behavior rather than from a compulsive, fear-based pattern of behavior. These psychiatrists wrote that there was no real conflict between psychiatry and religion. It was felt that in practice competent psychiatrists would be guided by these principles. Psychiatry confirms the fact that beliefs and devotions affect not only physiological functions of the body, as Dr. Wolff and others have shown, but also the social functions of the individual, as indicated by the behavior of people.

There has been a growing realization that the fields of religion and psychiatry have a common concern. Evidence of this appears in the many organizations that are bringing religion and psychiatry into closer relationship. Prominent among these movements have been the American Foundation of Religion and Psychiatry and the Academy of Religion and Mental Health. A program has existed for years that trains divinity students in clinical experience. It has afforded theological students firsthand experience with illness in both general and mental hospitals; students can learn more effectively to perform their traditional function in the extremes of human suffering. Efforts are being made to have clergymen become more cognizant of the roots of emotional problems. Psychiatrists need to become more familiar with the basic religious thinking of people today. One hundred million people in the United States are church members. What do they

believe? How does it affect their points of view, their outlooks on life, their mental health? In psychiatric practice one sees results of the crippling accentuation of illness when punitive and rigid religious and moral concepts are held. But religion that is supportive, wholesome, courage-inspiring and that does not make impossible demands on human nature is an important factor in health. The fundamental beliefs and values of the patient cannot be casually dismissed or explained away by the psychiatric reduction of all values to infantile fixations and fears of father.

Psychotherapy should not be an exercise of intellectual understanding alone but an experience of growth—hence a living relationship. The process of reorganization that is called psychotherapy does not always take place consciously; much of it is automatic and unconscious. New experience is needed to change the balance of the destructive exaggerations of fear, anger, resentment, and guilt, to oppose previous noxious experience. New experience is indicated more often than surgery or drugs. Such corrective experience is psychotherapy. It is the influence one human being has on another. It is not just discussion, explanation, or the development of insight. It is not merely abreaction or ventilation. It is often identification with a constructive, heuristic, experimental approach on the part of the physician. The patient can identify with this sympathetic prospecting of the physician, and this process of identification is very important. The patient gradually sees the physician tackling difficult problems, no matter how hopeless they seem,

without becoming disturbed. The physician asks himself what is the procedure to follow, what is the thing to do, what are the possibilities, what has contributed to this? Through these questions he establishes a certain amount of identification with the patient. He moves beyond the patient's immediate problems and explores possibilities, searching for what can be done in the situation. No situation is usually so terrible that something cannot be done. The patient gradually takes over. Doctors who are patient, understanding, considerate, interested, and eager to aid will be able to help patients *feel* this and respond constructively. This is really tapping the growth or love impulses, or eros, of the patient —of the patient's id. When standards are deficient and defective, therapy consists in helping the individual develop new guiding principles or ego ideals. This can come through identification with "causes," with friends, or with the therapist. The relationship with the therapist is vital for the patient, and perhaps the most health-producing factor is the spiritual quality of maturity, care, and supportiveness on the part of the psychiatrist. Religion, too, is concerned with what is deeper than the intellectual, with forces within and beyond the individual. In experiences with prayer groups and healing services, there is contact with forces within and beyond that has helped people to realign their personalities in the direction of health.

Psychiatrists should have a sympathetic understanding of the religious thinking and feeling of the times and be ready to use these resources that are

available. This will offer a creative, hopeful, forward orientation in therapy that will serve as a positive supplement to the intellectual or reductive type of therapy so prevalent today. A brilliant psychiatrist was unable to help a patient because he ignored the patient's religious beliefs, orientation, and background. Another psychiatrist made light of the guilt feelings of a man in his late fifties. He thought that by minimization he would be able to help his patient. This psychiatrist did not recognize the need for suffering and atonement. Superficial advice and adjurations cannot remove the paradigms of sin, suffering, and atonement that have become so much a part of our Judeo-Christian civilization. Religion can be used constructively and reassuringly even when there is severe illness. I think of cases of schizophrenia, true depressions, and reactive depressions in which making use of the religious resources and background of the patients helped them not only to endure their suffering but also to come through their illness with stronger personalities than before they became ill. Collaboration of clergy and psychiatrists is often most helpful.

Various types of psychotherapy have apparently produced the same percentage of cures. Figures from faith-healing centers report percentages of cures in certain conditions similar to figures reported by psychiatrists, as does Alcoholics Anonymous. There is comparable effectiveness. Therefore, there must be something basic beneath intellectual formulations and theoretical frames of reference. There are limits to analytic thinking that

James and Bergson pointed out long ago. I believe that the basic factor is probably the emotional relationship between the therapist and the patient, the care, love, devotion, and interest on the part of the therapist, and the faith the patient has in him. When St. Augustine went to Milan as a teacher of rhetoric, he was dissatisfied with rationalism and reason in the conduct of life. In Milan he met Ambrose, Bishop of Milan. Augustine recounts in his *Confessions,* "That man of God received me as a father, and showed me Episcopal kindness on my coming. Henceforth I began to love him, at first, indeed not as a teacher of the truth." That is to say, the primary, constructive, real integrating force of this great teacher (a shaper of Western thinking, of Western religion) was his human relationship with the kindly Ambrose. This historic evidence is important in our reflections on the relationship of religion to psychiatry.

Knowledge by itself is not the salvation of the individual nor a guarantee of the survival of society. This is one of the myths that has developed, as a narcissistically consoling compensation, through several centuries. Two world wars, with unheard of barbarity and the continuance of nightmarish violence all over the world, have not yet jolted humanity hard enough for it to recognize that service, activation, cooperation, participation, involvement, and sharing with others positive personal and social values are essential not only for health and happiness but also for survival. And this is the eternal lesson of religion, whatever its form. Psychiatry and religion can cooperate

and supplement one another in helping people with emotional and mental difficulties and illness. Psychiatry is no substitute for religion. Religion is no substitute for psychiatry. They both contribute to the health and fulfillment of the individual.

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Liberal thinking in religion and theology, from Harnack, Bultmann, Bonhoeffer, Niebuhr, Tillich, and Buber, has progressed up through Harvey Cox and Malcolm Boyd. Even participation in religious rituals and services by the young and lay people has been developed. Teilhard and Pope John have contributed in part to this development.

Unconventionality in behavior and dress, even in the most intimate

behavior of men and women, coeducational dormitories in educational institutions, communal living without the benefit of the marriage ceremony, all these changes in acting and custom create great strains and disruptions in traditional family living.

War, crime, violence, drugs, unemployment, and race relations contribute to social unrest, disruption and tragedy. Church membership falls off. There are decreased financial contributions. Applications for traditional training in the ministry decline. Dissatisfaction with new experiments in church services and rituals are seen. The older generation and the young develop nonunderstanding. The increased number of elderly create new problems in living and loneliness in society. There is more need for new, progressive, gradual, and tolerable accommodations in society. Religion has always pointed out toward a new life—new potentials in life, the realization of change, and experiment toward creative accommodation. All these changes and conflicts cause new and unexpected tensions and produce new substantive contents and activities for medicine and religion. Used understanding^, the inspirational and cohesive forces of religion can help new adjustments both physiologically, psychologically, and sociologically. Thus new emphases in religion (both in theory and practice) and in medicine call for new imaginative and resourceful collaboration.

Hippies, vagabonds, unconventionals, rebels, and drug addicts permeate

our society. All sorts of methods are being experimented with in meeting these unconventionalities, irregularities, and disturbances. Efforts are being made to tap the positive and viable forces in these people. For example, many hippies show a great deal of frankness in discussing their feelings, attitudes, and actions. One does not meet with the deception, the hypocrisy, and the protective facade that amounted to deception in trying to reach and talk with many young people as in former days. A great deal of *helpfulness* exists among these groups—helping one another. Dr. Peabody long ago wrote that the care of the patient started with caring emotionally for the patient.

The youth festival at Woodstock, New York, produced remarkably little injury and violence.

Experiments with folk music in religious services are tried. There are folk masses. English may be substituted for Latin. There is great interest in Indian and Oriental thinking and religion with its many practices of meditation and contemplation.

The little Haiku lines of Japanese poetry picture aspects of nature that emphasize beauty. Tagore speaks of this poetry's function as fulfilling the needs of people when there are heartaches and personal wounds. There is a sharing of beauty and the friendliness of nature seen in the seasons, the birds, and the flowers that do not hurt, humiliate, or maim, but that are healing.

So, although religion in many ways has become secular and interest in traditional practice and beliefs has lessened, there still remain positive aspects that have always been emphasized in the heart of religion. Religion has become ecumenical. There is much collaborative caring, loyalty, and helping in the community among young people that are religious.

Malcolm Boyd has been able to develop new relationships and fellowship with the unconventional and the outcasts. He has been able to obtain positive responses through his approaches of caring, kindness, and compassion—not formal, not blame, not critical, not rejecting, not derogatory, not dominating, but *accepting* of contacts, communication. He does not exclude and reject people and has been able to work with those whose conduct and impulses one does not customarily approve or condone. There is much writing about God is dead, following Nietzsche and Bishop Robinson, yet the essential creativeness and fellowship that exist remain as positive forces in human nature and the community. Leo Rosten's *Trumpet for Reason,* James Michener's *America vs. America* and *The Drifters* all tackle these problems from different points of view.

Although there has been much writing derogating religion in "sophisticated" psychiatry, a recent book by Thomas A. Harris, entitled *I'm OK —You're OK?* has an important chapter on moral values. He writes:

> Persons are important in that they are all bound together in a universal

> relatedness which *transcends* their own personal existence. . . . There is the rationale of the position I'm OK—You're OK. Through this position only are we persons instead of things. Returning man to his rightful place of personhood is the theme of redemption, or reconciliation, or enlightenment, central to all of the great world religions. The requirement of this position is that we are responsible to and for one another, and this responsibility is the ultimate claim imposed on all men alike. The first inference we can draw is Do Not Kill One Another. [p. 220, 223]

The new thinking about religion has resulted in many new emphases and practices among the clergy and laity of Judeo-Christian persuasion. There is a strong re-entry into social, economic, industrial, and political problems. The motivating factors are to bring about attitudinal and institutional change.

1.

a. Politics: the Vietnam war, the draft, conscientious objectors.

b. Industry: scrutinizing of corporations whose large interests in other countries (Africa) are racial.

c. Ecclesiastical: clergymen running for elective political office and opposing discriminating racial practices within the institutional religious and social establishment.

d. The turmoil within the American Psychiatric Association and the American Medical Association being carried on by professionals and nonprofessionals with concern for social change.

2. The development of the so-called new breed of clergyman, who does not act or think parochially or pastorally in the traditional sense. His prime concern is effecting change, hitting at the causes of our problems; he is far less concerned with treating victims. One result of this is the emergence of

more specialized forms of ministry.

a. Institutional and industrial ministries, nonstipendiary ministries—men earning their living by secular employment.

b. Development of paraprofessionals and medical clergy teams.

3. The emerging relevancy of religion for youth, for example, Jesus freaks.

a. Large enrollment of students taking religious courses in colleges.

b. Clustering of theological seminaries of different denominations in several large cities.

4. Emerging new roles for women in the professional ranks of the church.

a. Ordination.

b. Greater responsibility in church governing bodies.

All these changes are closely linked with social psychiatry, for psychiatry is concerned not only with the adjustment of the individual to society but in lending its knowledge and skills to bring about an environment that will provide a better medium for happy living and a healthier development of the individual. Writings can be helpful in the form of *bibliotherapy* and even excerpts from literature. From *The Understanding Heart:*

> The happiness of life is made up of minute fractions—the little soon forgotten charities of a kiss or smile, a kind look, a heartfelt compliment, and the countless infinitesimals of pleasureable and genial feeling.

Samuel Taylor Coleridge

> Happiness, I have discovered, is nearly always a rebound from hard work. It is one of the follies of men to imagine that they can enjoy mere thought, or emotion, or sentiment! As well try to eat beauty! For happiness must be tricked! She loves to see men at work. She loves sweat, weariness, self-sacrifice. She will be found not in palaces but lurking in cornfield and factories and hovering over littered desks: she crowns the unconscious head of the busy child. If you look up suddenly from hard work, you will see her—but if you look too long she fades sorrowfully away.

David Grayson

> Good manners is the art of making those people easy with whom we converse. Whoever makes the fewest persons uneasy is the best bred in the company.

Jonathan Swift

> The web of our life is of a mingled yarn, good and ill together; our virtues would be proud if our faults whipped them not; and our crimes would despair if they were not cherished by our virtues.

William Shakespeare

From *Quiet Thoughts*:

Living by Grace

Grace is doing for another being kindnesses he doesn't deserve, hasn't earned, could not ask for, and can't repay. Its main facets are beauty, kindness, gratitude, charm, favor, and thankfulness. Grace offers man what he cannot do for himself. The unwritten creed of many is that God is under obligation to them, but grace suggests that we are under obligation to God. To live in that consciousness is to live by grace. Living by grace is costly; it means sharing. It has no meaning apart from a spirit of self-sacrifice that prompts the soul to think more of giving than of receiving, of caring for

others rather than for one's self.

Power to Become

To criticize or to find fault with someone (often) is to fail to see that person in his full possibilities. It is to see his many weaknesses rather than his many strengths. It is an attempt, albeit unconsciously and usually unsuccessfully, to get the other person to conform to our way of thinking. This alienates. The irony is that the critic himself is usually (or often) the one who is blind. To accept people as they are and for what they are, to place confidence in them and to encourage them, is to help them become better than they are. To treat people as if they were what they ought to be is to help them to become what they are capable of becoming. Within every person is the capacity to become something greater than he now is. It is possible for each of us to become better and to help others to become what they ought to be.

The Fellowship of Those Who Care

How grateful we are for churches, hospitals, museums, symphonies and civic centers—to mention only a few of the philanthropic endeavors which are made possible because somebody cares enough to support them. It is not irrelevant to ask whether these organizations are made possible because of us or in spite of us. Are we, as someone has suggested, part of the problem or part of the solution? The world moves forward and progress is made because there are those who care. People who are trying to lift the level of living of those around them soon discover that they have ties which bind them together. This worldwide fellowship of those who care transcends language, color and nationality. The world moves forward because of those who build noble projects and support them.

Joseph Fort Newton's writings are sound psychologically and most helpful religiously. For example, these headings: Live a Day at a Time (p. 24), Forgive Yourself (p. 88), What Can I Do? (p. 104).

There is a collection of quotations by Lewis C. Henry that presents excellent thoughts for contemplation. For example:

Self-Love

He was like a cock who thought the sun had risen to hear him crow.

George Eliot

He that falls in love with himself will have no rivals.

Benjamin Franklin

Self-love is the greatest of all flatterers.

La Rochefoucauld

To love one's self is the beginning of a life-long romance.

Wilde

Kindness

Have you had a kindess shown?
Pass it on;

'Twas not given for thee alone,
Pass it on;

Let it travel down the years,

Let it wipe another's tears,

'Till in Heaven the deed appears—
Pass it on.

Rev. Henry Burton

> Their cause I plead—plead it in heart and mind;
>
> A fellow-feeling makes one wondrous kind.

David Garrick

> Art thou lonely, O my brother?
>
> Share thy little with another!
>
> Stretch a hand to one unfriended,
>
> And thy loneliness is ended.

John Oxenham

> Selfishness is the only real atheism; aspiration, unselfishness, the only real religion.

Zangwill

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Jack Bemporad

The twentieth century could probably be characterized in many ways, but certainly, above all, as the age of secularization. The one assumption that seems to find acceptance in all parts of modern Western civilization today is that man can function adequately without faith.

Yet people throughout the Western world seem to be gripped by a curious malaise. It can be seen in the sudden popularity of the Jesus movement, of Far Eastern religions and mysticism, and in the rage for astrology; it is evident in our literature, which has come to be dominated by a

parade of antiheroes; it manifests itself in the increasing mechanization of our art and in the rising tide of drug use that seems to cut across all ages and classes. Certainly it is evident in the burgeoning crime rates everywhere and the ever-increasing ranks of the emotionally disturbed. Life, for modern technological man at any rate, seems to have become one long quest for meaning; a journey in search of values that seems to grow more intense as the descriptive is substituted for the normative in all areas of human existence.

It is within this context that I will try to explore the relationship between Judaism and psychiatry, for these two disciplines could serve as an example of the tension that exists today between faith and science. While they have many common characteristics, they differ in some views on the nature of man, a fact that has had wide-ranging implications not only for the treatment of the mentally disturbed but also for the emotional and spiritual lives of all men in our time.

Some of these differences are inherent in the very nature of the two spheres of thought. Psychiatry is a branch of medicine whose goal is the understanding of the human psyche and the health of the mentally and emotionally disturbed. Its main task is to care for and treat individuals seeking or in need of the help of a psychiatrist. Psychiatry is generally recognized as an important method of treating emotional illness. Also, in spite of differences and disagreements, psychiatrists strive to be guided by the

norms and standards of the scientific method in their theory and practice. It is important also to note parenthetically that many psychiatrists maintain that there is no strict relationship between psychiatric theory and practice. Thus most therapists are eclectic and pragmatic in their approach to patients.

Judaism is primarily a religion, with the distinction that it is the religion of an historic people who have survived intact as a cultural group from ancient times until the present. As a religion it affirms certain fundamental beliefs that are neither empirically derived nor subject to any empirical test. Judaism affirms the existence and unity of God, has a prescribed ritual that makes both moral and ceremonial demands, and subscribes to certain basic ideas about the being and nature of God, creation, revelation, and redemption. It has a specific view on the nature of man and the good life.

Judaism appeals to experience to validate its beliefs and maintains that these beliefs enable one to interpret and give significance to life. If there are experiences that seem to contradict or be antagonistic to these fundamental beliefs, for example, the reality of evil in the world, Judaism attempts to re-establish and justify the faith that these experiences seem to threaten. Psychiatry, on the other hand, is bound primarily by the standards of scientific method, and its duty is to follow the facts wherever they lead.

Prior to the sixteenth century scientific and religious philosophical

affirmations were in harmony. Both religion and classical philosophy placed at the center of importance the spiritual and intellectual life and emphasized the objective character of man's values. When physics emerged in the sixteenth century, only those things that could be mathematically deduced became real and certain, and mathematics became the only true method for investigation of the laws of nature.

The Galilean description of nature was purely mechanistic, without reference to either values or the purpose of existence. Whereas previously values and purpose rested in a natural order of the universe, they now came to rest solely in man. Soon this mechanism extended itself to the domain of the self, and man found himself an anomaly with respect to nature. The rise of neo-Darwinism in the modern era brought with it the dimming of man's spiritual importance. Whereas in the classical and medieval world man had viewed himself as the image of God and as the culmination of the order and hierarchy of the objective value structure of the cosmos, the man of the modern scientific world could view himself only as a forlorn, homeless, unintelligible entity in a mechanical universe.

Science generalizes, idealizes, and abstracts from our overall experience only those things that can be mathematicized or that fit some theoretical formulation, and thus ignores the greater part of experience. It errs in that it judges only those experiences that natural science can deal with as real and

all other experience as subjective and illusory, a view that allows no place for religion. Nowhere is this exclusion more apparent than in some psychiatric views of religion. When psychiatry has chosen to follow the reductionist tendencies of the natural sciences, it has been led to an inevitable clash with religious ideas.

Although there are certain statements in Jewish tradition that would seem to show psychiatric insights (such as the admonition in Leviticus 19 that one should rebuke his neighbor rather than repress his anger and thereby be led to sin) and numerous psychiatric perspectives that seem to be connected with religious affirmation (for example, the works of Jung and Frankl), psychiatry has, for the most part, chosen the path of the natural sciences.

Certain psychiatrists, notably Freud and his followers, have tried to explain religion as the "universal, obsessional neurosis of humanity" or described it as "comparable to a childhood neurosis" (p. 68) that ". . . mankind will overcome as a neurotic phase, just as so many children grow out of their similar neuroses" (p. 71).

The reductionism implicit in this approach, which has been followed by many psychiatrists, not only fails to take religion seriously and accord it its proper sphere but also suffers from the etiological fallacy that the origin of something disproves its value. Freud believed that religion remained in a

primitive state and, unlike other areas of human intellectual pursuit, did not keep pace with the general development of Western culture or attain the heights of the arts and science. It is simply prejudice on Freud's part to affirm that religion can only be infantile neurosis or nothing. Why should religion be the only exception to the development of cultural creative awareness? That it is not has been amply demonstrated by Silvano Arieti in one of his recent works, *The Intrapsychic Self.* In one of the best arguments against the reductionist position, Arieti traces the psychological development of religion through the ages and convincingly shows that Freudian reductionism is mistaken in its assertion that religion has failed to evolve and develop parallel to other advances in civilization.

In his discussion of religious and mystical experience, Arieti asserts that the appearance of the supernatural was the result of a special application of teleological causality, by which the world is interpreted as a place in which every act is willed. This presupposes the presence of a person or personified entity to do the willing. This "immanence of the divine in nature" extends to the whole world what a child experiences in his early personal relationships with his mother or father, when every act or object is willed by significant adults in his life.

Arieti summarizes those anthropological and social studies of religion that show that religion, while not having its origins in childhood neuroses,

does have its beginnings in childhood emotions. The evolution of religious ideas began, he states, "with the creation of momentary dieties" who represented to primitive man the animated and personified manifestation of every feeling, object, or condition of his life. Just as his parents willed his comforts and discomforts, so primitive man invested his surroundings with willing entities, although they were usually invisible and were felt to reside in the object or activity they represented.

"The idea of physical causality did not develop in primitive man," according to Arieti. "However, as he became aware of the precarious nature of his existence, the feelings of hope and trust which he earlier associated with his mother were experienced in a larger context."

Thus religion can be seen from its origin as a set of cognitive constructs that prolong hope in the survival of the individual and of the small social group to which he belongs. Later, of course, hope is expanded further and embraces the survival of the tribe, state, nation, or human race; or it is focused on eternal survival (immortality) of at least part of the individual (soul) or on general human progress. Faith comes to mean two things: not only belief in the existence of the divinity, but also trust or confidence. Religion is thus not just a way of interpreting the world, but of hoping.

The immediacy and simplicity of primitive life, Arieti continues, was

particularly conducive to the conception of numerous gods. Whereas in early primitive life each object or function had a separate god, the same god later became responsible for many objects or actions. Whereas the dieties were originally conceived as residing in the activity or objects of the natural world, they now became abstracted.

This development represented the first great transformation in religion —the move from idolatry to paganism—and while its impetus is unknown and lost in history, its significance was very great. Arieti states, "The principle of teleologic causality still applied (i.e., the world is this way because the gods willed it this way), [but] the gods are seen as more and more separate from the reality of man." They became "a third reality," different from either the reality of human life or the reality of art.

The process of abstraction, however, did not proceed beyond the physical level; that is, it separated the gods from things. It remained for Judaism to effect the even greater revolution, the change from paganism to monotheism. This religious revolution, Arieti says, "later adopted by the whole western world, consisted of further removals from concretization. Whereas primitive religions tend toward the primitive mechanisms of concretizations, paleologic transformations and phantasmic ideation, Judaism, as a rule, emerges as a revolt against these trends. According to biblical account, Abraham is the first man who had the revelation that God is

one and invisible. What some consider revelation, others consider insight. Of course, we have no historical proof of the existence of Abraham, the first Jew. His myth, however, represents the beginning of a very long trend in Judaism against religious concretization and other primitive mechanisms . . . the Hebrew God loses human characteristics and becomes far superior to any other reality. The third reality is conceived as having preceded any other reality; as a matter of fact, as having created anything else which is existing."

The continued development of man was accompanied by still further developments in monotheistic religion, in which religion became inseparably fused with moral life. This was known as the prophetic period, and it was distinctive in that the third reality now became not only precedent to existence and superior to other realities but also the moral standard and guidance for man. All religious history to the present day, including the rise of Christianity, has simply been an extension of the prophetic mandate.

Arieti's outline of the conceptual development of psychological life from prehistoric to modern times shows that religion, far from remaining in a primitive and childish state, paralleled and finally became the foundation for much scientific, intellectual, and artistic achievement. He further refutes the Freudian attack on religion as a useless, neurotic device by showing that faith is a means not only of understanding the universe and one's place in it but also of hoping, drawing strength for the future, and fighting despair. The

function of religion as emotional sustenance and inspiration has been ignored by Freud, but its importance cannot be discounted.

Freud's reductionist fallacy is further coupled with a mistaken understanding of the relationship between faith and knowledge throughout history. He maintained that "the more the fruits of knowledge become accessible to men, the more widespread is the decline of religious belief, at first only the obsolete and objectionable expressions of the same and then of its fundamental assumptions also."

Freud maintains that it is knowledge or science that does away with paganism and idolatrous religion. However, as a matter of historic fact, this was not the case. The most significant transformation in religion was from polytheism and paganism to ethical monotheism, and history shows that it was not science that did away with this idolatry and polytheism, but prophetic religion.

The rejection of the mythical is the essence of prophetic religion. It does away with the gods in nature and by doing so, changes man's relationship to God. Prophetic religion is characterized by the idea that man's relationship to God is moral in character; it believes that God makes a moral demand on man. God is understood as pure spirit, separate from the natural world, and no images or representations of Him are possible.

As long as the gods were conceived as forces of nature (gods of fertility, rain, harvesting), worship was aimed at appeasing these natural forces. But when God is seen as beyond nature, then man's relationship to God is not one of appeasement but one of ethical obligation. Perhaps the most explicit statement of this opposition occurs in the Book of Micah. It is the year 701 B.C. and Jerusalem is surrounded, her doom imminent. The people are confused and do not know what to do. How should one propitiate God to avoid the calamity? How shall one appease or influence Him? "Shall one come before God with burnt offerings, with calves of a year old? Will the Lord be pleased with thousands of rams, with ten thousand rivers of oil? Shall one give his first-born for his transgressions, the fruit of his body—will the sacrifice of children appease God's anger?" Micah's answer echoes down through the centuries. "It hath been told thee, O man, what is good and what the Lord doth require of thee. But to do justly, love mercy and walk humbly with Thy God." All the pre-exilic prophets fought against sacrificial appeasement and asserted that God wanted justice and righteousness.

When God is seen as transcendent, as beyond nature, then man's relation to God can be a spiritual one. God is set over against nature as the only true Being, who stands in relation to man as an imperative to action. The contrast between God as a force in nature and God as a transcendent spiritual being is clearly illustrated by an incident in the life of Elijah, the prophet. Elijah went up upon the mountain to seek God and was confronted by a

shattering wind and then an earthquake and after that a fire. But God was not to be found in any of these, for God was not a force of nature. After all these natural forces there came a still, small voice. The still, small voice, the inner voice that is the conscience of man, this was Elijah's communication with God.

Once God was seen as a transcendent, unique spiritual being, then the concepts of man and nature became fundamentally different. First of all, the concept of a unified and transcendent God gave rise to the concept of man as transcending nature. Man became not only a natural but also a spiritual being. This can be seen in the creation story. God creates man as a "thou" having a special place in the universe. Eichrodt describes the difference between man and nature quite rightly when he states,

> Man is not simply a piece of nature . . . the earlier account of creation ascribes the clear boundary between man and the animals which prevents man from finding his complement and completion in the subhuman creation, to the effects of man's independent spiritual nature by which he is set on God's side. In man's destiny as a being made in the image of God, the priestly thinker, however, brings together the sayings about man's special place in the creation and gives pregnant utterance to the thought that man cannot be submerged in nature or merged in the laws of the cosmos, so long as he remains true to his destiny. The creator's greatest gift to man, that of the personal I, necessarily places him in analogy with God's being at a distance from nature.

The idea of one transcendent God transformed not only the concept of man but also the concept of nature, and far from being vulnerable to scientific advance, actually made science possible. Since nature was no longer full of

gods, it finally became possible to act meaningfully in nature, for there were no more forces to be appeased. Instead of propitiating nature, men could now act to understand and transform it. This is a crucial point, for it made moral action possible.

It likewise made science possible, for as long as nature was full of gods, all separate powers, it could never be consistently apprehended. But with the concept of God as a transcendent creator and the universe as his creation, the idea of cosmos became possible. The world became the matrix of creation, the arena in which one acted to actualize the ideal. Man realized that he had the power to act and transform the universe rather than be helpless before it.

I have gone into such detail on this point because I want to indicate the original creative perspective of the Biblical view, which is totally missed by Freud and many other psychiatrists who deny any upward growth or development in the sphere of religion. What Freud presumes to be a scientific view on the nature of man is, in fact, a type of psychological Hobbesianism. He states, “Insecurity of life, and equal danger for all, now united men into one society, which forbids the individual to kill and reserves to itself the right to kill in the name of society the man who violates this prohibition. This, then, is justice and punishment.” Freud takes as a premise the Hobbesian transformation of the summum bonum into the summum malum, a violent death that must be avoided. Man must be protected against his drives by the

state. There is a growing despair in Freud, culminating in the view that sees civilization as the veneer that is incapable of ever really doing much against man's destructive instincts.

Fromm, in his *Psychoanalysis and Religion,* tries to defend Freud but also to distinguish between two types of religion—humanistic and authoritarian. Yet he continues the reductionist tendencies of Freud by maintaining, a la Feuerbach, that God is a projection of man. He states, "God is not a symbol of power over man, but of man's own powers," or again, "God is the image of man's higher self, a symbol of what man potentially is or ought to become." There is a bifurcation between the good and bad aspects of man's nature, each projected onto a fictitious being, namely, God: if we are humanists, it is a loving God, and if we are authoritarian, then it is an authoritarian God. In any case God is made in man's image and is a projection of man. It is interesting to note that Fromm reverses himself on this fundamental issue when he begins to discuss idolatry and monotheism. He states,

> We forget that the essence of idolatry is not the worship of this or that particular idol, but is a specifically human attitude. This attitude may be described as a deification of things, of partial aspects of the world and man's submission to such things in contrast to an attitude in which his life is devoted to the realization of the highest principles of life, those of love and reason, *to the aim of becoming what he potentially is, a being made in the likeness of God.* It is not only pictures in stone and wood that are idols. Words can become idols, and machines can become idols; leaders, the state, power and political groups may also serve. Science and the opinion of one's neighbors can become idols, and God has become an idol for many. [1]

Fromm here implicitly accepts Maimonides' definition of idolatry as the worship of the created, and in trying to define idolatry he inverts his own theory by saying that man must become what he "potentially is, a being made in the likeness of God." But isn't God, according to Fromm, merely a projection of man? How then can man be an image of God, when God is an image or projection of man? It is because what Fromm defines as God is, indeed, an idol, (that is, something man creates or projects) that he then has no ground for defining idolatry and thus contradicts himself.

The basic question here then is not whether psychiatry and psychology may not have valuable contributions to make to the psychology of religion, but whether they are limiting their judgment to psychological phenomena only or are also making assertions about the ontological status of the reference of these phenomena.

This issue has been clearly raised by Martin Buber in his reply to Jung. Buber criticizes Jung for maintaining that "God does not exist independent of the human subject," and states that the controversial question is therefore this: "Is God merely a psychic phenomenon or does he also exist independently of the psyche of men?" (pp. 133-134).

Buber continues, "the distinction which is here in question is thus not that between psychic and non-psychic statements, but that between psychic

statements to which a super psychic reality corresponds and psychic statements to which none corresponds. The science of psychology, however, is not authorized to make such a distinction; it presumes too much, it injures itself if it does so. The only activity that properly belongs to the science of psychology in this connection is a reasoned restraint. Jung does not exercise such a restraint when he explains that God cannot exist independent of man" (p. 135).

There is no universal agreement about whether Jung rejected the ontological status of a transcendent diety. My own inclination is to side with Buber. (A careful treatment of this issue is to be found in Avis M. Dry, *The Psychology of Jung.)*

Although the psychiatrist may claim to follow scientific procedure, there is one area where he is very close to a religious position, and that goes to the very essence of the nature of religion in general and Judaism in particular.

Judaism claims that man is by nature a religious animal; he feels awe, a sense of mystery, dependence, and wonder. Indeed, he is ready to worship, to exalt, to deify. The problem, of course, is that what man worships most often is not God, but as Hosea says, the works of his hands or the projection of his fears. The crucial task for Judaism is how man can transcend his natural status. How can he become a moral and spiritual being? The religious life for

Judaism is the process whereby man can observe certain practices and precepts that will transform the natural into the moral. Thus by having a doctrine of the good life, Judaism makes specific assertions about man's nature, his good, and so forth.

Now in practice psychiatry acts similarly. It is not value-free. It tries to help its patients to live "better lives." Therefore, implicitly it accepts man's freedom, the capacity to change and the capacity to redirect one's life. Also psychiatry, by and large, believes in the uniqueness and individuality as well as the dignity of man. Here it borrows from the religious tradition and most specifically from Biblical teaching. The belief in freedom is the belief in moral responsibility, and such responsibility requires the formation of character.

But what constitutes character? Is it a necessary agent or a creative agent? The determinist sees character as a link or series of links in a chain of natural causes, existing on an equal level with past and present externalities. But character is not so much the result of circumstances as one's integration or conception of circumstances. It is man's conception of circumstances that enables him to select certain of them as important and others as meaningless.

Further, this selection cannot be considered determined if it also functions as a unifying factor—that is, in terms of an ideal that transcends actual circumstances. Character should be seen as a constant remolding and

redefining of the facts; not a static entity, but a dynamic, creative, self-transcending process. Deterministic explanations cannot explain that element of character or self-consciousness that synthesizes the diverse effects that impinge upon man. In fact, it is this very process that makes it possible for psychiatry to function; the individual capacity to integrate one's experience with an ideal and achieve new and higher insights brings about internal change.

That psychological concept of man that embraces a deterministic position, one that makes him no more than a high form of animal bound to his desires and determined by prior causes, has led us to that most dreadful of views on man: the automaton. This is the view that man can be manipulated by external pressures and temptations. It has been in large part responsible for the rise of modern totalitarianism and the use of the propaganda and brainwashing techniques, which have gained such currency today. It is this view that is alien both to psychiatry and religion.

It is not that man should abhor determinism, for without determinism there can be no willing or action; it is simply that self- determination is what he seeks to achieve. Man is a self-conscious being, and this quality essentially distinguishes him from the rest of nature and mediates the circumstances and causes that impinge upon him. Thus his goals and ideals are included in his action on circumstances, and there is a constant redefinition of the

constituents involved in the act of choice. The seeking of self-determination is what Arieti calls the will to be human. When man reflects on circumstances, he is really mentally rehearsing his action and considering what its effects would be. The more self-aware he is, the more his reflection will be to the point and thus bring about a change in his environment in terms of his aim and goals.

We can then say that man's character is the presentation to self-consciousness of what man believes, knows, and wills. It is the creative, continuing process that is constantly being reformulated in accord with an idea of the good that man is trying to actualize. Bather than being a static given, to be combined as a mere sum of contingencies compelling action, it is itself actualized in the act. The element of dissatisfaction is here to the point: man is aware of a distinction between what he is at present and what he would like to be. Change comes from the fact of an idea or ideal goal that is put before man by man.

Judaism was the first religious system to affirm that freedom contravened the tyranny of fate. Unlike the philosophy of the ancients, which could never separate good and evil from their interrelationships with fate, Judaism has always asserted the value of repentance—not only for the self-healing of the soul, but also in order to transform the future and transcend the past. Judaism affirms that historical reality is incomplete and, therefore,

redeemable. The past may have taken place in fact, but its meaning is not decided until the end of history. If a past act causes us to reconsider and change our life, then it can redeem us and regenerate us.

The first people to talk seriously about repentance were the prophets. The prophets said that it was the end goal that makes the past and present meaningful; in other words, they gave us the idea of the Messianic. Repentance is genuine because the world is in the making; the prophets discovered this and thus discovered freedom. A man who can repent is a man who is free. This is the key meaning of the story of Jonah. Unlike the stories of Noah and of Sodom and Gomorrah, where the righteous are saved and the wicked are destroyed by the decree of God, the meaning of Jonah is that God maintains: The people of the city have repented, they have put on sackcloth and ashes. They have changed their ways, and if they have changed their ways they force me to change my ways. The doctrine of repentance came with the prophets, and it meant that man's action can affect God so that he could annul His decrees and thus eliminate the power of fate. It became man's task to bring God into the world, to bring the kingdom of God about on earth, and thus it made man free.

Moreover, it is this doctrine of repentance that confirms the great psychological value of religion, for it asserts that repentance must be an emotional and spiritual experience in order to be truly redeeming. Rather

than being simply an intellectual or secondary process, the formation of character is really possible only through primary process mechanisms, and these mechanisms have always found one of their chief vehicles and supports to be religion.

This point has been well defended by Arieti in *The Intrapsychic Self.* Refuting Freud's point of view as it was expressed in *The Future of an Illusion,* Arieti asks,

> Must we share this view that religion is based on unconscious, primitive and irrational psychic processes? Must we accept the idea that in some of its beliefs religion is a form of collective schizophrenia and in some of its practices a form of obsessive-compulsive psychoneurosis, different from the psychiatric syndromes because it is socially acceptable?
>
> These are possibilities that we cannot easily dismiss just because we do not like them. However, another point of view, not mentioned by Freud, is suggested by our study of the aesthetic process. We have seen that one of the bases of the work of art is the use of the primary process, yet few would deny that art has value and merit. But aesthetic methods, results and values are certainly different from those obtained by pure secondary-process mechanisms.
>
> In a similar way, we may state that religious methods, results and values are different from those derived from pure secondary processes. The religious value consists in giving people faith in the survival of man and man's ideals. Religion becomes an incentive to greatness of the spirit. It offers new insights . . . which open up new dimensions of understandings and feelings. These new dimensions, although they are abstractions constructed at higher psychological levels, need the support of lower mechanisms. We should not make the common mistake of considering the new insights and aims of religion irrational or primitive, just because they

are partially founded upon primary process mechanisms.

The adopted primary process, Arieti continues, not only reinforces secondary processes, but often makes insights possible that are in opposition to prevailing attitudes or conventions of the historical period in which they take place, and that therefore might be repressed. A good example of this was the prophets of the Old Testament, who needed a mystical experience to support their mission of bringing the message of justice and love to the people.

"The mystical experience," he states, "transforms uncertainty into certitude, confusion into clarity, hesitation and cautiousness into courage and determination. The mystical experience becomes a revelation and is accepted as a reality by the subject. Therefore of all creative processes, it is the one that seems closest to the psychotic experience. It is a loss of reality, but as we have seen, it is a loss that helps open up new dimensions of reality. Furthermore, it is experienced as a 'third reality,' a reality distant from the first in its attributes and yet always in contact with the first."

Although Arieti concedes that the value of the mystical experience for humanity could be denied on the basis of all the wars, persecutions, hate, and prejudices that have resulted from "illuminations and revelations," he replies, "Results such as these are obviously not to be valued. It must be said that when religion leads to these results it fails, just as bad poetry fails—except

that in the failure of religion the consequences are much more harmful. On the other hand, good religious insights become norms for generations to come. By promoting the survival of man or of his ideals, they are recognized as valid by the high levels of the psyche."

He concludes his argument by showing that modern ethical culture has eliminated the supernatural and replaced rite with ethical behavior alone. "Faith in survival is thus based only on the ethical behavior of man and on secondary-process mechanisms. Whether the religious needs of man can be fulfilled without also resorting to the primary-process is a debatable question."

Therefore, we can reaffirm with Arieti that religion, as a quest for meaning, is not an abstract or intellectual pursuit alone, nor is it a reversion to childish emotions and needs. Rather it lies at the very depths of the human self once he begins to ask himself the question of the why of existence. The quest for religion begins when man searches for the meaning of his existence, when he seeks the purpose and significance of his life, and when he judges himself by terms that transcend his finite self.

It is as W. P. Montague so beautifully said:

> Religion as we shall conceive it is the acceptance of neither a primitive absurdity nor of a sophisticated truism, but of a momentous possibility—the possibility namely that what is highest in spirit is also deepest in

nature, that the ideal and the real are at least to some extent identified, not merely evanescently in our own lives, but enduringly in the universe itself. If this possibility were an actuality, if there truly were at the heart of nature something akin to us, a conserver and increaser of values, and if we could not only know this and act upon it, but really feel it, life would suddenly become radiant. For no longer should we be alien accidents in an indifferent world, uncharacterized by-products of the blindly whirling atoms; and no longer would the things that matter most be at the mercy of the things that matter least.

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John W. Higgins[2]

The subject matter under the heading of psychiatry and religion[3] is most diverse. This variety cannot be decried when it reflects the richness and

complexity of the interaction between the two. The differences, however, are also products of factors which limit any approach to the topic. These include the grasp of information pertinent to each sphere, the individual viewpoint from which man and the universe are understood and their relations conceived, and sundry personal biases. The interplay of these factors can produce a maze of quarrels, confusion, and tangents which obstructs scholarly efforts to delineate the problem and to capitalize on the questions posed.

As a guide through this maze, interrelations may be divided into three gross levels: (1) the level of conflict, (2) the level of pacification, and (3) the level of argument. These distinctions are simplifications, since the transition from one to the other may actually be gradual and continuous. Also, the following discussion of them is highly condensed and intended as a representative survey rather than as an exhaustive summary.

The Level of Conflict

It is meant here to describe those essays which are principally characterized by a spirit of hostile attack. Attitudes toward religion, arising from an individual's own experiences, are often rife with prejudice, overt or covert. As a result, quite before any issues are identified, attack and defense may begin. At best, the essential issues have not always remained clear. They

have sometimes been obscure because an undeveloped state of knowledge in either sphere has not allowed clear identification of viewpoints. At other times, false issues have grown out of erroneous conceptions of the established doctrines of either or both fields.

A complete survey of all conflicts would be unwieldy, but the following are nuclear issues capable of various translations.

World View

Many controversies ostensibly about psychiatry and religion are more properly seen as fundamental differences of outlook toward the nature of man and the universe. Such differences are properly the subject of philosophical discourse. Unfortunately, empirical data and behavioral theories have become not only bludgeons but also victims in what are essentially philosophical arguments. As Philip comments, "It is possible to maintain either that science can only give a partial interpretation of the truth, or to claim that no truth is knowable apart from a scientific approach" (p. 129). Excursions into this kind of conflict are facilitated by a denial that psychiatric theory rests on any preconceived system of ethics and the assertion that it arrives at one by empirical evidence. Zilboorg, addressing this position, has said, "Psychoanalysis . . . found itself able to go along officially without moral values not because it rejected these values but

because it carried them implicitly and inherently as everything human carries them" (p. 49). It can be asserted that the truth or fallacy of a belief in God does not depend on scientific demonstration. Nevertheless, it can be anticipated that conflicts centering around world view will continue.

Even when a kind of agreement about the validity of religion is reached, divergency is fully possible. Illustrating this are the definitions of religion by two authorities writing sympathetically about the interrelations of the two spheres. Of religion, Dempsey, a psychologist and Capuchin priest, says it is that

> which treating of God or the absolute, of man's relations to God, comprehends a series of speculative doctrines about the nature and activities of God and the nature and destiny of man, a series of precepts which direct behavior, and an external mode of worship by which the human being as a psychosomatic and social entity gives expression to his inner sentiments and convictions, [p. 34]

Erich Fromm" defines religion as "any system of thought and action shared by a group which gives the individual a frame of orientation and an object of devotion" (p. 21). Those who could agree with one of these might well quarrel with the other. The more or less orthodox undoubtedly would find neither acceptable. If respect, although not necessarily belief, is given to the opponent's first principles, at least the lines of reasoning can be followed and the conclusions weighed.

The careful student will beware of misidentification of psychiatry as a religious or ethical system. He should also beware of rejecting all the psychiatric concepts of an individual with whose ethical system he disagrees.

Differences among Schools of Psychiatric Thought

Certainly there is disagreement about the best way to comprehend and treat mental illness; neither is there usually an optimal degree of clarity about the essentials of the theories in the other schools. This expectable state of affairs produces attacks against or briefs for one or another school. Sometimes such arguments are miscarried into discussions about religion and psychiatry.

To select one example, in their evaluation of the philosophical and religious implications of psychoanalysis, Vanderveldt and Odenwald include attacks on the libido theory and the theory of the universality of the Oedipus complex in neuroses, and deal in a critical manner with other concepts such as resistance and transference (ch. 9). In the succeeding chapter they propose their own preferred method of treatment (psychological or psychosynthesis) and imply that it is more acceptable within Christian belief. The arguments about the psychological matters are clearly capable of being waged outside the arena of psychiatry and religion. That, for instance, dealing with psychosynthesis was discussed long ago by Freud (p. 394). The malleability of

psychoanalytic theory according to one's preference in the service of "reconciling" it to religious belief can be observed by a perusal of such monographs as those by Dempsey, Gemelli, Lee, and Nuttin, to name a few.

The remedies for such conflicts are clear thinking and an adequate grasp of the psychiatric theory in question.

Reductionist Theories and Pansexualism

The most manifold aspects of behavior and ideation have been demonstrated to be determined in varying degrees and ways by the forces of instinctual drives. This explanation of behavior by tracing it back to instinctual sources has been applied to religion. In the therapeutic situation this has unquestionably been a fruitful avenue of individual inquiry; religious symbols, rituals, and beliefs are fully capable of being invested with neurotic and psychotic processes. The promulgation of such discoveries has caused chagrin among some who seem to accept them as casting doubt on the validity of religion. Yet, the fact remains that these psychiatric findings do not introduce something new to religion. A review of the writings of the mystics, such as St. John of the Cross, will show that religious contemplation for centuries has been concerned with illuminating (and diminishing) the covert self- satisfying aims of religious practice.

The attack proper on religion occurs when, by reductionism, it is

proposed wholly to explain some or all of its aspects. Caution on this very practice was expressed by Freud: “If psychoanalysis deserves any attention, then— without prejudice to any other sources or meanings of the concept of God, upon which psychoanalysis can throw no light—the paternal element in that concept must be a most important one” (p. 147). Despite this statement, the general sense of Freud’s writings about religion is expressive of his atheism, which he presumably felt to be supported by his discoveries. The religious person will maintain that questions of religion cannot be fully dealt with only in the psychiatric frame of reference, but require also the historical, theological, and other frames. (For a more thorough, critical review of Freud’s major explicit statements about religion, reference is made to the monograph by Philip.)

Reactions to the concept of reductionism are often voiced under the heading of “pansexualism.” The implication is that “psychoanalysis explains everything by sex.” Strictly speaking, this is not so. Furthermore, development of psychoanalytic ego psychology emphasizes other considerations in addition to the drives in comprehending behavior (see Hartmann”). If the notion of pansexualism is generously accepted in its loose usage, it should carry with it an appreciation of pregenital sexuality. The moral acceptability of this connotation is soundly argued by Parcheminey. It should be remembered, “moreover, what psychoanalysis called sexuality was by no means identical with the impulsion toward a union of the two sexes or toward

producing a pleasurable sensation in the genitals; it had far more resemblance to the all- inclusive and all-preserving Eros of Plato's Symposium" (p. 169)."

Determinism and Free Will

The almost endless debates around psychic determinism and free will arise from oversimplified, if not erroneous, conceptions of what the Church has to say regarding free will and about that which is called determinism in psychiatry. Part of the difficulty appears to have arisen out of equating free will with indeterminism. The complexity of this issue is explored by Dempsey. A study of the viewpoints of religion and psychiatry regarding these suggests that they are not wholly contradictory concepts. For example, Pope Pius XII, in discussing the effect of unconscious instinctual drives, said: "That these energies may exercise pressure upon an activity does not necessarily signify that they compel it" and their force is not to be regarded "as a kind of fatality, as a tyranny of the affectual impulse streaming forth from the subconscious and escaping completely from the control of the conscience and of the soul." From the side of psychiatry, R. P. Knight writes:

> Determinism does not say that causal factors of the past, nor even of recent past, compel a neurotic course in an individual for the rest of his life. It says merely that the individual's total makeup and probable reactions at any given moment are strictly determined by all the forces, early and late, external and internal, past and present which have played and are playing on him.

The similarities in these authoritative viewpoints allow for further investigation without rancor.

The Role of the Therapist

The absence of a concise, universally applicable description of psychotherapy is of legitimate concern to psychiatric research and training in general. This deficiency has allowed the incursion of various notions into psychiatry-religion considerations, a few of which are notable. A general fear is that some moral damage will be dealt the patient. It would be invalid to suggest that *no* "harm" (measured in psychological, social, or religious terms) could come to a patient from contact with a physician who may assume a position of great direct or indirect influence on him. All psychiatrists must always ask themselves to recognize this and to be particularly aware of differences in world view. The psychiatrist must maintain the right of inquiry, but the closer his treatment approaches indoctrination to his points of view, the farther it gets from good psychiatric treatment. (Novey has given an excellent description of an analyst's actual therapeutic approach to problems presented as connected with religion.)

Two allegations about psychotherapy are more common than others. One is that psychiatrists promote a "do as thou wilt," quasi-Rabelaisian attitude. A rejoinder of Freud's to this would probably be subscribed to by

most:

> It is out of the question that part of the analytic treatment should consist of advice to "live freely" —if for no other reason because we ourselves tell you that a stubborn conflict is going on in the patient between libidinal desires and sexual repression, between sensual and ascetic tendencies. This conflict is not resolved by helping one side to win a victory over the other, [p. 375]

A second idea, related to the first, is that psychiatrists believe all guilt to be "neurotic" in basis and therefore to be expunged, thereby leaving no inner force of conscience. There are intricate issues here which would require a separate treatise (for example, Zilboorg). This question has been dealt with in a general way by, for example, distinguishing between guilt and guilt feelings —reasonable versus excessive guilt—real guilt versus neurotic guilt. Although these efforts may not have produced the final answer, most psychiatrists would disclaim that they function as "forgivers." Yet they would maintain that their patients often present hypertrophied senses of guilt which must be dealt with in treatment. How to go about this is a technical matter depending upon the theoretical orientation and the goal of the therapy.

The Level of Pacification

> *Here is meant those interrelations which are especially characterized by the making or maintaining of "peace." There are undoubted fruits to be borne in this atmosphere, such as mutual educational activities, the promotion of treatment facilities, the organization of study groups, etc. There are also inherent hazards, since the attainment of peace may appear so desirable an end that premature*

and even false solutions of issues may be seized upon and the pursuit of further knowledge thereby hindered. Consequently, it is well briefly to examine some of the ways by which "calm" is obtained.

Dilution of Concepts

There is less likelihood of conflict with nonadherents, the less dogmatic a religion or school of psychiatric thought is. How "liberal" any group can become and still maintain its identity is a matter which its members must settle for themselves.

Denial of Conflict

Insensitivity to issues of the sort discussed earlier ensures a kind of placidity. Somewhat similarly, general statements of principles can suggest an air of agreement which disappears in practice. For example, it can be held that psychiatrists deal with the mind; the clergy, with the soul. Another position is "there can be no conflict between truths." If such statements are taken as keynotes for future endeavors, they are acceptable. It is inaccurate to view them as defining an actual state of affairs. Especially to expedite mutually agreed- upon activities, a deliberate decision to avoid conflictful issues may be made. In the early stages of study groups and colloquia, this is not uncommon.

Selective Acceptance

Concepts of religion or a school of psychiatric thought may be accepted in whole or part, based on how little they seem to threaten the concepts of the other. This can be a valid step, assuming it proceeds from optimal understanding, and especially if it does not mask a conflict of essential issues. Partnerships based on common opposition to another religious or psychiatric system should be approached cautiously.

A psychiatric theory which docs not particularly concern itself with motives can appear to leave such matters wholly to religion or its equivalent, and therefore seem "safe" to religion. A psychiatry based on a rationalistic psychology can seem more consonant with certain religions than one which includes an interest in and a certain respect for the irrational. Related to this is an antipathy for the unfamiliar in psychiatric terminology and methods of approach, which is conducive to an acceptance of schools which employ more familiar ones. Religious adherents may become greatly attracted to psychiatric writings if they specifically include religiouslike terms. Probably the best known examples of this are to be found in Jung. Recent reappraisals of Jung from the theological viewpoint support the notion that initial enthusiastic acceptance can be at least uncritical. When the interrelations between religion and psychiatry are primarily characterized by either conflict or pacification, the possibility should be borne in mind of a blurring of the boundaries between the two, or misidentification of issues.

The Level of Argument

The level of argument means that interaction whose aim is fostering the growth of knowledge. Although in certain areas of each there may be little of immediate legitimate concern to the other, a number of interests of psychiatry and religion overlap or appear to overlap. In a general but simplified sense, this overlapping is the concern for the behavior of man, his motivations, ideals, and limits, and his relations with other men. Each deals with such matters within different frames of reference— how different will depend on the psychiatric theory and religion in question. This difference in frame of reference has often led to the assumption that the concepts of the one would be either inimical or useless to the other. Consequently, there has been the tendency for either to lay exclusive claim to a particular domain and more or less to neglect what the other had to say except to engage in conflict, as previously described.

Arising from and also perpetuating such separateness has been a difference in terminology which has effectively obscured the fact that, upon study, a number of the concepts, some of the ways of formulating problems, and some of the approaches to solution are strikingly similar. The clear identification of such areas requires that the specialist be acquainted with and have a reasonably sound grasp of the pertinent considerations in the other field.

Some in religion are prepared to look to psychiatry for new approaches to a variety of problems; for example, Bishop Marling has blocked out some problems in moral theology, in hagiography, in the clarification of mystical phenomena, and in questions relating to the vocation to the religious life (see also Aumann). Modern psychiatry has not yet significantly tapped the fund of information available under the heading of "religion," about the human condition, ranging from inspirational writings about the aims of living to highly systematized doctrines about the organization of behavior. To name only one set of the latter, there is a rich store of writing concerning the virtues. Those who are prepared to become acquainted with this literature will find potentially useful data for speculative research on the adaptive functions of the ego. The utilization of such information need not be linked to acquiescence to theological belief. At the end of a paper in which he explores in more detail some of the interplay suggested here, Mailloux sounds the keynote of the level of argument: . . our knowledge of man is still fragmentary, and . . . only the joint efforts of closely related disciplines, representing widely diversified methodological approaches, can justify our hope for the attainment of a synthesis that will be satisfying to our minds and illuminating for our actions." This level is clearly the most difficult to reach. In some ways not enough is known even to formulate questions clearly. If prejudice and ignorance are overcome, psychiatry and religion can represent one of those areas where true division provides an opening to new depths of knowledge.

Appendix

Since the author's untimely demise many events have transpired, but none seem to have materially changed the problems about which he discoursed in this chapter. Presently the nations of the world are in conflict or in fear of it; our own nation is in an ugly mood and hatred and destruction are rampant. Both religion and psychoanalysis are having identity crises, and this is not the time, nor is it the overall mood, for this chapter to be rewritten with any promise of permanency. The same problems that concerned Dr. Higgins under his various subheadings are still being debated and unfortunately are still unsettled.

Just as unfortunately neither religion nor psychiatry have escaped the general unrest. Catholicism has been depleted and saddened by the desertion of some brilliant minds from its clerical ranks. Psychoanalysis is fractionated and in some places denigrated as attention is more and more being focused heavily upon sociological problems as the prime cause of illness.

Most distressing of all is a movement—its shadow presently no bigger than a man's hand —that already can be designated as antipsychiatric. Surfacing during the student uprising in France in 1968, it has received impetus from the writings of Foucault and the works of Laing and Cooper in England. Some traces of it are appearing on our own West Coast and undoubtedly it will spread. Just as surely it will eventually disappear as man's

common sense and reasonableness once again assert themselves, but meanwhile they will cause some havoc. It is wise, therefore, to let Dr. Higgins's chapter stand as it is, for he covers the essentials to which we must continually turn our attention.

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Eilhard Von Domarus[4]

The topic of psychotherapy and Oriental religions is formidable and ideally presupposes a wide knowledge of Western science and Oriental philosophy. But the task facing the West of coming to a greater understanding of the East has become imperative in this era, and, therefore, any attempt that may contribute to such understanding should be welcomed, despite the newness and challenge of some of the concepts it presents.

What do we want? What does the Orient want? What do we, with our scientific-psycho- therapeutic methods, hope to achieve? At what does the Orient, with its spiritual-meta- physical speculations, aim? Further, what is the scientific-historical method itself? What is the spiritual-metaphysical method?

The scientific method proceeds from particulars to particulars. We observe a great many wolves being predatory and we make the inductive, "universal" statement that "all wolves are predatory"; from this proposition we deduce that any particular wolf we may see thereafter is also predatory. Such a universal proposition, however, refers to particulars only—not to the experience of a totality involving wolves as components.

The spiritual method teaches that behind the world of seen particulars there is an unseen world which regulates all visible particulars. If we learn to

experience this spiritual world of impersonal, moral laws, we can know all the particulars in their significance for the total at once. Wolves are thus seen as necessary part-events of the economy of nature, of the world, and of the cosmos.

The scientific method is also historical. Darwin's discovery of the natural origin of the species (1859) and Freud's discovery of the psychosexual or psychosocial development of man (1893 and following) may be considered the climax of the scientific-historical method. By this empirical method of science and technology, man attempts to make himself master of his environment and thus feels challenged to make his environment, for his purposes, progressively better and better.

The spiritual method is little interested in particulars, or in race and individual histories. From time out of mind, the Orient believed that the world is a moral universe—a totality, a unity—following a predestined, impersonal order, that man and every creature in it has to play its role in this tragicomedy, and that the environment existed only as the stage for the never-ceasing appearance of the actors.

Thus the scientific Occident heeded almost exclusively its environment, leaving a man's emotions in a sordid, psychoneurotic condition; and the Oriental philosopher heeded his own personal moral, spiritual development,

leaving his environment in a sordid, unhealthy condition.

Both Occident and Orient started with the conviction that pain and suffering and disease, even death, were perverse phenomena of nature—they all ought not be. The Occident assumed that all suffering could be eliminated by "progress," by changing the environment of man (including his body and later also his mind) and making it favorable, so that the adjustment of man to it would be easy. The result was that man became a servant of his servants (his machines and his money) and was plagued with a feeling of meaninglessness. What started with optimism is about to end in pessimism.

The Orient assumed that suffering in nature was unavoidable. If there are differences between things, the gain of the one entailed the loss for another: when a spider joyfuly eats up a fly caught in its web, the fly is subjected to the agonies of dying. But, according to the Orient, this world is not primarily a "natural world"; it is, above all, a moral order. When a man plays his role in this world of moral tragicomedy well, he may be spared further agonies; and a man who no longer lives in delusion about himself and the world, and who uses his knowledge with compassion to become a "liberated" soul, will not be born again into this relative world (by way of reincarnation) but will have passed beyond all pain and pleasure, birth and death. Thus the Orient starts with pessimism and ends in optimism.

For the Occident, religion does not seem to be a necessity, but the scientific-historical method does. For the Orient the scientific method seemed to be of little value, but religion always was considered a practical necessity. All this is about to change. Before Freud physicians believed that organic disease may cause emotional distress; after Freud it was seen that emotional distress may cause organic disease. The subtle emotions came to be recognized as causally more important than the gross, material organs. While Freud never followed up this line of thought into metaphysics, his discovery opened up the way toward acknowledgment of the "subtle" as of paramount significance for practical living. Conversely, in the Orient a new understanding of the importance of healthy living, which alone can make a sane religion possible, gained ground in the Ramakrishna-Vivekananda movement, in which compassion is considered more important for a man's salvation than abstract knowledge of the "absolute."

If we ask ourselves what is the soil in which Occidental psychoanalysis and the Oriental's religious desire for liberation from worldly misery evolved, we find that in both cases the man of utter truthfulness—the theoretical scientist and the contemplative saint—found the solution. And the cause of disease and misery was found by both to be the unhealthy (though socially conditioned) living of the individual. The Occident came to discover the conflict arising from undue demands of a traditional superego upon a weakened ego by descriptive, empirical analysis of individual cases, using the

method of free association and scientific dream interpretation (interpreting dreams in terms of the life pattern of the individual as he had acquired it from childhood). The Orient came to discover the conflict between the desire for wealth, lust, compulsive duty and the longing for liberation by the Yoga method of concentration and meditation and metaphysically oriented dream evaluation (by which the dream state is considered as important as the waking).

In other words, the problems were the same. But the Occident used the method of free association and scientific dream interpretation (leading to the discovery of dynamic mechanisms of the unconscious), and the Orient used the mystical-religious method of meditation, including metaphysical dream evaluation (leading to the discovery of a transcendent spiritual realm).

To make these statements more explicit, we shall proceed by first discussing Hinduism and Buddhism, and then Taoism and Confucianism.

Hinduism

According to orthodox Hinduism, the aims of a man are either worldly or philosophical-religious. When a man wants to succeed in a worldly way, he may concentrate his energies on the acquisition of wealth (artha), on sensuous indulgence (kama), or on such moral living as will bring him rewards on earth or in a hereafter (dharma). These three aims of worldly

living are called together "Trivarga." If, on the other hand, after many reincarnations, after many trials and tribulations, successes and failures, and the sufferings connected with satiety, a man finally aims at liberation (moksha) from the bonds of his existence altogether, he pursues the path of "Apavarga." Let us consider first the ways of Trivarga, following fairly closely the descriptions of Heinrich Zimmer.

Trivarga

Artha (Wealth)

If a man wishes to become wealthy and powerful, he has to follow the path of Matsya-Nyaya, the path described in the Artha Sastras as the Law of the Fishes. This is the law of savage, competitive living among the creatures of the ocean, and, when pursued by men, leads to an imitation of the pitiless laws of nature, unalleviated by moral and religious scruples. Seven ways are described, known as Saman, Danda, Dana, Bheda, Maya, Upeksha, and Indra-Jala. Since for sane religious living a knowledge of the laws of irreligious living — in order to cope with them—is as important as the decision to live a religious life, these seven ways will be considered briefly, as they form the contrasting background against which the desire for religious living arose.

Saman. Saman is the show of courteous behavior intended to conceal hostility, of surface friendliness for the purpose of manipulating someone.

Danda. Danda is "bulldozing," with or without violence. Once your neighbor has been charmed, you may (yourself fully armed) attack him. It is always characterized by aggression and is a logical development from Saman. Manu, the legendary Hindu lawgiver, says: "For the increase of a kingdom, Saman and Danda are the chief aims." Nevertheless, there are auxiliary methods that are important for the "Dark Secrets of the Crooked Way" (p. 123)—or for psychoneurotic, psychopathic living.

Dana. Dana is the method of flattery and bribery, of giving gifts to one whom you like, because he is weak, and not to another whom you dislike, because he is strong.

Bheda. Bheda is the method of divide and rule, of giving gifts to the weaker, ingratiating him to you and separating him from his stronger neighbor, your enemy.

Maya. Maya is the method of external probity, of displaying moral superiority, while under its cover one follows the Law of the Fishes. Maya, which makes much use of name-calling, may also be called the method of anathematizing.

Upeksha. Here a man does not acknowledge the truth when it would inconvenience him. For example, he ignores an accident to which he is a witness because his help would entail a time-consuming court appearance.

Upeksha means that we don't follow moral demands by denying an obligation. We are like the man who wore bells on his ears and, whenever he was about to hear something disagreeable, shook his head and heard nothing but his own tune. Upeksha is the method par excellence of the fundamentalist who brooks no disturbance of his preconceived interests but rings his bells every time he hears something disagreeable.

Indra-Jala. This last way of crooked living is employed especially during wartime. It is human creativeness in the service of hatred, the unabashed deception of one's enemy by the use of dummies, spies, misleading statements, etc.

The "Seven Dark Secrets of the Crooked Way" have been described here because it is the conviction of psychotherapists, as well as of religious thinkers, that nothing can be overcome unless it is first consciously and explicitly known. They obviously correspond psychoanalytically to the description of the possessive, sadistic personality of our time that primarily makes use of the superego-ridden masochists to pursue its autocratic ends.

What is the cure for these conditions? First, individual and/or political diagnosis needs to be made; second, its etiology found; then its prognosis; and finally its therapy needs to be outlined. In ancient times the cure was hoped for in the appearance of the Cakra-Vartin, the Great World Savior, the

Universal King. He was conceived of as all-knowing, all-good, and all-powerful —but always in a worldly sense. He corresponded possibly to the Superman of Nietzsche. He embodied the collective imagery of his people in such a way that they believed that with him they might achieve the millenium, without him only disaster would overtake them. This "ideal" contrasts sharply with the ideal of the saint, who only wishes to show the right way of living in order to save himself from his own propensities toward Matsva-Nyaya living, as well as to help others to do likewise. Not different is the way of psychotherapy: the therapist tries to show the "castrating" patient that such living will destroy him, as well as the people of his environment, and that in his own interest healthy living is preferable to living according to the Law of the Fishes. Religion does not enter yet.

Kama

Ramakrishna taught that the greatest obstacles to a man's internal progress and final absolution lay with his lust and greed. In terms of modern psychotherapy that would mean that man's sufferings come primarily from sexual and economic maladjustments. The latter stem from his inherited animal propensities and his desire to continue as an animal in civilized society, following the Law of the Fishes. His sexual maladjustments are also due to this inheritance—his desire to experience sensual excitements without end and, by his early conditioning, also without end of "variation." Hindu philosophy describes the path of man's sensuous desires and their

consequences in the Kama Sutras, in which four stages are distinguished: jambha, moha, stambha, and vasa.[5]

Jambha is the opening of oneself to sensuous desires and then letting oneself be infatuated by the opposite sex. Although the immediate experience of jambha is one of being overcome, actually it is only when our nature permits us to be overcome that such infatuation will occur. If one is not sexually disposed, no such infatuation will take place. That is to say, the cause of the infatuation (contrary to common-sense experience) lies in the experiencer of the infatuation rather than in the "object" of infatuation.

Moha means confusion. Once infatuated, confusion sets in.

Stambha signifies the paralysis of the will— man's will is now stupefied by his infatuation. It imperceptibly leads on to the final stage.

Vasa. The infatuated man is now humbled, wholly subject to his desires. According to this description, the sensuality of the man himself deprives him of his will rather than the object of his infatuation.

In Hindu philosophy jambha has been compared with the flowers that are arrows, moha with a bow, stambha with the bait, and vasa with the hook that catches the fish that has taken the bait. This is an accurate description of the masochistic man who permits himself to be mistreated by a sadistic

woman—or, generally, for any "falling" in love. And for the man of philosophy any use of the will except for understanding and liberation is, in Oriental opinion, a falling away from the upward, anagogic path of religion, to pursue which is man's highest aim.

Dharma

Man's Trivarga includes the three worldly aims of wealth and possession (or artha), pleasure and sensuousness (or kama), and finally, on a higher stage of development, the fulfillment of his duty (or dharma). Hinduism asserts that every man determines his own destiny. His deeds form his character and hence have consequences for him (rather than only for others), and these "fruits" are reaped by him either in this or in a future life. Society brings to every man's attention what his duties are, what role he is expected to play in the society in which he is born, according to the merits (or demerits) of his previous incarnations. He may be born as a sudra (common man), as a vaisya (merchant, businessman), as a kshatriya (warrior, politician), or as a brahmin (philosopher, etc.). If he plays his role well in his stratum of society and follows his own dharma, he will acquire merits.

The Hindu mind had little empirical interest in psychology or sociology. The individual developing into a person dominated by artha, kama, or dharma did so because the metaphysically determined wheel of existence made a man what he found himself to be, although as a result of his former actions (which,

in turn, appear to be metaphysically determined). The primary interest was in the transcendent, which for the nonphilosophical person remains forever unconscious. For many purposes transcendent means unconscious (or subconscious), but the transcendent is conceived as the metaphysical supraindividuality, whereas the unconscious (or subconscious) is the realm of obscure psychological motivation.

The importance of metaphysics, the science of the unfathomable, for psychology is re-emerging, as is indicated by the increasing interest of psychotherapists in religion. Likewise, the recognition of the importance of the subconscious psychology for mysticism is lucidly expressed by Vivekananda (1863-1902):

> Psychology is the science of science. ... To control the mind you must go deep down into the subconscious mind, classify and arrange in order all the different impressions, thoughts, etc., stored up there, and control them. This is the first step. By the control of the subconscious mind you get control of the conscious.

It is indeed true that psychoanalysis is the best way ever devised to get to know the intimate workings of one's mind—by "archeologically" exploring its development through different infantile stages to maturity as reactions to the parental environment. Thus infantile sucking, biting, anal, phallic, latency, and pubertal phases are shown to exist in each individual. This psychosexual (or, better, psychosocial) development, if left to develop relatively

undisturbed by understanding parents, leads to (genital) maturity with the development of a societally determined superego, whereas, when disturbed, it leads to sadomasochism, etc. The latter stages obviously correspond to the man living in terms of artha and kama rather than a healthy dharma.

Is living by dharma, then, the end-all of human development? The answer of Oriental religion is No. It says that man's mind develops still further —not owing to its own laws, but as enlarged and purified by love, compassion, and the voice of conscience. Here is the parting of the ways of orthodox psychoanalysis and metaphysically oriented psychotherapy. We are confronted with the age-old question: on what do ultimate, eschatological truths depend? Do they depend on our "psychology" or does our psychology depend on them?

Apavarga (moksha)

The role of an individual in Hindu society depends on the position or caste in which he is born, which, in turn, is dependent upon his deeds in previous incarnations. What caste he is born into will largely determine the "superego" that he acquires. If he is no longer born as a common man but in one of the three castes, he will ordinarily fulfill his dharma first as a student (brahmacharya), a householder (garhasthya), a retired forest dweller (vana-prastha), and God-realized hermit (sannyas). Here in the liberated sannya we

see definitely emerge man's ultimate goal on earth, his Apavarga.

When discussing the laws of Trivarga, we were considering the ways by which a man might adjust himself to his environment. But the religious mind does not rest here. As a matter of fact, even in the earliest times, ultimate, so-called eschatological questions preoccupied the writers of the Vedic hymns, not to speak of the philosophical parts of the sacred writings. The *Svetasvatara Upanishad,* for example, asks the following questions:

> Whence are we born? Whereby do we live? Whither do we go? Oh ye who know Brahman [the Impersonal Reality], tell us at whose command do we abide here, whether in pain or in pleasure. Should time or nature or necessity or chance or the elements be considered as the cause, or He who is called Purusha, the Man, the Supreme Spirit?

According to the existentialists, modern man suffers from a sense of meaninglessness. In the midst of wealth (artha) and comfort (kama) and a collective materialistic security of conformity (dharma), he finds no peace within himself, and anxiety is the most characteristic symptom of our age. Indeed, it is precisely because Western man, at the close of the Middle Ages, shelved (but had not solved) eschatological questions that he became materialistically so successful. But what does this avail if the man himself did not change? And it is precisely because he did not pay attention to his inner life that he developed into the frantic or bored "meaningless" creature of psychoneurotic anxiety.

Psychoanalysis is the empirical, historical approach to this problem. To an extent never even hoped for in previous generations, it has solved many an urgent problem and is, indeed, preparing man for a new form of living. But, among analysts, at least Freud and his followers did not tackle eschatological questions. It is here that metaphysics in general and Hindu metaphysics in particular become of increasing relevance.

The Hindu claims that the experience of a "personal ego" as an ultimate reality is the basis of all false living. It gives rise to innumerable ambitions, all eventually failing ever to be satisfied because there is no ultimate reality to this personal ego, this "I" of daily language. It is the inscrutable power of "false seeing," of the Divine Maya, that conjures up this ego, and ever afterward man is caught in the meshes of "relativity," until, by the growth of the metaphysical sense, he is allowed to discover, or rather to experience directly, the absolute "I," the Brahman, the ultimate source of all existence. And he finds that the *Ding an sich* behind his subjectivity, the Atman, is the same as the *Ding an sich* behind objectivity, the Brahman—that his real I is not the personal I of the relative world but the impersonal I of Brahman. Indeed, if we ask ourselves, "What are we intended for here?" the Hindu answer is, and has always been, "To discover our identity with the Absolute." Says Ramakrishna: ". . . One has attained Perfect Knowledge if one believes in God as sporting as man.""

It is impossible to do justice here to the metaphysical achievements of Hinduism and their bearing upon psychotherapy. Psychologically the West, with its empirical-historical approach to all problems, including those of the mind, has added to our knowledge of the mind, and psychoanalysis is the most formidable method yet discovered for the penetration of the mind's workings. But this by no means implies that psychoanalysis has substituted for the Yoga systems (the disciplines of Hinduism) and that the Yoga method of meditation and contemplation has become obsolete. Modern psychotherapy and Hinduism are not mutually exclusive alternatives but, properly understood, supplement each other.

Association and scientific dream interpretation are designed to cure man of psychoneurotic and psychotic fantasies; mediation and metaphysical world interpretation are designed to show man his role and significance in the cosmic play of things, leading to his liberation. Obviously only a healthy mind can possibly live up to the demands of such a metaphysics. If a man believes he can do without psychology, he will continue a life of self-deception; and, if he believes he can live a life without metaphysics, he will inevitably lead a life of dharma at best, or else become an autocrat living unconsciously by the Law of the Fishes. This contradicts Freudianism and orthodox analysis—just as the empirical, psychological approach to the mind will be difficult to acquire for an orthodox Hindu. Such facts, however, should not deter an earnest seeker after truth from integrating both methods into his

life and personality.

Buddhism

In contrast to Hindu metaphysics stands "religions" that teach no metaphysics, no God, no soul. These schools (atheism and Buddhism), in contrast to the orthodox Asian schools, have comparatively less instructive significance for us here, as they are more closely related to the Western agnostic way of thinking.

Generally speaking, religions either emphasize the transcendent mystery of the self or the brotherhood of man. The great appeal that Buddha's teaching had for the masses was its emphasis on the brotherhood of man, and (contrary to Western opinion) its fundamental optimism. Buddhism teaches that all is impermanent, and that there is no independent reality behind this phenomenal world of suffering. All living is suffering, an anomaly, a disease; but the cause of the disease can be known—it lies in man's desires for worldly living. These desires can be and are removed by the Eightfold Noble Path of Buddha— right views, right aspiration, right speech, right conduct, right vocation, right thoughts, right remembering of Buddha's teaching (or right mindfulness), and right contemplation.

Buddha thus lays no stress on metaphysics; he proceeds like an empirical physician, making a diagnosis of the illness, finding its etiology and

prognosis, and proceeding to therapy. Buddha's therapy leads to the extinction (or nirvana, "blowing out") of a man's worldly desires and the reabsorption of his individuality in the "wheel of woes."

Buddha lived from about 560 to 480 B.C. Buddhism attained its peak in India under King Asoka (about 274-237 B.C.) and was eliminated from Indian soil about A.D. 1250. In the meantime Buddhist monks had spread his gospel far and wide—into Ceylon, Tibet, and China, and to Japan where it gave rise to a special school known as Zen Buddhism.

What is it that makes Buddhism so appealing to the modern materialistic mind (rather than Hindu vedanta)? The interest possibly lies even more in its doctrine of dependent origination than in its emphasis upon the brotherhood of man. In this doctrine Buddha teaches: (1) that all things are conditioned; (2) that all things are for that reason impermanent, subject to change—as all things must change when the conditions upon which they depend change; (3) that for that same reason there can be nothing permanent behind the world of phenomena—no soul in man, no God of the universe, no teachable "metaphysics" that can be positively known; and (4) that the only continuity there is, is by way of the inexorable law of the wheel of woe.

We see here, in this doctrine of dependent origination, or mutual conditioning, besides which there is nothing—no great cause, no God, no soul

—very much the attitude of the scientist of today who also says, “That being so, this is so; when that ceases to be, this ceases to be; when that comes to be, this comes to be; and there is nothing besides that which I empirically know —there is no great cause, there is no permanent substance behind all this relativity.” There is no room here for speculations; it leaves man meaningless (except that he wishes to escape the wheel of misery), just as modern science leaves man meaningless. Concerning metaphysics, a modern analyst says similarly of a musician- patient: “He never tried in his search after that transcendental and supernatural secret of the Absolute and did not recognize that the great secret of the transcendental ... is that it does not exist.”

My opinion contrasts sharply with this. Being an analyst, fully cognizant of the irreplaceable value of psychotherapy for gaining a true and verifiable understanding of one’s mind, I nevertheless believe, from my own experiences, that life cannot be fully understood without metaphysics and cannot be satisfactorily lived without religion. I believe that Hinduism basically offers more to the modern, objective mind than does Buddhism.

Hinduism declares that life cannot be comprehended except as a play, an orderly divine play; that man depends not only on cosmic but also on supracosmic forces, whatever they may be called; that the world is not only relative but absolute; that man is really God manifesting himself as man. This conception of man as God-in-man (or God-as-man) sets man free to use his

ego as a representative of the universal "I," and releases his ego from the continuous sway of its own ever doubting mind (his personal consciousness); or the sway of his id (his organic consciousness), which, through greed or lust, drives him into a life of artha or kama; or the sway of the superego (his collective consciousness), which drives him into a life of compulsive duty (or dharma). There is no better way to prepare oneself to live according to such grasp of reality than psychoanalysis.

Taoism

In China two movements similar to Hinduism and Buddhism originated, and at about the same time—Taoism, founded by Lao-Tse (604-531 B.C.), and Confucianism, founded by Kung Fu-Tse (557-479 B.C.). In the following exposition we shall freely follow Edwin A. Burtt.

Tao Teh Ching is the main book of Taoism—Teh meaning virtue; and Tao, being, in fact, an untranslatable word, may be rendered as "the cosmic way" rather than the "ordinary common way" of man. The ordinary way of man is to continue his animal propensities into social conduct. Power, prestige, and possessions (Karen Horney) form his ambition, but not living with the Tao. What is the Tao? It is the metaphysical conviction that man "belongs" to the law of the universe, will come to grief if he selfishly tries to assert an anticosmic, separate existence, but will be reunited with the whole,

the Tao, if he will yield his egoism so that the whole (Tao) may be preserved. As water seeks the lowest places but maintains the highest trees, so man, following the laws of natural simplicity, will be humble and unassuming and "feed" the tree of all life by unselfish action. Obviously Lao-Tse taught in terms of his time the eventual misery of the psychoneurotic and, in contrast to this, the happiness of the Teh, the man of healthy living. He taught it in terms of a metaphysics of Tao and Teh rather than in terms of psychoanalysis and psychotherapy.

Confucianism

The second great autochthonous religion of China was founded by Kung Fu-Tse. We usually connect the name of Kung Fu-Tse, or Confucius, with ritualistic, obsessive-compulsive behavior. But Kung Fu-Tse himself was primarily religious, not moralistic. He did, however, claim that only by the discovery of moral righteousness and order would we be able to discover the cosmic order of Yang (heaven), Yin (earth), and their inseparable cooperation. In Confucianism moral life "comes first," is first to be achieved, and it is after that that we discover the morality of the universe and its order; our moral "divinity" reveals to us "God's" divinity, not vice versa. In a sense this procedure is scientific-empirical and therefore close to psychoanalysis. In psychoanalysis it is the discovery of the psychosocial development that prepares a man for finding the divine. In Confucianism it is the discovery of

the moral law that prepares a man to discover the divine "unity" of the "universe."

Here again we find that, in contrast to the restless world of the materialist, there is an emphasis upon order—not just a factual but a moral order. The two following quotations from Kung Fu-Tse show the closeness of the basic scientific attitude of Confucianism with the modern psychotherapeutic procedure:

> ... To discover a systematic order in the world depends upon the achievement of a harmonious order in oneself. ... If there is integrity within, a unified cosmos is discoverable without; if the moral harmony of a mature personality is in the process of realization within, one finds himself part of a universe in which all things are moving toward the goal of full growth and development.

Here we find the gist of a metaphysically oriented psychotherapy and a psychotherapeutically oriented religion: first discover within yourself the laws of health, and then you will be able to live a sane life in an insane world —and you will discover that what seemed an insane world is really a world progressing toward sanity and morality, which always existed but had to be discovered by your first living a sane life yourself.

In summary, it may be said that it is impossible to do justice to the role that Oriental religion might play in complementing modern scientific endeavors. The difficulty in realizing this importance lies in acquiring enough

understanding of both approaches to combine them sensibly in one's own mind. It may be mentioned that that was also the case when the West tried to combine its religion with scientific discoveries. But the attempt to see the unity of purpose in all living may be in progress and foreshadow a new era.

From the standpoint of psychotherapeutic thinking, the question eventually will arise: is there nothing more to the human than his id, his ego, his superego, and his environment? Or do we experience an inner force, transcendental to all this, that, though we remain unconscious of it most of the time, makes itself known at certain times as the voice of conscience and (not to be confused with the demands of the superego) reveals what role we should assume in a situation otherwise seemingly insoluble? Western religious thinkers are now again trying to develop a religion centered on a loving ego rather than a punitive superego, but in nontranscendental terms. However valuable such attempts may be, we must ask ourselves again and again, as did the Hindu sage: "Whereby do we live? Whither do we go? At whose command do we abide here?" And the very attempt to answer these questions will lead us sooner or later to seek out what answer Oriental religion can provide and whether it will help to free us from the widespread thralldom of meaninglessness.

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Notes

[1] My italics

[2] The brilliant young author of this chapter died suddenly February 23, 1968. Only 47 years of age, he was a rare combination of a skillful psychoanalyst and a deeply spiritual man and was able to integrate his knowledge and his social concerns without jeopardizing his identity as a physician. The editors have done well to let his chapter stand as is, for no one with his particular combination of skills has yet appeared on the horizon to replace him.—Francis J. Braceland.

[3] "Religion" will generally mean, here, the body of beliefs, practices, and doctrines of the Christian tradition: by "psychiatry" will be meant especially, although not exclusively, the body of facts and theories about human behavior which have evolved primarily from the psychological treatment of mental illness. The more particular radiation of interest is from the Roman Catholic Church on the one hand and Freudian psychoanalysis on the other. This statement is not made in a restrictive sense but is simply to make explicit the influences which affect the selection of certain examples, and to some degree inevitably affect the view of the whole topic.

[4] Deceased.

[5] The above and following paragraphs have been drawn in part from Heinrich Zimmer. For a fuller description see Ref. 16.